



Financial Assistance Program Financial Counseling Service
462 Grider Street, Room 1101 Buffalo, NY 14215
Office: 716-898-5566 Fax: 716-898-4338

FAMILY SIZE	FEDERAL POVERTY LEVEL	GROSS INCOME ELIGIBILITY SCALE			
		150% or Less	151-250%	251-350%	351-400%
		Level 1	Level 2	Level 3	level 4
		Inpatient Services Patient Share			
		0%	20	50%	75%
		Outpatient Services Patient Share			
		0%	15	20%	25%
1	\$14,580	\$21,870	\$36,450	\$51,030	\$58,320
2	\$19,720	\$29,580	\$49,300	\$69,020	\$78,880
3	\$24,860	\$37,290	\$62,150	\$87,010	\$99,440
4	\$30,000	\$45,000	\$75,000	\$105,000	\$120,000
5	\$35,140	\$52,710	\$87,850	\$122,990	\$140,560
6	\$40,280	\$60,420	\$100,700	\$140,980	\$161,120
7	\$45,420	\$68,130	\$113,550	\$158,970	\$181,680
8	\$50,560	\$75,840	\$126,400	\$176,960	\$202,240
Income Guidelines Effective 4/1/23-3/31/24 Unless Modified Prior to 3/31/24					