

**Health Care Assistance  
2025**

2025	FPL Level	200%	300%	400%
Catholic Health Healthcare Assistance Guidelines				
	Family Size	Family Income Less Than		
	1	31,300	46,950	62,600
	2	42,300	63,450	84,600
	3	53,300	79,950	106,600
	4	64,300	96,450	128,600
	5	75,300	112,950	150,600
	6	86,300	129,450	172,600
	7	97,300	145,950	194,600
	8	108,300	162,450	216,600
	9	119,300	178,950	238,600
	10	130,300	195,450	260,600
	Each Additional Person add	11,000	16,500	22,000
	Discount Received	100%	90%	80%
Patient Share	0%	10%	20%	