



## Volunteer Health Care Provider Program 2021 Federal Poverty Guidelines

Family Size	Monthly
	<b>200%</b>
1	\$2,147
2	\$2,903
3	\$3,660
4	\$4,417
5	\$5,173
6	\$5,930
7	\$6,687
8	\$7,443
9	\$8,200
10	\$8,957
For each additional person over the family size of 10, add	\$757

SOURCE: Federal Register: January 19, 2021  
New Levels went into effect as of January 19, 2021

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