



Clarity Cares Financial Assistance Program – Financial Criteria

Clarity Lab Solutions offers financial assistance to patients who meet specific financial criteria. Due to regulatory limitations, patients who are recipients of government –funded programs (i.e., Medicaid, Medicare, Medicare-Advantage, TriCare) are not eligible to apply. Please refer to the specific program documentation (program for Uninsured Patients or program for Underinsured Patients) for other eligibility programs.

A separate Clarity Lab Solutions Financial Assistance Program Application is required. The financial criteria are for informational purposes only. This document does not need to be included in your application submission.

2016 Financial Criteria (HHS Poverty Guidelines x 3)

Persons in Family or Household	48 Contiguous States and DC	Alaska	Hawaii
1	\$35,640.00	\$44,520.00	\$41,010.00
2	\$48,060.00	\$60,060.00	\$55,290.00
3	\$60,480.00	\$75,600.00	\$69,570.00
4	\$72,900.00	\$91,140.00	\$83,850.00
5	\$72,900.00	\$91,140.00	\$83,850.00
6	\$97,740.00	\$106,680.00	\$98,130.00
7	\$110,190.00	\$137,760.00	\$126,690.00
8	\$122,670.00	\$153,360.00	\$141,030.00
for each additional person, add	\$12,480.00	\$15,600.00	\$14,340.00

Note: The Financial Criteria above are based upon the United States Department of Health and Human Services (HHS) Poverty Guidelines multiplied time 3 (three), which are subject to change. Clarity Lab Solutions reserves the right to terminate or modify its Financial Assistance Program at any time.

Better Service - Better Patient Outcomes

Clarity Lab Solutions