



## Alabama Breast and Cervical Cancer Early Detection Program

### 2017 Income Eligibility Guidelines

(Effective February 1, 2017, until revised)

At or below 250% of the Federal Poverty Level determines program eligibility.

| <u>Household Size</u> | <u>Annual</u> | <u>Monthly *</u> |
|-----------------------|---------------|------------------|
| 1                     | \$30,150      | \$2,513          |
| 2                     | \$40,600      | \$3,383          |
| 3                     | \$51,050      | \$4,254          |
| 4                     | \$61,500      | \$5,125          |
| 5                     | \$71,950      | \$5,996          |
| 6                     | \$82,400      | \$6,867          |
| 7                     | \$92,850      | \$7,738          |
| 8                     | \$103,300     | \$8,608          |

Each additional household member add \$10,450 annual or \$871 monthly.

\*Based on DHHS Poverty Guidelines issued 1/2017.