

GREENE COUNTY GENERAL HOSPITAL
Financial Aid Guidelines
2025

Number in Family	Discount 100%	Discount 90%	Discount 80%	Discount 70%	Discount 60%	Discount 50%	Discount 40%	Discount 30%	Discount 20%
1	15,650	17,685	19,719	21,754	23,632	25,510	27,701	29,422	31,300
2	21,150	23,900	26,649	29,399	31,937	34,475	37,436	39,762	42,300
3	26,650	30,115	33,579	37,044	40,242	43,440	47,171	50,102	53,300
4	32,150	36,330	40,509	44,689	48,547	52,405	56,906	60,442	64,300
5	37,650	42,545	47,439	52,334	56,852	61,370	66,641	70,782	75,300
6	43,150	48,760	54,369	59,979	65,157	70,335	76,376	81,122	86,300
7	48,650	54,975	61,299	67,624	73,462	79,300	86,111	91,462	97,300
8	54,150	61,190	68,229	75,269	81,767	88,265	95,846	101,802	108,300

For families / households with more than 8 persons, add \$5,500 for each additional person

Data Source: HHS 2025 Poverty Guidelines
<https://aspe.hhs.gov/poverty-guidelines>
 48 Contiguous States and the District of Columbia