Volunteer Health Care Provider Program 2024 Federal Poverty Guidelines							
48 Contiguous States and D.C.							
	300%	300%	200%	150%	125%	100%	
	Poverty	Monthly	Monthly	Monthly	Monthly	Monthly	
Family	Annual	Income	Income	Income	Income	Income	
Size	Threshold						
1	\$45,180	\$3,765	\$2,510	\$1,883	\$1,569	\$1,255	
2	\$61,320	\$5,110	\$3,407	\$2,555	\$2,129	\$1,703	
3	\$77,460	\$6,455	\$4,303	\$3,228	\$2,690	\$2,151	
4	\$93,600	\$7,800	\$5,200	\$3,900	\$3,250	\$2,600	
5	\$109,740	\$9,145	\$6,097	\$4,573	\$3,810	\$3,048	
6	\$125,880	\$10,490	\$6,993	\$5,245	\$4,371	\$3,496	
7	\$142,020	\$11,835	\$7,890	\$5,918	\$4,931	\$3,945	
8	\$158,160	\$13,180	\$8,787	\$6,590	\$5,492	\$4,393	
For each additional person							
add:	\$16,140	\$1,345	\$897	\$672	\$560	\$448	
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SOURCE: Federal Register: January 24, 2024	
Compiled by Chris Gainous	
Volunteer Health Services	
Florida Department of Health	
	2024