## Myriad financial assistance criteria

Myriad offers financial assistance to patients who meet specific financial and medical criteria. Due to regulatory limitations, patients who are recipients of government-funded programs (e.g., 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 requirements.

A separate Myriad Assistance Program Application is required. The financial criteria below are for informational purposes only. This document does not need to be included with your application submission.

## **2023 Financial Criteria (HHS Poverty Guidelines)**

## Patient responsibility amount

Patients with a household income up to the amounts shown below who meet all other eligibility requirements will have a **maximum** out-of-pocket responsibility of the **amount shown at the <u>top</u> of the column.** 

	1x poverty \$0	2x poverty \$0	3x poverty \$100	4x poverty \$249
Family Size 1				
48 Contiguous States and D. C.	\$14,580	\$29,160	\$43,740	\$58,320
Alaska	\$18,210	\$36,420	\$54,630	\$72,840
Hawaii	\$16,770	\$33,540	\$50,310	\$67,080
Family Size 2				
48 Contiguous States and D. C.	\$19,720	\$39,440	\$59,160	\$78,880
Alaska	\$24,640	\$49,280	\$73,920	\$98,560
Hawaii	\$22,680	\$45,360	\$68,040	\$90,720
Family Size 3				
48 Contiguous States and D. C.	\$24,860	\$49,720	\$74,580	\$99,440
Alaska	\$31,070	\$62,140	\$93,210	\$124,280
Hawaii	\$28,590	\$57,180	\$85,770	\$114,360
Family Size 4				
48 Contiguous States and D. C.	\$30,000	\$60,000	\$90,000	\$120,000
Alaska	\$37,500	\$75,000	\$112,500	\$150,000
Hawaii	\$34,500	\$69,000	\$103,500	\$138,000

<sup>\*</sup>Patients with some types of Medicaid plans, including patients with limited state-funded plans, e.g., emergency only coverage, or Medicaid in states that do not have coverage for Myriad testing, are eligible for MFAP; contact Myriad for details about your specific plan type.



Family Size 5				
48 Contiguous States and D. C.	\$35,140	\$70,280	\$105,420	\$140,560
Alaska	\$43,930	\$87,860	\$131,790	\$175,720
Hawaii	\$40,410	\$80,820	\$121,230	\$161,640
Family Size 6				
48 Contiguous States and D. C.	\$40,280	\$80,560	\$120,840	\$161,120
Alaska	\$50,360	\$100,720	\$151,080	\$201,440
Hawaii	\$46,320	\$92,640	\$138,960	\$185,280
Family Size 7				
48 Contiguous States and D. C.	\$45,420	\$90,840	\$136,260	\$181,680
Alaska	\$56,790	\$113,580	\$170,370	\$227,160
Hawaii	\$52,230	\$104,460	\$156,690	\$208,920
Family Size 8				
48 Contiguous States and D. C.	\$50,560	\$101,120	\$151,680	\$202,240
Alaska	\$63,220	\$126,440	\$189,660	\$252,880
Hawaii	\$58,140	\$116,280	\$174,420	\$232,560
For each additional person add:				
48 Contiguous States and D. C.	\$5,140	\$10,280	\$15,420	\$20,560
Alaska	\$6,430	\$12,860	\$19,290	\$25,720
Hawaii	\$5,910	\$11,820	\$17,730	\$23,640

NOTE: The Financial Criteria above are based upon the United States Department of Health & Human Services (HHS) Poverty Guidelines, which are subject to change. Myriad reserves the right to terminate or modify its Financial Assistance Program at any time.

## **Effective February 2023**

