



**FY 2019 Cancer State Aid (CSA)
Poverty Income Guideline**
Effective July 1, 2018 through June 30, 2019

Chart lists 250% of the Federal Poverty Limit as used to by CSA

HHS Poverty Guidelines x 250%		
Persons in Family	Monthly Income	Annual Income
1	\$2,529	\$30,350
2	\$3,429	\$41,150
3	\$4,329	\$51,950
4	\$5,229	\$62,750
5	\$6,129	\$73,550
6	\$7,029	\$84,350
7	\$7,929	\$95,150
8	\$8,829	\$105,950

For families/households with more than 8 persons, add \$4,320 to the annual income for each additional family member, then divide by 12 to obtain the monthly income limit.

Source: Federal Register, *Annual Update of the HHS Poverty Guidelines*, January 18, 2018, <https://www.federalregister.gov/documents/2018/01/18/2018-00814/annual-update-of-the-hhs-poverty-guidelines>

Contact Cancer State Aid at **404-463-5111** or visit our website at <https://dph.georgia.gov/cancer-aid> for additional information.