

**SC - BREAST & CERVICAL CANCER EARLY DETECTION PROGRAM
 BEST CHANCE NETWORK
 INCOME ELIGIBILITY GUIDELINES
 FOR THE PERIOD OF 06/30/22 –06/29/23**

FAMILY SIZE	SCALE \leq250% PATIENT PAYS 0% Annual Income
1	\$33,975 or less
2	\$45,775 or less
3	\$57,575 or less
4	\$69,375 or less
5	\$81,175 or less
6	\$92,975 or less
7	\$104,775 or less
8	\$116,575 or less
<p>NOTE: For families/households with more than 8 persons, add \$11,800 for each additional person.</p>	

The family size and income should be reviewed with the patient annually and documented on the BCN enrollment form.

Source: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, HHS Poverty Guidelines for 2022, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>