



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.

2020 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 TOP OF THE COLUMN				
	1X Poverty: \$0	2X Poverty: \$0	3X Poverty: \$100	4X Poverty: \$295
FAMILY SIZE = 1				
48 Contiguous States and D.C.	\$12,760	\$25,520	\$38,280	\$51,040
Alaska	\$15,950	\$31,900	\$47,850	\$63,800
Hawaii	\$14,680	\$29,360	\$44,040	\$58,720
FAMILY SIZE = 2				
48 Contiguous States and D.C.	\$17,240	\$34,480	\$51,720	\$68,960
Alaska	\$21,550	\$43,100	\$64,650	\$86,200
Hawaii	\$19,830	\$39,660	\$59,490	\$79,320
FAMILY SIZE = 3				
48 Contiguous States and D.C.	\$21,720	43,440	\$65,160	\$86,880
Alaska	\$27,150	\$54,300	\$81,450	\$108,600
Hawaii	\$24,980	\$49,960	\$74,940	\$99,920
FAMILY SIZE = 4				
48 Contiguous States and D.C.	\$26,200	\$52,400	\$78,600	\$104,800
Alaska	\$32,750	\$65,500	\$98,250	\$131,000
Hawaii	\$30,130	\$60,240	\$90,360	\$120,520

* 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.

	1X Poverty: \$0	2X Poverty: \$0	3X Poverty: \$100	4X Poverty: \$295
FAMILY SIZE = 5				
48 Contiguous States and D.C.	\$30,680	\$61,360	\$92,040	\$122,720
Alaska	\$38,350	\$76,700	\$115,050	\$153,400
Hawaii	\$35,280	\$70,560	\$105,840	\$141,120
FAMILY SIZE = 6				
48 Contiguous States and D.C.	\$35,160	\$70,320	\$105,480	\$140,640
Alaska	\$43,950	\$87,900	\$131,850	\$175,800
Hawaii	\$40,430	\$80,860	\$121,290	\$161,720
FAMILY SIZE = 7				
48 Contiguous States and D.C.	\$39,640	\$79,280	\$118,920	\$158,560
Alaska	\$49,550	\$99,100	\$148,650	\$198,200
Hawaii	\$45,580	\$91,160	\$136,740	\$182,320
FAMILY SIZE = 8				
48 Contiguous States and D.C.	\$44,120	\$88,240	\$132,360	\$176,480
Alaska	\$55,150	\$110,300	\$165,450	\$220,600
Hawaii	\$50,730	\$101,460	\$152,190	\$202,920
FOR EACH ADDITIONAL PERSON ADD				
48 Contiguous States and D.C.	\$4,480	\$8,960	\$13,440	\$17,920
Alaska	\$5,600	\$11,200	\$16,800	\$22,400
Hawaii	\$5,150	\$10,300	\$15,450	\$20,600

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.

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- Effective May 2020 -

