

Annual Income Thresholds by Sliding Fee Discount Pay Class a						
Poverty Level	At or Below 100%	>100% <125%	>126% <150%	>151% <175%	>175% <200%	Above 200%
DISCOUNT ELIGIBLE FOR		80%	60%	40%	20%	0%
PATIENT PAYS						
Family Size	Nominal Fee (\$25)	20% of Charges	40% of Charges	60% of Charges	80% of Charges	100% of Charges
1	\$0- \$12,490	\$12,491 \$ 15,613	\$15,614 \$ 18,735	\$18,736 \$ 21,858	\$21,859 \$ 24,980	\$24,981
2	\$0- \$16,910	\$16,911 \$ 21,138	\$21,139 \$ 25,365	\$25,366 \$ 29,593	\$29,594 \$ 33,820	\$33,821
3	\$0- \$21,330	\$21,331 \$ 26,663	\$26,664 \$ 31,995	\$31,996 \$ 37,328	\$37,329 \$ 42,660	\$42,661
4	\$0- \$25,750	\$25,751 \$ 32,188	\$32,189 \$ 38,625	\$38,626 \$ 45,063	\$45,064 \$ 51,500	\$51,501
5	\$0- \$30,170	\$30,171 \$ 37,713	\$37,714 \$ 45,255	\$45,256 \$ 52,798	\$52,799 \$ 60,340	\$60,341
6	\$0- \$34,590	\$34,591 \$ 43,238	\$43,239 \$ 51,885	\$51,886 \$ 60,533	\$60,534 \$ 69,180	\$69,181
7	\$0- \$39,010	\$39,011 \$ 48,763	\$48,764 \$ 58,515	\$58,516 \$ 68,268	\$68,269 \$ 78,020	\$78,021
8	\$0- \$43,430	\$43,431 \$ 54,288	\$54,289 \$ 65,145	\$65,146 \$ 76,003	\$76,004 \$ 86,860	\$86,861
For each additional person [add]	\$4,420	\$5,525	\$6,630	\$7,735	\$8,840	\$8,840

Monthly Income Thresholds by Sliding Fee Discount Pay Class and Perc						
Poverty Level	At or Below 100%	>100% <125%	>126% <150%	>151% <175%	>175% <200%	Above 200%
DISCOUNT ELIGIBLE FOR		80%	60%	40%	20%	0%
PATIENT PAYS						
Family Size	Nominal Fee (\$25)	20% of Charges	40% of Charges	60% of Charges	80% of Charges	100% of Charges
1	\$0- \$1,041	\$ 1,041 \$ 1,301	\$ 1,301 \$ 1,561	\$ 1,561 \$ 1,822	\$ 1,822 \$ 2,082	\$ 2,082 \$ -
2	\$0- \$1,409	\$ 1,409 \$ 1,762	\$ 1,762 \$ 2,114	\$ 2,114 \$ 2,466	\$ 2,466 \$ 2,818	\$ 2,818 \$ -
3	\$0- \$1,778	\$ 1,778 \$ 2,222	\$ 2,222 \$ 2,666	\$ 2,666 \$ 3,111	\$ 3,111 \$ 3,555	\$ 3,555 \$ -
4	\$0- \$2,146	\$ 2,146 \$ 2,682	\$ 2,682 \$ 3,219	\$ 3,219 \$ 3,755	\$ 3,755 \$ 4,292	\$ 4,292 \$ -
5	\$0- \$2,514	\$ 2,514 \$ 3,143	\$ 3,143 \$ 3,771	\$ 3,771 \$ 4,400	\$ 4,400 \$ 5,028	\$ 5,028 \$ -
6	\$0- \$2,883	\$ 2,883 \$ 3,603	\$ 3,603 \$ 4,324	\$ 4,324 \$ 5,044	\$ 5,044 \$ 5,765	\$ 5,765 \$ -
7	\$0- \$3,251	\$ 3,251 \$ 4,064	\$ 4,064 \$ 4,876	\$ 4,876 \$ 5,689	\$ 5,689 \$ 6,502	\$ 6,502 \$ -
8	\$0- \$3,619	\$ 3,619 \$ 4,524	\$ 4,524 \$ 5,429	\$ 5,429 \$ 6,334	\$ 6,334 \$ 7,238	\$ 7,238 \$ -
For each additional person [add]	\$368	\$ 460	\$ 553	\$ 645	\$ 737	\$ 737

*Based on [2019 Federal Poverty Guidelines](#) for the 48 contiguous states and the District of Columbia.
 PatientPays=