

Hospital sliding fee schedule January 2026				
Annual Income Thresholds by Percent of Poverty Level				
% of annual family income to Federal Poverty Level	At or Below 200% of FPL would receive 100% discount	201% of FPL would receive 75 % discount	301% of FPL would receive 50 % discount	401% of FPL not eligible
Size of Family	Patient pays 0%	Patient pays 25%	Patient pays 50%	Patient pays 100%
1 Person:	\$31,920.00	\$47,880.00	\$63,840.00	Greater than \$63,840.00
2 People:	\$43,280.00	\$64,920.00	\$86,560.00	Greater than \$86,560.00
3 People:	\$54,640.00	\$81,960.00	\$109,280.00	Greater than \$109,280.00
4 People:	\$66,000.00	\$99,000.00	\$132,000.00	Greater than \$132,000.00
5 People:	\$77,360.00	\$116,040.00	\$154,720.00	Greater than \$154,720.00
6 People:	\$88,720.00	\$133,080.00	\$177,440.00	Greater than \$177,440.00
7 People:	\$100,080.00	\$150,120.00	\$200,160.00	Greater than \$200,160.00
8 People:	\$111,440.00	\$167,160.00	\$222,880.00	Greater than \$222,880.00
Each Additional add \$5,680				