Annual Income for Financial Assistance (Medical)

February 1, 2018 - January 31, 2019

			Category A					Category B					Category C					Ca	tegory D	Full Fee			
Medical	Family	\$25.00 nominal fee					or \$35.00 sliding fee					or \$45.00 sliding fee					or \$55.00 sliding fee					100% of charges	
	Size	Monthly								Monthly		Monthly			I '				onthly				
		100%				Income	e 138		138%	Income			150%			me	200%			Income			
	1	0	-	12,140	\$	1,012	12,141	-	16,753	\$	1,396	16,754	-	18,210	<mark>\$ 1</mark> ,	<mark>518</mark>	18,211	-	24,280	\$	2,023	Greater than	24,280
	2	0	-	16,460	\$	1,372	16,461	-	22,715	\$	1,893	22,716	•	24,690	<mark>\$</mark> 2,	058	24,691	-	32,920	\$	2,743	Greater than	32,920
	3	0	-	20,780	\$	1,732	20,781	-	28,676	\$	2,390	28,677	-	31,170	<mark>\$</mark> 2,	598	31,171	-	41,560	\$	3,463	Greater than	41,560
	4	0	-	25,100	\$	2,092	25,101	-	34,638	\$	2,887	34,639	•	37,650	<mark>\$</mark> 3,	138	37,651	-	50,200	\$	4,183	Greater than	50,200
	5	0	-	29,420	\$	2,452	29,421	-	40,600	\$	3,383	40,601	•	44,130	<mark>\$</mark> 3,	678	44,131	-	58,840	\$	4,903	Greater than	58,840
	6	0	-	33,740	\$	2,812	33,741	-	46,561	\$	3,880	46,562	-	50,610	\$ 4,	218	50,611	-	67,480	\$	5,623	Greater than	67,480
	7	0	-	38,060	\$	3,172	38,061	-	52,523	\$	4,377	52,524	-	57,090	\$ 4,	758	57,091	-	76,120	\$	6,343	Greater than	76,120
	*8	0	-	42,380	\$	3,532	42,381	-	58,484	\$	4,874	58,485	-	63,570	<mark>\$</mark> 5,	298	63,571	-	84,760	\$	7,063	Greater than	84,760

Patient will be responsible for the cost of supplies or materials that are not "incident to" services.

*For families with more than 8 members add \$4,320 for each additional person.

Annual Income for Financial Assistance (Behavioral Health)

February 1, 2018 - January 31, 2019

Behavioral	Family	\$		tegory A nominal fe		(or \$		tegory C 00 sliding f	ee			tegory D 00 sliding fe	Full Fee 100% of charges					
Health	Size	Monthly			-				0	Monthly			J J	Monthly		Ŭ		
		100% Income				138%	Income		150% Income					200%	Income			
	1	0	-	12,140	\$ 1,012	12,141	- 16,753	\$ 1,396	16,754	-	18,210	\$ 1,518	18,211	-	24,280	\$ 2,023	Greater than	24,280
	2	0	-	16,460	\$ 1,372	16,461	- 22,715	\$ 1,893	22,716	-	24,690	\$ 2,058	24,691	-	32,920	\$ 2,743	Greater than	32,920
	3	0	-	20,780	\$ 1,732	20,781	- 28,676	\$ 2,390	28,677	-	31,170	\$ 2,598	31,171	-	41,560	\$ 3,463	Greater than	41,560
	4	0	-	25,100	\$ 2,092	25,101	- 34,638	\$ 2,887	34,639	-	37,650	\$ 3,138	37,651	-	50,200	\$ 4,183	Greater than	50,200
	5	0	-	29,420	\$ 2,452	29,421	- 40,600	\$ 3,383	40,601	-	44,130	\$ 3,678	44,131	-	58,840	\$ 4,903	Greater than	58,840
	6	0	-	33,740	\$ 2,812	33,741	- 46,561	\$ 3,880	46,562	-	50,610	\$ 4,218	50,611	-	67,480	\$ 5,623	Greater than	67,480
	7	0	-	38,060	\$ 3,172	38,061	- 52,523	\$ 4,377	52,524	-	57,090	\$ 4,758	57,091	-	76,120	\$ 6,343	Greater than	76,120
	*8	0	-	42,380	\$ 3,532	42,381	- 58,484	\$ 4,874	58,485	-	63,570	\$ 5,298	63,571	-	84,760	\$ 7,063	Greater than	84,760

Patient will be responsible for the cost of supplies or materials that are not "incident to" services.

*For families with more than 8 members add \$4,320 for each additional person.