

## Sliding Fee Scale

### Client Assistance

Family Size	Family Income <100% of FPL (Client Assistance 1) 100%	Family Income 200% of FPL (Client Assistance 2)	
		101%	200%
1	\$14,580	\$14,581	\$29,160
2	\$19,720	\$19,721	\$39,440
3	\$24,860	\$24,861	\$49,720
4	\$30,000	\$30,001	\$60,000
5	\$35,140	\$35,141	\$70,280
6	\$40,280	\$40,281	\$80,260
7	\$45,420	\$45,421	\$90,840
8	\$50,560	\$50,561	\$101,120
Each Additional family member	\$5140	\$10,280	
Outpatient Fee	\$3.00	\$24.00	
Inpatient Fee	\$8.00	\$85.00	