

**NEIGHBORHOOD HEALTH ASSOCIATION
SLIDING FEE SCHEDULE
Effective 4/1/2019**

ANNUAL						MONTHLY						TWICE-MONTHLY					
<u>HOUSEHOLD SIZE</u>	<u>MIN</u>	<u>10%</u>	<u>30%</u>	<u>50%</u>	<u>70%</u>	<u>HOUSEHOLD SIZE</u>	<u>MIN</u>	<u>10%</u>	<u>30%</u>	<u>50%</u>	<u>70%</u>	<u>HOUSEHOLD SIZE</u>	<u>MIN</u>	<u>10%</u>	<u>30%</u>	<u>50%</u>	<u>70%</u>
1	12,490	16,649	18,735	21,858	24,980	1	1,041	1,387	1,561	1,821	2,082	1	520	694	781	911	1,041
2	16,910	22,541	25,365	29,593	33,820	2	1,409	1,878	2,114	2,466	2,818	2	705	939	1,057	1,233	1,409
3	21,330	28,433	31,995	37,328	42,660	3	1,778	2,369	2,666	3,111	3,555	3	889	1,185	1,333	1,555	1,778
4	25,750	34,325	38,625	45,063	51,500	4	2,146	2,860	3,219	3,755	4,292	4	1,073	1,430	1,609	1,878	2,146
5	30,170	40,217	45,255	52,798	60,340	5	2,514	3,351	3,771	4,400	5,028	5	1,257	1,676	1,886	2,200	2,514
6	34,590	46,108	51,885	60,533	69,180	6	2,883	3,842	4,324	5,044	5,765	6	1,441	1,921	2,162	2,522	2,883
7	39,010	52,000	58,515	68,268	78,020	7	3,251	4,333	4,876	5,689	6,502	7	1,625	2,167	2,438	2,844	3,251
8	43,430	57,892	65,145	76,003	86,860	8	3,619	4,824	5,429	6,334	7,238	8	1,810	2,412	2,714	3,167	3,619

BI-WEEKLY						WEEKLY					
<u>HOUSEHOLD SIZE</u>	<u>MIN</u>	<u>10%</u>	<u>30%</u>	<u>50%</u>	<u>70%</u>	<u>HOUSEHOLD SIZE</u>	<u>MIN</u>	<u>10%</u>	<u>30%</u>	<u>50%</u>	<u>70%</u>
1	480	640	721	841	961	1	240	320	360	420	480
2	650	867	976	1,138	1,301	2	325	433	488	569	650
3	820	1,094	1,231	1,436	1,641	3	410	547	615	718	820
4	990	1,320	1,486	1,733	1,981	4	495	660	743	867	990
5	1,160	1,547	1,741	2,031	2,321	5	580	773	870	1,015	1,160
6	1,330	1,773	1,996	2,328	2,661	6	665	887	998	1,164	1,330
7	1,500	2,000	2,251	2,626	3,001	7	750	1,000	1,125	1,313	1,500
8	1,670	2,227	2,506	2,923	3,341	8	835	1,113	1,253	1,462	1,670

The amount in the column is the maximum amount of income appropriate for this level.

Example: household size is 1 Annual income is \$12,000 This is less than \$12,490 so the sliding fee would be minimum.

If the income amount exceeds that in the 70% column this person does not qualify for a sliding fee and is charged 100%.

Example: household size is 1 Annual income is \$25,000 No sliding fee is applied.

For households with more than 8 persons add \$4,420 for each additional person