

SLIDING FEE PATIENT PAYMENT (2026)																	
Service	A		B		C		D		E								
	100% or Less FPG		101% - 125% FPG		126% - 150% FPG		151% - 175% FPG		176% - 200% FPG		> 200% FPG						
Medical	\$	20.00	\$	35.00	\$	50.00	\$	65.00	\$	80.00		Charge					
Behavioral Health	\$	10.00	\$	25.00	\$	40.00	\$	55.00	\$	70.00		Charge					
Dental	\$	35.00	\$	50.00	\$	75.00	\$	90.00	\$	105.00		Charge					
FEDERAL POVRTY LEVEL (BELOW)																	
Household Size	100% or Less FPG		101% - 125% FPG		126% - 150% FPG		151% - 175% FPG		176% - 200% FPG		> 200% FPG						
1	-	-	15,960	15,961	-	19,950	19,951	-	23,940	23,941	-	27,930	27,931	-	31,920	>	31,920
2	-	-	21,640	21,641	-	27,050	27,051	-	32,460	32,461	-	37,870	37,871	-	43,280	>	43,280
3	-	-	27,320	27,321	-	34,150	34,151	-	40,980	40,981	-	47,810	47,811	-	54,640	>	54,640
4	-	-	33,000	33,001	-	41,250	41,251	-	49,500	49,501	-	57,750	57,751	-	66,000	>	66,000
5	-	-	38,680	38,681	-	48,350	48,351	-	58,020	58,021	-	67,690	67,691	-	77,360	>	77,360
6	-	-	44,360	44,361	-	55,450	55,451	-	66,540	66,541	-	77,630	77,631	-	88,720	>	88,720
7	-	-	50,040	50,041	-	62,550	62,551	-	75,060	75,061	-	87,570	87,571	-	100,080	>	100,080
8	-	-	55,720	55,721	-	69,650	69,651	-	83,580	83,581	-	97,510	97,511	-	111,440	>	111,440

* For families/households with more than 8 persons, add \$5,680 for each additional person.

SLIDING FEE PATIENT PAYMENT (2025)																	
Service	A			B			C			D			E		> 200% FPG		
	100% or Less FPG			101% - 125% FPG			126% - 150% FPG			151% - 175% FPG			176% - 200% FPG				
Medical	\$ 20.00			\$ 35.00			\$ 50.00			\$ 65.00			\$ 80.00		Charge		
Behavioral Health	\$ 10.00			\$ 25.00			\$ 40.00			\$ 55.00			\$ 70.00		Charge		
Dental	\$ 35.00			\$ 50.00			\$ 75.00			\$ 90.00			\$ 105.00		Charge		
FEDERAL POVRTY LEVEL (BELOW)																	
Household Size	100% or Less FPG			101% - 125% FPG			126% - 150% FPG			151% - 175% FPG			176% - 200% FPG		> 200% FPG		
1	-	-	15,650	15,651	-	19,563	19,564	-	23,475	23,476	-	27,388	27,389	-	31,300	>	31,300
2	-	-	21,150	21,151	-	26,438	26,439	-	31,725	31,726	-	37,013	37,014	-	42,300	>	42,300
3	-	-	26,650	26,651	-	33,313	33,314	-	39,975	39,976	-	46,638	46,639	-	53,300	>	53,300
4	-	-	32,150	32,151	-	40,188	40,189	-	48,225	48,226	-	56,263	56,264	-	64,300	>	64,300
5	-	-	37,650	37,651	-	47,063	47,064	-	56,475	56,476	-	65,888	65,889	-	75,300	>	75,300
6	-	-	43,150	43,151	-	53,938	53,939	-	64,725	64,726	-	75,513	75,514	-	86,300	>	86,300
7	-	-	48,650	48,651	-	60,813	60,814	-	72,975	72,976	-	85,138	85,139	-	97,300	>	97,300
8	-	-	54,150	54,151	-	67,688	67,689	-	81,225	81,226	-	94,763	94,764	-	108,300	>	108,300

* For families/households with more than 8 persons, add \$ 5,500 for each additional person.

SLIDING FEE PATIENT PAYMENT (2024)																	
Service	A			B			C			D			E				
	100% or Less FPG			101% - 125% FPG			126% - 150% FPG			151% - 175% FPG			176% - 200% FPG			> 200% FPG	
Medical	\$	20.00		\$	35.00		\$	50.00		\$	65.00		\$	80.00		100% of Charge	
Behavioral Health	\$	10.00		\$	25.00		\$	40.00		\$	55.00		\$	70.00		100% of Charge	
Dental	\$	35.00		\$	50.00		\$	75.00		\$	90.00		\$	105.00		100% of Charge	
FEDERAL POVRTY LEVEL (BELOW)																	
Household Size	100% or Less FPG			101% - 125% FPG			126% - 150% FPG			151% - 175% FPG			176% - 200% FPG			> 200% FPG	
1	-	-	15,060	15,061	-	18,825	18,826	-	22,590	22,591	-	26,355	26,356	-	30,120	>	30,120
2	-	-	20,440	20,441	-	25,550	25,551	-	30,660	30,661	-	35,770	35,771	-	40,880	>	40,880
3	-	-	25,821	25,822	-	32,276	32,277	-	38,732	38,733	-	45,187	45,188	-	51,642	>	51,642
4	-	-	30,000	30,001	-	37,500	37,501	-	45,000	45,001	-	52,500	52,501	-	60,000	>	60,000
5	-	-	36,580	36,581	-	45,725	45,726	-	54,870	54,871	-	64,015	64,016	-	73,160	>	73,160
6	-	-	41,960	41,961	-	52,450	52,451	-	62,940	62,941	-	73,430	73,431	-	83,920	>	83,920
7	-	-	47,340	47,341	-	59,175	59,176	-	71,010	71,011	-	82,845	82,846	-	94,680	>	94,680
8	-	-	52,720	52,721	-	65,900	65,901	-	79,080	79,081	-	92,260	92,261	-	105,440	>	105,440

* For families/households with more than 8 persons, add \$5,140 for each additional person.

SLIDING FEE PATIENT PAYMENT (2023)																	
Service	A			B			C			D			E				
	100% or Less FPG			101% - 125% FPG			126% - 150% FPG			151% - 175% FPG			176% - 200% FPG			> 200% FPG	
Medical	\$ 20.00			\$ 35.00			\$ 50.00			\$ 65.00			\$ 80.00			100% of Charge	
Behavioral Health	\$ 10.00			\$ 25.00			\$ 40.00			\$ 55.00			\$ 70.00			100% of Charge	
Dental	\$ 35.00			\$ 50.00			\$ 75.00			\$ 90.00			\$ 105.00			100% of Charge	
FEDERAL POVRTY LEVEL (BELOW)																	
	100% or Less FPG			101% - 125% FPG			126% - 150% FPG			151% - 175% FPG			176% - 200% FPG			> 200% FPG	
1	-	-	14,580	14,581	-	18,225	18,226	-	21,870	21,871	-	25,515	25,516	-	29,160	>	29,160
2	-	-	19,720	19,721	-	24,650	24,651	-	29,580	29,581	-	34,510	34,511	-	39,440	>	39,440
3	-	-	24,860	24,861	-	31,075	31,076	-	37,290	37,291	-	43,505	43,506	-	49,720	>	49,720
4	-	-	30,000	30,001	-	37,500	37,501	-	45,000	45,001	-	52,500	52,501	-	60,000	>	60,000
5	-	-	35,140	35,141	-	43,925	43,926	-	52,710	52,711	-	61,495	61,496	-	70,280	>	70,280
6	-	-	40,280	40,281	-	50,350	50,351	-	60,420	60,421	-	70,490	70,491	-	80,560	>	80,560
7	-	-	45,420	45,421	-	56,775	56,776	-	68,130	68,131	-	79,485	79,486	-	90,840	>	90,840
8	-	-	50,560	50,561	-	63,200	63,201	-	75,840	75,841	-	88,480	88,481	-	101,120	>	101,120

* For families/households with more than 8 persons, add \$5,140 for each additional person.

2023	2024	2025	2023 thru 2024 Change	2024 thru 2025 Change
14580	15060	15650	-480	-590
19720	20440	21150	-720	-710
24860	25821	26650	-961	-829
30000	30000	32150	0	-2150
35140	36580	37650	-1440	-1070
40280	41960	43150	-1680	-1190
45420	47340	48650	-1920	-1310
50560	52720	54150	-2160	-1430