COMPASSIONATE FAMILY MEDICINE

HRSA Sliding Fee Discount Schedule Based on 2022 Federal Poverty Guidelines

Annual Income Thresholds by Sliding Fee Discount Pay Class and Percent Poverty									
POVERTY LEVEL	At or Below 100%	125%	150%	175%	200%	Above 200%			

CHARGE

Family Size	Nominal Fee \$10	20% Pay	40% Pay	60% Pay	80% pay	100% Pay
1	0 - \$13,590	\$13,591- \$16,988	\$16,989- \$20,385	\$20,386- \$23,783	\$23,784- \$27,180	\$27,181 and up
2	0 - \$18,310	\$18,311- \$22,888	\$22,889- \$27,465	\$27,466- \$32,043	\$32,044- \$36,620	\$36,621 and up
3	0 - \$23,030	\$23,031- \$28,788	\$28,789- \$34,545	\$34,456- \$40,303	\$40,304- \$46,060	\$46,061 and up
4	0 - \$27,750	\$27,751- \$34,688	\$34,689- \$41,625	\$41,626- \$48,563	\$48,564- \$55,500	\$55,501 and up
5	0 - \$32,470	\$32,471- \$40,588	\$40,589- \$48,705	\$48,706- \$56,823	\$56,824- \$64,940	\$64,941 and up
6	0 - \$37,190	\$37,191- \$46,488	\$46,489- \$55,785	\$55,786- \$65,083	\$65,084- \$74,380	\$74,381 and up
7	0 - \$41,910	\$41,911- \$52,388	\$52,389- \$62,865	\$62,866- \$73,343	\$73,344- \$83,820	\$83,821 and up
8	0 - \$46,630	\$46,631- \$58,288	\$58,289- \$69,945	\$69,946- \$81,603	\$81,604- 93,260	\$93,261 and up
For each additional person, add	\$4,720	\$5,900	\$7,080	\$8,260	\$9,440	\$9,441 and up