ANN	NNUAL INCOME THRESHOLDS BY SLIDING FEE DISCOUNT PAY CLASS AND PERCENT POVERTY																							
	0% Pay				10% Pay				25% Pay				Amount Generally Billed (AGB)*** Pay					* 100% pay			**Federal Poverty Level 48 States			
Poverty Level:	225% or less				fre	om 226%	to		275%	fr	om 276%	to		325%	fr	om 326%	to		375%		376% or gre	ater		
Family Size	Adj Gross Inc				Adj Gross Inc				Adj Gross Inc				Adj Gross Inc				Adj Gross Inc							
1	\$0	-	\$	33,885	\$	33,886	-	\$	41,415	\$	41,416	-	\$	48,945	\$	48,946	-	\$	56,475	\$	56,476	plus	15,060	
2	\$0	•	\$	45,990	\$	45,991	-	\$	56,210	\$	56,211	-	\$	66,430	\$	66,431	•	\$	76,650	\$	76,651	plus	20,440	
3	\$0	•	\$	58,095	\$	58,096	-	\$	71,005	\$	71,006	1	\$	83,915	\$	83,916	-	\$	96,825	\$	96,826	plus	25,820	
4	\$0	•	\$	70,200	\$	70,201	-	\$	85,800	\$	85,801	-	\$	101,400	\$	101,401	•	\$	117,000	\$	117,001	plus	31,200	
5	\$0	•	\$	82,305	\$	82,306	-	\$	100,595	\$	100,596	1	\$	118,885	\$	118,886	-	\$	137,175	\$	137,176	plus	36,580	
6	\$0	-	\$	94,410	\$	94,411	-	\$	115,390	\$	115,391	-	\$	136,370	\$	136,371	-	\$	157,350	\$	157,351	plus	41,960	
7	\$0	-	\$	106,515	\$	106,516	-	\$	130,185	\$	130,186	-	\$	153,855	\$	153,856	-	\$	177,525	\$	177,526	plus	47,340	
8	\$0	•	\$	118,620	\$	118,621	-	\$	144,980	\$	144,981	1	\$	171,340	\$	171,341	-	\$	197,700	\$	197,701	plus	52,720	
For each additional person, add			\$	12.105	\$	12.106		\$	14.795	\$	14,796		\$	17.485	\$	17.486	_	\$	20.175	\$	20.176	plus	5,380	

^{*} Financial Assistance may be considered on a case by case basis.

^{**} Based on the 2024 Federal Poverty Guidelines (FPG) for the 48 contiguous states and the District of Columbia. Please note there are separate guidelines for Alaska and Hawaii that differ from above.

^{***} Amount Generally Billed (AGB) amount is calculated separately for each hospital facility. Please reference the facility amount under the Appendix III of the Financial Assistance - Enterprise policy