

## **Hospital Sliding Scale**

Hospital shulling ree schedule July 1st 2024					
Annual Income Thresholds by Sliding Fee Discount Pay Class and Percent Poverty					
% of annual family income to Federal Poverty Level	At or Below 100% of FPL would receive 100% discount	150% of FPL would receive 80 % discount	175% of FPL would receive 60% disount	200% of FPL would receive 40% discount	200% and above of FPL would not be eligibe for discount
Size of Family	100% discount Patient pays 0%	80% discount Patient pays 20%	60% discount Patient Pays 40%	40% discount Patient Pays 60%	Patient Pays 100%
1	\$15,060.00	\$22 <i>,</i> 590.00	\$26,355.00	\$30,120.00	30,120.00+
2	\$20,440.00	\$30,660.00	\$35,770.00	\$40,880.00	40,880.00+
3	\$25,820.00	\$38,730.00	\$45,185.00	\$51,640.00	51,640.00+
4	\$31,200.00	\$46,800.00	\$54,600.00	\$62,400.00	62,400.00+
5	\$36,580.00	\$54,870.00	\$64,015.00	\$73,160.00	73,160.00+
6	\$41,960.00	\$62,940.00	\$73,430.00	\$83,920.00	83,920.00+
7	\$47,340.00	\$71,010.00	\$82,845.00	\$94,680.00	94,680.00+
8	\$52,720.00	\$79,080.00	\$92,260.00	\$105,440.00	105,440.00+
For each additional person, add	\$5,380	\$8,070	\$9,415	\$10,760	

## Hospital sliding fee schedule July 1st 2024

Medicare rate 2024 In Patient 4,371.00 per day Out Patient 53% of charges Swing Bed 3,027.00 per day