

Annual Income Thresholds and Discount percentages <sup>1</sup>									
	Discount Percentage								
	100%		90%		80%		70%		0%
Poverty Level*									
Household Size	At or Below 100%		101% - 125%		126% - 150%		151% - 200%		Above 200%
1	\$0 - \$15,960		\$15,960 - \$19,950		\$19,950 - \$23,940		\$23,940 - \$31,920		\$31,921 +
2	\$0 - \$21,640		\$21,640 - \$27,050		\$27,050 - \$32,460		\$32,460 - \$43,280		\$43,281 +
3	\$0 - \$27,320		\$27,320 - \$34,150		\$34,150 - \$40,980		\$40,980 - \$54,640		\$54,641 +
4	\$0 - \$33,000		\$33,000 - \$41,250		\$41,250 - \$49,500		\$49,500 - \$66,000		\$66,001 +
5	\$0 - \$38,680		\$38,680 - \$48,350		\$48,350 - \$58,020		\$58,020 - \$77,360		\$77,361 +
6	\$0 - \$44,360		\$44,360 - \$55,450		\$55,450 - \$66,540		\$66,540 - \$88,720		\$88,721 +
7	\$0 - \$50,040		\$50,040 - \$62,550		\$62,550 - \$75,060		\$75,060 - \$100,080		\$100,081 +
8	\$0 - \$55,720		\$55,720 - \$69,650		\$69,650 - \$83,580		\$83,580 - \$111,440		\$111,441 +
Each additional person, add:	\$5,680		\$5,680 - \$7,100		\$7,100 - \$8,520		\$8,520 - \$11,360		\$11,361 +

*\*Based on U.S. Federal Poverty Guidelines effective 2026*

<sup>1</sup>Discount Percentages as determined on this Sliding Fee Schedule are subject to all other Terms and Conditions of the Med Center Health 501r Financial Assistance Policy: Rural Health Clinics which may be found at [medcenterhealth.org/cfr/billing-policies/financial-assistance/](http://medcenterhealth.org/cfr/billing-policies/financial-assistance/)