

DFD RUSSELL MEDICAL CENTER SLIDING FEE DISCOUNT SCALE

	Category A		Category B		Category C		Category D				
IF YOUR FAMILY SIZE IS	YOU PAY \$15 IF YOUR INCOME IS		YOU PAY \$25 IF YOUR INCOME IS		YOU PAY \$35 IF YOUR INCOME IS		YOU PAY \$45 IF YOUR INCOME IS				
	<=100%		>100%-124.99%		>=125%-149.99%		>=150%-200%				
1	\$ 13,590	or Less	\$ 13,591	-	\$ 16,987	\$ 16,988	-	\$ 20,384	\$ 20,385	-	\$ 27,180
2	\$ 18,310	or Less	\$ 18,311	-	\$ 22,887	\$ 22,888	-	\$ 27,464	\$ 27,465	-	\$ 36,620
3	\$ 23,030	or Less	\$ 23,031	-	\$ 28,787	\$ 28,788	-	\$ 34,544	\$ 34,545	-	\$ 46,060
4	\$ 27,750	or Less	\$ 27,751	-	\$ 34,687	\$ 34,688	-	\$ 41,624	\$ 41,625	-	\$ 55,500
5	\$ 32,470	or Less	\$ 32,471	-	\$ 40,587	\$ 40,588	-	\$ 48,704	\$ 48,705	-	\$ 64,940
6	\$ 37,190	or Less	\$ 37,191	-	\$ 46,487	\$ 46,488	-	\$ 55,784	\$ 55,785	-	\$ 74,380
7	\$ 41,910	or Less	\$ 41,911	-	\$ 52,387	\$ 52,388	-	\$ 62,864	\$ 62,865	-	\$ 83,820
8	\$ 46,630	or Less	\$ 46,631	-	\$ 58,287	\$ 58,288	-	\$ 69,944	\$ 69,945	-	\$ 94,298
OVER 8 FAMILY MEMBERS											
ADD \$4,540 FOR EACH MEMBER											
*Category A-C discount levels should be referred to Patient Assistance for assistance in applying for health coverage and additional available benefits.											
The above figures are the 2022 HHS Poverty guidelines published in the Federal register: January 12, 2022											
APPROVED BY THE DFD RUSSELL MEDICAL CENTER BOARD OF DIRECTORS: February 23, 2022											