

Discount Schedule Based on 2020 HHS Poverty Guidelines - Annual

	B/H		C/I		D/J		E/K		No Discount
	0-100% FPL*		101-133% FPL*		134-166% FPL*		167-200% FPL*		Over 200% FPL*
	Medical - \$30 office visit, \$50-150 procedure*		Medical - \$45 office visit, \$55-165 procedure*		Medical - \$70 office visit, \$90-270 procedure*		Medical - \$95 office visit, \$155-465 procedure*		No Discount
	Dental - \$32 routine visit, \$130-550 major services*		Dental - 25% routine services, 50% major services*		Dental - 50% routine services, 52.5% major services*		Dental - 75% routine services, 55% major services*		No Discount
Family Size	From	To	From	To	From	To	From	To	Over
1	\$0.00	\$12,760.00	\$12,760.01	\$17,098.40	\$17,098.41	\$21,309.20	\$21,309.21	\$25,520.00	\$25,520.01
2	\$0.00	\$17,240.00	\$17,240.01	\$23,101.60	\$23,101.61	\$28,790.80	\$28,790.81	\$34,480.00	\$34,480.01
3	\$0.00	\$21,720.00	\$21,720.01	\$29,104.80	\$29,104.81	\$36,272.40	\$36,272.41	\$43,440.00	\$43,440.01
4	\$0.00	\$26,200.00	\$26,200.01	\$35,108.00	\$35,108.01	\$43,754.00	\$43,754.01	\$52,400.00	\$52,400.01
5	\$0.00	\$30,680.00	\$30,680.01	\$41,111.20	\$41,111.21	\$51,235.60	\$51,235.61	\$61,360.00	\$61,360.01
6	\$0.00	\$35,160.00	\$35,160.01	\$47,114.40	\$47,114.41	\$58,717.20	\$58,717.21	\$70,320.00	\$70,320.01
7	\$0.00	\$39,640.00	\$39,640.01	\$53,117.60	\$53,117.61	\$66,198.80	\$66,198.81	\$79,280.00	\$79,280.01
8	\$0.00	\$44,120.00	\$44,120.01	\$59,120.80	\$59,120.81	\$73,680.40	\$73,680.41	\$88,240.00	\$88,240.01
For each additional person, add		\$4,480							

NOTE: THIS SCHEDULE IS BASED ON THE
POVERTY GUIDELINES AS PUBLISHED IN:

THE FEDERAL REGISTER, VOLUME 85

NO. 12, January 17, 2020
PAGE NO. 3060-3061

Approved On: 1/28/2020

Date Effective: 01/17/2020



Angela Cobel - Vice President



Robert Kraft, MD - Chief Executive Officer

* FPL - Federal Poverty Guidelines

** Complete discount schedule available upon request