

Sliding Fee Scale

Discounts for essential services provided by Hegira Health, Inc. are offered on a sliding fee scale basis adjusted for family size and income.

Maximum Annual Income Amounts for each Sliding Fee Percentage Category (except for 0% discount)

Poverty Level	100%	110%	120%	130%	140%	150%	160%	170%	180%	190%	200%	>200%
Family Size	Discount 100%	Discount 90%	Discount 80%	Discount 70%	Discount 60%	Discount 50%	Discount 40%	Discount 30%	Discount 20%	Discount 15%	Discount 10%	Discount 0%
1	\$14,580	\$16,038	\$17,496	\$18,954	\$20,412	\$21,870	\$23,328	\$24,786	\$26,244	\$27,702	\$29,160	>\$29,160
2	\$19,720	\$21,692	\$23,664	\$25,636	\$27,608	\$29,580	\$31,552	\$33,524	\$35,496	\$37,468	\$39,440	>\$39,440
3	\$24,860	\$27,346	\$29,832	\$32,318	\$34,804	\$37,290	\$39,776	\$42,262	\$44,748	\$47,234	\$49,720	>\$49,720
4	\$30,000	\$33,000	\$36,000	\$39,000	\$42,000	\$45,000	\$48,000	\$51,000	\$54,000	\$57,000	\$60,000	>\$60,000
5	\$35,140	\$38,654	\$42,168	\$45,682	\$49,196	\$52,710	\$56,224	\$59,738	\$63,252	\$66,766	\$70,280	>\$70,280
6	\$40,280	\$44,308	\$48,336	\$52,364	\$56,392	\$60,420	\$64,448	\$68,476	\$72,504	\$76,532	\$80,560	>\$80,560
7	\$45,420	\$49,962	\$54,504	\$59,046	\$63,588	\$68,130	\$72,672	\$77,214	\$81,756	\$86,298	\$90,840	>\$90,840
8	\$50,560	\$55,616	\$60,672	\$65,728	\$70,784	\$75,840	\$80,896	\$85,952	\$91,008	\$96,064	\$101,120	>\$101,120
For each additional person, add	\$5,140	\$5,654	\$6,168	\$6,682	\$7,196	\$7,710	\$8,224	\$8,738	\$9,252	\$9,766	\$10,280	>\$10,280