

**2020 Poverty Guidelines with Children's Sliding Fee Scale**

% OF FEDERAL POVERTY LEVEL (FPL)		Insured - up to 350% FPL	uninsured up to 275% FPL	uninsured up to 350%
		<b>350%</b>	<b>275%</b>	<b>350%</b>
<b>Discount</b>	FPL	<b>30%</b>	<b>100%</b>	<b>Community Clinic AGB 42% Hospital AGB 51%</b>
<b>Family Size</b>				
1	\$12,760	\$44,660	\$35,090	\$44,660
<b>Monthly</b>		<b>\$3,722</b>	<b>\$2,924</b>	<b>\$3,722</b>
2	17,240	\$60,340	\$47,410	\$60,340
<b>Monthly</b>		<b>\$5,028</b>	<b>\$3,951</b>	<b>\$5,028</b>
3	21,720	\$76,020	\$59,730	\$76,020
<b>Monthly</b>		<b>\$6,335</b>	<b>\$4,978</b>	<b>\$6,335</b>
4	26,200	\$91,700	\$72,050	\$91,700
<b>Monthly</b>		<b>\$7,642</b>	<b>\$6,004</b>	<b>\$7,642</b>
5	30,680	\$107,380	\$84,370	\$107,380
<b>Monthly</b>		<b>\$8,948</b>	<b>\$7,031</b>	<b>\$8,948</b>
6	35,160	\$123,060	\$96,690	\$123,060
<b>Monthly</b>		<b>\$10,255</b>	<b>\$8,058</b>	<b>\$10,255</b>
7	39,640	\$138,740	\$109,010	\$138,740
<b>Monthly</b>		<b>\$11,562</b>	<b>\$9,084</b>	<b>\$10,713</b>
8	44,120	\$154,420	\$121,330	\$154,420
<b>Monthly</b>		<b>\$12,868</b>	<b>\$10,111</b>	<b>\$12,868</b>
9	48,600	\$170,100	\$133,650	\$170,100
<b>Monthly</b>		<b>\$13,140</b>	<b>\$11,138</b>	<b>\$13,140</b>
10	53,080	\$185,780	\$145,970	\$185,780
<b>Monthly</b>		<b>\$15,482</b>	<b>\$12,164</b>	<b>\$15,482</b>
11	57,560	\$201,460	\$158,290	\$201,460
<b>Monthly</b>		<b>\$16,788</b>	<b>\$13,191</b>	<b>\$16,788</b>

Based on the Federal Poverty Guidelines, updated 1/17/2020

AGB (Amounts Generally Billed) updated per IRS guidelines based on 2019 paid claims using data thru 6/30/2020

Master Grid last updated 7/24/2020 with revised AGB percentages

Family size is determined by the number of people listed on the family's most recent income tax form.

AGB = amounts generally billed