

Aspire Indiana Health, Inc.

Sliding Fee Discount Schedule* 2022

MEDICAL AND BEHAVIORAL HEALTH - FQHC

ANNUAL INCOME

Number in Household	Income Measure	<u>Plan 1</u>		<u>Plan 2</u>		<u>Plan 3</u>		<u>Plan 4</u>		<u>Plan 5</u>	
		0-100%		101-150%		151-185%		186-200%		> 200%	
1	Annual	\$0	- \$13,590	\$13,591	- \$20,385	\$20,386	- \$25,142	\$25,143	- \$27,180	over	\$27,180
2	Annual	\$0	- \$18,310	\$18,311	- \$27,465	\$27,466	- \$33,874	\$33,875	- \$36,620	over	\$36,620
3	Annual	\$0	- \$23,030	\$23,031	- \$34,545	\$34,546	- \$42,606	\$42,607	- \$46,060	over	\$46,060
4	Annual	\$0	- \$27,750	\$27,751	- \$41,625	\$41,626	- \$51,338	\$51,339	- \$55,500	over	\$55,500
5	Annual	\$0	- \$32,470	\$32,471	- \$48,705	\$48,706	- \$60,070	\$60,071	- \$64,940	over	\$64,940
6	Annual	\$0	- \$37,190	\$37,191	- \$55,785	\$55,786	- \$68,802	\$68,803	- \$74,380	over	\$74,380
7	Annual	\$0	- \$41,910	\$41,911	- \$62,865	\$62,866	- \$77,534	\$77,535	- \$83,820	over	\$83,820
8	Annual	\$0	- \$46,630	\$46,631	- \$69,945	\$69,946	- \$86,266	\$86,267	- \$93,260	over	\$93,260
each additional family member over 8			\$4,540		\$6,810		\$8,399		\$9,080	over	\$9,080
% of Federal Poverty Income Guidelines		< = 100%		101-150%		151-185%		186-200%		> 200%	
Point of Service Fee		\$10/service		\$35/service		\$45/service		\$55/service		full fee	
Group Services		\$10/service		\$15/service		\$20/service		\$25/service		full fee	

**Individuals will not be denied services based on ability to pay*

*Based upon 2022 FPL