



*The Care You Count On*

100 Pioneers Medical Center Drive– Meeker, CO 81641

Sliding Fee Plan– 2018																		
Family Size	Financial Assistance Class A (\$5 copay) 100% of Poverty Level			Financial Assistance Class B (10% copay) 90% discount 125% of Poverty Level			Financial Assistance Class C (15% copay) 85% discount 150% of Poverty Level			Financial Assistance Class D (20% copay) 80% discount 175% of Poverty Level			Financial Assistance Class E (25% copay) 75% discount 200% of Poverty Level			Financial Assistance Class F (30% copay) 70% discount 250% of Poverty Level		
1	\$0.00	-	\$12,140.00	\$12,140.01	-	\$15,175.00	\$15,175.01	-	\$18,210.00	\$18,210.01	-	\$21,245.00	\$21,245.01	-	\$24,280.00	\$24,280.01	-	\$30,350.00
2	\$0.00	-	\$16,460.00	\$16,460.01	-	\$20,575.00	\$20,575.01	-	\$24,690.00	\$24,690.01	-	\$28,805.00	\$28,805.01	-	\$32,920.00	\$32,920.01	-	\$41,150.00
3	\$0.00	-	\$20,780.00	\$20,780.01	-	\$25,975.00	\$25,975.01	-	\$31,170.00	\$31,170.01	-	\$36,365.00	\$36,365.01	-	\$41,560.00	\$41,560.01	-	\$51,950.00
4	\$0.00	-	\$25,100.00	\$25,100.01	-	\$31,375.00	\$31,375.01	-	\$37,650.00	\$37,650.01	-	\$43,925.00	\$43,925.01	-	\$50,200.00	\$50,200.01	-	\$62,750.00
5	\$0.00	-	\$29,420.00	\$29,420.01	-	\$36,775.00	\$36,775.01	-	\$44,130.00	\$44,130.01	-	\$51,485.00	\$51,485.01	-	\$58,840.00	\$58,840.01	-	\$73,550.00
6	\$0.00	-	\$33,740.00	\$33,740.01	-	\$42,175.00	\$42,175.01	-	\$50,610.00	\$50,610.01	-	\$59,045.00	\$59,045.01	-	\$67,480.00	\$67,480.01	-	\$84,350.00
7	\$0.00	-	\$38,060.00	\$38,060.01	-	\$47,575.00	\$47,575.01	-	\$59,090.00	\$57,090.01	-	\$66,605.00	\$66,605.01	-	\$76,120.00	\$76,120.01	-	\$95,150.00
8	\$0.00	-	\$42,380.00	\$42,380.01	-	\$52,975.00	\$52,975.01	-	\$63,570.00	\$63,570.01	-	\$74,165.00	\$74,165.01	-	\$84,760.00	\$84,760.01	-	\$105,950.00
Each add'l person	\$0.00	-	\$4,320.00	\$4,320.01	-	\$5,400.00	\$5,400.01	-	\$6,480.00	\$6,480.01	-	\$7,560.00	\$7,560.01	-	\$8,640.00	\$8,640.01	-	\$10,800.00