



MCHC HEALTH CENTERS

A, B, C, D or E
Expires:

Worksheet

For MCHC Staff Use Only:

Family Size: _____

Total Monthly Gross Income _____

Total Annual Gross Income _____

Sliding Scale: _____ Expires: _____

PFS Representative (Name Printed)

2023 Federal Poverty Guidelines / Sliding Fee Discount (SFD) Schedule

Chart showing family size and annual income,
to be used for determining patient sliding fee discount eligibility.

Sliding Scale:	A*	B	C	D	E	F
Incomes between:	≤ 100%	101% - 138%	139% - 150%	151% - 175%	176% - 200%	>200%

Family Size:						
1	\$14,580	\$20,120	\$21,870	\$25,515	\$29,160	>\$29,160
2	\$19,720	\$27,214	\$29,580	\$34,510	\$39,440	>\$39,440
3	\$24,860	\$34,307	\$37,290	\$43,505	\$49,720	>\$49,720
4	\$30,000	\$41,400	\$45,000	\$52,500	\$60,000	>\$60,000
5	\$35,140	\$48,493	\$52,710	\$61,495	\$70,280	>\$70,280
6	\$40,280	\$55,586	\$60,420	\$70,490	\$80,560	>\$80,560
7	\$45,420	\$62,680	\$68,130	\$79,485	\$90,840	>\$90,840
8	\$50,560	\$69,773	\$75,840	\$88,480	\$101,120	>\$101,120
For families / households with more than 8 persons	add \$5,140 for each additional person					

HILLSIDE HEALTH CENTER
333 Laws Ave., Ukiah
(707) 468-1010
hillsidehealthcenter.org

DORA STREET HEALTH CENTER
1165 S. Dora St., Ste. A-1 & B-1, Ukiah
(707) 468-1015
dorastreethealthcenter.org

LAKEVIEW HEALTH CENTER
5335 Lakeshore Blvd., Lakeport
(707) 263-7725
lakeviewhealthcenter.org

LITTLE LAKE HEALTH CENTER
45 Hazel St., Willits
(707) 456-9600
littl lakehealthcenter.org