

Annual Income & Household Size

As a Federally Qualified Health Center (FQHC), KCHC is **required** to report annually on our patient's estimated annual income and house hold size for grant funding. Please know, this will **NOT** affect the care you will receive and your answer will not increase the cost of your visit. This will also help us determine if you qualify for the Sliding Fee Discount Program, if you wish to apply.

KCHC SLIDING SCALE DISCOUNT SCHEDULE

Based upon Federal Poverty Guidelines published in January, 2024 Federal Register Effective February 1, 2024

Poverty Level %		SLIDE A			SLIDE B			SLIDE C			SLIDE D			201%
		0% to 100%			101% to 133%			134% to 166%			167% to 200%			
		\$3			\$25			\$50			\$75			No Discount
Annual Income Table	Family Size	Annual Income												
	1	0	-	18,810	18,810.01	-	25,017.30	25,017.31	-	31,224.60	31,224.61	-	37,620.00	37,620.01
	2	0	-	25,540	25,540.01	-	33,968.20	33,968.21	-	42,396.40	42,396.41	-	51,080.00	51,080.01
	3	0	-	32,270	32,270.01	-	42,919.10	42,919.11	-	53,568.20	53,568.21	-	64,540.00	64,540.01
	4	0	-	39,000	39,000.01	-	51,870.00	51,870.01	-	64,740.00	64,740.01	-	78,000.00	78,000.01
	5	0	-	45,730	45,730.01	-	60,820.90	60,820.91	-	75,911.80	75,911.81	-	91,460.00	91,460.01
	6	0	-	52,460	52,460.01	-	69,771.80	69,771.81	-	87,083.60	87,083.61	-	104,920.00	104,920.01
	7	0	-	59,190	59,190.01	-	78,722.70	78,722.71	-	98,255.40	98,255.41	-	118,380.00	118,380.01
	8	0	-	65,190	65,190.01	-	86,702.70	86,702.71	-	108,215.40	108,215.41	-	130,380.00	130,380.01
	9	0	-	71,920	71,920.01	-	95,653.60	95,653.61	-	119,387.20	119,387.21	-	143,840.00	143,840.01
	10	0	-	78,650	78,650.01	-	104,604.50	104,604.51	-	130,559.00	130,559.01	-	157,300.00	157,300.01
	11	0	-	85,380	85,380.01	-	113,555.40	113,555.41	-	141,730.80	141,730.81	-	170,760.00	170,760.01
	12	0	-	92,110	92,110.01	-	122,506.30	122,506.31	-	152,902.60	152,902.61	-	184,220.00	184,220.01

Revised 2/19/2024