



INTERESTED IN **SAVING MONEY** ON HEALTH CARE SERVICES?



MCHC, the leader in rural health care, is proud to offer our patients the chance to save money on services we offer by using our Sliding Scale. The MCHC Sliding Scale Schedule is a system used to determine the amount each patient pays for services based on income and family size as determined by the 2016 HHS poverty guidelines.

DO YOU QUALIFY?

FEDERAL GUIDELINES EFFECTIVE JANUARY 26, 2016
MEDICAL/OPTOMETRY/BEHAVIORAL SLIDING SCALE ONLY

LEVEL	100% and below	101% - 125%	126% - 150%	151% - 200%	200% and above
CHARGE	\$25 nominal	\$35	\$50	\$75	100% of charges
FAMILY SIZE	INCOME UP TO	INCOME UP TO	INCOME UP TO	INCOME UP TO	INCOME OVER
1	\$11,880	\$14,850	\$17,820	\$23,760	\$23,760
2	\$16,020	\$20,025	\$24,030	\$32,040	\$32,040
3	\$20,160	\$25,200	\$30,240	\$40,320	\$40,320
4	\$24,300	\$30,375	\$36,450	\$48,600	\$48,600
5	\$28,440	\$35,550	\$42,660	\$56,880	\$56,880
6	\$32,580	\$40,725	\$48,870	\$65,160	\$65,160
7	\$36,730	\$45,913	\$55,095	\$73,460	\$73,460
8	\$40,890	\$51,113	\$61,335	\$81,780	\$81,780
9	\$45,050	\$56,313	\$67,575	\$90,100	\$90,100
10	\$49,210	\$61,513	\$73,815	\$98,420	\$98,420

FOR FAMILY UNITS OF MORE THAN 10 MEMBERS, ADD \$4,160 FOR EACH ADDITIONAL MEMBER.

PLEASE NOTE:

1. THE NOMINAL CHARGE MUST BE COLLECTED AT THE TIME SERVICES ARE RENDERED.
2. THE SLIDING SCALE APPLIES ONLY AFTER THIRD PARTY INSURANCE CARRIERS (i.e. Medicare, Commercial, Medicaid, etc.) HAVE PAID THEIR SHARE AND FOR SERVICES NOT COVERED BY INSURANCE.

7.19.2016

ASK RECEPTIONIST FOR APPLICATION