



MOUNTAIN LAUREL MEDICAL CENTER

Sliding Fee Schedule

Based on 2022 Federal Poverty Guidelines

Family Size	A		B		C		D		E	
	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below
1	\$0	\$ 13,590	\$ 13,591	\$ 16,988	\$ 16,989	\$ 20,385	\$ 20,386	\$ 23,783	\$ 23,784	\$ 27,180
2	\$0	\$ 18,310	\$ 18,311	\$ 22,888	\$ 22,889	\$ 27,465	\$ 27,466	\$ 32,043	\$ 32,044	\$ 36,620
3	\$0	\$ 23,030	\$ 23,031	\$ 28,788	\$ 28,789	\$ 34,545	\$ 34,546	\$ 40,303	\$ 40,304	\$ 46,060
4	\$0	\$ 27,750	\$ 27,751	\$ 34,688	\$ 34,689	\$ 41,625	\$ 41,626	\$ 48,563	\$ 48,564	\$ 55,500
5	\$0	\$ 32,470	\$ 32,471	\$ 40,588	\$ 40,589	\$ 48,705	\$ 48,706	\$ 56,823	\$ 56,824	\$ 64,940
6	\$0	\$ 37,190	\$ 37,191	\$ 46,488	\$ 46,489	\$ 55,785	\$ 55,786	\$ 65,083	\$ 65,084	\$ 74,380
7	\$0	\$ 41,910	\$ 41,911	\$ 52,388	\$ 52,389	\$ 62,865	\$ 62,866	\$ 73,343	\$ 73,344	\$ 83,820
8	\$0	\$ 46,630	\$ 46,631	\$ 58,288	\$ 58,289	\$ 69,945	\$ 69,946	\$ 81,603	\$ 81,604	\$ 93,260
9	\$0	\$ 51,350	\$ 51,351	\$ 64,188	\$ 64,189	\$ 77,025	\$ 77,026	\$ 89,863	\$ 89,864	\$ 102,700
10	\$0	\$ 56,070	\$ 56,071	\$ 70,088	\$ 70,089	\$ 84,105	\$ 84,106	\$ 98,123	\$ 98,124	\$ 112,140
11	\$0	\$ 60,790	\$ 60,791	\$ 75,988	\$ 75,989	\$ 91,185	\$ 91,186	\$ 106,383	\$ 106,384	\$ 121,580
12	\$0	\$ 65,510	\$ 65,511	\$ 81,888	\$ 81,889	\$ 98,265	\$ 98,266	\$ 114,643	\$ 114,644	\$ 131,020
13	\$0	\$ 70,230	\$ 70,231	\$ 87,788	\$ 87,789	\$ 105,345	\$ 105,346	\$ 122,903	\$ 122,904	\$ 140,460
14	\$0	\$ 74,950	\$ 74,951	\$ 93,688	\$ 93,689	\$ 112,425	\$ 112,426	\$ 131,163	\$ 131,164	\$ 149,900
15	\$0	\$ 79,670	\$ 79,671	\$ 99,588	\$ 99,589	\$ 119,505	\$ 119,506	\$ 139,423	\$ 139,424	\$ 159,340
% Poverty	100%		125%		150%		175%		200%	
MEDICAL CODE*	Slide A \$20		Slide B \$25		Slide C \$30		Slide D \$35		Slide E \$40	
PHARMACY CODE	MLMC Lowest Cost		MLMC Lowest Cost + Admin Fee		MLMC Lowest Cost +Admin Fee +\$5		MLMC Lowest Cost +Admin Fee +\$10		MLMC Lowest Cost +Admin Fee +\$15	
CO-INSURANCE CODE	Slide A \$0		Slide B \$3		Slide C \$5		Slide D \$10		Slide E \$15	

For Family Units with more than 15 members, for each additional member add \$4,720.00

* Patient Pays at a Minimum a \$20 Nominal Fee for Medical Visits

See the back of this form to see who may be counted in the "Family Size."