

HOT SPRINGS HEALTH PROGRAM
2024 Sliding Fee Discount Schedule

2024 DHHS Poverty Guidelines

A	B	C	D	E	F
Economic Unit* Size	Less than or equal to	Less than or equal to	Less than or equal to	Less than or equal to	Over 200%
	100%	133%	167%	200%	Unqualified
1	\$15,060	\$20,030	\$25,150	\$30,120	\$30,121 and over
2	\$20,440	\$27,185	\$34,135	\$40,880	\$40,881 and over
3	\$25,820	\$34,341	\$43,119	\$51,640	\$51,641 and over
4	\$31,200	\$41,496	\$52,104	\$62,400	\$62,401 and over
5	\$36,580	\$48,651	\$61,089	\$73,160	\$73,161 and over
6	\$41,960	\$55,807	\$70,073	\$83,920	\$83,921 and over
7	\$47,340	\$62,962	\$79,058	\$94,680	\$94,681 and over
8	\$52,720	\$70,118	\$88,042	\$105,440	\$105,441 and over
For economic units with more than 8 persons, add \$5,380 for each additional person.					
Nominal Fee	\$10	\$15	\$20	\$25	100% of charges

SOURCE: US Department of Health and Human Services, Federal Register, Publication Date January 17, 2024, <https://aspe.hhs.gov/poverty-guidelines>