

## Exhibit A

**Sliding fee discount schedule**

## Annual income thresholds by sliding fee discount pay class and percent poverty

Poverty level	100%	101-133%	134-167%	168-200%	>200%
Family size	Nominal fee (\$10)	\$15	\$20	\$30	100% pay
1	\$0 - \$15,650	\$15,651 - \$20,815	\$20,816 - \$26,136	\$26,137 - \$31,300	\$31,301+
2	\$0 - \$21,150	\$21,151 - \$28,130	\$28,131 - \$35,321	\$35,322 - \$42,300	\$42,301+
3	\$0 - \$26,650	\$26,651 - \$35,445	\$35,446 - \$44,506	\$44,507 - \$53,300	\$53,301+
4	\$0 - \$32,150	\$32,151 - \$42,760	\$42,761 - \$53,691	\$53,692 - \$64,300	\$64,301+
5	\$0 - \$37,650	\$37,651 - \$50,075	\$50,076 - \$62,876	\$62,877 - \$75,300	\$75,301+
6	\$0 - \$43,150	\$43,151 - \$57,390	\$57,391 - \$72,061	\$72,062 - \$86,300	\$86,301+
7	\$0 - \$48,650	\$48,651 - \$64,705	\$64,706 - \$81,246	\$81,247 - \$97,300	\$97,301+
8	\$0 - \$54,150	\$54,151 - \$72,020	\$72,021 - \$90,431	\$90,432 - \$108,300	\$108,301+
For each additional person, add	\$5,500	\$7,315	\$9,185	\$11,000	\$11,001+

\* Eyewear is charged at 100%. There is no discount for eyewear.  
 Patients under 100% of FPL will be charged a nominal fee of \$10.  
 No patient is refused care because of inability to pay.