

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-\$15,060	\$15,061 - \$20,030	\$20,031 - \$25,150	\$25,151 - \$30,120	\$30,121+
2	\$0 - \$20,440	\$20,441 - \$27,185	\$27,186 - \$34,135	\$34,136 - \$40,880	\$40,881+
3	\$0 - \$25,820	\$25,821 - \$34,341	\$34,342 - \$43,119	\$43,120 - \$51,640	\$51,641+
4	\$0 - \$31,200	\$31,201 - \$41,496	\$41,497 - \$52,104	\$52,105 - \$62,400	\$62,401+
5	\$0 - \$36,580	\$36,581 - \$48,651	\$48,652 - \$61,089	\$61,090 - \$73,160	\$73,161+
6	\$0 - \$41,960	\$41,961 - \$55,807	\$55,808 - \$70,073	\$70,074 - \$83,920	\$83,921+
7	\$0 - \$47,340	\$47,341 - \$62,962	\$62,963 - \$79,058	\$79,059 - \$94,680	\$94,681+
8	\$0 - \$52,720	\$52,721 - \$70,118	\$70,119 - \$88,042	\$88,043 - 105,440	\$105,441+
For each additional person, add	\$5,380	\$7,155	\$8,985	\$10,760	\$10,761+

* 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.