

**Thresholds Annual Income Sliding Fee Discount Pay Class and Percent Poverty**

Federal Poverty Level*	Income 100% or below FPL	Income between 101-125% of FPL	Income between 126-175% of FPL	Income between 176-200% of FPL	Income 201% or greater of FPL
Family Size	No Charge	\$5	\$10	\$15	No discount/ Full fee
1	\$14,580	\$19,391	\$	\$	\$
2	\$19,720	\$ 26,228	\$	\$	\$
3	\$ 24,860	\$ 33,064	\$	\$	\$
4	\$ 30,000	\$ 39,900	\$	\$	\$
5	\$ 35,140	\$ 46,736	\$	\$	\$
6	\$ 40,280	\$ 53,572	\$	\$	\$
7	\$ 45,420	\$ 60,409	\$	\$	\$
8	\$ 50,560	\$ 67,245	\$	\$	\$
For each additional person, add	\$ 5,140	\$	\$	\$	\$

\*Based on 2023 HHS Poverty Guidelines

[2023-00885.pdf \(govinfo.gov\)](#)