



BLUE MOUNTAIN HOSPITAL
802 S. 200 W. SUITE A
BLANDING, UT 84511
SLIDING FEE DISCOUNT TABLE ON INCOME BASIS

HOW TO USE THIS CHART

1. IN THE LEFT-HAND COLUMN FIND THE SIZE OF YOUR FAMILY
 2. ON THE ROW OF FAMILY SIZE, FIND THE HOUSEHOLD ANNUAL INCOME
 3. WHEN YOU FIND YOUR INCOME LEVEL GO TO THE TOP OF THE COLUMN TO FIND YOUR LEVEL OF DISCOUNT AND THE PATIENT RESPONSIBILITY
- IF YOU NEED ANY ASSISTANCE PLEASE ASK A MEMBER OF THE STAFF. THEY WILL BE HAPPY TO PROVIDE ASSISTANCE

PATIENT RESPONSIBILITY	ANNUAL INCOME					BILLED CHARGES
	10% OF MEDICARE ALLOWABLES	10% OF MEDICARE ALLOWABLES	30% OF MEDICARE ALLOWABLES	50% OF MEDICARE ALLOWABLES	60% OF MEDICARE ALLOWABLES	
DISCOUNT	90%	80%	70%	50%	40%	DO NOT QUALIFY
FAMILY SIZE	<100% FPL	101 - 125% FPL	126-150% FPL	151-175% FPL	176 to 200% FPL	>100% FPL
1	\$ 0 TO 12,760	12,761 TO 15,950	15,951 TO 19,140	19,141 TO 22,330	22,331 TO 25,520	25,521 AND OVER
2	\$ 0 TO 17,240	17,241 TO 21,550	21,551 TO 25,860	25,861 TO 30,170	30,171 TO 34,480	34,481 AND OVER
3	\$ 0 TO 21,720	21,721 TO 27,150	27,151 TO 32,580	32,581 TO 38,010	38,011 TO 43,440	43,441 AND OVER
4	\$ 0 TO 26,200	26,201 TO 32,750	32,751 TO 39,300	39,301 TO 45,850	45,851 TO 52,400	52,401 AND OVER
5	\$ 0 TO 30,680	30,681 TO 38,350	38,351 TO 46,020	46,021 TO 53,690	53,691 TO 61,360	61,361 AND OVER
6	\$ 0 TO 35,160	35,161 TO 43,950	43,951 TO 52,740	52,741 TO 61,530	61,531 TO 70,320	70,321 AND OVER
7	\$ 0 TO 39,640	39,641 TO 49,550	49,551 TO 59,460	59,461 TO 69,370	69,371 TO 79,280	79,281 AND OVER
8	\$ 0 TO 44,120	44,121 TO 55,150	55,151 TO 66,180	66,181 TO 77,210	77,211 TO 88,240	88,241 AND OVER

Add 4160 for each person after 8