

TREASURE COAST COMMUNITY HEALTH, INC.
SLIDING SCALE DISCOUNT INCOME/FAMILY SIZE CHART
ANNUAL INCOMES
EFFECTIVE MARCH 1, 2026

PAY CATEGORY FAMILY SIZE	A	B	C	D	E	FULL PAY 100%	Presumptive Medicaid Eligibility	Priority Medicaid Target Group
	Discount Varies with Service Line							
	Minimum							
1	15,960	15,961	19,951	23,941	27,931	>31,920	<29,526	<21,227
		19,950	23,940	27,930	31,920			
2	21,640	21,641	27,051	32,461	37,871	>43,280	<40,034	<28,781
		27,050	32,460	37,870	43,280			
3	27,320	27,321	34,151	40,981	47,811	>54,640	<50,542	<36,336
		34,150	40,980	47,810	54,640			
4	33,000	33,001	41,251	49,501	57,751	>66,000	<61,050	<43,890
		41,250	49,500	57,750	66,000			
5	38,680	38,681	48,351	58,021	67,691	>77,360	<71,558	<51,444
		48,350	58,020	67,690	77,360			
6	44,360	44,361	55,451	66,541	77,631	>88,720	<82,066	<58,999
		55,450	66,540	77,630	88,720			
7	50,040	50,041	62,551	75,061	87,571	>100,080	<92,574	<66,553
		62,550	75,060	87,570	100,080			
8	55,720	55,721	69,651	83,581	97,511	>111,440	<103,082	<74,108
		69,650	83,580	97,510	111,440			
Percent of Poverty	100% & Below	101-125%	126-150%	151-175%	176-200%	More Than 200%	Less than 185%	Less than 133%

The Current Nominal Payment is \$25.00

For families over 8 members, add ___\$5,680___ for each additional family member at 100% of Poverty

Presumptive Eligibility: For families over 8 members, add ___\$10,508___ for each additional member

Target Group: For family size with over 8 members, add ___\$7,555___ for each additional member.