

**Mid-State Health Center
Community Care Guidelines for Medical and Behavioral Health Services
April 1, 2016 to March 31, 2017**

Size of Household	Federal Poverty Income Guideline	101% to 138%	139% to 160%	161% to 180%	181% to 200%
		Federal Poverty Income Guideline	Federal Poverty Income Guideline	Federal Poverty Income Guideline	Federal Poverty Income Guideline
	Nominal Fee	\$20 Fee	\$30 Fee	\$40 Fee	\$50 Fee
1	\$ 11,880	\$ 16,394	19,008	\$ 21,384	23,760
2	\$ 16,020	\$ 22,108	25,632	\$ 28,836	32,040
3	\$ 20,160	\$ 27,821	32,256	\$ 36,288	40,320
4	\$ 24,300	\$ 33,534	38,880	\$ 43,740	48,600
5	\$ 28,440	\$ 39,247	45,504	\$ 51,192	56,880
6	\$ 32,580	\$ 44,960	52,128	\$ 58,644	65,160
7	\$ 36,730	\$ 50,687	58,768	\$ 66,114	73,460
8	\$ 40,890	\$ 56,428	65,424	\$ 73,602	81,780
Add each additional family member	\$ 4,160	\$ 5,741	6,656	\$ 7,488	8,320

Please Note

For family units of more than 8 add \$4,160 for each additional member

MSHC has all applicants that are not on a fixed income reapply every 3-6 months. MSHC also requires potentially eligible patients apply for Medicaid prior to giving them community care (MSHC can qualify the patient for one-time-only program).