

**Mid-State Health Center**  
**Community Care Guidelines for Medical and Behavioral Health Services**  
**April 1, 2023 to March 31, 2024**

Size of Household	Federal Poverty Income Guideline	101% to 138%	139% to 150%	151% to 175%	176% to 200%
		Federal Poverty Income Guideline	Federal Poverty Income Guideline	Federal Poverty Income Guideline	Federal Poverty Income Guideline
	Nominal Fee (\$10)	Higher of 95% Discount or \$20	Higher of 85% Discount of \$30	Higher of 75% Discount or \$40	Higher of 50% Discount or \$50
<b>1</b>	\$ 14,580	\$ 20,120	23,328	\$ 26,244	29,160
<b>2</b>	\$ 19,720	\$ 27,214	31,552	\$ 35,496	39,440
<b>3</b>	\$ 24,860	\$ 34,307	39,776	\$ 44,748	49,720
<b>4</b>	\$ 30,000	\$ 41,400	48,000	\$ 54,000	60,000
<b>5</b>	\$ 35,140	\$ 48,493	56,224	\$ 63,252	70,280
<b>6</b>	\$ 40,280	\$ 55,586	64,448	\$ 72,504	80,560
<b>7</b>	\$ 45,420	\$ 62,680	72,672	\$ 81,756	90,840
<b>8</b>	\$ 50,560	\$ 69,773	80,896	\$ 91,008	101,120
<b>Add each additional family member</b>	\$ 5,140	\$ 7,093	8,224	\$ 9,252	10,280

**\*Please Note\***

For family units of  
 than 8 add  
 \$5,140 for each  
 additional member

- MSHC has all applicants that are not on a fixed income reapply every 3 months more due to unemployment or every 6 months for low income but working.
- 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).