



Community Health Center of Southeast Kansas
2023 Financial Assistance Guidelines

| ANNUAL | | | | | |
|------------------------------|----------|-----------|-----------|-----------|-------------|
| Income Level | <100% | 101%-133% | 134%-167% | 168%-200% | >200% |
| Medical* | \$15.00 | \$25.00 | \$35.00 | \$45.00 | 100% |
| Behavioral | \$25.00 | \$35.00 | \$45.00 | \$55.00 | 100% |
| Dental | \$35.00 | \$45.00 | \$55.00 | \$65.00 | 100% |
| MAXIMUM ANNUAL INCOME | | | | | |
| Family Size | A | B | C | D | E |
| 1 | \$14,580 | \$19,391 | \$24,349 | \$29,160 | \$29,160 + |
| 2 | \$19,720 | \$26,228 | \$32,932 | \$39,440 | \$39,441 + |
| 3 | \$24,860 | \$33,064 | \$41,516 | \$49,720 | \$49,721 + |
| 4 | \$30,000 | \$39,900 | \$50,100 | \$60,000 | \$60,001 + |
| 5 | \$35,140 | \$46,736 | \$58,684 | \$70,280 | \$70,281 + |
| 6 | \$40,280 | \$53,572 | \$67,268 | \$80,560 | \$80,561 + |
| 7 | \$45,420 | \$60,409 | \$75,851 | \$90,840 | \$90,841 + |
| 8 | \$50,560 | \$67,245 | \$84,435 | \$101,120 | \$101,121 + |
| Each Additional Person | \$5,140 | \$6,836 | \$8,584 | \$10,280 | |

| MONTHLY | | | | | |
|------------------------|---------|-----------|-----------|-----------|-----------|
| Income Level | <100% | 101%-133% | 134%-167% | 168%-200% | >200% |
| Family Size | A | B | C | D | E |
| 1 | \$1,215 | \$1,616 | \$2,029 | \$2,430 | \$2,266 + |
| 2 | \$1,643 | \$2,186 | \$2,744 | \$3,287 | \$3,053 + |
| 3 | \$2,072 | \$2,755 | \$3,460 | \$4,143 | \$3,839 + |
| 4 | \$2,500 | \$3,325 | \$4,175 | \$5,000 | \$4,626 + |
| 5 | \$2,928 | \$3,895 | \$4,890 | \$5,857 | \$5,413 + |
| 6 | \$3,357 | \$4,464 | \$5,606 | \$6,713 | \$6,199 + |
| 7 | \$3,785 | \$5,034 | \$6,321 | \$7,570 | \$6,986 + |
| 8 | \$4,213 | \$5,604 | \$7,036 | \$8,427 | \$7,773 + |
| Each Additional Person | \$428 | \$570 | \$715 | \$857 | |

| HOURLY | | | | | |
|------------------------|---------|-----------|-----------|-----------|-----------|
| Income Level | <100% | 101%-133% | 134%-167% | 168%-200% | >200% |
| Family Size | A | B | C | D | E |
| 1 | \$7.01 | \$9.32 | \$11.71 | \$14.02 | \$14.03 + |
| 2 | \$9.48 | \$12.61 | \$15.83 | \$18.96 | \$18.97 + |
| 3 | \$11.95 | \$15.90 | \$19.96 | \$23.90 | \$23.91 + |
| 4 | \$14.42 | \$19.18 | \$24.09 | \$28.85 | \$28.86 + |
| 5 | \$16.89 | \$22.47 | \$28.21 | \$33.79 | \$33.80 + |
| 6 | \$19.37 | \$25.76 | \$32.34 | \$38.73 | \$38.74 + |
| 7 | \$21.84 | \$29.04 | \$36.47 | \$43.67 | \$43.68 + |
| 8 | \$24.31 | \$32.33 | \$40.59 | \$48.62 | \$48.63 + |
| Each Additional Person | \$2.47 | \$3.29 | \$4.13 | \$4.94 | |

**See CHC/SEK's Schedule of Discounted/Nominal Charges for a list of CHC/SEK services and discounted/nominal charges.
 Published in Federal Register 01/12/23; Board Approved 01/19/2023; Effective at CHC/SEK 02/01/2023.*

Source: <https://aspe.hhs.gov/poverty-guidelines>

(Gross Income Used for Calculations)