



OVP Health, Inc. Sliding Fee Discount Schedule 2021

Annual Income Thresholds by Sliding Fee Discount Pay Class and Percent Poverty

Poverty Level*	At or below 100%	125%	150%	175%	200%	Above 200%
Family Size	Nominal Fee (\$10)	20% Pay	40% Pay	60% Pay	80% Pay	100% Pay
1	0-\$12,880	\$12,881-\$16,100	\$16,101-\$19,320	\$19,321-\$22,540	\$22,541-\$25,760	\$25,761+
2	0-\$17,420	\$17,421-\$21,775	\$21,776-\$26,130	\$26,131-\$30,486	\$30,487-\$34,840	\$34,841+
3	0-\$21,960	\$21,961-\$27,450	\$27,451-\$32,940	\$32,941-\$38,430	\$38,431-\$43,920	\$43,921+
4	0-\$26,500	\$26,501-\$33,125	\$33,126-\$39,750	\$39,751-\$46,375	\$46,376-\$53,000	\$53,001+
5	0-\$31,040	\$31,041-\$38,800	\$38,801-\$46,560	\$46,561-\$54,320	\$54,321-\$62,080	\$62,081+
6	0-\$35,580	\$35,581-\$44,475	\$44,476-\$53,370	\$53,371-\$62,265	\$62,266-\$71,160	\$71,161+
7	0-\$40,120	\$40,121-\$50,150	\$50,151-\$60,180	\$60,181-\$70,210	\$70,211-\$80,240	\$80,241+
8	0-\$44,660	\$44,661-\$55,825	\$55,826-\$66,990	\$66,991-\$78,155	\$78,156-\$89,320	\$89,321+
For each additional person,	\$4,540	\$5,448	\$6,356	\$7,264	\$8,172	\$9,080

*Based on the 2021 Federal Poverty Guidelines (FPG) for the 48 contiguous states and the District of Columbia.