

**COLUMBIA BASIN HEALTH ASSOCIATION
SLIDING FEE EFFECTIVE 3/1/20**

Family Size	FPL ≤100%		101-134%		135-165%		166-200%		>200%
	Level 1 UP TO	Level 2		Level 3		Level 4		100% ABOVE	
		ABOVE	BELOW	ABOVE	BELOW	ABOVE	BELOW		
1	12,760	12,761	17,098	17,099	21,054	21,055	25,520	25,521	
2	17,240	17,241	23,102	23,103	28,446	28,447	34,480	34,481	
3	21,720	21,721	29,105	29,106	35,838	35,839	43,440	43,441	
4	26,200	26,201	35,108	35,109	43,230	43,231	52,400	52,401	
5	30,680	30,681	41,111	41,112	50,622	50,623	61,360	61,361	
6	35,160	35,161	47,114	47,115	58,014	58,015	70,320	70,321	
7	39,640	39,641	53,118	53,119	65,406	65,407	79,280	79,281	
8	44,120	44,121	59,121	59,122	72,798	72,799	88,240	88,241	
9	48,600	48,601	65,124	65,125	80,190	80,191	97,200	97,201	
10	53,080	53,081	71,127	71,128	87,582	87,583	106,160	106,161	
11	57,560	57,561	77,130	77,131	94,974	94,975	115,120	115,121	
12	62,040	62,041	83,134	83,135	102,366	102,367	124,080	124,081	
13	66,520	66,521	89,137	89,138	109,758	109,759	133,040	133,041	
14	71,000	71,001	95,140	95,141	117,150	117,151	142,000	142,001	
15	75,480	75,481	101,143	101,144	124,542	124,543	150,960	150,961	

For each additional person add: 4,480

FPL changed from 2019 to 2020 as follows:

Family Size	Effective 3/1/2020	Effective 4/1/2019	Effective 4/1/2018	% 4/1/2016
1	12,760	12,490	\$12,140	11,880
2	17,240	16,910	\$16,460	16,020
3	21,720	21,330	\$20,780	20,160
4	26,200	25,750	\$25,100	24,300
5	30,680	30,170	\$29,420	28,440
6	35,160	34,590	\$33,740	32,580
7	39,640	39,010	\$38,060	36,730
8	44,120	43,430	\$42,380	40,890

Change

2.16%

1.95%

1.83%

1.75%

1.69%

1.65%

1.61%

1.59%