

**Kit Carson County Health Service District
Sliding Fee Schedule
Year Ending December 31, 2013**

Family Size	Poverty Level								
Miembros de familia	Nivel de Pobreza								
	100%	120%	140%	160%	180%	200%	220%	240%	250%
1	\$11,770	\$14,068	\$16,366	\$18,664	\$20,962	\$23,260	\$25,558	\$27,856	\$30,154
2	\$15,930	\$19,032	\$22,134	\$25,236	\$28,338	\$31,440	\$34,542	\$37,644	\$40,746
3	\$20,090	\$23,996	\$27,902	\$31,808	\$35,714	\$39,620	\$43,526	\$47,432	\$51,338
4	\$24,250	\$28,960	\$33,670	\$38,380	\$43,090	\$47,800	\$52,510	\$57,220	\$61,930
5	\$28,410	\$33,924	\$39,438	\$44,952	\$50,466	\$61,494	\$67,008	\$72,522	\$78,036
6	\$32,570	\$38,888	\$45,206	\$51,524	\$57,842	\$64,160	\$70,478	\$76,796	\$83,114
7	\$36,730	\$43,852	\$50,974	\$58,096	\$65,218	\$72,340	\$79,462	\$86,584	\$93,706
8	\$40,890	\$48,816	\$56,742	\$64,668	\$71,790	\$79,716	\$87,642	\$95,568	\$103,494
Discount	100%	90%	80%	70%	60%	50%	40%	30%	20%
Decuento									

* for family units greater than eight (8) members, add \$4,020 for each additional member.