

Heartland Health Services

Annual Income for Financial Assistance (Medical)

February 1, 2020 - January 31, 2021

Medical	Family Size	Category A \$25.00 nominal fee				Category B or \$30.00 sliding fee				Category C or \$35.00 sliding fee				Category D or \$40.00 sliding fee				Full Fee 100% of charges	
		100%			Monthly Income	133%			Monthly Income	166%			Monthly Income	200%			Monthly Income		
		0	-			\$		-			\$			-		\$			
	1	0	-	12,760	\$ 1,063	12,761	-	16,971	\$ 1,414	16,972	-	21,182	\$ 1,765	21,183	-	25,520	\$ 2,127	Greater than	25,520
	2	0	-	17,240	\$ 1,437	17,241	-	22,929	\$ 1,911	22,930	-	28,618	\$ 2,385	28,619	-	34,480	\$ 2,873	Greater than	34,480
	3	0	-	21,720	\$ 1,810	21,721	-	28,888	\$ 2,407	28,889	-	36,055	\$ 3,005	36,056	-	43,440	\$ 3,620	Greater than	43,440
	4	0	-	26,200	\$ 2,183	26,201	-	34,846	\$ 2,904	34,847	-	43,492	\$ 3,624	43,493	-	52,400	\$ 4,367	Greater than	52,400
	5	0	-	30,680	\$ 2,557	30,681	-	40,804	\$ 3,400	40,805	-	50,929	\$ 4,244	50,930	-	61,360	\$ 5,113	Greater than	61,360
	6	0	-	35,160	\$ 2,930	35,161	-	46,763	\$ 3,897	46,764	-	58,366	\$ 4,864	58,367	-	70,320	\$ 5,860	Greater than	70,320
	7	0	-	39,640	\$ 3,303	39,641	-	52,721	\$ 4,393	52,722	-	65,802	\$ 5,484	65,803	-	79,280	\$ 6,607	Greater than	79,280
	*8	0	-	44,120	\$ 3,677	44,121	-	58,680	\$ 4,890	58,681	-	73,239	\$ 6,103	73,240	-	88,240	\$ 7,353	Greater than	88,240

Patient will be responsible for the cost of supplies or materials that are not "incident to" services.

*For families with more than 8 members add \$4,480 for each additional person.

Annual Income for Financial Assistance (Behavioral Health)

February 1, 2020 - January 31, 2021

Behavioral Health	Family Size	Category A \$5.00 nominal fee				Category B or \$10.00 sliding fee				Category C or \$15.00 sliding fee				Category D or \$20.00 sliding fee				Full Fee 100% of charges	
		100%			Monthly Income	133%			Monthly Income	166%			Monthly Income	200%			Monthly Income		
		0	-			\$		-			\$			-		\$			
	1	0	-	12,760	\$ 1,063	12,761	-	16,971	\$ 1,414	16,972	-	21,182	\$ 1,765	21,183	-	25,520	\$ 2,127	Greater than	25,520
	2	0	-	17,240	\$ 1,437	17,241	-	22,929	\$ 1,911	22,930	-	28,618	\$ 2,385	28,619	-	34,480	\$ 2,873	Greater than	34,480
	3	0	-	21,720	\$ 1,810	21,721	-	28,888	\$ 2,407	28,889	-	36,055	\$ 3,005	36,056	-	43,440	\$ 3,620	Greater than	43,440
	4	0	-	26,200	\$ 2,183	26,201	-	34,846	\$ 2,904	34,847	-	43,492	\$ 3,624	43,493	-	52,400	\$ 4,367	Greater than	52,400
	5	0	-	30,680	\$ 2,557	30,681	-	40,804	\$ 3,400	40,805	-	50,929	\$ 4,244	50,930	-	61,360	\$ 5,113	Greater than	61,360
	6	0	-	35,160	\$ 2,930	35,161	-	46,763	\$ 3,897	46,764	-	58,366	\$ 4,864	58,367	-	70,320	\$ 5,860	Greater than	70,320
	7	0	-	39,640	\$ 3,303	39,641	-	52,721	\$ 4,393	52,722	-	65,802	\$ 5,484	65,803	-	79,280	\$ 6,607	Greater than	79,280
	*8	0	-	44,120	\$ 3,677	44,121	-	58,680	\$ 4,890	58,681	-	73,239	\$ 6,103	73,240	-	88,240	\$ 7,353	Greater than	88,240

Patient will be responsible for the cost of supplies or materials that are not "incident to" services.

*For families with more than 8 members add \$4,480 for each additional person.