

Skagit Regional Health
Sliding Payment Schedule
Effective January 1, 2025

Family Size	Less than	More than	Less than	More than	Less than	More than	Less than	More than	Less than	More than	Less than	More than
1	\$15,650	\$15,650	\$23,475	\$23,476	\$31,300	\$31,301	\$46,950	\$46,951	\$62,600	\$62,601	\$78,250	\$78,251
2	\$21,150	\$21,150	\$31,725	\$31,726	\$42,300	\$42,301	\$63,450	\$63,451	\$84,600	\$84,601	\$105,750	\$105,751
3	\$26,650	\$26,650	\$39,975	\$39,976	\$53,300	\$53,301	\$79,950	\$79,951	\$106,600	\$106,601	\$133,250	\$133,251
4	\$32,150	\$32,150	\$48,225	\$48,226	\$64,300	\$64,301	\$96,450	\$96,451	\$128,600	\$128,601	\$160,750	\$160,751
5	\$37,650	\$37,650	\$56,475	\$56,476	\$75,300	\$75,301	\$112,950	\$112,951	\$150,600	\$150,601	\$188,250	\$188,251
6	\$43,150	\$43,150	\$64,725	\$64,726	\$86,300	\$86,301	\$129,450	\$129,451	\$172,600	\$172,601	\$215,750	\$215,751
7	\$48,650	\$48,650	\$72,975	\$72,976	\$97,300	\$97,301	\$145,950	\$145,951	\$194,600	\$194,601	\$243,250	\$243,251
8	\$54,150	\$54,150	\$81,225	\$81,226	\$108,300	\$108,301	\$162,450	\$162,451	\$216,600	\$216,601	\$270,750	\$270,751
9	\$59,650	\$59,650	\$89,475	\$89,476	\$119,300	\$119,301	\$178,950	\$178,951	\$238,600	\$238,601	\$298,250	\$298,251
10	\$65,150	\$65,150	\$97,725	\$97,726	\$130,300	\$130,301	\$195,450	\$195,451	\$260,600	\$260,601	\$325,750	\$325,751

Patient Responsibility	0%	0%	0%	25%	70%	80%	100%
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% FPL	150%	200%	300%	400%	500%
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