

**Skagit Regional Health**  
**Plan de pagos según escala variable**  
**2020**

Número de personas en la familia	Menos de	Más de										
1	<b>12,760</b>	12,760	19,140	19,140	25,520	25,520	38,280	38,280	51,040	51,040	63,800	63,800
2	<b>17,240</b>	17,240	25,860	25,860	34,480	34,480	51,720	51,720	68,960	68,960	86,200	86,200
3	<b>21,720</b>	21,720	32,580	32,580	43,440	43,440	65,160	65,160	86,880	86,880	108,600	108,600
4	<b>26,200</b>	26,200	39,300	39,300	52,400	52,400	78,600	78,600	104,800	104,800	131,000	131,000
5	<b>30,680</b>	30,680	46,020	46,020	61,360	61,360	92,040	92,040	122,720	122,720	153,400	153,400
6	<b>35,160</b>	35,160	52,740	52,740	70,320	70,320	105,480	105,480	140,640	140,640	175,800	175,800
7	<b>39,640</b>	39,640	59,460	59,460	79,280	79,280	118,920	118,920	158,560	158,560	198,200	198,200
8	<b>44,120</b>	44,120	66,180	66,180	88,240	88,240	132,360	132,360	176,480	176,480	220,600	220,600
9	<b>48,600</b>	48,600	72,900	72,900	97,200	97,200	145,800	145,800	194,400	194,400	243,000	243,000
10	<b>53,080</b>	53,080	79,620	79,620	106,160	106,160	159,240	159,240	212,320	212,320	265,400	265,400
11	<b>57,560</b>	57,560	86,340	86,340	115,120	115,120	172,680	172,680	230,240	230,240	287,800	287,800

Responsabilidad del paciente	0%	15%	30%	50%	70%	80%	100%
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% FPL

150%

200%

300%

400%

500%