Ability To Pay (ATP) Program Cost Table
Effective 04/1/2024

STEP 1: Find your household size (please include all adults and children who live with you).

STEP 2: Next, find your monthly gross income amount under one of the FPL levels.

STEP 3: Follow the column down to the bottom chart to find out how much you will be asked to pay according to your household size and income for outpatient & emergency room (monthly cost), and inpatient services (per admission cost).

Federal Poverty Levels (FPL)	< = 200% FPL	201-300% FPL		301-350% FPL		351-400% FPL		401-500% FPL		501-600% FPL		601 +
Household Size	Less than or equal	More than	Less than	More than	Less than	More than	Less than	More than	Less than	More than	Less than	More than
1	$2,510	$2,511	$3,765	$3,766	$4,393	$4,394	$5,020	$5,021	$6,275	$6,276	$7,530	$7,531
2	$3,408	$3,409	$5,112	$5,113	$5,964	$5,965	$6,816	$6,817	$8,520	$8,521	$10,224	$10,225
3	$4,304	$4,305	$6,456	$6,457	$7,532	$7,533	$8,608	$8,609	$10,760	$10,761	$12,912	$12,913
4	$5,200	$5,201	$7,800	$7,801	$9,100	$9,101	$10,400	$10,401	$13,000	$13,001	$15,600	$15,601
5	$6,098	$6,099	$9,147	$9,148	$10,672	$10,673	$12,196	$12,197	$15,245	$15,246	$18,294	$18,295
6	$6,994	$6,995	$10,491	$10,492	$12,240	$12,241	$13,988	$13,989	$17,485	$17,486	$20,982	$20,983
7	$7,890	$7,891	$11,835	$11,836	$13,808	$13,809	$15,780	$15,781	$19,725	$19,726	$23,670	$23,671
8	$8,788	$8,789	$13,182	$13,183	$15,379	$15,380	$17,576	$17,577	$21,970	$21,971	$26,364	$26,365
9	$9,684	$9,685	$14,526	$14,527	$16,947	$16,948	$19,368	$19,369	$24,210	$24,211	$29,052	$29,053
10	$10,580	$10,581	$15,870	$15,871	$18,515	$18,516	$21,160	$21,161	$26,450	$26,451	$31,740	$31,741
Outpatient & Emergency Services (Monthly Cost)	$0	$20		$50		$80		$355		$435		$485
Inpatient Services (Per Admission Cost)	$0	$200		$700		$1,200		$2,500		$3,000		$3,500

DHS Policy 515 Financial Assistance Programs and Charity Care Policy details the Financial Assistance Programs (FAPs), requirements, and guidelines.