

Munising Memorial Hospital  
**SLIDING FEE SCHEDULE - FINANCIAL ASSISTANCE**  
 Based on 2024 Federal Poverty Guidelines

Family Size	100% Discount		85% Discount		70% Discount		55% Discount		40% Discount		25% Discount		10% Discount	
	If income is between:		If income is between:		If income is between:		If income is between:		If income is between:		If income is between:		If income is between:	
1	\$0	\$15,060	\$15,061	\$18,825	\$18,826	\$22,590	\$22,591	\$26,355	\$26,356	\$30,120	\$30,121	\$37,650	\$37,651	\$45,180
2	\$0	\$20,440	\$20,441	\$25,550	\$25,551	\$30,660	\$30,661	\$35,770	\$35,771	\$40,880	\$40,881	\$51,100	\$51,101	\$61,320
3	\$0	\$25,820	\$25,821	\$32,275	\$32,276	\$38,730	\$38,731	\$45,185	\$45,186	\$51,640	\$51,641	\$64,550	\$64,551	\$77,460
4	\$0	\$31,200	\$31,201	\$39,000	\$39,001	\$46,800	\$46,801	\$54,600	\$54,601	\$62,400	\$62,401	\$78,000	\$78,001	\$93,600
5	\$0	\$36,580	\$36,581	\$45,725	\$45,726	\$54,870	\$54,871	\$64,015	\$64,016	\$73,160	\$73,161	\$91,450	\$91,451	\$109,740
6	\$0	\$41,960	\$41,961	\$52,450	\$52,451	\$62,940	\$62,941	\$73,430	\$73,431	\$83,920	\$83,921	\$104,900	\$104,901	\$125,880
7	\$0	\$47,340	\$47,341	\$59,175	\$59,176	\$71,010	\$71,011	\$82,845	\$82,846	\$94,680	\$94,681	\$118,350	\$118,351	\$142,020
8	\$0	\$52,720	\$52,721	\$65,900	\$65,901	\$79,080	\$79,081	\$92,260	\$92,261	\$105,440	\$105,441	\$131,800	\$131,801	\$158,160
% of Poverty	100%		125%		150%		175%		200%		250%		300%	