

HOT SPRINGS HEALTH PROGRAM
2026 Sliding Fee Discount Schedule

2026 DHHS Poverty Guidelines

A	B	C	D	E	F
Economic Unit* Size	Less than or equal to	Less than or equal to	Less than or equal to	Less than or equal to	Over 200%
	100%	133%	167%	200%	Unqualified
1	\$15,960	\$21,227	\$26,653	\$31,920	\$31,921 and over
2	\$21,640	\$28,781	\$36,139	\$43,280	\$43,281 and over
3	\$27,320	\$36,336	\$45,624	\$54,640	\$54,641 and over
4	\$33,000	\$43,890	\$55,110	\$66,000	\$66,001 and over
5	\$38,680	\$51,444	\$64,596	\$77,360	\$77,361 and over
6	\$44,360	\$58,999	\$74,081	\$88,720	\$88,721 and over
7	\$50,040	\$66,553	\$83,567	\$100,080	\$100,081 and over
8	\$55,720	\$74,108	\$93,052	\$111,440	\$111,441 and over
For families/households with more than 8 persons, add \$5,680 for each additional person.					
Nominal Fee	\$10	\$15	\$20	\$25	100% of charges

SOURCE: US Department of Health and Human Services, Federal Register, Publication Date January 15, 2026, <https://aspe.hhs.gov/poverty-guidelines>