Signature HEALTH Resed on Annual Income in accordance with the 2025 Federal Powerty Guideline

Based on Annual Income in accordance with the 2025 Federal Poverty Guidelines

| Family Size | Tier 0 | Tier 5 | Tier 10 | Tier 20 | Tier 40 | Full Fee |
|--|-------------------------|---------------------|----------------------|-----------------------|-----------------------|-------------|
| | 0%-100% FPL | 101%-138% FPL | 139%-300% FPL | 301%-400% FPL | 401%-500% FPL | >501% FPL |
| 1 | \$0 - \$15 <i>,</i> 650 | \$15,651 - \$21,597 | \$21,598 - \$46,950 | \$46,951 - \$62,600 | \$62,601 - \$78,250 | \$78,251 + |
| 2 | \$0 - \$21 <i>,</i> 150 | \$21,151 - \$29,187 | \$29,188 - \$63,450 | \$63,451 - \$84,600 | \$84,601 - \$105,750 | \$105,751 + |
| 3 | \$0 - \$26 <i>,</i> 650 | \$26,651 – \$36,777 | \$36,778 - \$79,950 | \$79,951 - \$106,600 | \$106,601 - \$133,250 | \$133,251 + |
| 4 | \$0-\$32,150 | \$32,151 - \$44,367 | \$44,368 - \$96,450 | \$96,451 - \$128,600 | \$128,601 - \$160,750 | \$160,751 + |
| 5 | \$0 - \$37 <i>,</i> 650 | \$37,651 - \$51,957 | \$51,958 - \$112,950 | \$112,951 - \$150,600 | \$150,601 - \$188,250 | \$188,251 + |
| 6 | \$0 - \$43,150 | \$43,151 - \$59,547 | \$59,548 - \$129,450 | \$129,451 - \$172,600 | \$172,601 - \$215,750 | \$215,751 + |
| For families / households with more than 8 persons, add \$5,500 for each additional person | | | | | | |

SOURCES: Office of the Assistant Secretary for Planning and Evaluation, https://aspe.hhs.gov/topics/poverty-economic-mobility /poverty-guidelines and Cuyahoga County Board of Health, https://www.ccbh.net/ryan-white-provider-resources/