SHERIDAN MEMORIAL HOSPITAL ASSOCIATION

All totals are calculated from the 2026 Federal Poverty Guidelines.

This table shall be adjusted in accordance with annually released changes to the Federal Poverty Levels.

FPG	100%	150%	200%				250%				300%				400%				500%		600%
Size of Family	**1x FPG**	**1.5x FPG**	**2.0x FPG**				**2.5x FPG**				**3.0x FPG**				**4.0xFPG**				**5.0xFPG**		**6.0xFPG**
Unit	**100%**	**100%**	**100%**	**95%**	**90%**	**85%**	**80%**	**75%**	**70%**	**65%**	**60%**	**55%**	**50%**	**45%**	**40%**	**35%**	**30%**	**25%**	**20%**	**15%**	**10%**
1	$15,960.00	$23,940.00	$31,920.00	$33,915.00	$35,910.00	$37,905.00	$39,900.00	$42,892.50	$45,885.00	$48,877.50	$51,870.00	$54,862.50	$57,855.00	$60,847.50	$63,840.00	$67,830.00	$71,820.00	$75,810.00	$79,800.00	$87,780.00	$95,760.00
2	$21,640.00	$32,460.00	$43,280.00	$45,985.00	$48,690.00	$51,395.00	$54,100.00	$56,805.00	$59,510.00	$62,215.00	$64,920.00	$70,330.00	$75,740.00	$81,150.00	$86,560.00	$91,970.00	$97,380.00	$102,790.00	$108,200.00	$119,020.00	$129,840.00
3	$27,320.00	$40,980.00	$54,640.00	$58,055.00	$61,470.00	$64,885.00	$68,300.00	$71,715.00	$75,130.00	$78,545.00	$81,960.00	$88,790.00	$95,620.00	$102,450.00	$109,280.00	$116,110.00	$122,940.00	$129,770.00	$136,600.00	$150,260.00	$163,920.00
4	$33,000.00	$49,500.00	$66,000.00	$70,125.00	$74,250.00	$78,375.00	$82,500.00	$86,625.00	$90,750.00	$94,875.00	$99,000.00	$107,250.00	$115,500.00	$123,750.00	$132,000.00	$140,250.00	$148,500.00	$156,750.00	$165,000.00	$181,500.00	$198,000.00
5	$38,680.00	$58,020.00	$77,360.00	$82,195.00	$87,030.00	$91,865.00	$96,700.00	$101,535.00	$106,370.00	$111,205.00	$116,040.00	$125,710.00	$135,380.00	$145,050.00	$154,720.00	$164,390.00	$174,060.00	$183,730.00	$193,400.00	$212,740.00	$232,080.00
6	$44,360.00	$66,540.00	$88,720.00	$94,265.00	$99,810.00	$105,355.00	$110,900.00	$116,445.00	$121,990.00	$127,535.00	$133,080.00	$144,170.00	$155,260.00	$166,350.00	$177,440.00	$188,530.00	$199,620.00	$210,710.00	$221,800.00	$243,980.00	$266,160.00
7	$50,040.00	$75,060.00	$100,080.00	$106,335.00	$112,590.00	$118,845.00	$125,100.00	$131,355.00	$137,610.00	$143,865.00	$150,120.00	$162,630.00	$175,140.00	$187,650.00	$200,160.00	$212,670.00	$225,180.00	$237,690.00	$250,200.00	$275,220.00	$300,240.00
8	$55,720.00	$83,580.00	$111,440.00	$118,405.00	$125,370.00	$132,335.00	$139,300.00	$146,265.00	$153,230.00	$160,195.00	$167,160.00	$181,090.00	$195,020.00	$208,950.00	$222,880.00	$236,810.00	$250,740.00	$264,670.00	$278,600.00	$306,460.00	$334,320.00
9	$65,330.00	$97,995.00	$130,660.00	$138,826.25	$146,992.50	$155,158.75	$163,325.00	$171,491.25	$179,657.50	$187,823.75	$195,990.00	$212,322.50	$228,655.00	$244,987.50	$261,320.00	$277,652.50	$293,985.00	$310,317.50	$326,650.00	$359,315.00	$391,980.00
10	$70,830.00	$106,245.00	$141,660.00	$150,513.75	$159,367.50	$168,221.25	$177,075.00	$185,928.75	$194,782.50	$203,636.25	$212,490.00	$230,197.50	$247,905.00	$265,612.50	$283,320.00	$301,027.50	$318,735.00	$336,442.50	$354,150.00	$389,565.00	$424,980.00
11	$76,510.00	$114,765.00	$153,020.00	$162,583.75	$172,147.50	$181,711.25	$191,275.00	$200,838.75	$210,402.50	$219,966.25	$229,530.00	$248,657.50	$267,785.00	$286,912.50	$306,040.00	$325,167.50	$344,295.00	$363,422.50	$382,550.00	$420,805.00	$459,060.00
12	$82,190.00	$123,285.00	$164,380.00	$174,653.75	$184,927.50	$195,201.25	$205,475.00	$215,748.75	$226,022.50	$236,296.25	$246,570.00	$277,391.25	$308,212.50	$339,033.75	$369,855.00	$400,676.25	$431,497.50	$462,318.75	$493,140.00	$554,782.50	$616,425.00
Addtl person +	$5,680.00																				
Nominal Clinic	$0.00	$5.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$10.00	$20.00	$20.00	$20.00	$20.00	$20.00	$20.00	$20.00
Nominal ER/Amb/Inpatient/Obs Fee/outpt	$0.00	$25.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$50.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00

Montana Minimum Wage $10.85
Source: Federal Register
effective 1.15.26