

## Carolina Family Health Centers, Inc.

Carolina Family Dental Center • Freedom Hill Community Health Center • Harvest Family Health Center  
• Wilson Community Health Center

### Ryan White Cap Worksheet

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Annual Income: \$ \_\_\_\_\_ MRN: \_\_\_\_\_

Individual FPL % (from MAGI worksheet [MAGI worksheet](#)): \_\_\_\_\_

Individual Patient's Annual Gross Income (AGI)	Annual Cap on Charges for _____ (Year)
At or below 100% FPL	No charges imposed / Charges capped at \$0.00
greater than 100% and not exceeding 200% FPL	Charges capped at 5% AGI
greater than 200% and not exceeding 300% FPL	Charges capped at 7% AGI
Above 300% FPL	Charges capped at 10% AGI

Other medical expenses incurred & applied to annual cap (documentation attached):

Expense	Amount

Based on income information provided, the patient's annual cap on medical and dental charges is:

\$ \_\_\_\_\_ Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
*Patient Signature*

\_\_\_\_\_  
*CFHC, Inc. Staff Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

June 2023

RW-100.05 Ryan White Cap Worksheet