



SLIDING FEE SCALE

Based on 2017 Federal Poverty Guidelines

Family Size	SLIDE A 0-100% of Poverty		SLIDE B 101-150% of Poverty		SLIDE C 151-175% of Poverty		SLIDE D 176-200% of Poverty		SLIDE E Over 200% of Poverty
	If income is between:		If income is between:		If income is between:		If income is between:		If income is at or above
1	\$0	\$12,060	\$12,061	\$18,090	\$18,091	\$21,105	\$21,106	\$24,120	\$24,121
2	\$0	\$16,240	\$16,241	\$24,360	\$24,361	\$28,420	\$28,421	\$32,480	\$32,481
3	\$0	\$20,420	\$20,421	\$30,630	\$30,631	\$35,735	\$35,736	\$40,840	\$40,841
4	\$0	\$24,600	\$24,601	\$36,900	\$36,901	\$43,050	\$43,051	\$49,200	\$49,201
5	\$0	\$28,780	\$28,781	\$43,170	\$43,171	\$50,365	\$50,366	\$57,560	\$57,561
6	\$0	\$32,960	\$32,961	\$49,440	\$49,441	\$57,680	\$57,681	\$65,920	\$65,921
7	\$0	\$37,140	\$37,141	\$55,710	\$55,711	\$64,995	\$64,996	\$74,280	\$74,281
8	\$0	\$41,320	\$41,321	\$61,980	\$61,981	\$72,310	\$72,311	\$82,640	\$82,641

For each additional person, add: \$4,180

Note: Fee Schedule based on flat fee per visit that includes all services and labs

Patient Fee per Medical Encounter	\$25	\$40	\$60	\$80	100% of Charges
Patient Fee per Medical Encounter (Mont Cares)	\$25	\$40	\$40	\$40	n/a

Behavioral Health:

Patient Fee per BH Visit	\$10	\$20	\$30	\$40	100% of Charges
Patient Fee per BH Visit (Mont Cares)	\$10	\$20	\$20	\$20	n/a
Patient Fee per BH Visit if same day as Med Visit	\$0	\$0	\$0	\$0	n/a

For homeless patients, fee is \$0 (for medical and behavioral)

Additional Charges:

Joint Injections	\$10	\$20	\$20	\$20	100% of Charges
Orthotics	\$10	20% of supply cost	30% of supply cost	40% of supply cost	100% of Charges
LARC (e.g. Nexplanon)	\$10	\$100	\$100	\$100	100% of Charges