



SLIDING FEE DISCOUNT SCHEDULE
Based on 2017 Federal Poverty Guidelines
Effective 07/01/17-03/31/18

Family Size	0-100%		101-133%		134-159%		160-200%		State Funded Discount 201-250%	
	Min	Max	Min	Max	Min	Max	Min	Max	Min	Max
1	\$0	\$12,060	\$12,061	\$16,040	\$16,041	\$19,175	\$19,176	\$24,120	\$24,121	\$30,150
2	\$0	\$16,240	\$16,241	\$21,599	\$21,600	\$25,822	\$25,823	\$32,480	\$32,481	\$40,600
3	\$0	\$20,420	\$20,421	\$27,159	\$27,160	\$32,468	\$32,469	\$40,840	\$40,841	\$51,050
4	\$0	\$24,600	\$24,601	\$32,718	\$32,719	\$39,114	\$39,115	\$49,200	\$49,201	\$61,500
5	\$0	\$28,780	\$28,781	\$38,277	\$38,278	\$45,760	\$45,761	\$57,560	\$57,561	\$71,950
6	\$0	\$32,960	\$32,961	\$43,837	\$43,838	\$52,406	\$52,407	\$65,920	\$65,921	\$82,400
7	\$0	\$37,140	\$37,141	\$49,396	\$49,397	\$59,053	\$59,054	\$74,280	\$74,281	\$92,850
8	\$0	\$41,320	\$41,321	\$54,956	\$54,957	\$65,699	\$65,700	\$82,640	\$82,641	\$103,300
9	\$0	\$45,500	\$45,501	\$60,515	\$60,516	\$72,345	\$72,346	\$91,000	\$91,001	\$113,750
10	\$0	\$49,680	\$49,681	\$66,074	\$66,075	\$78,991	\$78,992	\$99,360	\$99,361	\$124,200
11	\$0	\$53,860	\$53,861	\$71,634	\$71,635	\$85,637	\$85,638	\$107,720	\$107,721	\$134,650
12	\$0	\$58,040	\$58,041	\$77,193	\$77,194	\$92,284	\$92,285	\$116,080	\$116,081	\$145,100

For households with more than 12 persons, add \$4,180 for each additional person.

Self Declare	\$80 Medical Office Visit Fee; \$60 Medical Lab Fee
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CICP Rating	1	2	3	4	5
CICP Office Visit Co-Pay	\$15	\$20	\$25	\$35	\$40
CICP Lab Co-Pay	\$10	\$15	\$20	\$30	\$35

Sliding Fee Scale Rating	1	2	3	4	5
Medical Visit Nominal Fee	\$20	\$30	\$40	\$50	\$60
Medical Lab Nominal Fee	\$15	\$25	\$30	\$40	\$50

Elective Procedures Nominal Fee	\$50	\$100	\$150	\$200	\$250
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Prenatal Bundle	\$900	\$1,080	\$1,260	\$1,440	\$1,620
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Behavioral Hlth Nominal Fee	\$10	\$15	\$25	\$30	\$40
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Dental Level 1 (telehealth & preventive)	\$20	\$35	\$50	\$60	\$80
Dental Level 2 (restorative & surgical)	\$50	60%	70%	80%	90%
Dental Level 3 (prosthetic & endo)	\$100	60%	70%	80%	90%

For Clinic/Dental Slide, the patient Fee is the SMALLER of the actual charge or the established Nominal Fee for the family size and income.