

2023 Sliding Fee Scale

Eff: 2/1/23

Discount	A 100%	B 75%	C 50%	D 25%	E 0%
DENTAL Nominal Charge	\$35.00	No less than \$40.00	No Less than \$45.00	No less than \$50.00	\$55 Full Charge
MEDICAL Nominal Charge	\$25.00	No less than \$30.00	No Less than \$35.00	No less than \$40.00	\$45 Full Charge
BEHAVIORAL HEALTH Nominal Charge	\$10.00	No less than \$15.00	No Less than \$20.00	No less than \$25.00	\$30 Full Charge

Percentage of Federal Poverty Levels	0 - 100% FPL	>100% - 150% FPL	>150% - 175% FPL	>175% - 200% FPL	>200% FPL
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1	Annual	0 - 14,580	14,581 - 21,869	21,870 - 25,514	25,515 - 29,159	> 29,160
	Monthly	0 - 1,215	1,216 - 1,822	1,823 - 2,125	2,126 - 2,429	> 2,430

2	Annual	0 - 19,720	19,721 - 29,579	29,580 - 34,509	34,510 - 39,439	> 39,440
	Monthly	0 - 1,643	1,644 - 2,464	2,465 - 2,875	2,876 - 3,286	> 3,287

3	Annual	0 - 24,860	24,861 - 37,289	37,290 - 43,504	43,505 - 49,719	> 49,720
	Monthly	0 - 2,072	2,073 - 3,107	3,108 - 3,624	3,625 - 4,142	> 4,143

4	Annual	0 - 30,000	30,001 - 44,999	45,000 - 52,499	52,500 - 59,999	> 60,000
	Monthly	0 - 2,500	2,501 - 3,749	3,750 - 4,374	4,375 - 4,999	> 5,000

5	Annual	0 - 35,140	35,141 - 52,709	52,710 - 61,494	61,495 - 70,279	> 70,280
	Monthly	0 - 2,928	2,929 - 4,392	4,393 - 5,124	5,125 - 5,856	> 5,857

6	Annual	0 - 40,280	40,281 - 60,419	60,420 - 70,489	70,490 - 80,559	> 80,560
	Monthly	0 - 3,357	3,358 - 5,034	5,035 - 5,873	5,874 - 6,712	> 6,713

7	Annual	0 - 45,420	45,421 - 68,129	68,130 - 79,484	79,485 - 90,839	> 90,840
	Monthly	0 - 3,785	3,786 - 5,677	5,678 - 6,623	6,624 - 7,569	> 7,570

8	Annual	0 - 50,560	50,561 - 75,839	75,840 - 88,479	88,480 - 101,119	> 101,120
	Monthly	0 - 4,213	4,214 - 6,319	6,320 - 7,372	7,373 - 8,426	> 8,427

For family units with more than 8 members, add \$5140 Annually for each additional member.