

2026 Sliding Fee Scale

Efft: 2/1/26

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	\$55.00 Full Charge
MEDICAL Nominal Charge	\$25.00	No less than \$30.00	No Less than \$35.00	No less than \$40.00	\$45.00 Full Charge
InFocus Pharmacy	\$1.00 Flat Fee	\$5.00 Flat Fee	\$8.00 Flat Fee	\$10.00 Flat Fee	Full Charge
Optometry Charge	\$70.00 Flat Fee	\$75.00 Flat Fee	\$80.00 Flat Fee	\$85.00 Flat Fee	Full Charge
BEHAVIORAL HEALTH Nominal Charge	\$10.00	No less than \$15.00	No Less than \$20.00	No less than \$25.00	\$30.00 Full Charge

Percentage of Federal Poverty Levels	0 - 100% FPL	>100% - 150% FPL	>150% - 175% FPL	>175% - 200% FPL	>200% FPL

1	Annual	0 - 15,960	15,961 - 23,939	23,940 - 27,929	27,930 - 31,919	> 31,920
	Monthly	0 - 1,330	1,331 - 1,994	1,995 - 2,327	2,328 - 2,659	> 2,660
2	Annual	0 - 21,640	21,641 - 32,459	32,460 - 37,869	37,870 - 43,279	> 43,280
	Monthly	0 - 1,803	1,804 - 2,704	2,705 - 3,155	3,156 - 3,606	> 3,607
3	Annual	0 - 27,320	27,321 - 40,979	40,980 - 47,809	47,810 - 54,639	> 54,640
	Monthly	0 - 2,277	2,278 - 3,414	3,415 - 3,983	3,984 - 4,552	> 4,553
4	Annual	0 - 33,000	33,001 - 49,499	49,500 - 57,749	57,750 - 65,999	> 66,000
	Monthly	0 - 2,750	2,751 - 4,124	4,125 - 4,812	4,813 - 5,499	> 5,500
5	Annual	0 - 38,680	38,681 - 58,019	58,020 - 67,689	67,690 - 77,359	> 77,360
	Monthly	0 - 3,223	3,224 - 4,834	4,835 - 5,640	5,641 - 6,446	> 6,447
6	Annual	0 - 44,360	44,361 - 66,539	66,540 - 77,629	77,630 - 88,719	> 88,720
	Monthly	0 - 3,697	3,698 - 5,544	5,545 - 6,468	6,469 - 7,392	> 7,393
7	Annual	0 - 50,040	50,041 - 75,059	75,060 - 87,569	87,570 - 100,079	> 100,080
	Monthly	0 - 4,170	4,171 - 6,254	6,255 - 7,297	7,298 - 8,339	> 8,340
8	Annual	0 - 55,720	55,721 - 83,579	83,580 - 97,509	97,510 - 111,439	> 111,440
	Monthly	0 - 4,643	4,644 - 6,964	6,965 - 8,125	8,126 - 9,286	> 9,287

For family units with more than 8 members, add \$5,680 Annually for each additional member.