



**No Insurance? No Problem.
¿No tiene seguro medico? No hay problema.**

Discounted fees are available for those who qualify.
(Existen programa descuento para los que califiquen.)

School-Based Health

**Discount Services Fee Scale - Percentage of Maximum
Charge Based on Family Income and Size**

Payment Category Code	A	B	C	D	E
Charges	0% <small>\$25 nominal fee</small>	\$30	\$40	\$50	\$60

Annual Income					
Family Size	100% FPGL	101-125% FPGL	126-150% FPGL	151-175% FPGL	176-200% FPGL
	Less than or equal to	Less than or equal to	Less than or equal to	Less than or equal to	Less than or equal to
1	\$ 12,880	\$ 16,100	\$ 19,320	\$ 22,540	\$ 25,760
2	\$ 17,420	\$ 21,775	\$ 26,130	\$ 30,485	\$ 34,840
3	\$ 21,960	\$ 27,450	\$ 32,940	\$ 38,430	\$ 43,920
4	\$ 26,500	\$ 33,125	\$ 39,750	\$ 46,375	\$ 53,000
5	\$ 31,040	\$ 38,800	\$ 46,560	\$ 54,320	\$ 62,080
6	\$ 35,580	\$ 44,475	\$ 53,370	\$ 62,265	\$ 71,160
7	\$ 40,120	\$ 50,150	\$ 60,180	\$ 70,210	\$ 80,240
8	\$ 44,660	\$ 55,825	\$ 66,990	\$ 78,155	\$ 89,320

For families/households with more than 8 persons, **add \$4,540 for each additional person.**

SPECIAL NOTE: Certain medical and laboratory procedures may not be included in the core visit. These will be charged based on the above sliding fee scale and visit