



**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.)

MEDICAL

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

Payment Category Code	A	B	C	D	E
Charges	0% <u>\$25 nominal fee</u>	\$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	\$ 15,650	\$ 19,563	\$ 23,475	\$ 27,388	\$ 31,300
2	\$ 21,150	\$ 26,438	\$ 31,725	\$ 37,013	\$ 42,300
3	\$ 26,650	\$ 33,313	\$ 39,975	\$ 46,638	\$ 53,300
4	\$ 32,150	\$ 40,188	\$ 48,225	\$ 56,263	\$ 64,300
5	\$ 37,650	\$ 47,063	\$ 56,475	\$ 65,888	\$ 75,300
6	\$ 43,150	\$ 53,938	\$ 64,725	\$ 75,513	\$ 86,300
7	\$ 48,650	\$ 60,813	\$ 72,975	\$ 85,138	\$ 97,300
8	\$ 54,150	\$ 67,688	\$ 81,225	\$ 94,763	\$ 108,300

For families/households with more than 8 persons, **add \$5,500 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.