



2018-2019

Effective 1-1-2018 (Updated 1-18-2018)

Based on HHS 2018 Federal Poverty Guidelines

Medical & Dental Program Sliding Fee Discount Guidelines

		A (See Note 1)		B		C		D		E	
MEDICAL/BEHAVIORAL		Pt. Pays	Nominal Fee \$15	Flat Fee \$25	Flat Fee \$50	Flat Fee \$75	Flat Fee \$115	Flat Fee \$115	Flat Fee \$115	Flat Fee \$115	Full Charge
DENTAL		Pt. Pays	Nominal Fee \$35	Flat Fee \$50	Flat Fee \$80	Flat Fee \$80	Flat Fee \$115	Flat Fee \$115	Flat Fee \$115	Flat Fee \$115	Full Charge
% of FPL			≤ 100%	101%-133%	134%-166%	167%-200%	>200%				
1	\$	12,140	\$	16,146	\$	20,152	\$	24,280	\$	24,281	
2	\$	16,460	\$	21,892	\$	27,324	\$	32,920	\$	32,921	
3	\$	20,780	\$	27,637	\$	34,495	\$	41,560	\$	41,561	
4	\$	25,100	\$	33,383	\$	41,666	\$	50,200	\$	50,201	
5	\$	29,420	\$	39,129	\$	48,837	\$	58,840	\$	58,841	
6	\$	33,740	\$	44,874	\$	56,008	\$	67,480	\$	67,481	
7	\$	38,060	\$	50,620	\$	63,180	\$	76,120	\$	76,121	
8*	\$	42,380	\$	56,365	\$	70,351	\$	84,760	\$	84,761	

Note 1: For Eligible Slide A patients seen at Broadway WH - the \$15 MEDICAL patient payment is collected MONTHLY vs. per Visit.

* For family units with more than 8 members, add the following for each additional member:

	MEDICAL OR DENTAL
≤ 100%	\$ 4,320
101%-133%	\$ 5,746
134%-166%	\$ 7,171
167%-200%	\$ 8,640
>200%	\$ 8,641