

SLIDING FEE SCALE 2023 - SCHEDULE OF DISCOUNTS

2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

| LEVEL | A | В | C | D | E | F | G | H | NOT ELIGIBLE FOR RW COVERAGE OVER 500% | |
|------------------------------------------------|-------------|-----------|--------------|------------|---------------|--------------------------|--------------------------|------------------------------|----------------------------------------------|--------------------------------------|
| LOWER LIMIT | 0% | 101% | 126% | 151% | 176% | 201% | 251% | 301% | RW | |
| UPPER LIMIT | 100% | 125% | 150% | 175% | 200% | 250% | 300% | AND OVER | THRESHOLD | |
| FAMILY SIZE | | | | | | | | | | |
| 1 | \$ 14,580 | \$ 18,225 | \$ 21,870 | \$ 25,515 | \$ 29,160 | \$ 36,450 | \$ 43,740 | \$ 43,741 | \$ 72,901 | |
| 2 | \$ 19,720 | \$ 24,650 | \$ 29,580 | \$ 34,510 | \$ 39,440 | \$ 49,300 | \$ 59,160 | \$ 59,161 | \$ 98,601 | |
| 3 | \$ 24,860 | \$ 31,075 | \$ 37,290 | \$ 43,505 | \$ 49,720 | \$ 62,150 | \$ 74,580 | \$ 74,581 | \$ 124,301 | |
| 4 | \$ 30,000 | \$ 37,500 | \$ 45,000 | \$ 52,500 | \$60,000 | \$ 75,000 | \$ 90,000 | \$ 90,001 | \$ 150,001 | |
| 5 | \$ 35,140 | \$ 43,925 | \$ 52,710 | \$ 61,495 | \$ 70,280 | \$ 87,850 | \$ 105,420 | \$ 105,421 | \$ 175,701 | |
| 6 | \$ 40,280 | \$ 50,350 | \$ 60,420 | \$ 70,490 | \$ 80,560 | \$ 100,700 | \$120,840 | \$ 120,841 | \$ 201,401 | |
| 7 | \$ 45,420 | \$ 56,775 | \$ 68,130 | \$ 79,485 | \$ 90,840 | \$ 113,550 | \$ 136,260 | \$ 136,261 | \$ 227,101 | |
| 8 | \$ 50,560 | \$ 63,200 | \$ 75,840 | \$ 88,480 | \$ 101,120 | \$ 126,400 | \$ 151,680 | \$ 151,681 | \$ 252,801 | |
| 9 | \$ 55,700 | \$ 69,625 | \$ 83,550 | \$ 97,475 | \$ 111,400 | \$ 139,250 | \$ 167,100 | \$ 167,101 | \$ 278,501 | |
| 10 | \$ 60,840 | \$ 76,050 | \$ 91,260 | \$ 106,470 | \$ 121,680 | \$ 152,100 | \$ 182,520 | \$ 182,521 | \$ 304,201 | |
| MEDICAL SERVICES* | \$0 | \$ 10 | \$ 15 | \$ 20 | \$ 2 5 | FULL FEE \$30 \$30 | FULL FEE \$30 \$30 | FULL FEE \$30 FULL FEE | FULL FEE FULL FEE FULL FEE | GENERAL RYAN WHITE TITLE X |
| MENTAL HEALTH AND SUBSTANCE USE SERVICES | \$ 0 | \$5 | \$8 | \$10 | \$15 | FULL FEE FULL FEE \$20 | FULL FEE FULL FEE \$20 | FULL FEE FULL FEE \$30 | FULL FEE FULL FEE FULL FEE | INDIVIDUAL GROUP*** RYAN WHITE |

*MEDICAL SERVICES FEES ARE APPLIED TO OFFICE VISITS WITH CLINICIAN AND IMMUNIZATIONS (NOT PPD, OR COVID VACCINES) ONLY

^{**} MENTAL HEALTH AND SUBSTANCE USE SERVICES ARE APPLIED TO INDIVIDUAL AND GROUP VISITS WITH MENTAL HEALTH OR SUBSTANCE USE PROVIDERS ONLY

^{***}PATIENTS MAY APPLY FOR WAIVERS ON CHILD GROUP VISITS, TELEHEALTH VISITS OR FOR SERVICES RENDERED AT NORTHWESTERN HIGH SCHOOL