

Sliding Fee Scale And Schedule Of Discounts 2025

	A	В	C	D	E	F	G	H	NOT ELIGIBLE FOR	
LEVEL									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	\$15,650	\$19,563	\$23,475	\$27,388	\$31,300	\$39,125	\$46,950	\$46,951	\$78,251	
2	\$21,150	\$26,438	\$31,725	\$37,013	\$42,300	\$52,875	\$63,450	\$63,451	\$105,751	
3	\$26,650	\$33,313	\$39,975	\$46,638	\$53,300	\$66,625	\$79,950	\$79,951	\$133,251	
4	\$32,150	\$40,188	\$48,225	\$56,263	\$64,300	\$80,375	\$96,450	\$96,451	\$160,751	
5	\$37,650	\$47,063	\$56,475	\$65,888	\$75,300	\$94,125	\$112,950	\$112,951	\$188,251	
6	\$43,150	\$53,938	\$64,725	\$75,513	\$86,300	\$107,875	\$129,450	\$129,451	\$215,751	
7	\$48,650	\$60,813	\$72,975	\$85,138	\$97,300	\$121,625	\$145,950	\$145,951	\$243,251	
8	\$54,150	\$67,688	\$81,225	\$94,763	\$108,300	\$135,375	\$162,450	\$162,451	\$270,751	
9	\$59,650	\$74,563	\$89,475	\$104,388	\$119,300	\$149,125	\$178,950	\$178,951	\$298,251	
10	\$65,150	\$81,438	\$97,725	\$114,013	\$130,300	\$162,875	\$195,450	\$195,451	\$325,751	
MEDICAL	400	400	A 4.0	4.5 0	400	*Full Fee	*Full Fee	*Full Fee	*Full Fee	GENERAL
SERVICES**	\$20	\$30	\$40	\$50	\$60	\$80	\$120	\$120	*Full Fee	RYAN WHITE
						\$80	*Full Fee	*Full Fee	*Full Fee	TITLE X
MENTAL HEALTH AND SUBSTANCE USE	\$5	\$10	\$15	\$20	\$25	*Full Fee	*Full Fee	*Full Fee	*Full Fee	INDIVIDUAL
						*Full Fee	*Full Fee	*Full Fee	*Full Fee	GROUP
SERVICES***						\$40	\$60	\$60	*Full Fee	RYAN WHITE

2025 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA										
PERSONS IN FAMILY OR HOUSEHOLD	1	2	3	4	5	6	7	8		
2025 POVERTY GUIDELINE	\$15,650	\$21,150	\$26,650	\$32,150	\$37,650	\$43,150	\$48,650	\$54,150		
FOR FAMILIES WIT	\$5,	500								

^{*}Please note full fee patients will be charged \$120 for medical services and \$60 for behavioral health services at the time of service and billed for the remainder after the visit.

^{**}Medical Services Fees are applied to office visits with clinician and immunizations (not PPD, or COVID vaccines) only.

^{***}Mental Health and Substance Use fees are applied to individual and group visits with mental health or substance use provider