

CLINIC SLIDING FEE SCHEDULE
 BASED ON POVERTY GUIDELINES PUBLISHED JANUARY 2022

Poverty Level*	At of Below 100%	125%	150%	175%	200%	Above 200%						
Family Size	Charge											
	Nominal Fee (\$5)		20% pay		40% pay		60% pay		80% pay		100% pay	
	from	to	from	to	from	to	from	to	from	to	from	to
1	\$0	\$13,590	\$13,591	\$16,988	\$16,989	\$20,385	\$20,386	\$23,783	\$23,784	\$27,180	\$27,181	and over
2	\$0	\$18,310	\$18,311	\$22,888	\$22,889	\$27,465	\$27,466	\$32,043	\$32,044	\$36,620	\$36,621	and over
3	\$0	\$23,030	\$23,031	\$28,788	\$28,789	\$34,545	\$34,546	\$40,303	\$40,304	\$46,060	\$46,061	and over
4	\$0	\$27,750	\$27,751	\$34,688	\$34,689	\$41,625	\$41,626	\$48,563	\$48,564	\$55,500	\$55,501	and over
5	\$0	\$32,470	\$32,471	\$40,588	\$40,589	\$48,705	\$48,706	\$56,823	\$56,824	\$64,940	\$64,941	and over
6	\$0	\$37,190	\$37,191	\$46,488	\$46,489	\$55,785	\$55,786	\$65,083	\$65,084	\$74,380	\$74,381	and over
7	\$0	\$41,910	\$41,911	\$52,388	\$52,389	\$62,865	\$62,866	\$73,343	\$73,344	\$83,820	\$83,821	and over
8	\$0	\$46,630	\$46,631	\$58,288	\$58,289	\$69,945	\$69,946	\$81,603	\$81,604	\$93,260	\$93,261	and over
For each additional person, add	\$4,720		\$5,900		\$7,080		\$8,260		\$9,440		\$9,440	

* Based on 2022 Federal Poverty Guidelines (<http://aspe.hhs.gov/poverty>)