

SLIDING FEE SCHEDULE 04/04/2025-01/31/2026

Annual Income

| FAMILY SIZE | FROM | TO | FROM | TO | FROM | TO | FROM | TO | From | TO | MORE THAN |
|----------------|------|----------|----------|----------|----------|----------|----------|-----------|-----------|-----------|--------------|
| | 0% | 100% | 101% | 125% | 126% | 150% | 151% | 200% | 201% | 250% | 251% |
| 1 | \$0 | \$15,650 | \$15,807 | \$19,563 | \$19,719 | \$23,475 | \$23,632 | \$31,300 | \$31,457 | \$39,125 | \$39,282 |
| 2 | \$0 | \$21,150 | \$21,362 | \$26,438 | \$26,649 | \$31,725 | \$31,937 | \$42,300 | \$42,512 | \$52,875 | \$53,087 |
| 3 | \$0 | \$26,650 | \$26,917 | \$33,313 | \$33,579 | \$39,975 | \$40,242 | \$53,300 | \$53,567 | \$66,625 | \$66,892 |
| 4 | \$0 | \$32,150 | \$32,472 | \$40,188 | \$40,509 | \$48,225 | \$48,547 | \$64,300 | \$64,622 | \$80,375 | \$80,697 |
| 5 | \$0 | \$37,650 | \$38,027 | \$47,063 | \$47,439 | \$56,475 | \$56,852 | \$75,300 | \$75,677 | \$94,125 | \$94,502 |
| 6 | \$0 | \$43,150 | \$43,582 | \$53,938 | \$54,369 | \$64,725 | \$65,157 | \$86,300 | \$86,732 | \$107,875 | \$108,307 |
| 7 | \$0 | \$48,650 | \$49,137 | \$60,813 | \$61,299 | \$72,975 | \$73,462 | \$97,300 | \$97,787 | \$121,625 | \$122,112 |
| 8 | \$0 | \$54,150 | \$54,692 | \$67,688 | \$68,229 | \$81,225 | \$81,767 | \$108,300 | \$108,842 | \$135,375 | \$135,917 |

For families/households with more than 8 persons, add \$5500 for each additional person.

| Patient Pays | B | C | D | E | F | G |
|---|------------|--------------|-------------|-------------|--|-----------------|
| Medical and Behavioral Health Services *Each visit charged separately | \$40.00 | \$50.00 | \$60.00 | \$70.00 | 100% | |
| Dental Screenings for Children, Preventative Services, Emergency Services | \$40.00 | \$60.00 | \$80.00 | \$100.00 | 100% of Charges | |
| Sexual and Reproductive Health Services | \$0.00 | \$20.00 | \$30.00 | \$40.00 | \$50.00 | 100% of Charges |
| Restorative Treatment, Basic Endodontic Services, Non-surgical periodontal care, basic oral surgery, space maintenance. This includes the night/athletic guard (Lab fee charged separately) | \$40.00 | \$60.00 | \$80.00 | \$100.00 | 100% of Charges (lab fee included in charge) | |
| Crowns, Full and Partial Dentures (Lab fees charged separately) | \$40.00 | \$60.00 | \$80.00 | \$100.00 | 100% of Charges (lab fee included in charge) | |
| Pharmacy Services per prescription-per 30 day or less supply (Actual Acquisition Cost (AAC) is charged separately per prescription) | \$8.00+AAC | \$10.00 +AAC | \$12.00+AAC | \$14.00+ACC | 100% (U&C) | |

PATIENT IS RESPONSIBLE FOR THE LESSER OF ACTUAL TOTAL CHARGES OR SLIDING FEE SCALE.

Reproductive health services are available only to individuals based on their reproductive health status as determined by their health care provider.