



Ocean Health Initiatives, Inc.

Sliding Fee Schedule

Based on 2019 Federal Poverty Guidelines

All Services besides Dental, Dietician and Chiropractic

	A	B	C	D	E	F
Discount	100%	70%	65%	60%	60%	0%
Slide Amount	\$ 25	\$ 30	\$ 35	\$ 40	\$ 40	Full Fee
% Poverty	100%	101%-133%	134%-150%	151%-185%	186%-200%	201%-above
Family Size						
1	12,490	16,612	18,735	23,107	24,980	37,470
2	16,910	22,490	25,365	31,284	33,820	50,730
3	21,330	28,369	31,995	39,461	42,660	63,990
4	25,750	34,248	38,625	47,638	51,500	77,250
5	30,170	40,126	45,255	55,815	60,340	90,510
6	34,590	46,005	51,885	63,992	69,180	103,770
7	39,010	51,883	58,515	72,169	78,020	117,030
8	43,430	57,762	65,145	80,346	86,860	130,290

For Family units with more than 8 members, for each additional add \$4,420

* For a medical visit a patient pays a minimum a \$25 nominal fee

Dental Visit

	A	B	C	D	E	F
Discount	100%	45%	40%	40%	40%	0%
Slide Amount	\$ 50	\$ 55	\$ 60	\$ 60	\$ 60	Full Fee
% Poverty	100%	101%-133%	134%-150%	151%-185%	186%-200%	201%-above
Family Size						
1	12,490	16,612	18,735	23,107	24,980	37,470
2	16,910	22,490	25,365	31,284	33,820	50,730
3	21,330	28,369	31,995	39,461	42,660	63,990
4	25,750	34,248	38,625	47,638	51,500	77,250
5	30,170	40,126	45,255	55,815	60,340	90,510
6	34,590	46,005	51,885	63,992	69,180	103,770
7	39,010	51,883	58,515	72,169	78,020	117,030
8	43,430	57,762	65,145	80,346	86,860	130,290

For Family units with more than 8 members, for each additional add \$4,420

* For a dental visit a patient pays a minimum a \$50 nominal fee

Dietician Visit

	A	B	C	D	E	F
Discount	100%	70%	65%	60%	55%	0%
Slide Amount	\$ 20	\$ 25	\$ 30	\$ 35	\$ 40	Full Fee
% Poverty	100%	101%-133%	134%-150%	151%-185%	186%-200%	201%-above
Family Size						
1	12,490	16,612	18,735	23,107	24,980	37,470
2	16,910	22,490	25,365	31,284	33,820	50,730
3	21,330	28,369	31,995	39,461	42,660	63,990
4	25,750	34,248	38,625	47,638	51,500	77,250
5	30,170	40,126	45,255	55,815	60,340	90,510
6	34,590	46,005	51,885	63,992	69,180	103,770
7	39,010	51,883	58,515	72,169	78,020	117,030
8	43,430	57,762	65,145	80,346	86,860	130,290

For Family units with more than 8 members, for each additional add \$4,420

* For a dietician visit a patient pays a minimum a \$20 nominal fee

Chiropractic

	A	B	C	D	E	F
Discount	100%	70%	65%	60%	55%	0%
Slide Amount	\$ 40	\$ 45	\$ 50	\$ 55	\$ 55	Full Fee
3 Visit dicount	\$ 100	\$ 105	\$ 110	\$ 115	\$ 115	Full Fee
% Poverty	100%	101%-133%	134%-150%	151%-185%	186%-200%	201%-above
Family Size						
1	12,490	16,612	18,735	23,107	24,980	37,470
2	16,910	22,490	25,365	31,284	33,820	50,730
3	21,330	28,369	31,995	39,461	42,660	63,990
4	25,750	34,248	38,625	47,638	51,500	77,250
5	30,170	40,126	45,255	55,815	60,340	90,510
6	34,590	46,005	51,885	63,992	69,180	103,770
7	39,010	51,883	58,515	72,169	78,020	117,030
8	43,430	57,762	65,145	80,346	86,860	130,290

For Family units with more than 8 members, for each additional add \$4,420

* For a chiropractic visit a patient pays a minimum a \$40 nominal fee