

Ocean Health Initiatives

Sliding Fee Schedule

Based on 2020 Federal Poverty Guidelines (Revised)

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	12,760	16,971	19,140	23,606	25,520	38,280
2	17,240	22,929	25,860	31,894	34,480	51,720
3	21,720	28,888	32,580	40,182	43,440	65,160
4	26,200	34,846	39,300	48,470	52,400	78,600
5	30,680	40,804	46,020	56,758	61,360	92,040
6	35,160	46,763	52,740	65,046	70,320	105,480
7	39,640	52,721	59,460	73,334	79,280	118,920
8	44,120	58,680	66,180	81,622	88,240	132,360

For Family units with more than 8 members, for each additional add \$4,480

* 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	\$ 45	\$ 50	\$ 55	\$ 60	\$ 60	Full Fee
% Poverty	100%	101%-133%	134%-150%	151%-185%	186%-200%	201%-above
Family Size						
1	12,760	16,971	19,140	23,606	25,520	38,280
2	17,240	22,929	25,860	31,894	34,480	51,720
3	21,720	28,888	32,580	40,182	43,440	65,160
4	26,200	34,846	39,300	48,470	52,400	78,600
5	30,680	40,804	46,020	56,758	61,360	92,040
6	35,160	46,763	52,740	65,046	70,320	105,480
7	39,640	52,721	59,460	73,334	79,280	118,920
8	44,120	58,680	66,180	81,622	88,240	132,360

For Family units with more than 8 members, for each additional add \$4,480

* 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	\$ 35	Full Fee
% Poverty	100%	101%-133%	134%-150%	151%-185%	186%-200%	201%-above
Family Size						
1	12,760	16,971	19,140	23,606	25,520	38,280
2	17,240	22,929	25,860	31,894	34,480	51,720
3	21,720	28,888	32,580	40,182	43,440	65,160
4	26,200	34,846	39,300	48,470	52,400	78,600
5	30,680	40,804	46,020	56,758	61,360	92,040
6	35,160	46,763	52,740	65,046	70,320	105,480
7	39,640	52,721	59,460	73,334	79,280	118,920
8	44,120	58,680	66,180	81,622	88,240	132,360

For Family units with more than 8 members, for each additional add \$4,480

* 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	12,760	16,971	19,140	23,606	25,520	38,280
2	17,240	22,929	25,860	31,894	34,480	51,720
3	21,720	28,888	32,580	40,182	43,440	65,160
4	26,200	34,846	39,300	48,470	52,400	78,600
5	30,680	40,804	46,020	56,758	61,360	92,040
6	35,160	46,763	52,740	65,046	70,320	105,480
7	39,640	52,721	59,460	73,334	79,280	118,920
8	44,120	58,680	66,180	81,622	88,240	132,360

For Family units with more than 8 members, for each additional add \$4,480

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