

Ocean Health Initiatives

Sliding Fee Schedule

Based on 2021 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	12,880	17,130	19,320	23,828	25,760	38,640
2	17,420	23,169	26,130	32,227	34,840	52,260
3	21,960	29,207	32,940	40,626	43,920	65,880
4	26,500	35,245	39,750	49,025	53,000	79,500
5	31,040	41,283	46,560	57,424	62,080	93,120
6	35,580	47,321	53,370	65,823	71,160	106,740
7	40,120	53,360	60,180	74,222	80,240	120,360
8	44,660	59,398	66,990	82,621	89,320	133,980

For Family units with more than 8 members, for each additional add \$4,540

* 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	12,880	17,130	19,320	23,828	25,760	38,640
2	17,420	23,169	26,130	32,227	34,840	52,260
3	21,960	29,207	32,940	40,626	43,920	65,880
4	26,500	35,245	39,750	49,025	53,000	79,500
5	31,040	41,283	46,560	57,424	62,080	93,120
6	35,580	47,321	53,370	65,823	71,160	106,740
7	40,120	53,360	60,180	74,222	80,240	120,360
8	44,660	59,398	66,990	82,621	89,320	133,980

For Family units with more than 8 members, for each additional add \$4,540

* 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	12,880	17,130	19,320	23,828	25,760	38,640
2	17,420	23,169	26,130	32,227	34,840	52,260
3	21,960	29,207	32,940	40,626	43,920	65,880
4	26,500	35,245	39,750	49,025	53,000	79,500
5	31,040	41,283	46,560	57,424	62,080	93,120
6	35,580	47,321	53,370	65,823	71,160	106,740
7	40,120	53,360	60,180	74,222	80,240	120,360
8	44,660	59,398	66,990	82,621	89,320	133,980

For Family units with more than 8 members, for each additional add \$4,540

* 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	12,880	17,130	19,320	23,828	25,760	38,640
2	17,420	23,169	26,130	32,227	34,840	52,260
3	21,960	29,207	32,940	40,626	43,920	65,880
4	26,500	35,245	39,750	49,025	53,000	79,500
5	31,040	41,283	46,560	57,424	62,080	93,120
6	35,880	47,720	53,820	66,378	71,760	107,640
7	40,120	53,360	60,180	74,222	80,240	120,360
8	44,660	59,398	66,990	82,621	89,320	133,980

For Family units with more than 8 members, for each additional add \$4,540

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