

SLIDING FEE SCALE PATIENT DISCOUNT NOTICE

Priority Health Care is required to collect all co-pays, deductibles, and sliding fee payments where applicable.

As a Federally Qualified Health Center (FQHC), Priority Health Care (PHC) is required to provide a Sliding Fee Scale Discount Program to patients who meet the eligibility guidelines.

Further, it is the policy of PHC to provide quality health care regardless of the patient's ability to pay.

Discounts are offered based upon household income and size. A Sliding Fee Schedule is used to calculate the basic discount and is updated on an annual basis using the current federal poverty guidelines. Once approved, the discount will be honored up to one year, after which the patient must reapply.

Sliding Fee Discounts are determined based upon household size and annual income, regardless of health insurance status.

	2023 Federa Priority Health C	-		nt				
	Mec	lical Service	es					
	Α	В	С	D	E	F		
Family Size	Poverty Level							
	At or Below 100%	125%	150%	175%	200%	225%		
1	\$14,580	\$18,225	\$21,870	\$25,515	\$29,160	\$32,805		
2	\$19,720	\$24,650	\$29,580	\$34,510	\$39,440	\$44,370		
3	\$24,860	\$31,075	\$37,290	\$43,505	\$49,720	\$55,935		
4	\$30,000	\$37,500	\$45,000	\$52,500	\$60,000	\$67,500		
5	\$35,140	\$43,925	\$52,710	\$61,495	\$70,280	\$79,065		
6	\$40,280	\$50,350	\$60,420	\$70,490	\$80,560	\$90,630		
7	\$45,420	\$56,775	\$68,130	\$79,485	\$90,840	\$102,195		
8	\$50,560	\$63,200	\$75,840	\$88,480	\$101,120	\$113,760		
For Each Additional Person Add:	\$5,140	\$6,425	\$7,710	\$8,995	\$10,280	\$11,565		
Approximate Discount	100%	80%	60%	40%	20%	0%		
Minimum Amount You Will Pay	\$0	\$35	\$35	\$35	\$35	\$35		

	Pha	rmacy Servio	ces						
Dispensing Fee + Prescription Cost									
	Α	В	С	D	E	F			
Brand	AC + \$1	AC + \$3	AC + \$5	AC + \$7	AC + \$9	AC + \$11			
Generic	AC + \$0.50	AC + \$1.50	AC + \$2.50	AC + \$3.50	AC + \$4.50	AC + \$5.50			
	Based on 202	3 HHS Povert	, Guidelines.						

PHC offers additional assistance to HIV positive patients through the Ryan White HIV/AIDS Program.

• HIV positive patients who have household incomes at or below 500% of the federal poverty level may qualify.

 To determine eligibility, HIV positive patients are advised to speak with a staff member within the social services department.