



2025 Sliding Fee Discount Schedule

Programa de Descuentos de Tarifa Variable para 2025

No one will be denied access to services due to inability to pay. There is a discounted/sliding fee schedule available for both insured and uninsured patients based on family size and income level.

A nadie se le negará el acceso a los servicios por no poder pagar. Hay un programa de tarifas variables/con descuento disponible para pacientes asegurados y no asegurados según el tamaño de la familia y el nivel de ingresos.

Annual Income by Percentage of Poverty <i>Ingreso Anual por Porcentaje de Pobreza</i>					
Poverty Level*	At or Below 100%	At or Below 101%-125%	At or Below 126%-150%	At or Below 151%-200%	Above 200%
Family Size	Patient Fee				
	\$30	\$35	\$40	\$45	Full Charge
1	\$15,650	\$19,562.50	\$23,475	\$31,300	\$31,300+
2	\$21,150	\$26,437.50	\$31,725	\$42,300	\$42,300+
3	\$26,650	\$33,312.50	\$39,975	\$53,300	\$53,300+
4	\$32,150	\$40,187.50	\$48,225	\$64,300	\$64,300+
5	\$37,650	\$47,062.50	\$56,475	\$75,300	\$75,300+
6	\$43,150	\$53,937.50	\$64,725	\$86,300	\$86,300+
7	\$48,650	\$60,812.50	\$72,975	\$97,300	\$97,300+
8	\$54,150	\$67,687.50	\$81,225	\$108,300	\$108,300+
For each additional person add: \$5,550					

*Based on 2025 Federal Poverty Guidelines: <https://aspe.hhs.gov/poverty-guidelines>