

Medical and Behavioral Health Sliding Scale Categories

<u>Payor Category</u>	<u>% of Charge Patient Pays</u>
A-----	0%*
B-----	25%
C-----	50%
D-----	75%
E-----	100%

**DCHC MEDICAL AND BEHAVIORAL HEALTH SLIDING FEE SCALE
ANNUAL INCOME GUIDELINES
2019**

Level of Poverty:	Up to 100%	Up to 150%	Up to 175%	Up to 200%	> 200%
FAMILY SIZE	Slide A: \$20 Nominal Fee	Slide B: 25% pay	Slide C: 50% pay	Slide D: 75% pay	Slide E: 100% pay
1	0 to 12,490.00	12,491.00 to 18,735.00	18,736.00 to 21,857.00	21,858.00 to 24,980.00	Over 24,980.00
2	0 to 16,910.00	16,911.00 to 25,365.00	25,366.00 to 29,592.00	29,593.00 to 33,820.00	Over 33,820.00
3	0 to 21,330.00	21,331.00 to 31,995.00	31,996.00 to 37,327.00	37,328.00 to 42,660.00	Over 42,660.00
4	0 to 25,750.00	25,751.00 to 38,625.00	38,626.00 to 45,062.00	45,063.00 to 51,500.00	Over 51,500.00
5	0 to 30,170.00	30,171.00 to 45,255.00	45,256.00 to 52,797.00	52,798.00 to 60,340.00	Over 60,340.00
6	0 to 34,590.00	34,591.00 to 51,885.00	51,886.00 to 60,532.00	60,533.00 to 69,180.00	Over 69,180.00
7	0 to 39,010.00	39,011.00 to 58,515.00	58,516.00 to 68,267.00	68,268.00 to 78,020.00	Over 78,020.00
8	0 to 43,430.00	43,431.00 to 65,145.00	65,146.00 to 76,002.00	76,003.00 to 86,860.00	Over 86,860.00
9	0 to 47,850.00	47,851.00 to 71,775.00	71,776.00 to 83,737.00	83,738.00 to 95,700.00	Over 95,700.00
10	0 to 52,270.00	52,271.00 to 78,405.00	78,406.00 to 91,472.00	91,473.00 to 104,540.00	Over 104,540.00

** For family units of more than 8 members, add \$4,420.00 for each individual member.

\$20.00 is the nominal fee for medical services.

Dental Sliding Fee Categories

Payor Category

% of Charge
Patient Pays

A-----0%*
 B-----30%
 C-----40%
 D-----50%
 E-----60%
 F-----100%

2019 Dental Sliding Fee Scale Chart Based on Family Income and Size

ANNUAL INCOME GUIDELINES

Level of Poverty:	Up to 100%	Up to 125%	Up to 150%	Up to 175%	Up to 200%	> 200%
Family Size	Slide A: Nominal Fee	Slide B: Pt pays 30%	Slide C: Pt pays 40%	Slide D: Pt pays 50%	Slide E: Pt pays 60%	Slide F: Pt pays 100%
1	0 to 12,490.00	12,491.00 to 15,612.00	15,613.00 to 18,735.00	18,736.00 to 21,857.00	21,858.00 to 24,980.00	Full fee
2	0 to 16,910.00	16,911.00 to 21,138.00	21,138.00 to 25,365.00	25,366.00 to 29,592.00	29,593.00 to 33,820.00	Full fee
3	0 to 21,330.00	21,331.00 to 26,663.00	26,664.00 to 31,995.00	31,996.00 to 37,327.00	37,328.00 to 42,660.00	Full fee
4	0 to 25,750.00	25,751.00 to 32,188.00	32,189.00 to 38,625.00	38,626.00 to 45,062.00	45,063.00 to 50,200.00	Full fee
5	0 to 30,170.00	30,171.00 to 37,713.00	37,714.00 to 45,255.00	45,256.00 to 52,797.00	52,798.00 to 60,340.00	Full fee
6	0 to 34,590.00	34,591.00 to 43,238.00	43,239.00 to 51,885.00	51,886.00 to 60,532.00	60,533.00 to 69,180.00	Full fee
7	0 to 39,010.00	39,011.00 to 48,763.00	48,764.00 to 58,515.00	58,516.00 to 68,267.00	68,268.00 to 78,020.00	Full fee
8	0 to 43,430.00	43,431.00 to 54,288.00	54,289.00 to 65,145.00	65,146.00 to 76,002.00	76,003.00 to 86,860.00	Full fee
9	0 to 47,850.00	47,851.00 to 59,813.00	59,814.00 to 71,775.00	71,776.00 to 83,737.00	83,738.00 to 95,700.00	Full fee
10	0 to 52,270.00	52,271.00 to 65,338.00	65,339.00 to 78,405.00	78,406.00 to 91,472.00	91,473.00 to 104,540.00	Full fee
Nominal & Discounted fees:						
Consult & x-ray	\$15.00- child and adult bundle	70% discount	60% discount	50% discount	40% discount	Full Fee
Cleaning, exam, & x-ray	\$25.00- child and adult bundle	70% discount	60% discount	50% discount	40% discount	Full Fee
Restorative & other dental services	\$20 per ADA procedure code	70% discount	60% discount	50% discount	40% discount	Full fee
Crowns	\$145.00 per ADA procedure code	70% discount	60% discount	50% discount	40% discount	Full fee