

2020

Effective 1/1/2020 Updated 1/27/2020 Based on HHS 2020 Federal Poverty Guidelines

Medical, Pharmacy & Dental Program Sliding Fee Discount Guidelines

			A (See Note	1)	В		С		D		E
MEDICAL/BEHAVIORAL	Pt. Pays	N	ominal Fee \$15		Flat Fee \$25		Flat Fee \$50		Flat Fee \$75		Full Charge
PHARMACY	Pt. Pays	N	ominal Fee \$5		Flat Fee \$10		Flat Fee \$15		Flat Fee \$20		Full Charge
DENTAL	Pt. Pays	Pt. Pays Nominal Fee \$35		Flat Fee \$50		Flat Fee \$80		Flat Fee \$115		Full Charge	
	% of FPL		≤ 100%		>100%-133%	1	>133%-166%		>166%-200%		>200%
	1	\$	12,760	\$	16,971	\$	21,182	\$	25,520	\$	25,521
	2	\$	17,240	\$	22,929	\$	28,618	\$	34,480	\$	34,481
	3	\$	21,720	\$	28,888	\$	36,055	\$	43,440	\$	43,441
	4	\$	26,200	\$	34,846	\$	43,492	\$	52,400	\$	52,401
	5	\$	30,680	\$	40,804	\$	50,929	\$	61,360	\$	61,361
	6	\$	35,160	\$	46,763	\$	58,366	\$	70,320	\$	70,321
	7	\$	39,640	\$	52,721	\$	65,802	\$	79,280	\$	79,281
	8*	\$	44,120	\$	58,680	\$	73,239	\$	88,240	\$	88,241

Note 1: For Eligible Slide A patients seen at Broadway WH - the \$15 MEDICAL patient payment is collected MONTHLY vs. per Visit.

* For family units with more than 8 members, add the following for each additional member:

MEDICAL, PH	ARMACY &	DENTAL
≤ 100%	\$	4,480
>100%-133%	\$	5,958
>133%- 166%	\$	7,437
>166%-200%	\$	8,960
>200%	\$	8,961