

2024 Sliding Fee Discount Scale

Please request an application to apply for a discount.

TAX HOUSEHOLD SIZE	ANNUAL INCOME AT OR BELOW 100% OF FPL	ANNUAL INCOME BETWEEN 101-125% OF FPL	ANNUAL INCOME BETWEEN 126-150% OF FPL	ANNUAL INCOME BETWEEN 151-175% OF FPL	ANNUAL INCOME BETWEEN 176-200% OF FPL	ANNUAL INCOME GREATER THAN 200% OF FPL
SLIDE SCALE:	A	B	C	D	E	Not Eligible
1 PERSON H/H	\$0 - \$15,060	\$15,061 - \$18,825	\$18,826 - \$22,590	\$22,591 - \$26,355	\$26,356 - \$30,120	\$30,121 +
2 PERSON H/H	\$0 - \$20,440	\$20,441 - \$25,550	\$25,551 - \$30,660	\$30,661 - \$35,770	\$35,771 - \$40,880	\$40,881 +
3 PERSON H/H	\$0 - \$25,820	\$25,821 - \$32,275	\$32,276 - \$38,730	\$38,731 - \$45,185	\$45,186 - \$51,640	\$51,641 +
4 PERSON H/H	\$0 - \$31,200	\$31,201 - \$39,000	\$39,001 - \$46,800	\$46,801 - \$54,600	\$54,601 - \$62,400	\$62,401 +
5 PERSON H/H	\$0 - \$36,580	\$36,581 - \$45,725	\$45,726 - \$54,870	\$54,871 - \$64,015	\$64,016 - \$73,160	\$73,161 +
6 PERSON H/H	\$0 - \$41,960	\$41,961 - \$52,450	\$52,451 - \$62,940	\$62,941 - \$73,430	\$73,431 - \$83,920	\$83,921 +
7 PERSON H/H	\$0 - \$47,340	\$47,341 - \$59,175	\$59,176 - \$71,010	\$71,011 - \$82,845	\$82,846 - \$94,680	\$94,681 +
8 PERSON H/H	\$0 - \$52,720	\$52,721 - \$65,900	\$65,901 - \$79,080	\$79,081 - \$92,260	\$92,261 - \$105,440	\$105,441 +

*For families/households with more than 8 persons, add \$ 5,380 for each additional person

SLIDING FEE DISCOUNT AMOUNTS BASED ON INCOME LEVELS ABOVE
 (THE OUT OF POCKET AMOUNT YOU PAY FOR SERVICES IF ELIGIBLE FOR A DISCOUNTED FEE)

SLIDE SCALE:	A	B	C	D	E	Not Eligible
MEDICAL	\$0.00	\$5.00	\$10.00	\$15.00	\$20.00	No Discount
DENTAL	\$0.00	\$5.00	\$10.00	\$15.00	\$20.00	No Discount
PSYCHIATRY	\$0.00	\$5.00	\$10.00	\$15.00	\$20.00	No Discount
COUNSELING	\$0.00	\$5.00	\$10.00	\$15.00	\$20.00	No Discount

WHY DO WE OFFER A SLIDING FEE DISCOUNT? Community Clinical Services is a Federally Qualified Health Center (FQHC) - this means that we provide medical, dental and behavioral (mental) health services regardless of a patient's insurance status or ability to pay. We offer an income based Sliding Fee Scale for services at all of our locations including: B-Street Health Center, CCS Pediatrics, CCS Dental, CCS Psychiatry, CCS OutPatient Counseling and CCS School Based Health Centers. Ask our staff if you have any questions or would like an application to apply for our Sliding Fee Discount.

ALL PATIENTS WITH NO INSURANCE OR WHO ARE UNDER INSURED ARE ENCOURAGED TO APPLY IF YOU THINK YOU MEET THE INCOME GUIDELINES ABOVE.

* You may be **Under-Insured** if you have a copay or deductible (out of pocket expense) that you cannot afford. Federal Poverty Level Percentages are based on the HHS FPL Guidelines for 2024:

<https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>