

2026 Sliding Fee Discount Scale - Monthly Gross Income

Family Size									Self Pay
Poverty Level	0%	100%	101%	125%	126%	175%	176%	200%	201% +
All Services	Tier - 1		Tier - 2		Tier - 3		Tier - 4		Tier - 5 Pays 100%
1	\$0.00	\$1,330	\$1,331	\$1,663	\$1,664	\$2,328	\$2,329	\$2,660	\$2,661+
2	\$0.00	\$1,803	\$1,804	\$2,254	\$2,255	\$3,156	\$3,157	\$3,607	\$3,608+
3	\$0.00	\$2,277	\$2,278	\$2,846	\$2,847	\$3,984	\$3,985	\$4,553	\$4,554+
4	\$0.00	\$2,750	\$2,751	\$3,438	\$3,439	\$4,813	\$4,814	\$5,500	\$5,501+
5	\$0.00	\$3,223	\$3,224	\$4,029	\$4,030	\$5,641	\$5,642	\$6,447	\$6,448+
6	\$0.00	\$3,697	\$3,698	\$4,621	\$4,622	\$6,469	\$6,470	\$7,393	\$7,394+
7	\$0.00	\$4,170	\$4,171	\$5,213	\$5,214	\$7,298	\$7,299	\$8,340	\$8,341+
8	\$0.00	\$4,643	\$4,644	\$5,804	\$5,805	\$8,126	\$8,127	\$9,287	\$9,288+
<i>Each add'l member</i>	\$0.00	\$473	\$474	\$592	\$593	\$828	\$829	\$947	\$948
Behavioral Health	\$5		\$15		\$20		\$35		<i>Full Price</i>
Medical	\$5		\$20		\$30		\$50		<i>Full Price</i>
Dental (no tooth replacement)	\$20		\$40		\$60		\$80		<i>Full Price</i>
Dental Lab (tooth replacement)	\$ 20 + lab charge		\$30 + lab charge		\$35 + lab charge		\$40 +lab charge		<i>Full Price</i>
Optometry	\$15		\$20		\$25		\$30		<i>Full Price</i>
Optical (Frames and Lenses)	\$45		\$60		\$75		\$90		<i>Full Price</i>
Pharmacy	340B Drug Cost		340B Drug Cost		340B Drug Cost		340B Drug Cost		<i>340B Drug Cost</i>