

Medical Sliding Fee

Schedule of Income Thresholds Based upon 2024 Federal Poverty Guidelines

*if actual charges are less than amounts shown, patient pays lesser amount

Annual Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00	(A)	(B)	(C)	(D)	100% Pay
Poverty	Nominal Fee ≤100% FPL	\$40.00 ≥ 101-124% FPL	\$50.00 ≥ 125-149% FPL	\$60.00 ≥ 150-174% FPL	\$70.00 ≥ 175-200% FPL	No Discount ≥ 201% FPL
1	0 - \$15,060	\$15,061 - \$18,824	\$18,825 - \$22,589	\$22,590 - \$26,354	\$26,355 - \$30,270	\$30,271+
2	0 - \$20,440	\$20,441 - \$25,549	\$25,550 - \$30,659	\$30,660 - \$35,769	\$35,770 - \$41,084	\$41,085+
3	0 - \$25,820	\$25,821 - \$32,274	\$32,275 - \$38,729	\$38,730 - \$45,184	\$45,185 - \$51,898	\$51,899+
4	0 - \$31,200	\$31,201 - \$38,999	\$39,000 - \$46,799	\$46,800 - \$54,599	\$54,600 - \$62,711	\$62,712+
5	0 - \$36,580	\$36,581 - \$45,724	\$45,725 - \$54,869	\$54,870 - \$64,014	\$64,015 - \$73,525	\$73,526+
6	0 - \$41,960	\$41,961 - \$52,449	\$52,450 - \$62,939	\$62,940 - \$73,429	\$73,430 - \$84,339	\$84,340+
7	0 - \$47,340	\$47,341 - \$59,174	\$59,175 - \$71,009	\$71,010 - \$82,844	\$82,845 - \$95,153	\$95,154+
8	0 - \$52,720	\$52,721 - \$65,899	\$65,900 - \$79,079	\$79,080 - \$92,259	\$92,260 - \$105,967	\$105,968+

Note: The income ceiling for the nominal fee pay class is equal to the federal poverty level. For families/households with more than 8 persons, add \$5,380 for each additional person

Monthly Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee	(A) \$40.00	(B) \$50.00	(C) \$60.00	(D) \$70.00	100% Pay No Discount
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL
1	0 - \$1,255	\$1,256 - \$1,568	\$1,569 - \$1,882	\$1,883 - \$2,196	\$2,197 - \$2,522	\$2,523+
2	0 - \$1,703	\$1,704 - \$2,129	\$2,130 - \$2,554	\$2,555 - \$2,980	\$2,981 - \$3,423	\$3,424+
3	0 - \$2,152	\$2,153 - \$2,689	\$2,690 - \$3,227	\$3,228 - \$3,765	\$3,766 - \$4,324	\$4,325+
4	0 - \$2,600	\$2,601 - \$3,249	\$3,250 - \$3,899	\$3,900 - \$4,549	\$4,550 - \$5,225	\$5,226+
5	0 - \$3,048	\$3,049 - \$3,810	\$3,811 - \$4,572	\$4,573 - \$5,334	\$5,335 - \$6,127	\$6,128+
6	0 - \$3,497	\$3,498 - \$4,370	\$4,371 - \$5,244	\$5,245 - \$6,119	\$6,120 - \$7,028	\$7,029+
7	0 - \$3,945	\$3,946 - \$4,931	\$4,932 - \$5,917	\$5,918 - \$6,903	\$6,904 - \$7,929	\$7,930+
8	0 - \$4,393	\$4,394 - \$5,491	\$5,492 - \$6,589	\$6,590 - \$7,688	\$7,689 - \$8,830	\$8,831+

Note: The monthly schedule is equal to the annual schedule divided by 12 months.



Radiology & Sonography Sliding Fee

Schedule of Income Thresholds Based upon 2024 Federal Poverty Guidelines

*if actual charges are less than amounts shown, patient pays lesser amount

Annual Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee *per procedure	(A) \$45.00 *per procedure	(B) \$55.00 *per procedure	(C) \$65.00 *per procedure	(D) \$75.00 *per procedure	100% Pay No Discount
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL
1	0 - \$15,060	\$15,061 - \$18,824	\$18,825 - \$22,589	\$22,590 - \$26,354	\$26,355 - \$30,270	\$30,271+
2	0 - \$20,440	\$20,441 - \$25,549	\$25,550 - \$30,659	\$30,660 - \$35,769	\$35,770 - \$41,084	\$41,085+
3	0 - \$25,820	\$25,821 - \$32,274	\$32,275 - \$38,729	\$38,730 - \$45,184	\$45,185 - \$51,898	\$51,899+
4	0 - \$31,200	\$31,201 - \$38,999	\$39,000 - \$46,799	\$46,800 - \$54,599	\$54,600 - \$62,711	\$62,712+
5	0 - \$36,580	\$36,581 - \$45,724	\$45,725 - \$54,869	\$54,870 - \$64,014	\$64,015 - \$73,525	\$73,526+
6	0 - \$41,960	\$41,961 - \$52,449	\$52,450 - \$62,939	\$62,940 - \$73,429	\$73,430 - \$84,339	\$84,340+
7	0 - \$47,340	\$47,341 - \$59,174	\$59,175 - \$71,009	\$71,010 - \$82,844	\$82,845 - \$95,153	\$95,154+
8	0 - \$52,720	\$52,721 - \$65,899	\$65,900 - \$79,079	\$79,080 - \$92,259	\$92,260 - \$105,967	\$105,968+

Note: The income ceiling for the nominal fee pay class is equal to the federal poverty level.

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

Monthly Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee *per procedure	(A) \$45.00 *per procedure	(B) \$55.00 *per procedure	(C) \$65.00 *per procedure	(D) \$75.00 *per procedure	100% Pay No Discount	
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL	
1	0 - \$1,255	\$1,256 - \$1,568	\$1,569 - \$1,882	\$1,883 - \$2,196	\$2,197 - \$2,522	\$2,523+	
2	0 - \$1,703	\$1,704 - \$2,129	\$2,130 - \$2,554	\$2,555 - \$2,980	\$2,981 - \$3,423	\$3,424+	
3	0 - \$2,152	\$2,153 - \$2,689	\$2,690 - \$3,227	\$3,228 - \$3,765	\$3,766 - \$4,324	\$4,325+	
4	0 - \$2,600	\$2,601 - \$3,249	\$3,250 - \$3,899	\$3,900 - \$4,549	\$4,550 - \$5,225	\$5,226+	
5	0 - \$3,048	\$3,049 - \$3,810	\$3,811 - \$4,572	\$4,573 - \$5,334	\$5,335 - \$6,127	\$6,128+	
6	0 - \$3,497	\$3,498 - \$4,370	\$4,371 - \$5,244	\$5,245 - \$6,119	\$6,120 - \$7,028	\$7,029+	
7	0 - \$3,945	\$3,946 - \$4,931	\$4,932 - \$5,917	\$5,918 - \$6,903	\$6,904 - \$7,929	\$7,930+	
8	0 - \$4,393	\$4,394 - \$5,491	\$5,492 - \$6,589	\$6,590 - \$7,688	\$7,689 - \$8,830	\$8,831+	
Note: The monthly schodule is equal to the appeal schodule divided by 12 months							

<u>Note:</u> The monthly schedule is equal to the annual schedule divided by 12 months.



Mammography Sliding Fee

Schedule of Income Thresholds Based upon 2024 Federal Poverty Guidelines

*if actual charges are less than amounts shown, patient pays lesser amount

Annual Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee	(A) \$50.00	(B) \$75.00	(C) \$100.00	(D) \$125.00	100% Pay No Discount
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL
1	0 - \$15,060	\$15,061 - \$18,824	\$18,825 - \$22,589	\$22,590 - \$26,354	\$26,355 - \$30,270	\$30,271+
2	0 - \$20,440	\$20,441 - \$25,549	\$25,550 - \$30,659	\$30,660 - \$35,769	\$35,770 - \$41,084	\$41,085+
3	0 - \$25,820	\$25,821 - \$32,274	\$32,275 - \$38,729	\$38,730 - \$45,184	\$45,185 - \$51,898	\$51,899+
4	0 - \$31,200	\$31,201 - \$38,999	\$39,000 - \$46,799	\$46,800 - \$54,599	\$54,600 - \$62,711	\$62,712+
5	0 - \$36,580	\$36,581 - \$45,724	\$45,725 - \$54,869	\$54,870 - \$64,014	\$64,015 - \$73,525	\$73,526+
6	0 - \$41,960	\$41,961 - \$52,449	\$52,450 - \$62,939	\$62,940 - \$73,429	\$73,430 - \$84,339	\$84,340+
7	0 - \$47,340	\$47,341 - \$59,174	\$59,175 - \$71,009	\$71,010 - \$82,844	\$82,845 - \$95,153	\$95,154+
8	0 - \$52,720	\$52,721 - \$65,899	\$65,900 - \$79,079	\$79,080 - \$92,259	\$92,260 - \$105,967	\$105,968+

Note: The income ceiling for the nominal fee pay class is equal to the federal poverty level. For families/households with more than 8 persons, add \$5,380 for each additional person

Monthly Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee	(A) \$50.00	(B) \$75.00	(C) \$100.00	(D) \$125.00	100% Pay No Discount
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL
1	0 - \$1,255	\$1,256 - \$1,568	\$1,569 - \$1,882	\$1,883 - \$2,196	\$2,197 - \$2,522	\$2,523+
2	0 - \$1,703	\$1,704 - \$2,129	\$2,130 - \$2,554	\$2,555 - \$2,980	\$2,981 - \$3,423	\$3,424+
3	0 - \$2,152	\$2,153 - \$2,689	\$2,690 - \$3,227	\$3,228 - \$3,765	\$3,766 - \$4,324	\$4,325+
4	0 - \$2,600	\$2,601 - \$3,249	\$3,250 - \$3,899	\$3,900 - \$4,549	\$4,550 - \$5,225	\$5,226+
5	0 - \$3,048	\$3,049 - \$3,810	\$3,811 - \$4,572	\$4,573 - \$5,334	\$5,335 - \$6,127	\$6,128+
6	0 - \$3,497	\$3,498 - \$4,370	\$4,371 - \$5,244	\$5,245 - \$6,119	\$6,120 - \$7,028	\$7,029+
7	0 - \$3,945	\$3,946 - \$4,931	\$4,932 - \$5,917	\$5,918 - \$6,903	\$6,904 - \$7,929	\$7,930+
8	0 - \$4,393	\$4,394 - \$5,491	\$5,492 - \$6,589	\$6,590 - \$7,688	\$7,689 - \$8,830	\$8,831+

Note: The monthly schedule is equal to the annual schedule divided by 12 months.



Synergy - Outside Laboratory Sliding Fee

Schedule of Income Thresholds Based upon 2024 Federal Poverty Guidelines

*if actual charges are less than amounts shown, patient pays lesser amount

Annual Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee	(A) \$40.00	(B) \$50.00	(C) \$60.00	(D) \$70.00	100% Pay No Discount
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL
1	0 - \$15,060	\$15,061 - \$18,824	\$18,825 - \$22,589	\$22,590 - \$26,354	\$26,355 - \$30,270	\$30,271+
2	0 - \$20,440	\$20,441 - \$25,549	\$25,550 - \$30,659	\$30,660 - \$35,769	\$35,770 - \$41,084	\$41,085+
3	0 - \$25,820	\$25,821 - \$32,274	\$32,275 - \$38,729	\$38,730 - \$45,184	\$45,185 - \$51,898	\$51,899+
4	0 - \$31,200	\$31,201 - \$38,999	\$39,000 - \$46,799	\$46,800 - \$54,599	\$54,600 - \$62,711	\$62,712+
5	0 - \$36,580	\$36,581 - \$45,724	\$45,725 - \$54,869	\$54,870 - \$64,014	\$64,015 - \$73,525	\$73,526+
6	0 - \$41,960	\$41,961 - \$52,449	\$52,450 - \$62,939	\$62,940 - \$73,429	\$73,430 - \$84,339	\$84,340+
7	0 - \$47,340	\$47,341 - \$59,174	\$59,175 - \$71,009	\$71,010 - \$82,844	\$82,845 - \$95,153	\$95,154+
8	0 - \$52,720	\$52,721 - \$65,899	\$65,900 - \$79,079	\$79,080 - \$92,259	\$92,260 - \$105,967	\$105,968+

<u>Note:</u> The income ceiling for the nominal fee pay class is equal to the federal poverty level. For families/households with more than 8 persons, add \$5,380 for each additional person

Monthly Income Thresholds by Sliding Fee Discount Pay Class and % of Poverty

Family Unit Size	\$25.00 Nominal Fee	(A) \$40.00	(B) \$50.00	(C) \$60.00	(D) \$70.00	100% Pay No Discount
Poverty	≤100% FPL	≥ 101-124% FPL	≥ 125-149% FPL	≥ 150-174% FPL	≥ 175-200% FPL	≥ 201% FPL
1	0 - \$1,255	\$1,256 - \$1,568	\$1,569 - \$1,882	\$1,883 - \$2,196	\$2,197 - \$2,522	\$2,523+
2	0 - \$1,703	\$1,704 - \$2,129	\$2,130 - \$2,554	\$2,555 - \$2,980	\$2,981 - \$3,423	\$3,424+
3	0 - \$2,152	\$2,153 - \$2,689	\$2,690 - \$3,227	\$3,228 - \$3,765	\$3,766 - \$4,324	\$4,325+
4	0 - \$2,600	\$2,601 - \$3,249	\$3,250 - \$3,899	\$3,900 - \$4,549	\$4,550 - \$5,225	\$5,226+
5	0 - \$3,048	\$3,049 - \$3,810	\$3,811 - \$4,572	\$4,573 - \$5,334	\$5,335 - \$6,127	\$6,128+
6	0 - \$3,497	\$3,498 - \$4,370	\$4,371 - \$5,244	\$5,245 - \$6,119	\$6,120 - \$7,028	\$7,029+
7	0 - \$3,945	\$3,946 - \$4,931	\$4,932 - \$5,917	\$5,918 - \$6,903	\$6,904 - \$7,929	\$7,930+
8	0 - \$4,393	\$4,394 - \$5,491	\$5,492 - \$6,589	\$6,590 - \$7,688	\$7,689 - \$8,830	\$8,831+

Note: The monthly schedule is equal to the annual schedule divided by 12 months.