

2025 Primary Care Sliding Fee Scale

We offers a sliding fee scale discount program based on income for patients who are insured, uninsured and underinsured, providing access to healthcare for all. Please see front desk for more information.

Persons in Household	2025 Sliding Scale																					
	New Patient Pays: \$30 Established Patient Pays: \$30			New Patient Pays: \$35 Established Patient Pays: \$35			New Patient Pays: \$50 Established Patient Pays: \$50			New Patient Pays: \$70 Established Patient Pays: \$70			New Patient Pays: \$90 Established Patient Pays: \$90			New Patient Pays: Full Charge Established Patient Pays: Full Charge						
	Level A			Level B			Level C			Level D			Level E			Level F						
	100% of Federal Poverty Level - Dollars Per Year			From	To	From	To	From	To	From	To	From	To	> 200% of Federal Poverty Level								
1	< or =		\$	1	\$	-	\$	1	\$	-	\$	1	\$	-	>	\$	-					
2	< or =	\$	21,150	\$	21,151	\$	26,438	\$	26,439	\$	31,725	\$	31,726	\$	37,013	\$	37,014	\$	42,300	>	\$	42,300
3	< or =	\$	26,650	\$	26,651	\$	33,313	\$	33,314	\$	39,975	\$	39,976	\$	46,638	\$	46,639	\$	53,300	>	\$	53,300
4	< or =	\$	32,150	\$	32,151	\$	40,188	\$	40,189	\$	48,225	\$	48,226	\$	56,263	\$	56,264	\$	64,300	>	\$	64,300
5	< or =	\$	37,650	\$	37,651	\$	47,063	\$	47,064	\$	56,475	\$	56,476	\$	65,888	\$	65,889	\$	75,300	>	\$	75,300
6	< or =	\$	43,150	\$	43,151	\$	53,938	\$	53,939	\$	64,725	\$	64,726	\$	75,513	\$	75,514	\$	86,300	>	\$	86,300
7	< or =	\$	48,650	\$	48,651	\$	60,813	\$	60,814	\$	72,975	\$	72,976	\$	85,138	\$	85,139	\$	97,300	>	\$	97,300
8	< or =	\$	54,150	\$	54,151	\$	67,688	\$	67,689	\$	81,225	\$	81,226	\$	94,763	\$	94,764	\$	108,300	>	\$	108,300

For families/households with more than 8 persons, add \$5,500 for each additional person

Se lo ofrecemos un descuento en base a sus ingresos mensuales a los pacientes asegurados, sin seguro y con seguro insuficiente. Para más información, pregunte en recepción.

Numero de Personas en el Hogar		2025 Niveles de Costos																				
		Nuevo Paciente Paga: \$30		Nuevo Paciente Paga: \$35		Nuevo Paciente Paga: \$50		Nuevo Paciente Paga: \$70		Nuevo Paciente Paga: \$90		Nuevo Paciente Paga: Cargo Completo										
		Paciente Establecido Paga: \$30		Paciente Establecido Paga: \$35		Paciente Establecido Paga: \$50		Paciente Establecido Paga: \$70		Paciente Establecido Paga: \$90		Paciente Establecido Paga: Cargo Completo										
		Nivel A		Nivel B		Nivel C		Nivel D		Nivel E		Nivel F										
		100% del Nivel Federal de Pobreza		De	Al	De	Al	De	Al	De	Al	> 200% del Nivel Federal de Pobreza										
1	< o =	\$	-	\$	1	\$	-	\$	1	\$	-	\$	1	\$	-	>	\$	-				
2	< o =	\$	21,150	\$	21,151	\$	26,438	\$	26,439	\$	31,725	\$	31,726	\$	37,013	\$	37,014	\$	42,300	>	\$	42,300
3	< o =	\$	26,650	\$	26,651	\$	33,313	\$	33,314	\$	39,975	\$	39,976	\$	46,638	\$	46,639	\$	53,300	>	\$	53,300
4	< o =	\$	32,150	\$	32,151	\$	40,188	\$	40,189	\$	48,225	\$	48,226	\$	56,263	\$	56,264	\$	64,300	>	\$	64,300
5	< o =	\$	37,650	\$	37,651	\$	47,063	\$	47,064	\$	56,475	\$	56,476	\$	65,888	\$	65,889	\$	75,300	>	\$	75,300
6	< o =	\$	43,150	\$	43,151	\$	53,938	\$	53,939	\$	64,725	\$	64,726	\$	75,513	\$	75,514	\$	86,300	>	\$	86,300
7	< o =	\$	48,650	\$	48,651	\$	60,813	\$	60,814	\$	72,975	\$	72,976	\$	85,138	\$	85,139	\$	97,300	>	\$	97,300
8	< o =	\$	54,150	\$	54,151	\$	67,688	\$	67,689	\$	81,225	\$	81,226	\$	94,763	\$	94,764	\$	108,300	>	\$	108,300

Para los hogares con más de 8 personas, añada \$5,500 por cada persona adicional.