

Eagle View Community Health System Sliding Fee Discount Scale

Effective January 24, 2023

This table is based on *annual* household income.

Family Size	Category A 100% or below of FPL	Category B 101% - 133% or below of FPL	Category C 134% - 167% or below of FPL	Category D 168% - 199% or below of FPL	Category E 200% + of FPL
	Nominal Fee Medical: \$30 Dental: \$50	Nominal Fee Medical: \$40 Dental: \$60	Nominal Fee Medical: \$50 Dental: \$75	Nominal Fee Medical: \$65 Dental: \$90	Not Eligible for Sliding Fee Discount
1	0- \$14,580	\$14,581- \$19,391	\$19,392 - \$24,349	\$24,350- \$29,014	\$29,015 and over
2	0- \$19,720	\$19,721- \$26,228	\$26,228 - \$32,932	\$32,933- \$39,243	\$39,244 and over
3	0- \$24,860	\$24,861- \$33,064	\$33,065 - \$41,516	\$41,517- \$49,471	\$49,472 and over
4	0- \$30,000	\$30,001- \$39,900	\$39,901 - \$50,100	\$50,101- \$59,700	\$59,701 and over
5	0- \$35,140	\$35,141- \$46,736	\$46,737 - \$58,684	\$58,685- \$69,929	\$69,930 and over
6	0- \$40,280	\$40,281- \$53,572	\$53,573 - \$67,268	\$67,269- \$80,157	\$80,158 and over
7	0- \$45,420	\$45,421- \$60,409	\$60,410 - \$75,851	\$75,852- \$90,386	\$90,387 and over
8	0- \$50,560	\$50,561- \$67,245	\$67,246 - \$84,435	\$84,436- \$100,614	\$100,615 and over

For each additional family member add \$5,140.

These discounts are available for both medical, dental and behavioral health visits at all Eagle View Community Health System sites.

Current “Nominal Fee”: *(subject to change)*

	Category A	Category B	Category C	Category D	Category E
Medical Lab	\$ 0	60% Discount	50% Discount	40% Discount	Full Charges
Dental Lab	\$50.00 + cost	40% Discount	30% Discount	20% Discount	Full Charges
Dental Major	\$50.00 + cost	40% Discount	30% Discount	20% Discount	Full Charges

To apply for our sliding fee discount, a simple application must be completed, and proof of income presented. Our staff will be happy to assist you in completing the application if needed. Example documents for “proof of income”: Most recent 1040 tax form or most recent W-2 form, or paycheck stub, or social security statement, or child support statement. Applications can be processed at the time of the visit, if all applicable information is available including proof of income.

If you have questions or need more information regarding our sliding fee discount, please contact us at our toll-free number of 1-866-349-1337.

These are tough times; let us help you with your healthcare needs!