

HEALTHCARE CHOICES, INC.

Medical Sliding Fee Schedule

Poverty Thresholds

Effective Date 3/19/2019

Full Fee if no
Documentation, or
doesn't meet Sliding
Fee Discount
Measures

HCC Medical & Social Work FEE Schedule	\$ 10.00	\$ 20.00	\$ 30.00	\$ 45.00	\$ 100.00	\$ 125.00	\$ 300.00
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% of Federal Poverty Level	0% - 100%	101% - 125%	126% - 150%	151% - 175%	176% - 200%	201% - 400%	>=401%
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Family Size	A	B	C	D	E	F	G
1	12,490	15,613	18,735	21,858	24,980	49,960	50,085
2	16,910	21,138	25,365	29,593	33,820	67,640	67,809
3	21,330	26,663	31,995	37,328	42,660	85,320	85,533
4	25,750	32,188	38,625	45,063	51,500	103,000	103,258
5	30,170	37,713	45,255	52,798	60,340	120,680	120,982
6	34,590	43,238	51,885	60,533	69,180	138,360	138,706
7	39,010	48,763	58,515	68,268	78,020	156,040	156,430
8	43,430	54,288	65,145	76,003	86,860	173,720	174,154

HEALTHCARE CHOICES, INC.

Dental Sliding Fee Schedule

Poverty Thresholds

Effective Date 3/19/2019

HCC Dental FEE Schedule	\$ 45.00	\$ 50.00	\$ 60.00	\$ 75.00	\$ 100.00	\$ 125.00	\$ 300.00
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% of Federal Poverty Level	0% - 100%	101% - 125%	126% - 150%	151% - 175%	176% - 200%	201% - 400%	>=401%
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Family Size	A	B	C	D	E	F	G
1	12,490	15,613	18,735	21,858	24,980	49,960	50,085
2	16,910	21,138	25,365	29,593	33,820	67,640	67,809
3	21,330	26,663	31,995	37,328	42,660	85,320	85,533
4	25,750	32,188	38,625	45,063	51,500	103,000	103,258
5	30,170	37,713	45,255	52,798	60,340	120,680	120,982
6	34,590	43,238	51,885	60,533	69,180	138,360	138,706
7	39,010	48,763	58,515	68,268	78,020	156,040	156,430
8	43,430	54,288	65,145	76,003	86,860	173,720	174,154

HEALTHCARE CHOICES, INC.

Psychiatry Sliding Fee Schedule

Poverty Thresholds

Effective Date 3/19/2019

HCC Psychiatry FEE Schedule	\$ 65.00	\$ 70.00	\$ 75.00	\$ 80.00	\$ 100.00	\$ 125.00	\$ 300.00
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% of Federal Poverty Level	0% - 100%	101% - 125%	126% - 150%	151% - 175%	176% - 200%	201% - 400%	>=401%
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Family Size	A	B	C	D	E	F	G
1	12,490	15,613	18,735	21,858	24,980	49,960	50,085
2	16,910	21,138	25,365	29,593	33,820	67,640	67,809
3	21,330	26,663	31,995	37,328	42,660	85,320	85,533
4	25,750	32,188	38,625	45,063	51,500	103,000	103,258
5	30,170	37,713	45,255	52,798	60,340	120,680	120,982
6	34,590	43,238	51,885	60,533	69,180	138,360	138,706
7	39,010	48,763	58,515	68,268	78,020	156,040	156,430
8	43,430	54,288	65,145	76,003	86,860	173,720	174,154

For Family/households @ Level A with more then 9 persons, add \$4,420 for each additional person
 For Family/households @ Level B with more then 9 persons, add \$5,525 for each additional person
 For Family/households @ Level C with more then 9 persons, add \$6,630 for each additional person
 For Family/households @ Level D with more then 9 persons, add \$7,735 for each additional person
 For Family/households @ Level E with more then 9 persons, add \$8,840 for each additional person
 For Family/households @ Level F with more then 9 persons, add \$17,680 for each additional person
 For Family/households @ Level F with more then 9 persons, add \$17,724 for each additional person

Cash Discount Available to \$125 If over 401%
 FPL and making Payment At time of Visit