

Traverse Health Clinic
Sliding Fee Scale - Yearly Income

Updated January 2026

Persons in family (according to tax return)	Patient pays \$10 if family annual income is at or below 100% FPL	Patient pays \$15 if family annual income is greater than 100% FPL and up to and including 150%	Patient pays \$20 if family annual income is greater than 150% FPL and up to and including 175%	Patient pays \$25 if family annual income is greater than 175% FPL and up to and including 200%	Patient pays 100% of charges if family annual income is greater than 200% FPL
	100% Federal Poverty Level	150% FPL	175% FPL	200% FPL	Income <u>more</u> than
1	\$15,960	\$23,940	\$27,930	\$31,920	\$31,920
2	\$21,640	\$32,460	\$37,870	\$43,280	\$43,280
3	\$27,320	\$40,980	\$47,810	\$54,640	\$54,640
4	\$33,000	\$49,500	\$57,750	\$66,000	\$66,000
5	\$38,680	\$58,020	\$67,690	\$77,360	\$77,360
6	\$44,360	\$66,540	\$77,630	\$88,720	\$88,720
7	\$50,040	\$75,060	\$87,570	\$100,080	\$100,080
8	\$55,720	\$83,580	\$97,510	\$111,440	\$111,440
For each additional family member, add	\$5,680	\$8,520	\$9,940	\$11,360	

NOTICE TO PATIENTS: *This practice serves all patients regardless of inability to pay. Discounts for essential services are offered based on your family size & income. For more information, ask at the front desk or visit our website. Thank you!*