

Traverse Health Clinic
Sliding Fee Scale

Updated February 2023

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	\$14,580	\$21,870	\$25,515	\$29,160	\$29,160
2	\$19,720	\$29,580	\$34,510	\$39,440	\$39,440
3	\$24,860	\$37,290	\$43,505	\$49,720	\$49,720
4	\$30,000	\$45,000	\$52,500	\$60,000	\$60,000
5	\$35,140	\$52,710	\$61,495	\$70,280	\$70,280
6	\$40,280	\$60,420	\$70,490	\$80,560	\$80,560
7	\$45,420	\$68,130	\$79,485	\$90,840	\$90,840
8	\$50,560	\$75,840	\$88,480	\$101,120	\$101,120
For each additional family member, add	\$5,140	\$7,710	\$8,995	\$10,280	

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!*