Traverse Health Clinic Sliding Fee Scale

Persons in family (according to tax return)	Patient pays \$20 if family annual income is at or below 100% FPL	Patient pays \$30 if family annual income is > 100% FPL and up to and including 150%	Patient pays \$40 if family annual income is > 150% FPL and up to and including 175%	Patient pays \$50 if family annual income is > 175% FPL and up to and including 200%	income is > 200% FPL
	100% Federal Poverty Level	150% FPL	175% FPL	200% FPL	Income <u>more</u> than
1	\$12,880	\$19,320	\$22,540	\$25,760	\$25,760
2	\$17,420	\$26,130	\$30,485	\$34,840	\$34,840
3	\$21,960	\$32,940	\$38,430	\$43,920	\$43,920
4	\$26,500	\$39,750	\$46,375	\$53,000	\$53,000
5	\$31,040	\$46,560	\$54,320	\$62,080	\$62,080
6	\$35,580	\$53,370	\$62,265	\$71,160	\$71,160
7	\$40,120	\$60,180	\$70,210	\$80,240	\$80,240
8	\$44,660	\$66,990	\$78,155	\$89,320	\$89,320
For each additional family member, add	\$4,540	\$6,810	\$7,945	\$9,080	

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