CENTRAL NEIGHBORHOOD HEALTH FOUNDATION SLIDING FEE DISCOUNT SCHEDULE 2023

Medical/Behavioral Health Self-Pay Discount Schedule Based on 2023 Federal Poverty Guidelines

	≤ 100%		> 100% ≤ 125%		> 125% ≤ 150%		> 150% ≤ 175%		> 175% ≤ 200%		> 200%
S/P Nominal	\$25 - Nominal **		\$35.00		\$45.00		\$55.00		\$65.00		Full Fees
Slide	0% - Slide A		80% - Slide B		60% - Slide C		40% - Slide D		20% - Slide E		100% - Full Fee
Family Size	Annual Income										
1	\$0	\$14,580	\$14,581	\$18,225	\$18,226	\$21,870	\$21,871	\$25,515	\$25,516	\$29,160	\$29,161 and above
2	\$0	\$19,720	\$19,721	\$24,650	\$24,651	\$29,580	\$29,581	\$34,510	\$34,511	\$39,440	\$39,441 and above
3	\$0	\$24,860	\$24,861	\$31,075	\$31,076	\$37,290	\$37,291	\$43,505	\$43,506	\$49,720	\$49,721 and above
4	\$0	\$30,000	\$30,001	\$37,500	\$37,501	\$45,000	\$45,001	\$52,500	\$52,501	\$60,000	\$60,001 and above
5	\$0	\$35,140	\$35,141	\$43,925	\$43,926	\$52,710	\$52,711	\$61,495	\$61,496	\$70,280	\$70,281 and above
6	\$0	\$40,280	\$40,281	\$50,350	\$50,351	\$60,420	\$60,421	\$70,490	\$70,491	\$80,560	\$80,561 and above
7	\$0	\$45,420	\$45,421	\$56,775	\$56,776	\$68,130	\$68,131	\$79,485	\$79,486	\$90,840	\$90,841 and above
8	\$0	\$50,560	\$50,561	\$63,200	\$63,201	\$75,840	\$75,841	\$88,480	\$88,481	\$101,120	\$101,121 and above
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For each additional person [add]	\$5,140		\$6,425		\$7,710		\$8,995		\$10,280		\$10,280

^{*}Full Fee per procedure code was determined based on locally prevailing rates or charges and designed to cover reasonable cost of operation

Chief Executive Officer Date

*Based on 2023 Federal Poverty Guidelines published in the Federal Register January 19, 2023

https://aspe.hhs.gov

This Sliding Fee Schedule becomes applicable from the date of Board approval below until the date the Board approves the 2023 Sliding Fee Schedule
Board of Directors, Chairperson Date

^{**} Nominal Fee is inclusive of office visit (new or established) and basic in-house labs

^{***}Outside labs and additional services are based on percentage discount and/or separate minimum fees listed on CNHF fee schedule.

^{****}No discounts are provided to patients over 200% of Federal Poverty Guidelines.