

Our Sliding Fee Scale

Care Alliance is pleased to provide services to our uninsured or underinsured patients on a discounted, sliding fee schedule based on income. A patient's bill is calculated as follows:

Family Size	Slide Scale A (0% to 100% FPL)		Slide Scale B (101% to 125% FPL)		Slide Scale C (126% to 150% FPL)		Slide Scale D (151% to 175% FPL)		Slide Scale E (176% to 200% FPL)		Slide Scale F (201% and above FPL)
	From	To	From	To	From	To	From	To	From	To	More Than
1	0	\$10,890	\$10,891	\$13,613	\$13,614	\$16,335	\$16,336	\$19,058	\$19,059	\$21,780	\$21,780
2	0	14,710	14,711	18,388	18,389	22,065	22,066	25,743	25,744	29,420	29,420
3	0	18,530	18,531	23,163	23,164	27,795	27,796	32,428	32,429	37,060	37,060
4	0	22,350	22,351	27,938	27,939	33,525	33,526	39,113	39,114	44,700	44,700
5	0	26,170	26,171	32,713	32,714	39,255	39,256	45,795	45,799	52,340	52,340
6	0	29,990	29,991	37,488	37,489	44,985	44,986	52,483	52,484	59,980	59,980

Charges

	Slide Scale A (0% to 100% FPL)	Slide Scale B (101% to 125% FPL)	Slide Scale C (126% to 150% FPL)	Slide Scale D (151% to 175% FPL)	Slide Scale E (176% to 200% FPL)	Slide Scale F (201% and above FPL)
Medical & Dental Visits	No Charge	\$10	\$20	\$30	\$40	Full Fee
Prescriptions	No Charge	\$5	\$10	\$15	\$20	Full Fee
Dentures/ Partials*	\$50	\$100	\$200	\$300	\$400	Full Fee
Major Dental Work	25%	40%	55%	70%	85%	Full Fee

*The charge for dentures and partials is a one-time fee. For other procedures (crowns, bridges, root canals, etc.) patients are charged a percentage of the full fee, based on family size and income. SOURCE OF FPL INFORMATION: Federal Register, Vol. 76, No. 13, January 20, 2011, pp 3637-3638

Patients living below 100% of the FPL receive the majority of care at no cost thanks to funding from the Bureau of Primary Health Care, the United Way Services, local foundations and individual donors.

