

CARE ALLIANCE SLIDING FEE SCHEDULE

Effective March 1, 2023 Care Alliance is pleased to provide services to you today on a discounted, sliding fee schedule based on your income and family size according to Federal Poverty Level (FPL) guidelines. Your bill for today's service will be calculated as follows:

Family Size	SLIDE SCALE A (0%-100% FPL)		SLIDE SCALE B (101%-125% FPL)		SLIDE SCALE C (126%-150% FPL)		SLIDE SCALE D (151%-175% FPL)		SLIDE SCALE E (176% - 200% FPL)		SLIDE SCALE F (201% and above FPL)
	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	MORE THAN
1	0	\$14,580	\$14,581	\$18,225	\$18,226	\$21,870	\$21,871	\$25,515	\$25,516	\$29,160	\$29,160
2	0	19,720	19,721	24,650	24,651	29,580	29,581	34,510	34,511	39,440	39,440
3	0	24,860	24,861	31,075	31,076	37,290	37,291	43,505	43,506	49,720	49,720
4	0	30,000	30,001	37,500	37,501	45,000	45,001	52,500	52,501	60,000	60,000
5	0	35,140	35,141	43,925	43,926	52,710	52,711	61,495	61,496	70,280	70,280
6	0	40,280	40,281	50,350	50,351	60,420	60,421	70,490	70,491	80,560	80,560
7	0	45,420	45,421	56,775	56,776	68,130	68,131	79,485	79,486	90,840	90,840
8	0	\$50,560	\$50,561	\$63,200	\$63,201	\$75,840	\$75,841	\$88,480	\$88,481	\$101,120	\$101,120

CHARGES						
Medical Visits*	\$4	\$10	\$15	\$20	\$25	Full Fee
Behavioral Health Visits	\$4	\$10	\$15	\$20	\$25	Full Fee
Dental Visits	\$20	\$25	\$35	\$45	\$55	Full Fee
Dentures/ Resin Partials**	\$350	\$400	\$500	\$600	\$700	Full Fee
Crowns (PFM, Porcelain)**	\$300	\$400	\$500	\$600	\$700	Full Fee
Cast Partials***	\$400	40% of Full Fee	55% of Full Fee	70% of Full Fee	85% of Full Fee	Full Fee
Other Major Dental work*** (RCT, add tooth etc.)	\$400	45% of Full Fee	55% of Full Fee	70% of Full Fee	85% of Full Fee	Full Fee

For families /households with more than 8 persons add \$5,140 for each additional member

IMPORTANT!

If you are single and your income is below \$14,580 the majority of your bill will be paid with funding we receive from the Bureau of Primary Health Care, local foundations and other contributions.

*There are additional fees, based on family size and income, for devices such as Long Acting Reversible Contraception (LARC). You will be notified in advance to discuss options, including payment.

The charge for dentures & resin partials and crowns is a one-time fee. *For other procedures considered major dental work, i.e., cast partials, bridges, root canals, etc., you will be charged flat fee for Slide Scale A and a percentage of the full fee for all other Slide Scales based on family size and income. Please speak with a Patient Service Representative regarding any questions about this Sliding Fee Schedule and program including definition of income and family size. Please see our pharmacy for questions regarding cost of prescriptions, which are NOT part of this Fee Schedule.