



## DAILY PLANET HEALTH SERVICES SLIDING FEE SCHEDULE

Effective March 1, 2018

Percent Poverty Level	FPL 0-100%	101- 125%	126- 150%	151%- 200%	>200%
<b>DENTAL SERVICES</b>					
	<i>Nominal Fee</i>	<i>SLIDE A</i>	<i>SLIDE B</i>	<i>SLIDE C</i>	Full Fee
	\$50.00	60%	70%	80%	100%
<b>MEDICAL SERVICES</b>					
	<i>Nominal Fee</i>	<i>SLIDE A</i>	<i>SLIDE B</i>	<i>SLIDE C</i>	Full Fee
	\$10.00	\$15.00	\$20.00	\$30.00	100%
<b>VISION CARE</b>					
	<i>Nominal Fee</i>	<i>SLIDE A</i>	<i>SLIDE B</i>	<i>SLIDE C</i>	Full Fee
	\$55.00	\$70.00	\$80.00	\$95.00	100%
<b>BEHAVIORAL HEALTH SERVICES</b>					
	<i>Nominal Fee</i>	<i>SLIDE A</i>	<i>SLIDE B</i>	<i>SLIDE C</i>	Full Fee
Initial (ea. Calendar Month)	\$10.00	\$15.00	\$20.00	\$30.00	100%
2nd Visit (ea. Calendar Month)	\$5.00	\$10.00	\$15.00	\$25.00	
3rd Visit (ea. Calendar Month)	\$5.00	\$5.00	\$5.00	\$5.00	
All other Visits (ea. Calendar Month)	\$5.00	\$5.00	\$5.00	\$5.00	
<b>SUBSTANCE USE TREATMENT CLINIC ONLY</b>					
	<i>Nominal Fee</i>	<i>SLIDE A</i>	<i>SLIDE B</i>	<i>SLIDE C</i>	Full Fee
(H0014)- Initial Visit (one time)	\$25.00	\$50.00	\$75.00	\$100.00	100%
All other visits	\$10.00	\$15.00	\$20.00	\$30.00	

Full Discount available for persons with incomes below 100% FPL

DISCOUNT FOR MULTIPLE BEHAVIORAL HEALTH VISITS ---WITHIN A CALENDAR MONTH--- SLIDE REDUCED BY \$5.00 PER VISIT.

Daily Planet Health Services uses 2018 HHS Poverty Guidelines in determining percent of poverty. eClinicalWorks (EMR) automatically calculates and assigns a slide based on income entered.

**2018 FEDERAL POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA**

**2018 FPL and Family Size**

<b>Family Size</b>	<b>100% Annual FPL</b>
1	\$12,140
2	\$16,460
3	\$20,780
4	\$25,100
5	\$29,420
6	\$33,740
7	\$38,060
8	\$42,380
Each Additional Person	\$4,320