

## 2025 Sliding Fee Scale – Medical and Behavioral Health

<i>Family Size</i>	<i>At or Below 100% FPG</i>	<i>101% - 125% FPG</i>	<i>126% - 150% FPG</i>	<i>151% - 175% FPG</i>	<i>176% - 200% FPG</i>	<i>Above 200% FPG</i>
<b>1</b>	\$0 - \$15,650	\$15,651 - \$19,562	\$19,563 - \$23,475	\$23,476 - \$27,387	\$27,388 - \$31,300	\$31,301 +
<b>2</b>	\$0 - \$21,150	\$21,151 - \$26,437	\$26,438 - \$31,725	\$31,726 - \$37,012	\$37,013 - \$42,300	\$42,301 +
<b>3</b>	\$0 - \$26,650	\$26,651 - \$33,312	\$33,313 - \$39,975	\$39,976 - \$46,637	\$47,638 - \$53,300	\$53,301 +
<b>4</b>	\$0 - \$32,150	\$32,151 - \$40,187	\$40,188 - \$48,225	\$48,226 - \$56,262	\$56,263 - \$64,300	\$64,301 +
<b>5</b>	\$0 - \$37,650	\$37,651 - \$47,062	\$47,063 - \$56,475	\$56,476 - \$65,887	\$65,888 - \$75,300	\$75,301 +
<b>6</b>	\$0 - \$43,150	\$43,151 - \$53,937	\$53,938 - \$64,725	\$64,726 - \$75,512	\$75,513 - \$86,300	\$86,301 +
<b>7</b>	\$0 - \$48,650	\$48,651 - \$60,812	\$60,813 - \$72,975	\$72,976 - \$85,137	\$85,138 - \$97,300	\$97,301 +
<b>8</b>	\$0 - \$54,150	\$54,151 - \$67,687	\$67,688 - \$81,225	\$81,226 - \$94,762	\$94,763 - \$108,300	\$108,301 +
<i>For each additional person, add:</i>	\$5,500	\$6,875	\$8,250	\$9,625	\$11,000	\$11,000
<i>Medical Visit</i>	<b>\$30</b>	<b>\$35</b>	<b>\$40</b>	<b>\$45</b>	<b>\$50</b>	<b>100% Pay</b>
<i>Behavioral Health Visit</i>	<b>\$25</b>	<b>\$30</b>	<b>\$35</b>	<b>\$40</b>	<b>\$45</b>	<b>100% Pay</b>

\* Based on 2025 Federal Poverty Guidelines

\*\* All sliding fee levels will receive a 100% discount of charge with a nominal fee charged as outlined above. Patients over 200% of FPL will be responsible for the full charge and receive no discount. No patient will be denied services regardless of inability to pay.

*Reviewed and approved by Audubon Area Community Care Clinic Board of Directors on 01/22/2025  
Effective 04/01/2025*

## 2025 Sliding Fee Scale – Laboratory Services

<b>Family Size</b>	<i>At or Below 100% FPG</i>	<i>101% - 125% FPG</i>	<i>126% - 150% FPG</i>	<i>151% - 175% FPG</i>	<i>176% - 200% FPG</i>	<i>Above 200% FPG</i>
<b>1</b>	\$0 - \$15,650	\$15,651 - \$19,562	\$19,563 - \$23,475	\$23,476 - \$27,387	\$27,388 - \$31,300	\$31,301 +
<b>2</b>	\$0 - \$21,150	\$21,151 - \$26,437	\$26,438 - \$31,725	\$31,726 - \$37,012	\$37,013 - \$42,300	\$42,301 +
<b>3</b>	\$0 - \$26,650	\$26,651 - \$33,312	\$33,313 - \$39,975	\$39,976 - \$46,637	\$47,638 - \$53,300	\$53,301 +
<b>4</b>	\$0 - \$32,150	\$32,151 - \$40,187	\$40,188 - \$48,225	\$48,226 - \$56,262	\$56,263 - \$64,300	\$64,301 +
<b>5</b>	\$0 - \$37,650	\$37,651 - \$47,062	\$47,063 - \$56,475	\$56,476 - \$65,887	\$65,888 - \$75,300	\$75,301 +
<b>6</b>	\$0 - \$43,150	\$43,151 - \$53,937	\$53,938 - \$64,725	\$64,726 - \$75,512	\$75,513 - \$86,300	\$86,301 +
<b>7</b>	\$0 - \$48,650	\$48,651 - \$60,812	\$60,813 - \$72,975	\$72,976 - \$85,137	\$85,138 - \$97,300	\$97,301 +
<b>8</b>	\$0 - \$54,150	\$54,151 - \$67,687	\$67,688 - \$81,225	\$81,226 - \$94,762	\$94,763 - \$108,300	\$108,301 +
<i>For each additional person, add:</i>	\$5,500	\$6,875	\$8,250	\$9,625	\$11,000	\$11,000
<b>Laboratory Services</b>	<b>All Inclusive Qualifies for LabCorp Indigent Program - \$0</b>	<b>\$25</b>	<b>\$30</b>	<b>\$35</b>	<b>\$40</b>	<b>100% Pay</b>

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## 2025 Sliding Fee Scale – Immunization Administration

<i>Family Size</i>	<i>At or Below 100% FPG</i>	<i>101% - 125% FPG</i>	<i>126% - 150% FPG</i>	<i>151% - 175% FPG</i>	<i>176% - 200% FPG</i>	<i>Above 200% FPG</i>
<b>1</b>	\$0 - \$15,650	\$15,651 - \$19,562	\$19,563 - \$23,475	\$23,476 - \$27,387	\$27,388 - \$31,300	\$31,301 +
<b>2</b>	\$0 - \$21,150	\$21,151 - \$26,437	\$26,438 - \$31,725	\$31,726 - \$37,012	\$37,013 - \$42,300	\$42,301 +
<b>3</b>	\$0 - \$26,650	\$26,651 - \$33,312	\$33,313 - \$39,975	\$39,976 - \$46,637	\$47,638 - \$53,300	\$53,301 +
<b>4</b>	\$0 - \$32,150	\$32,151 - \$40,187	\$40,188 - \$48,225	\$48,226 - \$56,262	\$56,263 - \$64,300	\$64,301 +
<b>5</b>	\$0 - \$37,650	\$37,651 - \$47,062	\$47,063 - \$56,475	\$56,476 - \$65,887	\$65,888 - \$75,300	\$75,301 +
<b>6</b>	\$0 - \$43,150	\$43,151 - \$53,937	\$53,938 - \$64,725	\$64,726 - \$75,512	\$75,513 - \$86,300	\$86,301 +
<b>7</b>	\$0 - \$48,650	\$48,651 - \$60,812	\$60,813 - \$72,975	\$72,976 - \$85,137	\$85,138 - \$97,300	\$97,301 +
<b>8</b>	\$0 - \$54,150	\$54,151 - \$67,687	\$67,688 - \$81,225	\$81,226 - \$94,762	\$94,763 - \$108,300	\$108,301 +
<i>For each additional person, add:</i>	\$5,500	\$6,875	\$8,250	\$9,625	\$11,000	\$11,000
<b><i>Immunization Administration</i></b>	<b>\$5</b>	<b>\$7.50</b>	<b>\$10</b>	<b>\$12.50</b>	<b>\$15</b>	<b>100% Pay</b>

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