Medical Sliding Fee Scale Sliding Fee Scale Based On Family Size and Income Compared to Federal Poverty Level (FPL) Discount -100% -90% -80% -60% -30% <u>0%</u> At or below 101% to 151% to 201% to 236% to Above 100% FPL 150% FPL 200% FPL 235% FPL 295% FPL 295 FPL + **Primary Care Provider Visits** Greater of the discounted bill or \$30 100% Nominal Fee 30 Nurse, Lab, X-ray Only Visits **Nominal Fee** 15 Greater of the discounted bill or \$15 100% **Urgent Care Clinic Visits Nominal Fee** 40 Greater of the discounted bill or \$40 100%