



SLIDING FEE DISCOUNT SCHEDULE

Orchid Health's policy is to provide essential services regardless of the patient's ability to pay. Discounts are offered based on family size and annual income.

La política de Orchid Health es proporcionar servicios esenciales independientemente de la capacidad de pago de los pacientes. Los descuentos se ofrecen en función del tamaño de la familia y los ingresos anuales.

FPL	<=100%	100-125%	125-150%	150-175%	175-200%	200-250%
Immunization Admin.	\$0	\$5	\$5	\$5	\$5	\$5
Blood draw	\$0	\$5	\$5	\$5	\$5	\$5
Urine preg--Urinalysis Blood Glucose Test	\$0	\$5	\$5	\$5	\$5	\$5
Rapid mono / Rapid Strep / TB Test / Rapid A1C	\$0	\$5	\$5	\$5	\$5	\$5
EKG	\$0	\$5	\$5	\$5	\$5	\$5
Influenza test	\$0	\$15	\$15	\$15	\$15	\$15
Drug test	\$0	\$15	\$15	\$15	\$15	\$15
MA/Nurse visit	\$0	\$15	\$15	\$15	\$15	\$15
Sports Physical	\$0	\$25	\$25	\$25	\$25	\$25
Behavioral health visit = 30 min	\$0	\$20	\$25	\$30	\$30	\$30
Behavioral health visit = 60 min	\$0	\$40	\$50	\$60	\$60	\$60
Provider visit = 15 min	\$0	\$20	\$25	\$30	\$35	\$40
Provider visit = 30 min	\$0	\$40	\$50	\$60	\$70	\$80
Provider visit = 60 min	\$0	\$80	\$100	\$120	\$140	\$160
Telephone visit	\$0	\$10	\$10	\$10	\$10	\$10
Family Size	0-100%	101-125%	126-150%	151-175%	176-200%	201-250%
1	\$1215	\$1519	\$1823	\$2126	\$2430	\$3038
2	\$1643	\$2054	\$2465	\$2876	\$3287	\$4108
3	\$2072	\$2590	\$3108	\$3625	\$4143	\$5179
4	\$2500	\$3125	\$3750	\$4375	\$5000	\$6250
5	\$2928	\$3660	\$4393	\$5125	\$5857	\$7321
6	\$3357	\$4196	\$5035	\$5874	\$6713	\$8392
7	\$3785	\$4731	\$5678	\$6624	\$7570	\$9463
8	\$4213	\$5267	\$6320	\$7373	\$8427	\$10533
Each additional	\$368	\$460	\$552	\$644	\$737	\$921
SBHC student	\$0	\$0	\$0	\$0	\$0	\$0