



Title X Sliding Fee Discount Schedule
Based on 2025 Federal Poverty Guidelines*

Poverty Level	Annual Income				
	At or Below 100%	101-150%	151-200%	201-250%	251% and higher
Family Size	Group 1	Group 2	Group 3	Group 4	Group 5
Discount on full fee	100%	75%	50%	25%	0%
1	\$0 - \$15,650	\$15,651 - \$23,475	\$23,476 - \$31,300	\$31,301 - \$39,125	\$39,126 - And Higher
2	\$0 - \$21,150	\$21,151 - \$31,725	\$31,726 - \$42,300	\$42,301 - \$52,875	\$52,876 - And Higher
3	\$0 - \$26,650	\$26,651 - \$39,975	\$39,976 - \$53,300	\$53,301 - \$66,625	\$66,626 - And Higher
4	\$0 - \$32,150	\$32,151 - \$48,225	\$48,226 - \$64,300	\$64,301 - \$80,375	\$80,376 - And Higher
5	\$0 - \$37,650	\$37,651 - \$56,475	\$56,476 - \$75,300	\$75,301 - \$94,125	\$94,126 - And Higher
6	\$0 - \$43,150	\$43,151 - \$64,725	\$64,726 - \$86,300	\$86,301 - \$107,875	\$107,876 - And Higher
7	\$0 - \$48,650	\$48,651 - \$72,975	\$72,976 - \$97,300	\$97,301 - \$121,625	\$121,626 - And Higher
8	\$0 - \$54,150	\$54,151 - \$81,225	\$81,226 - \$108,300	\$108,301 - \$135,375	\$135,376 - And Higher
For Family units with more than 8 persons, add \$5,500 for each additional member					
Procedure	Patient Pays	Patient Pays	Patient Pays	Patient Pays	Patient Pays
	0	25% of full fee	50% of full fee	75% of full fee	100% of full fee
Established Patient Level 1-5	0	\$61.25	\$122.50	\$183.75	\$245.00
		\$66.25	\$132.50	\$198.75	\$265.00
		\$75.00	\$150.00	\$225.00	\$300.00
		\$87.50	\$175.00	\$262.50	\$350.00
		\$93.75	\$187.50	\$281.25	\$375.00
Established Pt Preventive Care Visit Age 12-17	0	\$75.00	\$150.00	\$225.00	\$300.00
Established Pt Preventive Care Visit Age 18-39	0	\$81.25	\$162.50	\$243.75	\$325.00
Established Pt Preventive Care Visit Age 40-64	0	\$85.00	\$170.00	\$255.00	\$340.00
Established Preventive Care Visit Age 65+	0	\$87.50	\$175.00	\$262.50	\$350.00
New Patient Level 2-5	0	\$68.75	\$137.50	\$206.25	\$275.00
		\$78.75	\$157.50	\$236.25	\$315.00
		\$93.75	\$187.50	\$281.25	\$375.00
		\$112.50	\$225.00	\$337.50	\$450.00
New Pt Preventive Care Visit Age 12-17	0	\$79.75	\$159.50	\$239.25	\$319.00
New Pt Preventive Care Visit Age 18-39	0	\$101.00	\$202.00	\$303.00	\$404.00
New Pt Preventive Care Visit Age 40-64	0	\$118.75	\$237.50	\$356.25	\$475.00
New Pt Preventive Care Visit Age 64+	0	\$76.75	\$153.50	\$230.25	\$307.00
Cost of IUD-Paragard	0	25% of full fee	50% of full fee	75% of full fee	100% of full fee
Cost of IUD-Mirena					
Cost of Nexplanon					
IUD Insertion	0	\$269.75	\$539.50	\$809.25	\$1,079.00
IUD Removal	0	\$215.50	\$431.00	\$646.50	\$862.00
Implant insertion	0	\$216.75	\$433.50	\$650.25	\$867.00
Implant removal	0	\$216.25	\$432.50	\$648.75	\$865.00
Implant removal and re-insertion	0	\$236.50	\$473.00	\$709.50	\$946.00
Pregnancy Testing	0	\$0.00	\$0.00	\$0.00	\$0.00

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