

# Lifespan Health's Discount Program

***Do you need help with the high cost of health care?***

***Based upon your income and the number in your household, you may qualify to participate in our Federal grant:***

Household Size	Annual Income								
	FPL %		100%		133%		167%		200%
1	\$0	to	\$12,880	to	\$17,130	to	\$21,510	to	\$25,760
2	\$0	to	\$17,420	to	\$23,169	to	\$29,091	to	\$34,840
3	\$0	to	\$21,960	to	\$29,207	to	\$36,673	to	\$43,920
4	\$0	to	\$26,500	to	\$35,245	to	\$44,255	to	\$53,000
5	\$0	to	\$31,040	to	\$41,283	to	\$51,837	to	\$62,080
6	\$0	to	\$35,580	to	\$47,321	to	\$59,419	to	\$71,160
7	\$0	to	\$40,120	to	\$53,360	to	\$67,000	to	\$80,240
8	\$0	to	\$44,660	to	\$59,398	to	\$74,582	to	\$89,320

\*For family units with more than 8 members, add \$4,540 for each additional member.

*FOR EXAMPLE: If your income is between \$0 and \$12,880 and you live alone (household of 1), you would qualify for our nominal fees which are:*

***\$36 for Medical visits***

***\$25 for Preventive Dental, Optometry, or Podiatry***

***\$45 for Comprehensive Dental, Optometry, or Podiatry***

*If income is more than \$12,760, then the fee schedule changes as shown below:*

2021 Annual Income Sliding Scale	SA 0%-100% FPG*	SB >100%- 133% FPG	SC >133%- 167% FPG	SD >167%- 200% FPG	>200% FPG
Medical, Behavioral	\$36 (nominal)	\$48	\$60	\$72	Full charge
Preventive Dental, Optometry, Podiatry	\$25 (nominal)	\$31	\$47	\$59	Full charge
Comprehensive Dental, Optometry, Podiatry	\$45 (nominal)	\$56	\$70	\$88	Full charge

NOTE: 'FPG' refers to the Federal Poverty Guidelines.

*Source: Federal Register, 84 FR 1167 (vol. 84 no. 22, January 15, 2021)*

*Nominal fee does not include the cost of supplies.*

*All patients are ENCOURAGED to complete an application to participate in our federal grant.*