

El Rio Health offers a sliding fee scale to all income-eligible, uninsured, or under-insured patients, allowing qualifying patients to receive care at a lower cost. Eligibility for the program is based on family size and annual household income. Income guidelines and acceptable verification for the Sliding Fee Discount Program may be obtained from a member of our staff.

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Household Size Dental	0% - 100% FPL \$25 Nominal Fee	101% - 133% FPL 50% Discount	134% - 150% FPL 40% Discount	151%- 175% FPL 30% Discount	176% - 200% FPL 20% Discount	Over 200% FPL No Discount
Laboratory Fees Retinopathy						
Screening						
Nutrition Primary Care	\$1	\$5	\$10	\$15	\$20	No Discount
Behavioral Health/BHC						
Wellness						
Pharmacy	90-Day=\$10,	90-Day=\$15,	90-Day=\$16,	90-Day=\$20,	90-Day=\$21,	No Discount
Medical, Specialty	30-Day=\$5	30-Day=\$10	30-Day=\$11	30-Day=\$15	30-Day=\$16	
Behavioral Health,		•••				No Discount
PharmD Vision, Jltrasound/Specialty	Nominal Fee \$15	\$26	\$30	\$40	\$50	\$75 Down remining
Radiology. Physical						balance is billed.
Therapy, etc. 1	\$ 0 - \$ 14,580	\$ 14,581 - \$ 19,391	\$ 19,392 - \$ 21,870	\$ 21,871 - \$ 25,515	\$ 25,516 - \$ 29,160	\$ 29,161 and up
2	\$ 0 - \$ 19,720	\$ 19,721 - \$ 26,228	\$ 26,229 - \$ 29,580	\$ 29,581 - \$ 34,510	\$ 34,511 - \$ 39,440	\$ 39,441 and up
3	\$ 0 - \$ 24,860	\$ 24,861 - \$ 33,064	\$ 33,065 - \$ 37,290	\$ 37,291 - \$ 43,505	\$ 43,506 - \$ 49,720	\$ 49,721 and up
4	\$ 0 - \$ 30,000	\$ 30,001 - \$ 39,900	\$ 39,901 - \$ 45,000	\$ 45,001 - \$ 52,500	\$ 52,501 - \$ 60,000	\$ 60,001 and up
5	\$ 0 - \$ 35,140	\$ 35,141 - \$ 46,736	\$ 46,737 - \$ 52,710	\$ 52,711 - \$ 61,495	\$ 61,496 - \$ 70,280	\$ 70,281 and u
6	\$ 0 - \$ 40,280	\$ 40,281 - \$ 53,572	\$ 53,573 - \$ 60,420	\$ 60,421 - \$ 70,490	\$ 70,491 - \$ 80,560	\$ 80,561 and u
7	\$ 0 - \$ 45,420	\$ 45,421 - \$ 60,409	\$ 60,410 - \$ 68,130	\$ 68,131 - \$ 79,485	\$ 79,486 - \$ 90,840	\$ 90,841 and up
8	\$ 0 - \$ 50,560	\$ 50,561 - \$ 67,245	\$ 67,246 - \$ 75,840	\$ 75,841 - \$ 88,480	\$ 88,481 - \$ 101,120	\$101,121 and u
Additional Persons	+ \$5,140/person	+ \$6,836/person	+ \$7,710/person	+ \$8,995/person	+ \$10,280/person	+ \$10,280/perso
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			rty Guidelines Effect	-		
Household Size	0% - 100% FPL	101% - 133% FPL	134% - 150% FPL	151%- 175% FPL	176% - 200% FPL	Over 200% FPL
Obstetric/Prenatal	\$450	\$700	\$800	\$1,000	\$1,500	No Discount
Package						
Office Procedures	\$25	\$100	¢150			
		· · · · ·	\$150	\$200	\$275	No Discount
Minor Surgery Procedures	\$100	\$100	\$150 \$850	\$200 \$1,100	\$275 \$1,200	No Discount No Discount
Procedures Major Surgery	\$100 \$250	· · · · ·		· · · · · · · · · · · · · · · · · · ·	· · ·	
Procedures Major Surgery Procedures		\$550 \$1,500	\$850 \$1,600	\$1,100 \$1,800	\$1,200 \$2,000	No Discount
Procedures Major Surgery	\$250 \$25 (\$15 Birth control shot	\$550	\$850	\$1,100	\$1,200	No Discount No Discount
Procedures Major Surgery Procedures birth Control Devices	\$250 \$25 (\$15 Birth control shot Depo Provera)	\$550 \$1,500 50% Discount	\$850 \$1,600 40% Discount	\$1,100 \$1,800 30% Discount	\$1,200 \$2,000 20% Discount	No Discount No Discount No Discount
Procedures Major Surgery Procedures	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870	\$1,100 \$1,800 30% Discount \$ 21,871 - \$ 25,515	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160	No Discount No Discount No Discount \$ 29,161 and u
Procedures Major Surgery Procedures irth Control Devices 1	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580 \$ 0 - \$ 19,720	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391 \$ 19,721 - \$ 26,228	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870 \$ 26,229 - \$ 29,580	\$1,100 \$1,800 30% Discount \$ 21,871 - \$ 25,515 \$ 29,581 - \$ 34,510	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160 \$ 34,511 - \$ 39,440	No Discount No Discount No Discount \$ 29,161 and u \$ 39,441 and u
Procedures Major Surgery Procedures irth Control Devices 1 2	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580 \$ 0 - \$ 19,720 \$ 0 - \$ 24,860	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391 \$ 19,721 - \$ 26,228 \$ 24,861 - \$ 33,064	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870 \$ 26,229 - \$ 29,580 \$ 33,065 - \$ 37,290	\$1,100 \$1,800 30% Discount \$ 21,871 - \$ 25,515 \$ 29,581 - \$ 34,510 \$ 37,291 - \$ 43,505	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160 \$ 34,511 - \$ 39,440 \$ 43,506 - \$ 49,720	No Discount No Discount No Discount \$ 29,161 and u \$ 39,441 and u \$ 49,721 and u
Procedures Major Surgery Procedures irth Control Devices 1 2 3	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580 \$ 0 - \$ 19,720 \$ 0 - \$ 24,860 \$ 0 - \$ 30,000	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391 \$ 19,721 - \$ 26,228 \$ 24,861 - \$ 33,064 \$ 30,001 - \$ 39,900	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870 \$ 26,229 - \$ 29,580 \$ 33,065 - \$ 37,290 \$ 39,901 - \$ 45,000	\$1,100 \$1,800 30% Discount \$ 21,871 - \$ 25,515 \$ 29,581 - \$ 34,510 \$ 37,291 - \$ 43,505 \$ 45,001 - \$ 52,500	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160 \$ 34,511 - \$ 39,440 \$ 43,506 - \$ 49,720 \$ 52,501 - \$ 60,000	No Discount No Discount No Discount \$ 29,161 and u \$ 39,441 and u \$ 49,721 and u \$ 60,001 and u
Procedures Major Surgery Procedures inth Control Devices 1 2 3 4	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580 \$ 0 - \$ 19,720 \$ 0 - \$ 24,860 \$ 0 - \$ 30,000 \$ 0 - \$ 35,140	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391 \$ 19,721 - \$ 26,228 \$ 24,861 - \$ 33,064 \$ 30,001 - \$ 39,900 \$ 35,141 - \$ 46,736	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870 \$ 26,229 - \$ 29,580 \$ 33,065 - \$ 37,290 \$ 39,901 - \$ 45,000 \$ 46,737 - \$ 52,710	\$1,100 \$1,800 30% Discount \$21,871 - \$25,515 \$29,581 - \$34,510 \$37,291 - \$43,505 \$45,001 - \$52,500 \$52,711 - \$61,495	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160 \$ 34,511 - \$ 39,440 \$ 43,506 - \$ 49,720 \$ 52,501 - \$ 60,000 \$ 61,496 - \$ 70,280	No Discount No Discount No Discount \$ 29,161 and u \$ 39,441 and u \$ 49,721 and u \$ 60,001 and u \$ 70,281 and u
Procedures Major Surgery Procedures irth Control Devices 1 2 3 4 5	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580 \$ 0 - \$ 19,720 \$ 0 - \$ 24,860 \$ 0 - \$ 30,000 \$ 0 - \$ 35,140 \$ 0 - \$ 40,280	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391 \$ 19,721 - \$ 26,228 \$ 24,861 - \$ 33,064 \$ 30,001 - \$ 39,900 \$ 35,141 - \$ 46,736 \$ 40,281 - \$ 53,572	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870 \$ 26,229 - \$ 29,580 \$ 33,065 - \$ 37,290 \$ 39,901 - \$ 45,000 \$ 46,737 - \$ 52,710 \$ 53,573 - \$ 60,420	\$1,100 \$1,800 30% Discount \$ 21,871 - \$ 25,515 \$ 29,581 - \$ 34,510 \$ 37,291 - \$ 43,505 \$ 45,001 - \$ 52,500 \$ 52,711 - \$ 61,495 \$ 60,421 - \$ 70,490	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160 \$ 34,511 - \$ 39,440 \$ 43,506 - \$ 49,720 \$ 52,501 - \$ 60,000 \$ 61,496 - \$ 70,280 \$ 70,491 - \$ 80,560	No Discount No Discount No Discount \$ 29,161 and u \$ 39,441 and u \$ 49,721 and u \$ 60,001 and u \$ 70,281 and u \$ 80,561 and u
Procedures Major Surgery Procedures irth Control Devices 1 2 3 4 5 6	\$250 \$25 (\$15 Birth control shot Depo Provera) \$ 0 - \$ 14,580 \$ 0 - \$ 19,720 \$ 0 - \$ 24,860 \$ 0 - \$ 30,000 \$ 0 - \$ 35,140	\$550 \$1,500 50% Discount \$ 14,581 - \$ 19,391 \$ 19,721 - \$ 26,228 \$ 24,861 - \$ 33,064 \$ 30,001 - \$ 39,900 \$ 35,141 - \$ 46,736	\$850 \$1,600 40% Discount \$ 19,392 - \$ 21,870 \$ 26,229 - \$ 29,580 \$ 33,065 - \$ 37,290 \$ 39,901 - \$ 45,000 \$ 46,737 - \$ 52,710	\$1,100 \$1,800 30% Discount \$21,871 - \$25,515 \$29,581 - \$34,510 \$37,291 - \$43,505 \$45,001 - \$52,500 \$52,711 - \$61,495	\$1,200 \$2,000 20% Discount \$ 25,516 - \$ 29,160 \$ 34,511 - \$ 39,440 \$ 43,506 - \$ 49,720 \$ 52,501 - \$ 60,000 \$ 61,496 - \$ 70,280	No Discount No Discount

SPECIAL IMMUNOLOGY ASSOCIATES (SIA) PAYER RYAN WHITE Annual Caps on Charges (HRSA Ryan White)

2023 Federal Pov Medical, Behavioral Health, Dental, Radiology, Lab, etc.	See Caps on Charges for 201% to 300% FPL and Over 300% FPL. If no income, collect \$0.	Federal Poverty:	Total Charge:	Annual Income (2023 FPL)	Cap:	
		At or below 100% FPL	\$0	0 to \$14,580	\$0	
		101% to 200% FPL	No more than 5% gross annual income	>\$14,581 - \$29,160	\$1,458.00	
Household Size	LESS THAN 400% FPL		annuarincome			
1	\$58,320	201% to 300% FPL	No more than 7% gross	>\$29,161 - \$43,740	\$3,061.80	
2	\$78,880		annual income			
3	\$99,440	Over 300% FPL	No more than 10% gross	>\$43,741	\$4,374.10	
4	\$120,000		annual income	· + ···// ··-	+ .,= 5=0	
5	\$140,480					
6	\$161,120					
7	\$181,680					
8	\$202,240					