

**2016 DENTAL SLIDING FEE SCALE**  
**EFFECTIVE: APRIL 1, 2016**

<b>Payment Category</b>		F	D	C	B	A
<b>Discount on Charges</b>		100%	99%	66%	33%	0% none
<b>Poverty Level</b>		under 100%	101% 150%	151% 175%	176% 200%	201% Over
<b># Persons in Household</b>	<b>Household Income</b>					
1	Annual	0 - 11,880	11,881 - 17,820	17,821 - 20,790	20,791 - 23,760	23,761 over
2	Annual	0 - 16,020	16,021 - 24,030	24,031 - 28,035	28,036 - 32,040	32,041 over
3	Annual	0 - 20,160	20,161 - 30,240	30,241 - 35,280	35,281 - 40,320	40,321 over
4	Annual	0 - 24,300	24,301 - 36,450	36,451 - 42,525	42,526 - 48,600	48,601 over
5	Annual	0 - 28,440	28,441 - 42,660	42,661 - 49,770	49,771 - 56,880	56,881 over
6	Annual	0 - 32,580	32,581 - 48,870	48,871 - 57,015	57,016 - 65,160	65,161 over
7	Annual	0 - 36,730	36,731 - 55,095	55,096 - 64,278	64,279 - 73,460	73,461 over
8	Annual	0 - 40,890	40,891 - 61,335	61,336 - 71,558	71,559 - 81,780	81,781 over

For each additional household member add 4,160.00 to annual income.

Sliding fee scale based upon total gross household income and the number of persons residing in the household.

For under 100% of the FPL there is a 100% discount and the following Nominal fee:

Nominal Fee for Category F for:

- Dental visit 25.00 for office visit plus dental lab and supplies . Nominal fee does not apply to cosmetic or elective procedures (ie. implants vs dentures)
- Pharmacy \$5 dispensing fee cost of medication
- X-Ray 20.00 visit plus cost of equipment, supplies and readings