



"The Caring Place"

Where the patient is at the center of ever thin we do

**MORRIS HEIGHTS HEALTH CENTER, INC.
SLIDING FEE DISCOUNT SCHEDULE**

Payment Code	A	B	C	D	E	F	
Percent of Poverty	0% - 100%	101% - 125%	126% - 150%	151% - 175%	176% - 200%	> 200%	
Patient Pays:	Nominal Fee	15%	30%	45%	60%	Full Price	
PATIENT INCOME BY FAMILY SIZE	1	\$0 - \$ 12,140	\$ 12,141 - \$ 15,175	\$ 15,176 - \$ 18,210	\$ 18,211 - \$ 21,245	\$ 21,246 - \$ 24,280	\$ 24,281 - and over
	2	\$0 - \$ 16,460	\$ 16,461 - \$ 20,575	\$ 20,576 - \$ 24,690	\$ 24,691 - \$ 28,805	\$ 28,806 - \$ 32,920	\$ 32,921 - and over
	3	\$0 - \$ 20,780	\$ 20,781 - \$ 25,975	\$ 25,976 - \$ 31,170	\$ 31,171 - \$ 36,365	\$ 36,366 - \$ 41,560	\$ 41,561 - and over
	4	\$0 - \$ 25,100	\$ 25,101 - \$ 31,375	\$ 31,376 - \$ 37,650	\$ 37,651 - \$ 43,925	\$ 43,926 - \$ 50,200	\$ 50,201 - and over
	5	\$0 - \$ 29,420	\$ 29,421 - \$ 36,775	\$ 36,776 - \$ 44,130	\$ 44,131 - \$ 51,485	\$ 51,486 - \$ 58,840	\$ 58,841 - and over
	6	\$0 - \$ 33,740	\$ 33,741 - \$ 42,175	\$ 42,176 - \$ 50,610	\$ 50,611 - \$ 59,045	\$ 59,046 - \$ 67,480	\$ 67,481 - and over
	7	\$0 - \$ 38,060	\$ 38,061 - \$ 47,575	\$ 47,576 - \$ 57,090	\$ 57,091 - \$ 66,605	\$ 66,606 - \$ 76,120	\$ 76,121 - and over
	8	\$0 - \$ 42,380	\$ 42,381 - \$ 52,975	\$ 52,976 - \$ 63,570	\$ 63,571 - \$ 74,165	\$ 74,166 - \$ 84,760	\$ 84,761 - and over
For each additional person, add	\$4,320	\$5,400	\$6,480	\$7,560	\$8,640	\$8,640	

OFFICE VISIT

MEDICAL, BEHAVIORAL HEALTH & SPECIALTY	\$3	\$40	\$70	\$110	\$140	\$240
DIAGNOSTIC RADIOLOGY (IN-HOUSE)	\$3	\$50	\$100	\$140	\$190	\$320
DIAGNOSTIC LABORATORY (IN-HOUSE)	\$3	\$10	\$20	\$40	\$50	\$80

DENTAL *

DIAGNOSTIC	\$15	\$20	\$30	\$50	\$60	\$100
PREVENTIVE	\$15	\$20	\$30	\$50	\$60	\$105
RESTORATIVE	\$30	\$40	\$80	\$110	\$150	\$250
ENDODONTICS	\$30	\$130	\$260	\$380	\$510	\$850
PERIODONTICS	\$30	\$40	\$80	\$120	\$160	\$270
PROSTHODONTICS	\$30	\$270	\$540	\$810	\$1,080	\$1,800
ORAL AND MAXILLOFACIAL SURGERY	\$30	\$40	\$80	\$110	\$150	\$250
ADJUNCTIVE GENERAL	\$30	\$50	\$90	\$140	\$180	\$300

* For all dental procedures involving supplies and equipment, the cost of such supplies and equipment will be added to the fees.

** For pharmacy, laboratory and radiology fees, please see front desk staff.

*** Fees above are based on the discount percentage of the full price in the applicable categories.