

**Greater New Bedford Community Health Center**  
**SLIDING FEE DISCOUNT SCHEDULE - MEDICAL**  
**BASED ON THE 2017 FEDERAL POVERTY LEVEL**  
**ALL FQHC AND ELIGIBLE PATIENTS**

Effective 01/31/2017

CATEGORY	SLIDE >	SLIDE A	SLIDE B	SLIDE C	SLIDE D	SLIDE E	SLIDE F
		100%	125%	150%	175%	200%	201%
	FPL >	0-100%	101-125%	126-150%	151-175%	175-200%	Over 200%
<b>FAMILY SIZE</b>	<b>DISCOUNT &gt;</b>	<b>100% Discount \$10 Payment = to or Less Than</b>	<b>\$20 Fixed Payment = to or Less Than</b>	<b>\$25 Fixed Payment = to or Less Than</b>	<b>\$30 Fixed Payment = to or Less Than</b>	<b>\$35 Fixed Payment = to or Less Than</b>	<b>No Discount Pay Charges OVER</b>
<b>1</b>	<b>Annual (up to)</b>	\$ 12,060	\$ 15,075	\$ 18,090	\$ 21,105	\$ 24,120	\$ 24,120
	Monthly	\$ 1,005	\$ 1,256	\$ 1,508	\$ 1,759	\$ 2,010	\$ 2,010
	Weekly	\$ 232	\$ 290	\$ 348	\$ 406	\$ 464	\$ 464
	Hourly	\$ 5.80	\$ 7.25	\$ 8.70	\$ 10.15	\$ 11.60	\$ 11.60
<b>2</b>	<b>Annual</b>	\$ 16,240	\$ 20,300	\$ 24,360	\$ 28,420	\$ 32,480	\$ 32,480
	Monthly	\$ 1,353	\$ 1,692	\$ 2,030	\$ 2,368	\$ 2,707	\$ 2,707
	Weekly	\$ 312	\$ 390	\$ 468	\$ 547	\$ 625	\$ 625
	Hourly	\$ 7.81	\$ 9.76	\$ 11.71	\$ 13.66	\$ 15.62	\$ 15.62
<b>3</b>	<b>Annual</b>	\$ 20,420	\$ 25,525	\$ 30,630	\$ 35,735	\$ 40,840	\$ 40,840
	Monthly	\$ 1,702	\$ 2,127	\$ 2,553	\$ 2,978	\$ 3,403	\$ 3,403
	Weekly	\$ 393	\$ 491	\$ 589	\$ 687	\$ 785	\$ 785
	Hourly	\$ 9.82	\$ 12.27	\$ 14.73	\$ 17.18	\$ 19.63	\$ 19.63
<b>4</b>	<b>Annual</b>	\$ 24,600	\$ 30,750	\$ 36,900	\$ 43,050	\$ 49,200	\$ 49,200
	Monthly	\$ 2,050	\$ 2,563	\$ 3,075	\$ 3,588	\$ 4,100	\$ 4,100
	Weekly	\$ 473	\$ 591	\$ 710	\$ 828	\$ 946	\$ 946
	Hourly	\$ 11.83	\$ 14.78	\$ 17.74	\$ 20.70	\$ 23.65	\$ 23.65
<b>5</b>	<b>Annual</b>	\$ 28,780	\$ 35,975	\$ 43,170	\$ 50,365	\$ 57,560	\$ 57,560
	Monthly	\$ 2,398	\$ 2,998	\$ 3,598	\$ 4,197	\$ 4,797	\$ 4,797
	Weekly	\$ 553	\$ 692	\$ 830	\$ 969	\$ 1,107	\$ 1,107
	Hourly	\$ 13.84	\$ 17.30	\$ 20.75	\$ 24.21	\$ 27.67	\$ 27.67
<b>6</b>	<b>Annual</b>	\$ 32,920	\$ 41,150	\$ 49,380	\$ 57,610	\$ 65,840	\$ 65,840
	Monthly	\$ 2,743	\$ 3,429	\$ 4,115	\$ 4,801	\$ 5,487	\$ 5,487
	Weekly	\$ 633	\$ 791	\$ 950	\$ 1,108	\$ 1,266	\$ 1,266
	Hourly	\$ 15.83	\$ 19.78	\$ 23.74	\$ 27.70	\$ 31.65	\$ 31.65
<b>7</b>	<b>Annual</b>	\$ 37,140	\$ 46,425	\$ 55,710	\$ 64,995	\$ 74,280	\$ 74,280
	Monthly	\$ 3,095	\$ 3,869	\$ 4,643	\$ 5,416	\$ 6,190	\$ 6,190
	Weekly	\$ 714	\$ 893	\$ 1,071	\$ 1,250	\$ 1,428	\$ 1,428
	Hourly	\$ 17.86	\$ 22.32	\$ 26.78	\$ 31.25	\$ 35.71	\$ 35.71
<b>8</b>	<b>Annual</b>	\$ 41,320	\$ 51,650	\$ 61,980	\$ 72,310	\$ 82,640	\$ 82,640
	Monthly	\$ 3,443	\$ 4,304	\$ 5,165	\$ 6,026	\$ 6,887	\$ 6,887
	Weekly	\$ 795	\$ 993	\$ 1,192	\$ 1,391	\$ 1,589	\$ 1,589
	Hourly	\$ 19.87	\$ 24.83	\$ 29.80	\$ 34.76	\$ 39.73	\$ 39.73

\*FOR FAMILY MEMBERS GREATER THAN 8, ADD \$4,180 PER ADDITIONAL FAMILY MEMBER TO THE ANNUAL.

**Greater New Bedford Community Health Center**  
**SLIDING FEE DISCOUNT SCHEDULE - DENTAL**  
**BASED ON THE 2017 FEDERAL POVERTY LEVEL**  
**ALL FQHC ELIGIBLE PATIENTS**

Effective 01/31/2017

CATEGORY	SLIDE >	SLIDE A	SLIDE B	SLIDE C	SLIDE D	SLIDE E	SLIDE F
		100%	125%	150%	175%	200%	200%
	FPL >	0-100%	101-125%	126-150%	151-175%	175-200%	Over 200%
<b>FAMILY SIZE</b>	<b>DISCOUNT &gt;</b>	<b>100% Discount \$35 Payment = to or Less Than</b>	<b>\$45 Fixed Payment = to or Less Than</b>	<b>\$55 Fixed Payment = to or Less Than</b>	<b>\$65 Fixed Payment = to or Less Than</b>	<b>\$75 Fixed Payment = to or Less Than</b>	<b>No Discount Pay Charges OVER</b>
<b>1</b>	<b>Annual (up to)</b>	\$ 12,060	\$ 15,075	\$ 18,090	\$ 21,105	\$ 24,120	\$ 24,120
	Monthly	\$ 1,005	\$ 1,256	\$ 1,508	\$ 1,759	\$ 2,010	\$ 2,010
	Weekly	\$ 232	\$ 290	\$ 348	\$ 406	\$ 464	\$ 464
	Hourly	\$ 5.80	\$ 7.25	\$ 8.70	\$ 10.15	\$ 11.60	\$ 11.60
<b>2</b>	<b>Annual</b>	\$ 16,240	\$ 20,300	\$ 24,360	\$ 28,420	\$ 32,480	\$ 32,480
	Monthly	\$ 1,353	\$ 1,692	\$ 2,030	\$ 2,368	\$ 2,707	\$ 2,707
	Weekly	\$ 312	\$ 390	\$ 468	\$ 547	\$ 625	\$ 625
	Hourly	\$ 7.81	\$ 9.76	\$ 11.71	\$ 13.66	\$ 15.62	\$ 15.62
<b>3</b>	<b>Annual</b>	\$ 20,420	\$ 25,525	\$ 30,630	\$ 35,735	\$ 40,840	\$ 40,840
	Monthly	\$ 1,702	\$ 2,127	\$ 2,553	\$ 2,978	\$ 3,403	\$ 3,403
	Weekly	\$ 393	\$ 491	\$ 589	\$ 687	\$ 785	\$ 785
	Hourly	\$ 9.82	\$ 12.27	\$ 14.73	\$ 17.18	\$ 19.63	\$ 19.63
<b>4</b>	<b>Annual</b>	\$ 24,600	\$ 30,750	\$ 36,900	\$ 43,050	\$ 49,200	\$ 49,200
	Monthly	\$ 2,050	\$ 2,563	\$ 3,075	\$ 3,588	\$ 4,100	\$ 4,100
	Weekly	\$ 473	\$ 591	\$ 710	\$ 828	\$ 946	\$ 946
	Hourly	\$ 11.83	\$ 14.78	\$ 17.74	\$ 20.70	\$ 23.65	\$ 23.65
<b>5</b>	<b>Annual</b>	\$ 28,780	\$ 35,975	\$ 43,170	\$ 50,365	\$ 57,560	\$ 57,560
	Monthly	\$ 2,398	\$ 2,998	\$ 3,598	\$ 4,197	\$ 4,797	\$ 4,797
	Weekly	\$ 553	\$ 692	\$ 830	\$ 969	\$ 1,107	\$ 1,107
	Hourly	\$ 13.84	\$ 17.30	\$ 20.75	\$ 24.21	\$ 27.67	\$ 27.67
<b>6</b>	<b>Annual</b>	\$ 32,920	\$ 41,150	\$ 49,380	\$ 57,610	\$ 65,840	\$ 65,840
	Monthly	\$ 2,743	\$ 3,429	\$ 4,115	\$ 4,801	\$ 5,487	\$ 5,487
	Weekly	\$ 633	\$ 791	\$ 950	\$ 1,108	\$ 1,266	\$ 1,266
	Hourly	\$ 15.83	\$ 19.78	\$ 23.74	\$ 27.70	\$ 31.65	\$ 31.65
<b>7</b>	<b>Annual</b>	\$ 37,140	\$ 46,425	\$ 55,710	\$ 64,995	\$ 74,280	\$ 74,280
	Monthly	\$ 3,095	\$ 3,869	\$ 4,643	\$ 5,416	\$ 6,190	\$ 6,190
	Weekly	\$ 714	\$ 893	\$ 1,071	\$ 1,250	\$ 1,428	\$ 1,428
	Hourly	\$ 17.86	\$ 22.32	\$ 26.78	\$ 31.25	\$ 35.71	\$ 35.71
<b>8</b>	<b>Annual</b>	\$ 41,320	\$ 51,650	\$ 61,980	\$ 72,310	\$ 82,640	\$ 82,640
	Monthly	\$ 3,443	\$ 4,304	\$ 5,165	\$ 6,026	\$ 6,887	\$ 6,887
	Weekly	\$ 795	\$ 993	\$ 1,192	\$ 1,391	\$ 1,589	\$ 1,589
	Hourly	\$ 19.87	\$ 24.83	\$ 29.80	\$ 34.76	\$ 39.73	\$ 39.73

\*FOR FAMILY MEMBERS GREATER THAN 8, ADD \$4,180 PER ADDITIONAL FAMILY MEMBER TO THE ANNUAL.