



**LAPINE  
COMMUNITY  
CLINIC**

**DISCOUNT FEE SCHEDULE**

**Annual Household Income**

(Based Upon Federal Register, Vol. 71, No.15, January 24, 2006 )

	<b>Financial Class A</b>	<b>Financial Class B</b>	<b>Financial Class C</b>	<b>Financial Class D</b>
<b>Patient Pays</b>	\$25 Minimum Payment for E/M +25% of Other Procedure Codes	\$35 Minimum Payment for E/M +50% of Other Procedure Codes	\$45 Minimum Payment for E/M +75% of Other Procedure Codes	Full Payment for services rendered 25% Discount for Full Payment at Time of Service
<b>Family Size</b>	<i>0-100% Federal Poverty Level</i>	<i>101-150% Federal Poverty Level</i>	<i>151-200% Federal Poverty Level</i>	<i>Greater than 200% of Federal Poverty Level</i>
1	\$9,800	\$14,700	\$19,600	>\$19,600
2	\$13,200	\$19,800	\$26,400	>\$26,400
3	\$16,600	\$24,900	\$33,200	>\$33,200
4	\$20,750	\$31,125	\$41,500	>\$41,500
5	\$23,400	\$35,100	\$46,800	>\$46,800
6	\$26,800	\$40,200	\$53,600	>\$53,600
7	\$30,200	\$45,300	\$60,400	>\$60,400
8	\$33,600	\$50,400	\$67,200	>\$67,200
<b>For Each Additional Person, Add</b>	<b>\$3,400</b>	<b>\$5,100</b>	<b>\$6,800</b>	<b>\$6,800</b>

Note: Minimum payments are for E/M office visits only. All other procedure codes are to be paid at the discounted percentage rate as indicated.

Minimum payment can be waived in cases of hardship. All applications will be considered for a 30-day retroactive time frame and retroactive decisions will be made on a case-by-case basis.

Effective February 1, 2006