



## Colorado Health Service Corps Loan Repayment Program

### Sliding Fee Scale Guidance 2019

Sliding Fee Scales (SFS) are used in clinics that wish to provide access to low income patients, including community and migrant health centers, free clinics, mobile clinics, homeless centers, school-based health centers, and other sites providing outpatient comprehensive primary care to medically underserved populations. SFS are established and implemented to ensure that a non-discriminatory, uniform and reasonable charge is consistently applied for patients who are underinsured or uninsured. The implementation of a SFS is a program requirement of the Colorado Health Service Corps and National Health Service Corps loan repayment programs, as well as the International Medical Graduate Waiver programs administered by the Primary Care Office.

Sliding fee scales are based on the annual Federal Poverty Guidelines (FPG) and the SFS fee for services must reasonably coincide with current guidelines. The patient's eligibility for reduced fee services according to the SFS must be based only on annual income and family size. In creating or using a SFS, a clinic must adhere to the following:

- The SFS must have an associated SFS policy, which includes a non-discrimination clause and a statement that patients will be provided care regardless of ability to pay.
- Signage must be prominently posted in common areas notifying patients of the availability of the SFS.
- Practices may require that patients complete an application to determine financial eligibility for the SFS, including corresponding documentation, so long as the documentation required does not create an intentional barrier to accessing the SFS. Many options for verifying income should be available, including recent paycheck stubs or disability income statements. Please note that some indigent patients may not have an income high enough to file a federal tax return, so this may be an option for proof of income, but not explicitly required. Applications for the SFS should be confidential.
- Patient records should be kept to account for each visit and the charges incurred. Co-pays according to income are acceptable to collect when services are provided. If a patient is delinquent in payment to a practice for services, the practice is not required to provide service without payment.
- Patients at or below 100% of the poverty level must receive a 100% discount or charged a nominal fee only (recommended \$7-\$15).
- Clinical practice sites must establish increments (discounted pay classes) as they find appropriate between 100-250% of poverty.

- Patients above 250% of poverty may be charged full fees for services, or clinical practice sites may continue to charge incremental percentages for services until 100% of the full fee is reached.

## Sample Sliding Fee Scale

Family Size	Federal Poverty Levels 2019								
	100%	120%	140%	160%	180%	200%	220%	240%	250%
1	\$12,490	\$14,988	\$17,486	\$19,984	\$22,482	\$24,980	\$27,478	\$29,976	\$31,225
2	\$16,910	\$20,292	\$23,674	\$27,056	\$30,438	\$33,820	\$37,202	\$40,584	\$42,275
3	\$21,330	\$25,596	\$29,862	\$34,128	\$38,394	\$42,660	\$46,926	\$51,192	\$53,325
4	\$25,750	\$30,900	\$36,050	\$41,200	\$46,350	\$51,500	\$56,650	\$61,800	\$64,375
5	\$30,170	\$36,204	\$42,238	\$48,272	\$54,306	\$60,340	\$66,374	\$72,408	\$75,425
6	\$34,590	\$41,508	\$48,426	\$55,344	\$62,262	\$69,180	\$76,098	\$83,016	\$86,475
7	\$39,010	\$46,812	\$54,614	\$62,416	\$70,218	\$78,020	\$85,822	\$93,624	\$97,525
8	\$43,430	\$52,116	\$60,802	\$69,488	\$78,174	\$86,860	\$95,546	\$104,232	\$108,575
For families with more than 8 people, add \$4,420 for each additional person									
100% or Nominal Fee	90%	80%	70%	60%	50%	40%	20%	10%	
<b>Discount</b>									

Reference: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, Available at <https://aspe.hhs.gov/poverty-guidelines>

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