

## Serving Hands Medical Center Sliding Scale Discount 2025

| Total Fees                  | \$20 minimal fee | 20% of total charges | 40% of total charges, | 60% of total charges | 80% of total charges | Full Charges |
|-----------------------------|------------------|----------------------|-----------------------|----------------------|----------------------|--------------|
|                             |                  |                      |                       |                      |                      |              |
| Status                      | A                | B                    | C                     | D                    | E                    | F            |
| Federal Poverty Level (FPL) | ≤ 100%           | 101-125%             | 126-150%              | 151-175%             | 176-200%             | > 200%       |
| Family Size 1               | \$0-\$15,650     | \$15,651-\$19,563    | \$19,564-\$23,475     | \$23,476-\$27,388    | \$27,389-\$31,300    | \$31,301+    |
| 2                           | \$0-\$21,150     | \$21,151-\$26,438    | \$26,439-\$31,725     | \$31,726-\$37,013    | \$37,014-\$42,300    | \$42,301+    |
| 3                           | \$0-\$26,650     | \$26,651-\$33,313    | \$33,314-\$39,975     | \$39,976-\$46,638    | \$46,639-\$53,300    | \$53,301+    |
| 4                           | \$0-\$32,150     | \$32,151-\$40,188    | \$40,189-\$48,225     | \$48,226-\$56,263    | \$56,264-\$64,300    | \$64,301+    |
| 5                           | \$0-\$37,650     | \$37,651-\$47,063    | \$47,064-\$56,475     | \$56,476-\$65,888    | \$65,889-\$75,300    | \$75,301+    |
| 6                           | \$0-\$43,150     | \$43,151-\$53,938    | \$53,939-\$64,725     | \$64,726-\$75,513    | \$75,514-\$86,300    | \$86,301+    |
| 7                           | \$0-\$48,650     | \$48,651-\$60,813    | \$60,814-\$72,975     | \$72,976-\$85,138    | \$85,139-\$97,300    | \$97,301+    |
| 8                           | \$0-\$54,150     | \$54,151-\$67,688    | \$67,689-\$81,225     | \$81,226-\$94,763    | \$94,764-\$108,300   | \$108,301+   |
| 9                           | \$0-\$59,650     | \$59,651-\$74,563    | \$74,564-\$89,475     | \$89,476-\$104,388   | \$104,389-\$119,300  | \$119,301+   |
| 10                          | \$0-\$65,150     | \$65,151-\$81,438    | \$81,439-\$97,725     | \$97,726-\$114,013   | \$114,014-\$130,300  | \$130,301+   |
| 11                          | \$0-\$70,650     | \$70,651-\$88,313    | \$88,314-\$105,975    | \$105,976-\$123,638  | \$123,639-\$141,300  | \$141,301+   |
| 12                          | \$0-\$76,150     | \$76,151-\$95,188    | \$95,189-\$114,225    | \$114,226-\$133,263  | \$133,264-\$152,300  | \$152,301+   |

"Income" above refers to "adjusted gross income" (AGI) or your total (or "gross") income for the tax year, minus certain adjustments you're allowed to take. Adjustments include deductions for conventional IRA contributions, student loan interest, and more. Adjusted gross income appears on IRS Form 1040, line 11.

- <100% FPL patients receive a 100% discount on total charges and are asked to contribute a \$20 visit fee for medical services.
- 101-200% FPL patients are asked to pay a down payment of \$50 (or their sliding scale discount if less) at time of visit and will be billed for the remainder of their charges with their eligible discount applied.
- >200% FPL patients are not eligible for discounts. They are asked to pay a down payment at time of service and will be billed for remaining charges.
- Down payments required for office visits. Lab and nurse visits patients will be billed for these services at their eligible discount.
- Insured patients will be charged their insurance co-pay at time of visit and their insurance is billed for services. Charges not covered by insurance will be billed to the patient with the eligible sliding fee scale discount.

Serving Hands Medical Center was founded to provide services for our community members that are unable to cover the cost of medical services because of being uninsured or underinsured. Having full paying patients and fully covered insured patients allows us to direct funds to those that cannot cover the cost of their own care. We utilize a sliding scale to determine discounts for eligible patients, depending on household size and annual income. Proof of annual or monthly household income will be needed to determine your discount. Household is defined as anyone living in your home that is earning income. Examples of income are a copy of the most recent 1040 tax return form, copies of the most recent month of pay check stubs, or a recent letter from an agency that provides your financial support (DSHS, SSI, or Unemployment).

A precise estimate of cost might not be available before your visit since the treatment plan is determined by the medical provider and patient. All patients will have a fee due at their visit that is based on the sliding scale. Additional charges if outstanding will be billed to you after eligible discounts are determined.

Find out if you are eligible for free or low-cost Washington Apple Health (Medicaid) coverage.

<https://www.hca.wa.gov/free-or-low-cost-health-care/i-need-medical-dental-or-vision-care/eligibility-overview>

Free or low-cost Washington Apple Health is available year-round, and you may qualify for a special enrollment if you are uninsured or have certain life changes. See Washington Health Plan Finder. <https://www.wahealthplanfinder.org/>

According to our mission and purpose, Serving Hands Medical Center will aid in necessary medical services regardless of a patient's ability to pay. All patients requesting financial aid will be asked to contribute funds toward their visit in order to maintain the overhead of our clinic. Any amount is accepted.