

VINFEN BEHAVIORAL HEALTH

SLIDING FEE DISCOUNT PROGRAM SCALE

Based on 2023 Federal Poverty Guidelines (Gross Income)

HOW TO READ THE SLIDING FEE SCALE

Step 1: Locate the row corresponding to the **number of individuals** in your family or household.

Step 2: Move across the row to find the **range** containing your household's **combined average annual income**.

Step 3: Once you have found your range, go to the **green** cell at the top of that column to find the **co-pay amount** you will pay each visit.


Sliding Fee Category	A		B		C		D		E	
% of Federal Poverty Line (FPL)	0%-100% of FPL		101%-125% of FPL		126%-150% of FPL		151%-200% of FPL		201%-300% of FPL	
Client Responsibility Per Visit	\$0		\$15		\$25		\$35		\$50	
Annual Income Household Size	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below
1	\$0	\$14,580	\$14,581	\$18,225	\$18,226	\$21,870	\$21,871	\$29,160	\$29,161	\$43,740
2	\$0	\$19,720	\$19,721	\$24,650	\$24,651	\$29,580	\$29,581	\$39,440	\$39,441	\$59,160
3	\$0	\$24,860	\$24,861	\$31,075	\$31,076	\$37,290	\$37,291	\$49,720	\$49,721	\$74,580
4	\$0	\$30,000	\$30,001	\$37,500	\$37,501	\$45,000	\$45,001	\$60,000	\$60,001	\$90,000
5	\$0	\$35,140	\$35,141	\$43,925	\$43,926	\$52,710	\$52,711	\$70,280	\$70,281	\$105,420
6	\$0	\$40,280	\$40,281	\$50,350	\$50,351	\$60,420	\$60,421	\$80,560	\$80,561	\$120,840
7	\$0	\$45,420	\$45,421	\$56,775	\$56,776	\$68,130	\$68,131	\$90,840	\$90,841	\$136,260
8*	\$0	\$50,560	\$50,561	\$63,200	\$63,201	\$75,840	\$75,841	\$101,120	\$101,121	\$151,680


*For each additional household member over 8 add \$5,140.

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VINFEN BEHAVIORAL HEALTH LOWELL

 40 Church Street
Lowell, MA 01852

 P: 978-674-6744
F: 978-441-9826

VINFEN BEHAVIORAL HEALTH LAWRENCE

 439 S. Union Street, Suite 207A
Lawrence, MA 01840

 P: 978-674-6744
F: 978-681-9654