

VINFEN BEHAVIORAL HEALTH

SLIDING FEE DISCOUNT PROGRAM SCALE

Based on 2025 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	\$15,650	\$15,061	\$19,562	\$19,563	\$23,475	\$23,476	\$31,300	\$31,301	\$46,950
2	\$0	\$21,150	\$21,151	\$26,437	\$26,438	\$31,725	\$31,726	\$42,300	\$42,301	\$63,450
3	\$0	\$26,650	\$26,651	\$33,312	\$33,313	\$39,975	\$39,976	\$53,300	\$53,301	\$79,950
4	\$0	\$32,150	\$31,151	\$40,187	\$40,188	\$48,225	\$48,226	\$64,300	\$64,301	\$96,450
5	\$0	\$37,650	\$37,651	\$47,062	\$47,063	\$56,475	\$56,476	\$75,300	\$75,301	\$112,950
6	\$0	\$43,150	\$43,151	\$53,937	\$53,938	\$64,725	\$64,726	\$86,300	\$86,301	\$129,450
7	\$0	\$48,650	\$48,651	\$60,812	\$60,813	\$79,975	\$79,976	\$97,300	\$97,301	\$145,950
8*	\$0	\$54,150	\$54,151	\$67,687	\$67,688	\$81,225	\$81,226	\$108,300	\$108,301	\$162,450

*Family size over 8 please contact Vinfen for rates

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