### Shasta Community Health Center

#### EIS Sliding Fee Scale

Sliding Fee Discounts are available to patients meeting income eligibility requirements.

Weekly Pay: X4.33 - Every 2 weeks pay: X2.167 - Twice a month pay: X2

**2020 Annual/Monthly Income EIS Sliding Fee Scale**

*Effective March 1, 2020*

*for Sliding Fee ONLY*

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Slide A</th>
<th>Slide B</th>
<th>Slide C</th>
<th>Self Pay</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yearly</td>
<td>Monthly</td>
<td>Yearly</td>
<td>Monthly</td>
</tr>
<tr>
<td>1</td>
<td>$12,760</td>
<td>$1,063</td>
<td>$25,512</td>
<td>$1,064</td>
</tr>
<tr>
<td></td>
<td>$0</td>
<td>$25.00 per visit until $100</td>
<td>$30.00 per visit until $120</td>
<td>$25.00 per visit until $100</td>
</tr>
</tbody>
</table>

**No Fee is due at any visit**

- **>100% and ≤ 200% FPL**
- **>200% and ≤ 300% FPL**
- **>300% FPL**

**Self Pay CAP is 10% of Yearly Income**

Patients must complete and sign Shasta Community Health Center Sliding Fee Program Application documenting income in writing twice annually (6 months) for NextGen documentation.

**EIS qualification based on EIS individual income only.**

Authorization is required to waive minimum fee.