

SLIDING FEE SCALE – April 2024

- CLINIC VISITS
- NEXPLANON INSERTION/REMOVAL
- IUD INSERTION/REMOVAL
- PATIENT DATA COLLECTION

OFFICE OF MATERNAL, CHILD AND FAMILY HEALTH
FAMILY PLANNING PROGRAM
350 Capitol Street, Room 427
Charleston, West Virginia 25301-3714

POVERTY LEVEL					Federal Register/Vol. 89, No.11/Jan. 17, 2024
Family Size	100%	100%+1 to 150%	150%+1 to 200%	200%+1 to 250%	250%+1/Private/Insurance Patient
1	\$1,255	\$1,256 - \$1,883	\$1,884 - \$2,450	\$2,451 - \$3,063	\$3,034+
2	\$1,703	\$1,704 - \$2,555	\$2,556 - \$3,406	\$3,407 - \$4,258	\$4,259+
3	\$2,152	\$2,153 - \$3,228	\$3,229 - \$4,304	\$4,305 - \$5,380	\$5,381+
4	\$2,600	\$2,601 - \$3,900	\$3,901 - \$5,200	\$5,201 - \$6,500	\$6,501+
5	\$3,048	\$3,049 - \$4,572	\$4,573 - \$6,096	\$6,097 - \$7,620	\$7,621+
6	\$3,497	\$3,498 - \$5,246	\$5,247 - \$6,994	\$6,995 - \$8,743	\$8,743+
7	\$3,945	\$3,946 - \$5,918	\$5,919 - \$7,890	\$7,891 - \$9,863	\$9,864+
8	\$4,393	\$4,394 - \$6,590	\$6,591 - \$8,786	\$8,787 - \$10,983	\$10,984+

NOTE: FOR EACH ADDITIONAL FAMILY MEMBER ADD:

	\$448	\$672	\$896	\$1,120	\$1,121+
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CLINIC VISITS**PATIENT PAYMENT TO CLINIC**

	100%	100%+1 to 150%	150%+1 to 200%	200%+1 to 250%	250%+1/Private/Insurance Patient Maximum Allowable Amount
Interim/Cont.	\$0	\$7.93	\$15.84	\$23.76	\$45.00
Problem Med.	\$0	\$13.61	\$29.00	\$40.83	\$120.00
Annual	\$0	\$18.92	\$37.85	\$56.76	\$185.00
Initial	\$0	\$25.52	\$51.06	\$76.56	\$300.00

PROGRAM PAYMENT TO CLINIC

	100%	100%+1 to 150%	150%+1 to 200%	200%+1 to 250%	250%+1/Private/Insurance Patient Maximum Allowable Amount
Interim/Cont.	\$31.68	\$23.76	\$15.84	\$7.93	\$45.00
Problem Med.	\$54.44	\$40.83	\$29.00	\$13.61	\$120.00
Annual	\$75.71	\$56.76	\$37.85	\$18.92	\$185.00
Initial	\$102.10	\$76.56	\$51.06	\$25.52	\$300.00

INSERTIONS AND REMOVALS**NEXPLANON INSERTION/REMOVAL****PATIENT PAYMENT TO CLINIC**

Insertion	\$0	\$23.79	\$47.59	\$71.39	\$241.00
Removal	\$0	\$26.86	\$53.66	\$80.49	\$256.00

PROGRAM PAYMENT TO CLINIC

Insertion	\$95.18	\$71.39	\$47.59	\$23.79	\$241.00
Removal	\$107.32	\$80.49	\$53.66	\$26.83	\$256.00

IUD INSERTION/REMOVAL**PATIENT PAYMENT TO CLINIC**

Insertion	\$0	\$24.13	\$48.25	\$72.36	\$255.00
Removal	\$0	\$18.17	\$36.35	\$54.52	\$165.00

PROGRAM PAYMENT TO CLINIC

Insertion	\$96.49	\$72.36	\$48.25	\$24.13	\$255.00
Removal	\$72.69	\$54.52	\$36.35	\$18.17	\$165.00

PATIENT DATA COLLECTION**PROGRAM PAYMENT TO CLINIC**

Entry of completed Data Collection Form FPEDS for patients without FPP payment participation.	\$5.00
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