

# SLIDING FEE SCALE – April 2025

- 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. 90, No.11/Jan. 17, 2025 |
|---------------|---------|-------------------|-------------------|--------------------|---|
| Family Size   | 100%    | 100%+1 to 150%    | 150%+1 to 200%    | 200%+1 to 250%     | 250%+1/Private/Insurance Patient              |
| 1             | \$1,304 | \$1,305 - \$1,956 | \$1,957 - \$2,608 | \$2,609 - \$3,260  | \$3,261+                                      |
| 2             | \$1,763 | \$1,764 - \$2,644 | \$2,645 - \$3,525 | \$3,526 - \$4,406  | \$4,407+                                      |
| 3             | \$2,201 | \$2,202 - \$3,331 | \$3,332 - \$4,442 | \$4,443 - \$5,552  | \$5,553+                                      |
| 4             | \$2,679 | \$2,680 - \$4,019 | \$4,020 - \$5,358 | \$5,359 - \$6,698  | \$6,699+                                      |
| 5             | \$3,138 | \$3,139 - \$4,706 | \$4,707 - \$6,275 | \$6,276 - \$7,844  | \$7,845+                                      |
| 6             | \$3,596 | \$3,597 - \$5,394 | \$5,395 - \$7,192 | \$7,193 - \$8,990  | \$8,991+                                      |
| 7             | \$4,054 | \$4,055 - \$6,081 | \$6,082 - \$8,108 | \$8,109 - \$10,135 | \$10,136+                                     |
| 8             | \$4,513 | \$4,514 - \$6,769 | \$6,770 - \$9,025 | \$9,026 - \$11,281 | \$11,282+                                     |

NOTE: FOR EACH ADDITIONAL FAMILY MEMBER ADD:

|  |       |       |       |         |          |
|--|-------|-------|-------|---------|----------|
|  | \$459 | \$688 | \$917 | \$1,146 | \$1,146+ |
|--|-------|-------|-------|---------|----------|

## CLINIC VISITS

## PATIENT PAYMENT TO CLINIC

|               | 100% | 100%+1 to 150% | 150%+1 to 200% | 200%+1 to 250% | 250%+1/Private/Insurance Patient<br>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<br>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 |
|---|--------|