



Table 1		TCA Health, Inc. Medical & Behavioral Health Sliding Fee Scale								
Table of Federal Poverty Guidelines for 2024 ( Annual)										
Family Size		1	2	3	4	5	6	7	8	
Annual Income		15,060	20,440	25,820	31,200	36,580	41,960	47,340	52,720	
Sliding Fee Scale by monthly income										
0% - 100% Proverty	A = \$30 fee; 0% Pt Pay	1,225	1,703	2,152	2,600	3,048	3,497	3,945	4,393	
101% - 125% Proverty	B= \$40 fee; 15% Pt Pay	1,569	2,129	2,690	3,250	3,810	4,371	4,931	5,492	
126% - 150% Proverty	C = \$45 fee; 25% Pt Pay	1,883	2,555	3,228	3,900	4,573	5,245	5,918	6,590	
151% - 175% Proverty	D= \$55 fee; 50% Pt Pay	2,196	2,981	3,765	4,550	5,335	6,119	6,904	7,688	
176% - 200% Proverty	E= \$65 fee; 75% Pt Pay	2,510	3,407	4,303	5,200	6,097	6,993	7,890	8,787	
Locate the family size. Then look at the table for the number which is the lowest equal to or above the patient's monthly income; the % of changes the patient is responsible for is represented in the left hand column. % change applies to additional services performed outside the office visit rate.										

Table 2		TCA Health, Inc. Dental Health Sliding Fee Scale								
Table of Federal Poverty Guidelines for 2024 ( Annual)										
Family Size		1	2	3	4	5	6	7	8	
Annual Income		15,060	20,440	25,820	31,200	36,580	41,960	47,340	52,720	
Sliding Fee Scale by monthly income										
0% - 100% Proverty	A = \$40 fee; 0% Pt Pay	1,225	1,703	2,152	2,600	3,048	3,497	3,945	4,393	
101% - 125% Proverty	B= \$45 fee; 15% Pt Pay	1,569	2,129	2,690	3,250	3,810	4,371	4,931	5,492	
126% - 150% Proverty	C = \$50 fee; 25% Pt Pay	1,883	2,555	3,228	3,900	4,573	5,245	5,918	6,590	
151% - 175% Proverty	D= \$55 fee; 50% Pt Pay	2,196	2,981	3,765	4,550	5,335	6,119	6,904	7,688	
176% - 200% Proverty	E= \$60 fee; 60% Pt Pay	2,510	3,407	4,303	5,200	6,097	6,993	7,890	8,787	
Locate the family size. Then look at the table for the number which is the lowest equal to or above the patient's monthly income; the % of changes the patient is responsible for is represented in the left hand column. % change applies to additional services performed outside the office visit rate.										