



# Lower Lights

Christian Health Center

## 2020-2021 LLCHC SCHEDULE OF DISCOUNTS

Service	Fees by Income as a Percent of the Federal Poverty Level		
	100% FPL	101%-150% FPL	151%-200% FPL
Medical*, Optometry	\$20.00	\$30.00	\$40.00
Behavioral Health, Nutrition	\$10.00	\$15.00	\$20.00
Dental	\$30.00	\$50.00	\$70.00
Pharmacy	\$10.00	\$15.00	\$20.00
Long Acting Reversible Contraceptives	\$20.00	\$30.00	\$40.00
<b>Family Size</b>	<b>100% FPL</b>	<b>101%-150% FPL</b>	<b>151%-200% FPL</b>
<b>1</b>	\$12,490	\$12,491 - \$18,735	\$18,736 - \$24,980
<b>2</b>	\$16,910	\$16,911 - \$25,365	\$25,366 - \$33,820
<b>3</b>	\$21,330	\$21,331 - \$31,995	\$31,996 - \$42,660
<b>4</b>	\$25,750	\$25,751 - \$38,625	\$38,626 - \$51,500
<b>5</b>	\$30,170	\$30,171 - \$45,255	\$45,256 - \$60,340
<b>6</b>	\$34,590	\$34,591 - \$51,885	\$51,886 - \$69,180
<b>7</b>	\$39,010	\$39,011 - \$58,515	\$58,516 - \$78,020
<b>8</b>	\$43,430	\$43,431 - \$65,145	\$65,146 - \$86,860
<b>9</b>	\$47,850	\$47,851 - \$71,775	\$71,776 - \$95,700
<b>10</b>	\$52,270	\$52,271 - \$78,405	\$78,406 - \$104,540
<b>For each additional person, add</b>	\$4,420		

Based on the Annual Update of HHS Poverty Guidelines Source: 2020

\*Labs are included. There is no charge for follow-up lab work effective March 1, 2019