Lower Lights Health

2025 LLCHC Schedule of Discounts
Changes to be Effective Sept. 1, 2025

Service	Discounted Fees		
*Medical, Optical	$ 25	$ 35	$ 55
Dental	$ 40	$ 60	$ 80
Pharmacy	$ 10	$ 15	$ 20
Prenatal & Obstetrics	$ 15	$ 20	$ 25
Behavioral Health, Nutrition	$ 15	$ 20	$ 25
Clinical Pharmacy, Integrated Social Work	$ 0	$ 1	$ 2
Contraceptives – Liletta	$ 50	$ 70	$ 90
Contraceptives – Depo Provera	$ 10	$ 15	$ 20
	100% FPL or Below	101% to 150% FPL	151% to 200% FPL

Household / Family Size	100% Federal Poverty Level	101% to 150% Federal Poverty Level	151% to 200% Federal Poverty Level
1	$15,650	$15,651 - $23,475	$23,476 - $31,300
2	$21,150	$21,151 - $31,725	$31,726 - $42,300
3	$26,650	$26,651 - $39,975	$39,976 - $53,300
4	$32,150	$32,151 - $48,225	$48,226 - $64,300
5	$37,650	$37,651 - $56,475	$56,476 - $75,300
6	$43,150	$43,151 - $64,725	$64,726 - $86,300
7	$48,650	$48,651 - $72,975	$72,976 - $97,300
8	$54,150	$54,151 - $81,225	$81,226 - $108,300

Add $5,500 for each additional person
**Labs are included. There is no charge for follow-up lab work.*

Lower Lights Health

2025 LLCHC Escala de Descuentos

Cambios vigentes a partir del 1 de septiembre de 2025

Servicio	Cuotas según su ingreso como porcentaje del Índice Federal de Pobreza (FPL)		
*Médico, Optometría	$ 25	$ 35	$ 55
Dental	$ 40	$ 60	$ 80
Farmacia	$ 10	$ 15	$ 20
Prenatal y Obstetricia	$ 15	$ 20	$ 25
Salud Mental, Nutrición	$ 15	$ 20	$ 25
Farmacia Clínica, Trabajo Social Integrado	$ 0	$ 1	$ 2
Anticonceptivos– Liletta	$ 50	$ 70	$ 90
Anticonceptivos – Depo Provera	$ 10	$ 15	$ 20
	100% FPL o inferior	101% a 150% FPL	151% a 100% FPL

Tamaño de la familia	100% FPL	101% a 150% FPL	151% a 100% FPL
1	$15,650	$15,651 - $23,475	$23,476 - $31,300
2	$21,150	$21,151 - $31,725	$31,726 - $42,300
3	$26,650	$26,651 - $39,975	$39,976 - $53,300
4	$32,150	$32,151 - $48,225	$48,226 - $64,300
5	$37,650	$37,651 - $56,475	$56,476 - $75,300
6	$43,150	$43,151 - $64,725	$64,726 - $86,300
7	$48,650	$48,651 - $72,975	$72,976 - $97,300
8	$54,150	$54,151 - $81,225	$81,226 - $108,300

Por cada persona adicional, agregue $5,500
**Los laboratorios están incluidos. No hay ningún cargo por el trabajo de laboratorio de seguimiento.*