



2015 VFC Immunization Sliding Fee Scale – Schedule of Discounts

| FAMILY SIZE | SFS Categories: B, C, D, E 100% Discount for Vaccine Administration Fees | Minimum | SELF PAY (50% DISCOUNT if administration fee is paid on date of service) |
|--------------------|---|----------------|---|
| 1 | 0 to 23540 | \$2.00 | 23541 |
| 2 | 0 to 31860 | \$2.00 | 31861 |
| 3 | 0 to 40180 | \$2.00 | 40181 |
| 4 | 0 to 48500 | \$2.00 | 48501 |
| 5 | 0 to 56820 | \$2.00 | 56821 |
| 6 | 0 to 65140 | \$2.00 | 65141 |
| 7 | 0 to 73460 | \$2.00 | 73461 |
| 8 | 0 to 81780 | \$2.00 | 81780 |
| 9 | 0 to 90100 | \$2.00 | 90101 |
| 10 | 0 to 98420 | \$2.00 | 98421 |

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- 1. There will be no denial of medical care due to an inability to pay.**
- 2. For family units with more than 10 members, add \$4160 for each additional member.**
- 3. Eligibility for the Sliding Fee Program will be effective for no more than the following 12 months.**

To qualify for the Sliding Fee Discount Program, a sliding fee application must be completed; proof of income and photo ID are required.