

## **2021 Pharmacy Sliding Fee Program – Schedule of Discounts**

Family	Annual Household Income				
Size	100% FPG	101% to 133% FPG	134% to 166% FPG	167% to 200% FPG	Above 200% FPG
1	\$0 to 12,880	\$12,881 to 17,130	\$17,131 to 21,381	\$21,382 to 25,760	\$25,761
2	0 to 17,420	17,241 to 23,169	23,170 to 28,917	28,918 to 34,840	34,841
3	0 to 21,960	21,961 to 29,207	29,208 to 36,454	36,455 to 43,920	43,921
4	0 to 26,500	26,501 to 35,245	35,246 to 43,990	43,991 to 53,000	53,001
5	0 to 31,040	31,041 to 41,283	41,284 to 51,526	51,527 to 62,080	62,081
6	0 to 35,580	35,581 to 47,321	47,322 to 59,063	59,064 to 71,160	71,161
7	0 to 40,120	40,121 to 53,360	53,361 to 66,599	66,600 to 80,240	80,241
8	0 to 44,660	44,661 to 59,398	59,399 to 74,136	74,137 to 89,320	89,321
9	0 to 49,200	49,201 to 65,436	65,437 to 81,672	81,673 to 98,400	98,401
10	0 to 53,740	53,741 to 71,474	71,475 to 89,208	89,209 to 107,480	107,481
Payment	A Pharmacy SFA	B Pharmacy SFB	C Pharmacy SFC	D Pharmacy SFD	E 100% Pay No Discount
					No Discount

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- 1. Denial of services is not based solely on inability to pay.
- 2. Family units with more than 10 members, add \$4,540 for each additional member.
- 3. Eligibility for the Sliding Fee Program will be effective for no more than the following 12 months.
- 4. Sliding Fee price depends upon drug pricing, patients will have a minimum charge of \$4, and may have discounts of over 90% off retail pricing.
- 5. Certain medications are excluded from the Sliding Fee Discount Program.

To qualify for the Sliding Fee Program, a Sliding Fee Application must be completed with proof of income and a photo ID.