



2026 Sliding Fee Schedule

Please request an application to apply for a discount.

Family Size	100% Discount	90% Discount	80% Discount	70% Discount	60% Discount	50% Discount	40% Discount	30% Discount	20% Discount	15% Discount	10% Discount	0% Discount
Poverty Level	100% FPL	110% FPL	120% FPL	130% FPL	140% FPL	150% FPL	160% FPL	170% FPL	180% FPL	190% FPL	200% FPL	> 200% FPL
1	\$15,960	\$17,556	\$19,152	\$20,748	\$22,344	\$23,940	\$25,536	\$27,132	\$28,728	\$30,324	\$31,920	> \$31,921
2	\$21,640	\$23,804	\$25,968	\$28,132	\$30,296	\$32,460	\$34,624	\$36,788	\$38,952	\$41,116	\$43,280	> \$43,281
3	\$27,320	\$30,052	\$32,784	\$35,516	\$38,248	\$40,980	\$43,712	\$46,444	\$49,176	\$51,908	\$54,640	> \$54,641
4	\$33,000	\$36,300	\$39,600	\$42,900	\$46,200	\$49,500	\$52,800	\$56,100	\$59,400	\$62,700	\$66,000	> \$66,001
5	\$38,680	\$42,548	\$46,416	\$50,284	\$54,152	\$58,020	\$61,888	\$65,756	\$69,624	\$73,492	\$77,360	> \$77,361
6	\$44,360	\$48,796	\$53,232	\$57,668	\$62,104	\$66,540	\$70,976	\$75,412	\$79,848	\$84,284	\$88,720	> \$88,721
7	\$50,040	\$55,044	\$60,048	\$65,052	\$70,056	\$75,060	\$80,064	\$85,068	\$90,072	\$95,076	\$100,080	> \$100,081
8	\$55,720	\$61,292	\$66,864	\$72,436	\$78,008	\$83,580	\$89,152	\$94,724	\$100,296	\$105,868	\$111,440	> \$111,441
Each Additional Person	+\$5,680	+\$6,248	+\$6,816	+\$7,384	+\$7,952	+\$8,520	+\$9,088	+\$9,656	+\$10,224	+\$10,792	+\$11,360	+\$11,360

WHY DO WE OFFER A SLIDING FEE DISCOUNT? A&E Healthcare Services Inc. is an approved-National Health Service Corps (NHSC) facility. This means that we provide health services regardless of a patient's insurance status or ability to pay. We offer an income-based Sliding Fee Scale for services at all of our locations including our mobile health unit. Ask our staff if you have any questions or would like an application to apply for our Sliding Fee Discount.

ALL PATIENTS WITH NO INSURANCE OR WHO ARE UNDER INSURED ARE ENCOURAGED TO APPLY IF YOU THINK YOU MEET THE INCOME GUIDELINES ABOVE.

*You may be under insured if you have a copay or deductible (out of pocket expense) that you cannot afford.

Federal Poverty Level Percentages are based on the HHS FPL Guidelines for 2026: <https://aspe.hhs.gov/topics/poverty-economic-mobility/povertyguidelines>