



Legacy Medical Care 2025 Sliding Fee Discount Schedule / Tarifa de Descuento

Category / Categoría	A		B		C		D		E		F
Charge / Cobro	Nominal Fee / Cobro Nominal		20%		40%		60%		80%		100%
FPG	0 - 100%		101-125%		126-150%		151-175%		176-200%		201% +
Family Size / Tamaño de la familia											
1	\$ -	\$ 15,650	\$ 15,651	\$ 19,563	\$ 19,564	\$ 23,475	\$ 23,476	\$ 27,388	\$ 27,389	\$ 31,300	\$ 31,301
2	\$ -	\$ 21,150	\$ 21,151	\$ 26,438	\$ 26,439	\$ 31,725	\$ 31,726	\$ 37,013	\$ 37,014	\$ 42,300	\$ 42,301
3	\$ -	\$ 26,650	\$ 26,651	\$ 33,313	\$ 33,314	\$ 39,975	\$ 39,976	\$ 46,638	\$ 46,639	\$ 53,300	\$ 53,301
4	\$ -	\$ 32,150	\$ 32,151	\$ 40,188	\$ 40,189	\$ 48,225	\$ 48,226	\$ 56,263	\$ 56,264	\$ 64,300	\$ 64,301
5	\$ -	\$ 37,650	\$ 37,651	\$ 47,063	\$ 47,064	\$ 56,475	\$ 56,476	\$ 65,888	\$ 65,889	\$ 75,300	\$ 75,301
6	\$ -	\$ 43,150	\$ 43,151	\$ 53,938	\$ 53,939	\$ 64,725	\$ 64,726	\$ 75,513	\$ 75,514	\$ 86,300	\$ 86,301
7	\$ -	\$ 48,650	\$ 48,651	\$ 60,813	\$ 60,814	\$ 72,975	\$ 72,976	\$ 85,138	\$ 85,139	\$ 97,300	\$ 97,301
8	\$ -	\$ 54,150	\$ 54,151	\$ 67,688	\$ 67,689	\$ 81,225	\$ 81,226	\$ 94,763	\$ 94,764	\$ 108,300	\$ 108,301

Notes / Notas

For families/households with more than 8 persons, add \$5,500 for each additional person
 2025 poverty guidelines are in effect as of January 19, 2025, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

Para familias/hogares con más de 8 personas, agregue \$5,500 por cada persona adicional
 Las guías de 2025 para personas de bajos recursos están vigentes a partir del 19 de enero de 2025, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

Nominal Charge / Cobro Nominal	A	B	C	D	E	F
Medical / Médico	\$ 25	\$ 35	\$ 45	\$ 55	\$ 65	Full Charge / Cobro Completo
Behavioral Health / Servicios de Salud Mental	\$ 5	\$ 10	\$ 15	\$ 20	\$ 25	Full Charge / Cobro Completo