

**2022 Finger Lakes Community Health Schedule of Discounts / Patient Cost-Share Schedule/Nominal Fee for Services
(Based Upon 2022 HHS Federal Poverty Guidelines effective 02/28/2022)**

Annual Income

Family Size	From	To	From	To	From	To	From	To	From	To	From	To
1	\$ -	\$ 13,590	\$ 13,591	\$ 18,075	\$ 18,076	\$ 25,142	\$ 25,143	\$ 27,180	\$ 27,181	\$ 33,975	\$ 33,976	and over
2	\$ -	\$ 18,310	\$ 18,311	\$ 24,352	\$ 24,353	\$ 33,874	\$ 33,875	\$ 36,620	\$ 36,621	\$ 45,775	\$ 45,776	and over
3	\$ -	\$ 23,030	\$ 23,031	\$ 30,630	\$ 30,631	\$ 42,606	\$ 42,607	\$ 46,060	\$ 46,061	\$ 57,575	\$ 57,576	and over
4	\$ -	\$ 27,750	\$ 27,751	\$ 36,908	\$ 36,909	\$ 51,338	\$ 51,339	\$ 55,500	\$ 55,501	\$ 69,375	\$ 69,376	and over
5	\$ -	\$ 32,470	\$ 32,471	\$ 43,185	\$ 43,186	\$ 60,070	\$ 60,071	\$ 64,940	\$ 64,941	\$ 81,175	\$ 81,176	and over
6	\$ -	\$ 37,190	\$ 37,191	\$ 49,463	\$ 49,464	\$ 68,802	\$ 68,803	\$ 74,380	\$ 74,381	\$ 92,975	\$ 92,976	and over
7	\$ -	\$ 41,910	\$ 41,911	\$ 55,740	\$ 55,741	\$ 77,534	\$ 77,535	\$ 83,820	\$ 83,821	\$ 104,775	\$ 104,776	and over
8	\$ -	\$ 46,630	\$ 46,631	\$ 62,018	\$ 62,019	\$ 86,266	\$ 86,267	\$ 93,260	\$ 93,261	\$ 116,575	\$ 116,576	and over
9	\$ -	\$ 51,350	\$ 51,351	\$ 68,296	\$ 68,297	\$ 94,998	\$ 94,999	\$ 102,700	\$ 102,701	\$ 128,375	\$ 128,376	and over
10	\$ -	\$ 56,070	\$ 56,071	\$ 74,573	\$ 74,574	\$ 103,730	\$ 103,731	\$ 112,140	\$ 112,141	\$ 140,175	\$ 140,176	and over

Monthly Income

Family Size	From	To	From	To	From	To	From	To	From	To	From	To
1	\$ -	\$ 1,133	\$ 1,134	\$ 1,506	\$ 1,507	\$ 2,095	\$ 2,096	\$ 2,265	\$ 2,266	\$ 2,831	\$ 2,832	and over
2	\$ -	\$ 1,526	\$ 1,527	\$ 2,029	\$ 2,030	\$ 2,823	\$ 2,824	\$ 3,052	\$ 3,053	\$ 3,815	\$ 3,816	and over
3	\$ -	\$ 1,919	\$ 1,920	\$ 2,553	\$ 2,554	\$ 3,551	\$ 3,552	\$ 3,838	\$ 3,839	\$ 4,798	\$ 4,799	and over
4	\$ -	\$ 2,313	\$ 2,314	\$ 3,076	\$ 3,077	\$ 4,278	\$ 4,279	\$ 4,625	\$ 4,626	\$ 5,781	\$ 5,782	and over
5	\$ -	\$ 2,706	\$ 2,707	\$ 3,599	\$ 3,600	\$ 5,006	\$ 5,007	\$ 5,412	\$ 5,413	\$ 6,765	\$ 6,766	and over
6	\$ -	\$ 3,099	\$ 3,100	\$ 4,122	\$ 4,123	\$ 5,734	\$ 5,735	\$ 6,198	\$ 6,199	\$ 7,748	\$ 7,749	and over
7	\$ -	\$ 3,493	\$ 3,494	\$ 4,645	\$ 4,646	\$ 6,461	\$ 6,462	\$ 6,985	\$ 6,986	\$ 8,731	\$ 8,732	and over
8	\$ -	\$ 3,886	\$ 3,887	\$ 5,168	\$ 5,169	\$ 7,189	\$ 7,190	\$ 7,772	\$ 7,773	\$ 9,715	\$ 9,716	and over
9	\$ -	\$ 4,279	\$ 4,280	\$ 5,691	\$ 5,692	\$ 7,917	\$ 7,918	\$ 8,558	\$ 8,559	\$ 10,698	\$ 10,699	and over
10	\$ -	\$ 4,673	\$ 4,674	\$ 6,214	\$ 6,215	\$ 8,644	\$ 8,645	\$ 9,345	\$ 9,346	\$ 11,681	\$ 11,682	and over

**Nominal Fee =<
100%**

Sliding Fee 101% - 200%

**Sliding Fee 201 -
250%**

No Discount >250%

**2022 Finger Lakes Community Health Schedule of Discounts / Patient Cost-Share Schedule/Nominal Fee for Services
(Based Upon 2022 HHS Federal Poverty Guidelines effective 02/28/2022)**

MEDICAL / REPRODUCTIVE HEALTH CARE		A	B	C	D	E	F
Nurse Visit (BP ck, weight ck)	<i>per visit</i>	\$0	\$0	\$0	\$0	\$0	\$0
Medical Visit	<i>per visit</i>	\$20	\$40	\$60	\$80	Full Fee	Full Fee
Reproductive Health Visit	<i>per visit</i>	\$0	\$40	\$60	\$80	\$100	Full Fee
Behavioral Health Counseling	<i>per visit</i>	\$10	\$20	\$30	\$40	Full Fee	Full Fee
Nutritional Counseling	<i>per visit</i>	\$10	\$20	\$30	\$40	Full Fee	Full Fee
Virtual Visit	<i>per visit</i>	\$20	\$25	\$30	\$35	Full Fee/\$40	Full Fee/\$40
Covid 19 Screening Public Health	<i>per visit</i>	\$86	\$86	\$86	\$86	\$86	\$86
DOT Exams	<i>per code</i>	\$110	\$120	\$130	\$140	Full	Full Fee/\$150
IUD/Nexplanon Device	<i>per device</i>	\$0	\$15	\$30	\$45	\$60	Mirena IUD Paragard IUD Liletta IUD Nuvaring Nexplanon Skyla
Depo Provera Serum	<i>per injection</i>	\$0	\$2	\$4	\$6	\$8	Full Fee
Emerg Contraception/Condoms	<i>per pack</i>	\$0	\$0	\$0	\$0	\$0	Full Fee
Birth Control Pills	<i>per pack</i>	\$0	\$2	\$4	\$6	\$8	Full Fee
HPV Serum	<i>per vaccine</i>	\$0	\$2	\$4	\$6	\$8	Full Fee
Flu Vaccine Serum plus Admin Adult and Child 2022/2023	<i>per vaccine</i>	\$5	\$10	\$15	\$20	Full Fee/ \$25	Full Fee/ \$25
HIV Test	<i>per code</i>	\$0	\$0	\$0	\$0	\$0	\$0
Pregnancy Test	<i>per code</i>	\$0	\$0	\$0	\$0	\$0	Full Fee
Glucose/A1C/Urine	<i>per code</i>	\$0	\$0	\$0	\$0	Full Fee	Full Fee
Vaccine Administration	<i>per code</i>	\$1	\$2	\$3	\$4	Full Fee	Full Fee
Home Visit Screening	<i>per code</i>	\$0	\$0	\$0	\$0	Full Fee	Full Fee
Home Visit Evaluation/Management	<i>per code</i>	\$1	\$2	\$3	\$4	Full Fee/ \$5	Full Fee/ \$5
All Other Meds < 4 days/Injectables/Immunizations	<i>per code</i>	Set Fee	Set Fee	Set Fee	Set Fee	Set Fee	Set Fee
DENTAL CARE		A	B	C	D	E	F
Virtual Visit	<i>per visit</i>	\$20	\$25	\$30	\$35	Full Fee/\$40	Full Fee/\$40
Emergency Visit	<i>per visit</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Exam New Pt	<i>per visit</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Exam Est Pt	<i>per visit</i>	\$10	\$15	\$20	\$25	Full Fee	Full Fee
Prophy/Fluoride/Varnish Child (12<yrs)	<i>per visit</i>	\$10	\$20	\$30	\$40	Full Fee	Full Fee
Prophy/Fluoride/Varnish Adult (13<=)	<i>per visit</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Prophy/Fluoride/Varnish Adult (<14 teeth)	<i>per visit</i>	\$10	\$15	\$20	\$25	Full Fee	Full Fee
Xray (Bitewing / PA)	<i>per visit</i>	\$3	\$6	\$9	\$12	Full Fee	Full Fee
Xray (Panorex / Full Mouth)	<i>per visit</i>	\$40	\$55	\$70	\$85	Full Fee	Full Fee
Sealants and Silver Diamine	<i>per visit</i>	\$20	\$25	\$30	\$35	Full Fee	Full Fee
Fillings	<i>per code</i>	\$30	\$50	\$70	\$90	Full Fee	Full Fee
Extractions	<i>per code</i>	\$40	\$60	\$80	\$100	Full Fee	Full Fee
Periodontics	<i>per code</i>	\$30	\$50	\$70	\$90	Full Fee	Full Fee
Endodontics	<i>per code</i>	\$300	\$400	\$500	\$600	Full Fee	Full Fee
Other Surgical Procedures	<i>per code</i>	\$900	\$1,100	\$1,300	\$1,500	Full Fee	Full Fee
Denture - Complete - Upper	<i>per code</i>	\$525	\$650	\$775	\$900	Full Fee	Full Fee
Denture - Complete - Lower	<i>per code</i>	\$525	\$650	\$775	\$900	Full Fee	Full Fee
Partial - Acrylic - Upper	<i>per code</i>	\$415	\$515	\$615	\$715	Full Fee	Full Fee
Partial - Acrylic - Lower	<i>per code</i>	\$415	\$515	\$615	\$715	Full Fee	Full Fee
Partial - Metal - Upper	<i>per code</i>	\$610	\$735	\$860	\$985	Full Fee	Full Fee
Partial - Metal - Lower	<i>per code</i>	\$610	\$735	\$860	\$985	Full Fee	Full Fee
Partial - DuraFlex - Upper	<i>per code</i>	\$520	\$620	\$720	\$820	Full Fee	Full Fee
Partial - DuraFlex - Lower	<i>per code</i>	\$520	\$620	\$720	\$820	Full Fee	Full Fee
Crown	<i>per code</i>	\$340	\$428	\$515	\$603	Full Fee	Full Fee
Nightguard/Space Maintainer	<i>per code</i>	\$175	\$200	\$225	\$250	Full Fee	Full Fee
Flipper	<i>per code</i>	\$140	\$205	\$270	\$335	Full Fee	Full Fee
Minor Prosthetic Repair	<i>per code</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Major Prosthetic Repair	<i>per code</i>	\$95	\$110	\$125	\$140	Full Fee	Full Fee

**2022 Finger Lakes Community Health Schedule of Discounts / Patient Cost-Share Schedule/Nominal Fee for Services
(Based Upon 2022 HHS Federal Poverty Guidelines effective 02/28/2022)**

Annual Income												
Family Size	From	To	From	To	From	To	From	To	From	To	From	To
1	\$ -	\$ 13,590	\$ 13,591	\$ 18,075	\$ 18,076	\$ 25,142	\$ 25,143	\$ 27,180	\$ 27,181	\$ 33,975	\$ 33,976	and over
2	\$ -	\$ 18,310	\$ 18,311	\$ 24,352	\$ 24,353	\$ 33,874	\$ 33,875	\$ 36,620	\$ 36,621	\$ 45,775	\$ 45,776	and over
3	\$ -	\$ 23,030	\$ 23,031	\$ 30,630	\$ 30,631	\$ 42,606	\$ 42,607	\$ 46,060	\$ 46,061	\$ 57,575	\$ 57,576	and over
4	\$ -	\$ 27,750	\$ 27,751	\$ 36,908	\$ 36,909	\$ 51,338	\$ 51,339	\$ 55,500	\$ 55,501	\$ 69,375	\$ 69,376	and over
5	\$ -	\$ 32,470	\$ 32,471	\$ 43,185	\$ 43,186	\$ 60,070	\$ 60,071	\$ 64,940	\$ 64,941	\$ 81,175	\$ 81,176	and over
6	\$ -	\$ 37,190	\$ 37,191	\$ 49,463	\$ 49,464	\$ 68,802	\$ 68,803	\$ 74,380	\$ 74,381	\$ 92,975	\$ 92,976	and over
7	\$ -	\$ 41,910	\$ 41,911	\$ 55,740	\$ 55,741	\$ 77,534	\$ 77,535	\$ 83,820	\$ 83,821	\$ 104,775	\$ 104,776	and over
8	\$ -	\$ 46,630	\$ 46,631	\$ 62,018	\$ 62,019	\$ 86,266	\$ 86,267	\$ 93,260	\$ 93,261	\$ 116,575	\$ 116,576	and over
9	\$ -	\$ 51,350	\$ 51,351	\$ 68,296	\$ 68,297	\$ 94,998	\$ 94,999	\$ 102,700	\$ 102,701	\$ 128,375	\$ 128,376	and over
10	\$ -	\$ 56,070	\$ 56,071	\$ 74,573	\$ 74,574	\$ 103,730	\$ 103,731	\$ 112,140	\$ 112,141	\$ 140,175	\$ 140,176	and over
Monthly Income												
Family Size	From	To	From	To	From	To	From	To	From	To	From	To
1	\$ -	\$ 1,133	\$ 1,134	\$ 1,506	\$ 1,507	\$ 2,095	\$ 2,096	\$ 2,265	\$ 2,266	\$ 2,831	\$ 2,832	and over
2	\$ -	\$ 1,526	\$ 1,527	\$ 2,029	\$ 2,030	\$ 2,823	\$ 2,824	\$ 3,052	\$ 3,053	\$ 3,815	\$ 3,816	and over
3	\$ -	\$ 1,919	\$ 1,920	\$ 2,553	\$ 2,554	\$ 3,551	\$ 3,552	\$ 3,838	\$ 3,839	\$ 4,798	\$ 4,799	and over
4	\$ -	\$ 2,313	\$ 2,314	\$ 3,076	\$ 3,077	\$ 4,278	\$ 4,279	\$ 4,625	\$ 4,626	\$ 5,781	\$ 5,782	and over
5	\$ -	\$ 2,706	\$ 2,707	\$ 3,599	\$ 3,600	\$ 5,006	\$ 5,007	\$ 5,412	\$ 5,413	\$ 6,765	\$ 6,766	and over
6	\$ -	\$ 3,099	\$ 3,100	\$ 4,122	\$ 4,123	\$ 5,734	\$ 5,735	\$ 6,198	\$ 6,199	\$ 7,748	\$ 7,749	and over
7	\$ -	\$ 3,493	\$ 3,494	\$ 4,645	\$ 4,646	\$ 6,461	\$ 6,462	\$ 6,985	\$ 6,986	\$ 8,731	\$ 8,732	and over
8	\$ -	\$ 3,886	\$ 3,887	\$ 5,168	\$ 5,169	\$ 7,189	\$ 7,190	\$ 7,772	\$ 7,773	\$ 9,715	\$ 9,716	and over
9	\$ -	\$ 4,279	\$ 4,280	\$ 5,691	\$ 5,692	\$ 7,917	\$ 7,918	\$ 8,558	\$ 8,559	\$ 10,698	\$ 10,699	and over
10	\$ -	\$ 4,673	\$ 4,674	\$ 6,214	\$ 6,215	\$ 8,644	\$ 8,645	\$ 9,345	\$ 9,346	\$ 11,681	\$ 11,682	and over
	Nominal Fee =< 100%		Sliding Fee 101% - 200%					Sliding Fee 201 - 250%		No Discount >250%		

MEDICAL / REPRODUCTIVE HEALTH CARE % of FPL		A 0% - 100%	B 101% - 133%	C 134% - 185%	D 186% - 200%	E 201% - 250%	F > 250%
Nurse Visit (BP ck, weight ck)	<i>per visit</i>	\$0	\$0	\$0	\$0	\$0	\$0
Medical Visit	<i>per visit</i>	\$20	\$40	\$60	\$80	Full Fee	Full Fee
Reproductive Health Visit	<i>per visit</i>	\$0	\$40	\$60	\$80	\$100	Full Fee
Behavioral Health Counseling	<i>per visit</i>	\$10	\$20	\$30	\$40	Full Fee	Full Fee
Nutritional Counseling	<i>per visit</i>	\$10	\$20	\$30	\$40	Full Fee	Full Fee

Virtual Visit	<i>per visit</i>	\$20	\$25	\$30	\$35	Full Fee/\$40	Full Fee/\$40
Covid 19 Screening Public Health	<i>per visit</i>	\$86	\$86	\$86	\$86	\$86	\$86
DOT Exams	<i>per code</i>	\$110	\$120	\$130	\$140	Full Fee/\$150	Full Fee/\$150
IUD/Nexplanon Device	<i>per device</i>	\$0	\$15	\$30	\$45	\$60	Mirena IUD Paragard IUD Liletta IUD Nuvaring Nexplanon Skyla
Depo Provera Serum	<i>per injection</i>	\$0	\$2	\$4	\$6	\$8	Full Fee
Emerg Contraception/Condoms	<i>per pack</i>	\$0	\$0	\$0	\$0	\$0	Full Fee
Birth Control Pills	<i>per pack</i>	\$0	\$2	\$4	\$6	\$8	Full Fee
HPV Serum	<i>per vaccine</i>	\$0	\$2	\$4	\$6	\$8	Full Fee
Flu Vaccine Serum plus Admin Adult and Child 2022/2023	<i>per vaccine</i>	\$5	\$10	\$15	\$20	Full Fee/ \$25	Full Fee/ \$25
HIV Test	<i>per code</i>	\$0	\$0	\$0	\$0	\$0	\$0
Pregnancy Test	<i>per code</i>	\$0	\$0	\$0	\$0	\$0	Full Fee
Glucose/A1C/Urine	<i>per code</i>	\$0	\$0	\$0	\$0	Full Fee	Full Fee
Vaccine Administration	<i>per code</i>	\$1	\$2	\$3	\$4	Full Fee	Full Fee
Home Visit Screening	<i>per code</i>	\$0	\$0	\$0	\$0	Full Fee	Full Fee
Home Visit Evaluation/Management	<i>per code</i>	\$1	\$2	\$3	\$4	Full Fee/ \$5	Full Fee/ \$5
All Other Meds < 4 days/Injectables/Immuni zations	<i>per code</i>	Set Fee	Set Fee	Set Fee	Set Fee	Set Fee	Set Fee
DENTAL CARE		A	B	C	D	E	F
Virtual Visit	<i>per visit</i>	\$20	\$25	\$30	\$35	Full Fee/\$40	Full Fee/\$40
Emergency Visit	<i>per visit</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Exam New Pt	<i>per visit</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Exam Est Pt	<i>per visit</i>	\$10	\$15	\$20	\$25	Full Fee	Full Fee
Prophy/Fluoride/Varnish Child (12<yrs)	<i>per visit</i>	\$10	\$20	\$30	\$40	Full Fee	Full Fee
Prophy/Fluoride/Varnish Adult (13>)	<i>per visit</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Prophy/Fluoride/Varnish Adult (<14 teeth)	<i>per visit</i>	\$10	\$15	\$20	\$25	Full Fee	Full Fee
Xray (Bitewing / PA)	<i>per visit</i>	\$3	\$6	\$9	\$12	Full Fee	Full Fee

Xray (Panorex / Full Mouth)	<i>per visit</i>	\$40	\$55	\$70	\$85	Full Fee	Full Fee
Sealants and Silver Diamine	<i>per visit</i>	\$20	\$25	\$30	\$35	Full Fee	Full Fee
Fillings	<i>per code</i>	\$30	\$50	\$70	\$90	Full Fee	Full Fee
Extractions	<i>per code</i>	\$40	\$60	\$80	\$100	Full Fee	Full Fee
Periodontics	<i>per code</i>	\$30	\$50	\$70	\$90	Full Fee	Full Fee
Endodontics	<i>per code</i>	\$300	\$400	\$500	\$600	Full Fee	Full Fee
Other Surgical Procedures	<i>per code</i>	\$900	\$1,100	\$1,300	\$1,500	Full Fee	Full Fee
Denture - Complete - Upper	<i>per code</i>	\$525	\$650	\$775	\$900	Full Fee	Full Fee
Denture - Complete - Lower	<i>per code</i>	\$525	\$650	\$775	\$900	Full Fee	Full Fee
Partial - Acrylic - Upper	<i>per code</i>	\$415	\$515	\$615	\$715	Full Fee	Full Fee
Partial - Acrylic - Lower	<i>per code</i>	\$415	\$515	\$615	\$715	Full Fee	Full Fee
Partial - Metal - Upper	<i>per code</i>	\$610	\$735	\$860	\$985	Full Fee	Full Fee
Partial - Metal - Lower	<i>per code</i>	\$610	\$735	\$860	\$985	Full Fee	Full Fee
Partial - DuraFlex - Upper	<i>per code</i>	\$520	\$620	\$720	\$820	Full Fee	Full Fee
Partial - DuraFlex - Lower	<i>per code</i>	\$520	\$620	\$720	\$820	Full Fee	Full Fee
Crown	<i>per code</i>	\$340	\$428	\$515	\$603	Full Fee	Full Fee
Nightguard/Space Maintainer	<i>per code</i>	\$175	\$200	\$225	\$250	Full Fee	Full Fee
Flipper	<i>per code</i>	\$140	\$205	\$270	\$335	Full Fee	Full Fee
Minor Prosthetic Repair	<i>per code</i>	\$20	\$30	\$40	\$50	Full Fee	Full Fee
Major Prosthetic Repair	<i>per code</i>	\$95	\$110	\$125	\$140	Full Fee	Full Fee

Mobile Medical FLU immunization pricing:

Slide A = \$5

Slide B = \$10

Slice C = \$15

Slide D = \$20

Full Fee = \$25