

High Plains CHC ABILITY TO PAY SCALE

HPC Slinds Scale, Migrant, Teen Services, CHP+, & WWC, and Family Planning

Effective April 1, 2025 through March 31, 2026

Family Size	OFFICE VISITS							
	C	D	E	F	G	H	I - PCF Only	
Poverty Level*	0-100%	101-117%	118-133%	134%-159%	160%-185%	186%-200%	201-250%	Patients with income above 200% FPL do not qualify for the H80 program, no discounts can be given
1	0 - 15,650	15,651 - 18,311	18,312 - 20,815	20,816 - 24,884	24,885 - 28,953	28,954 - 31,300	31,301 - 39,125	
2	0 - 21,150	21,151 - 24,746	24,747 - 28,130	28,131 - 33,629	33,630 - 39,128	39,129 - 42,300	42,301 - 52,875	
3	0 - 26,650	26,651 - 31,181	31,182 - 35,445	35,446 - 42,374	42,375 - 49,303	49,304 - 53,300	53,301 - 66,625	
4	0 - 32,150	32,151 - 37,616	37,617 - 42,760	42,761 - 51,119	51,120 - 59,478	59,479 - 64,300	64,301 - 80,375	
5	0 - 37,650	37,651 - 44,051	44,052 - 50,075	50,076 - 59,864	59,865 - 69,653	69,654 - 75,300	75,301 - 94,125	
6	0 - 43,150	43,151 - 50,486	50,487 - 57,390	57,391 - 68,609	68,610 - 79,828	79,829 - 86,300	86,301 - 107,875	
7	0 - 48,650	48,651 - 56,921	56,922 - 64,705	64,706 - 77,354	77,355 - 90,003	90,004 - 97,300	97,301 - 121,625	
8	0 - 54,150	54,151 - 63,356	63,357 - 72,020	72,021 - 86,099	86,100 - 100,178	100,179 - 108,300	108,301 - 135,375	
9	0 - 59,650	59,651 - 69,791	69,792 - 79,335	79,336 - 94,844	94,845 - 110,353	110,354 - 119,300	119,301 - 149,125	
10	0 - 65,150	65,151 - 76,226	76,227 - 86,650	86,651 - 103,589	103,590 - 120,528	120,529 - 130,300	130,301 - 162,875	
11	0 - 70,650	70,651 - 82,661	82,662 - 93,965	93,966 - 112,334	112,335 - 130,703	130,704 - 141,300	141,301 - 176,625	
12	0 - 76,150	76,151 - 89,096	89,097 - 101,280	101,281 - 121,079	121,080 - 140,878	140,879 - 152,300	152,301 - 190,375	
13	0 - 81,650	81,651 - 95,531	95,532 - 108,595	108,596 - 129,824	129,825 - 151,053	151,054 - 163,300	163,301 - 204,125	
14	0 - 87,150	87,151 - 101,966	101,967 - 115,910	115,911 - 138,569	138,570 - 161,228	161,229 - 174,300	174,301 - 217,875	
15	0 - 92,650	92,651 - 108,401	108,402 - 123,225	123,226 - 147,314	147,315 - 171,403	171,404 - 185,300	185,301 - 231,625	
16	0 - 98,150	98,151 - 114,836	114,837 - 130,540	130,541 - 156,059	156,060 - 181,578	181,579 - 196,300	196,301 - 245,375	
Medical / BH	\$10 Nominal Fee	\$20	\$24	\$25	\$34	\$35	\$40	Patients with income above 200% FPL do not qualify for the H80 program, no discounts can be given
Family Plannin	\$0	\$20	\$24	\$25	\$34	\$35	\$40	
Dental	\$30 Nominal Fee	40%	50%	60%	70%	80%	No dental slide	
Dispensary	\$6	\$7	\$8	\$9	\$10	\$11	\$12	
WWC	ALL PFL's 0-250% qualify for WWC, Care Coordination and WiseWomen							

* Percent of Federal Poverty Level which corresponds to the upper limit of income in each rating level \$5,500 per person

* Homeless patients have a \$0 copay

* HPC is the H80 Federal Grant up to 200% of poverty