CHAS Health Sliding Fee Discount Program
Good Faith Estimate

CHAS Health may be able to lower the cost of your care through our Sliding Fee Discount Program. All patients are encouraged to apply for the Sliding Fee Discount Program – even if you have insurance. Eligibility is based on household size and income of all adult household members. Household size includes everyone who depends on the household's income for at least half of their living expenses.

How much you will pay will depend on your income. We offer discounts off our regular charges based on a person's income and the number of people in their household.
New Patients: When you visit CHAS Health, our staff will help you determine which sliding fee discount category you belong to. Please see the table below to learn more about our sliding fee discount categories.

To apply for the Sliding Fee Discount Program, you must:

1. Complete CHAS Health's Sliding Fee Discount Program Application
2. Give CHAS Health proof of your estimated current annual income. These documents may include:
   - Pay stubs,
   - A recent tax return, or
   - Benefit letters (social security, unemployment, etc.)

   If you cannot bring these documents, you may complete the Self Declaration of Income.
3. To keep your CHAS Health Sliding Fee Discount, you must renew it every year. Each year, you need to submit a new application and provide proof of income.
4. Submit a new application if your household size changes or your monthly income changes by $150 or more for at least two months.

Services Outside of CHAS Health

CHAS Health's Sliding Fee Discount Program applies only to services provided at CHAS Health and Spokane Urgent Care. Patients who qualify may also receive discounts for labs and imaging services provided by Inland Imaging, Quest Labs, Labcorp, and Incyte Pathology when ordered by a CHAS Health provider. All other services from outside specialists, labs, or radiology are not covered, and patients are responsible for all charges.

Household Size & FPL	Sliding Fee Discount Category				
	A 0-100% FPL	**B** >100% - 138% FPL	**C** >138% - 175% FPL	**D** >175% - 200% FPL	**E** >200% FPL
1	$0 - $15,960	$15,960.01- $22,024.80	$22,024.81 – $27,930	$27,930.01 - $31,920	Above $31,920
2	$0 - $21,640	$21,640.01 – $29,863.20	$29,863.21- $37,870	$37,870.01 - $43,280	Above $43,280
3	$0 - $27,320	$27,320.01 - $37,701.60	$37,701.61- $47,810	$47,810.01 - $54,640	Above $54,640
4	$0 - $33,000	$33,000.01- $45,540	$45,540.01 - $57,750	$57,750.01 - $66,000	Above $66,000
5	$0 - $38,680	$38,680.01- $53,378.40	$53,378.41 - $67,690	$67,690.01 - $77,360	Above $77,360
6	$0 - $44,360	$44,360.01 - $61,216.80	$61,216.81 - $77,630	$77,630.01 - $88,720	Above $88,720

CHAS Health Sliding Fee Discount Program
Good Faith Estimate

Sliding Fee Discount Program - Medical Services

Sliding Fee Discount Category	Medical Services	Medical Services Behavioral Health & Expanded Care Team*	Flu & COVID Immunizations
A	$20	$0	100% Discount
B	$30	$3	
C	$50	$6	
D	$60	$9	
E	No Discount – Contact CHAS for a Good Faith Estimate of charges 509.444.8200		

** Behavioral Health sliding fee scale applies to visits with behavioral health providers, including substance abuse providers. Expanded Care Team scale includes: clinical pharmacists, registered dieticians, registered nurse, Care Coordinators, Community Health Workers, and Pathways to Wellness program visits.*

Sliding Fee E (full fee) – Prices of common medical services

Listed below are the prices of common medical services. Actual prices may be less than maximum price but will not exceed the maximum for the codes listed. The prices listed **are for the visit itself**, and do not include the cost of vaccinations, tests, or other procedures that may be performed.

Common Medical Services	Code	Price Maximum
Office visit, new patient	99202-99205	$457
Office visit, established patient	99212 -99215	$326
Preventive Annual Health Exam (18+ years old)	99385-99387, 99395-99397	$306
Well Child Exam (17 years old and younger, not including vaccinations)	99381-99384 99391-99394	$223
Behavioral health visit	90791-90792 90832-90837	$327
Clinical pharmacist, medication management	99606-99607	$89
Registered nurse, Chronic Care Management	99487-99491	$194
Registered dietician	97802-97804	$64
Retinal scan	92250	$126
IUD or Nexplanon insertion or removal (device billed through pharmacy)	58300-58301 11981-11983	$568
OB global package (prenatal, vaginal delivery, postpartum care)	59400-59430	$4,687

CHAS Health Sliding Fee Discount Program
Good Faith Estimate

Dental Services

Sliding Fee Discount Category	**Level 1** **Basic Dental Services** *Dental exams, imaging, basic cleanings, fluoride, and periodontal maintenance*	**Level 2** **Restorative & Periodontal Services** *Scaling and root planing, restorative fillings, endodontics, extractions, occlusal guards, etc.*	**Level 3** **Crowns, Inlays, & Onlays** *The fee listed includes a professional fee component and a portion of the laboratory fee.*
A	$35 per visit	$35 per visit	$100 for first unit *$65 lab fee for each additional unit*
B	$45 per visit	$75 per visit	$395 per unit
C	$60 per visit	$100 per visit	$540 per unit
D	$75 per visit	$150 per visit	$755 per unit
E	100% (Full Fee)	100% (Full Fee)	100% of Professional Fee and Lab Fee

Prices of common dental services

A personalized dental treatment plan with recommended services and costs will be provided to you after a dental exam. The table below lists the prices of some common dental services. Prices may vary based on actual services provided.

Common Dental Services	Code	Price Maximum
Adult Dental Exam	D0150, D0210	$276
Periodic Oral Exam (POE)	D0120, D0274, D0220, D0230 (x2)	$246
Limited Dental Exam (DX)	D0140, D0220, D0270	$169
Emergency Tooth Extraction (XA)	D0140, D0220, D7140	$369
Basic cleaning with Fluoride	D1110, D1206	$175
Basic cleaning without Fluoride	D1110	$114
Deep Cleaning (Periodontal Scaling) with Fluoride	D4341, D1206	$376
Deep Cleaning (Periodontal Scaling) without Fluoride	D4341	$315

CHAS Health Sliding Fee Discount Program
Good Faith Estimate

Pharmacy Services

Sliding Fee Discount Category	**Pharmacy Medications** *Cost of the medication + dispensing fee*	**Select Pharmacy Supplies ‡** *Cost of the equipment + dispensing fee*	**Pharmacy** *Bicillin, Prolia, and IUD Medication Only*
A	Cost of the medication +$0	$0	$0
B	Cost of the medication +$3	$0 +$3	
C	Cost of the medication +$6	$0 +$6	
D	Cost of the medication +$9	$0 +$9	
E >200% to 400% FPL	Cost of the medication +$23	Cost of equipment+$23	Cost
Full Fee Over 400% FPL	No Discount *Usual and Customary fee† + $23*	No Discount *Usual and Customary fee† + $23*	No Discount *Usual and Customary fee†*

**Usual and Customary fee is the average wholesale price paid at a retail pharmacy.*
***Please ask your CHAS Health pharmacy for a current list of supplies covered under the Select Pharmacy Supplies sliding fee scale.*

Important Notes: This Good Faith Estimate is based on our understanding of your needs as of today. While caring for you, our providers may recommend additional services that are not listed here. Your actual charges may vary from this estimate. This estimate is not a contract and does not require you to get services from CHAS Health. If your actual charges are more than $400 above this estimate, you can initiate a provider-patient dispute resolution process. You can learn how to start this process by calling CHAS Billing at 509.444.7880. Starting a dispute resolution process will not impact the quality of health services you receive at CHAS Health.

CHAS Health will not deny services based on a patient's inability to pay, even if that means reducing or waiving costs (if applicable). Contact a CHAS Health Patient Resources Coordinator at 509.444.8200 to learn about resources available to you.