



NHSC Site Application Process: Sliding Fee Discount Program

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How to Meet NHSC Site Eligibility Requirements

To become a National Health Service Corps (NHSC)-approved site, your facility must meet the requirements in the [NHSC Site Reference Guide](#) (PDF - 807 KB) and [NHSC Site Agreement](#) (PDF - 291 KB).

This page provides an overview of NHSC eligibility requirements.

Give Feedback

<https://nhsc.hrsa.gov/sites/eligibility-requirements>

Sliding Fee Discount Program

SLIDING FEE DISCOUNT PROGRAM

Your site must use a Sliding Fee Discount Program to ensure patients have access to all primary care services regardless of their ability to pay. Eligibility for your Sliding Fee Discount Program must be:

- *Based solely on family size and income; and*
- *At a minimum, applicable to all individuals and families with annual incomes at or below 200 % of the most current [Federal Poverty Guidelines](#).*

The components of your Sliding Fee Discount Program for National Health Service Corps-approved sites must include a Sliding Fee Discount Program policy, a patient application, a sliding fee schedule, and posted signage. **Your site should have a Sliding Fee Discount Program in place for at least six consecutive months before applying** to become a National Health Service Corps-approved site and continuously thereafter.

Sliding Fee Schedule

Sliding Fee Schedule

Your site must use a schedule of fees or payments for services consistent with locally prevailing rates or charges, and that is designed to cover your site's reasonable cost of operation. Once your site has established its fee schedule, it must develop a corresponding Sliding Fee Schedule to ensure that uniform and reasonable fees and discounts are applied to all eligible patients. You must base your Sliding Fee Schedule on income and family size, and at a minimum, you should revise it annually to reflect updates to the Federal Poverty Guidelines. The Sliding Fee Schedule should cover all primary care services for the site type.

Specifically, your site's Sliding Fee Schedule must:

- Provide a **full discount (no charge)** for individuals and families with annual incomes at or below 100 percent of the most current Federal Poverty Guidelines, with allowance for a nominal charge only, consistent with your site's Sliding Fee Discount Program policy. The nominal charge must be less than the fee paid by a patient in the first "sliding fee discount pay class" beginning above 100 percent of the Federal Poverty Guidelines;
- Provide services at a nominal charge, which can be in the form of a sliding fee, or schedule of discount, to individuals and families with incomes above 100 percent and at or below 200 percent of the Federal Poverty Guidelines;
- Use nominal charges at a financial level that does not reflect the service's true value and does not create a barrier to care for patients. The nominal charge must not be a threshold for receiving care and, thus, must not be a minimum fee or co-payment.

You have discretion regarding how you structure your Sliding Fee Schedule, including the number of discount pay classes and the types of discounts (percentage of fee or fixed/flat fee for each discount pay class). However, when developing your Sliding Fee Schedule, you should consider the unique characteristics of your Health Professional Shortage Area populations (e.g., low-income or homeless) to ensure it does not present a barrier to care.

Your site must make every reasonable effort to secure payment in accordance with the schedule of fees or schedule of discounts from the patient and/or any other third-party. Your site must accept assignments for Medicare beneficiaries and enter into an appropriate agreement with the applicable state agency for Medicaid and Children's Health Insurance Program beneficiaries, but your site **cannot require Medicare, Medicaid, or Children's Health Insurance Program application or proof of denial before allowing a patient to apply and be eligible for the Sliding Fee Discount Program.**

Federal Poverty Guidelines

Poverty Estimates, Trends, and Analysis

Poverty Estimates, Trends, and Analysis

Marginal Tax Rates/Benefit Cliffs

Paid Family Leave

Program Participation

Join our [newsletter](#) to stay up-to-date on the latest news regarding the poverty guidelines.

2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
Persons in family/household	Poverty guideline
1	\$14,580
2	\$19,720
3	\$24,860
4	\$30,000
5	\$35,140
6	\$40,280
7	\$45,420
8	\$50,560
For families/households with more than 8 persons, add \$5,140 for each additional person.	

[Chart showing different multiples of the poverty guidelines for prior years \(.xlsx, 41.43 KB\)](#)

<https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

Sliding Fee Discount Guide



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Sliding Fee Scale Discount Guide for CAHs and RHCs

<https://www.ruralcenter.org/resources/sliding-fee-scale-discount-guide-cahs-and-rhcs>

APPENDIX C: SAMPLE SLIDING FEE SCHEDULE

Maximum Annual Income Amounts for each Sliding Fee Percentage Category (except for 0% discount)

Poverty Level	100%	110%	120%	130%	140%	150%	160%	170%	180%	190%	200%	>200%
Family Size	Discount 100%	Discount 90%	Discount 80%	Discount 70%	Discount 60%	Discount 50%	Discount 40%	Discount 30%	Discount 20%	Discount 15%	Discount 10%	Discount 0%
1	\$14,580	\$16,038	\$17,496	\$18,954	\$20,412	\$21,870	\$23,328	\$24,786	\$26,244	\$27,702	\$29,160	>\$29,160
2	\$19,720	\$21,692	\$23,664	\$25,636	\$27,608	\$29,580	\$31,552	\$33,524	\$35,496	\$37,468	\$39,440	>\$39,440
3	\$24,860	\$27,346	\$29,832	\$32,318	\$34,804	\$37,290	\$39,776	\$42,262	\$44,748	\$47,234	\$49,720	>\$49,720
4	\$30,000	\$33,000	\$36,000	\$39,000	\$42,000	\$45,000	\$48,000	\$51,000	\$54,000	\$57,000	\$60,000	>\$60,000
5	\$35,140	\$38,654	\$42,168	\$45,682	\$49,196	\$52,710	\$56,224	\$59,738	\$63,252	\$66,766	\$70,280	>\$70,280
6	\$40,280	\$44,308	\$48,336	\$52,364	\$56,392	\$60,420	\$64,448	\$68,476	\$72,504	\$76,532	\$80,560	>\$80,560
7	\$45,420	\$49,962	\$54,504	\$59,046	\$63,588	\$68,130	\$72,672	\$77,214	\$81,756	\$86,298	\$90,840	>\$90,840
8	\$50,560	\$55,616	\$60,672	\$65,728	\$70,784	\$75,840	\$80,896	\$85,952	\$91,008	\$96,064	\$101,120	>\$101,120
For each additional person, add	\$5,140	\$5,654	\$6,168	\$6,682	\$7,196	\$7,710	\$8,224	\$8,738	\$9,252	\$9,766	\$10,280	>\$10,280

*Based on the 2023 [Federal Poverty Guidelines](#) for the 48 contiguous states and the District of Columbia. Please note that there are separate guidelines for Alaska and Hawaii, and that the thresholds would differ for sites in those two states. Sites in Puerto Rico and other outlying jurisdictions would use the above guidelines.

APPENDIX D: NATIONAL HEALTH SERVICE CORPS SITE DATA TABLES

Site Name _____

Site Address _____

Date Prepared _____

Prepared By _____

6-Month Reporting Period (from mm/yy to mm/yy): ____/____/____ - ____/____/____

Total Patients: _____

Total Patient Visits: _____

TABLE 1: PATIENTS AND VISITS BY PRIMARY INSURANCE TYPE

Complete data for “Number of Patients” AND “Number of Patient Visits”

Primary Insurance	Number of Patients	Percentage (Patients)	Number of Patient Visits	Percentage (Visits)
1) Medicare		0%		0%
2) Medicaid		0%		0%
3) Other Public/Private Funds		0%		0%
4) Private Insurance		0%		0%
5) Sliding Fee Schedule (SFS)		0%		0%
6) Self-Pay (No Insurance and not on SFS)		0%		0%
7) Total		100%		100%

TABLE 2: PATIENT SERVICE CHARGES, COLLECTIONS, AND ADJUSTMENTS

Payment Source	Full Charges (a)	Amount Collected (b)	Adjustments (c)
1) Medicare			
2) Medicaid			
3) Other Public/Private Funds			
4) Private Insurance			
5) Sliding Fee			
6) Self-Pay (Other than Sliding Fee)			
7) Total (lines 1-6)	\$0.00	\$0.00	\$0.00

TABLE 3: PATIENT APPLICATIONS FOR SLIDING FEE SCHEDULE (SFS)

Patient Applications for the Sliding Fee Schedule	Number of Applications
1) SFS Applications Approved	
2) SFS Applications Not Approved	
3) Total SFS Applications Received	

TABLE 4: SERVICE SITE STAFFING

Personnel by Major Service Categories	FTEs
MEDICAL SERVICES	
1) Family Practitioners	
2) General Practitioners	
3) Internists	
4) Obstetrician/Gynecologists	
5) Pediatricians	
6) Psychiatrists	
7) Other Physician Specialists	
8) Total Physicians (lines 1-7)	0
9) Nurse Practitioners/Physician Assistants	
10) Certified Nurse Midwives	
11) Nurses	
12) Other Medical Support Personnel	
13) Total Medical Services (lines 8-12)	0

ANCILLARY SERVICES	
14) Laboratory Services Personnel	
15) X-Ray Services Personnel	
16) Pharmacy Personnel	
17) Total Ancillary Services (lines 14-16)	0
DENTAL SERVICES	
18) Dentists	
19) Dental Hygienists	
20) Dental Assistants, Aides, Technicians, and Support Personnel	
21) Total Dental Services (lines 18-20)	0
BEHAVIORAL HEALTH SERVICES	
22) Behavioral Health Specialists	
23) Behavioral Health Support Personnel	
24) Total Behavioral Health Services (lines 22-23)	0
25) TOTAL (lines 13, 17, 21, and 24)	0

NOTES

Who Submits Data Tables?

Exempt Facilities

- ▶ Federally Qualified Health Centers (FQHCs)
- ▶ Federally Qualified Health Center Look-Alikes
- ▶ Free Clinics*

Upon Request

- ▶ Indian Health Service Facilities
- ▶ Federal/State Prisons
- ▶ ICE Facilities

Non-exempt Facilities

- ▶ All other eligible National Health Service Corps site types

For questions, email

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