

Signature Health Sliding Fee Scale for FQHC, Title X, and Dental Services

Based on Annual Household Income in Accordance with the 2026 Federal Poverty Guidelines

FQHC & Title X		Tier 0 (\$0 Visit)	Tier 5 (\$5 Visit)	Tier 10 (\$10 Visit)	Tier 20 (\$20 Visit)	Full Fee (FQHC Only)	Additional Rates for Title X Only	
Dental	Slide A	Slide B	Slide C	Slide D	Full Fee		Tier 40 (\$40 Visit)	Full Fee
Family Size	1	\$0 - \$15,960	\$15,961 - \$23,940	\$23,941 - \$27,930	\$27,931 - \$31,920	\$31,921 +	\$31,921 - \$39,900	\$39,901 +
	2	\$0 - \$21,640	\$21,641 - \$32,460	\$32,461 - \$37,870	\$37,871 - \$43,280	\$43,281 +	\$43,281 - \$54,100	\$54,101 +
	3	\$0 - \$27,320	\$27,321 - \$40,980	\$40,981 - \$47,810	\$47,811 - \$54,640	\$54,641 +	\$54,641 - \$68,300	\$68,301 +
	4	\$0 - \$33,000	\$33,001 - \$49,500	\$49,501 - \$57,750	\$57,751 - \$66,000	\$66,001 +	\$66,001 - \$82,500	\$82,501 +
	5	\$0 - \$38,680	\$38,681 - \$58,020	\$58,021 - \$67,690	\$67,691 - \$77,360	\$77,361 +	\$77,361 - \$96,700	\$96,701 +
	6	\$0 - \$44,360	\$44,361 - \$66,540	\$66,541 - \$77,630	\$77,631 - \$88,720	\$88,721 +	\$88,721 - \$110,900	\$110,901 +

For families/households with more than 8 persons, add \$5,680 for each additional person.

Find your household size and income range above. Your Tier or Slide depends on the service you receive.

Tier: For FQHC services (behavioral health, primary care) and Title X services, the tier means the out-of-pocket cost per visit. For example, if your income and family size qualifies you for Tier 10, you should expect to pay \$10 per visit.

Slide: Slide relates to dental services only: Slide A: \$30 per visit | Slide B: 40% of fee | Slide C: 50% of fee | Slide D: 60% of fee

Full Fee: If your household income is above the highest income range listed for a service, Signature Health may be unable to offer a discount.

**Scan to
Learn More**



Source: Office of the Assistant Secretary for Planning and Evaluation | <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>