



2011 VFC Immunization Sliding Fee Scale

FAMILY SIZE	SFS Categories: B, C, D, E		Minimum	SELF PAY (50% DISCOUNT if administration fee is paid on date of service)
	0	100% Discount for Vaccine Administration Fees		
1	0	21780	\$2.00	21781
2	0	29420	\$2.00	29421
3	0	37060	\$2.00	37061
4	0	44700	\$2.00	44701
5	0	52340	\$2.00	52341
6	0	59980	\$2.00	59981
7	0	67620	\$2.00	67621
8	0	75260	\$2.00	75261
9	0	82900	\$2.00	82901
10	0	90540	\$2.00	90541

Effective 04/01/2011 - Based Upon the Federal Poverty Guidelines published in the *Federal Register* on January 20, 2011.

1. There will be no denial of medical care due to an inability to pay.
2. For family units with more than 10 members, add \$3820 for each additional member.
3. Eligibility for the Sliding Fee Program will be effective for no more than the following 12 months.

To qualify for the Sliding Fee Discount Program, a sliding fee application must be completed; proof of income, proof of residency, and photo ID are required.