

## SLIDING FEE SCHEDULE

We offer a sliding fee schedule based on family income and size. If you qualify, you may pay a percentage of the cost for most services. You may be eligible for this program even if you have insurance.

The sliding fee schedule application is available at the check-in desk and on our web site at [www.coldhollowdocs.org](http://www.coldhollowdocs.org).

The Federal Poverty Guidelines will be used to determine eligibility for this program. If your yearly income falls within the levels, we encourage you to apply.

*One* proof of income is required to process your application. The documents below are acceptable proof of income:

- W-2 Form
- Income Tax Return
- Current pay stubs—3 months
- Bank statements showing direct deposits
- Unemployment, disability or Social security notice
- Child support and/or alimony
- Pension or retirement income
- Letter from employer
- Documentation from any program determined by income eligibility
- Other method—please call

For any questions, please inquire at the check-in desk, call (802) 933-6664 or email us at [info@coldhollowdocs.org](mailto:info@coldhollowdocs.org)

### Schedule an Appointment Office Location:

84 Water Tower Road, Unit 1  
Enosburg Falls, VT 05450

(802) 933-6664

### Hours of Operation

- Monday—8:00 am to 6:00 pm
- Tuesday—8:00 am to 6:00 pm
- Wednesday —8:00 am to 6:00 pm
- Thursday —8:00 am to 6:00 pm
- Friday —8:00 am to 6:00 pm
- Saturday—Closed
- Sunday—Closed

We are closed on the following holidays:

- New Year's Day
- Memorial Day
- Independence Day (July 4th)
- Labor Day
- Thanksgiving
- Christmas Day

[www.coldhollowdocs.org](http://www.coldhollowdocs.org)

(Version 01/01/2023, Implemented 01/01/2023)

## Cold Hollow Family Practice



[www.coldhollowdocs.org](http://www.coldhollowdocs.org)

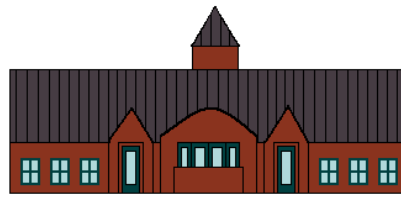
# Sliding Fee Schedule 2023

84 Water Tower Road, Unit 1

Enosburg Falls, VT 05450

(802) 933-6664

[Info@coldhollowdocs.org](mailto:Info@coldhollowdocs.org)



Cold Hollow Family Practice, P.C.

Our Sliding Fee Discount Program is available to all patients who qualify based on their annual household income and size even if you have insurance. Fees, co-pays, co-insurance, and deductibles are eligible for a sliding fee discount, inquire at check-in if you would like to apply.

## Sliding Fee Schedule

Based on the 2023 Federal Poverty Guideline (FPG)

Patient Visit Cost				
	Slide A 0-100% FPG	Slide B 101-150% FPG	Slide C 150-200% FPG	Over 200% FPG
Cold Hollow Family Practice Fees	Patient pays \$20.00 Nominal Fee per Visit	Patient pays \$40.00 Nominal Fee per Visit	Patient pays \$60.00 Nominal Fee per Visit	No Discount
Family Size	Household Income Per Year			
1	\$0 – \$14,580	\$14,581 – \$21,870	\$21,871 – \$29,160	\$29,161 and over
2	\$0 – \$19,720	\$19,721 – \$29,580	\$29,581 – \$39,440	\$39,441 and over
3	\$0 – \$24,860	\$24,861 – \$37,290	\$37,291 – \$49,720	\$49,721 and over
4	\$0 – \$30,000	\$30,001 – \$45,000	\$45,001 – \$60,000	\$60,001 and over
5	\$0 – \$35,140	\$35,141 – \$52,710	\$52,711 – \$70,280	\$70,281 and over
6	\$0 – \$40,280	\$40,281 – \$60,420	\$60,420 – \$80,560	\$80,561 and over
7	\$0 – \$45,420	\$45,421 – \$68,130	\$68,130 – \$90,840	\$90,841 and over
8	\$0 – \$50,560	\$50,561 – \$75,840	\$75,840 – \$101,120	\$101,121 and over
For families/households with more than 8 persons, add \$5,140 for each additional person				