

## 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

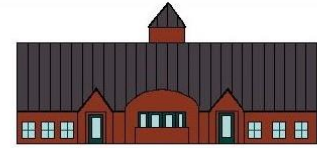
We are closed on the following holidays:

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

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

(Version 01/02/2025, Implemented 01/02/2025)

## Cold Hollow Family Practice



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

# Sliding Fee Schedule 2025

84 Water Tower Road, Unit 1

Enosburg Falls, VT 05450

(802) 933-6664

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



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 2025 Federal Poverty Guideline (FPG)

Patient Visit Cost				
	Slide A 0-100% FPG	Slide B 101-150% FPG	Slide C 151-200% FPG	Slide D Over 200% FPG
Household Size	Household Income Per Year			
1 person	\$0.00 - \$15,060	\$15,061 - \$22,590	\$22,591 - \$30,120	\$30,121 and over
2 people	\$0.00 - \$20,440	\$20,441 - \$30,660	\$30,661 - \$40,880	\$40,881 and over
3 people	\$0.00 - \$25,820	\$25,821 - \$38,730	\$38,731 - \$51,640	\$51,641 and over
4 people	\$0.00 - \$31,200	\$31,200 - \$46,800	\$46,801 - \$62,400	\$62,401 and over
5 people	\$0.00 - \$36,580	\$36,581 - \$54,870	\$54,870 - \$73,160	\$73,161 and over
6 people	\$0.00 - \$41,960	\$41,961 - \$62,940	\$62,940 - \$83,920	\$83,921 and over
7 people	\$0.00 - \$47,340	\$47,341 - \$71,010	\$71,011 - \$94,680	\$94,681 and over
8 people	\$0.00 - \$52,720	\$52,721 - \$79,080	\$79,081 - \$105,440	\$105,441 and over
Cold Hollow Family Practice Fees	Patient Pays <b>\$50.00</b> per Visit	Patient Pays <b>\$75.00</b> per Visit	Patient Pays <b>\$100.00</b> per Visit	Patient Pays <b>\$150.00</b> per Visit