



Honor Community Health CARES Sliding Fee Discount Scale 2026 Title X Family Planning

Slide Category		A	B	C	D	E	N/A
Federal Poverty Level		0 - 100%	101 - 150%	151 - 175%	176 - 200%	201 - 250%	>250%
Family Planning		Nominal Fee \$0	75% Discount 25% Charge	50% Discount 50% Charge	50% Discount 50% Charge	25% Discount 75% Charge	No Discount
FAMILY SIZE							
1	Annual(up to)	\$15,960.00	\$23,940.00	\$27,930.00	\$31,920.00	\$39,900.00	\$39,901.00
	Monthly	\$1,330.00	\$1,995.00	\$2,327.50	\$2,660.00	\$3,325.00	\$3,326.00
	Weekly	\$306.92	\$460.38	\$537.12	\$613.85	\$767.31	\$768.31
2	Annual(up to)	\$21,640.00	\$32,460.00	\$37,870.00	\$43,280.00	\$54,100.00	\$54,101.00
	Monthly	\$1,803.33	\$2,705.00	\$3,155.83	\$3,606.67	\$4,508.33	\$4,509.33
	Weekly	\$416.15	\$624.23	\$728.27	\$832.31	\$1,040.38	\$1,041.38
3	Annual(up to)	\$27,320.00	\$40,980.00	\$47,810.00	\$54,640.00	\$68,300.00	\$68,301.00
	Monthly	\$2,276.67	\$3,415.00	\$3,984.17	\$4,553.33	\$5,691.67	\$5,692.67
	Weekly	\$525.38	\$788.08	\$919.42	\$1,050.77	\$1,313.46	\$1,314.46
4	Annual(up to)	\$33,000.00	\$49,500.00	\$57,750.00	\$66,000.00	\$82,500.00	\$82,501.00
	Monthly	\$2,750.00	\$4,125.00	\$4,812.50	\$5,500.00	\$6,875.00	\$6,876.00
	Weekly	\$634.62	\$951.92	\$1,110.58	\$1,269.23	\$1,586.54	\$1,587.54
5	Annual(up to)	\$38,680.00	\$58,020.00	\$67,690.00	\$77,360.00	\$96,700.00	\$96,701.00
	Monthly	\$3,223.33	\$4,835.00	\$5,640.83	\$6,446.67	\$8,058.33	\$8,059.33
	Weekly	\$743.85	\$1,115.77	\$1,301.73	\$1,487.69	\$1,859.62	\$1,860.62
6	Annual(up to)	\$44,360.00	\$66,540.00	\$77,630.00	\$88,720.00	\$110,900.00	\$110,901.00
	Monthly	\$3,696.67	\$5,545.00	\$6,469.17	\$7,393.33	\$9,241.67	\$9,242.67
	Weekly	\$853.08	\$1,279.62	\$1,492.88	\$1,706.15	\$2,132.69	\$2,133.69
7	Annual(up to)	\$50,040.00	\$75,060.00	\$87,570.00	\$100,080.00	\$125,100.00	\$125,101.00
	Monthly	\$4,170.00	\$6,255.00	\$7,297.50	\$8,340.00	\$10,425.00	\$10,426.00
	Weekly	\$962.31	\$1,443.46	\$1,684.04	\$1,924.62	\$2,405.77	\$2,406.77
8	Annual(up to)	\$55,720.00	\$83,580.00	\$97,510.00	\$111,440.00	\$139,300.00	\$139,301.00
	Monthly	\$4,643.33	\$6,965.00	\$8,125.83	\$9,286.67	\$11,608.33	\$11,609.33
	Weekly	\$1,071.54	\$1,607.31	\$1,875.19	\$2,143.08	\$2,678.85	\$2,679.85
Each Additional Person	Annual(up to)	\$5,680.00	\$8,520.00	\$9,940.00	\$11,360.00	\$14,200.00	\$14,201.00
	Monthly	\$473.33	\$710.00	\$828.33	\$946.67	\$1,183.33	\$1,184.33
	Weekly	\$109.23	\$163.85	\$191.15	\$218.46	\$273.08	\$274.08

Updated using Federal Poverty Guidelines for 2026

Contraceptive devices are a separate fee in addition to the nominal fee or discounted fee.