

**Wesley Health Center**  
**Annual Federal Poverty Guidelines and Sliding Fee Schedule**  
**Retro Effective: May 24,2022**

Primary Care Medical Services	Code 0	Code 1	Code 2	Code 3	Code 4	Code 5
Administration fee - Office Visit (including preventive care)	\$40	\$45	\$50	\$55	Full price	Full price
Administration fee - Follow up visit (including primary care, neurology, nutrition visit)	\$10	\$12	\$14	\$16	Full price	Full price
Telephone Encounter Office Visit	\$30	\$35	\$40	\$45	Full price	Full price
OB Prenatal Plan (59426)	\$500	\$550	\$600	\$650	Full price	Full price
GYN PROCEDURES-IN HOUSE (Colposcopy and LEEP)	\$350	\$400	\$450	\$500	Full price	Full price
Circumcision	\$175	\$225	\$250	\$300	Full price	Full price
Vasectomy	\$350	\$450	\$550	\$650	Full price	Full price
Dermatology In - house Procedure	\$110	\$115	\$120	\$125	Full price	Full price
Podiatry In- house Procedure	\$110	\$115	\$120	\$125	Full price	Full price
Inserts at Cost (79 insert + 6 shipping)	\$85	\$90	\$95	\$100	Full price	Full price
Family Planning Services* (Title X)	Code 0	Code 1	Code 2	Code 3	Code 4	Code 5
Administration fee - Family Planning* Office Visit (includes lab fees & supplies excluding Nexplanon and IUD's)	\$0	\$25	\$30	\$40	\$45	Full price
Nexplanon and IUD's (device only)	\$0	\$50	\$55	\$60	\$65	Full price
Wesley Laboratory Services	Code 0	Code 1	Code 2	Code 3	Code 4	Code 5
Administration fee - Labs, Procedures and/or Injections (lab only no office visit) (excluding Specialty labs)	\$30	\$35	\$40	\$45	Full price	Full price
FOBT (Fecal Occult Blood Test)	\$5	\$6	\$7	\$8	Full price	Full price
Hemoglobin A1C	\$8	\$9	\$10	\$11	Full price	Full price
INR	\$5	\$6	\$7	\$8	Full price	Full price
TB SKIN TEST (86580)	\$25	\$26	\$27	\$28	Full price	Full price
Immunizations (including Flu)	<i>Immunizations may be covered by Arizona Department of Health Services or may vary by insurance plan.</i>					
Administration of Immunizations 1 only	\$10	\$11	\$12	\$13	Full price	Full price
Administration of Immunizations 2 or more	\$20	\$21	\$22	\$23	Full price	Full price
Private Stock Flu Over 65 years of Age	\$40	\$44	\$48	\$52	\$60	\$60
Wesley Imaging Services	Code 0	Code 1	Code 2	Code 3	Code 4	Code 5
Administration fee - Retina Vue	\$5	\$6	\$7	\$8	Full price	Full price
Behavioral Health Services	Code 0	Code1	Code2	Code3	Code4	Code5
Counseling - Initial Assessment Same day as a Medical Visit	\$0	\$5	\$6	\$7	Full price	Full price
Counseling - Initial Assessment	\$35	\$40	\$45	\$50	Full price	Full price
Counseling - Re-Assessment Follow-up	\$20	\$25	\$30	\$35	Full price	Full price
Counseling - Individual Intervention	\$20	\$25	\$30	\$35	Full price	Full price
Counseling - Group Intervention	\$5	\$6	\$7	\$8	Full price	Full price
Counseling - Family Session with Patient	\$20	\$25	\$30	\$35	Full price	Full price
Counseling - Family Session without Patient	\$30	\$35	\$40	\$45	Full price	Full price

\*Family Planning Services funded by Arizona Family Health Partnership, effective July 1, 2015.

**ANNUAL INCOME\***

Family Size	Code 0 Under 100%	Code 1 101% to 125%	Code 2 126% TO 150%	Code 3 151% TO 200%	Code 4 201% TO 250%	Code 5 OVER 250%
1	13,590	13,591 16,988	16,989 20,385	20,386 27,180	27,181 33,975	33,976 AND UP
2	18,310	18,311 22,888	22,889 27,465	27,466 36,620	36,621 45,775	45,776 AND UP
3	23,030	23,031 28,788	28,789 34,545	34,546 46,060	46,061 57,575	57,576 AND UP
4	27,750	27,751 34,688	34,689 41,625	41,626 55,500	55,501 69,375	69,376 AND UP
5	32,470	32,471 40,588	40,589 48,705	48,706 64,940	64,941 81,175	81,176 AND UP
6	37,190	37,191 46,488	46,489 55,785	55,786 74,380	74,381 92,975	92,976 AND UP
7	41,910	41,911 52,388	52,389 62,865	62,866 83,820	83,821 104,775	104,776 AND UP
8**	46,630	46,631 58,288	58,289 69,945	69,946 93,260	93,261 116,575	116,576 AND UP

\*Federal Poverty Level Source: <https://www.federalregister.gov/documents/2022/01/21/2022-01166/annual-update-of-the-hhs-poverty-guidelines>

\*\*For families/households with more than 8 persons, add \$4720 for each additional person.

Family Planning - Lab Only Encounters	Code 0	Code 1	Code 2	Code 3	Code 4	Code 5
<b>*Refills Only*</b>	<b>*Refills Only*</b>	<b>*Refills Only*</b>	<b>*Refills Only*</b>	<b>*Refills Only*</b>	<b>*Refills Only*</b>	<b>*Refills Only*</b>
Condoms	\$0	\$0	\$0	\$0	\$0	\$0
OCP	\$0	\$2	\$4	\$6	\$8	\$10
Patch	\$0	\$10	\$15	\$30	\$45	\$60
Nuva Ring	\$0	\$15	\$20	\$25	\$30	\$35
Depo	\$0	\$5	\$10	\$15	\$20	\$25
Emergency Contraceptive	\$0	\$2	\$4	\$6	\$8	\$10
Pregnancy Test	\$0	\$0	\$0	\$0	\$0	\$0
Chlamydia Treatment	\$0	\$0	\$0	\$0	\$0	\$0