

**Hidalgo County Health and Human Services Department
Income Guidelines & Schedule of Charges - Sliding Fee Schedule**



IMMUNIZATIONS
(Monthly Income)

| Family Size | 0 - 100 % | 101 - 185 % | 186 - 200 % | 201 % & Over |
|------------------------|---------------------|-------------------------|-------------------------|---------------------------|
| 1 | \$0.00 - \$1,041.00 | \$1,051.00 - \$1,926.00 | \$1,936.00 - \$2,082.00 | \$2,092.00 |
| 2 | \$0.00 - \$1,409.00 | \$1,423.00 - \$2,607.00 | \$2,621.00 - \$2,818.00 | \$2,832.00 |
| 3 | \$0.00 - \$1,778.00 | \$1,796.00 - \$3,289.00 | \$3,307.00 - \$3,556.00 | \$3,574.00 |
| 4 | \$0.00 - \$2,146.00 | \$2,167.00 - \$3,970.00 | \$3,992.00 - \$4,292.00 | \$4,313.00 |
| 5 | \$0.00 - \$2,514.00 | \$2,539.00 - \$4,651.00 | \$4,676.00 - \$5,028.00 | \$5,053.00 |
| 6 | \$0.00 - \$2,883.00 | \$2,912.00 - \$5,334.00 | \$5,362.00 - \$5,766.00 | \$5,795.00 |
| 7 | \$0.00 - \$3,251.00 | \$3,284.00 - \$6,014.00 | \$6,047.00 - \$6,502.00 | \$6,535.00 |
| 8 | \$0.00 - \$3,619.00 | \$3,655.00 - \$6,695.00 | \$6,731.00 - \$7,238.00 | \$7,274.00 |
| FEE PER VACCINE | \$5.00 | \$5.00 | \$10.00 | \$14.00 Max Charge |

* If income falls between 100% & 101%, round down to 100%

* If income falls between 185% & 186%, round down to 185%

* If income falls between 200% & 201%, round down to 200%

DO NOT COLLECT ON ANY PREVIOUS BALANCES FOR ANY PROGRAM.

Note: For families/households with more than 8 persons, add \$4,420 for each additional person.

ADULT IMMUNIZATION EXPANSION PROGRAM \$20.00 PER VACCINE

This Schedule shall be used to determine if a client is eligible to pay in accordance with the Eligibility Guidelines; however, services shall not be denied due to inability to pay.