



2744 W 63rd Street - Chicago, IL 60629
 Phone: (773) 434-4626 Fax: (773) 303-8858
www.imacentral.org

IMAN Health Center provides services to all, regardless of their insurance status or ability to pay. Our Sliding Fee Discount program offers a discounted rate on services offered at our facility based on household income and size.

We offer the sliding-fee scale to all income eligible patients based on annual household income for our services. The sliding fee scale provides a flexible cost on certain services to individuals that qualify. Out-of-pocket fees for income-eligible sliding fee patients at or below 200% FPG will be the lesser of their insurance copayment or the sliding fee charge, unless precluded by insurance contract.

To qualify for a potential discount the patient must furnish proof of household income and family size. All members of a household who are combining financial resources including room and board and/or are supporting one another financially are counted as one household.

If employed – Please provide one of the following

- Recent Federal Tax Return
- IRS form W-2 or 1099
- Most recent check stubs for a complete month
- Letter from employer on company’s letterhead

If unemployed – Please provide one of the following

- Proof of unemployment benefits
- Award Letter from SSI/SSD benefits
- Letter of Support from family member

IMAN Health Center accepts Medicare and Medicaid insurance plans

NO ONE will be denied access to services at **IMAN Health Center**; services are offered regardless of insurance status or ability to pay

IMAN
 Medical, Behavioral Health and Dental Sliding Fee Scale
2021 Federal Poverty Guidelines

Category	A - \$25	B - \$30	C – \$35	D - \$40	E - \$45	Full Fee
Poverty Level	Up to 100%	Up to 125%	Up to 150%	Up to 175%	Up to 200%	>200%
1	\$12,880	\$16,100	\$19,320	\$22,540	\$25,760	\$ 25,761
2	\$17,420	\$21,775	\$26,130	\$30,485	\$34,840	\$ 34,841
3	\$21,960	\$27,450	\$32,940	\$38,430	\$43,920	\$ 43,920
4	\$26,500	\$33,125	\$39,750	\$46,375	\$53,000	\$ 53,001
5	\$31,040	\$38,800	\$46,560	\$54,320	\$62,080	\$ 53,081
6	\$35,580	\$44,475	\$53,370	\$62,265	\$71,160	\$ 71,161
7	\$40,120	\$50,150	\$60,180	\$70,210	\$80,240	\$ 80,241
8	\$44,660	\$55,825	\$66,990	\$78,155	\$89,320	\$ 89,321
9	\$49,200	\$61,500	\$73,800	\$86,100	\$98,400	\$ 98,401
10	\$53,740	\$67,175	\$80,610	\$94,045	\$107,480	\$ 107,481