

Family Planning Program

Optional Co-Pay Table Based on 2024 Monthly Federal Poverty Level (FPL)

Effective April 15, 2024

Family Size	Less Than or Equal to 100% of FPL \$0 Co-pay	101% to 133% FPL \$5 Co-pay	134% to 150% FPL \$10 Co-pay	151% to 185% FPL \$15 Co-pay	186% to 200% FPL \$20 Co-pay	201% to 233% \$25 Co-pay	234% to 250% \$30 Co-pay
1	\$0 to \$1,255	\$1,255.01 to \$1,669	\$1,669.01 to \$1,883	\$1,883.01 to \$2,322	\$2,322.01 to \$2,510	\$2,510.01 to \$2,924	\$2,924.01 to \$3,138
2	\$0 to \$1,703	\$1,703.01 to \$2,265	\$2,265.01 to \$2,555	\$2,555.01 to \$3,151	\$3,151.01 to \$3,407	\$3,407.01 to \$3,969	\$3,969.01 to \$4,258
3	\$0 to \$2,152	\$2,152.01 to \$2,862	\$2,862.01 to \$3,228	\$3,228.01 to \$3,981	\$3,981.01 to \$4,303	\$4,303.01 to \$5,013	\$5,013.01 to \$5,379
4	\$0 to \$2,600	\$2,600.01 to \$3,458	\$3,458.01 to \$3,900	\$3,900.01 to \$4,810	\$4,810.01 to \$5,200	\$5,200.01 to \$6,058	\$6,058.01 to \$6,500
5	\$0 to \$3,048	\$3,048.01 to \$4,054	\$4,054.01 to \$4,573	\$4,573.01 to \$5,639	\$5,639.01 to \$6,097	\$6,097.01 to \$7,103	\$7,103.01 to \$7,621
6	\$0 to \$3,497	\$3,497.01 to \$4,651	\$4,651.01 to \$5,245	\$5,245.01 to \$6,469	\$6,469.01 to \$6,993	\$6,993.01 to \$8,147	\$8,147.01 to \$8,742
7	\$0 to \$3,945	\$3,945.01 to \$5,247	\$5,247.01 to \$5,918	\$5,918.01 to \$7,298	\$7,298.01 to \$7,890	\$7,890.01 to \$9,192	\$9,192.01 to \$9,863
8	\$0 to \$4,393	\$4,393.01 to \$5,843	\$5,843.01 to \$6,590	\$6,590.01 to \$8,128	\$8,128.01 to \$8,787	\$8,787.01 to \$10,236	\$10,236.01 to \$10,983
9	\$0 to \$4,842	\$4,842.01 to \$6,439	\$6,439.01 to \$7,263	\$7,263.01 to \$8,957	\$8,957.01 to \$9,683	\$9,683.01 to \$11,281	\$11,281.01 to \$12,104
10	\$0 to \$5,290	\$5,290.01 to \$7,036	\$7,036.01 to \$7,935	\$7,935.01 to \$9,787	\$9,787.01 to \$10,580	\$10,580.01 to \$12,326	\$12,326.01 to \$13,225

Note: No co-pay may be charged for a household whose income is below 100% of the FPL.

If a client self-declares an inability to pay, the contractor must not charge a co-pay. No client may be denied services based on an inability to pay. If a co-pay is charged, it may not exceed \$30 or the cost of the visit or encounter, whichever is less. The FPL is calculated and published each calendar year at [Poverty Guidelines](#).