

# 2024 Caring For You patient assistance program

| Family Size | Level 5<br><300% FPL  | Level 6<br>>301% FPL  |
|-------------|-----------------------|-----------------------|
| 1           | \$30,121 – \$45,180   | \$45,181 – \$60,240   |
| 2           | \$40,881 – \$61,320   | \$61,321 – \$81,760   |
| 3           | \$51,641 – \$77,460   | \$77,461 – \$103,280  |
| 4           | \$62,4001 – \$93,600  | \$96,601 – \$124,800  |
| 5           | \$73,161 – \$109,740  | \$109,741 – \$146,320 |
| 6           | \$83,921 – \$125,880  | \$125,881 – \$167,840 |
| 7           | \$94,681 – \$142,020  | \$142,021 – \$189,360 |
| 8           | \$105,441 – \$158,160 | \$158,161 – \$210,880 |

If you are between 201-400% of the Federal Poverty Level (FPL), you may be eligible for our “Caring for You” patient assistance program. Please ask any of our Eligibility & Intake Specialists for more information.

## MEDICAL PROVIDER & PSYCHIATRIC VISITS

|         |                             |
|---------|-----------------------------|
| Level 5 | Patient pays \$50 per visit |
| Level 6 | Patient pays \$60 per visit |

## PROCEDURES

|         |                                 |
|---------|---------------------------------|
| Level 5 | Patient pays \$50 per procedure |
| Level 6 | Patient pays \$60 per procedure |

## RN / CHW / MA VISITS

|         |                             |
|---------|-----------------------------|
| Level 5 | Patient pays \$25 per visit |
| Level 6 | Patient pays \$30 per visit |

## LABS

|         |                                 |
|---------|---------------------------------|
| Level 5 | Patient pays \$60 per lab order |
| Level 6 | Patient pays \$70 per lab order |

## THERAPY VISITS / THERAPY GROUPS WELLNESS GROUPS

|         |                             |
|---------|-----------------------------|
| Level 5 | Patient pays \$10 per visit |
| Level 6 | Patient pays \$15 per visit |

## ULTRASOUND

|         |                             |
|---------|-----------------------------|
| Level 5 | Patient pays \$50 per study |
| Level 6 | Patient pays \$55 per study |

## XRAY

|         |                             |
|---------|-----------------------------|
| Level 5 | Patient pays \$50 per study |
| Level 6 | Patient pays \$60 per study |



580 W 5TH ST | RENO, NV 89503  
1905 E 4TH ST | RENO, NV 89512

(775) 786-4673  
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# 2024 Cuidado Para Usted programa de asistencia

| Tamaño de familia | Nivel 5<br><300% IFP  | Nivel 6<br>>301% IFP  |
|-------------------|-----------------------|-----------------------|
| 1                 | \$30,121 - \$45,180   | \$45,181 - \$60,240   |
| 2                 | \$40,881 - \$61,320   | \$61,321 - \$81,760   |
| 3                 | \$51,641 - \$77,460   | \$77,461 - \$103,280  |
| 4                 | \$62,401 - \$93,600   | \$96,601 - \$124,800  |
| 5                 | \$73,161 - \$109,740  | \$109,741 - \$146,320 |
| 6                 | \$83,921 - \$125,880  | \$125,881 - \$167,840 |
| 7                 | \$94,681 - \$142,020  | \$142,021 - \$189,360 |
| 8                 | \$105,441 - \$158,160 | \$158,161 - \$210,880 |

Si usted está entre 201 - 400% del Índice Federal de Pobreza (IFP), usted puede ser elegible para participar en nuestro programa "Cuidado Para Usted". Hable con un empleado de HOPES para ver si usted califica.

## ATENCIÓN PRIMARIA Y VISITAS PSIQUIÁTRICAS

|         |                               |
|---------|-------------------------------|
| Nivel 5 | Paciente paga \$50 por visita |
| Nivel 6 | Paciente paga \$60 por visita |

## PROCEDIMIENTOS

|         |                                      |
|---------|--------------------------------------|
| Nivel 5 | Paciente paga \$50 por procedimiento |
| Nivel 6 | Paciente paga \$60 por procedimiento |

## VISITAS DE ENFERMERÍA/CHW/ASISTENTE MEDICO

|         |                               |
|---------|-------------------------------|
| Nivel 5 | Paciente paga \$25 por visita |
| Nivel 6 | Paciente paga \$30 por visita |

## LABORATORIO

|         |                              |
|---------|------------------------------|
| Nivel 5 | Paciente paga \$60 por orden |
| Nivel 6 | Paciente paga \$70 por orden |

## VISITAS DE TERAPIA / GRUPOS DE TERAPIA GRUPOS DE BIENESTAR

|         |                               |
|---------|-------------------------------|
| Nivel 5 | Paciente paga \$10 por visita |
| Nivel 6 | Paciente paga \$15 por visita |

## ULTRASONIDO

|         |                                |
|---------|--------------------------------|
| Nivel 5 | Paciente paga \$50 por estudio |
| Nivel 6 | Paciente paga \$55 por estudio |

## RADIOGRAFÍAS

|         |                                |
|---------|--------------------------------|
| Nivel 5 | Paciente paga \$50 por estudio |
| Nivel 6 | Paciente paga \$60 por estudio |



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