

FY2017 Sliding Fee Scale

Annual Income		Number of Family Members							
At Least	Not Over	1	2	3	4	5	6	7	8
\$ -	\$ 11,770	A	A	A	A	A	A	A	A
\$ 11,771	\$ 15,930	B	A	A	A	A	A	A	A
\$ 15,931	\$ 20,090	C	B	A	A	A	A	A	A
\$ 20,091	\$ 24,250	D	C	B	A	A	A	A	A
\$ 24,251	\$ 28,410	FULL	D	B	B	A	A	A	A
\$ 28,411	\$ 32,570	FULL	FULL	C	B	B	A	A	A
\$ 32,571	\$ 36,730	FULL	FULL	D	C	B	B	A	A
\$ 36,731	\$ 40,890	FULL	FULL	FULL	D	C	B	B	A
\$ 40,891	\$ 49,210	FULL	FULL	FULL	D	C	C	B	B
\$ 49,211	\$ 57,530	FULL	FULL	FULL	FULL	D	C	C	B
\$ 57,531	\$ 65,850	FULL	FULL	FULL	FULL	FULL	D	C	C
\$ 65,851	\$ 74,170	FULL	FULL	FULL	FULL	FULL	FULL	D	C
\$ 74,171	\$ 82,490	FULL	FULL	FULL	FULL	FULL	FULL	FULL	D
Full Fee		FULL	FULL	FULL	FULL	FULL	FULL	FULL	FULL

Scale	Individual Therapy	Group Therapy	MD/ARNP	TR/ADH
A	\$1* - \$10	\$1* - \$10	\$1* - \$12	\$1* - \$12
B	\$7* - \$12	\$4* - \$10	\$12* - \$24	\$3* - \$12
C	\$13* - \$17	\$5* - \$10	\$22* - \$40	\$9* - \$12
D	\$22* - \$25	\$6.5* - \$19	\$38* - \$40	\$10* - \$12
Full Fee	\$25* - \$125	\$8.5* - \$72	\$50* - \$190	\$12* - \$40