

Access Behavioral Health Services - Schedule of Discounted clinic services

Maximum Annual Income Amounts for each Sliding Fee Percentage Category (except for 0% discount)													
Poverty Level*	Nominal Fee	100%	110%	120%	130%	140%	150%	160%	170%	180%	190%	200%	>200%
New Med Appt	\$40	\$45	\$50	\$55	\$60	\$65	\$70	\$75	\$80	\$85	\$90	\$95	\$110
Med Check	\$40	\$45	\$45	\$45	\$45	\$45	\$47	\$47	\$47	\$47	\$47	\$47	\$50.22
Family Size	Each category includes income up to that amount and anything lower until a person's income is in the next lower category												
1		\$12,490	\$13,739	\$14,988	\$16,237	\$17,486	\$18,735	\$19,984	\$21,233	\$22,482	\$23,731	\$24,980	\$24,981
2		\$16,910	\$18,601	\$20,292	\$21,983	\$23,674	\$25,365	\$27,056	\$28,747	\$30,438	\$32,129	\$33,820	\$33,821
3		\$21,330	\$23,463	\$25,596	\$27,729	\$29,862	\$31,995	\$34,128	\$36,261	\$38,394	\$40,527	\$42,660	\$42,661
4		\$25,750	\$28,325	\$30,900	\$33,475	\$36,050	\$38,625	\$41,200	\$43,775	\$46,350	\$48,925	\$51,500	\$51,501
5		\$30,170	\$33,187	\$36,204	\$39,221	\$42,238	\$45,255	\$48,272	\$51,289	\$54,306	\$57,323	\$60,340	\$60,341
6		\$34,590	\$38,049	\$41,508	\$44,967	\$48,426	\$51,885	\$55,344	\$58,803	\$62,262	\$65,721	\$69,180	\$69,181
7		\$39,010	\$42,911	\$46,812	\$50,713	\$54,614	\$58,515	\$62,416	\$66,317	\$70,218	\$74,119	\$78,020	\$78,021
8		\$43,430	\$47,773	\$52,116	\$56,459	\$60,802	\$65,145	\$69,488	\$73,831	\$78,174	\$82,517	\$86,860	\$86,861
For each additional person, add		\$4,420	\$4,862	\$5,304	\$5,746	\$6,188	\$6,630	\$7,072	\$7,514	\$7,956	\$8,398	\$8,840	\$8,841

\* Based on 2019 HHS Poverty Guidelines (<http://aspe.hhs.gov/poverty/16poverty.shtml>)

