

FY2023 Sliding Fee Scale

Annual Income		Number of Family Members							
At Least	Not Over	1	2	3	4	5	6	7	8
\$ -	\$ 13,590	A	A	A	A	A	A	A	A
\$ 13,591	\$ 18,310	B	A	A	A	A	A	A	A
\$ 18,311	\$ 23,030	C	B	A	A	A	A	A	A
\$ 23,031	\$ 27,750	D	C	B	A	A	A	A	A
\$ 27,751	\$ 32,470	FULL	D	B	B	A	A	A	A
\$ 32,471	\$ 37,190	FULL	FULL	C	B	B	A	A	A
\$ 37,191	\$ 41,910	FULL	FULL	D	C	B	B	A	A
\$ 41,911	\$ 46,630	FULL	FULL	FULL	D	C	B	B	A
\$ 46,631	\$ 51,350	FULL	FULL	FULL	D	C	C	B	B
\$ 51,351	\$ 56,070	FULL	FULL	FULL	FULL	D	C	C	B
\$ 56,071	\$ 60,790	FULL	FULL	FULL	FULL	FULL	D	C	C
\$ 60,791	\$ 65,510	FULL	FULL	FULL	FULL	FULL	FULL	D	C
\$ 65,511	\$ 70,230	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