

Elevate CCBHC
2021-2022 Sliding Fee Schedule

	Household Size:								
Client Co-Payments	1	2	3	4	5	6	7	8	% Poverty
Income listed is the upper threshold for that copayment.									
No Fee	\$1,595	\$2,155	\$2,715	\$3,275	\$3,835	\$4,395	\$4,955	\$5,515	150%
\$10	\$1,808	\$2,442	\$3,077	\$3,712	\$4,346	\$4,981	\$5,616	\$6,250	170%
\$20	\$2,020	\$2,730	\$3,439	\$4,148	\$4,858	\$5,567	\$6,276	\$6,986	190%
\$30	\$2,233	\$3,017	\$3,801	\$4,585	\$5,369	\$6,153	\$6,937	\$7,721	210%
\$40	\$2,446	\$3,304	\$4,163	\$5,022	\$5,880	\$6,739	\$7,598	\$8,456	230%
\$50	\$2,658	\$3,592	\$4,525	\$5,458	\$6,392	\$7,325	\$8,258	\$9,192	250%
\$60	\$2,871	\$3,879	\$4,887	\$5,895	\$6,903	\$7,911	\$8,919	\$9,927	270%
\$70	\$3,084	\$4,166	\$5,249	\$6,332	\$7,414	\$8,497	\$9,580	\$10,662	290%
\$80	\$3,296	\$4,454	\$5,611	\$6,768	\$7,926	\$9,083	\$10,240	\$11,398	310%
\$90	\$3,509	\$4,741	\$5,973	\$7,205	\$8,437	\$9,669	\$10,901	\$12,133	330%
\$100	\$3,722	\$5,028	\$6,335	\$7,642	\$8,948	\$10,255	\$11,562	\$12,868	350%
Full Fee	>\$3,722	>\$5,028	>\$6,335	>\$7,642	>\$8,948	>\$10,255	>\$11,562	>\$12,868	>350%

*monthly gross income

Income listed is the upper threshold for that copayment.

100% Poverty	\$1,063	\$1,437	\$1,810	\$2,183	\$2,557	\$2,930	\$3,303	\$3,677
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