

## **DMC Empowering Health Services Sliding Fee Scale Discount Program**



The *Sliding Fee Scale* was created to ensure that comprehensive mental health services are available and accessible to uninsured and under-insured clients by providing an affordable fee structure that is in accordance with federal regulations.

Our sliding fee scale is available to any uninsured or under-insured individual; however, eligibility is based on household annual income and family size. Only individuals living in households with income below 200% of the Federal Poverty Level may qualify for a Sliding Scale Fee discount.

Please inquire at check-in or by emailing [admin@dmchealth.com](mailto:admin@dmchealth.com) if you would like to apply for our sliding scale fee discount program.

As part of the intake process, if an individual is uninsured, the individual will be informed of the availability of the Sliding Scale Fee Discount and explain the paperwork needed to consider them for the program.

Income status can be verified by providing two of the following forms of written verification of household income and size:

- Paycheck stub (most recent)
- W-2 form
- Last Income Tax Return
- Written statement from employer
- Unemployment check stub
- Social security check stub

Documents should be emailed to [admi@dmchealth.com](mailto:admi@dmchealth.com) with a request for Sliding Fee Scale Discount program.

**DMC Empowering Health Services  
Sliding Fee Scale Discount Program**



**2024 Sliding Flat Fee Scale – Mental Health Services**

Family Size	<100% FPG \$25 Nominal Fee	101%-133% FPG Level I \$50	134%-166% FPG Level II \$65	167%-200% FPG Level III \$80	>200% FPG No Discount
1	\$0 - \$15,060	\$15,060.01 - \$20,029.80	\$20,029.81 - \$24,999.60	\$24,999.61 - \$30,120.00	\$30,120.01 - ↑
2	\$0 - \$20,440.00	\$20,440.01 - \$27,185.20	\$27,185.21 - \$33,930.40	\$33,930.41 - \$40,880.00	\$40,880.01 - ↑
3	\$0 - \$25,820.00	\$25,820.01 - \$34,340.60	\$34,340.61 - \$42,861.20	\$42,861.21 - \$51,640.00	\$51,640.01 - ↑
4	\$0 - \$31,200.00	\$31,200.01 - \$41,496.00	\$41,496.01 - \$51,792.00	\$51,792.01 - \$62,400.00	\$62,400.01 - ↑
5	\$0 - \$36,580.00	\$36,580.01 - \$48,651.40	\$48,651.41 - \$60,722.60	\$60,722.61 - \$73,160.00	\$73,160.01 - ↑
6	\$0 - \$41,960.00	\$41,960.01 - \$55,806.80	\$55,806.81 - \$69,653.60	\$69,653.61 - \$83,920.00	\$83,920.01 - ↑
7	\$0 - \$47,340.00	\$47,340.01 - \$62,962.20	\$62,962.21 - \$78,584.40	\$78,584.41 - \$94,680.00	\$94,680.01 - ↑
8	\$0 - \$52,720.00	\$52,720.01 - \$70,117.60	\$70,117.61 - \$87,515.20	\$87,515.21 - \$105,440.00	\$105,440.01 - ↑

Note: For families with more than 8 members, add \$5380 for each additional member.