



SLIDING FEE SCALE

<u>Participant's Gross Monthly Income</u>	<u>Fee Per Day</u>
\$1,601 and above	\$98.00
\$1,551 - \$1,600	\$89.00
\$1,501 - \$1,550	\$85.00
\$1,451 - \$1,500	\$81.00
\$1,401 - 1,450	\$77.00
\$1,351 - \$1,400	\$73.00
\$ 0 - \$1,350	\$69.00

Additional Payment Options Include:

- _____ Medicaid
- _____ Veterans Affairs
- _____ Long Term Care Insurance

Effective 4/30/24