



**SLIDING FEE SCALE**

Based on Annual Household Income and Size

Household Members	Nominal Fee (100% Adjustment)	Pay 25% (75% Adjustment)	Pay 50% (50% Adjustment)	Pay 75% (25% Adjustment)	Pay 100% (0% adjustment)
1	0 - \$12,140	\$12,141 - \$15,175	\$15,176 - \$18,210	\$18,211 - \$24,280	\$24,281
2	0 - \$16,460	\$16,461 - \$20,575	\$20,576 - \$24,690	\$24,691 - \$32,920	\$32,921
3	0 - \$20,780	\$20,781 - \$25,975	\$25,976 - \$31,170	\$31,171 - \$41,560	\$41,561
4	0 - \$25,100	\$25,101 - \$31,375	\$31,376 - \$37,650	\$37,651 - \$50,200	\$50,201
5	0 - \$29,420	\$29,421 - \$36,775	\$36,776 - \$44,130	\$44,131 - \$58,840	\$58,841
6	0 - \$33,740	\$33,741 - \$42,175	\$42,176 - \$50,610	\$50,611 - \$67,480	\$67,481
7	0 - \$38,060	\$38,061 - \$47,575	\$47,576 - \$57,090	\$57,901 - \$76,120	\$76,121
8	0 - \$42,380	\$42,381 - \$52,975	\$52,976 - \$63,570	\$63,571 - \$84,760	\$84,761

For household with more than 8 members, add \$4,320 for each additional member.

**Definitions:**

*Household* - A private residence including the members of the family living therein and/or unrelated individuals living in the same residence and sharing common living areas. (Definition adapted by the State of Ohio Medicaid laws)

*Income* - Total cash receipts, before taxes, from all sources including: Wages, Unemployment, Workers Compensation, Public Assistance, Retirement, SSI/SSD, Child Support/Alimony, CFSA Stipend, Federal Foster Care Payments, Military, and Veterans.

**No one will be denied standard medical, behavioral health, and dental services due to inability to pay**

Effective March 1, 2018