

**GUIDANCE/CARE CENTER, INC.**

Sliding Fee Scale based on 2019 Federal Poverty Guidelines

ANNUAL INCOME Ranges

Effective January 2019

Client Discount	Client Payment	Family Size							
		1	2	3	4	5	6	7	8
	\$2.00-\$3.00 Co-Pay	Under \$18,735	Under \$25,365	Under \$31,995	Under \$38,625	Under \$45,255	Under \$51,885	Under \$58,515	Under \$65,145
96%	4%	\$18,736 \$20,609	\$25,366 \$27,902	\$31,996 \$35,195	\$38,626 \$42,488	\$45,256 \$49,781	\$51,886 \$57,074	\$58,516 \$64,367	\$65,146 \$71,660
94%	6%	\$20,610 \$22,483	\$27,903 \$30,439	\$35,196 \$38,395	\$42,489 \$46,351	\$49,782 \$54,307	\$57,075 \$62,263	\$64,368 \$70,219	\$71,661 \$78,175
89%	11%	\$22,484 \$24,357	\$30,440 \$32,976	\$38,396 \$41,595	\$46,352 \$50,214	\$54,308 \$58,833	\$62,264 \$67,452	\$70,220 \$76,071	\$78,176 \$84,690
81%	19%	\$24,358 \$26,231	\$32,977 \$35,513	\$41,596 \$44,795	\$50,215 \$54,077	\$58,834 \$63,359	\$67,453 \$72,641	\$76,072 \$81,923	\$84,691 \$91,205
70%	30%	\$26,232 \$28,105	\$35,514 \$38,050	\$44,796 \$47,995	\$54,078 \$57,940	\$63,360 \$67,885	\$72,642 \$77,830	\$81,924 \$87,775	\$91,206 \$97,720
56%	44%	\$28,106 \$29,979	\$38,051 \$40,587	\$47,996 \$51,195	\$57,941 \$61,803	\$67,886 \$72,411	\$77,831 \$83,019	\$87,776 \$93,627	\$97,721 \$104,235
39%	61%	\$29,980 \$31,853	\$40,588 \$43,124	\$51,196 \$54,395	\$61,804 \$65,666	\$72,412 \$76,937	\$83,020 \$88,208	\$93,628 \$99,479	\$104,236 \$110,750
19%	81%	\$31,854 \$33,727	\$43,125 \$45,661	\$54,396 \$57,595	\$65,667 \$69,529	\$76,938 \$81,463	\$88,209 \$93,397	\$99,480 \$105,331	\$110,751 \$117,265
10%	90%	\$33,728 \$35,601	\$45,662 \$48,198	\$57,596 \$60,795	\$69,530 \$73,392	\$81,464 \$85,989	\$93,398 \$98,586	\$105,332 \$111,183	\$117,266 \$123,780
5%	95%	\$35,602 \$37,475	\$48,199 \$50,735	\$60,796 \$63,995	\$73,393 \$77,255	\$85,990 \$90,515	\$98,587 \$103,775	\$111,184 \$117,035	\$123,781 \$130,295
NONE	100%	\$37,476 and over	\$50,736 and over	\$63,996 and over	\$77,256 and over	\$90,516 and over	\$103,776 and over	\$117,036 and over	\$130,296 and over

2019 Federal Poverty Thresholds	\$12,490	\$16,910	\$21,330	\$25,750	\$30,170	\$34,590	\$39,010	\$43,430
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**GUIDANCE/CARE CENTER, INC.**

Sliding Fee Scale based on 2019 Federal Poverty Guidelines

MONTHLY INCOME Ranges

Effective January 2019

Client Discount	Client Payment	Family Size							
		1	2	3	4	5	6	7	8
	\$2.00-\$3.00 Co-Pay	Under \$1,561	Under \$2,114	Under \$2,666	Under \$3,219	Under \$3,771	Under \$4,324	Under \$4,876	Under \$5,429
96%	4%	\$1,562 \$1,717	\$2,115 \$2,325	\$2,667 \$2,933	\$3,220 \$3,541	\$3,772 \$4,148	\$4,325 \$4,756	\$4,877 \$5,364	\$5,430 \$5,972
94%	6%	\$1,718 \$1,873	\$2,326 \$2,536	\$2,934 \$3,200	\$3,542 \$3,863	\$4,149 \$4,525	\$4,757 \$5,188	\$5,365 \$5,852	\$5,973 \$6,515
89%	11%	\$1,874 \$2,029	\$2,537 \$2,747	\$3,201 \$3,467	\$3,864 \$4,185	\$4,526 \$4,902	\$5,189 \$5,620	\$5,853 \$6,340	\$6,516 \$7,058
81%	19%	\$2,030 \$2,185	\$2,748 \$2,958	\$3,468 \$3,734	\$4,186 \$4,507	\$4,903 \$5,279	\$5,621 \$6,052	\$6,341 \$6,828	\$7,059 \$7,601
70%	30%	\$2,186 \$2,341	\$2,959 \$3,169	\$3,735 \$4,001	\$4,508 \$4,829	\$5,280 \$5,656	\$6,053 \$6,484	\$6,829 \$7,316	\$7,602 \$8,144
56%	44%	\$2,342 \$2,497	\$3,170 \$3,380	\$4,002 \$4,268	\$4,830 \$5,151	\$5,657 \$6,033	\$6,485 \$6,916	\$7,317 \$7,804	\$8,145 \$8,687
39%	61%	\$2,498 \$2,653	\$3,381 \$3,591	\$4,269 \$4,535	\$5,152 \$5,473	\$6,034 \$6,410	\$6,917 \$7,348	\$7,805 \$8,292	\$8,688 \$9,230
19%	81%	\$2,654 \$2,809	\$3,592 \$3,802	\$4,536 \$4,802	\$5,474 \$5,795	\$6,411 \$6,787	\$7,349 \$7,780	\$8,293 \$8,780	\$9,231 \$9,773
10%	90%	\$2,810 \$2,965	\$3,803 \$4,013	\$4,803 \$5,069	\$5,796 \$6,117	\$6,788 \$7,164	\$7,781 \$8,212	\$8,781 \$9,268	\$9,774 \$10,316
5%	95%	\$2,966 \$3,121	\$4,014 \$4,224	\$5,070 \$5,336	\$6,118 \$6,439	\$7,165 \$7,541	\$8,213 \$8,644	\$9,269 \$9,756	\$10,317 \$10,859
NONE	100%	\$3,122 and over	\$4,225 and over	\$5,337 and over	\$6,440 and over	\$7,542 and over	\$8,645 and over	\$9,757 and over	\$10,860 and over

2019 Federal Poverty Thresholds	\$1,041	\$1,409	\$1,778	\$2,146	\$2,514	\$2,883	\$3,251	\$3,619
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GUIDANCE/CARE CENTER, INC.  
 Sliding Fee Scale based on 2019 Federal Poverty Guidelines  
 Effective January 2019  
 INPATIENT FEES PER DAY

Client Discount	Client Payment	Inpatient Services		
		CSU	Residential Level 1	SA Detox
0%	100%	\$ 650.00	\$ 550.00	\$ 600.00
5%	95%	\$ 617.50	\$ 522.50	\$ 570.00
10%	90%	\$ 585.00	\$ 495.00	\$ 540.00
19%	81%	\$ 526.50	\$ 445.50	\$ 486.00
39%	61%	\$ 396.50	\$ 335.50	\$ 366.00
56%	44%	\$ 286.00	\$ 242.00	\$ 264.00
70%	30%	\$ 195.00	\$ 165.00	\$ 180.00
81%	19%	\$ 123.50	\$ 104.50	\$ 114.00
89%	11%	\$ 71.50	\$ 60.50	\$ 66.00
94%	6%	\$ 39.00	\$ 33.00	\$ 36.00
96%	4%	\$ 26.00	\$ 22.00	\$ 24.00
100%	0%	\$ 2.00	\$ 2.00	\$ 2.00

State reimbursement per available day	\$ 323.77	\$ 265.11	\$ 204.94
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