

GRANT INTEGRATED SERVICES

Sliding Fee Schedule *

2020

		Client Billed % of Charges to	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid	Client Billed % of Charges to be Paid
	Family Size	0% Minimum Fee (See Below)	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Annually	1	\$0 - \$12,760	\$12,761 - \$14,036	\$14,037 - \$15,312	\$15,313 - \$16,588	\$16,589 - \$17,864	\$17,865 - \$19,140	\$19,141 - \$20,416	\$20,417 - \$21,692	\$21,693 - \$22,968	\$22,969 - \$24,244	\$24,245 & Above
Annually	2	\$0 - \$17,240	\$17,241 - \$18,964	\$18,965 - \$20,688	\$20,689 - \$22,412	\$22,413 - \$24,136	\$24,137 - \$25,860	\$25,861 - \$27,584	\$27,585 - \$29,308	\$29,309 - \$31,032	\$31,033 - \$32,756	\$32,757 & Above
Annually	3	\$0 - \$21,720	\$21,721 - \$23,892	\$23,893 - \$26,064	\$26,065 - \$28,236	\$28,237 - \$30,408	\$30,409 - \$32,580	\$32,581 - \$34,752	\$34,753 - \$36,924	\$36,925 - \$39,096	\$39,097 - \$41,268	\$41,269 & Above
Annually	4	\$0 - \$26,200	\$26,201 - \$28,820	\$28,821 - \$31,440	\$31,441 - \$34,060	\$34,061 - \$36,680	\$36,681 - \$39,300	\$39,301 - \$41,920	\$41,921 - \$44,540	\$44,541 - \$47,160	\$47,161 - \$49,780	\$49,781 & Above
Annually	5	\$0 - \$30,680	\$30,681 - \$33,748	\$33,749 - \$36,816	\$36,817 - \$39,884	\$39,885 - \$42,952	\$42,953 - \$46,020	\$46,021 - \$49,088	\$49,089 - \$52,156	\$52,157 - \$55,224	\$55,225 - \$58,292	\$58,293 & Above
Annually	6	\$0 - \$35,160	\$35,161 - \$38,676	\$38,677 - \$42,192	\$42,193 - \$45,708	\$45,709 - \$49,224	\$49,225 - \$52,740	\$52,741 - \$56,256	\$56,257 - \$59,772	\$59,773 - \$63,288	\$63,289 - \$66,804	\$66,805 & Above
Annually	7	\$0 - \$39,640	\$39,641 - \$43,604	\$43,605 - \$47,568	\$47,569 - \$51,532	\$51,533 - \$55,496	\$55,497 - \$59,460	\$59,461 - \$63,424	\$63,425 - \$67,388	\$67,389 - \$71,352	\$71,353 - \$75,316	\$75,317 & Above
Annually	8	\$0 - \$44,120	\$44,121 - \$48,532	\$48,533 - \$52,944	\$52,945 - \$57,356	\$57,357 - \$61,768	\$61,769 - \$66,180	\$66,181 - \$70,592	\$70,593 - \$75,004	\$75,005 - \$79,416	\$79,417 - \$83,828	\$83,829 & Above
Annually	9	\$0 - \$48,600	\$48,601 - \$53,460	\$53,461 - \$58,320	\$58,321 - \$63,180	\$63,181 - \$68,040	\$68,041 - \$72,900	\$72,901 - \$77,760	\$77,761 - \$82,620	\$82,621 - \$87,480	\$87,481 - \$92,340	\$92,341 & Above
Annually	10	\$0 - \$53,080	\$53,081 - \$58,388	\$58,389 - \$63,696	\$63,697 - \$69,004	\$69,005 - \$74,312	\$74,313 - \$79,620	\$79,621 - \$84,928	\$84,929 - \$90,236	\$90,237 - \$95,544	\$95,545 - \$100,852	\$100,853 & Above
For Each Additional Family Member ADD		\$4,480.00 Annual Basis	\$4,928.00 Annual Basis	\$5,376.00 Annual Basis	\$5,824.00 Annual Basis	\$8,153.60 Annual Basis	\$6,720.00 Annual Basis	\$7,168.00 Annual Basis	\$7,616.00 Annual Basis	\$8,064.00 Annual Basis	\$8,512.00 Annual Basis	

* Based on 2020 Federal Poverty Level, U.S. Department of Health & Human Services as of January 15, 2020.

No individual shall be denied services due to inability to pay.

Clients receiving a DSHS income assistance grant or medical assistance will not be assessed a fee. Food stamp recipients do not fall into this category unless they also receive a DSHS income assistance grant or medical assistance.

Payments are due and payable at time of service.



