

## **Tier Level Sliding Scale Policy**

**South Central Mental Health Counseling Center (SCMHCC) offers a tier level sliding scale fee to clients who do not have insurance. The sliding scale fee is based on a calculation that considers number of household residents and total household income. It is also determined by the type of service provided. Proof of income is required to establish a sliding scale fee for services. Your tier level will be determined by staff upon receipt of your qualifying documentation.**

**If a client has insurance, SCMHCC is required to collect all co-pay, deductible, and co-insurance amounts required by the insurance company. These co-pay, deductible, and co-insurance amounts are not negotiable. If the client is unable to pay these amounts in full at the time of service, SCMHCC will work with the client to accept a monthly payment amount.**

**If a client has insurance that does not include SCMHCC as part of their network, no sliding scale fee will be offered. The client must either pay full fees for all services or find another provider that is within their network.**

**However, if the service is not covered by insurance due to policy exclusions, regardless of network membership status, the client may be eligible for the tier level sliding scale fee. To qualify for the tier level sliding scale fee, the client must provide all necessary documentation of household income. Under this circumstance, payment amount will be based on the same tier level sliding scale fee used for uninsured clients.**

**Household Income is defined as: The combined, before-tax (gross) money received by all relatives residing in the home. This income would include wages and salaries, unemployment insurance, disability, child support, pensions, trust account payments, and any other similar type of income.**

**A Household Member is defined as: Any person that spends at least 50% of his/her time living in the home and is related to the head of household.**

## 2025 Federal Poverty Levels — Income Eligibility Tiers

Based on 2025 Federal Poverty Guidelines | Updated annually

Family Size	*2025 Federal Poverty Level	Tier 1	Tier 2	Tier 3	Tier 4
		100% — \$0 to FPL	150% — FPL to 150%	175% — 150% to 175%	> 200% of FPL
1	\$15,650	\$0 – \$15,650	\$15,650.01 – \$23,475	\$23,475.01 – \$27,387.50	\$31,300.01+
2	\$21,150	\$0 – \$21,150	\$21,150.01 – \$31,725	\$31,725.01 – \$37,012.50	\$42,300.01+
3	\$26,650	\$0 – \$26,650	\$26,650.01 – \$39,975	\$39,975.01 – \$46,637.50	\$53,300.01+
4	\$32,150	\$0 – \$32,150	\$32,150.01 – \$48,225	\$48,225.01 – \$56,262.50	\$64,300.01+
5	\$37,650	\$0 – \$37,650	\$37,650.01 – \$56,475	\$56,475.01 – \$65,887.50	\$75,300.01+
6	\$43,150	\$0 – \$43,150	\$43,150.01 – \$64,725	\$64,725.01 – \$75,512.50	\$86,300.01+
7	\$48,650	\$0 – \$48,650	\$48,650.01 – \$72,975	\$72,975.01 – \$85,137.50	\$97,300.01+
8	\$54,150	\$0 – \$54,150	\$54,150.01 – \$81,225	\$81,225.01 – \$94,762.50	\$108,300.01+
9	\$59,650	\$0 – \$59,650	\$59,650.01 – \$89,475	\$89,475.01 – \$104,387.50	\$119,300.01+
**10	\$65,150	\$0 – \$65,150	\$65,150.01 – \$97,725	\$97,725.01 – \$114,012.50	\$130,300.01+

\* Based on 2025 Federal Poverty Guidelines; updated annually.

\*\* Add \$5,500 for each additional family member over 10.

\*\*\* Subject to a nominal fee of \$35.00 per day, regardless of number of services attended that day.

## Niveles Federales de Pobreza 2025 — Niveles de Elegibilidad por Ingresos

Basado en las Pautas Federales de Pobreza 2025 | Se actualiza anualmente

Tamaño de Familia	*Nivel Federal de Pobreza 2025	Nivel 1	Nivel 2	Nivel 3	Nivel 4
		100% — \$0 al NFP	150% — NFP al 150%	175% — 150% al 175%	> 200% del NFP
<b>1</b>	<b>\$15,650</b>	\$0 – \$15,650	\$15,650.01 – \$23,475	\$23,475.01 – \$27,387.50	\$31,300.01+
<b>2</b>	<b>\$21,150</b>	\$0 – \$21,150	\$21,150.01 – \$31,725	\$31,725.01 – \$37,012.50	\$42,300.01+
<b>3</b>	<b>\$26,650</b>	\$0 – \$26,650	\$26,650.01 – \$39,975	\$39,975.01 – \$46,637.50	\$53,300.01+
<b>4</b>	<b>\$32,150</b>	\$0 – \$32,150	\$32,150.01 – \$48,225	\$48,225.01 – \$56,262.50	\$64,300.01+
<b>5</b>	<b>\$37,650</b>	\$0 – \$37,650	\$37,650.01 – \$56,475	\$56,475.01 – \$65,887.50	\$75,300.01+
<b>6</b>	<b>\$43,150</b>	\$0 – \$43,150	\$43,150.01 – \$64,725	\$64,725.01 – \$75,512.50	\$86,300.01+
<b>7</b>	<b>\$48,650</b>	\$0 – \$48,650	\$48,650.01 – \$72,975	\$72,975.01 – \$85,137.50	\$97,300.01+
<b>8</b>	<b>\$54,150</b>	\$0 – \$54,150	\$54,150.01 – \$81,225	\$81,225.01 – \$94,762.50	\$108,300.01+
<b>9</b>	<b>\$59,650</b>	\$0 – \$59,650	\$59,650.01 – \$89,475	\$89,475.01 – \$104,387.50	\$119,300.01+
<b>**10</b>	<b>\$65,150</b>	\$0 – \$65,150	\$65,150.01 – \$97,725	\$97,725.01 – \$114,012.50	\$130,300.01+

\* Basado en las Pautas Federales de Pobreza 2025; se actualiza anualmente.

\*\* Agregue \$5,500 por cada miembro adicional de la familia mayor de 10.

\*\*\* Sujeto a una tarifa nominal de \$35.00 por día, independientemente del número de servicios a los que asista ese día.