

Alternatives in Psychological Consultation --Sliding Fee Schedule

A sliding fee is used to calculate the fee uninsured clients are responsible for upon receiving services. The fee amount is calculated using your gross household income and family size. APC offers a discounted fee schedule for individuals who do not have insurance or whose income is below 200% of the Federal Poverty level. The amount of the fee discounted is based on your family size, income, and determined based upon annual established Federal Poverty Level income guidelines.

Clients who believe they qualify for our sliding fee must complete an application for the discounted fee program and provide income verification (last 2 paystubs, copy of entitlement checks, W2, etc.). The form is located in the Outpatient waiting area at our Lisbon Avenue office, or can be obtained from our website at www.altlig.com or from your therapist.

A person whose family income is between one hundred one and two hundred percent of the federal poverty standard, adjusted for family size, **shall have his/her charges that are not covered by public or private sponsorship reduced according to the schedule below. This includes copays and deductibles.**

The responsible party's financial obligation, which remains after the application of this sliding fee schedule, may be payable in monthly installments over a reasonable period of time (but no longer than 6 months), without interest or late fees, as negotiated between the therapist and the responsible party. The schedule is as follows:

Annual Income Thresholds by Sliding Fee Discount Pay Class and Percent of Poverty											
Poverty Level		100%	120%	130%	140%	150%	160%	170%	180%	190%	200%
Family Size (below)	Amt to Pay	Minimum Fee Required	Pay 10%	Pay 20%	Pay 30%	Pay 40%	Pay 50%	Pay 60%	Pay 70%	Pay 80%	Pay 90%
1		\$12,760	\$14,036	\$15,312	\$16,588	\$17,864	\$19,140	\$20,416	\$21,692	\$22,968	\$24,244
2		\$17,240	\$18,964	\$20,688	\$22,412	\$24,136	\$25,860	\$27,584	\$29,308	\$31,032	\$32,756
3		\$21,720	\$23,892	\$26,064	\$28,236	\$30,408	\$32,580	\$34,752	\$36,924	\$39,096	\$41,268
4		\$26,200	\$28,820	\$31,440	\$34,060	\$36,680	\$39,300	\$41,920	\$44,540	\$47,160	\$49,780
5		\$30,680	\$33,748	\$36,816	\$39,884	\$42,952	\$46,020	\$49,088	\$52,156	\$55,224	\$58,292
6		\$35,135	\$38,649	\$42,162	\$45,676	\$49,189	\$52,703	\$56,216	\$59,730	\$63,243	\$66,757
7		\$39,640	\$43,604	\$47,568	\$51,532	\$55,496	\$59,460	\$63,424	\$67,388	\$71,352	\$75,316
8		\$44,120	\$48,532	\$52,944	\$57,356	\$61,768	\$66,180	\$70,592	\$75,004	\$79,416	\$83,828

For households with more than 8 people, add \$4,160 for each additional person per year.

Following is APC's Reduced Fee Schedule based on the 2020 Federal Poverty Guidelines.

Session Type	STANDARD FEE	Min Fee	10% Pay	20% Pay	30% Pay	40% Pay	50% Pay	60% Pay	70% Pay	80% Pay	90% Pay
Fee You will Be Charged											
Initial Evaluation Masters Therapist	\$225	\$15	\$22.50	\$45	\$67.50	\$90	\$112.50	\$135	\$157.50	\$180	\$202.50
60 Min Session Masters Therapist	\$160	\$12	\$16	\$32	\$48	\$64	\$80	\$96	\$112	\$128	\$144
45 min Session Masters Therapist	\$140	\$10	\$14	\$28	\$42	\$56	\$70	\$84	\$98	\$112	\$126
30 min Session Masters Therapist	\$120	\$7.50	\$12	\$24	\$36	\$48	\$60	\$72	\$84	\$96	\$108
Group Therapy	\$55	\$5	\$5.50	\$11	\$16.50	\$22	\$27.50	\$33	\$38.50	\$44	\$49.50
Initial Eval PHD Level Therapist	\$225	\$15	\$22.50	\$45	\$67.50	\$90	\$112.50	\$135	\$157.50	\$180	\$202.50
60 min Session PHD Level Therapist	\$180	\$13	\$18	\$36	\$54	\$72	\$90	\$108	\$126	\$144	\$162
45 Min Session PHD Level Therapist	\$160	\$12	\$16	\$32	\$48	\$64	\$80	\$96	\$112	\$128	\$144
30 Min Session PHD Level Therapist	\$120	\$7.50	\$12	\$24	\$36	\$48	\$60	\$72	\$84	\$96	\$108
Urine Drug Screen	\$15	\$1	\$1.50	\$3.00	\$4.50	\$6.00	\$6.00	\$7.50	\$10.50	\$12.00	\$13.50

When is the fee due?

Fees for services are due at the time of visit. If you are unable to pay your bill at the time of the visit, services may need to be placed on hold until your balance is paid. **Individuals who have copayment balances above \$50 will be placed on hold until payment is received.** APC accepts cash, checks, and credit cards.

APC will be happy to provide you with resources to other agencies that may be able to provide services to you at no cost if needed. Please ask your therapist or call 414-358-7144 for a list of agencies.

I have read and understand APC's Sliding Fee Policy.

Client Name: _____

Signature: _____

Date: _____