



105 2nd Avenue NE, Suite 110
 Glenwood, MN 56334
 p) 320.428.0744
 f) 320.438.2829
 www.northcountrycounseling.net

SLIDING FEE SCALE

2024 FEDERAL POVERTY GUIDELINES

Household Annual Income maximums:

Household/Family Size	100%	125%	150%	175%	200%
1	\$15,060	\$18,225	\$22,590	\$26,355	\$30,120
2	\$20,440	\$25,550	\$30,660	\$35,770	\$40,880
3	\$25,820	\$32,275	\$38,730	\$45,185	\$51,640
4	\$31,200	\$39,000	\$46,800	\$54,600	\$62,400
5	\$36,580	\$45,725	\$54,870	\$64,015	\$73,160
6	\$41,960	\$52,540	\$62,940	\$73,430	\$83,920
7	\$47,340	\$59,175	\$71,010	\$82,845	\$94,680
8	\$52,720	\$65,900	\$79,080	\$92,260	\$105,440
For Each Additional Person Add	\$5380	\$6725	\$8070	\$9415	\$10,760

Slide Level	A	B	C	D	E	F
	<100% FPL	100-125% FPL	126-150% FPL	151-175%	176-199%	<200%
Patient Pays per session	50%	60%	70%	80%	90%	100% of Charges

**If actual charges are less than amounts shown, patient pays lesser amount

** No discount is available for applicants over 200% of FPL

** Payments are due at the time of service unless a payment plan has been developed and agreed to by all parties.

** Insurance cannot be billed if patient is utilizing a sliding fee scale

Live Your Best Life