

**Clarity Child Guidance Center
Sliding Fee Scale
Inpatient Services
Effective 11/01/2019**

[S:\Policies and Procedures\Ancillary Procedure Documents](#)

Document affiliated with Policy and Procedure T-104

Percentage of Federal Poverty Level (FPL) / Income Level-Charity Care Level												Discount	
Family Size	100%	110%	120%	130%	140%	150%	160%	170%	180%	190%	200%	200% to 500%	Private Pay
	A	B	C	D	E	F	G	H	I	J	K		
1	12,140	13,354	14,568	15,782	16,996	18,210	19,424	20,638	21,852	23,066	24,280	60,700	
2	16,460	18,106	19,752	21,398	23,044	24,690	26,336	27,982	29,628	31,274	32,920	82,300	
3	20,780	22,858	24,936	27,014	29,092	31,170	33,248	35,326	37,404	39,482	41,560	103,900	
4	25,100	27,610	30,120	32,630	35,140	37,650	40,160	42,670	45,180	47,690	50,200	125,500	
5	29,420	32,362	35,304	38,246	41,188	44,130	47,072	50,014	52,956	55,898	58,840	147,100	
6	33,740	37,114	40,488	43,862	47,236	50,610	53,984	57,358	60,732	64,106	67,480	168,700	
7	38,060	41,866	45,672	49,478	53,284	57,090	60,896	64,702	68,508	72,314	76,120	190,300	
8	42,380	46,618	50,856	55,094	59,332	63,570	67,808	72,046	76,284	80,522	84,760	211,900	
9	46,700	51,370	56,040	60,710	65,380	70,050	74,720	79,390	84,060	88,730	93,400	233,500	
10	51,020	56,122	61,224	66,326	71,428	76,530	81,632	86,734	91,836	96,938	102,040	255,100	

Percentage - Discount / Discounted Charges - Charity Care Level												Discount		
Service	Daily Rate	100%	96%	92%	88%	84%	80%	76%	72%	68%	64%	60%	55%	50%
Inpatient - Acute	1850	0	74	148	222	296	370	444	518	592	666	740	833	925
Inpatient - Sub-Acute	1600	0	64	128	192	256	320	384	448	512	576	640	720	800
Partial (Full Day)	800	0	32	64	96	128	160	192	224	256	288	320	360	400
Partial (Half Day)	600	0	24	48	72	96	120	144	168	192	216	240	270	300

