

Integrity Pathways
Sliding Scale Fee Schedule
2026

Annual Poverty Level*	100%	110%	120%	130%	140%	150%	160%	170%	180%	190%	200%										
% of Fee	>= 100%	90%	80%	70%	60%	50%	40%	30%	20%	10%	0%										
Household/ Family Size																					
1	15,960	15,961	17,556	17,557	19,152	19,153	20,748	20,749	22,344	22,345	23,940	23,941	25,536	25,537	27,132	27,133	28,728	28,729	30,324	30,325	31,920
2	21,640	21,641	23,804	23,805	25,968	25,969	28,132	28,133	30,296	30,297	32,460	32,461	34,624	34,625	36,788	36,789	38,952	38,953	41,116	41,117	43,280
3	27,320	37,321	30,052	30,053	32,784	32,785	35,516	35,517	38,248	38,249	40,980	40,981	43,712	43,713	46,444	46,445	49,176	49,177	51,908	51,909	54,640
4	33,000	33,001	36,300	36,301	39,600	39,601	42,900	42,901	46,200	46,201	49,500	49,501	52,800	52,801	56,100	56,101	59,400	59,401	62,700	62,701	66,000
5	38,680	38,681	42,548	42,549	46,416	46,417	50,284	50,285	54,152	54,153	58,020	58,021	61,888	61,889	65,756	65,757	69,624	69,625	73,492	73,493	77,360
6	44,360	44,361	48,796	48,797	53,232	53,233	57,668	57,669	62,104	62,105	66,540	66,541	70,976	70,977	75,412	75,413	79,848	79,849	84,284	84,285	88,720
7	50,040	50,041	55,044	55,045	60,048	60,049	65,052	65,053	70,056	70,057	75,060	75,061	80,064	80,065	85,068	85,069	90,072	90,073	95,076	95,077	100,080
8	55,720	55,721	61,292	61,293	66,864	66,865	72,436	72,437	78,008	78,009	83,580	83,581	89,152	89,153	94,724	94,725	100,296	100,297	105,868	105,869	111,440
9	61,400	61,401	67,540	67,541	73,680	73,681	79,820	79,821	85,960	85,961	92,100	92,101	98,240	98,241	104,380	104,381	110,520	110,521	116,660	116,661	122,800
10	67,080	67,081	73,788	73,789	80,496	80,497	87,204	87,205	93,912	93,913	100,620	100,621	107,328	107,329	114,036	114,037	120,744	120,745	127,452	127,453	134,160

* Add \$5500 for each additional person

Max Fee Assess.	Minimum												Maximum
\$175.00	\$50.00	\$55.00	\$60.00	\$65.00	\$70.00	\$75.00	\$80.00	\$85.00	\$90.00	\$95.00	\$100.00	\$175.00	
Max Fee Therapy													
\$150.00	\$35.00	\$38.50	\$42.00	\$45.50	\$49.00	\$52.50	\$56.00	\$59.50	\$63.00	\$66.50	\$70.00	\$150.00	

Sliding Scale (Discounted) Fee Policy

The Sliding Scale (Discounted Fee) policy is to provide essential behavioral health services regardless of the client's ability to pay. A sliding fee scale is offered based upon family/household size and annual income. IP's sliding fee schedule is used to calculate the basic discount and is updated each year using the Federal Poverty Guidelines. Upon approval, the discount will be honored for 12 months, after which the client must reapply.

Sliding Scale (Discounted) Fee Process

The client must complete an application and include required documentation to be kept on file, which includes proof of address, all household income, and/or insurance information. This information must be received before a discount will be determined. If the applicant appears to be eligible for Medicaid, a written denial of coverage from Medicaid will be required. If the amount determined per the discount fee is not affordable a letter may be submitted for review to further reduce the payment amount. A further reduction will be made on a case by case basis.