Sliding Fee Schedule for Mental Health Recovery Board Serving Warren & Clinton Co. Funded Services 1/20/26
Percent of Cost to be Paid by the Member Based on 200% - 300% Federal Poverty Guideline
FY26 (7/1/26-6/30/27)
Based on Monthly Income:

%	Rider	Family Size 1		Family Size 2		Family Size 3		Family Size 4		Family Size 5		Family Size 6		Family Size 7		Family Size 8		Family Size 9		Family Size 10	
0	Z	0	2,660	0	3,607	0	4,553	0	5,500	0	6,447	0	7,393	0	8,340	0	9,287	0	10,233	0	11,180
10	B	2,661	2,808	3,608	3,807	4,554	4,806	5,501	5,806	6,448	6,805	7,394	7,804	8,341	8,803	9,288	9,803	10,234	10,802	11,181	11,801
20	D	2,809	2,956	3,808	4,007	4,807	5,059	5,807	6,112	6,806	7,163	7,805	8,215	8,804	9,266	9,804	10,319	10,803	11,371	11,802	12,422
30	F	2,957	3,104	4,008	4,207	5,060	5,312	6,113	6,418	7,164	7,521	8,216	8,626	9,267	9,729	10,320	10,835	11,372	11,940	12,423	13,043
40	H	3,105	3,252	4,208	4,407	5,313	5,565	6,419	6,724	7,522	7,879	8,627	9,037	9,730	10,192	10,836	11,351	11,941	12,509	13,044	13,664
50	J	3,253	3,400	4,408	4,607	5,566	5,818	6,725	7,030	7,880	8,237	9,038	9,448	10,193	10,655	11,352	11,867	12,510	13,078	13,665	14,285
60	L	3,401	3,548	4,608	4,807	5,819	6,071	7,031	7,336	8,238	8,595	9,449	9,859	10,656	11,118	11,868	12,383	13,079	13,647	14,286	14,906
70	N	3,549	3,696	4,808	5,007	6,072	6,324	7,337	7,642	8,596	8,953	9,860	10,270	11,119	11,581	12,384	12,899	13,648	14,216	14,907	15,527
80	P	3,697	3,844	5,008	5,207	6,325	6,577	7,643	7,948	8,954	9,311	10,271	10,681	11,582	12,044	12,900	13,415	14,217	14,785	15,528	16,148
90	R	3,845	3,992	5,208	5,407	6,578	6,830	7,949	8,254	9,312	9,669	10,682	11,092	12,045	12,507	13,416	13,931	14,786	15,354	16,149	16,769
100	T	3,993	Up	5,408	Up	6,831	Up	8,255	Up	9,670	Up	11,093	Up	12,508	Up	13,932	Up	15,355	Up	16,770	Up

Service Sliding Fee Scale will be applied to:

MH/SUD Psychiatric Diagnostic Evaluation with & without Medical	90791, 90792
Medication Administration	96372
MH Behavioral Health Testing	96112-96121, 96130-96137
MH/SUD Individual and Group Psychotherapy (includes Family) Excludes Crisis Service Codes	90832-90838; 90846, 90847; 90849, 90853
MH/SUD Prolonged Visit (for use with E&M codes only)	99415, 99416, 99417, G2212
MH/SUD Evaluation & Management (includes new, established, home visit)	99202-99350
Interactive Complexity	90785
MH Nursing Services (RN/LPN) (Individ/Group)	H2017, H2019/H2019HQ
SUD Assessment	H0001
SUD Nursing Services (RN/LPN) (Individ/Group)	T1002/T1002HQ, T1003
SUD Urine Drug Screen	H0048
SUD Individual and Group Counseling	H0004, H0005
SUD Intensive Outpatient, Group	H0015
SUD Vivitrol Injection	J2315
MHRB does not cover H0040-ACT bundled code	

Service Sliding Fee Scale will be Waived or NOT be applied to:

All services delivered to clients enrolled in the SED or SPMI population plans	**Various**
All grant funded positions &/or consultation codes billed non-client specific	**Various**
Crisis Services (incl mobile crisis, crisis consultation billed by designated Crisis Services Provider) CS Modifier	90832 KX, 90839, 90840
MH Housing, Residential, Transitional, Staff Support, Damage, (SPMI only) ***	M2200, M2261, M2270, M2290/M229X, M2292, M2210-M2212, M2215
SUD Recovery Housing *** ***Client benefit/rental payment to provider may apply	A2290/A229X, A2291
SUD Residential Treatment, Room & Board, Partial Hospitalization	H2036, A0740, H0015TG
MH Adult Education (SPMI only)	M1540
MH Therapeutic Mentoring (SED only)	M413T
MH Consultation & Support (Client Specific)	M4120, M412S
MH CPST, TBS, PSR (individual and group) **	H0036, H0036/HQ, H2017, H2019, H2019/HQ
SUD Case Management **	H0006
SUD Urine Pregnancy Test	81025
SUD Withdrawal Management-Hourly-ASAM2	H0014
** limit MH/SUD Outpatient Case Management to 40-15 minute units per fiscal year	