



Sliding Fee Schedule

To be eligible for a reduced fee based on the sliding fee schedule you must be denied Medicaid and/or Denali Kid Care, have no insurance or your insurance will not cover services through Denali Family Service.

If you have Medicare, Medicaid, or private medical insurance available, you are responsible for providing policy information to Denali Family Services, and meeting all service authorization requirements of your insurer. Use of a Medicare and/or Medicaid medical authorization constitutes your consent for inspection of your medical records by representatives of the state and federal government.

To avoid being liable for payment, you should make sure Medicaid covers the service you are receiving.

INCOME DETERMINATION

- Income is based on the gross income of all household members and is used to determine the Federal Poverty Level of the applicant. The following are examples of the types of income to be reported but this list is not all inclusive:
 - Includes salary, wages, unemployment compensation, worker's compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trust, educational assistance, alimony, Alaska Permanent Fund Dividend, assistance from friends or family members, and other miscellaneous sources.

HOUSEHOLD SIZE DEFINED

Household members include but are not limited to the following definitions:

- All members of a household who are related AND/OR pooling resources are counted as one family/household. (For adult children living in the home and filing).
- Unrelated members of a household who are supporting one another financially or share resources are considered one household (i.e. living as married/cohabitation).
- Family members living in the same household on a *temporary* basis due to a hardship and are receiving room and board are considered a separate household.
- Members of a household who are unrelated and do not share income are considered separate households.

Examples or acceptable forms of proof for determining income include the following:

- b. PAY CHECK STUBS FOR ONE MONTH
- c. AGENCY LETTER: A letter from the Social Security Administration, Veterans Administration, Medicaid or Social Service Agency (i.e., AFDC, Food Stamps, or WIC) indicating income level.
- d. UNEMPLOYMENT VERIFICATION: Paperwork from the Employment Securities Commission (ESC) proving unemployment status and the amount of unemployment compensation being received
- e. COURT DOCUMENTS: Official documents citing alimony as awarded by a judge.
- f. OFFICIAL PAPERWORK: Paperwork documenting retirement, disability, SSI benefits
- g. EMPLOYER LETTER: For those who do not have a recent pay check stub a letter from the employer detailing current gross income and frequency of pay periods may be accepted. Contact information



1. Provide proof that you applied for, or have been denied, Medicaid or Denali kid care. (You may ask a receptionist for a Denali Kid Care application.)
2. If you meet the requirements above, you may also request psychotherapy services from a clinical student intern. You will not be charged for services delivered by a clinical student intern.

Applicable Discount					
Family size	100%	25%	50%	75%	Full Pay
1	\$14,350	\$19,086	\$23,821	\$28,700	\$28,701
2	\$19,380	\$25,776	\$32,171	\$38,760	\$38,761
3	\$24,410	\$32,466	\$40,521	\$48,820	\$48,821
4	\$29,440	\$39,156	\$48,871	\$58,880	\$58,881
5	\$34,470	\$45,846	\$57,221	\$68,940	\$68,941
6	\$39,500	\$52,535	\$65,570	\$79,000	\$79,001
7	\$44,530	\$59,225	\$73,920	\$89,060	\$89,061
8	\$49,560	\$65,915	\$82,270	\$99,120	\$99,121

Based on 2013 Monthly Federal Poverty Guidelines for Alaska



Fee Schedule

1. All services are prescribed based on medical necessity established by a Denali Family Services clinician or psychiatrist for each consumer.
2. Payment is billed the 1st of each month with payment received by the 15th; please ask to speak with a billing staff member to make payment arrangements.

Case Management Assistance provided to a severely emotionally disturbed child or adult, or a chronically mentally ill adult consumer and his/her family to access and coordinate needed medical, psychiatric, mental health, educational, vocational, social supports, community-based services, related assessment, and post-discharge follow-up.	\$64.00 per hour
Crisis Intervention Provided to a consumer during an acute episode of psychiatric distress	\$105.00 per hour
Family Psychotherapy (FT) by a clinician (with or without client) Provided to a consumer and any family member or individual sharing a household	\$55.00 per hour
Family (with or without client) Therapeutic Behavioral Health Services Therapeutic skill instruction, practice, and monitoring provided to a severely emotionally disturbed child consumer and family to help learn more effective ways to impact the consumers symptoms and inappropriate behavior.	\$68.00 per hour
Functional Assessment A systematic evaluation of a consumer to assess functioning levels in living, learning, education, work, interpersonal, and other life skills necessary for independent living in order to develop an individualized service plan.	\$60.00 per hour
Group Psychotherapy (GT) by a clinician Provided to two or more consumers by a clinician.	\$55.00 per hour
Group Therapeutic Behavioral Health Services (GTBHS) Therapeutic skill instruction, practice, and monitoring offered in a group setting to a severely emotionally disturbed child or adult, or to a chronically mentally ill adult consumer to help develop or improve specific self-care, self-direction, communication, or social interaction skills necessary for successful community adjustment and interaction with person in the home, school, work, or community environment.	\$36.00 per hour
Individual Therapeutic Behavioral Health Services (ITBHS) Therapeutic self-care and life skill instruction, practice, and monitoring to a severely emotionally disturbed child or adult, or to chronically mentally ill adult consumer to help improve skills, engage in age-appropriate social behavior, maintain his/her household, and develop the ability to be independently mobile in his/her community.	\$68.00 per hour
Individual Psychotherapy (IT) by a clinician (30min) Treatment for mental illness, behavioral maladaptation, or other problems of an emotional nature that removes, modifies, or retards existing symptoms, attenuates or reverses disturbed patterns of behavior, and promotes positive personality growth and development.	\$50.00 per ½ hour
Individual Psychotherapy by a clinician (IT) (60min) Treatment for mental illness, behavioral maladaptation, or other problems of an emotional nature that removes, modifies, or retards existing symptoms, attenuates or reverses disturbed patterns of behavior, and promotes positive personality growth and development.	\$100.00 per hour
Individual Psychotherapy by a psychiatrist (see above)	\$225.00 per hour
Intake Assessment by a clinician A systematic evaluation of a consumer to assess symptomatology, mental status, and social and medical history for the purposes of establishing a diagnosis and developing a comprehensive treatment and rehabilitation plan.	\$175.00 per hour
Intake Assessment by a psychiatrist (see above)	\$250.00 per hour
Pharmacologic Management Assessing, prescribing, and monitoring a consumer's medication by a licensed medical professional	\$150.00 per hour
Psychiatric Assessment by a psychiatrist, physician, or psychiatric nurse practitioner A systematic evaluation of a consumer to determine symptomatology, establish a diagnosis, and prescribe needed treatment	\$230.00 per hour