

PAYMENT FOR SERVICES

HEGIRA HEALTH SLIDING FEE SCALE (*for those without insurance, public funding or another payment resource*)

FOR EXAMPLE: If your annual income (amount reported on Line 16 of the Michigan tax return) is \$20,000, then your adjusted cost for services would be no more than \$62 a month or \$744 a year. For those with state taxable income over \$50,000, the ability to pay shall be 15% of that income.*

HEGIRA HEALTH, INC. Wellness First

Hegira Health is a federally funded, Certified Community Behavioral Health Clinic (CCBHC). Funds are made available through this federal grant to ensure services are accessible to persons that are uninsured, at no or low cost, based on income and an established sliding fee scale.

Hegira Health is also a contracted mental health and/or substance use treatment provider of Wayne, Oakland, Monroe, Washtenaw, and Livingston counties. A person meeting residency, income, and in some cases, diagnostic guidelines may be eligible to receive services at low or no cost.

For more information, please call (734) 458-4601, or visit **hegirahealth.org.**

STATE TA	STATE TAXABLE INCOME			ABILITY TO PAY		STATE TAXABLE INCOME			ABILITY TO PAY		STATE TAXABLE INCOME			ABILITY TO PAY	
Annual Income		Annual Income	Monthly	Annually	Annual Income		Annual Income	Monthly	Annually	Annual Income		Annual Income	Monthly	Annually	
\$0	to	\$6,000	\$0	\$0	\$21,001	to	\$22,000	\$83	\$996	\$37,000	to	\$38,000	\$364	\$4,368	
\$6,001	to	\$7,000	\$0	\$0	\$22,001	to	\$23,000	\$95	\$1,140	\$38,001	to	\$39,000	\$384	\$4,608	
\$7,001	to	\$8,000	\$0	\$0	\$23,001	to	\$24,000	\$108	\$1,296	\$39,001	to	\$40,000	\$405	\$4,860	
\$8,001	to	\$9,000	\$0	\$0	\$24,001	to	\$25,000	\$122	\$1,464	\$40,001	to	\$41,000	\$426	\$5,112	
\$9,001	to	\$10,000	\$0	\$0	\$25,001	to	\$26,000	\$137	\$1,644	\$41,001	to	\$42,000	\$447	\$5,364	
\$10,001	to	\$11,000	\$11	\$132	\$26,001	to	\$27,000	\$153	\$1,836	\$42,001	to	\$43,000	\$468	\$5,616	
\$11,001	to	\$12,000	\$14	\$168	\$27,001	to	\$28,000	\$170	\$2,040	\$43,001	to	\$44,000	\$489	\$5,868	
\$12,001	to	\$13,000	\$18	\$216	\$28,001	to	\$29,000	\$188	\$2,256	\$44,001	to	\$45,000	\$510	\$6,120	
\$13,001	to	\$14,000	\$22	\$264	\$29,001	to	\$30,000	\$206	\$2,472	\$45,001	to	\$46,000	\$531	\$6,372	
\$14,001	to	\$15,000	\$27	\$324	\$30,001	to	\$31,000	\$225	\$2,700	\$46,001	to	\$47,000	\$552	\$6,624	
\$15,001	to	\$16,000	\$32	\$384	\$31,001	to	\$32,000	\$244	\$2,928	\$47,001	to	\$48,000	\$573	\$6,876	
\$16,001	to	\$17,000	\$38	\$456	\$32,001	to	\$33,000	\$264	\$3,168	\$48,001	to	\$49,000	\$594	\$7,128	
\$17,001	to	\$18,000	\$45	\$540	\$33,001	to	\$34,000	\$284	\$3,408	\$49,001	to	\$50,000	\$615	\$7,380	
\$18,001	to	\$19,000	\$53	\$636	\$34,001	to	\$35,000	\$304	\$3,648	*Source: Michigan Department of Community Health public mental health system ability-to-pay schedule. NOTE: Line 16 of the Michigan Tax Return is the income amount to be used. The adjustment for dependents was already made. Therefore, <u>DO NOT make any adjustment</u> t o the Line 16 amount unless a step-parent's income is involved.					
\$19,001	to	\$20,000	\$62	\$744	\$35,001	to	\$36,000	\$324	\$3,888						
\$20,001	to	\$21,000	\$72	\$864	\$36,001	to	\$37,000	\$344	\$4,128						

The above scale is based on State of Michigan taxable income which is calculated by taking your Adjusted Gross Income and subtracting for your personal exemptions (number of dependents x \$5,000/dependent) to arrive at your monthly financial responsibility for services. This calculation takes into account your family size and is based on 133% of the Federal Poverty Limit for 2023.