Dana A. Max, Psy.D., P.C.

Licensed Clinical Psychologist

5860 South Curtice Street Littleton, Colorado 80120 (303) 347-8498 (office)

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Sliding Fee Agreement

I, ______, certify that I do not have Medicaid or any other health insurance or I certify that if I have another health insurance, besides Medicaid, that I will not utilize that health insurance for services rendered by Dr. Max) and that due to my current financial situation, I cannot afford the full fee rate of \$185/session (Medicaid recipients must use their Medicaid benefits). I, therefore, request that my fee be adjusted according to the Sliding Fee Scale published by Dr. Max (see below). I currently earn ______ per month and support ______ people on this income (please attach most

recent year's tax return).

Signature			Date		
Single Person Family Income	Two Person Family Income	Three People Family Income	Four People Family Income	Five People Family Income	Six People Family Income
< \$19,000.00 \$90	< \$26,000.00 \$90	< \$33,000.00 \$90	< \$39,000.00 \$90	< \$46,000.00 \$90	< \$53,000.00 \$90
\$21,450.00 \$95	\$28,100.00 \$95	\$34,750.00 \$95	\$40,450.00 \$95	\$47,100.00 \$95	\$53,750.00 \$95
\$23,900.00 \$100	\$30,200.00 \$100	\$36,500.00 \$100	\$41,900.00 \$100	\$48,200.00 \$100	\$54,500.00 \$100
\$26,350.00 \$105	\$32,300.00 \$105	\$38,250.00 \$105	\$43,350.00 \$105	\$49,300.00 \$105	\$55,250.00 \$105
\$28,800.00 \$110	\$34,400.00 \$110	\$40,000.00 \$110	\$44,800.00 \$110	\$50,400.00 \$110	\$56,000.00 \$110
\$31,250.00 \$115	\$36,500.00 \$115	\$41,750.00 \$115	\$46,250.00 \$115	\$51,500.00 \$115	\$56,750.00 \$115
\$33,700.00 \$120	\$38,600.00 \$120	\$43,500.00 \$120	\$47,700.00 \$120	\$52,600.00 \$120	\$57,500.00 \$120
\$36,150.00 \$125	\$40,700.00 \$125	\$45,250.00 \$125	\$49,150.00 \$125	\$53,700.00 \$125	\$58,250.00 \$125
\$38,600.00 \$130	\$42,800.00 \$130	\$47,000.00 \$130	\$50,600.00 \$130	\$54,800.00 \$130	\$59,000.00 \$130
\$41,050.00 \$135	\$44,900.00 \$135	\$48,750.00 \$135	\$52,050.00 \$135	\$55,900.00 \$135	\$59,750.00 \$135
\$43,500.00 \$140	\$47,000.00 \$140	\$50,500.00 \$140	\$53,500.00 \$140	\$57,000.00 \$140	\$60,500.00 \$140
\$45,950.00 \$145	\$49,100.00 \$145	\$52,250.00 \$145	\$54,950.00 \$145	\$58,100.00 \$145	\$61,250.00 \$145
\$48,400.00 \$150	\$51,200.00 \$150	\$54,000.00 \$150	\$56,400.00 \$150	\$59,200.00 \$150	\$62,000.00 \$150
\$50,850.00 \$155	\$53,300.00 \$155	\$55,750.00 \$155	\$57,850.00 \$155	\$60,300.00 \$155	\$62,750.00 \$155
\$53,300.00 \$160	\$55,400.00 \$160	\$57,500.00 \$160	\$59,300.00 \$160	\$61,400.00 \$160	\$63,500.00 \$160
\$55,750.00 \$165	\$57,500.00 \$165	\$59,250.00 \$165	\$60,750.00 \$165	\$62,500.00 \$165	\$64,250.00 \$165
\$58,200.00 \$170	\$59,600.00 \$170	\$61,000.00 \$170	\$62,200.00 \$170	\$63,600.00 \$170	\$65,000.00 \$170
\$60,650.00 \$175	\$61,700.00 \$175	\$62,750.00 \$175	\$63,650.00 \$175	\$64,700.00 \$175	\$66,500.00 \$175
\$63,100.00 \$180	\$63,800.00 \$180	\$64,500.00 \$180	\$65,100.00 \$180	\$65,800.00 \$180	\$67,250.00 \$180
\$68,000.00+ \$185	\$68,000.00+ \$185	\$68,000.00+ \$185	\$68,000.00+ \$185	\$68,000.00+ \$185	\$68,000.00+ \$185

Based on 2021 HHS Poverty Guidelines (150% of Poverty) for Low End

80% Median Household Income for Arapahoe County (2021 Census Bureau) on High End