

Mental Health Center of Greater Manchester

Fee Discount Table

Effective March 26, 2021

% Indicated Equals Percentage Discount Off Of Full Fee

Income & Liquid Assets		Size of Family Unit									
From	To	1	2	3	4	5	6	7	8		
\$0	\$12,000	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$12,001	\$13,000	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$13,001	\$14,000	95%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$14,001	\$15,000	90%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$15,001	\$16,000	90%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$16,001	\$17,000	80%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$17,001	\$18,000	80%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$18,001	\$19,000	70%	95%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$19,001	\$20,000	70%	90%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$20,001	\$21,000	60%	80%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$21,001	\$22,000	60%	80%	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$22,001	\$23,000	50%	70%	95%	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$23,001	\$24,000	50%	70%	90%	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$24,001	\$25,000	40%	60%	80%	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$25,001	\$26,000	40%	60%	80%	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$26,001	\$27,000	40%	50%	70%	\$5	\$5	\$5	\$5	\$5	\$5	\$5
\$27,001	\$28,000	30%	50%	70%	95%	\$5	\$5	\$5	\$5	\$5	\$5
\$28,001	\$29,000	30%	40%	60%	90%	\$5	\$5	\$5	\$5	\$5	\$5
\$29,001	\$30,000	30%	40%	60%	80%	\$5	\$5	\$5	\$5	\$5	\$5
\$30,001	\$31,000	20%	30%	50%	70%	\$5	\$5	\$5	\$5	\$5	\$5
\$31,001	\$32,000	20%	30%	50%	60%	\$5	\$5	\$5	\$5	\$5	\$5
\$32,001	\$33,000	20%	30%	40%	60%	95%	\$5	\$5	\$5	\$5	\$5
\$33,001	\$34,000	10%	20%	40%	60%	90%	\$5	\$5	\$5	\$5	\$5
\$34,001	\$35,000	10%	20%	30%	50%	80%	\$5	\$5	\$5	\$5	\$5
\$35,001	\$36,000	10%	20%	30%	50%	80%	\$5	\$5	\$5	\$5	\$5
\$36,001	\$37,000	0%	10%	30%	50%	70%	95%	\$5	\$5	\$5	\$5
\$37,001	\$38,000	0%	10%	20%	40%	70%	90%	\$5	\$5	\$5	\$5
\$38,001	\$39,000	0%	10%	20%	40%	60%	80%	\$5	\$5	\$5	\$5
\$39,001	\$40,000	0%	10%	20%	40%	60%	70%	\$5	\$5	\$5	\$5
\$40,001	\$41,000	0%	0%	10%	30%	50%	60%	\$5	\$5	\$5	\$5
\$41,001	\$42,000	0%	0%	10%	30%	50%	50%	95%	\$5	\$5	\$5
\$42,001	\$43,000	0%	0%	10%	30%	40%	40%	90%	\$5	\$5	\$5
\$43,001	\$44,000	0%	0%	0%	20%	40%	40%	80%	\$5	\$5	\$5
\$44,001	\$45,000	0%	0%	0%	20%	30%	40%	70%	\$5	\$5	\$5
\$45,001	\$46,000	0%	0%	0%	10%	30%	30%	60%	95%	\$5	\$5
\$46,001	\$47,000	0%	0%	0%	10%	30%	30%	60%	90%	\$5	\$5
\$47,001	\$48,000	0%	0%	0%	0%	20%	30%	50%	80%	\$5	\$5
\$48,001	\$49,000	0%	0%	0%	0%	20%	20%	50%	70%	\$5	\$5
\$49,001	\$50,000	0%	0%	0%	0%	10%	20%	40%	60%	\$5	\$5
\$50,001	\$51,000	0%	0%	0%	0%	10%	20%	40%	50%	\$5	\$5
\$51,001	\$52,000	0%	0%	0%	0%	0%	10%	30%	50%	\$5	\$5
\$52,001	\$53,000	0%	0%	0%	0%	0%	10%	30%	40%	\$5	\$5
\$53,001	\$54,000	0%	0%	0%	0%	0%	10%	20%	40%	\$5	\$5
\$54,001	\$55,000	0%	0%	0%	0%	0%	0%	20%	30%	\$5	\$5
\$55,001	\$56,000	0%	0%	0%	0%	0%	0%	10%	30%	\$5	\$5
\$56,001	\$57,000	0%	0%	0%	0%	0%	0%	10%	20%	\$5	\$5
\$57,001	\$58,000	0%	0%	0%	0%	0%	0%	0%	20%	\$5	\$5
\$58,001	\$59,000	0%	0%	0%	0%	0%	0%	0%	10%	\$5	\$5
\$59,001	\$60,000	0%	0%	0%	0%	0%	0%	0%	10%	\$5	\$5
\$60,001	\$61,000	0%	0%	0%	0%	0%	0%	0%	0%	\$5	\$5

MINIMUM VERIFICATION REQUIREMENTS:

To Verify Patient's Family Income and Liquid Assets, the following items must be reviewed:

1. Patient and patient's spouse's latest pay stubs from their current job. If unemployed, use stub from the latest unemployment check or verify with the Dept. of Employment Security.
2. Latest bank statements, showing patient's deposits from employment, Social Security Admin., pension, etc. Should include all types of bank funds: checking, savings, CDs, etc.

