Family Solutions Counseling Sliding Fee Scale Application

Each member of your household requesting services will need to complete a separate application, though documentation will only be needed for the household; and individuals as applicable

Client Information:

- Full Name:
- Date of Birth:
- Address:
- Phone Number:
- Email Address:

Household Information:

- Number of people living in household:
- Total annual household income for the past two months:

Fee Scale Eligibility:

- Are you able to pay a copay of \$50 or less per session? (Yes/No)
- Do you qualify for any grant-funded programs? (Yes/No)
- Do you understand that you will be required to REQUEST to re-apply for the sliding scale fee every 3 months or every 12 sessions? (Yes/No)
- Do you understand you will be required to update us on any changes to your insurance plan or ability to pay or may be required to back pay any "write off" amount for services if a discrepancy is discovered? (Yes/No)

Sliding Fee Scale Calculation:

- Please provide the following information to determine your session rate:
 - Number of people living in household:
 - Total annual household income for the past two months:

Agreement:

 By signing below, I acknowledge that the information provided is accurate to the best of my knowledge and that I understand the terms and conditions of the Family Solutions Counseling sliding fee scale. I agree to re-apply for qualification every three months and to provide proof of income at that time. I understand that if I discontinue treatment for a period of more than 60 days, I will need to re-apply for the sliding fee scale.

Client Signature:

Date:

Thank you for your interest in the Family Solutions Counseling sliding fee scale. Please return this completed application form to our office to determine your session rate. If you have any questions, please do not hesitate to contact us at 435-799-5035 or tessaz@familysolutionsutah.org.

Once a full application has been received by our team, and all required documents provided, you will be notified within 5 business day of the determination. For re-application, please provide at least 5 business days advance notice to receive your determination ahead of any future sessions dates.