Central Kansas Mental Health Reduced Fee Schedule Effective 09-01-2026

Annual Household Income Amounts for Reduced Rate Discount

Federal Poverty Level*		At or Below 100%	Above 150%	165%	180%	195%	210%	225%	240%	255%	270%	285%	300%	315%	330%	345%	360%	375%	390%	405%	420%
		CHARGE BASED ON STANDARD HOURLY FEES**																			
Family Size	Pay	10%	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%	100%
1	Start	0*	15,961	23,941	26,335	28,729	31,123	33,517	35,911	38,305	40,699	43,093	45,487	47,881	50,275	52,669	55,063	57,457	59,851	62,245	64,639
	end	15,960	23,940	26,334	28,728	31,122	33,516	35,910	38,304	40,698	43,092	45,486	47,880	50,274	52,668	55,062	57,456	59,850	62,244	64,638	and above
2	Start	0*	21,641	32,461	35,707	38,953	42,199	45,445	48,691	51,937	55,183	58,429	61,675	64,921	68,167	71,413	74,659	77,905	81,151	84,397	87,643
	end	21,640	32,460	35,706	38,952	42,198	45,444	48,690	51,936	55,182	58,428	61,674	64,920	68,166	71,412	74,658	77,904	81,150	84,396	87,642	and above
3	Start	0*	27,321	40,981	45,079	49,177	53,275	57,373	61,471	65,569	69,667	73,765	77,863	81,961	86,059	90,157	94,255	98,353	102,451	106,549	110,647
	end	27,320	40,980	45,078	49,176	53,274	57,372	61,470	65,568	69,666	73,764	77,862	81,960	86,058	90,156	94,254	98,352	102,450	106,548	110,646	and above
4	Start	0*	33,001	49,501	54,451	59,401	64,351	69,301	74,251	79,201	84,151	89,101	94,051	99,001	103,951	108,901	113,851	118,801	123,751	128,701	133,651
	end	33,000	49,500	54,450	59,400	64,350	69,300	74,250	79,200	84,150	89,100	94,050	99,000	103,950	108,900	113,850	118,800	123,750	128,700	133,650	and above
5	Start	0*	38,681	58,021	63,823	69,625	75,427	81,229	87,031	92,833	98,635	104,437	110,239	116,041	121,843	127,645	133,447	139,249	145,051	150,853	156,655
	end	38,680	58,020	63,822	69,624	75,426	81,228	87,030	92,832	98,634	104,436	110,238	116,040	121,842	127,644	133,446	139,248	145,050	150,852	156,654	and above
6	Start	0*	44,361	66,541	73,195	79,849	86,503	93,157	99,811	106,465	113,119	119,773	126,427	133,081	139,735	146,389	153,043	159,697	166,351	173,005	179,659
	end	44,360	66,540	73,194	79,848	86,502	93,156	99,810	106,464	113,118	119,772	126,426	133,080	139,734	146,388	153,042	159,696	166,350	173,004	179,658	and above
7	Start	0*	50,041	75,061	82,567	90,073	97,579	105,085	112,591	120,097	127,603	135,109	142,615	150,121	157,627	165,133	172,639	180,145	187,651	195,157	202,663
	end	50,040	75,060	82,566	90,072	97,578	105,084	112,590	120,096	127,602	135,108	142,614	150,120	157,626	165,132	172,638	180,144	187,650	195,156	202,662	and above
8	Start	0*	55,721	83,581	91,939	100,297	108,655	117,013	125,371	133,729	142,087	150,445	158,803	167,161	175,519	183,877	192,235	200,593	208,951	217,309	225,667
	end	55,720	83,580	91,938	100,296	108,654	117,012	125,370	133,728	142,086	150,444	158,802	167,160	175,518	183,876	192,234	200,592	208,950	217,308	225,666	and above
9	Start	0*	61,401	92,101	101,311	110,521	119,731	128,941	138,151	147,361	156,571	165,781	174,991	184,201	193,411	202,621	211,831	221,041	230,251	239,461	248,671
	end	61,400	92,100	101,310	110,520	119,730	128,940	138,150	147,360	156,570	165,780	174,990	184,200	193,410	202,620	211,830	221,040	230,250	239,460	248,670	and above
10	Start	0*	67,081	100,621	110,683	120,745	130,807	140,869	150,931	160,993	171,055	181,117	191,179	201,241	211,303	221,365	231,427	241,489	251,551	261,613	271,675
	end	67,080	100,620	110,682	120,744	130,806	140,868	150,930	160,992	171,054	181,116	191,178	201,240	211,302	221,364	231,426	241,488	251,550	261,612	271,674	and above
For each additional person, add		$5,680	$ 8,520	$ 9,372	$ 10,224	$ 11,076	$ 11,928	$ 12,780	$ 13,632	$ 14,484	$ 15,336	$ 16,188	$ 17,040	$ 17,892	$ 18,744	$ 19,596	$ 20,448	$ 21,300	$ 22,152	$ 23,004	$ 23,856

*Based on 2026 Federal Poverty Guidelines (http://aspe.hhs.gov/poverty)

Waiver of fees is possible under individual circumstances
Group rates may be offered at discounted levels

Family size is defined as people living in the household

** Admission/Evaluation and Individual Therapy standard hourly fee is $230.00.

$ 230.00	$ 23.00	$ 23.00	$ 34.50	$ 46.00	$ 57.50	$ 69.00	$ 80.50	$ 92.00	$ 103.50	$ 115.00	$ 126.50	$ 138.00	$ 149.50	$ 161.00	$ 172.50	$ 184.00	$ 195.50	$ 207.00	$ 218.50	$ 230.00
**Medication services may vary																				
$ 250.00	$ 25.00	$ 25.00	$ 37.50	$ 50.00	$ 62.50	$ 75.00	$ 87.50	$ 100.00	$ 112.50	$ 125.00	$ 137.50	$ 150.00	$ 162.50	$ 175.00	$ 187.50	$ 200.00	$ 212.50	$ 225.00	$ 237.50	$ 250.00
$ 200.00	$ 20.00	$ 20.00	$ 30.00	$ 40.00	$ 50.00	$ 60.00	$ 70.00	$ 80.00	$ 90.00	$ 100.00	$ 110.00	$ 120.00	$ 130.00	$ 140.00	$ 150.00	$ 160.00	$ 170.00	$ 180.00	$ 190.00	$ 200.00
$ 150.00	$ 15.00	$ 15.00	$ 22.50	$ 30.00	$ 37.50	$ 45.00	$ 52.50	$ 60.00	$ 67.50	$ 75.00	$ 82.50	$ 90.00	$ 97.50	$ 105.00	$ 112.50	$ 120.00	$ 127.50	$ 135.00	$ 142.50	$ 150.00
**Outpatient Group Therapy																				
$100.00	$ 10.00	$ 10.00	$ 15.00	$ 20.00	$ 25.00	$ 30.00	$ 35.00	$ 40.00	$ 45.00	$ 50.00	$ 55.00	$ 60.00	$ 65.00	$ 70.00	$ 75.00	$ 80.00	$ 85.00	$ 90.00	$ 95.00	$ 100.00

**Home and Community Based Services may vary

Max Rate per hour																				
	10%	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%	100%
**Community Psychiatric Support and Treatment (CPST) Max rate listed per hour - this can be provided in 15 minute increments																				
$110.00	$ 11.00	$ 11.00	$ 16.50	$ 22.00	$ 27.50	$ 33.00	$ 38.50	$ 44.00	$ 49.50	$ 55.00	$ 60.50	$ 66.00	$ 71.50	$ 77.00	$ 82.50	$ 88.00	$ 93.50	$ 99.00	$ 104.50	$ 110.00
**Targeted Case Management (TCM) Max rate listed per hour - this can be provided in 15 minute increments																				
$43.32	$ 4.33	$ 4.33	$ 6.50	$ 8.66	$ 10.83	$ 13.00	$ 15.16	$ 17.33	$ 19.49	$ 21.66	$ 23.83	$ 25.99	$ 28.16	$ 30.32	$ 32.49	$ 34.66	$ 36.82	$ 38.99	$ 41.15	$ 43.32
**Peer Support Group - Max rate listed per hour - this can be provided in 15 minute increments																				
$32.04	$ 3.20	$ 3.20	$ 4.81	$ 6.41	$ 8.01	$ 9.61	$ 11.21	$ 12.82	$ 14.42	$ 16.02	$ 17.62	$ 19.22	$ 20.83	$ 22.43	$ 24.03	$ 25.63	$ 27.23	$ 28.84	$ 30.44	$ 32.04
**Peer Support Ind - rate listed per hour - this can be provided in 15 minute increments																				
$64.08	$ 6.41	$ 6.41	$ 9.61	$ 12.82	$ 16.02	$ 19.22	$ 22.43	$ 25.63	$ 28.84	$ 32.04	$ 35.24	$ 38.45	$ 41.65	$ 44.86	$ 48.06	$ 51.26	$ 54.47	$ 57.67	$ 60.88	$ 64.08
** Adult Psychosocial Group (PSG) Max rate listed per hour - this can be provided in 15 minute increments																				
$18.20	$ 1.82	$ 1.82	$ 2.73	$ 3.64	$ 4.55	$ 5.46	$ 6.37	$ 7.28	$ 8.19	$ 9.10	$ 10.01	$ 10.92	$ 11.83	$ 12.74	$ 13.65	$ 14.56	$ 15.47	$ 16.38	$ 17.29	$ 18.20
**Child Psychosocial Group (PSG) Max rate listed per hour - this can be provided in 15 minute increments																				
$36.40	$ 3.64	$ 3.64	$ 5.46	$ 7.28	$ 9.10	$ 10.92	$ 12.74	$ 14.56	$ 16.38	$ 18.20	$ 20.02	$ 21.84	$ 23.66	$ 25.48	$ 27.30	$ 29.12	$ 30.94	$ 32.76	$ 34.58	$ 36.40
**Crisis Psychotherapy/Crisis Intervention (QMHP)																				
$217.50	$ 21.75	$ 21.75	$ 32.63	$ 43.50	$ 54.38	$ 65.25	$ 76.13	$ 87.00	$ 97.88	$ 108.75	$ 119.63	$ 130.50	$ 141.38	$ 152.25	$ 163.13	$ 174.00	$ 184.88	$ 195.75	$ 206.63	$ 217.50