



# MCHD

Dental Services

Sliding Fee Schedule  
Based on Gross Annual Income

# in Family	% OF FEE THAT PATIENT IS RESPONSIBLE FOR
	60%-Child (under 18) 80%-Adult
1	\$21,775
2	\$29,471
3	\$37,167
4	\$44,863
5	\$52,559
6	\$60,255
7	\$67,951
8	\$75,647
9	\$83,343
10	\$91,039