

Clinical Psychology Center Fee Schedule

Family Income		Number of Family Members							
Gross (Before Taxes)	Net (After Taxes)	1	2	3	4	5	6	7	8+
≤ 5,000	≤ 3,750	5	5	5	5	5	5	5	5
≤ 10,000	≤ 7,500	5	5	5	5	5	5	5	5
≤ 15,000	≤ 11,250	5	5	5	5	5	5	5	5
≤ 20,000	≤ 15,000	10	10	5	5	5	5	5	5
≤ 25,000	≤ 18,750	10	10	5	5	5	5	5	5
≤ 30,000	≤ 22,500	10	10	10	10	5	5	5	5
≤ 35,000	≤ 26,250	15	15	10	10	5	5	5	5
≤ 40,000	≤ 30,000	20	15	10	10	10	10	5	5
≤ 45,000	≤ 33,750	20	20	15	15	10	10	5	5
≤ 50,000	≤ 37,500	25	20	15	15	10	10	10	10
≤ 55,000	≤ 41,250	25	25	20	20	15	15	10	10
≤ 60,000	≤ 45,000	30	25	20	20	15	15	10	10
≤ 65,000	≤ 48,750	30	30	25	25	20	20	15	15
≤ 70,000	≤ 52,500	35	30	25	25	20	20	15	15
≤ 75,000	≤ 56,250	40	35	30	30	25	25	20	20
≤ 80,000	≤ 60,000	40	40	35	35	30	30	25	20

Amounts listed are fees per 50 minute session.