

Ramey-Estep Homes, Inc.
Sliding Fee Discount Program Application
Revised 09.15.2026

1. Sliding Fee Scale

Plan	A	B	C	D	F *
Poverty Level	100%	101% - 150%	151% - 175%	175% - 200%	> 200%
Discount **	100%	75%	50%	25%	0%
Family Size	Annual Income	Annual Income	Annual Income	Annual Income	Annual Income
1	Under \$ 15,960	\$ 15,961 to \$ 23,940	\$ 23,941 to \$ 27,930	\$ 27,931 to \$ 31,920	Greater than \$ 31,921
2	Under \$ 21,640	\$ 21,641 to \$ 32,460	\$ 32,461 to \$ 37,870	\$ 37,871 to \$ 43,280	Greater than \$ 43,281
3	Under \$ 27,320	\$ 27,321 to \$ 40,980	\$ 40,981 to \$ 47,810	\$ 47,811 to \$ 54,640	Greater than \$ 54,641
4	Under \$ 33,000	\$ 33,001 to \$ 49,500	\$ 49,501 to \$ 57,750	\$ 57,751 to \$ 66,000	Greater than \$ 66,001
5	Under \$ 38,680	\$ 38,681 to \$ 58,020	\$ 58,021 to \$ 67,690	\$ 67,691 to \$ 77,360	Greater than \$ 77,361
6	Under \$ 44,360	\$ 44,361 to \$ 66,540	\$ 66,541 to \$ 77,630	\$ 77,631 to \$ 88,720	Greater than \$ 88,721
7	Under \$ 50,040	\$ 50,041 to \$ 75,060	\$ 75,061 to \$ 87,570	\$ 87,571 to \$ 100,080	Greater than \$ 100,081
8	Under \$ 55,720	\$ 55,721 to \$ 83,580	\$ 83,581 to \$ 97,510	\$ 97,511 to \$ 111,440	Greater than \$ 111,441

* Full Fee Plan. Fees are based on Ramey-Estep's usual and customary reimbursement.

** Discount is a percentage of Full Fee.

2. Client/Guardian Name

3. Family Income *

*Income includes gross wages; salaries; tips; income from business and self-employment; unemployment compensation; workers' compensation; Social Security; Supplemental Security Income; public assistance; veterans' payments; survivor benefits; pension or retirement income; interest; dividends; royalties; income from rental properties, estates, and trusts; alimony; child support; assistance from outside the household; and other miscellaneous sources.

4. Family Size

5. Income Verification Source (check one):

☐	W2 / Pay Stub
☐	Letter from Employer
☐	Other (describe): _____

6. Client Certification

I certify that the family size and income information shown above is correct.

Client/Guardian Signature: _____

Date: _____

7. Submitting Application. Please submit your signed application using one of the options below. You should receive a response from us within 7 business days letting you know the decision of your application.

- 1) **Fax:** 606-595-6523
- 2) **Email:** SlidingFee@rameyestep.com
- 3) **Mail:** Finance Director, 835 Central Ave, Ashland, KY, 41101
- 4) **In-Person:** give application to Ramey-Estep/Regroup staff member.

Business Office Use Only

Client ID:

Application Type:

☐	New
☐	Renewal

Income Verified:

☐ Yes

☐ No

Discount Approved:

☐ Yes

☐ No (explain)

Approved Discount %:

Discount Start Date:

End Date:

Staff Signature:

Date: