

**STATE-FUNDED IN-HOME CARE PROGRAMS**  
**Cost Share Schedule\***  
**02/01/2025**

<b>Annual Income: Individual</b>	<b>Annual Income: Individual &amp; Spouse</b>	<b><i>FAIR In-Home</i> Cost Share per Hour</b>	<b><i>FAIR Congregate</i> Cost Share per Hour</b>	<b><i>Lighthouse</i> Cost Share per Hour</b>
Up to <b>\$31,300*</b>	Up to <b>\$42,300*</b>	<b>\$1.50</b>	<b>\$1.50</b>	<b>\$1.50</b>
<b>\$31,301 to \$36,300</b>	<b>\$42,301 to \$49,300</b>	<b>\$1.75</b>	<b>\$1.50</b>	<b>\$2.00</b>
<b>\$36,301 to \$41,300</b>	<b>\$49,301 to \$56,300</b>	<b>\$3.50</b>	<b>\$2.00</b>	<b>\$4.00</b>
<b>\$41,301 to \$46,300</b>	<b>\$56,301 to \$63,300</b>	<b>\$5.25</b>	<b>\$3.00</b>	<b>\$6.00</b>
<b>\$46,301 to \$51,300</b>	<b>\$63,301 to \$70,300</b>	<b>\$7.00</b>	<b>\$4.00</b>	<b>\$8.00</b>
<b>\$51,301 to \$56,300</b>	<b>\$70,301 to \$77,300</b>	<b>\$8.75</b>	<b>\$5.00</b>	<b>\$10.00</b>
<b>\$56,301 to \$61,300</b>	<b>\$77,301 to \$84,300</b>	<b>\$10.50</b>	<b>\$6.00</b>	<b>\$12.00</b>
<b>\$61,301 to \$66,300</b>	<b>\$84,301 to \$91,300</b>	<b>\$12.25</b>	<b>\$7.00</b>	<b>\$14.00</b>
<b>\$66,301 and up</b>	<b>\$91,301 and up</b>	<b>\$14.00</b>	<b>\$8.00</b>	<b>\$16.00</b>

- State-Funded Programs – **Fees paid should be carried over and expensed for additional services in the first six months of the next state fiscal year.**
- County policy on non-payment of cost share may result in service termination.
- \*Scale based on 200% of current U.S. Federal Poverty Guidelines.
- Income is self-declared.
- **Allowance must be made for medical expenses by reducing income in the amount of the annual expenses incurred.** (Example: Individual income \$35,000 minus annual medical expenses \$8,000 = income would be reduced to \$27,000, and fee would be \$1.50 per hour.)
- The Agency is still responsible for averaging \$1.00/hour for each hour of service provided.