



CARE

**Community Action
Respecting Elders**

Even though our volunteers donate their time generously, we still have fixed costs to continue our program like personnel, office rent, supplies, utilities, insurance and volunteer driver reimbursement. This sheet will help you determine a suggested amount to contribute for services.

Cost Sharing Guidelines						
Your Annual Income 1 Person household is between -		Your Annual Income 2 person household is between -		Suggested % of Our Cost To Pay		
\$0	and	\$12,880	\$0	and	\$17,420	0%
\$12,881	and	\$19,320	\$17,421	and	\$26,130	10%
\$19,321	and	\$25,760	\$26,131	and	\$34,840	25%
\$25,761	and	\$32,200	\$34,841	and	\$43,550	50%
\$32,201	and over		\$43,551	and over		100%

2021 Federal Poverty Guidelines

How to Determine Your Cost Share -

- 1) On the Guidelines chart above, determine your % based on your household size and income.
- 2) Next look to the right to the last column to find your suggested percentage of our cost to pay.
- 3) Refer to the chart below and find the service you are receiving with our cost next to it.
- 4) Then look at your percentage column to find the suggested amount for you to pay.

Cost per unit (including personnel, office supplies, utilities, telephone, insurance)		Suggested Cost Sharing			
		10%	25%	50%	100%
Assisted Transportation	\$39.12 2 way ride	\$3.91	\$9.78	\$19.56	\$39.12
Homemaker/Delivery	\$15.35 each hour	\$1.54	\$3.84	\$7.68	\$15.35
Respite Care	\$16.59 each hour	\$1.66	\$4.15	\$8.30	\$16.59
Chore/Home Modifications	\$24.25 each hour	\$2.43	\$6.06	\$12.13	\$24.25
Education Sessions	cost of programs vary				

**Please note that NO ONE will be denied services
because he or she is unable or unwilling to make a donation.**

The services, facilities, and benefits of this program are for the use of older adults meeting program eligibility regardless of race, color, sex, sexual orientation, religion, disability, or national origin. Any individual who feels he/she has been denied the opportunity to participate in this program and wishes to file a complaint or discrimination should write to:
Executive Secretary, MN Board on Aging, 540 Cedar Street, St Paul MN 55101.