

**Appendix B**

NC Division of Aging

**Recommended Consumer Contribution Schedule**

Based on the 2026 US Poverty Guidelines

Service Recipient's Name: \_\_\_\_\_

Service #1 \_\_\_\_\_ Rate \$ \_\_\_\_\_ Service #2 \_\_\_\_\_ Rate \$ \_\_\_\_\_

Service #3 \_\_\_\_\_ Rate \$ \_\_\_\_\_

% of Poverty*	Monthly Income of:		Suggested Percentage of the Cost of Service	Recommended Contribution Amount per Unit of Service		
	Individual	Couple		Service #1	Service #2	Service #3
At poverty 100%	\$1,330	\$1,803	0%			
Above poverty 100% +	\$1,331 – \$1,662	\$1,804 – \$2,253	10%			
125%	\$1,663 – \$1,994	\$2,254 – \$2,704	20%			
150%	\$1,995 – \$2,327	\$2,705 – \$3,155	30%			
175%	\$2,328 – \$2,659	\$3,156 – \$3,606	40%			
200%	\$2,660 – \$2,992	\$3,607 – \$4,057	50%			
225%	\$2,993 – \$3,324	\$4,058 – \$4,507	60%			
250%	\$3,325 – \$3,657	\$4,508 – \$4,958	70%			
275%	\$3,658 – \$3,989	\$4,959 – \$5,409	80%			
300%	\$3,990 – \$4,654	\$5,410 – \$6,311	90%			
350%	\$4,655 – above	\$6,312 – above	100%			

\* Percentage of Poverty represents monthly incomes at poverty level and above (Note: Reference 10A NCAC 05I .0101).

The Recommended Consumer Contribution Schedule may only be shared with service recipients who are above poverty and receive a Type I service(s).

Voluntary contributions made toward the cost of services received are not tax deductible.