

How do we determine household size?

All members of the household who are related and/or pooling resources.

- Members of a household who are unrelated and do not share income are considered separate households. (ex: college roommates paying separate rent/bills)

Slide Scale Fees per Visit

Medical

- Slide A: \$20.00
- Slide B: \$40.00
- Slide C: \$50.00
- Slide D: \$60.00
- Slide E: Full fee (dependent on charges)

*There will be no separate fee for nurse visits for blood pressure checks, labs, weight checks, or suture removals..

Dental

- Slide A: \$50.00
- Slide B: \$75.00
- Slide C: \$85.00
- Slide D: \$95.00
- Slide E: Full fee (dependent on charges.)

* Patients who qualify for the Sliding Fee Scale receive a 40% discount on crowns, bridges, root canals, and dentures.

Additional Information

- Those who qualify for the Sliding Fee Scale are expected to pay at the time of service. Refusal to pay the appropriate fee may result in the appointment being rescheduled. (some exceptions apply)
- Patients with insurance coverage are also eligible to apply for the Sliding Fee Scale. After the insurance has processed the claim and the patient has a remaining balance, then the balance may be adjusted based on the Sliding Fee Scale.
- Patients who don't bring proof of income will be allowed to self-declare for the first visit (and the first visit after expiration of the prior eligibility). The declaration will expire following the first visit, and the patient is required to bring in proof of income on the day of the next visit or he/she will be charged the full standard fee.

First Care Clinic, Inc.

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*“When You Need Health Care,
Call First Care!”*

Sliding Fee Scale Program



About Our Program

First Care Clinic offers a Sliding Fee Scale to all income eligible uninsured or under-insured patients. This program allows qualifying patients to receive medical and dental care at a lower cost. Eligibility for the Sliding Fee Scale will be established by determining the household size and the annual household income. This information must be updated annually. FCC requires valid proof of income, household size, and completion of a Household Assessment when applying for the slide. If a patient chooses not to provide the required information, then he/she will not receive the discounted rate offered through the Sliding Fee Scale.

Valid Proof of Income

** Must provide valid proof of income for each household member with an income.*

- Two most recent paystubs.
- Most recent annual federal income tax return.
- Documentation of government assistance:
 - * Unemployment compensation
 - * SRS cash assistance
 - * Social Security or SSI
- Disability determination with benefit amount.
- Documentation of child support/alimony.
- Letter from employer on employer letter-head, signed and dated by supervisor.
- Financial award letter showing grants, scholarships, fellowships, or assistantships. (loans are not considered as income)

*W-2s are NOT accepted as valid proof of income.

* If the patient declares no income, then the patient must provide a collaborative letter from the individual assisting the patient financially. (signed and dated with monthly monetary amount provided).

What is Income?

- Wages and salaries before any deductions. (gross income)
- Net receipts from non-farm self-employment.
- Net receipts from farm self-employment.
- Regular payments from Social Security.
- Railroad Retirement.
- Unemployment compensation, public assistance.
- Strike benefits from unions, worker's compensation, veterans' payments.
- Training stipends.
- Alimony, child support, military family allotments.
- Private pensions, government employee pensions, regular insurance or annuity payments.
- College or university scholarships, grants, fellowships, assistantships. (not student loans)
- Dividends, net rental income, net royalties, income received from estates or trusts
- Gambling or lottery winnings.