INTERIM
SOUTHERN REGION COMMUNITY HEALTH CENTER
SLIDING FEE SCALE

The Community Health Center Grant federal regulation require that SRCHC have a schedule of fees designed to cover the reasonable cost of operations and a corresponding schedule of discounts (sliding fee scale) adjusted on the patient’s family size and income. The regulations state that families or individuals with an annual income at or below the most recent Community Services Administration poverty guidelines shall receive a full discount (no charges are billed to the patient). However, persons who fall between these two extremes shall receive a discount. Community Services Administration poverty income guidelines are adjusted each year around April or May to account for inflation. The Sliding Fee Schedule are published in the Federal Register.

II. ELIGIBILITY

A. Residence Requirements:

1. A recipient must be either an U.S. Citizen and a resident of Guam, or an alien legally admitted for permanent residence to the U.S., Guam, or other territories.

2. Residents of Guam are individuals living on Guam intending to remain permanently or indefinitely. Temporary absence, with intent to return when the purpose of the absence has been accomplished does not interrupt residency.

B. Patients Charges:

1. A revised sliding fee scale based on family income and size will be established upon receipt of the CSA Income Poverty Guidelines. It will become effective on the first day of the month following the Board of Director’s approval of the proposed scale.

II. WHO MAY APPLY?

A. Every applicant is required to complete the information sheet and application form as required by the Southern Region Community Health Center.

B. An individual who is 18 years of age and is not a dependent for tax purposes from another household may apply. An 18 year old, however, who is still attending high school or college and living at home shall be included under his/her parents’ application. Those living with relatives will be handled on a case by case basis.
C. There are situations when a minor will move out of his/her parent's home for various reasons. The minor may apply as an emancipated adult provided that an affidavit statement be submitted by the minor indication that he/she is living a life as an adult and "self-sufficient".

iii. COMMON-LAW STATUS:

Any couple who has lived together for a period of one year or more may apply together as a married couple if they execute an affidavit attesting to the fact that they live together. Any children born of such relationship shall be eligible in the same way according to the same criteria.

IV. ELIGIBILITY PERIOD:

A. Applicant shall renew his/her application every six- (6) months.
B. Any change in financial status (i.e., an increase or decrease in income) must be reported.

V. VERIFICATION:

A. Birth Certificate and Social Security Card.

1. A Birth Certificate and Social Security Card are required for each member of the household applying for assistance.

2. Birth Certificate may be substituted by a passport, or alien registration receipt card (green card), or Government Identification Card if the Birth Certificate is not available.

   In the absence of a Social Security Card, a receipt of the application should be sufficient; however, the member shall provide the program with a photocopy of the Social Security Card after its receipt.

3. Drivers License

B. Alien Registration Receipt:

The Alien Registration Receipt Card will be required for all resident alien applicants.
C. Certificate of Naturalization:

The Certificate of Naturalization shall be required to determine proof of U.S. Citizenship for all naturalized U.S. Citizen applicants.

D. Affidavit Emancipated Adult:

A minor who no longer lives with his/her parents or guardians and is living an independent life may apply on his/her own behalf to the program, provided that he/she files an affidavit attesting to living as an adult and claiming to be self-sufficient.

E. Income:

Any one of the following items is sufficient for proof of income:

1. Last two check stubs shall be provided as part of income verification.

2. An employment verification from the employer must be obtained showing the average hours worked, hourly rate, and number of average over-time hours the employee has earned for the last three- (3) months.

3. Self-employed individuals, other than farming and fishing with income over $100.00 a month must provide the latest gross receipt tax and the latest 1040 forms. If no 1040 forms can be provided, an affidavit indicating expenses for the same month shall be furnished. For fishermen and farmers, supporting documents such as receipts or invoices will be needed to verify incomes.

F. Letter of denial from Medicaid (MAP) or the Medically Indigent Program (MIP).

G. If unemployed: Letter of Termination from previous employer or Affidavit stating unemployment

VI. SERVICES COVERED:

PRIMARY HEALTH CARE SERVICES

- Prenatal and Postpartum Care
- Women's Health
- Family Planning
- Adolescent Health
- Well Child
• Child Health
• Immunization
• Minor Surgery
• Directly observed TB therapy

SECONDARY PREVENTION SERVICES

• Early Periodic Screening and Diagnostic testing for children
• Cancer Screening
• Communicable Disease Control
• Sexually Transmitted Disease Control
• Chronic Disease Control

PROFESSIONAL SERVICES

• LAB SERVICES *(Except for any test referred out patients are responsible for payment)*
• Pharmaceutical Services
• X-Ray Services
• Women, Infants, and Children
• Vision Screening

ENABLING SERVICES

• CASE MANAGEMENT (Medical Social Services)
• Eligibility Assistance (Food Stamps/Welfare)
• Community Outreach Services
• Health Education Services

REFERAL SERVICES:

Services not covered by SRCHC are referred out and applicants are responsible for payment.

VII. ISSUANCE OF SRCHC CARD:

A. An identification card will be issued to all eligible family members.

B. Each participant will be assigned a unique number.

C. Each card will indicate the period of coverage and percentage of discount. The effective date covering services rendered will be the date of submission of the application along with the required documents, which are necessary to determine approval of the application.
D. Failure to submit the required documents within 30 days after submission of the application will result in the rejection of the application. The patients will then be fully responsible for any charges incurred.

Concurred and Approved by:

[Signature]

DENNIS G. RODRIGUEZ, Director

Date: APR 3, 1998