

**MCHC HEALTH CENTERS****Proof of Income**

To be eligible for MCHC's Sliding Fee Discount, patients must provide one of the following proofs of income within 30 days of application:

- W-2 form
- Last year's income tax return
- Most recent pay check stub
- Unemployment check stub
- Notification of Benefit for disability income
- Social Security payment letter or bank statement showing proof of direct deposit of Social Security income
- If self-employed, either prior year's Schedule C income statement or quarterly profit and loss statement
- If full-time student, copy of current school schedule
- Other award letter documenting proof of income
- Self-declaration of income is allowed once per year
- Receipt that Medi-Cal application has been applied for and/or is in process

If you are unable to provide MCHC with documentation of income, you will not be eligible for MCHC's Sliding Fee Discount (SFD) program.

After 30-days, an incomplete SFDP Application (including proof of income) is defaulted to non-eligible status with the patient's charges adjusted to full-pay. Patients are not eligible to reapply for the SFD for six-months.

Eligibility for SFD is re-evaluated every 12 months.

HILLSIDE HEALTH CENTER 333 Laws Ave., Ukiah (707) 468-1010 hillsidehealthcenter.org	DORA STREET HEALTH CENTER 1165 S. Dora St., Ste. A-1 & B-1, Ukiah (707) 468-1015 dorastreethealthcenter.org	LAKEVIEW HEALTH CENTER 5335 Lakeshore Blvd., Lakeport (707) 263-7725 lakeviewhealthcenter.org	LITTLE LAKE HEALTH CENTER 45 Hazel St., Willits (707) 456-9600 littl lakehealthcenter.org
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