



## LOCATIONS

### UTICA

315-624-9470  
1001 Noyes Street  
Utica, NY

315-368-6593  
School-Based Health Center  
Donovan Middle School  
1701 Noyes Street  
Utica, NY

315-368-6777  
School-Based Health Center  
Kernan Elementary  
929 York Street  
Utica, NY

315-368-6730  
School-Based Health Center  
Martin Luther King Jr. Elementary  
211 Square Street  
Utica, NY

### ROME

315-624-9470 ext. 300  
205 W. Dominick Street  
Rome, NY

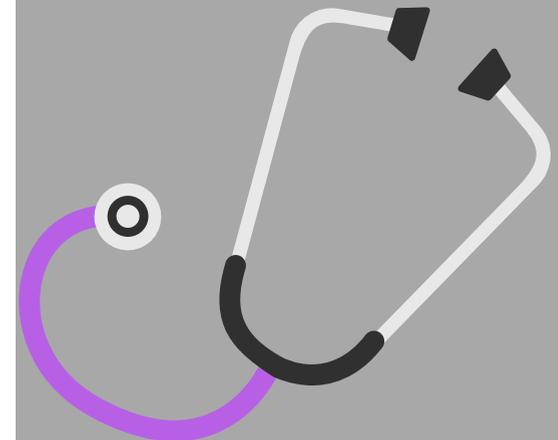


[www.upstatefamilyhealthcenter.org](http://www.upstatefamilyhealthcenter.org)



*Upstate Family  
Health Center, Inc.*

# SLIDING FEE DISCOUNT PROGRAM



## Important Reminders

- You must complete the application for the "Sliding Fee Discount Program" and provide proof of income.
- You will need to update your information every year or whenever you have a major change in income.
- Our staff will assist you in the process.



## What is the Sliding Fee Scale Program?

The Sliding Fee Discount Program allows patients who have no health insurance or are underinsured to receive healthcare services at a lower cost. To be part of the program you must provide proof of income for your household. Your income has to be less than the current federal poverty level. The poverty level will depend on the number of people who live in the home and the amount of money they make all together.

The discount for the "Sliding Fee Discount Program" varies but those who qualify and need the most help often can get significant discounts or services.

### What is required to apply?

There are several simple steps required to apply for the program...

- Complete a simple application
- Provide copies of income for all eligible people living in your household. (Examples include: Unemployment stubs, pay checks etc.

Household income means "gross income" (total before any deductions) earned from all eligible people living in the home.

### How does the program work?

When you make an appointment, we will ask if you have health insurance. If you do not have health coverage, you may apply for the "Sliding Fee Discount Program".

Please bring proof of income with you to your first appointment. Those with health insurance can also apply.

When you arrive, we will give you an application for the program. Please fill it out completely. If you are having trouble, let our front office staff know that you need help and someone will assist you.

### What happens next?

A person from our billing department will look at your information and place it into our system. Your discount will depend upon your income. You may receive a full or only a partial discount. You will receive a letter when the process is complete letting you know the amount of money you will have to pay each visit. You might also receive a letter saying we need more information.

### How often do I need to reapply?

You will need to apply for this program every year. Your discount will last 12 months. You will need to complete the same application for and provide proof of income

### Covered services:

- Family Medicine
- Routine preventative exams
- Well child care and immunizations
- Diabetic Care
- Physical Exams
- Gynecological care
- Podiatry

