



## SLIDING FEE SCALE INFORMATION

### **What is the Sliding Fee Scale?**

The Sliding Fee Scale is our way of offering medical, dental, and behavioral health services at a lower cost to families who meet certain requirements. The scale is divided into different categories based on household size and gross income. Patients pay for services according to their position on the federal poverty guidelines.

### **What type of income verification or documents do I**

All patients must submit a copy of their current year tax return (1040) or complete a form 4506-T (Request for Transcript of Tax Return-available in our offices). Patients without tax returns are required to have current pay stubs for the past 30 days. In addition, if you are receiving Unemployment, Workers Compensation, Public Assistance, Retirement, SSI/SSD, Child Support/Alimony, CFSA Stipend, Federal Foster Care Payments, Military, or Veteran benefits, you will be required to submit a statement from these agencies verifying the amount of benefits being received.

*Proof of income must be received within two weeks of signing the sliding fee scale application. **Should proof of income not be received within two weeks, you will be charged 100% of the service fee plus any additional ancillary charges.***

### **How long is my application current?**

The Sliding Fee Discount Program application covers balances for three months prior to application date and any balances incurred within 12 months after the approval date, unless the patient's financial situation changes significantly.

### **What services WILL be discounted if I am approved for the Sliding Fee Scale?**

1. Office Visits
2. Procedures
3. Most immunizations
4. Some pharmaceutical meds through 340b drug program
5. Behavioral health services
6. Some lab tests completed by ONE
7. Some lab testing done through Quest Diagnostics
8. Most dental procedures completed in our office

### **What services are NOT covered under the Sliding Fee Scale?**

1. Influenza vaccine
2. Depo vaccine
3. Nexplanon/Implanon
4. Dental scaling
5. Any services provided at non-ONE Health Ohio facilities including hospitals
6. Vivitrol injections
7. Certain adult immunizations