CORE HEALTH

CORE Health

Community Mental Health & Recovery 748 14th Avenue Longview, WA 98632

Phone: (360) 200-5419

CORE Health Sliding Fee Discount Program Application

Sliding Fee Discount Information

It is the policy of CORE Health is to provide essential services regardless of the patient's ability to pay. CORE offers discounts based on family size and annual income.

Please complete the following information and return to the front desk to determine if you or members of your family are eligible for a discount.

The discount will apply to all services received at this clinic, but not those services or equipment purchased from outside, including reference laboratory testing, drugs, and x-ray interpretation by a consulting radiologist, and other such services. You must complete this form every 12 months or if your financial situation changes.

NAME OF HEAD OF HOUSEHOLD		PLACE OF EMPLOYMENT		
STREET	CITY	STATE	ZIP	PHONE

Please list self, spouse, and dependants under the age of 18

Name	Date of Birth	Name	Date of Birth

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Source	Self	Spouse	Other	Total
Gross Wages, salaries, tips, etc.				
Income from business, self-employment, and dependents				
Unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, ceterns' payments, survivor benefits, pension or retirement				
Interests, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources				
Total Income				

NOTE: Copies of tax returns, pay stubs, or other information verifying income will be required before a discount is approved.

i certify that the family size and ii	ncome information snown above is correct.
Name (Print)	
Signature	Date
	Office Use Only
Patient Name	Approved Discount
Approved By	Date Approved

Verification Checklist		No
Identification/Address: Driver's license, utility bill, employment ID, or		
Income: Prior year tax return, three most recent pay stubs, or other		
Insurance: Insurance Cards		