

This institution is an Equal Opportunity Provider.

Appointment Date: _____ Time: _____

CONTACT US

To make an appointment for any of these programs, please contact our Outreach & Enrollment specialists at 970-323-6141

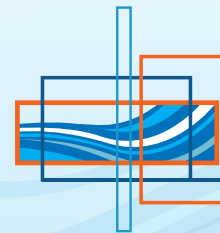
DOCUMENTS NEEDED FOR APPOINTMENTS: FOR ALL MEMBERS OF THE HOUSEHOLD *SEE PAGE 1 FOR MEDICAID & SLIDING FEE SCALE

- Picture ID: driver's license, passport, immigrant card or birth certificate
- Social Security numbers (if applicable)
- Insurance Cards (Medicaid, CHP+, Medicare/Supplements)
- Proof of gross income for the past month. EXAMPLE: Pay check stubs, unemployment compensation, workman's compensation, pension, social security, etc. Letter from employer is acceptable, and tax returns.
- If Self Employed: Profit & loss statement for the last three months.

SENIOR DENTAL

- Picture ID: driver's license, passport, immigrant card or birth certificate
- Social Security number (if applicable)
- Proof of gross income for the past month. EXAMPLE: Pay check stubs, unemployment compensation, workman's compensation, pension, social security, etc. Letter from employer is acceptable, and tax returns.
- If Self Employed: Profit & loss statement for the last three months.
- Insurance cards (Medicaid, CHP+, Medicare/Supplements)
- Copy of Medicaid denial letter

INSURANCE & SLIDING FEE SCALE PROGRAMS



RIVER VALLEY
FAMILY HEALTH CENTERS

308 MAIN ST., OLATHE, CO 81425 | 970.323.6141
1010 S RIO GRANDE, MONTROSE, CO 81401 | 970-497-3333
1250 VALLEY VIEW DR., DELTA, CO 81416 | 970.874.8981

CONVENIENT CARE CLINIC:

970-263-3850 | 1250 Valley View Dr., Delta, CO

ALL MAIL: P.O. BOX 529, OLATHE 81425

RIVERVALLEYFHC.COM

SENIOR DENTAL

SENIOR DENTAL

River Valley offers a Colorado Low-Income Senior Dental Grant, providing eligible patients aged 60 and older with up to \$1,500 in dental services or 2 major procedures like crowns, root canals, partials, or dentures at a reduced cost. Covered services include cleanings, X-rays, fillings, extractions, dentures, and more. To qualify, patients must have an income below 250% of the Federal Poverty Level and not have dental coverage through Medicaid or other dental insurance plans (except Medicare supplement plans). Those with incomes between 0-200% of the Federal Poverty Level can also access a sliding fee scale for services not covered by the grant. The application process can be initiated through the Outreach and Enrollment department.

WHO CAN APPLY?

- People legally residing in Colorado
- People who meet income and resource guidelines
- People who are not eligible for Medicaid or CHP+
- People who have Medicare
- People who have health insurance
- People who are migrant and seasonal farm workers

EXAMPLE OF SENIOR DENTAL MAXIMUM INCOME GUIDELINES

FAMILY SIZE	ANNUAL INCOME	MONTHLY INCOME
1	\$37,650	\$3,132
2	\$51,100	\$4,258
3	\$64,550	\$5,379
4	\$78,000	\$6,500

OVERVIEW OF PROGRAMS

MEDICAID & CHP+ (CHILD HEALTH PLAN PLUS)

As a result of the Affordable Care Act, Medicaid in Colorado has expanded to adults without dependents up to 138% of the Federal Poverty Level. This means thousands of Coloradans are now eligible.

SENIOR DENTAL GRANT

Senior Dental Grant provides limited discounted dental care services to low income individuals that are below 250% Federal Poverty Level.

SLIDING FEE SCALE

River Valley Family Health Centers offer a sliding fee scale to low-income individuals and families that are not eligible for Medicaid, who lack insurance, or who are underinsured, and have household income under 200% of the federal poverty guidelines. See table on page 5.

* HOUSEHOLD COMPOSITION: FAMILY TO BE DEFINED AS:

1. Applicant
2. Spouse/Civil Union (legal or Common Law)
3. Children under 19 years of age (living in the home)
4. Unborn Children
5. Adult Students (up to age 26)
6. Disabled children
7. Elderly Parents (65+)
8. Extended relationships where the applicant can demonstrate they are supporting that member at least 50% of the time

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SLIDING FEE SCALE PROGRAM

SFS is a discount offered by River Valley Family Health Centers to low-income individuals and families that do not qualify for Medicaid/CHP+ or CICP, are underinsured, or do not have insurance coverage. This discount is offered for services at River Valley only.

WHO CAN APPLY?

- People residing in Colorado
- People who are migrant and seasonal farm workers
- People who meet income and resource guidelines
- People who are not eligible for Medicaid or CHP+

WHAT SERVICES ARE COVERED?

Medical, dental, behavioral health, and pharmaceutical services provided at RVFHC, including labs.

MEDICAL

CODE	NOMINAL FEE	DISCOUNT
A	\$16	100%
B	\$27	100%
C	\$36	100%
D	\$44	100%

BEHAVIORAL HEALTH

CODE	NOMINAL FEE	DISCOUNT
A	\$10	100%
B	\$20	100%
C	\$25	100%
D	\$35	100%

DENTAL

For Dental fees, please see itemized list from the Front Desk.

OPTIONS GETTING STARTED

DO YOU HAVE HEALTH INSURANCE?

In Colorado, Medicaid was expanded to adults without dependent children and who meet the income threshold. It is important to apply for Medicaid in order to qualify for financial assistance.

If you do not qualify for Medicaid, you may be eligible for financial assistance to purchase health insurance in the marketplace or you may qualify for River Valley's Sliding Fee Scale.

OTHER OPTIONS

As a Federally Qualified Health Center, our goal is to provide excellent services to our patients. We ensure that we can serve everyone whether you have insurance or not. With health care costs being what they are, we want to make sure everyone has access to health care.

WE OFFER PATIENTS:

- Medicaid/CHP+ application assistance
- CICP (Colorado Indigent Care Program)
- Sliding Fee Scale
- In addition, we are able to offer medications at a low cost.
- Other programs include free or reduced mammograms, pap smears and colorectal cancer screenings.

MEDICAID & CHP+ PROGRAMS

FAMILY MEDICAID is a public health insurance for Colorado children age 18 and under, pregnant women and parents with dependent children. The program is funded jointly by federal-state partnership.

ADULTS WITHOUT DEPENDENT CHILDREN

could be eligible, so apply today.

River Valley Family Health Centers has staff to help you through the application.

FAMILY SIZE	MEDICAID MONTHLY INCOME	CHP+ MONTHLY INCOME	PREGNANT WOMEN MONTHLY INCOME	SLIDING FEE MONTHLY INCOME
1	\$1,669	\$3,263	\$2,447	\$1,255
2	\$2,265	\$4,429	\$3,322	\$1,703
3	\$2,862	\$5,594	\$4,198	\$2,151
4	\$3,458	\$6,760	\$5,040	\$2,600