

**ALCONA HEALTH CENTER**

**FORMS OF VERIFICATION FOR SLIDING FEE**

• \*\*Don’t forget \*\*\* Before applying for the Sliding Fee program those eligible for

Medicaid or Medicare programs should apply directly to those programs. If you

need assistance, please ask our staff for information.

• If you earn a regular paycheck, the most recent 3-5 pay stubs or a letter from

your employer stating your Gross income for the last month must be provided

on company letterhead and signature of contact with any questions that arise. If

your income stays the same every pay period, only one pay stub is needed.

• If you receive Social Security income, a benefits letter from the Social Security

Administration for the CURRENT year must be provided. If you do not have this

form any longer, you may call 1-800-772-1213 to request a new one, or go

online to www.socialsecurity.gov.

• If you receive a pension check, copies of the check stub or a statement from

the payee must be provided.

• If you receive unemployment, a benefits letter from the beginning of your claim

must be provided. You may go online to get Benefit Payment Information, or call

customer service at 1-866-523-2122.

• If you do not have any income at this time, a letter from the person who

supports you needs to be provided. The letter should include the date, amount

per month that they help you with, and their signature.