**APPLICATION FOR REDUCED FEES**

The Eckelmann-Taylor Speech and Hearing Clinic serves all clients regardless of their insurance or financial class. As a non-profit organization, we strive to perform services and provide products at reasonable costs. Fees for our services are used to support and maintain the operational costs of the Clinic.

We are able to provide a sliding fee scale for our clinical services\* for clients who qualify based on household size and annual gross income. Our office staff is available to assist clients in determining if they are eligible for our sliding fee options. Clients must provide the clinic a copy of the previous year’s 1040 tax form in order to determine eligibility discounted services.

Eligibility for reduced fees will need to be demonstrated annually.

Discount levels for clients who qualify are shown below:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **2023 Sliding Fee Schedule for Services \*** | | | | | | |
|  | | **Based on 2023 Federal Poverty Guidelines** | | | | | | |
| **Family Size** | **At or below 100%** | | **125%** | **150%** | **175%** | | **200%** | |
|  | **Full Discount** | | **75% Discount** | **50% Discount** | **25% Discount** | | **No Discount** | |
| 1 | 14,580 | | $18,225 | $21,870 | $25,515 | | $29,160 | |
| 2 | 19,720 | | $24,650 | $29,580 | $34,510 | | $39,440 | |
| 3 | 24,860 | | $31,075 | $37,290 | $43,505 | | $49,720 | |
| 4 | 30,000 | | $37,500 | $45,000 | $52,500 | | $60,000 | |
| 5 | 35,140 | | $43,925 | $52,710 | $61,495 | | $70,280 | |
| 6 | 40,280 | | $50,350 | $60,420 | $70,490 | | $80,560 | |
| 7 | 45,420 | | $56,775 | $68,130 | $79,485 | | $90,840 | |
| 8 | 50,560 | | $63,200 | $75,840 | $88,480 | | $101,120 | |
| 9 | 55,700 | | $69,625 | $83,550 | $97,475 | | $111,400 | |
| 10 | 60.840 | | $76,050 | $91,260 | $106,470 | | $121,680 | |
| \*Discount charges may only be applied to services (not products) | | | | | |  | |  | |
| For families/households with more than 10 persons add $5,140 for each additional person.  Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of person completing form: ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Relationship to client: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today’s date: ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of person completing form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |  | |
|  | | | | | | | |  | |

Process:

A client inquiries about our sliding fee scale to a student clinician or clinical educator, they should be referred to the Clinic Office for more information and the form to complete the application for reduced fees.

Clinic Office gives the client a blank APPLICATION FOR REDUCED FEES form (Page 1 of this document) to complete. Office staff should make a miscellaneous note these forms were provided. Client instructed to return completed form AND a copy of their previous year’s 1040 tax form to include gross annual income and family size.

Once received the clinic office staff will give these forms to the Clinic Director for calculation and determination of qualification.

The Clinic Director will notify the Medical Insurance Associate of the result. The Medical Insurance Associate will apply the proper fee schedule and notify the client of the result. The completed application form will be scanned into the client’s OpenBilling record and the supporting financial documents will be confidentially recycled.

The Medical Insurance Associate will add a note on "admin notes," including the date the fee schedule was changed and adjusted OpenRegistration. The term date will be added to keep track of when the client needs to re-apply.

If the client qualifies, this notification will also include a deadline for coverage (one year) and the reminder to continue to qualify in subsequent years a current 1040 tax form will need to be provided.