

SERVICES ELIGIBLE FOR DISCOUNTING

Sliding fee is offered for all required and additional health services within Southern West Virginia Health System’s scope of project. Covered under the Sliding Fee Program are services of necessity performed by our staff at any Southern West Virginia Health System facility.

Services included are:

- Office visits for preventative, acute and chronic care of new or established patients
- Office visits for preventative dental care
- In-house laboratory visits\*
- X-ray administration\*
- Electrocardiographic (EKG) services
- Behavioral health services
- Pulmonary services
- Chronic Care Management
- Community Health Integration
- Pharmacy prescription medications

*\*Patients receiving lab or x-ray services may receive a separate bill from Quest Diagnostics or Radiology Inc., depending on the level of slide in which you qualify.*



WHERE CAN I USE MY BENEFITS?

Once your Sliding Fee application has been approved and you have received your Sliding Fee Card, you can receive your eligible discounts at any Southern West Virginia Health System facility listed below.

BOONE COUNTY

- Sherman Elementary Health Center**  
(304) 837-3100
- Sherman Jr. & Sr. High Health Center**  
(304) 837-3399
- SWVHS – Madison Medical**  
(304) 369-5170
- SWVHS – Wharton**  
(304) 247-6202
- SWVHS – Whitesville**  
(304) 854-1321  
or (304) 854-1322
- Van Elementary Health Center**  
(681) 581-6074
- Van Jr. & Sr. High Health Center**  
(681) 581-6072

CABELL COUNTY

- Salt Rock Medical Center**  
(304) 824-2073

KANAWHA COUNTY

- SWVHS – Sand Plant**  
(304) 756-1500

LINCOLN COUNTY

- Bobcat Health Center**  
(304) 648-1564
- Guyan Valley Wellness Center**  
(304) 824-5707
- Guyan Valley Wildcat Center**  
(304) 824-5707

LINCOLN COUNTY *(continued)*

- LCHS Panther Center for Health**  
(304) 824-6090
- Lincoln Education Wellness Center**  
(304) 648-1564
- Lincoln Primary Care Center - Hamlin**  
(304) 824-5806
- Mustang Health Center**  
(304) 756-1500

LOGAN COUNTY

- CRHS Tiger Center for Health**  
(304) 855-0245
- Logan Wildcat Health Center**  
(304) 688-9949
- Pioneer Health Center**  
(304) 583-7295
- SWVHS – Chapmanville**  
(304) 855-2211

- SWVHS – Logan**  
(304) 752-8081

- SWVHS – Man**  
(304) 583-8585

MINGO COUNTY

- SWVHS – Delbarton**  
(304) 475-1761

- SWVHS – Gilbert**  
(304) 664-6270

WYOMING COUNTY

- SWVHS – Oceana**  
(304) 682-6246

Sliding Fee Program Guide  
*to discounted healthcare services*



Southern West Virginia  
**Health System**  
Lincoln Primary Care Center Inc.

WHAT IS THE SLIDING FEE PROGRAM?

The Sliding Fee Program at Southern West Virginia Health System offers the opportunity for our established patients to receive discounted healthcare services within our network of Health Centers.

The program is not designed to offset the cost of any medical tests or procedures for patients receiving their primary care from outside of our Health Center network.

WHO IS ELIGIBLE FOR SLIDING FEES?

Any family or individual whose income meets financial guidelines is eligible for this discount.

WHAT IS THE APPLICATION PROCESS?

To apply for this program, visit any Southern West Virginia Health System office. Staff members at the front desk can help you with the application process.

WHAT IS MY FINANCIAL RESPONSIBILITY?

You are expected to pay at least the cost of your office visit at the time of service. If you fail to do so, you will lose your discount and pay full price. Please refer to the chart in the right-hand panel of this brochure for cost information.

WHAT ARE MY COSTS?

Sliding fees for standard services at our network of facilities are divided into four scales outlined below based on your household income.

STANDARD SLIDING FEE SCHEDULE

SERVICE	SCALE 1	SCALE 2	SCALE 3	SCALE 4
Medical Office Visit	\$15	\$30	\$40	\$50
X-Ray/EKG Fee	\$10	\$12	\$13	\$15
In-House Lab Fee	\$3	\$4	\$5	\$6
Behavioral Heath	\$15	\$30	\$40	\$50
Preventative Dentist Visit	\$50	40%**	60%**	80%**
Pharmacy Prescription Medications	Cost Plus % of Total Covered Cost \$5	Cost Plus % of Total Covered Cost \$7	Cost Plus % of Total Covered Cost \$8	Cost Plus % of Total Covered Cost \$9
Chronic Care Management	\$0	\$3	\$6	\$9
Community Health Integration	\$0	\$3	\$6	\$9

\*Controlled substances do not qualify for Sliding Fee scale. \*Pharmacy retail and over-the-counter products do not qualify for Sliding Fee scale.

PULMONARY REHABILITATION SERVICES

SERVICE	SCALE 1	SCALE 2	SCALE 3	SCALE 4
Pulmonary Function	\$12	\$15	\$18	\$20
6 Minute Walk Test	\$12	\$15	\$18	\$20
Pulmonary Rehab Initial Intake	\$12	\$15	\$18	\$20
Individual Pulmonary Rehab Session	\$1	\$2	\$3	\$5
Group Pulmonary Rehab Session	\$1	\$2	\$3	\$5

HAVE QUESTIONS? Call us at (304) 824-5860