



**To be eligible for Project Access, patients:**

- Must PROVE Wake or Franklin County residency and provide valid picture I.D.
- Must not be eligible or have health insurance, including Medicaid or Medicare.
- Must have a household gross income at or below **200%** of the Federal Poverty Guideline (see table below).

**REQUIRED DOCUMENTATION** (For all household wage earners)

**If employed:**

- Paystubs from last 30 days or letter from employer stating wages from the last 30 days if applicable (preferably on letterhead, if not, letter must include signature, address and phone of employer);
- Proof of household wage earners.
- Proof of income from state, county or federal government (food stamps, child support, etc.), if applicable.

**If Self-employed income:**

- If using Schedule C – use line 31 (net profit or loss)
- If using Sched D – use line 7B (net short term gain/loss) & line 16 (net long term capital gain/loss).
- If Form 4797 (Sale of Business Property) -- use line 30.
- Sched E – use line 3 & line 4.
- Sched F – use line 11 (gross income).

**If unemployed:**

- Proof of unemployment income, disability or any other income.
- Proof of all other household income or support (spouse or family member’s income, food stamps, alimony, child support, retirement or annuity benefit)

**Zero Income – Must provide proof of all household wage earners, or proof of how patient is being supported.**

**2017 HHS Poverty Guidelines & Project Access Income Guidelines**

Persons in Family/Household	National Poverty	Project Access 200% Monthly	Project Access 200% Annual
1	\$ 12,060.00	\$ 2,010.00	\$ 24,120.00
2	\$ 16,240.00	\$ 2,707.00	\$ 32,480.00
3	\$ 20,420.00	\$ 3,403.00	\$ 40,840.00
4	\$ 24,600.00	\$ 4,100.00	\$ 49,200.00
5	\$ 28,780.00	\$ 4,797.00	\$ 57,560.00
6	\$ 32,960.00	\$ 5,493.00	\$ 65,920.00
7	\$ 37,140.00	\$ 6,190.00	\$ 74,280.00
8	\$ 41,320.00	\$ 6,887.00	\$ 82,640.00