



## Are You an Uninsured Guilford County Resident In Need of A Medical Home?

**The Guilford Community Care Network provides access to medical homes and care coordination to the uninsured of Guilford County.**

**If you answer Yes to ALL 4 below**, then speak with a GCCN eligibility and enrollment person (at the Greensboro and High Point Department of Social Services) who will explain the program and determine if you qualify.

1. You **do not have** a regular primary care doctor (Medical Home).
2. You are not eligible for state or federally sponsored health insurance including the **ACA Health Insurance Marketplace (Exemption Required)**, Medicare, Medicaid (*except a Family Planning Waiver*) or Veteran's Administration.
3. You live in **Guilford County (only)**. (**min. 3 months, 6 months preferred**)
4. Your annual income is between 0-200% of the federal poverty level.

***You are first required to see if you are eligible to enroll in the ACA Health Insurance Marketplace if you are over 100%FPL, before enrolling into the GCCN (exemption required)***  
***[www.healthcare.gov](http://www.healthcare.gov); 1-800-318-2596***

***GCCN Information Line (336) 272-1050 ext. 6100***

**Eligibility Requirements** *(Please bring these items to your eligibility & enrollment appointment.)*

**Proof of ACA Health Insurance Marketplace Exemption Form/Documentation (if over 100%FPL);  
Valid Photo ID such as driver's license, state identification card, passport, or identification from home country.**

**Proof of Guilford County Residency (min. 3 months, 6 months preferred):** NC Driver's license, learner's permit or state issued ID; bank statement with name and address; current utility bill with name and address; NC voter registration card; current Social Services check or letter; current County/City billing statement; lease agreement with the address of the residence, your name and your landlord's name and address or mortgage statement; pay stubs with your name and address. If you are homeless, your shelter must give us a letter, on letterhead, stating that you stay at the shelter.

**Proof of Income: (Bring all that apply.)**

1040/Last year's tax return

W2

**Notarized** Schedule C for self-employment verification *(Each eligibility and enrollment site has a notary on staff.)*

1099

At least (4) current pay stubs

(Form 4506-T) if taxes were not filed the previous year

Other income: social security, unemployment, child support, workmen's compensation *(award letters)*

Food Stamp Award Letter (if receiving assistance) **(for informational purposes ONLY)**

**Notarized Letter** of Support (if you have no income and receive shelter from an individual/organization)

**Proof of Assets: (Bring all that apply.)**

Current bank statement (checking, savings, CDs, etc.)

Three of your most recent bank statements if you are living on savings

Life Insurance Info (Case Value/Company Name); Pension, 401-K, IRA, Gross Amount, etc.

Tax value on autos, property, houses, mobile homes, etc. **(for informational purposes ONLY)**

Disability paper work (if you have applied) showing status (copy of Award Letter)