



# CONE HEALTH®

## Mammography Scholarship Fund

Cone Health Cancer Center • 2400 West Friendly Ave. • Greensboro, NC 27403

Phone: (336) 832-0849 • Fax: (336) 832-0059

### APPLICATION FOR MAMMOGRAPHY SCHOLARSHIP

Please check all that apply:

- \_\_\_\_\_ I have a **CURRENT Guilford Community Care Network (orange card Guilford County only)**.
- \_\_\_\_\_ I have **Medicaid or Medicare**.
- \_\_\_\_\_ A **physician or clinic has seen me in the last 12 months**.
- \_\_\_\_\_ I have **insurance coverage**.

Please circle the number of family members living at home.							
1	2	3	4	5	6	7	8
My / Our total income per year will be equal to/or less than: (circle one below)							
\$37,650	\$51,100	\$64,550	<b>\$78,000</b>	\$91,450	\$104,900	\$118,350	\$131,800

The full name and location of the physician, practice or clinic to send the results of my mammogram is:

\_\_\_\_\_

My signature means that the information above is true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
DAYTIME Telephone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP Code

**IMPORTANT NOTE TO APPLICANT:** Applicants are contacted in the order received. Because financial situations change, **applications are held for 6 months.**

**If we are unable to contact you during this time, a new application will need to be submitted.**

<b>FOR OFFICE USE ONLY</b>		APPT. DATE	_____
Date APP Received	_____	COMMENTS:	APPROVED      DENIED
Patient contacted	_____		
	_____		
		Interviewer Initials/Date	_____

## CONE HEALTH MAMMOGRAPHY SCHOLARSHIP FUND CRITERIA

Funds are available to any woman who needs a mammogram and meets the following criteria.

- Is not Medicaid / Medicare eligible
- Does not have insurance
- \*Is an established patient with a private physician, practice or clinic (i.e., Cone Health Family Practice, Cone Health Clinics, Cone Health Community Health & Wellness Center, a Guilford Community Care Network practice, Triad Adult and Pediatric Medicine, Free Clinic of Reidsville, Charles Drew Clinic, Scott Clinic, Sylvan Clinic, Burlington Community Clinic, Prospect Hill Clinic, and Open Door Clinic)
- Has an expected gross annual family income at/below 250% of the Federal Poverty guidelines
- Recipients may schedule one screening mammogram per year at age 40
- Patients must re-apply each year prior to scheduling their annual mammogram

\* Results must be sent to a physician's office in which you have an active medical record. If you do not have a physician, we will not be able to schedule your mammogram. Please call Cone Health Connect (336-832-8000) or United Way (2-1-1) for assistance in finding a practice to care for your medical needs. These are both free referral lines that provide confidential access 24 hours a day, 7 days a week.

2024 POVERTY INCOME GUIDELINES (EFFECTIVE January 1, 2024)		
250% OF FEDERAL POVERTY LEVEL		
Family Members	Year	Month
1	\$37,650	\$3,138
2	\$51,100	\$4,258
3	\$64,550	\$5,379
4	\$78,000	\$6,500
5	\$91,450	\$7,621
6	\$104,900	\$8,742
7	\$118,350	\$9,863
8	\$131,800	\$10,983

### Important Note to Applicants:

Please mail your application to: Cone Health Cancer Center, 2400 West Friendly Ave., Greensboro, NC 27403  
or fax to: (336) 832-0059.

The Cone Health Mammography Scholarship Fund will cover one screening mammography per year to patients who meet the above criteria.

Screening mammography is for women who do **not** have significant symptoms or changes in their breasts such as a lump or nipple discharge. Women with such symptoms need to have a more comprehensive mammogram. Please call 336-832-0849 to schedule an appointment with BCCCP if you are having any breast symptoms.

Any additional mammography views or breast ultrasound that is recommended by the radiologist following your screening mammogram will be an additional charge and **will not be covered** by the Cone Health Mammography Scholarship Fund. Other funding may be available.

**We welcome your application for a Cone Health Mammogram Scholarship for your next annual screening mammogram, as your needs and the funding varies from year to year.**