

Community of Hope Health Clinic 1970 Chandalar Office Park Circle Pelham, AL 35124 Phone (205) 644-8640 Fax (205) 574-3117

www.communityofhopeclinic.com

About us: CHHC is a free and charitable clinic that offers health care to *uninsured adults* who *are residents of Shelby County, AL*. All providers, nurses, and interpreters volunteer their time so that CHHC can offer the following:

General Medicine / Primary Care: CHHC offers routine health exams and monitors ongoing problems such as high blood pressure, diabetes, etc. CHHC also evaluates new health problems that do NOT require emergency care. If you need to be referred to a specialist or need surgery, our staff can refer you to one of our partner programs. You must be a current patient in good standing to qualify for a referral. In addition to primary care, CHHC is happy to provide the following services:

Menta	l Health • Physical Therapy •	Prenatal Ca	e •	Dermatology	•	Dispensary •	Vaccines •
	Monday – Tuesday 1pm - 3pm Wednesday – Friday 9am - 3pm		linica Hours	l Monday : Tuesday Thursday	9a	ım - 12pm	

WE DO NOT ACCEPT WALK-INS DURING CLINICAL HOURS

Call or come see us during Office Hours If you have questions or need assistance with your application

NEW Patient Application Checklist:	Most recent income taxes <u>OR</u> if you did not file
1. Completed patient application	taxes then complete the
2. Copy of government issued picture ID (Driver's	CHHC Bank/Tax/Income Certification form
License, State ID, Passport, Consular ID Card)	3 most recent bank statements OR if you do not
🗌 3. Required Proofs	have any accounts then complete the
Shelby County Residency: Option 1: Copy of Lease or recent utility bill with your name and address Option 2: If the lease/utility bill is not in your name complete the CHHC Shelby Co. Proof of Residency form Income: Include the following for all working	CHHC Bank/Tax/Income Certification form Income Exceptions for unemployed patients: Completed CHHC Letter of Financial Support form Completed CHHC Bank/Tax/Income Certification form Other Documents Required only if you are receiving the benefits Most recent Food Stamp Award Letter
adults in your household ages 19 and older One month of paystubs (no older than the last 3 months) <u>OR</u> notarized letter from employer CHHC Employment Verification form	Most recent Social Security Benefits AwardLetterMost recent Disability Benefits Award Letter

Completed applications and supporting documents can be dropped off at the clinic during the Non-Clinical Office Hours listed above. Applications can also be mailed to:

Community of Hope Health Clinic

PO BOX 177 Pelham, AL 35124

Once <u>ALL</u> required documents are received we will schedule an *INTAKE INTERVIEW* in person or via phone. During this interview we will schedule an appointment for you to see one of our providers.

Questions? Contact us via email at appointment@communityofhopeclinic.com
Or call us at (205) 644-8640 during Non-Clinical Hours