



Thank you for your interest in the Show Me Health Women and/or Wise Women Program(s).

Guidelines:

- Women ages 21 – 64 (or older if currently not receiving Medicare Part B) **and**
- Income at or below 250% federal poverty level for household income **and**
- No insurance to cover program services

Please follow the directions below:

1. Complete the patient history form and client eligibility form.
2. Provide copies of proof of age and current income\*  
**Proof of age:** Driver’s license, passport or birth certificate  
**Proof of current income:** Social Security award letter, food stamps voucher, 2 pay stubs, WIC voucher, unemployment insurance or income tax return
3. Please mail your completed forms, proof of age and current income to:  
 Jackson County Public Health  
 Attn: SMHW/WW Eligibility  
 3651 NE Ralph Powell Road  
 Lee’s Summit, MO 64064

Once your documentation has been received, eligibility will be determined. Upon approval, you will be notified to schedule an appointment.

<b>Income Guidelines 2025-2026</b>				
<b>Household Size</b>	<b>SMHW/WW Annual</b>	<b>SMHW/WW Monthly</b>	<b>SMHW/WW Weekly</b>	<b>SMHW/WW Hourly</b>
<b>1</b>	\$37,650	\$3,138	\$724	\$18.10
<b>2</b>	\$51,100	\$4,258	\$982	\$24.57
<b>3</b>	\$64,550	\$5,379	\$1,241	\$31.03
<b>4</b>	\$78,000	\$6,500	\$1,500	\$37.50
<b>5</b>	\$91,450	\$7,621	\$1,758	\$43.96
<b>6</b>	\$104,900	\$8,742	\$2,017	\$50.43
<b>7</b>	\$118,350	\$9,863	\$2,275	\$56.89
<b>8</b>	\$131,800	\$10,983	\$2,534	\$63.36
<b>Each additional person, add:</b>	\$13,450	\$1,120	\$258	\$6.46

If you have questions during this process, please contact Jackson County Public Health at:

Eligibility questions: (816) 404-6400

Spanish Interpreter: (816) 404-6427

**\* Proof of age and current income are required to determine eligibility for the program(s).**