



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.

| Income Guidelines 2025-2026 | | | | |
|------------------------------|----------------|-----------------|----------------|----------------|
| Household Size | SMHW/WW Annual | SMHW/WW Monthly | SMHW/WW Weekly | SMHW/WW Hourly |
| 1 | \$39,125 | \$3,260 | \$752 | \$18.81 |
| 2 | \$52,875 | \$4,406 | \$1,016 | \$25.42 |
| 3 | \$66,625 | \$5,552 | \$1,281 | \$32.03 |
| 4 | \$80,375 | \$6,697 | \$1,545 | \$38.64 |
| 5 | \$94,125 | \$7,843 | \$1,810 | \$45.25 |
| 6 | \$107,875 | \$8,989 | \$2,074 | \$51.86 |
| 7 | \$121,625 | \$10,135 | \$2,338 | \$58.47 |
| 8 | \$135,375 | \$11,281 | \$2,603 | \$65.08 |
| Each additional person, add: | \$13,750 | \$1,145 | \$264 | \$6.61 |

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).**