

Office of Women's and Men's Health
Income Eligibility Scale
for Nebraska Colon Cancer Screening Program
Effective July 1, 2011-June 30, 2012

# of People in Household	YEARLY Income
1	0 - \$24,503
2	0 - \$33,098
3	0 - \$41,693
4	0 - \$50,288
5	0 - \$58,883
6	0 - \$67,478
7	call 1-800-532-2227

# of People in Household	MONTHLY Income
1	0 - \$2,042
2	0 - \$2,758
3	0 - \$3,474
4	0 - \$4,191
5	0 - \$4,907
6	0 - \$5,623
7	call 1-800-532-2227

Note: If a colonoscopy is received through NCP, client will be asked to pay 10% of the cost.

301 Centennial Mall South ~ P.O. Box 94817 ~ Lincoln, NE 68509-4817
Toll Free: 800-532-2227 ~ Local: 402-471-0929 ~ Fax: 402-471-0913
www.dhhs.ne.gov/menshealth ~ www.dhhs.ne.gov/crc



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#5U58/DP000811-04, #5U58/DP001421-03, #5U58/DP002043-02

