Alabama's Ryan White Part B Program Eligibility Standard

PURPOSE

This document establishes guidelines to determine eligibility of persons seeking services through Alabama's Ryan White HIV/AIDS Part B and the State's AIDS Drug Assistance Program (ADAP). This policy is binding to all organizations awarded Ryan White HIV/AIDS Part B funding through the Alabama Department of Public Health (ADPH).

PROGRAM AUTHORITY

The authority for this policy is the Ryan White HIV/AIDS Treatment Modernization Act of 2009, Public Health Service (PHS) Act under Title XXVI, as administered through the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB), and the Division of Service Systems (DSS).

The Alabama Department of Public Health (ADPH) is the State's Ryan White HIV/AIDS Part B Program Recipient. As the official recipient of Ryan White HIV/AIDS Part B program funds, the ADPH is responsible for administering all aspects of the program and compliance to legal requirements. Authority to administer the Ryan White HIV/AIDS Part B Program is delegated by the ADPH to the State's HIV/AIDS and Prevention Division as the Program Recipient.

SOURCE CITATIONS

The following policies and regulations are sources used in the development and or requirements stated in Alabama's Client Eligibility Standard.

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau, (HAB) Division of Service Systems Universal Monitoring Standards Part A and B, April 2013

HIV funds are intended to support HIV related needs of only eligible individuals. HRSA Policy Notice – 16-02, February 4, 2016 will replace HRSA Policy Notice 10-02 in FY 17.

Policy Notice - 07-07 Ryan White CARE Act dated September 28, 2007

Program guidance letter from Health Resources and Services Administration, dated May 26, 1999, reference: Eligibility of Non-Citizens Receiving Ryan White Services

Ryan White HIV/AIDS Programs ensure access and improve the quality and availability of care for *low-income, uninsured, and underinsured* individuals infected and affected by HIV disease. By law, the Ryan White Treatment Modernization Act is the payer of last resort. As such providers are required to determine and verify an individual's eligibility for services from all sources to ensure the individual is provided the widest range of needed medical and support services. Ryan White funds may pay for services that fill the gaps in coverage of these other private and public health care programs but the funds cannot be used for services that should be reimbursed or paid by the other payers.

(HRSA Policy Notice 07-07) STANDARD (HRSA Policy Notice 10-02, April 8th 2010) All due diligence must be applied by service providers to determine and capture the required eligibility information in the client's clinic record and determine whether a person requesting services meets the eligibility requirements at initial intake and reassess active clients twice a year for continued enrollment.

HIV-Infected Individuals: Providers must establish client eligibility prior to rendering any services, with one exception.

<u>EXCEPTION:</u> Persons encountered through outreach efforts are eligible for limited services pending verification of their HIV status.

Providers are encouraged to provide any person who believes they are HIV positive with access or referral to appropriate services for the purpose of verification of HIV status. Providing this initial access is an allowable expenditure prior to fully establishing eligibility, as a ***one-time service.*** No Ryan White HIV/AIDS Program funded services are allowable beyond those stated above until a client's eligibility is fully established.

Affected Persons: Ryan White HIV/AIDS Part B funded services for non-infected individuals must always include documentation as to how the service will benefit a person with HIV infection. Affected Persons may be eligible for Ryan White services in *<u>limited situations with primary purpose described here:</u>*

• To enable the non-infected individual to participate in the care of someone with HIV or AIDS Examples include caregiver training for in-home medical or support service; and support groups, counseling, and practical support that assist with the stresses of caring for someone with HIV.

• To directly enable the infected individual to receive medical or support services by removing an identified barrier to care. Examples of this include the provision of childcare

services for non-infected children while an infected parent accesses medical care or support services.

• To promote family stability for coping with unique challenges posed by HIV/AIDS

Alabama's ADAP, in collaboration with community health care providers, is committed to offering life saving medications for low income or no income and uninsured persons living with HIV disease in Alabama in an effort to increase life expectancy and to improve quality of life.

The goal of ADAP is to reduce associated morbidity/mortality among HIV infected persons living in Alabama by offering a formulary of FDA approved HIV and OI medications for eligible individuals to treat HIV disease; and help delay its progression while improving the overall health of people living with HIV disease in Alabama.

To this end, only individuals living with HIV and residing in the State may access Alabama's ADAP services. Additionally, ADAP funds are intended for individuals who are low income or no income uninsured or underinsured persons that have limited or no prescription insurance coverage.

Ryan White Programs – Veterans (VA) and Indian Health Services (HIS):

Ryan White funded care or service providers may not cite the "payer of last resort" language in Section 2605(a)(6), 2617(b)(6)(F), or 2664(f) of the Public Health Service Act to force an HIV-infected eligible veteran to obtain services from the VA health care system or refuse to provide services.

Since 2012 as a result of The Snyder Act of 1921 (25 USC 13) and the permanent reauthorization with the enactment of Public Law 111-148, the Patient protection and Affordable Care Act in 2010, which included reauthorization and extension of the Indian Health Care Improvement Act (IHCIA), Ryan White funded care or service providers may not cite the "payer of last resort" language to force an HIV-infected eligible American Indian or Alaska Natives to obtain services from the IHS health care system or refuse to provide services.

Veterans, American Indians and Alaska Natives are never required to access their health care services from the VA or IHS, but rather they are free to obtain their health care services from the provider of their choice. All eligible veterans, American Indians and Alaska Natives may choose to receive their care from the Veterans Administration health care system or the Indian Health Services. However, even if enrolled for VA health care or the IHS health care system, a veteran, American Indian, or Alaska Native does not have to use the VA or IHS as their exclusive health care provider.

Veterans, American Indians and Alaska Natives with private health insurance may elect to use those benefits in seeking services from non-VA or IHS providers as a supplement to

their VA or IHS care. VA and IHS is not, however, an insurance plan or an entitlement program and the VA or IHS authority to pay for services from individual non-VA or IHS providers are extremely limited.

STANDARD
Some VA or IHS facilities do not have infectious disease specialists or HIV/AIDS experienced providers.

Sub- recipients are required to be familiar with the VA or IHS facilities in their local area that have this expertise and which ones do not.

Immigrants or Non-citizens
Per program guidance from HRSA, immigrants or non-citizens of the United States requesting services from a Ryan White CARE Act Part B program are eligible to receive services. *Program guidance letter from Health Resources and Services Administration, dated May 26, 1999, reference: Eligibility of Non-Citizens accessing Ryan White services.*

ALABAMA RYAN WHITE HIV/AIDS PART B
AND
AIDS DRUG ASSISTANCE PROGRAM SERVICES

Basic Program Services and Descriptions

AIDS Drug Assistance Program (ADAP)	ADAP provides HIV medications and OI medications to low income or no income or uninsured or underinsured HIV infected Alabama residents with no third party payer sources.
Alabama Insurance Assistance Program (AIAP)	ADAP provides insurance assistance to low income, no income and uninsured HIV Alabama residents who meet ADAP eligibility.
Medicare Part D Client Assistance Plan (MEDCAP)	MEDCAP covers monthly premiums and prescription co-pays for HIV infected Alabama residents with Medicare drug benefits who meet annual ADAP eligibility requirements and do not qualify for Low Income Subsidy assistance (LIS).
Ryan White HIV/AIDS Part B Services – No ADAP	Ryan White HIV/AIDS Part B Services covers funded services for Alabama residents who meet the Federal Poverty Level (FPL) eligibility criteria.

Revised March 2018

Elements of Client Eligibility:

There are four (4) required criteria when applying to determining the eligibility of a person for Ryan White services. The provider must document all criteria in the client's official record before requesting payment for services rendered, and include:

1) ***Documentation of HIV status (proof of HIV diagnosis/lab test results), OR written letter from a Medical Provider verifying HIV Disease :***

   • A positive status needs to be established only once, during the initial intake.

   • Acceptable verification/documentation to establish HIV positive diagnosis would be a copy of any laboratory result confirming an HIV/AIDS diagnosis or a statement from a clinician confirming a history of HIV/AIDS diagnosis.

2) ***Documentation of Permanent Alabama residency:***

   • Established at initial assessment and then at each reassessment or on demand prior to rendering any service.

   • Acceptable documentation could include a PO BOX **with supporting documentation of the applicant's street address** (i.e., utility bill; or other legal address documents) **OR** when no permanent physical address, (i.e., homeless; transient), provide a **Statement of *Temporary Housing during the application process.***

3) ***Documentation of Income:***

   • The income level for Alabama's Ryan White Part B Service/ADAP Program eligibility set by the ADPH is equal to or less than 400% of the current year's Federal Poverty Level (FPL). The FPL guidelines change annually and can be accessed at https://aspe.hhs.gov/poverty-guidelines.

   • Income eligibility is based on the total gross income of the client. Gross income is income before deductions of income taxes, social security tax, etc.

   • Detailed explanation of daily living expense source(s) when claiming zero income, provide a **No Income Statement** during application process when using the ADAP/AIAP/MEDCAP online application please use the space provided to answer the "No Income" question.

- Income documentation must be included in the client's clinic chart for review upon request by the Program Recipient or Lead Agency Representative. The following types of documentation are acceptable forms of income verification:

✓ Copy of most current W2 or 1040 (include Schedule C; i.e. business owner)/1040EZ signed by client,

✓ Payroll stubs (2 consecutive stubs) dated current = within 90-days of date of intake and/ or date of RWHAPB Service/ADAP/AIAP/MEDCAP with complete application submission,

✓ Statement from an employer on official company letterhead showing gross pay for the 30-days prior to intake,

✓ Letter with current year's date from the Department of Social Security Services that documents receipt of benefits if applicable.

4) *Verification of Third Party Payers*:

- Clients eligible to enroll or are enrolled in public or private insurance are not eligible to receive RW funded services in most cases. *However, enrollment or eligibility to enroll in other payer sources does NOT automatically exclude a client from eligibility to receive Ryan White (RW) services during special instances with supporting documentation, (i.e., a waiting period; gaps in coverage; underinsured, missed open enrollment)*

- Documentation of verification of third party payer enrollment or eligibility to enroll must be included in the client's clinic chart for review upon request by the Program Recipient or Lead Agency Representative. Confirmation of enrollment or eligibility to enroll in any public or private insurance should include the following sources:

✓ Medicare
✓ Medicare Part D
✓ Low Income Subsidy Assistance "Extra Help" to enroll in Medicare Part D (MEDCAP)
✓ Medicaid
✓ BC/BS
✓ All other Public or Private Insurance and benefits summary in client record

Reassessment of a client's enrollment or eligibility to enroll in any third party payer source is to be completed twice a year or every 6 months for clients using the Alabama's Ryan White HIV/AIDS Part B Service and or the ADAP/AIAP/MEDCAP online application forms with additional required attachments if applicable. Alabama's Ryan White HIV/AIDS Part B Services clients and MEDCAP clients utilizing private providers will need

to complete a paper application/recertification twice a year or every 6 month with additional required attachments for review at the provider site. A copy of any applicable public or private insurance enrollment cards along with a copy of the private insurance benefits summary outlining insurance coverage when applicable must be available in the client's clinic record for review upon request by the Program Recipient and/or the State's RWHAPB Lead Agency representative.

Eligibility Determination

The Ryan White HIV/AIDS Part B Program provides limited patient care funds to target low-income individuals who are in need of financial support based on the Federal Poverty Guidelines (FPL) used for HIV/AIDS related medical and support services. The following process should ensure that only low income and eligible individuals receive the necessary services. (Please read carefully)

As part of the intake process, information requested on Alabama's Ryan White HIV/AIDS Part B Service/ADAP/AIAP/MEDCAP application must be collected and verified before a client receives a RW funded service. Reassessment of a client's eligibility for Ryan White HIV/AIDS Part B Services/ ADAP/AIAP/MEDCAP services must be completed twice a year during eligibility reassessment. Documentation of eligibility verification at application and twice a year during eligibility reassessment must be maintained in the client's file for review upon request by the State's Ryan White HIV/AIDS Part B Program Recipient and/or Lead Agency representative.

- Once a year active eligible ADAP clients who have gone through the ADAP intake process and are eligible for ADAP services have an opportunity to participate in the Alabama Insurance Assistance Program (AIAP) and must remain active and eligible during the insurance open enrollment period to receive expanded health care coverage. *As part of the Alabama Insurance Assistance Program eligibility, applicants must also acknowledge the BCBS verification statement of the application along with the Patient Health Information (PHI) statement. BCBS require the BCBS applicant acknowledge these statements as a requirement for services when applying for the AIAP. This document is in addition to the Ryan White Part B Program Authorization for Release of Protected Health Information (ROI).*

  - These verification statements are a part of AIAP eligibility during the Service Point* online application process required by all AIAP enrollees.

- Documentation of eligibility verification at application and twice a year during eligibility reassessment must be maintained in the clients file for review upon request by the State's Ryan White Part B Program Recipient and/or Lead Agency representative.

GENERAL INFORMATION

The objectives of the eligibility determination are to:

- Establish client eligibility before providing RWHAPB Services and/or ADAP/AIAP/MEDCAP twice a year or every 6 months;

- Collect basic client information to facilitate client identification and client follow-up;

- Inform the client of services available and what the client can expect if eligible for services;

- Refer for case management and other services and programs if ineligible;

- A client file must be complete and established for each individual requesting a RW funded services.

- The Alabama Ryan White HIVAIDS Part B/ADAP/AIAP/MEDCAP applicant is required to submit an initial application and a full annual reassessment according to Date of Birth (DOB) for all active clients; Active RWHAPB/ADAP/AIAP/ MEDCAP clients will be required to use Self Attestation during the Six Month CER when conducting the Six Month eligibility review. All active Annual and Six Month enrollees accessing RWHAPB/ADAP/AIAP/ MEDCAP will be processed according to Date-Of-Birth (DOB).

  Please see Annual and Six Month Recertification Schedule:
  http://www.adph.org/aids/assets/RWHAP_AnnualCertification_6MonthRecertSchedule_Jan2017.pdf

Personal Contact Information is required during the application process and during annual reassessment and partial reassessment eligibility process to remain eligible for all RWHAPB Services, ADAP, AIAP and MEDCAP programs: *(**Additional supporting documentation may be required.)**

- Proof of HIV diagnosis at initial application only,

- Permanent Alabama resident at application and twice a year during reassessment,

- Screening for enrollment or eligibility to enroll in all public and private insurance programs including Medicaid/SSI/SSDI during the annual and six month CER,

- Income at or below 400% of the current Federal Poverty Level (FPL) for all Ryan White HIV/AIDS Part B Services / ADAP/AIAP/MEDCAP for enrollment,

- Additional documentation is required for ADAP'S AIAP/MEDCAP Insurance enrollment. (See Alabama Insurance Assistance Program (AIAP) and Medicare Cost Assistance Program (MEDCAP) instructions).

- The Certification Statement must be signed by the client either electronically in SERVICE POINT* or on paper when the client is agreeing to provide accurate demographic and health information annually and every Six Month CER through the CM/SW. (No exceptions)

All new, reapplying and active participants must adhere to the standards and guidelines of Eligibility to participate in the RWHAPB program by submitting required online/or paper applications including the required documentation to receive RWHAPB funded services and when there are any changes during the course of service that may affect enrollment into RWHAPB by submitting the appropriate supporting documentation to update the Client's clinic or agency file. (No exceptions)

All standards and guidelines established in this section for eligibility determination must be completed and documented as stated for review in client file. (No exceptions)

1. Proof of positive HIV Status

The Alabama RWHAPB Services/ADAP/AIAP/MEDCAP Eligibility Determination application along with accompanying documentation is reviewed during site visits by the RWHAPB Lead Agency representative and/or the ADPH representative to validate compliance with this standard.

STANDARD: *A person must have a documented and confirmed HIV infection or AIDS diagnosis to be medically eligible for services. A person must have a documented confirmed lab result at initial application.*

The Guidelines:

- A laboratory test to document the person's HIV diagnosis must include one of the following at initial application only:
    - ✓ A confirmed positive HIV antibody test

    - ✓ A positive HIV direct viral test such as PCR or P24 antigen

    - ✓ A positive HIV ½ type differentiating (e.g. Geenius, Multispot)

    - ✓ A positive HIV viral culture result statement if no lab results from accepted from the clinical provider.

In the absence of HIV+ lab confirmation at initial application – a clinical provider, (i.e., CRNP, PA, MD) written statement when treating the client with a history of an HIV diagnosis will be accepted to confirm HIV diagnosis. A positive confirmatory test must be in the client's file for record review.

2. Screening for Private or Public Insurance

The Alabama RWHAPB Service/ADAP/AIAP/MEDCAP Eligibility Determination Application with accompanying verification/documentation is used during site visits by the RWHAPB Lead Agency representative and/or the ADPH representative to validate compliance with HRSA standards.

STANDARD: *The services provided by Ryan White HIV/AIDS Part B Program can only be utilized when no other source of payment exists. Ryan White HIV/AIDS Part B program becomes the payer of last resort.*

A Client may not be eligible for RWHAPB funded services if eligible for or already receiving benefits from other programs; especially where payment of services is made by third party payers, including private insurance, Medicare, Medicare Part D; Medicaid or other state or local programs such as SSI; SSDI.

- Each Client must be screened for eligibility when/or enrollment in all third party payer sources at application and at Annual and every Six Months during CER before before RWHAPB /ADAP/AIAP/MEDCAP services are provided, to include screenings for Medicaid and Medicare, and clients who are dually eligible for Medicaid and Medicare.

The Alabama RWHAPB Services/ADAP/AIAP/MEDCAP application process is used to document the eligibility results and must be included in the Client's record for review. (No exceptions)

- A person who is enrolled and participates in Alabama's Medicaid Program may not be eligible for Ryan White funded services unless the requested services are not offered by the Medicaid Program.

- A person eligible and active with the Alabama Insurance Assistance Program (AIAP) who becomes eligible for SOBRA Medicaid must enroll into the SOBRA Medicaid Program. Birth of a child is considered a qualifying life event and SOBRA Medicaid clients will be able to enroll into AIAP using the special enrollment schedule due to a Qualifying Life Event.

- A Client determined eligible for Ryan White funded services and is determined eligible for Alabama Medicaid or Medicare must show proof of or denial for enrollment in Medicaid or Medicare.

- Medicare clients without a Part D Plan can enroll in the Alabama MEDCAP Program after meeting MEDCAP eligibility requirements.

- A Client enrolled in Alabama's Full Medicaid Program, is determined not eligible for services funded by Ryan White Part B Program unless the requested service is not offered by the Medicaid Program. Proof of Medicaid service not offered must be a part of client documentation/record.

2. Each person must be screened for participation in private and public insurance including Medicare Part D health plans. The RWHAPB/ADAP/AIAP/MEDCAP application must be used for enrollment documentation with required documents. The client's official record must show eligibility screening is updated annually and every Six Months according to Date of Birth (DOB).

Please see Annual and Six Month Recertification Schedule: http://www.adph.org/aids/assets/RWHAP_AnnualCertification_6MonthRecertSchedule_Jan2017.pdf

3. Client Financial Assessment

The Alabama RWHAPB Services/ADAP/AIAP/MEDCAP application determination process with the accompanying verification/documentation is reviewed during site visits by the RWHAPB Lead Agency representative and/or the ADPH representative to validate eligibility compliance with this standard.

STANDARD: Each client must be screened for income eligibility as established in this section **BEFORE** receiving Ryan White HIV/AIDS Part B funded services. The **RWHAPB/ADAP/AIAP/MEDCAP application process** must use the financial guidelines to establish financial eligibility before services can be rendered. Financial eligibility is determined when the required financial documentation is on file and before any RW services are provided. This eligibility information is kept in the client's official record for review during the Annual and Six Month CER updates according to Date of Birth (DOB) during CER and for record review.

A Client must have a total gross household income (before taxes) that is set by ADPH to match the State's ADAP requirement of total gross household income that is at or less than 400% of the current FPL.

Please see the Alabama Ryan White HIV/AIDS Program Part B Income Eligibility Guidelines:
http://adph.org/aids/assets/Alabama_RWHAP_PartB_IncomeEligibilityGuidelines_Feb2017.pdf

The Guidelines:

- Income information documentation must be included in the Client's file as required for review by the State's Ryan White Part B Recipient representatives and/or the Part B Lead Agency representatives.

- When determining the total household gross income the following information is provided:

The following types of documentation are examples of acceptable forms of income verification:

- ✓ Copy of most current W2, or 1040 (i.e. business owners - include Schedule C/1040EZ signed by client,

- ✓ Payroll stubs (2 months) dated current = within 90-days of intake,

- ✓ Statement from an employer on official company letterhead verifying gross pay for the 30-days prior to intake,

- ✓ Letter with current year's date from the Department of Social Security Services that documents receipt of benefits if applicable.

Income eligibility is based on the total gross income of the client. Gross income is income before deductions of income taxes, social security tax, etc. The income is factored when computing the percent of Federal Poverty Level (FPL).

- Family means a household comprised of the following:
- ✓ A household of ONE = the Client;
- ✓ A family household = the Client plus; ONE or MORE

- The poverty level percentage that corresponds to the client income and family size is located on the most current Federal Poverty Guidelines (FPL).

  The federal poverty guidelines change annually and can be accessed at:
  http://adph.org/aids/assets/Alabama_RWHAP_PartB_IncomeEligibilityGuidelines_Feb2017.pdf

- The Client must be at or less than 400% of the current FPL guidelines to meet the eligibility requirement to receive ADAP/AIAP/MEDCAP or other RWHAPB funded services. There is no asset requirement to meet eligibility for RWHAPB Services or ADAP/AIAP/MEDCAP.

- Clients reporting no income must briefly describe in the appropriate area on the application or as separate document to show how daily needs like food and shelter are being provided at initial intake and then again during eligibility reassessment twice a year as long as Client continues to report no income.

During the case management session, an unemployed Client should be provided information regarding filing for unemployment compensation benefits. Case notes must provide documentation of any counseling and assistance provided the Client in applying for unemployment compensation insurance.

4. Alabama Residency Verification

The Alabama RWHAPB Services/ADAP/AIAP/MEDCAP Eligibility Determination application with the required verification/documents is used during a site visit by the RWHAPB Lead Agency representative and/or the ADPH representative to validate compliance with this standard.

Standard: *A person must have a permanent Alabama address at the time of the eligibility determination. A physical living address (as well as a mailing address if the two are not the same) is sufficient for documentation purposes. A PO Box alone is not sufficient documentation of a physical Alabama address.*

The Guidelines:

- A client who does not reside in Alabama is not eligible for services and should be referred to other appropriate agencies.

- Documentation of current Alabama address must be provided at application and reassessment every 6 months. (Current = within 90 days of date of completed reassessment)

- As client who spends time in Alabama but maintains a permanent residence in another state must access services in that state.

- Clients do not have to document citizenship or immigration status in order to be eligible for Ryan White HIV/AIDS funded services.

NO EXCEPTIONS
- All Ryan White HIV/AIDS Part B program applicants must adhere to eligibility guidelines across all of the RWHAPB service areas.

EXCEPTIONS
- There may be unusual circumstances which require an exception to the established process. Flexibility to ensure clients in need receive services is sometimes warranted. When in doubt, staff determining the eligibility status of a person must refer all questions to their supervisor and/or the Ryan White Part B Lead Agency Representatives to secure a final decision prior to providing any Ryan White HIV/AIDS Part B funded services.

EMERGENCY SERVICES
- Referrals for emergency services should be made available to a person who is HIV positive, is pending eligibility and has an emergency need. Documentation of the circumstances should be included in the file. The Client must complete eligibility determination within thirty (30) days of date emergency services were started and be determined eligible to continue to receive those services.

Revised March 2018

ADAP's Medicare Part D Client Assistance Plan (MEDCAP)

Alabama's ADAP sponsored Medicare Part D Client Assistance Plan (MEDCAP) provides assistance with monthly insurance premiums and co-pays of all medications currently on the Blue Cross/Blue Shield's Blue Rx Option II Medicare Part D plan's formulary excluding controlled substances. MEDCAP instructions may be accessed by going to the Drug Assistance Program web page at:
http://adph.org/aids/assets/Alabama_RWHAP_PartB_IncomeEligibilityGuidelines_Feb2017.pdf

- MEDCAP applicants must complete the Annual MEDCAP application. Eligible enrollees must complete the Annual and the Six Month CER process. Medicare and Medicare Part D open enrollment begins October 15 thru December 7 of each year. MEDCAP applicants and enrollees completing the Annual MEDCAP CER and confirmed as eligible to enroll in Alabama's MEDCAP must meet the following enrollment criteria:

- A new Alabama MEDCAP applicant or active Annual CER enrollee must provide documentation of current legal Alabama address.

- A Client must have a total gross household income (before taxes) that is set by ADPH to match the State's ADAP requirement of total gross household income that is at or less than 400% of the current FPL.

  Please see the Alabama Ryan White HIV/AIDS Program Part B Income Eligibility Guidelines:
  http://adph.org/aids/assets/Alabama_RWHAP_PartB_IncomeEligibilityGuidelines_Feb2017.pdf

- For first time MEDCAP applicant's acceptable documentation to establish HIV positive diagnosis would be a copy of any laboratory result confirming an HIV/AIDS diagnosis or a statement from a clinician confirming a history of HIV/AIDS diagnosis. (CD4/VL results not used as proof of HIV status)

- Apply thru a Social Worker/Case Manager or Clinician

- A client who does not meet the ADAP eligibility criteria is NOT eligible to participate in MEDCAP.

- Provide documentation of successful enrollment in Blue Cross/ Blue Shield's Blue Rx Option II Medicare Part D Plan for the enrollment year.

- MEDCAP enrollees must complete the annual MEDCAP eligibility determination process beginning October 15 thru December 7, and be confirmed as eligible to enroll in Alabama's ADAP after meeting the following enrollment criteria:

- The MEDCAP applicant must recertify twice a year or every six month updates can be completed through Service Point*. MEDCAP clients utilizing private providers will need to complete a paper application/recertification twice a year or every 6 month with additional required attachments for review at the provider site.

- An Alabama resident must provide verification/documentation of current legal Alabama address.

- Total gross (before taxes) Household Income at or below 400% of the Federal Poverty Level (FPL), and provide verification/documentation of current total household income.

- HIV diagnosis confirmed with positive lab test documentation for *ONLY* first time MEDCAP applicants.

- Apply thru a Social Worker/Case Manager or Clinician

- A client who does not meet ADAP eligibility criteria is NOT eligible to participate in MEDCAP.

- Provide verification/documentation of successful enrollment in Blue Cross/ Blue Shield's Blue Rx Option II Medicare Part D Plan for the enrollment year.

IMPORTANT: *Clients eligible to enroll in Part D for medication services and chooses not to enroll in a Part D plan OR are enrolled in another Part D plan other than MEDCAP's single Part D plan will NOT be eligible for ADAP services.*

- All MEDCAP applicants MUST apply for Low Income Subsidy (LIS) Assistance ("Extra Help") at the beginning of each new Part D enrollment year.
- Apply for the Low Income Subsidy Assistance (Extra Help) by contacting the Social Security Administration (SSA) by calling 1-800-722-1213, or by visiting the Social Security website at www.ssa.gov.

- Submit a letter of denial for Low Income Subsidy Assistance (Extra Help) from the Social Security Administration for the new enrollment year with the MEDCAP application.

- Applying for Low Income Subsidy Assistance (Extra Help) will not disqualify Medicare Part D Ryan White HIV/AIDS Part B service clients needing Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals.

- Self-attestation eligibility criteria may be utilized during a six month recertification process if it fulfills the State/Territory's requirements for verifying an individual's income status, residency status, and insurance status. If the client reports any changes to eligibility criteria, the recipient must obtain documentation of the changes, and their impact on the client's continued eligibility for the Alabama's RWHAPB MEDCAP program.

NOTE: *A worksheet from the Social Security web site will be accepted to process the application until an official denial letter is received from Social Security and submitted to the ADAP office for processing.*

Contacts for MEDCAP enrollment questions:

Gloria Sims, RN, MSN – Nurse Manager at 334-206-2094
Ryan White HIV/AIDS Part B Services & MEDCAP
Gloria.Sims@adph.state.al.us

Rosa Albright – Medical Eligibility Specialist (MES) at 334-206-9439
Rosa.Albright@adph.state.al.us

Stephanie Houser – Administrative Support Assistant (ASA) II at 334-206-2619
Stephanie.Houser@adph.state.al.us

ADAP's Alabama Insurance Assistance Program (AIAP)

Alabama's ADAP sponsored Insurance Assistance program (AIAP) provides assistance with monthly insurance premiums, co-pays and deductibles with access to all medications currently on the Blue Cross/Blue Shield's Blue Gold Plan's formulary including controlled substances.

- AIAP enrollees must complete the annual AIAP application process *each year*, and be confirmed as eligible and enrolled in Alabama's ADAP and meet the following enrollment criteria:

- An Alabama resident, and provide legal documentation of current Alabama address.

- Total gross (before taxes) Household Income at or below 400% of the Federal Poverty Level (FPL), and provide documentation of current total household income.

- HIV diagnosis with a positive confirmatory lab test document for first time ONLY AIAP applicants.

- The AIAP enrollees must complete a Client Eligibility Review (CER)/recertification twice a year to remain actively enrolled in the program. Failure to complete (CER) with the specified timeline will result in termination from the program due to non-compliance with CER/recertification. (No Exceptions)

- The clients must keep the Case Manager informed of any changes.

- A client who does not meet the ADAP eligibility criteria is NOT eligible to participate in AIAP.

- Completed Alabama Insurance Assistance Program (AIAP) applications will be processed during the Plans Open Enrollment period.

- As part of the AIAP application process and the BCBS determination process of the BCBS portion of the BCBS application client signature is required in the specified section of the AIAP application and must be signed – The AIAP application can be accessed on the UWCA Ryan White website through the Service Point* portal.

- Successful enrollees into the Blue Cross/ Blue Shield's Plan will be notified by the Blue Cross/Blue Shield Office. Insurance cards will be mailed from the Blue Cross/Blue Shield Office.

Revised March 2018

- A secondary insurance card will be available through State AIDS Service Organization (ASO) provider clinics. Case managers will provide instructions on how to use insurance benefits.

- Client must present secondary insurance cards along with the Blue Cross/Blue Shield insurance card to any participating in-network health care providers to bill ADPH/UWCA for health care co-pays.

- Incomplete AIAP applications will be rejected and the reapplying process may delay benefits. Please make sure all supporting documentation is included in the application before application is submitted.

- AIAP clients who did not complete CER and want to keep expanded health insurance coverage will be given an opportunity to pay their monthly premiums and co-pays until the next open enrollment period. If AIAP enrollees do not want to pay monthly premiums these clients will be discontinued from the ADAP Alabama Insurance Assistance Program (AIAP).

- Self-attestation of eligibility criteria may be utilized during a six month recertification process if it fulfills the State/Territory's requirements for verifying an individual's income status, residency status, and insurance status. If the client reports any changes to eligibility criteria, the recipient must obtain documentation of the changes, and their impact on the client's continued eligibility for the Alabama's RWHAPB AIAP/HPAL.

NOTE: Alabama Insurance Assistance Program (AIAP) has an annual enrollment process during the plans open enrollment period. New, Reapplying and Active Eligible ADAP clients who miss the insurance enrollment period will remain on ADAP until the next open enrollment period.

Clients who meet eligibility criteria for ADAP can enroll into the Alabama Insurance Assistance Program (AIAP) at anytime with a qualifying life event. Additional documentation will be required.

ADPH Contact Information:

ADPH Eligibility Hot line telephone number: 1-866-674-9964
Tabitha Smith/Medical Eligibility Specialist II - 1-334-206-3911
Connickle Moore/Medical Eligibility Specialist I - 1-334-206-2602
Rosa Albright/Medical Eligibility Specialist I – 1-334-206-9439
Stephanie Houser/ASA II – 1-334-206-2619
Nataki Ruggs/ASAII – 1-334-206-2606

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UWCA Contact Information:

UWCA 800 telephone number to Health Claims Department - 1-888-492-9161
Evita McDaniel (emcdaniel@uwca.org) - Health Claims Insurance Specialist/UWCA
Holly Mitchell-Levine (hmitchelllevine@uwca.org) - Data Specialist/UWCA

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