

**Ryan White Part A, C, and D Eligibility Guidelines**  
**Updated May 12, 2014**

**INTRODUCTION**

Ryan White Parts A, B, C, and D in the state of Nevada have worked diligently to simplify the eligibility and paperwork process for clients accessing Ryan White services in Nevada. Utilization of generalized “Ryan White” eligibility guidelines and application procedures and paperwork permits a more streamlined process easing the provider burden while facilitating ease of access for clients to engage in Ryan White Part A, B, C, and D services in the state of Nevada.

The eligibility guidelines and paperwork for each Ryan White part mirror one another in most aspects. Clients will still be required to complete their eligibility for each Ryan White Part at those respective agencies, except for Ryan White Parts A and C who use the same application. Part A and C eligibility and re-certification can be completed at the same time at UMC Wellness. If eligibility is completed at another Part A agency, the eligibility specialist/case manager completing the eligibility or re-certification must send a complete application packet within 90 days of the initial appointment to the Part C eligibility specialist at UMC Wellness. The 90 day period always starts on the date of the initial appointment, and includes the 30 day grace period for pending documents. For example: a client had an eligibility appointment for Part A on January 1, 2013, and is pending from January 1, 2013 to February 1, 2013; the Part A agency that established eligibility would need to have a complete eligibility packet to the Part C eligibility specialist by March 31, 2013. The Ryan White Part B program in Nevada has a separate but similar eligibility application and guidelines. Please consult their policies for more information on Part B eligibility.

Eligibility specialists or case managers from each Part will meet directly with applicants to assist in completing the generalized application and gather pertinent documentation for eligibility. It is the expectation that each eligibility agency will provide the client with additional copies of each document, including the completed generalized application, to ease the eligibility burden when a client is applying for another Part of Ryan White services. Part A, C, and D agencies will still be using the client level data management system CAREWare, and Part B will still be using ARIES.

Eligibility can be completed for each Part at the following locations/agencies. While Mohave County Arizona residents will qualify for Part A services, they will not qualify for Part B or Part C services in Nevada but will need to seek those services in Arizona.

<b>Ryan White Part A Eligibility Agencies</b>	<b>Ryan White Part B Eligibility Agencies</b>	<b>Ryan White Part C Eligibility Agencies</b>
1. Aid for AIDS of Nevada (AFAN)	1. Access to Healthcare (AHN)	1. University Medical Center's Wellness Center (UMC)
2. AIDS Healthcare Foundation (AHF)		
3. Community Counseling Center (CCC)		
4. Community Outreach Medical Center (COMC)		
5. North Country Healthcare		
6. Nye County Health and Human Services		
7. Southern Nevada Health District		
8. University Medical Center's Wellness Center (UMC)		

**REQUIREMENTS FOR RYAN WHITE PART A, C and D ELIGIBILITY**

The following documentation (items 2-9) must be verified at each eligibility assessment and re-assessment appointment:

- 1) Proof of HIV infection (must be provided only on initial intake)
- 2) Proof of Residency (minimum of two items)/or the “Dependent Support Form” or the “Homeless Declaration Form”
- 3) Proof of Identification (Photo ID)
- 4) Proof of Household
- 5) Proof of Income Level (at or below 400% FPL)/or “Verification of No Income Form” or a “Self Employment Income Verification Form”
- 6) Medical Verification in the form of Labs (Labs are considered current if completed during the most recent six (6) months)-REQUIRED FOR PART B ELIGIBILITY-ENCOURAGED FOR PART A AND C ELIGIBILITY BUT NOT REQUIRED.
- 7) Proof of eligibility for health care coverage or a certificate of exemption from Nevada Health Link. If eligible for health care coverage, proof of insurance coverage. If eligible for health care coverage, but there is no proof of insurance coverage, there must be documentation of efforts made to enroll in health care coverage through the Nevada Health Link.
- 8) Proof of no insurance coverage.

**PROOF OF HIV INFECTION (Item #1)**

All clients must provide medical/legal documentation of HIV Infection. This documentation must be verified at the initial eligibility assessment only. One of the following acceptable documents is required:

1. Western Blot
2. Physician Letter (on Letterhead) signed by M.D. indicating person is HIV positive and diagnosis date. 77
3. Quantitative Viral Load Test with value when accompanied by a Physician Letter stating HIV positive diagnosis and diagnosis date.
4. Positive HIV immunoassay and positive HIV Western Blot.
5. Positive HIV immunoassay and detectable HIV RNA.
6. Two positive HIV immunoassays (should be different assays based on different antigens or different principles).

**PROOF OF RESIDENCY (Item #2)**

All clients must provide proof of residency by providing a MINIMUM OF TWO ITEMS from the list below. The documents must be dated and current. United States citizenship is not a requirement of Ryan White Part A or C eligibility.

Ryan White <b><u>Part A</u></b> Residency Requirements	Ryan White <b><u>Part C</u></b> Residency Requirements
<b><u>Client must be a resident of Clark County Nevada, Nye County Nevada, or Mohave County Arizona.</u></b>	<b><u>Client must be a resident of Clark County Nevada.</u></b>
a. Current Lease/Rental Agreement (Agreement’s that have expired and client is on a month to month lease are NOT ACCEPTABLE)	a. Current Lease/Rental Agreement (Agreement’s that have expired and client is on a month to month lease are NOT ACCEPTABLE)
b. Rent/Mortgage Receipt (dated within the last 30 days)	b. Rent/Mortgage Receipt (dated within the last 30 days)
c. Utility Bill (dated within the last 30 days)	c. Utility Bill (dated within the last 30 days)
d. Affidavit of Living Arrangement (dated within the last 30 days)	d. Affidavit of Living Arrangement (dated within the last 30 days)
e. Letter for Government Agency	e. Letter for Government Agency
f. Voter Registration/Vehicle Registration	f. Voter Registration/Vehicle Registration
	g. Prison Release Papers

<p>g. Prison Release Papers</p> <p>h. Current Nevada or Arizona Driver's License (verify address is within one of the county limits)</p> <p>i. Current Nevada or Arizona DMV Identification Card (verify address is within one of the county limits)</p> <p>j. County Social Services Card</p> <p>k. Consulate Identification Card(verify address is within one of the county limits)</p> <p>l. Resident Alien Card (verify address is within one of the county limits)</p> <p>m. Other verifiable government-issued photo ID with address. (verify address is within one of the county limits)</p> <p>n. If applicant is dependent on others for housing and support the applicant must have the family member or friend completed the <u>dependent support form</u> provided in the application packet. The family member or friend <u>must</u> provide proof of residence with the current utility bill, rent,/mortgage receipt, etc. (verify that address is within one of the county limits).</p> <p>o. Homeless Declaration Form</p> <p>p. tax return with Clark, Nye, or Mohave County residence</p> <p>p. Tax Return with Clark, Nye or Mohave County address</p> <p>q. Proof of property taxes paid in Clark, Nye or Mohave County</p>	<p>h. Current Nevada or Arizona Driver's License (verify address is within Clark County)</p> <p>i. Current Nevada or Arizona DMV Identification Card (verify address is within Clark County)</p> <p>j. County Social Services Card</p> <p>k. Consulate Identification Card(verify address is within Clark County)</p> <p>l. Resident Alien Card (verify address is within Clark County)</p> <p>m. Other verifiable government-issued photo ID with address. (verify address is within Clark County)</p> <p>n. If applicant is dependent on others for housing and support the applicant must have the family member or friend completed the <u>dependent support form</u> provided in the application packet. The family member or friend <u>must</u> provide proof of residence with the current utility bill, rent,/mortgage receipt, etc. (verify that address is within Clark County).</p> <p>o. Homeless Declaration Form</p> <p>p. tax return with Clark or Nye residence</p>
---	---

### **PROOF OF IDENTIFICATION (Item #3)**

All clients must present proof of identification. This can be in the form of a current government issued Identification Card, or officially sanctioned photo identification. One of the following documents is required:

- a. Current Nevada Driver's License
  1. Arizona or Nevada Drivers License will suffice for Part A services
- b. Current Nevada DMV Identification Card
  1. Arizona or Nevada DMV Identification Card will suffice for Part A services
- c. Passport/Foreign Country ID
- d. INS papers/Permanent Resident Card
- e. Government issued photo ID card
- f. Consulate Card
- g. Resident Alien Card (U.S. citizenry not required)
- h. Social Security Card or Birth Certificate; must be in conjunction with a picture ID as described in a-g.
- i. Prison ID

Ryan White clients MAY NOT change their name or social security number without documentation from the courts authorizing a legal name or social security number change. If clients do not have the required documentation, eligibility specialists are not authorized to change this information. Clients who wish to change their names to match their gender identification may not do so without a legal document issued by the courts to change their name/social security number.

### **For Ryan White Part A and C Eligibility Only**

Identification Card other than Nevada (Nevada or Arizona for Part A) will be accepted for new clients only. Clients should have local Identification Card at the 6-month eligibility redetermination appointment or their services will be terminated unless extenuating circumstances apply which must be noted in CAREWare. Acceptable extenuating circumstances include; obtaining a birth certificate or other legal document necessary in order to obtain proper Nevada or Arizona identification.

### **PROOF OF HOUSEHOLD (Item #4)**

All clients must provide proof of household. The household consists of the tax filing unit. For individuals who do not file a tax return and are not claimed as a tax dependent, household size is the individual and the following (if living with the individual): spouse/registered domestic partner; natural, adopted, and step

children (those under age 21). If applicant is a child, household would include natural, adopted, and step parents and natural, adopted, and step siblings.

Client must provide following documentation where applicable:

- a. Tax return
- b. Marriage license
- c. Domestic partner registration form
- d. Birth certificates of dependents in household

**PROOF OF INCOME LEVEL (Item #5)**

All clients must present proof of income, not to exceed 400% of the federal poverty level (FPL) based on their Modified Adjusted Gross Income (MAGI).

Documentation must be dated 30 days before the date of eligibility appointment.

ALL APPLICABLE DOCUMENTS MUST BE SUBMITTED:

- a. Copy of **one month** of most current pay stubs of client, client's spouse or registered domestic partner. Gross income is the determining amount.
- b. Copy of disability, SSI, retirement, pension statements VA, child support/alimony, unemployment benefits, etc. award letter or copy of check of client/client's spouse.
- c. IRS statement of income for client/client's spouse for the year immediately preceding the application; and signature on the 4056T IRS form.
- d. Profit and Loss Statement from self-employment of client/client's spouse for the most current quarter.
- e. Statement of no income
- f. Statement of cash assistance
- g. Bank statements with direct deposits, must be in conjunction with check stubs
- h. Pre-paid debit card statements
- i. IF APPLICANT IS DEPENDENT ON OTHERS FOR HOUSING AND FINANCIAL SUPPORT, THE APPLICANT MUST HAVE THE FAMILY MEMBER OR FRIEND COMPLETE THE DEPENDENT SUPPORT FORM PROVIDED IN THE APPLICATION PACKET. THE FAMILY MEMBER OR FRIEND ***MUST*** PROVIDE PROOF OF RESIDENCE WITH CURRENT UTILITY BILL, CURRENT RENT RECEIPT, ETC.

- Repairs to primary residence to maintain habitability (no cosmetic work allowed)
- Purchase or repairs to major appliances in residence
- Modifications to primary residence and/or vehicle to accommodate disability
- Payment of credit card debt incurred prior to the receipt of a lump sum
- Legal promissory notes entered into prior to eligibility appointment
- Job related expenses

### **LABS (Item #6)**

Medical Verification in the form of Labs (Labs are considered current if completed during the most recent six (6) months)-REQUIRED FOR PART B ELIGIBILITY- ENCOURAGED FOR PART A AND C ELIGIBILITY BUT NOT REQUIRED. As the purpose of Ryan White services is to keep clients in medical care and adherent to medication through medical and support services reviewing client labs is an essential part of care. Part A however will not deny eligibility based on the absence of lab paperwork, however, it is strongly encouraged that clients bring a copy of their labs in for review.

### **Insurance Eligibility or Exemption from Nevada Health Link (Item #7) (required on an annual basis,).**

Clients must provide proof of Nevada Health Link application and resulting eligibility or certificate of exemption. Nevada Health Link applications and resulting eligibility or exemption must be provided annually. Clients who are undocumented do not need to have proof of application through the Nevada Health Link because they will automatically not qualify. However, any other client, even if you know they won't qualify because of income etc, must submit an application for health coverage through the Nevada Health Link. The application, resulting eligibility or exemption, and documentation of attempts made to enroll the client must be kept in the client chart with their eligibility documents to ensure the all prior resources were exhausted prior to using Ryan White resources.

Clients with VA benefits-VA benefits are not considered a prior resource so clients may either use their VA medical benefits and/or their Ryan White Part A benefits.

### **EXISTING INSURANCE COVERAGE (Item #8)**

Insurance Verification Letter from Employer or insurance benefit package if client has current insurance that needs to be evaluated for adequate coverage. The applicant's enrollment in existing insurance or medical coverage DOES NOT disqualify them from Ryan White services. Individuals that are covered by Indian Health Services or those covered by Veterans' benefits may qualify for Ryan White services. HRSA does not disqualify these applicants. Clients will NOT be eligible for Ryan White Part A medical coverage if they have health insurance that covers HIV related medical expenses. If the client does have health insurance that covers HIV related medical expenses but at a very small amount that client may utilize Ryan White Part A medical care once their insurance benefit has been exhausted or if their insurance benefit does not apply to that HIV related medical expense. Insurance benefits should be reviewed by the case manager and a determination made. Please review the following examples:

- An applicant that is a veteran of the United States military may meet the Program criteria on all elements including income, assets, diagnosis, and residency. The individual may not need the ADAP program for medications but may need services such dental, vision, and ancillary services that the Veterans' Administration (V.A.) does not cover in their particular case. Obtain verification records from the applicant to determine program eligibility. If the applicant meets the eligibility requirements, the individual will be deemed eligible for all services.
- If an applicant is a legally registered Nevada tribal member and has medical services available through Indian Health Service (IHS), the individual is still eligible to receive services through Ryan White per HRSA guidelines. For example, a Ryan White applicant who is a member of the Fallon Paiute Shoshone Tribe may meet the Ryan White Program criteria on all elements including income, assets, diagnosis, and residency. While the individual may have access to the IHS pharmacy, the Ryan White Part B Formulary may provide needed medications, HIV/AIDS specific case management and support services not available through IHS but is available through Ryan White Part A and B. If the applicant is a registered tribal member and meets the eligibility requirements, the individual will be deemed eligible for all available Ryan White services.
- Eligibility specialists should screen and document Ryan White applicants for access to insurance programs through employers, as well as spouses/significant others. This health insurance information will then be available for the Health Insurance Continuum Program (HICP) specialists that attempt to match clients with available insurance products that have the potential to reduce the direct costs to the Ryan White Part B Program.

**The regional eligibility specialist/case manager should NOT deny the applicant or any potential client due to existing pharmacy or medical insurance coverage. If the eligibility specialist/case manager has questions regarding a specific case please call the Eligibility Coordinator at the state Ryan White Part B program for Part B issues, or the Part A Grantee Office for Part A issues.**

#### **ADDITIONAL PROVISIONS**

- Ryan White application materials can be shared between Ryan White Parts A and C, however, application materials must be received within 90 days of the original application date for eligibility to be active. In a situation where paperwork is more than 90 days old it may be considered invalid and a new application for the respective part would need to be completed. The next review date will be 6 months from when the first application was completed. For example, if a Part A application is completed January 1 and then a Part C application is completed on March 3, the next review date will be July 31.



- If a client is deemed ineligible for services based on income the client may re-apply in 90 days. Appropriate paperwork/receipts/documentation must be provided when they return.
- Clients who are here on sponsorship by a U.S. Citizen from another country may be eligible for Ryan White Part A services. Eligibility should be determined by utilizing the sponsor's residency, household, income and asset documents. These clients must also have enrolled in health insurance through Nevada Health Link or have documentation of efforts made to enroll.

### RECERTIFICATION

- Regional eligibility specialists/case managers will update client eligibility files every six months.
- For Parts A and C, if there are no changes in eligibility requirements (e.g. income, health insurance status, etc.) clients only need to self-attest that there have been no changes at the re-certification appointment. To self-attest, the eligibility specialist will print out a copy of the one page client report from the Demographics tab in CAREWare. The client will write on the report that there have been no changes and sign. In addition, the client will sign a copy of page 6 of the Part A and C registration form.
- If there are changes in income, health insurance status, etc. client will need to bring relevant documentation to the reassessment appointment, an eligibility application will need to be completed with new information only, and the client's CAREWare account will need to be updated to reflect any changes.
- Part A and C recertification of eligibility must be done in person or via telephone for clients residing in rural areas of the TGA.
- Part A and C clients may be given a grace period for the completion of the recertification process. A 30 day grace period will be allowed for clients who are pending eligibility documents in order for the client to obtain necessary documentation. The grace period begins on the date of the eligibility determination/redetermination appointment. Staff must complete the annual review screen in CAREWare to ensure that other agencies know what documents are pending and the current eligibility specialist working with that client. When clients finalize their eligibility the 30 day grace period is included in the 6 months. For example: A client is pending from January 1, 2013 to February 1, 2013; the client would need to recertify by July 31, 2013.
- If a client has not recertified prior to the expiration of their current benefits, they will be dropped from all elements of the Ryan White program. If a waiting list were to be present at this time, the individual that did not recertify in a timely fashion would be placed at the end of the waiting list.

## **ELIGIBILITY DETERMINATION AND END DATE CHART**

<b>Eligibility Determination (any day during that month)</b>		<b>Eligibility End Date (redetermination must be done by last day of the month)</b>	
January	1	July 31st	7/31
February	2	August 31st	8/31
March	3	September 30th	9/30
April	4	October 31st	10/31
May	5	November 30th	11/30
June	6	December 31st	12/31
July	7	January 31st	1/31
August	8	February 29th	2/29
September	9	March 31st	3/31
October	10	April 30th	4/30
November	11	May 31st	5/31
December	12	June 30th	6/30

### **PRESUMPTIVE ELIGIBILITY FOR EARLY INTERVENTION SERVICES PROGRAM CLIENTS**

Due to the nature and mission of the EIS program and the clients it serves, EIS clients are to be determined to be presumptively eligible for Part A services for six months. Presumptive eligibility begins on the date test results are given to the client and ends the last day of the sixth month or at such time as the standard eligibility requirement can be fulfilled, if prior to the last day of the sixth month. Upon determination of eligibility, the EIS client will either be referred to a Part A provider for services or to other publicly funded service providers.

### **APPEALS PROCESS**

A client may appeal the eligibility determination performed by a provider by using the agency's grievance/appeals process. In situations where the provider wishes to appeal the eligibility standards on a client-by-client basis, the agency's executive director (or their designee) should contact the grant administrator to discuss the specifics of the appeal. Appeals will be considered on a case-by-case basis. Any decisions rendered through the discussions between the grant administrator and the executive director must be recorded in the agency's client file.

### **REQUIRED FORMS FOR INITIAL INTAKE/INITIAL ELIGIBILITY APPOINTMENT**

The specific forms below must be included in each client chart for their initial eligibility appointment. During each annual audit paperwork will be reviewed according to the list below and findings will occur if not provided:

1. Ryan White Part A Registration Cover Letter
2. Ryan White Application Form (Same application for Part A and C)

3. Medical Case Management Screening Tool
4. Acuity Form
5. Individual Service Plan
6. Ryan White Part A Eligibility Documents Checklist (filled out with supporting documentation included)
  1. Proof of HIV infection (only needed at initial determination)
  2. Proof of Residency (minimum of two items)/or the “Dependent Support Form” or the “Homeless Declaration Form”
  3. Proof of Identification (Copy of Photo ID)
  4. Proof of Household documentation
  5. Proof of Income Level (at or below 400% FPL based on MAGI)
  6. Viral Load and CD4 count (within the last 6 months; not required but strongly encouraged)
  7. Proof of eligibility for health care coverage or a certificate of exemption from Nevada Health Link. If no proof, must complete insurance verification form documenting attempts to enroll in Medicaid or private insurance through the Nevada Health Link (does not apply to undocumented clients)
  8. Proof of no insurance or inadequate insurance coverage.
7. Consent for Release of Confidential Information
8. Statement of Consumer Rights
9. Acknowledgement of Receipt of Notice of Privacy Practices
10. Grievance Procedure

**REQUIRED FORMS FOR EACH ELIGIBILITY RE-DETERMINATION APPOINTMENT**

If there are no changes in income, insurance status, etc., clients can self-attest that there have been no changes at the re-determination appointment. The client will review and sign a copy of their CAREWare client report that contains demographic and annual review information confirming there have been no changes. In addition, the client will sign a copy of page 6 of the Part A and C registration form. If there are changes, the forms below specific to the change must be included in each client chart for each eligibility redetermination appointment (every 6 months). During each annual audit, paperwork will be reviewed according to the list below and findings will occur if not provided:

1. Printout of Demographics Screen in CAREWare (updated with any changes since the last visit)
2. If no changes, signed copy of CAREWare client report as self-attestation of no changes in demographic or annual review information
3. Pages 2-3 of the Part A and C Registration Form (this is necessary if the client has had any changes in their financial or household status)

4. Page 6 of the Part A and C Registration Form (this is the signature page and the client should sign it every 6 months to indicate that their demographic information and annual review screen information is accurate)
5. Medical Case Management Screening Tool
6. Acuity Form
7. Individual Service Plan
8. Ryan White Part A Eligibility Documents Checklist (filled out with supporting documentation included)
  - a) Proof of Residency (minimum of two items)/or the “Dependent Support Form” or the “Homeless Declaration Form”
  - b) Proof of Identification (Copy of Photo ID)
  - c) Proof of Household documentation
  - d) Proof of Income Level (at or below 400% FPL)
  - e) Viral Load and CD4 count (within the last 6 months; not required but strongly encouraged)
  - f) Proof of eligibility for health care coverage or a certificate of exemption from Nevada Health Link or documentation of attempts to enroll in Medicaid or private insurance through the Nevada Health Link (does not apply to undocumented clients)
  - g) Proof of no insurance or inadequate insurance coverage.
9. Consent for Release of Confidential Information
10. Statement of Consumer Rights
11. Acknowledgement of Receipt of Notice of Privacy Practices
12. Grievance Procedure