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Ebony Fortune, Ryan White	Lena Lago, Ryan White	
Program Manager	Recipient	
SUBJECT		

#### SUBJECT

Enrollment and Eligibility Requirements for Ryan White HIV/AIDS Program (RWHAP) Services

### **PURPOSE**

The purpose of this policy document is to outline expectations for determining customer eligibility to receive Ryan White medical and/or support services and to provide general guidance on the use of the Centralized Eligibility System.

#### **DEFINITIONS**

**ADAP:** AIDS Drug Assistance Program (ADAP) provides HIV-related prescription drugs to underinsured and uninsured individuals living with HIV/AIDS.

**Affected Individual:** People not identified with HIV that may be eligible for HRSA RWHAP services in limited situations, but these services for affected individuals must always benefit the person living with HIV (PLWH).

**Centralized Eligibility System:** A system whereby network providers can upload and access Ryan White HIV/AIDS Program services eligibility fields and documentation for shared customers. Eligibility records and supporting documents will be viewable across providers of shared customers.

**Documentation:** Includes a customer's proof of ID, proof of diagnosis, proof of residency, documentation of income, and verification of insurance in order to be eligible and receive Ryan White HIV/AIDS Program services.

**Early Intervention Services (EIS):** A Ryan White service category that focuses on the identification of individuals at points of entry and access to services. It includes the



provision of targeted HIV testing, referral services, linkage to care, and health education/literacy training that enable clients to navigate the HIV system of care.

**Eligible Metropolitan Area (EMA):** Geographic regions that are heavily impacted by a particular disease, disparity and/or inequity of health, in this case, HIV/AIDS, and are appropriate for funding as deemed by the Health Resource and Services Administration (HRSA). According to the HRSA, Metropolitan areas with a cumulative total of more than 2,000 cases of AIDS during the most recent 5-year period and a population of 500,000 or more are eligible for funding as Eligible Metropolitan Areas (EMAs). Twenty-two regions qualify as EMAs. Continued eligibility as an EMA is contingent on having 2,000 or more cases of AIDS during the most recent 5 years and a cumulative total of 3,000 or more living AIDS cases as of recent calendar Available the most year. https://hab.hrsa.gov/livinghistory/timeline/2006.htm

The Washington, DC, Eligible Metropolitan Area (DC EMA) consists of the following:

- District of Columbia (Washington, DC)
- Northern Virginia: City of Alexandria, Fairfax City, Falls Church City, City of Fredericksburg, Manassas City, Manassas Park City, and the <u>counties</u> of Arlington, Clarke, Culpeper, Fairfax, Fauquier, King George, Loudoun, Prince William, Spotsylvania, Stafford and Warren
- Counties of Suburban, Western and Southern Maryland: Prince George's County and Montgomery County (Suburban), Frederick County (Western), Calvert County and Charles County (Southern)
- West Virginia: Berkeley County and Jefferson County

Eligibility: The state of having the right to do or obtain something through satisfaction of the appropriate conditions. For the Ryan White program customers or family/household members must provide requested documents to establish eligibility for Ryan White funded services. Legislation under The Ryan White HIV/AIDS Program Comprehensive AIDS Resources Emergency (CARE) Act provides a set of criteria that qualify participants to receive and/or deliver services. The RWHAP requires proof of residence/residency, income, HIV sero-status. Available at: <a href="https://hab.hrsa.gov/sites/default/files/hab/Global/pcn1302clienteligibility.pdf">https://hab.hrsa.gov/sites/default/files/hab/Global/pcn1302clienteligibility.pdf</a>

**Enrollment:** To actively enroll in a RWHAP in order to provide a continuum of healthcare and support services.

**Insurance Status:** An individual's status regarding whether they have an insurer to pay for their health care claims. There are several insurance status categories. These include employer-sponsored insurance, Medicaid, Medicare, DC Alliance, and other entitlement programs referred to as third parties. Individuals enrolled in such programs are considered *insured*. Sometimes the limits imposed by insurers/third parties do not cover the health or support services needed. These individuals are



under insured. Finally, individuals without any type of insurance coverage are uninsured.

**Intake:** A process that involves case finding, customer screening, and determination of eligibility for services, dissemination of program information, and other related activities.

**No Income Statement:** Signed and dated documentation indicating that there is no source of income.

Part B Status Neutral Program: A comprehensive program that improves linkage and adherence to evidence-based biomedical interventions (such as, PrEP for HIV-negative individuals and ART for HIV-positive individuals). It includes four components of coordination: case finding/linkage to care/navigation services; rapid prescription of biomedical interventions (ART/PrEP); treatment adherence and retention strategies; and customer re-engagement and recapture efforts.

Policy Clarification Notice 21-02 (PCN 21-02): Outlines the Health Resources and Services Administration HIV/AIDS Bureau (HAB) guidance for Ryan White HIV/AIDS Program HIV/AIDS Program (RWHAP) recipients and subrecipients for determining client eligibility and complying with payer of last resort requirement while minimizing the administrative burden and enhancing continuity of care and treatment services.

**Personally Identifiable Information (PII):** any information that permits the identity of an individual to be directly or indirectly inferred, including any information that is linked or linkable to that individual, regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.

**Re-entry/Returning Citizen:** The transition from incarceration back into the community.

**Release of Information:** The authority to release a specific portion of the customer's medical record.

**Residency:** Documented evidence of the city, state, and county where a potential RWHAP customer intends to live.

**Ryan White HIV/AIDS Program:** The program funded by the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. A Federal legislation created to address the health care and service needs of people living with HIV/AIDS (PLWHA)



disease and their families in the United States and its territories. The law emphasizes providing lifesaving and life-extending services for people living with HIV/AIDS.

**Ryan White HIV/AIDS Program Customer:** Individuals who meet the Ryan White HIV/AIDS Program eligibility criteria to receive HIV/AIDS treatment and related services as prescribed within the servicing EMA.

## Ryan White HIV/AIDS Program Eligible Service Categories

Early Intervention Services Emergency Food Assistance

Food Bank and Home-Delivered Meals Health Education and Risk Reduction
Health Insurance Premium Home and Community-Based Care

and Cost-Sharing Program Housing Services

Linguistic Services Medical Case Management Medical Nutrition Therapy Medical Transportation

Mental Health Services Non-Medical Case Management

Oral Health Outpatient Ambulatory Health Services

Outreach Services Other Professional Services
Substance Abuse Outpatient Services Psychosocial Support Services

Service Categories as listed in PCN 16-02, found here:

https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/service-category-pcn-16-02-final.pdf

**Self-Attestation:** When customers sign and date an established form to indicate that there have been no changes to their Ryan White HIV/AIDS Program eligibility status or most recently provided documentation with regard to residency, income, and insurance status. Unless explicitly stated, self-attestations can only be used every other year.

**Self-Employment:** When a person generates income through their own profitable efforts (their own business or odd jobs), rather than receiving a salary as an employee.

**Third Party Reimbursement:** Compensation for services provided by a third party, rather than the person receiving the services.

# Enrollment and Eligibility Requirements

In accordance with Health Resources and Services Administration (HRSA) Policy Clarification Notice (PCN-21-02), DC Health requires customers to be screened annually for Ryan White services. Unless explicitly stated, all documentation must be collected and dated within *12 months* of certification.

Customers seeking AIDS Drug Assistance Program (ADAP) services in the District of Columbia must be screened for eligibility *every six months* and are allowed to selfattest, to facilitate ADAP-specific, required reporting. Due to ADAP's rolling



enrollment, the most recent proof of income, address, and insurance is required. Unless explicitly stated, all documentation must be collected and dated within *six* (6) months of certification.

The following constitutes eligibility requirements for Ryan White HIV/AIDS Program (RWHAP) services:

 HIV-positive status: Upon initial intake, a one-time proof of confirmed diagnosis of HIV by a laboratory report (e.g., Western Blot, antibody test, detectable viral resistance test result, 4th generation testing, or detectable viral load test) or an official, signed and dated statement from a medical provider is required.

Affected individuals (with an HIV-negative status) may be eligible for services in limited situations. Services for affected individuals must always benefit a person living with HIV (PLWH) and may not continue after the death of said person. Services for affected individuals are permissible under the following circumstances:

- a) The service has as its primary purpose enabling the affected individual to participate in the care of a PLWH.
- b) The service directly enables a PWLH to receive needed medical or support services by removing an identified barrier to care.
- c) The service promotes family stability for coping with the unique challenges posed by HIV.

Early Intervention Services (EIS), the Ending the HIV Epidemic (EHE)-Wellness program and the Ryan White Part B Status Neutral program are the only provisions of service within the Washington, DC EMA that entail a status-neutral approach and provide direct services to individuals **regardless of HIV status**. EIS, EHE-Wellness and Part B Status Neutral focus on activities that meet the needs of disproportionately affected populations overall, rather than dividing services into either HIV prevention or HIV care.

- **Residency**: The acceptable documents for proof of residency in the Eligible Metropolitan Area (EMA) may include, but are not limited to:
  - o current lease or mortgage statement
  - deed settlement agreement
  - current identification (driver's license, learner's permit, or nondriver's identification) issued by a jurisdiction within the EMA
  - consulate-issued identification reflecting customer's residency within the EMA
  - o current federally recognized, tribal-issued ID card
  - current voter registration card



0	federal, state, or local department of corrections-issued ID (within
	60 days of release)

- o printout from offender search website (within 60 days of release)
- health insurance/utility bill (past 60 days)
- o property tax bill or statement (past 60 days)
- o rent receipt showing applicant's name and address (past 60 days)
- two consecutive pay stubs showing the applicant's name and current address (past 60 days)
- bank statement showing the applicant's name and current address (past 60 days)
- document from any federal/state/local government agency addressed to applicant (within 1 year)
- o active (unexpired) homeowner's or renter's insurance policy
- a signed and dated letter from a family member or friend attesting that the customer resides with them, at an address within the EMA
- o on-screen verification of Medicaid benefits on Medicaid.gov
- o DC Healthcare Alliance Proof of DC Residency form
- Signed and dated ADAP Recertification Self-Attestation Form, Maryland AIDS Drug Assistance Program (MADAP) Semiannual Verification Notice, or Virginia Medication Assistance Program (VA MAP) Recertification Application
- current (unexpired) membership photo ID card issued by a community-based organization, indicating the customer's name and address as well as the card's expiration date

Re-entry, Returning Citizens and/or Homeless: customers who lack a permanent, stable address must be able to demonstrate homelessness or other transient/temporary residency status through one of the following:

- a completed signed and dated Self-Attestation indicating homelessness or non-traditional habitation outside the boundaries of a physical address, institution, or homeless shelter
- a completed signed and dated statement from a Case Manager at a facility where the customer visits, resides, or receives services, attesting to the homeless status of the customer
- a completed signed and dated letter from a family member or friend attesting that the customer resides with them at an address within the EMA
- Insurance status: Enrollment in and/or eligibility for other payer sources generally disqualifies customers from receiving Ryan White services, EXCEPT during special instances where third party payment is unavailable (e.g., a waiting period; gaps in coverage; underinsured; missed open enrollment;



security and confidentiality concerns) and is demonstrable via supporting documentation. Sub-recipients should not deny veterans who have Veterans Administration (VA) health benefits from receiving Ryan White Services.

**Income:** Customer income may not exceed 500% of the Federal Poverty Level (FPL). Income sources should be reported by the applicant and any household members for whom customers have legal responsibility. For each income source, the applicant must indicate the gross amount, how often the income is received, and whether the income belongs to the customer or the customer's household member.

The following are acceptable forms of proof of income:

Income Source	Required Documentation
Work income (salaries, wages, tips, commissions, bonuses)	Paystub or earnings statement, showing the year-to-date earnings, hours worked, and dates covered by the paystub/statement (within the last 12 months)
	OR
	A letter from the employer (on company letterhead) showing the gross pay for the last 12 months
	OR
	A copy of the most recent federal, state, or local annual income tax return
Self-employment income	Business records (e.g., receipts, journals, manifests, etc.) within 12 months prior to application, indicating the type of business, gross income, and net income
	OR
	A copy of the most recent federal, state, or local annual income tax return



	OR
	An attestation from the customer indicating projected current annual income signed and dated (within 12 months of application)
Rental income	Copy of the current lease the customer has with tenants (12 months)
	OR
	A copy of the most recent federal, state, and local annual income tax return
Unemployment benefits	Unemployment paystubs (12 months)
	OR
	If the benefit is being directly deposited into a bank account, a bank statement can be used as proof of benefit if the statement lists where the deposited amount is coming from (12 months)
Notice from a government agency that verifies income eligibility	Letters from agencies (e.g., Medicaid, the Social Security Administration, Veterans Administration, etc.) indicating income or benefit amount (e.g., Supplemental Security Income (SSI)/Social Security Disability Insurance (SSDI), Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), etc.) (last 12 months)
Alimony/child support/pension/retirement	Statement of monthly income



	Self-reported income	Self-attestation reporting cash-only income
	No income	A "proof of no income" letter that identifies the source of the applicant's food and shelter. This letter shall be signed and dated by the customer and include a contact phone number
		OR
		Signed and dated zero-income attestation document showing the applicant's current address in the EMA
		OR
		Signed and dated letter from a supporting friend or family member stating how they support the applicant
Centralized Eligibility System Requirements	DC Health's Ryan White Program requires service providers to utilize a Centralized Eligibility (CE) System to document customer eligibility. CE enables Ryan White service providers and authorized HAHSTA staff to review customers' eligibility information and documentation using CAREWare.	
	For all Ryan White customers, the following documentation must be uploaded b providers during eligibility screening:	
	<ul> <li>HIV Status Verification</li> <li>Proof of Income</li> <li>Proof of Residency</li> <li>Proof of Insurance</li> <li>Release of Information Form (only for customers who consent)</li> </ul>	
	Note that all sub-recipients are expected to upload customer eligibility documents into CAREWare as soon as possible but no later than the 10 <sup>th</sup> business day of the following month.	
	Release of Information Form	
	The use of centralized eligibility by Ryan V EMA requires the use of a release of infor	•



	having their eligibility documentation uploaded and shared through the centralized eligibility system.
	The CE system stores eligibility documentation for Ryan White customers and is accessible by all the customer's network service providers. Since customer Personally Identifiable Information (PII) will be shared, it is imperative that providers obtain and upload a signed customer Release of Information (ROI).
	The core requirements to be included in the ROI document are:
	<ul> <li>A specific description of the information that will be used.</li> <li>The name of the authorized person and organization requesting the information.</li> <li>The name of the person and organization with whom the requestor will share the requested information.</li> <li>A specific description of the purpose of sharing the requested information.</li> <li>An expiration date for the disclosure which expires 365 days from the date of customer signature; and</li> <li>The signature of the individual, whose information is requested, or the signature of an authorized representative with a description of the representative's authority. 45 C.F.R. § 164.508(c)(1)(i)-(vi) (2013), http://www.ecfr.gov/cgi-bin/text-idx?SID=2bbfc70ecdc65bfa13c058b40b2f0314&amp;mc=true&amp;node=se45.1.164</li></ul>
	Guide Version 2022 for detailed release of information requirements.  Customers that do not consent to have their eligibility information shared across the Ryan White network of providers may opt out by signing an "Opt Out" statement.
Key Contacts	Ebony Fortune, Ryan White HIV/AIDS Program Manager 202.671.4900 or Ebony.Fortune@dc.gov
Related Documents, Forms and Tools	Centralized Eligibility User Guide     Policy Clarification Notice (PCN) 21-02