

Ryan White ABCD Common Guidance for Universal Eligibility and Enrollment



Four Different Enrollment Types



Full Enrollment Brand New Client

1. **Ryan White Registration Letter (CGD 15-58)**
2. **Application (CGD 15-53)**
3. **One Proof of Identification**
4. **Ryan White Notice of Privacy Practice (CGD 15-56)**
5. **Ryan White Eligibility/Enrollment Document Checklist (CGD 15-54)**
6. **Proof of Diagnosis**
7. **Current Labs (No older than 1 year from specimen collection date to appointment date)**
8. **Two proofs of Residency**
9. **All proofs of Income Level**
10. **Ryan White Household Composition Form (CGD 16-03)**
11. **Ryan White Survey of Existing Insurance Coverage (CGD 16-10) / (Insurance Cards*)**
12. **Other Documents (Grievance form, miscellaneous documents)**
13. **All Parts Consent for Release of Confidential Information (CGD 15-51)**



Full Annual Enrollment

1. Ryan White Registration Letter (CGD 15-58)
2. Application (CGD 15-53)
3. Ryan White Notice of Privacy Practice (CGD 15-56)
4. Document Checklist (CGD 15-54)
5. Current Labs (No Older than 1 year from specimen collection date)
6. Two proofs of residency
7. All proofs of Income Level
8. Ryan White Household Composition Form (CGD 16-03)
9. Ryan White Survey of Existing Insurance Coverage (CGD 16-10) / Insurance Cards*
10. Other Documents (Grievance form, miscellaneous documents)
11. All Parts Consent for Release of Confidential Information (CGD 15-51)

Not Required

Proof of Identification

Proof of Diagnosis



Recertification

1. Ryan White Registration Letter (CGD 15-58)
2. Six Month Self-Attestation Form (CGD 15-46)
3. Any Document(s) that correspond with a change

Not Required

Proof of Identification

Proof of Diagnosis

Lab Results

Backup documents of any information that did not change



Provisional Enrollment (New or Annual)

The Ryan White HIV/AIDS Programs have determined that the minimum required documents needed are:

Document	Where to Find it:
Universal Registration Letter Application	GCD 15-58 – found online
Proof of Identification	CGD 15-53 – found online Client brings in acceptable form of ID (for new clients only; returning Annual client who already have Proof of ID on file do not need this)
Privacy Practice Acknowledgement Document Checklist	CGD 15-56 found online
<u>One</u> Proof of Residency	CGD 15-54 – found online Client brings in <u>one</u> acceptable form of residency
MAGI Worksheet	CGD 15-52 – found online
Proof of Household Size	CGD 16-03 – found online
Survey of Existing Insurance Coverage	CGD 16-10 – found online
Other Documents (Grievance form, miscellaneous documents)	found online
All Parts Consent for Release of Confidential Information	CGD 15-51 – found online

Provisional Enrollment means the client receives 30 days of eligibility (60 days if only missing labs).

During provisional status the client can access all RW services.



Provisional Enrollment (Recertification)

The Ryan White HIV/AIDS Programs have determined that the minimum required documents needed are:

Document	Where to Find it:
Universal Registration Letter	GCD 15-58 – found online
Six Month Self-Attestation	CGD 15-46 – found online
<u>One</u> Proof of Residency	Client brings in <u>one</u> acceptable form of residency

Provisional Enrollment means the client receives 30 days of eligibility.

During provisional status the client can access all RW services.



Proof of Diagnosis

1. Western Blot
2. Letter on Physician Letterhead with signature of clinician indicating that the applicant is HIV positive with a diagnosis date.
3. Positive HIV Immunoassay and detectable HIV RNA
4. Two different positive HIV immunoassays
5. **Request for Proof of Diagnosis Form completed by applicant's physician (CGD 15-39)**

Brand New Client
Only one of the documents is required



Proof of Identification

1. Nevada drivers license
2. US or foreign passport with photo
3. Permanent resident card with photo
4. Local, state, or federal gov't issued card with photo
5. Consulate card with photo
6. Resident alien card with photo

*The photo ID **can** be expired. The copies of the ID scanned into CAREWare **must** be clear and in color. Only the front side is needed to be scanned. The photo must reasonably look like the client who is giving you the ID. For situations where this is not reasonable contact your Grantee office. In essence, any 1) **government issued ID** with the client's 2) **legal name** and a 3) **recent photo** is acceptable.*

Brand New Client
Only one of the documents is required



Labs

1. All applicants and clients are required to provide CD4 and HIV Viral Load information once a year.
2. The labs brought to the first or annual appointment must be no older than 1 year from specimen collection date to appointment date.
3. If the client is in provisional status and only labs are missing, the client will receive 60 days of provisional eligibility



Proof of Residency

1. Current rental/lease agreement
2. Rent/Mortgage receipt
3. Any bill, invoice or statement
4. Letter from a government agency
5. Voter registration/vehicle registration
6. Prison release papers
7. Current Nevada drivers license or state ID card
8. Consulate ID card
9. Resident alien card
10. Other verifiable government ID with address
11. Proof of property taxes paid
12. **Verification of Residence (CGD 15-50)**
13. **Dependent Support (CGD 15-48)**
14. **Non-Stable Housing Declaration (CGD 15-44)**

Brand New Client
Two documents from the list*

Annual Enrollment
Two documents from the list*

Recertification
Only if there is a change from the prior enrollment

*If using a CGD from the list, Verification of Residence, Dependent Support, or Non-Stable Housing Declaration, then only **one** form is needed.

The receipt, invoice, letter, or form must not be older than 30 days. The ID card must be unexpired. The copies of the ID scanned into CAREWare must be clear and preferably in color. Only the front side is needed to be scanned. Addresses must match.



Proof of Low Income Status

1. Copy of most recent pay stubs for the last month
2. Copy of most recent annual disability statement, SSI, SSDI, retirement, pension, VA, child support/alimony, unemployment benefits statement, etc.
3. One month of bank statements only if pay stubs or annual statement cannot be provided
4. Pre-paid debit card statements
5. **Profit and Loss Statement from self-employment (CGD 16-04)**
6. **Verification of No-Income (CGD 15-45)**
7. **Dependent Support Form (CGD 15-48)**
8. **Household Composition Form (CGD 16-06) REQUIRED**
9. **MAGI Worksheet (CGD 15-52) REQUIRED**

Brand New Client
Provide all that is applicable

Annual Enrollment
Provide all that is applicable

Recertification
Only if there is a change from the prior enrollment



Existing Insurance Coverage

1. Survey of Existing Insurance Coverage (CGD 16-10) REQUIRED

The State created a Primer document to explain the 16-10 Form and the changes related to the Vigorous Pursuit of Minimum Essential Coverage policy requirement in Policy 17-08.

Brand New Client
Form 16-10 Required

Annual Enrollment
Form 16-10 Required

Recertification
Only if there is a change from the prior enrollment



Common Guidance Documents (CGDs)

- 15-39: Proof of Diagnosis
- 15-44: Non-Stable Housing Declaration
- 15-45: Verification of No Income
- 15-46: Six Month Self-Attestation Form
- 15-48: Dependent Support Form (*form does not have any Ryan White identifiers*)
- 15-49: Employer Insurance Verification Form (*form does not have any Ryan White identifiers*)
- 15-50: Verification of Residence (*form does not have any Ryan White identifiers*)
- **15-51: All Parts Consent for Release of Information [REQUIRED]**
- **15-52: MAGI Worksheet [REQUIRED]**
- 15-53: Ryan White ABCD Application [REQUIRED]
- **15-54: Application Documentation Checklist [REQUIRED]**
- 15-55: Order of Documents
- **15-56: Acknowledgement of Receipt of Privacy Practices [REQUIRED]**
- **15-58: Registration Letters (Provisional Enrollment and Full Enrollment) [REQUIRED]**
- **16-03: Household Composition Form [REQUIRED]**
- 16-04: Profit and Loss Statement from Self-Employment
- **16-10: Survey of Existing Insurance Coverage [REQUIRED]**



CGD 15-51: Universal Consent Form

Please ensure you use the most up-to-date CGD 15-51 Universal Consent Form



Nevada Ryan White Parts ABCD Common Guidance Document Universal Consent for Release of Confidential Information

Client Name: _____ DOB: _____

I, the undersigned, do hereby authorize any of the agencies listed below who participate in the community based Ryan White All Parts (ABCD) Programs in the State of Nevada to release and/or share information concerning my eligibility, medical record status, and information concerning my HIV screening, diagnosis, and treatment. The following agencies/programs authorized are:

- ❖ Access Community Cultural Education Programs & Trainings
- ❖ AIDS Healthcare Foundation
- ❖ Access to Healthcare Network
- ❖ Aid for AIDS of Nevada
- ❖ OptumRx-Pharmacy Benefits Manager
- ❖ Carson City Health and Human Services
- ❖ Community Counseling Center
- ❖ Community Outreach Medical Center
- ❖ Clark County Social Service
- ❖ Dignity Health
- ❖ Division of Public and Behavioral Health HIV Surveillance Program
- ❖ Golden Rainbow
- ❖ HELP of Southern Nevada
- ❖ Horizon Ridge Clinic
- ❖ Huntridge Family Clinic
- ❖ Las Vegas Urban League
- ❖ Nevada Medicaid
- ❖ Medicare
- ❖ Nevada AIDS Research & Education Society
- ❖ Nevada Legal Services
- ❖ Nevada Office of HIV/AIDS
- ❖ North County Healthcare
- ❖ Northern Nevada HOPES
- ❖ Nye County Health & Human Services
- ❖ Ramsell Corp. – Pharmacy Benefits Manager
- ❖ Southern Nevada Health District
- ❖ The Gay & Lesbian Center of Southern Nevada
- ❖ University Medical Center-Wellness Center
- ❖ University Nevada, Las Vegas - College of Medicine - Maternal and Child Wellness Program
- ❖ University Nevada, Las Vegas School of Dental Medicine
- ❖ Washoe County Health District
- ❖ Your Health Insurance Company: _____
- ❖ Your Physician: _____
- ❖ Partner/Spouse/Other: _____

Information may be released between the above listed agencies throughout the duration of my active enrollment in the Ryan White All Parts (ABCD) program. I may withdraw this consent by notifying, in writing, the Ryan White agency where my eligibility was completed. I understand that my records are protected under federal HIPAA regulations and cannot be disclosed without my written consent unless otherwise provided for in the regulations. I understand that I may revoke this consent in writing any time, except to the extent that any action has been taken while it is still in force. This consent expires automatically one (1) year from registration or previously signed consent.

A copy of this authorization legally constitutes an original copy.

_____ Client Signature	_____ Date
_____ Parent/Guardian Signature if under 18	_____ Date
_____ Registering Agency Staff Member	_____ Date



Start and End Dates

Determined Eligible during any date of this month	Recertification Window Opens (A client cannot recertify earlier than this date unless permission is given by Grantee Office)	Eligibility End Date (Recertification must be done by the last day of the month)
January 1 – 30	June 16	July 31
February 1 – 28/29	July 16	August 31
March 1 – 31	August 16	September 30
April 1 – 30	September 16	October 31
May 1 – 31	October 16	November 30
June 1 – 30	November 16	December 31
July 1 – 31	December 16	January 31
August 1 – 31	January 16	February 28/29
September 1 – 30	February 16	March 31
October 1 – 31	March 16	April 30
November 1 – 30	April 16	May 31
December 1 – 31	May 16	June 30

If a client is due for their **recertification** and does not recertify before their end date then a full Annual Packet needs to be collected. No client will ever be considered a *Brand New Client* if they were previously enrolled at any point.



Retroactive Eligibility

Ryan White Parts A, B, C, and D no longer utilize retroactively eligibility. A client's eligibility start date begins when a client has met the minimum documentation for provisional or full eligibility.

Part B Only

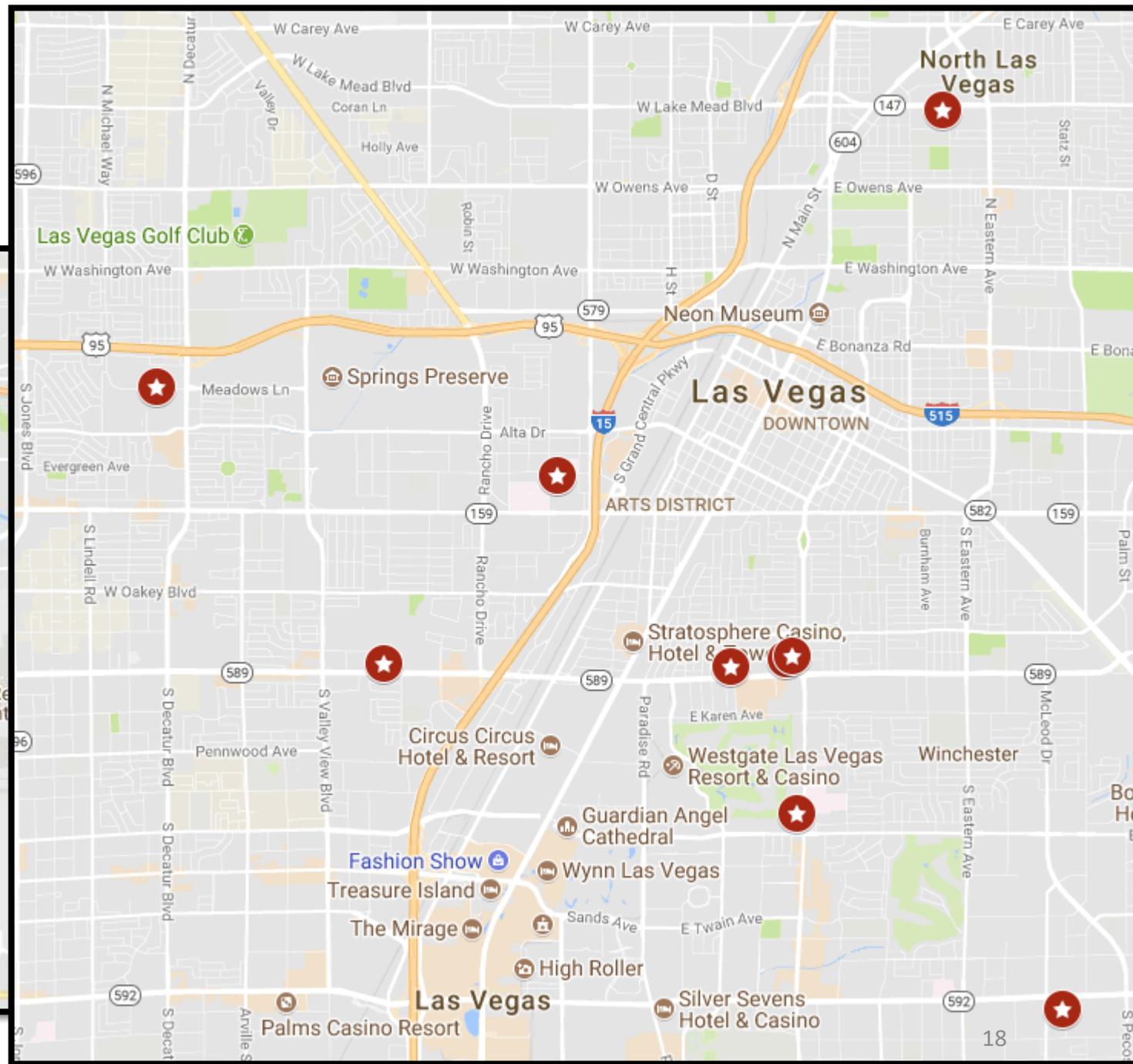
- Early Intervention Services, Medical Case Management & Non-Medical Case Management services that are delivered to clients within 30 days of an eligibility start date will be considered *allowable* on reports. This is to allow Early Intervention Specialists and Case Managers the ability to assist a client to obtain eligibility, such as scheduling appointments, collecting eligibility documents, or completing paperwork to obtain an ID. Eligibility dates should **not** be backdated to include these services.



Will this help Clients?

Yes! Clients now have access to eight different agencies to enroll in the Ryan White HIV/AIDS Program in Nevada.

Yes! Enrollment requirements are 100% the same for all Ryan White Parts in Nevada.



How does this work in CAREWare? How will the two CAREWares interact?

Short Term

- No automatic interaction -
Eligibility & Enrollment
Specialist facilitated interaction

Long Term

- Automatic data sharing



- **Site Type One**

- Aid for AIDS of Nevada
- Southern Nevada Health District
- Access to Healthcare Network

- **Site Type Two**

- Community Outreach Medical Center

- **Site Type Three**

- AIDS Healthcare Foundation
- Horizon Ridge Clinic
- Nye County Health and Human Services
- Community Counseling Center
- UMC Wellness

Staff within these agencies develop their own internal processes in order to enter the same Eligibility Packet into both CAREWare A/C and CAREWare B

Staff within these agencies are paid for enrollment for Part A/C. Part B will allow one general staff log-in for the Eligibility & Enrollment information to be entered and packet to be uploaded.

Staff within these agencies are paid for enrollment for Part A/C. Part B will allow one general staff log-in to create an Internal Referral to AHN for them to enter the data and upload the packet.

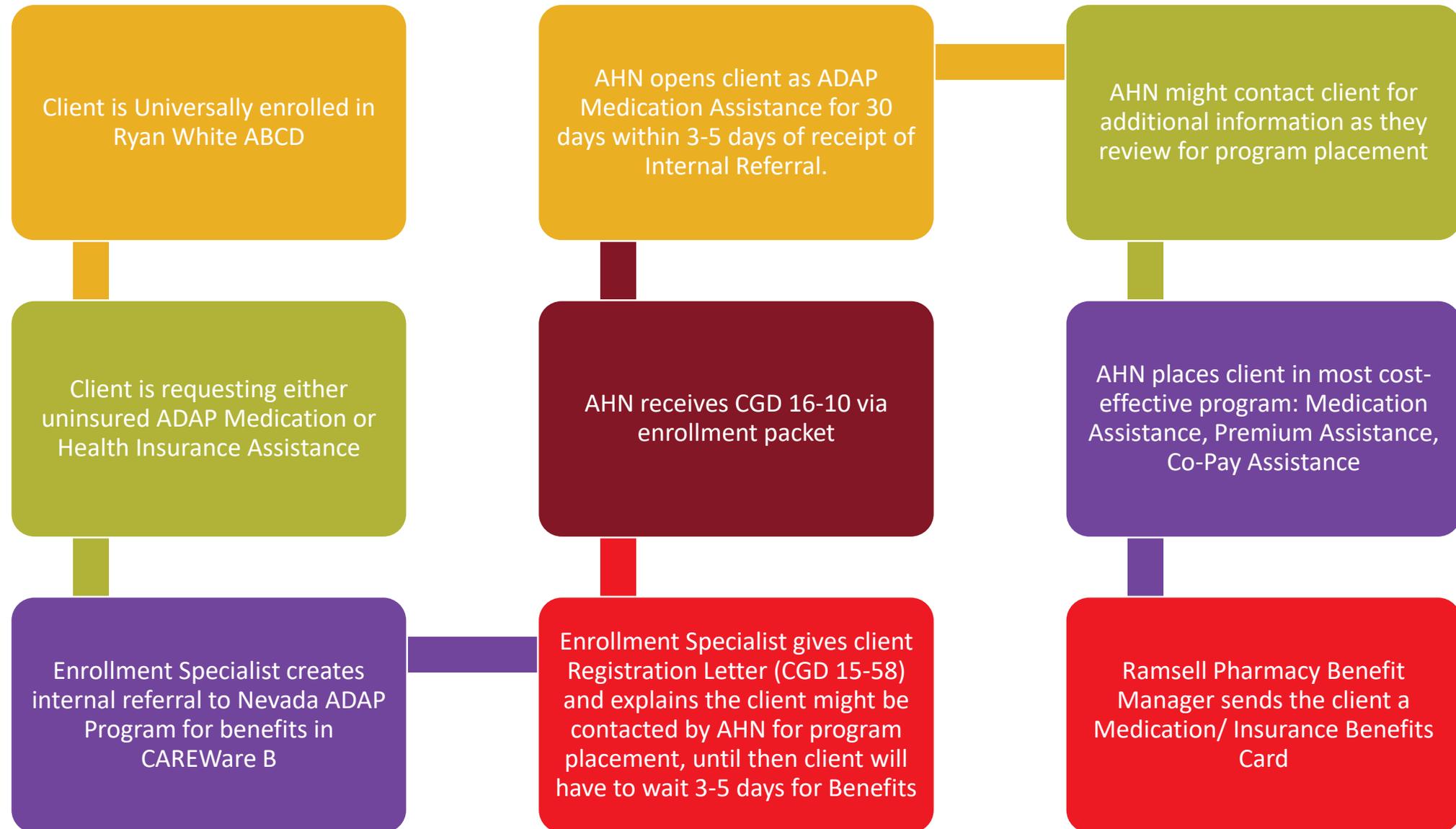


The ADAP Medication and Insurance Assistance Programs

- Still managed by Access to Healthcare Network
- In some circumstances clients might need to provide additional documentation (insurance premium invoices, payment booklets, medication list, etc.) to AHN for intake and assessment of which ADAP program to place the client in.
- AHN will have 3-5 days to process the referral. ADAP Medication benefits will be granted immediately until full assessment is done (max. 30 days).
- Only clients with emergency circumstances will have the ability to pick up medications on the same day as their enrollment appoint if they are currently expired/unenrolled.
- Any time any provider hears of an insurance status change or a change in a life event that may qualify the client for insurance that must be communicated to AHN.



ADAP Flow



Q&A #1

Question: Six-Month Recertification

- If the consumer has changes but does not have any documents with them at the time of their appointment, can we give them a 30 day provisional? This includes if consumer claims they lost/ gain insurance coverage, change with address or income.

Answer:

- In alignment with the Minimum Documentation for Provisional Eligibility (CGD 16-25), the client would need to submit the Six Month Self-Attestation Form (CGD 15-46) and at least one form of residency. To complete the full enrollment process, the client would have 30 days to submit the Proof of Income Level, Additional Proof of Residency, and Insurance information.



Q&A #2

Question: Client Signatures

- Can an eligibility staffer sign the eligibility documents when a client is not present?

Answer:

- Ryan White All Parts requests client signatures on all eligibility documents. This process is to protect the client and their knowledge of consent, as well as, the program. However, there may be extenuating circumstances that would negatively impact a client's access to immediate medication, which allows for an exception. In cases where a client needs immediate medication access **and** the client is Recertifying on Form 15-46 (not an Annual application) **and** there are No Changes, then an Eligibility Specialist/MCM may accept a verbal authorization from the client on the 15-46 Recertification with No Changes. A client signed copy must be obtained within 60 days and uploaded into CAREWare.



Q&A #3

Question: Proof of Diagnosis

- What if we have a client that has been active for years and we never collected a proof of diagnosis, is there a “grandfather clause” for them?

Answer:

- Proof of Diagnosis has always been a requirement of Ryan White. Please ensure that all required documents are in CAREWare before deeming a client eligible. If there is no Proof of Diagnosis currently on file for an active client then please ensure one is collected as soon as possible. **15-54 Eligibility and Enrollment Document Checklist** and **17-09 Eligibility and Enrollment Supplement Guide** describes the acceptable forms of Proof of Diagnosis.
- During the client’s eligibility appointment, eligibility staff should review the client’s file for POD. Any client’s record found to not have an acceptable form of POD on file, should be provisionally enrolled for 30 days until an acceptable form of POD is submitted.



Q&A #4

Question: Change from provisional enrollment to full eligibility status

- What do I need to do if a client changes from provisional enrollment to full eligibility status and has ADAP services?

Answer:

- Eligibility staff must send a second referral to AHN (Part B providers should send to ADAP domain) to extend ADAP dates in Ramsell. Without the second referral the client's ADAP services would end according to the original provisional eligibility dates.

