



# Nevada Ryan White Parts ABCD Common Guidance Document Minimum Documentation for Provisional Enrollment

## Scope of Coverage

Directly applicable to all consumers, clients, or members of the Ryan White HIV/AIDS Programs in Nevada; all potential consumers, clients, or members; and all Eligibility & Enrollment Specialists for the Ryan White HIV/AIDS Programs in Nevada. Indirectly related to all other Ryan White service providers.

## Purpose of Policy

To clarify and codify the practice of providing provisional or emergency enrollment to new applicants or annual enrollment applicants in the Ryan White HIV/AIDS Programs in Nevada. To ensure that applicants have access to vital, life-saving services including ADAP Medication Assistance if the minimum documents threshold is met.

## Background

The Ryan White HIV/AIDS Program in 42 U.S.C. § 300ff-26 (b) states that an individual eligible to receive assistance from the State, “shall, 1) have a medical diagnosis of HIV/AIDS; and 2) be a low-income individual, as defined by the State ([Citation](#)).” This requirement is inclusive of the AIDS Drug Assistance Program which is listed as a subservice of Part B Care Grant Program in 42 U.S.C. §300ff-22 (b) (3) (B). The Division of State HIV/AIDS Programs (DSHAP) of the HIV/AIDS Bureau (HAB) in the Health Resources and Services Administration (HRSA) released the latest version of the AIDS Drug Assistance Program (ADAP) Manual in 2016 which includes a statement on the Prohibition of Presumptive Eligibility. In Section III.1.E it states that, “HRSA has interpreted the legislation to mean that an individual must be determined eligible for ADAP prior to receiving services ([page 31](#)).”

The minimum required documents needed for brand new clients or for annual reenrollment clients to verify 1) a medical diagnosis of HIV/AIDS and 2) be a low-income individual are:

1. Coversheet / Affidavit of Understanding
  - 1) Application (CGD 15-53) or two-page Client Report from CAREWare (currently Part B only)
  - 2) Universal Registration Letter (CGD 15-58)
  - 3) Proof of Identification
  - 4) Privacy Practice Acknowledgement (CGD 15-56)
  - 5) Document Checklist (CGD 15-54)
  - 6) One Proof of Residency
  - 7) MAGI Worksheet (CGD 15-52)
  - 8) Proof of Household Size (CGD 16-03)



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- 9) Survey of Existing Insurance Coverage (CGD 16-10)
- 10) Other Documents (Grievance form, miscellaneous documents)
- 11) All Parts Consent for Release of Confidential Information (CGD 15-51)

All documents aside from the proof of identification and one proof of residency can be provided by the Eligibility & Enrollment Specialist. The client signing the Coversheet or Affidavit of Understanding is the client's self-attestation that the program that they are applying for is because of their HIV medical diagnosis. Documents that can be turned in within 30 days\* after the client is found to be provisionally enrolled are:

- 1) Proof of Diagnosis
- 2) Current Labs (no older than 6 months, \*can be provided within 60 days)
- 3) Proof of Income Level
- 4) Additional Proof of Residency
- 5) Insurance Cards / Explanation of Health Insurance Benefits

These additional documents are required more for confirmation purposes rather than initial determination purposes.

The signed Coversheet or Application (CGD 15-53) contains the language,

“Under penalty of perjury, I swear or affirm that all of the information supplied by me in this affidavit is complete, true and correct, and the State of Nevada may rely on this information. I, therefore, release all records to the State of Nevada to perform a verification of all application information provided. If I deliberately misrepresent information on this application my benefits will be terminated immediately and I may be prosecuted under applicable State & Federal Statutes, including but not limited to criminal charges, fines and property liens. I understand that I may be held personally liable for the cost of all drugs, core medical and support services if I deliberately falsified any documents or statements on this application.”

This affidavit of understanding is the client's affirmation that they are 1) Living with HIV, 2) have an approximate income of less than 400% FPL, and 3) living within the jurisdiction of service. If it is later found out that the client is 1) HIV-negative, 2) above 400% FPL, or 3) living outside of the jurisdiction of service the Grantee has the ability to recuperate costs.

### **Instructions**

Eligibility & Enrollment Specialists can collect the minimum documents required for 30 days of provisional enrollment and initiate the referral process for ADAP Medication if needed.

Eligibility & Enrollment Specialists are to input into both CAREWare A/C/D and CAREWare B the client's provisional enrollment status with provided documents so that the client is able to



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receive services at other agencies. No services can be denied to a client who is currently provisional enrolled in the Ryan White HIV/AIDS Programs in Nevada.