



Nevada Ryan White Parts ABCD Common Guidance Document All Parts Eligibility Guidelines

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 the Common Guidance for Ryan White Eligibility guidelines and documents 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 (All Parts) services in the state of Nevada.

The eligibility guidelines and paperwork for each Ryan White Part are now universalized, where clients will now be able to complete their eligibility with a single application. Eligibility specialists from each agency will meet directly with applicants to assist in completing the Universal Application and gather pertinent documentation for eligibility. Agencies will continue to use the client level data management system CAREWare.



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All Parts Eligibility & Enrollment Agencies

Southern Nevada	Northern Nevada
1. Access to Healthcare Network 3075 E. Flamingo Rd., Ste. 118 Las Vegas, NV 89121	1. Access to Healthcare Network 4001 S. Virginia Street, Suite F Reno, NV 89502
2. Aid for AIDS of Nevada 1120 Almond Tree Ln. Las Vegas, NV 89104	2. Northern Nevada HOPES 580 W 5th Street Reno, NV 89503
3. AIDS Healthcare Foundation 1815 E. Lake Mead Blvd., Ste. 113 North Las Vegas, NV 89030 3201 S. Maryland Pkwy., Ste. 218 Las Vegas, NV 89109	
4. Community Counseling Center 714 E Sahara Ave Las Vegas, NV 89104	
5. Community Outreach Medical Center 1140 Almond Tree Ln., Ste. # 306 Las Vegas, NV 89104	
6. HELP of Southern Nevada 1640 E. Flamingo Rd. Las Vegas, NV 89119	
7. Horizon Ridge Clinic 3160 W Sahara Ave., Ste. A11 Las Vegas, NV 89102	
8. NARES 701 Shadow Ln Ste. 200 Las Vegas, NV 89106	
9. Nye County HHS 1981 E. Calvada Blvd North, #120 Pahrump, NV 89048	
10. Southern Nevada Health District 280 S Decatur Blvd. Las Vegas, NV 89107	
11. University Medical Center's Wellness Center 701 Shadow Ln. Las Vegas, NV 89106	



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Eligibility & Enrollment Two Approaches

Case Management	Referral to Health Care & Support Services
<p>Ryan White enrollment done through the Case Management service category will include the additional three forms:</p> <ul style="list-style-type: none"> • Medical Case Management Screening Tool • Acuity Form • Individualized Service Plan 	<p>Ryan White enrollment done through the Referral to Health Care & Support Services service category does not include any additional forms.</p> <p>A referral should be made through CAREWare if the client would like to enroll in case management services.</p>

Agencies that provide CM-type Enrollment	Agencies that provide RHCSS-type Enrollment
<ul style="list-style-type: none"> • Access to Healthcare Network • Aid for AIDS of Nevada • AIDS Healthcare Foundation • Community Counseling Center • Community Outreach Medical Center • HELP of Southern Nevada • Horizon Ridge Clinic • NARES • Nye County Health and Human Services • Southern Nevada Health District • UMC Wellness Center 	<ul style="list-style-type: none"> • Access to Healthcare Network • Aid for AIDS of Nevada • Northern Nevada HOPES • Southern Nevada Health District



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Requirements for All Parts Eligibility (CGD 15-54)

Depending on what type of enrollment appointment the individual is in there are different combinations of requirements. Items 1 through 7 are required upon initial enrollment for a brand new client. Items 3 through 7 must be verified at each annual eligibility assessment. Items 4 through 7 are required to be attested to at the mid-year/six-month re-assessment.	Initial	Six-Month Re-Assessment	Annual Assessment
1) Proof of HIV Diagnosis (must be provided only on initial enrollment)			
2) Proof of Identification (must be provided only on initial enrollment)			
3) Current Labs (CD4 & Viral Load that are no older than 6 months from date of eligibility appointment)			
4) Proof of Residency (minimum of two items) <u>or</u> the “Dependent Support Form,” the “Non-Stable Housing Declaration Form,” or “Verification of Residence Form”			
5) Proof of Income Level (at or below 400% FPL) using MAGI Worksheet			
6) Proof of Household Size			
7) Survey of Existing Insurance Coverage			

PROOF OF HIV DIAGNOSIS (REQUIREMENT #1)

All **clients** must provide upon **initial enrollment only** one (1) medical/legal document from the list below indicating HIV infection.

- a. Western Blot
- b. Letter on physician’s letterhead, with signature of MD, indicating person is HIV positive and diagnosis date.
- c. Positive HIV immunoassay and detectable HIV RNA.
- d. Two positive HIV immunoassays (should be different assays based on different antigens or different principles).
- e. Request for Proof of Diagnosis Form completed by applicant’s physician (CGD 15-39)

PROOF OF IDENTIFICATION (REQUIREMENT #2)

All **clients** must provide upon **initial enrollment only** one (1) of the documents below. Can be expired. Any Government issued ID card with a photo and the consumer’s legal name is acceptable but cannot be a Nevada Driver Authorization Card.

- a. Nevada Driver’s License with Photo
- b. US or Foreign Passport with Photo



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- c. Permanent Resident Card with Photo
- d. Local, State, Federal Government issued card with Photo
- e. Clarity Card with Photo
- f. Consulate Card with Photo
- g. Resident Alien Card (U.S. citizenry not required) with Photo

If **clients** do not have the required documentation authorizing a legal name or social security number change, eligibility specialists are **NOT** authorized to change this information. Any preferred identifying information (name, gender identity, etc.) should be provided by the initial eligibility specialist as a Common Note in Demographics.

CURRENT LABS (CD4 & VIRAL LOAD) (REQUIREMENT #3)

Initial & Annually, CD4 and Viral Load lab results are required. Labs are to be no older than six months. If labs are not available, then the consumer can be given 60 days of provisional enrollment to turn in the required lab results.

PROOF OF RESIDENCY (REQUIREMENT #4)

All **clients** must provide upon **initial enrollment** and **annually** two (2) documents from the list below. Cannot be expired. Addresses and names must match. United States citizenship is **not** a requirement of Ryan White eligibility*.

- a. Current Lease/Rental Agreement
- b. Rent/Mortgage Receipt (dated within the last 30 days)
- c. Any Bill or Invoice (dated within the last 30 days)
- d. Letter from a Government Agency
- e. Voter Registration/Vehicle Registration
- f. Prison Release Papers
- g. Current Nevada Driver's License or State ID Card
- h. Consulate Identification Card
- i. Resident Alien Card
- j. Other verifiable government-issued photo ID with address.
- k. Proof of property taxes paid
- l. Verification of Residence (CGD 15-50)
- m. Dependent Support Form (CGD 15-48)
- n. Non-Stable Housing Declaration Form (CGD 15-44)

* Ryan White Part A enrollment is limited to Clark and Nye Counties in Nevada and Mojave County in Arizona. Part B enrollment is limited to the State of Nevada.



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PROOF OF INCOME LEVEL (REQUIREMENT #5)

Proof of household income not to exceed 400% FPL based on their Modified Adjusted Gross Income (MAGI). Household income includes the income of anyone client claims on their taxes or the income of someone who claims client on their taxes. Provided upon **initial enrollment and annually**.

- a. *MAGI Worksheet (CGD 15-52) REQUIRED*
- b. Copy of most recent pay stubs for the last month
- c. Copy of most recent annual disability, SSI, retirement, pension, VA, child support/alimony, unemployment benefits, etc. statements
- d. One (1) month of bank statements only if pay stubs or annual statements cannot be provided
- e. Pre-paid debit card statements
- f. Profit and Loss Statement from self-employment (CGD 16-04)
- g. Verification of No Income (CGD 15-45)
- h. Dependent Support Form (CGD 15-48)

PROOF OF HOUSEHOLD SIZE (REQUIREMENT #6)

All **clients** must provide upon **initial enrollment and annually** all individuals they claim, may claim, or will claim in most current tax year.

- a. *Household Composition Form (CGD 16-03) REQUIRED*

EXISTING INSURANCE COVERAGE (REQUIREMENT #7)

All **clients** must provide upon **initial enrollment and annually** proof of existing insurance (public or private) or a statement of no insurance. **Clients** requesting Insurance or Medication Assistance will not receive services until this information is provided.

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

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 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 than client may utilize Ryan White Part 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 eligibility specialist 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,



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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. See Policy 16-11 – Payer of Last Resort Exemptions.

- ❖ 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. See Policy 16-11 – Payer of Last Resort Exemptions.
- ❖ 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 ADAP Health Insurance to Provide Medication or Ryan White Health Insurance Program and Cost-Sharing Assistance Program that attempts to match **clients** with available insurance products that have the potential to reduce the direct costs to the Ryan White Programs

An eligibility specialist should **NOT** deny the applicant or any potential client due to existing pharmacy or medical insurance coverage. If the eligibility specialist has questions regarding a specific case please call either the Eligibility Coordinator at the State Ryan White Part B program or the Part A Grantee Office. See Policy 17-08 – Vigorous Pursuit of Minimum Essential Coverage for more information related to obtaining health insurance.



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Provisional Enrollment (CGD 16-25)

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.” 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.”

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

Document	Where to Find it:
Coversheet / Affidavit of Understanding	Generated out of CAREWare; or, Last page of CGD 15-53 – found online
Application; or, Two-page Client Report from CAREWare (currently Part B only)	CGD 15-53 – found online; or, Generated out of CAREWare
Universal Registration Letter of Pending Registration	CGD 15-58 – found online
Proof of Identification	Client brings in acceptable form of ID
Privacy Practice Acknowledgement	CGD 15-56 found online
Document Checklist	CGD 15-54 – found online
<u>One</u> Proof of Residency	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

****this is also the order of documents to be uploaded into CAREWare****

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

Document	Where to Find it:
Coversheet / Affidavit of Understanding	Generated out of CAREWare; or,



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	Last page of CGD 15-53 – found online
Application; or, Two-page Client Report from CAREWare (currently Part B only)	CGD 15-53 – found online; or, Generated out of CAREWare
Universal Registration Letter of Pending Registration	CGD 15-58 – found online
Privacy Practice Acknowledgement	CGD 15-56 found online
Document Checklist	CGD 15-54 – found online
One Proof of Residency	Client brings in one 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

****this is also the order of documents to be uploaded into CAREWare****

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 (income documents to support what was entered into the MAGI Worksheet previous submitted)
4. One 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 client is given 30 days of provisional enrollment to turn in the remainder of the documents – they can be turned in all at once or one at a time. Each upload into CAREWare of a new document must have a new cover page explaining what is in the attachment and if it changes eligibility dates.

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



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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 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.

Clients may be given a provisional enrollment period for the completion of the certification process. A 30 day provisional enrollment period will be allowed for clients who are pending all eligibility documents. The provisional period begins on the date of their initial eligibility 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 provisional 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.



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Six-Month Re-Assessment

- › Eligibility specialists will update client eligibility files every six months.
- › One of the following is acceptable at six month recertification:
 1. Self-attestation of no change (Form 15-46); or,
 2. Self-attestation of change (Form 15-46) with documentation.



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Eligibility Span and End Date Chart (CGD 16-19)

Determined Eligible during any date of this month	Re-Assessment Window Opens (A consumer cannot recertify earlier than this date unless permission is given by Grantee Office)	Eligibility End Date (Re-Assessment 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



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Retroactive Eligibility for Certain Services (Policy 15-40)

Ryan White Part A

Due to the nature and mission of the Early Intervention Services (EIS) program and the clients it serves, EIS clients are to be determined to be presumptively eligible for Ryan White 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 Ryan White provider for services or to other publicly funded service providers. ADAP Medication or Insurance services would only be available after an insurance and income assessment is completed.

Ryan White Part B

SCOPE OF COVERAGE Directly applicable to Case Management (both Medical and Non-Medical Case Management Service Categories), Early Intervention Service Providers, and Eligibility & Enrollment service providers funded through the Ryan White Part B Program.

PURPOSE OF POLICY In order to assist in delivering essential services to individuals living with HIV in the most effective manner, the Nevada Office of HIV/AIDS – Ryan White Part B program is authorizing under its granted responsibility the ability for the subgranted Eligibility & Enrollment providers to allow retroactive eligibility for up to 30 days for specific services.

BACKGROUND Statewide, Nevada has robust system of Case Management and Early Intervention Service providers whose charge is:

- to find and bring into care persons living with HIV who have never been Ryan White clients;
- to find and bring back into care persons living with HIV who have been Ryan White clients but have let their eligibility expire; and
- to find and bring into care persons who are unaware of their HIV diagnosis.

These Case Management and Early Intervention Service providers target high-risk communities and individuals in coordination with HIV prevention outreach program using HIV surveillance data and state reporting of HIV/CD4 labs also with the lapse in medication pick-up list and lapse in Ryan White enrollment list.

INSTRUCTIONS When Case Management and Early Intervention Service providers complete their work though finding a client and bringing them back into care the Eligibility and Enrollment providers are authorized to start the initial eligibility date to the first Case Management or Early Intervention Service unit logged within the past 30 days. The success of the Case Management and Early Intervention Service providers is the health and wellbeing of clients even though not all clients will eventually enroll in the Ryan White HIV/AIDS program. If the found client does not re/enroll within 30 days of the referral being made those providers ought to make contact



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again with the found client and encourage them to complete enrollment. If the client is found not to be eligible then all agencies would then update the enrollment status of that client to “discharged” with a case closed date as the day after the eligibility appointment (do not close the “day of” as it will negatively affect CAREWare reporting).



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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. For specifics related to Consumer Grievances, please review CGD 15-30 Grievance Protocol Guidelines and CGD 15-31: Consumer Rights & Responsibilities and Grievance Principles.



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Order of Documents in Eligibility Packet (CGD 15-55)

REQUIRED FORMS FOR INITIAL ANNUAL APPOINTMENTS

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. Coversheet / Affidavit of Understanding that client is applying for benefits
2. Ryan White Universal Application (CGD 15-53) or two-page Client Report from CAREWare
3. Ryan White Registration Letter (CGD 15-58)
4. Proof of Identification
5. Ryan White Notice of Privacy Practices (CGD 15-56)
6. Ryan White Eligibility/Enrollment Document Checklist (CGD 15-54)
7. Proof of Diagnosis
8. Current Labs (No older than 6 months – due within 60 days)
9. Two proofs of Residency
10. All proofs of Income Level
11. Ryan White Household Composition Form (CGD 16-03)
12. Ryan White Survey of Existing Insurance Coverage (CGD 16-10)
13. Other Documents
14. Ryan White Universal Consent for Release of Confidential Information (CGD 15-51)

REQUIRED FORMS FOR SUBSEQUENT ANNUAL APPOINTMENTS

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. Coversheet / Affidavit of Understanding that client is applying for benefits
2. Ryan White Universal Application (CGD 15-53) or two-page Client Report from CAREWare
3. Ryan White Registration Letter (CGD 15-58)
4. Ryan White Notice of Privacy Practices (CGD 15-56)
5. Ryan White Eligibility/Enrollment Document Checklist (CGD 15-54)
6. Current Labs (No older than 6 months – due within 60 days)
7. Two proofs of Residency
8. All proofs of Income Level
9. Ryan White Household Composition Form (CGD 16-03)
10. Ryan White Survey of Existing Insurance Coverage (CGD 16-10)
11. Other Documents
12. Ryan White Universal Consent for Release of Confidential Information (CGD 15-51)



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REQUIRED FORMS FOR SIX-MONTH RECERTIFICATIONS

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. 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. Ryan White Six Month Self-Attestation (CGD 15-46)
2. Ryan White Registration Letter (CGD 15-58)
3. Any documents that correspond with the change



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Miscellaneous Provisions

- › 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 services. Eligibility should be determined by utilizing the sponsor's residency, household, income and asset documents. These clients must also have documentation of efforts made to enroll in health insurance. For other questions related to immigration and benefits, please contact your grantee office.



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Reference Documents

15-38	ADAP Cost Effectiveness Worksheet
15-39	Request for Proof of Diagnosis
15-40	Retroactive Eligibility for Certain Services
15-44	Non-Stable Housing Declaration
15-45	Verification of No Income
15-46	Universal Six Month Self-Attestation
15-48	Dependent Support Form (Confidential)
15-49	Employer Insurance Verification Form (Confidential)
15-50	Verification of Residence (Confidential)
15-51	Universal Consent for Release of Information
15-52	MAGI Worksheet
15-53	Universal Application
15-54	Eligibility & Enrollment Document Checklist
15-55	Universal Order of Documents in Eligibility Packet
15-56a	Clark County (Part A) and DPBH (Part B)
15-56b	Acknowledgement of Receipt of Privacy Practices
15-58	Universal Registration Letters
16-03	Household Composition Form
16-04	Profit & Loss Statement for Proof of Income
16-10	Survey of Existing Insurance Coverage
16-11	Payer of Last Resort Exemptions
16-19	Eligibility Determination Dates
16-25	Minimum Documentation for Provisional Enrollment
17-02	Eligibility & Enrollment FAQs
17-03	2017 Federal Poverty Guidelines
17-08	Vigorous Pursuit of Minimum Essential Coverage

Please visit the Office of HIV/AIDS Policies and Procedures Website for all published docs:
http://dpbh.nv.gov/Programs/HIV-Ryan/dta/Policies/Ryan_White_Policies_and_Procedures/