## Michigan Department of Health and Human Services (MDHHS) Bureau of HIV and STI Programs HIV Care Section

MDHHS Ryan White Program Guidance #14-01
Eligibility and Recertification

## **PURPOSE**

This guidance sets forth requirements related to eligibility and recertification for consumers served by MDHHS Ryan White funded sub-recipients.

## **BACKGROUND**

Ryan White funds are used only where existing federal, state and local funds are not adequate. Ryan White funding shall supplement and not supplant existing funds. MDHHS and its funded sub-recipients must assure Ryan White funds are used as a payer of last resort. MDHHS and their sub-recipients are expected to vigorously pursue insurance coverage, including Medicaid enrollment, for individuals who are likely eligible for coverage and rigorously document their attempts to enroll their consumer in an insurance plan or Medicaid if the consumer is non-compliant or the attempts are not successful. Documentation of proof must be included in the consumer's health record at initial enrollment and at recertification to establish eligibility for criteria.

## CRITERIA

- 1. To be eligible for MDHHS Ryan White funded services, a consumer must meet the following criteria:
  - Proof/documentation of HIV positive status/diagnosis.
  - Must reside in the state of Michigan.
  - Must have an income ≤ 500% of the most current Federal Poverty Level (FPL).\*
  - Must be underinsured or uninsured for applicable Ryan White services that are reimbursable through third party payers.

<sup>\*</sup>Income is based on gross income and tax filing household to determine FPL.

<sup>\*\*</sup>Immigration status is irrelevant for the purposes of eligibility for Ryan White services. MDHHS sub-recipients should not share immigration status with immigration.

2. MDHHS Ryan White funded sub-recipients must collect the following proof of eligibility for consumers. Proof of eligibility criteria include:

Eligibility	Accepted Proof/Documentation		
Criteria	•		
HIV Status	Eligible laboratory documentation confirming HIV diagnosis		
	test results include:		
	<ul> <li>Type Differentiation (e.g., Geenius), Western Blot, viral load,</li> </ul>		
	viral culture, genotype, Nucleic Acid Amplification Test		
	(NAAT) or dual (2) Immunoassay (IA) results positive for HIV		
	(assays must be from different manufacturers).		
	<ul> <li>Documentation from licensed physician or consumer's designee, as</li> </ul>		
	allowed under Michigan law verifying the individual's HIV status.		
Residency	<ul> <li>Current State of Michigan identification card or driver's license.</li> </ul>		
	<ul> <li>Passport with Michigan address.</li> </ul>		
	<ul> <li>Utility bill in consumer's name showing address.</li> </ul>		
	<ul> <li>Benefits award letter (e.g., Social Security Insurance (SSI) Railroad</li> </ul>		
	Retirement (RR), Social Security Disability Insurance/Social Security		
	(SSDI/ SSA) with consumer's name and address.		
	<ul> <li>Lease or mortgage in consumer's name showing address</li> </ul>		
	<ul> <li>Voter registration.</li> </ul>		
	Current Michigan Drug Assistance Program enrollment		
	documentation.		
	<ul> <li><u>Declaration of Residency/No Income or Support/Insurance</u> Ineligibility-MDHHS-5422.</li> </ul>		
Incomo			
Income	Benefits award letter (e.g., SSDI/SSA, SSI, RR, Pension).  Most recent pay of the		
	Most recent pay stubs.  Toy forms from provious year.		
	Tax forms from previous year.  I homologyment benefits gwerd.		
	Unemployment benefits award.  Department of Corrections release papers within 20 days of release.		
	Department of Corrections release papers within 30 days of release.      Department of Corrections release papers within 30 days of release.      Department of Corrections release papers within 30 days of release.		
	Employment Verification Form- MDHHS-5644.  Ourset Michigan Drug Assistance Brown and Brown		
	Current Michigan Drug Assistance Program enrollment documentation.      Declaration of Regidency/No Income or Support/Incurrence.		
	<ul> <li><u>Declaration of Residency/No Income or Support/Insurance</u> Ineligibility-MDHHS-5422.</li> </ul>		
Insurance	<ul> <li>Verification of Insurance (e.g., CHAMPS, Insurance Cards, COBRA).</li> </ul>		
Status	Denial documentation from MDHHS.		
<del>-</del>	Affordable Care Act Marketplace Eligibility Determination Letter.		
	Current Michigan Drug Assistance Program enrollment		
	documentation.		
	Declaration of Residency/No Income or Support/Insurance		
	Ineligibility-MDHHS-5422.		

3. The recertification process must include collection and update of more **in-depth documentation of proof at a minimum annually**.

MDHHS Ryan White funded sub-recipients should also conduct **periodic checks throughout the year to identify any potential changes** that may affect eligibility and require clients to report any such changes.

Guidelines for completing recertification include:

Eligibility Criteria	Initial Eligibility	Annual Recertification
HIV Status	Collect and document acceptable proof in consumer's health record.	No recertification required.
Residency Income Insurance Status	Collect and document acceptable proof in consumer's health record.	Collect and update acceptable proof in consumer's health record (same information collected at initial eligibility).**

<sup>\*\*</sup>MDHHS sub-recipients should use electronic data sources (e.g., Medicaid enrollment, state tax filings, enrollment and eligibility information collected from health care marketplaces) to collect and verify consumer eligibility. If consumer reports change, collect and update acceptable proof in consumer's health record.