

**Michigan Department of Health and Human Services
Division of HIV and STI Programs
HIV Care and Prevention Section**

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

PURPOSE

This guidance sets forth requirements related to eligibility and recertification for clients served by Michigan Department of Health and Human Services (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 clients in an insurance plan or Medicaid if the client is non-compliant or the attempts are not successful. Documentation of proof must be included in the individual's health record at initial enrollment and at recertification to establish eligibility for criteria.

INSTRUCTIONS

1. An individual is eligible for MDHHS Ryan White funded services if he/she meets the following criteria:
 - Must be HIV-positive
 - Must reside in Michigan
 - Must not exceed 500% of Federal Poverty Level
 - Must be underinsured or uninsured for applicable Ryan White services that are reimbursable through third party payers

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

Eligibility Criteria	Accepted Proof/Documentation
HIV Status	<ul style="list-style-type: none"> • Eligible laboratory documentation confirming HIV diagnosis test results include: <ul style="list-style-type: none"> - Type Differentiation (e.g. Geenius), Western Blot, viral load, viral culture, genotype, Nucleic Acid Amplification Test (NAAT) or dual (2) Immunoassay (IA) results positive for HIV (assays must be from different manufacturers) • Documentation from licensed physician or his/her designee, as allowed under Michigan law verifying the individual’s HIV status.
Residency	<ul style="list-style-type: none"> • Current State of Michigan identification card or driver’s license • Passport with Michigan address • Utility bill in individual’s name showing address • Benefits award letter (MDHHS/Social Security Administration (SSA)) with individual’s name and address • Lease or mortgage in individual’s name showing address • Voter registration • Current Michigan Drug Assistance Program enrollment documentation • Declaration of Residency/No Income or Support/Insurance Ineligibility, MDHHS-5422
Income	<ul style="list-style-type: none"> • Benefits award letter (MDHHS/SSA) • Most recent pay stubs • Tax forms from previous year • Unemployment benefits award • Department of Corrections release papers within 30 days of release • Employment Verification Form, MDHHS-5644 • Current Michigan Drug Assistance Program enrollment documentation • Declaration of Residency/No Income or Support/Insurance Ineligibility, MDHHS-5422
Insurance Status	<ul style="list-style-type: none"> • Insurance cards • Denial documentation from MDHHS/SSA • 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. MDHHS Ryan White funded sub-recipients must complete recertification of eligibility for individuals at **a minimum of every six months**. The recertification process must include collection and update of more in-depth documentation of proof at **a minimum once a year**. Guidelines for completing recertification:

Eligibility Criteria	Initial Eligibility	6 Months Recertification	12 month Recertification
HIV Status	Collect and document acceptable proof in individual's health record	No recertification required	No recertification required
Residency	Collect and document acceptable proof in individual's health record	Talk to the individual about eligibility status	Collect and update acceptable proof in individual's health record (same information collected at initial eligibility)
Income		If individual reports no change, document the request was made in the individual's health record	
Insurance Status		If individual reports change, collect and update acceptable proof in individual's health record	