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| LOCAL COMMISSIONERS MEMORANDUM |
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DSS-4037EL (Rev. 9/89)

Transmittal No: 92 LCM-156

Date: October 9, 1992

Division: Health and Long Term
Care

TO: Local District Commissioners

SUBJECT: AIDS: AIDS Health Insurance Program (AHIP)

ATTACHMENTS: Attachment I: Brochure (not available on-line)
Attachment II: Poster (not available on-line)
Attachment III: Client Fact Sheet (available on-line)
Attachment IV: General Fact Sheet (available on-line)

The purposes of this memorandum are to advise you of the availability of revised and new resource materials on the AIDS Health Insurance Program (AHIP) and to provide some important reminders about the administration of this program by social services districts.

1. Availability of Resource Materials

a. Brochure

Last November, following enactment of the state legislation establishing the AHIP, the Department developed an English/Spanish brochure which briefly described the program, the eligibility criteria, and the application process. You subsequently received a copy of this brochure as an attachment to 91 LCM-202 and a larger supply of brochures under a separate mailing.

The original brochure has been revised to reflect increases in the income standards for one and two-person households effective January 1, 1992 through December 30, 1992. To facilitate ordering, the brochure now has a publication number, 2100.

A copy of the revised brochure is attached. You may request a supply from the Office of Administrative Support Services, Forms and Publications Unit, in your usual manner. Orders should specify the publication number.

To assure that clients, workers, and other interested parties have accurate and current information, any remaining copies of the original brochure should be destroyed or updated. If your existing supply is small, you may prefer to make pen and ink changes in the income figures cited in the brochure and continue to use the copies you have.

On occasion, we have received telephone inquiries from potential clients or community organizations about where and whom to call to apply for AHIP. If you plan to share copies of the brochure with agencies, advocacy groups, or service organizations in your community, we would recommend stamping the brochure with an appropriate telephone number or writing in that number. The brochure has space for stamping or writing in the gray area below the English and Spanish language boxes directing individuals to "Ask for the AIDS Health Insurance Program."

b. Poster

A standard size English/Spanish poster on the program is now available. Similar to the brochure in design, the poster can be used in waiting rooms, clinics, offices, or any other location which potential clients or referral sources may access.

The poster's publication number is 2101. A copy is attached to this memorandum. Additional copies may be ordered from the Department in the same manner as the brochure.

c. Fact Sheets

Two Fact Sheets on AHIP, in Question and Answer format, have been developed. The Client Fact Sheet provides information on AHIP for potential enrollees and can be placed or used in locations accessible to such individuals. The General Fact Sheet provides an overview of AHIP and can be used to acquaint community agencies, organizations, and facilities with the purpose, benefits, and eligibility protocols for the Program. This Fact Sheet can also be used for staff education/training.

The Fact Sheets may be reproduced on your letterhead. To assure that all information is contained on a single page, copies should be reproduced back to back.

2. Important Reminders, Administration of AHIP

a. Eligibility for AHIP

As indicated in 91 ADM-54, household resources are exempt from the eligibility determination for AHIP. If a person with AIDS (PWA) or HIV-related illness has income below the Medical Assistance (MA) income eligibility level but has resources above the MA resources level, the individual should be considered for eligibility under AHIP.

In some situations, a PWA or a person with HIV-related illness may be eligible for AHIP and also eligible for MA through spend-down. Depending on the types and scope of coverage included in the individual's health insurance policy, one of these eligibility options for payment of health insurance premiums may be more advantageous for the individual than the other. In such situations, you should discuss the options with the PWA or person with HIV-related illness so the individual can choose the eligibility option which is most beneficial to him/her.

b. Payment of Premiums

As you know, payment of premiums must be made on a timely basis in order to prevent permanent loss of an individual's health insurance coverage. Payment should not be delayed pending receipt of documentation verifying financial eligibility for AHIP or ineligibility for MA.

c. WMS - Upstate

Specific codes exist in WMS to enable payment of premiums for individuals eligible for AHIP through the Benefits Issuance and Control System (BICS). Payments for such persons should be authorized with MA Coverage Code 17 (HEALTH INSURANCE CONTINUATION ONLY) and Payment Type Code L4 (HEALTH INSURANCE CONTINUATION-185 PERCENT POVERTY). Consult 91 ADM-54 for additional WMS instructions about AHIP.

d. Conversion

PWAs or persons with HIV-related illness are entitled to convert to direct-pay conversion contracts with their health insurance carrier after continuation coverage under COBRA or the New York State Insurance Law ends. For further information on conversion, including parameters for election periods, consult Attachment I of 91 ADM-54.

If you have any questions about the AHIP resource materials or the administration of the program, you may contact Bobbi Krusik at 1-800-342-3715, extension 3-5562, User ID AW0670, or Anne Church at 1-800-342-3715, extension 4-9248, User ID 73U015.

Gregory M. Kaladjian
Executive Deputy Commissioner

AIDS HEALTH INSURANCE PROGRAM

CLIENT FACT SHEET
NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES

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What is the AIDS Health Insurance Program?

The AIDS Health Insurance Program is a New York State program for certain persons with AIDS or HIV-related disease who have lost their jobs or can only work part-time. The AIDS Health Insurance Program pays your health insurance premiums. You'll be able to keep your health insurance and you can continue to see your same doctor and other primary care providers.

What criteria must I meet to be eligible for the Program?

You must have AIDS or HIV-related disease; and

You must be unemployed or working part-time and eligible to continue your group health insurance coverage or to convert your coverage to a private plan; and

Your monthly income must be less than \$1,049* if you are single or less than \$1,416* for a household of two.

When should I apply?

As soon as possible. You must apply before the date your health insurance coverage is scheduled to end. If you lose your health insurance because you did not apply for the Program before this date, the Program cannot replace the insurance you lost or buy new insurance for you.

Do I have to apply or be eligible for Medicaid in order to be eligible for the Program?

No. You do not have to apply or be eligible for Medicaid in order to have your health insurance premiums paid under the AIDS Health Insurance Program. However, you will be expected to complete a Medicaid application as a condition of continuing your eligibility for the Program.

Can someone else apply for me?

Yes. A relative, friend, advocate or significant other can act as your authorized representative.

* This figure is for calendar year 1992; it is updated annually.

What information should I bring to the application interview?

You or your authorized representative must provide a doctor's statement that you have AIDS or HIV-related disease or sign a release authorizing the department of social services to obtain this statement from your doctor. Your medical information will be kept confidential.

If you can, you or your authorized representative should bring personal identification and information on your income. You should also bring information about your health insurance - the name of your health insurance company, the amount and frequency of your premiums, and the dates by which the premiums must be paid.

If I have money in my savings account, can I still be eligible?

Yes. The amount of money you have in a savings account is considered a resource. Your resources are not considered when determining your eligibility for the AIDS Health Insurance Program.

Will the Program pay my co-payments and deductibles?

No. You are responsible for any required co-payments and deductibles.

How long will the Program pay my health insurance premiums?

Indefinitely. As long as you continue to be eligible, the Program will pay your premiums. Your eligibility for the Program must be redetermined periodically depending on your individual situation.

How do I apply?

You must apply for the AIDS Health Insurance Program through the department of social services in the county in which you live. If you live in New York City, you should call the Human Resources Administration (HRA) Infoline at (718) 291-1900 or the HRA Third Party Recovery Unit at (212) 790-3126 for information about applying.

For more information about the AIDS Health Program in general, contact your local department of social services or call the New York State Department of Social Services at the toll-free number 1-800-342-3715, extension 3-5562 or extension 4-9248 or (518) 473-5562 or 474-9248.

AIDS HEALTH INSURANCE PROGRAM
GENERAL FACT SHEET
NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES

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What is the AIDS Health Insurance Program?

The AIDS Health Insurance Program (AHIP) is a program to assist persons with AIDS or HIV-related disease maintain their health insurance coverage after loss or reduction of employment. AHIP pays the health insurance premiums, excluding co-payments and deductibles, for persons enrolled in the Program.

When was AHIP established?

Chapter 165 of the Laws of 1991 established the AHIP effective July 1, 1991. AHIP has no expiration date.

How is AHIP funded?

AHIP uses Medicaid funds to pay the premiums of eligible persons. Costs are split equally between the state and county; there is no federal share.

What are the benefits of AHIP?

- o Persons are less likely to impoverish themselves and become fully eligible for Medicaid.
- o Persons can continue to receive medical care from their existing physicians and other primary care providers.
- o Medicaid expenditures for hospital inpatient, emergency room, and outpatient clinic services can be deferred or averted.

Who is eligible?

Persons are eligible if they:

- o are unemployed and eligible to continue their participation in the group health insurance plan provided by their former employer or to convert their group coverage to individual coverage; or
- o are employed, participated in the group health insurance plan provided by their former employer and are eligible to continue or to convert their coverage, but are ineligible for their current employer's health insurance plan; or
- o are or were self-employed and are eligible to continue or convert coverage under the insurance plan they maintain/maintained; and
- o reside in a household whose net income does not exceed 185 percent of the federal poverty line (\$1,049 for a single person and \$1,416 for a household of two in 1992).

How do persons apply?

Persons must apply for AHIP through the department of social services in their county of residence, or, in New York City, through the Human Resources Administration (HRA). A relative, friend or other authorized representative can apply on a person's behalf.

Persons applying for AHIP must have a written statement from their physicians that they have AIDS or HIV-related disease. Persons should also have personal identification and information about their income and health insurance including the amount and frequency of their premiums and the dates by which the premiums must be paid. Persons are not required to complete the full Medicaid application prior to determination of eligibility for AHIP but must complete the application as a condition of continuing eligibility for the Program.

Are resource materials about AHIP available?

The New York State Department of Social Services has developed an English/ Spanish brochure (Publication Number 2100) and a companion, standard-size poster (Publication Number 2101) which provide basic information about AHIP. These materials are directed to potential AHIP enrollees and may be obtained at no cost by writing to the Department at:

New York State Department of Social Services
Forms and Publications Unit
40 North Pearl Street
Albany, New York 12243

Requests should include the quantity and Publication Number(s) of the material(s) requested.

How can additional information about AHIP be obtained?

Additional information about AHIP can be obtained by contacting local departments of social services or, in New York City, the HRA Third Party Recovery Unit at (212) 790-3126. Information can also be obtained by calling the New York State Department of Social Services at 1-800-342-3715, extension 3-5562 or extension 4-9248 or (518) 473-5562 or 474-9248.