



# Wisconsin Life Care and Early Intervention Services Eligibility and Recertification Policy and Procedures

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# 1. Introduction

AIDS service organizations receiving Mike Johnson Life Care and Early Intervention Services (LCEIS) grant funds, or recipients, must have an eligibility determination process and an eligibility confirmation process that meets state funding requirements. The principal purposes of the initial eligibility determination and annual eligibility confirmation are to ensure that residency and insurance statuses of people living with HIV (PLWH) and people not living with HIV who are taking Pre-Exposure Prophylaxis (PrEP) meet and continue to meet the grantee eligibility requirements and to verify that the LCEIS program is the payer of last resort.

This eligibility policy applies to all LCEIS funded agencies in the state of Wisconsin, effective July 1, 2024.

To be eligible for LCEIS in Wisconsin, a client must meet the following criteria:

- Be living with HIV or be a person not living with HIV who is taking or seeking a prescription for PrEP to prevent HIV
- Be residing in Wisconsin
- Be uninsured or underinsured

Immigration status is irrelevant to LCEIS eligibility. Recipients of LCEIS funds cannot share immigration status of LCEIS clients with immigration enforcement agencies.

## 2. Components of Life Care and Early Intervention Services Eligibility

The following sections provide further detail regarding the eligibility criteria listed above. Acceptable verification documents for each of the components are listed in [Appendix A: Acceptable Verification Documents](#).

Copies of documents used to verify each component of LCEIS eligibility should be kept on file, either physically or electronically, by the recipient agency within 30 days of the first date of service, as described in [Section 4.2 Timeline for Eligibility Determination](#).

### 2.1 Components of Eligibility for People Not Living with HIV Using PrEP

Clients who are not living with HIV can receive the following services through LCEIS:

#### **A. HIV Prevention Services for people not living with HIV**

- A.1 Clinical services and laboratory testing for people not living with HIV to obtain access to pre-exposure prophylaxis (PrEP Services)
- A.2 PrEP Navigation

Recipient organizations must verify that the client resides in Wisconsin, has or is seeking a PrEP prescription, and does not have health insurance (for clients receiving PrEP services) or document the client's health insurance information (for clients receiving PrEP navigation).

#### 2.1.1 Verification of Residing in Wisconsin

Clients must reside in Wisconsin in order to be eligible for LCEIS. For the purposes of LCEIS, a resident of Wisconsin is anyone whose primary residence is in the state. Any one of the documents listed in Section 5. Acceptable Verification Documents is acceptable as long as the document meets all of the following requirements:

- Is current, dated as described in [Appendix A. Acceptable Verification Documents](#), and not expired.
- Shows the client’s name and the client’s current residential address (residency documents with a post office box are not acceptable).
- Shows a residential address in the state of Wisconsin.

Acceptable documentation of residence can be:

- Presented as a paper copy.
- Faxed or mailed to the recipient agency.
- Sent to recipient staff as an email attachment.
- Sent to recipient staff as a photo sent via:
  - o Text message.
  - o An electronic medical record or electronic health record messaging system or platform.

Documentation does not need to be provided in-person or be notarized.

### 2.1.2 Verification of PrEP Prescription for People Not Living with HIV

Clients who are not living with HIV must be using PrEP or seeking a prescription for PrEP to be eligible for LCEIS funded services. Any of the following documents can be used to verify PrEP prescription:

- A document signed by a physician, nurse practitioner, or physician’s assistant stating that the client is not living with HIV and on PrEP to prevent HIV.
- A prescription for PrEP either on paper or electronically.
- A prescription bottle for a current prescription for PrEP.

Clients can begin receiving PrEP navigation services before having a PrEP prescription, as long as the recipient organization documents the efforts to help the client obtain PrEP and obtains documentation of the PrEP prescription when a prescription is in place.

For clients whose clinical or laboratory costs to access PrEP are covered by LCEIS, the recipient must verify that the client has a PrEP prescription before paying any associated costs.

### 2.1.3 Verification of Insurance or Documenting Lack of Insurance

Information on a client’s health insurance must be collected to ensure that LCEIS is the payer of last resort for services that can be billed to health insurance.

- Clients can receive PrEP Navigation services regardless of the client’s insurance status. However, recipients must document the client’s insurance information to ensure that the recipient can provide the client with accurate and up-to-date information on accessing PrEP services.
- Because all insurance companies are required to cover PrEP and associated clinical and lab costs at no costs to the client, LCEIS can only cover PrEP-associated clinical and laboratory costs for uninsured clients. Recipients must document that the client does not have health insurance and confirm this is the case at each follow-up visit.

## 2.2 Components of Eligibility for People Living with HIV

Clients who are living with HIV are eligible to receive the following services through LCEIS:

- A. Outpatient/Ambulatory Health Services
- B. Dental Health Services
- C. Early Intervention Services
- D. Social and Pastoral Services

- E. Financial Services
- F. Legal Services
- G. Homecare Services and Supplies
- H. Case Management Services
- I. Mental Health Services
- J. Substance Use Disorder Treatment

For clients living with HIV receiving any of these services, recipients must verify that the client resides in Wisconsin, is living with HIV, and is uninsured or underinsured.

### 2.2.1 Verification of Residing in Wisconsin

Clients must reside in Wisconsin in order to be eligible for LCEIS. For the purposes of LCEIS, a resident of Wisconsin is anyone whose primary residence is in the state. Any one of the documents listed in [Appendix A. Acceptable Verification Documents](#) is acceptable as long as the document meets all of the following requirements:

- Is current, dated as described in [Appendix A. Acceptable Verification Documents](#), and not expired.
- Shows the client’s name and the client’s current residential address (residency documents with a post office box are not acceptable).
- Shows a residential address in the state of Wisconsin.

Acceptable documentation of residence can be:

- Presented as a paper copy.
- Faxed or mailed to the recipient agency.
- Sent to recipient staff as an email attachment.
- Sent to recipient staff as a photo sent via:
  - Text message.
  - An electronic medical record or electronic health record messaging system or platform.

Documentation does not need to be provided in-person or be notarized.

### 2.2.2 Verification of HIV Diagnosis

When a client living with HIV first accesses LCEIS, the recipient organization must verify the client’s HIV diagnosis. Any of the following documents can be used to verify HIV diagnosis:

- A document signed by a physician, nurse practitioner, or physician’s assistant stating that the client has a diagnosis of HIV.
- A positive confirmatory HIV test result from the State Lab of Hygiene or another accredited laboratory.
- A diagnosis in an electronic medical record (EMR).
  - **Note:** If this diagnosis is used, the recipient agency must either save a screenshot of the diagnosis or make a notation in their records identifying the date they verified the client’s HIV diagnosis.

A copy of a preliminary positive screening test may be used as a preliminary proof of diagnosis. One of the “confirmatory proof of diagnosis” documents must be supplied within 30 days of the start of services. Documentation does not need to be provided in-person or be notarized.

Documentation of HIV diagnosis needs to be provided only once. As long as the recipient maintains a copy of this documentation on file, the client does not need to provide verification of HIV diagnosis at subsequent annual eligibility confirmations.

### 2.2.3 Verification of Insurance

Information on a client's health insurance must be collected to ensure that LCEIS is the payer of last resort for services that can be billed to health insurance.

If a client is receiving only certain LCEIS that cannot be billed to insurance, the recipient agency does not need to collect insurance information. However, it is strongly recommended that recipients collect insurance information for these clients in case clients later choose to access services for which insurance verification is required at the recipient organization.

Services for which health insurance information does **not** need to be collected are:

- Early intervention services.
- Support services for people living with HIV in the form of financial, legal, social, and/or pastoral services.

All other services require documentation of client's insurance or documentation that the client does not have insurance.

## 3. Required Eligibility Screens and Certifications

The following section details the two types of eligibility screenings and certifications for LCEIS. Recipient organizations are responsible for conducting these screenings within the timelines indicated. Recipient agencies are encouraged to lessen the burden of providing this eligibility documentation as much as possible. Whenever possible, recipients should use client enrollment in other residency-restricted government programs where clients are required to provide proof of residency, particularly ADAP or Medicaid, as confirmation of continued eligibility for LCEIS, and whenever possible, recipients should use available data sources to confirm client eligibility before requesting additional documentation from the client. See [Section 4.3: Using Existing Databases and Resources to Lessen the Barrier of Eligibility Documentation](#) for additional information.

### 3.1 Initial Eligibility Screen

The recipient should obtain verification of HIV diagnosis or PrEP prescription for people not living with HIV and proof of Wisconsin residence within 30 days of the first time the client accesses LCEIS at the recipient organization.

If services are provided to the client before eligibility is established and the client is ineligible for LCEIS, the recipient organization is responsible for reconciling and properly accounting for LCEIS funds to ensure that LCEIS funds are only used for allowable costs for eligible individuals.

For a table showing which documents are required at initial LCEIS eligibility screening and annual eligibility confirmation, see Table 1, below.

## 3.2 Annual Eligibility Confirmation

Once per year, recipients must collect documents showing that the client is a Wisconsin resident and obtain updated documentation of the client's insurance.

Recipient organizations can choose to collect and update these documents either at the same time of year for all clients or by assigning clients to a specific date or time of year. However, the recipient organization must have a formal process in place for collecting annual eligibility confirmation documentation.

Once every two years, recipients can accept verbal client attestation that their residency and insurance has not changed in lieu of requiring the client to provide new documentation or collecting updated documentation from an allowable database or government source. The recipient agency must document that the client provided verbal attestation of no change in a way can be easily located for auditing and quality review purposes, either physically or electronically.

For a table showing which documents are required at initial eligibility screening and annual eligibility confirmation, see Table 1.

Table 1: Proof Documents Required for Initial Eligibility Screen AND Annual Eligibility Confirmation

	<b>Initial LCEIS Eligibility Screening</b> <i>First Time Accessing Services with Recipient</i>	<b>Annual Eligibility Confirmation</b> <i>Once Every 12 Months</i>
<b>For clients not living with HIV receiving PrEP services:</b>		
Residing in Wisconsin	Required	Required*
Proof of PrEP prescription	Required	Required at every 3-month follow-up visit
Lack of insurance (for people receiving clinical services and laboratory testing for people not living with HIV to obtain access to pre-exposure prophylaxis)	Required**	Required at every 3-month follow-up visit**
Proof of insurance or documentation of no insurance (for people receiving PrEP navigation services)	Required	Required at every 3-month follow-up visit
<b>For clients living with HIV receiving all other LCEIS services:</b>		
Residing in Wisconsin	Required	Required*
Proof of HIV diagnosis	Required	Not required
Proof of insurance or documentation of no insurance	Required	Required*

\* Once every two years, recipients can accept verbal client attestation that their residency and insurance has not changed in lieu of requiring the client to provide new documentation or collecting updated documentation from an allowable database or government source. The recipient agency must document that the client provided verbal attestation of no change in a way can be easily located for auditing and quality review purposes, either physically or electronically.

\*\*Currently, laws state that PrEP must be covered by all insurance companies at no cost to the client. Therefore, LCEIS can only cover PrEP-associated clinical and laboratory costs if the client is uninsured.

## 4. Recipient Organization Responsibilities

All LCEIS recipients are responsible for verifying and maintaining their own documentation of client eligibility.

### 4.1 Documentation Requirements

Recipient organizations must maintain copies of documents proving client eligibility and make them available to Wisconsin Communicable Disease Harm Reduction (CDHR) Section staff during site visits. The dates when these documents were collected must be clear in the documentation. Documents can be retained as physical copies, electronic scans, or photos.

### 4.2 Timeline for Eligibility Determination

Generally, client eligibility must be documented within 30 days of the first day the client receives LCEIS at the recipient organization. If services are initiated prior to eligibility being established, recipients must conduct a formal eligibility determination within 30 days and reconcile (that is, properly account for) any LCEIS funds to ensure that these funds are only used for allowable costs for eligible individuals.

For certain services where payment is made on behalf of the client to an outside entity, eligibility must be verified, and proof documents must be on file **before payments are made**. These services are:

- Clinical services and laboratory testing for people not living with HIV to obtain access to pre-exposure prophylaxis (PrEP Services).
- Support services for people living with HIV in the form of financial, legal, social, and/or pastoral services.
- Homecare services and supplies.

If a client requires these services, it is the responsibility of the recipient to ensure that the client has had an initial eligibility determination, annual eligibility confirmation, or attestation of no change within the previous 12 months before making a payment on the client's behalf.

### 4.3 Using Existing Databases and Resources to Lessen the Barrier of Eligibility Documentation

The LCEIS program requires that clients provide proof of eligibility during their initial screening, and that periodically clients show documentation that they continue to meet the residency requirements to receive services.

Recipient agencies are encouraged to lessen the burden of providing this eligibility documentation as much as possible. Whenever possible, recipients should use client enrollment in other residency-restricted government programs where clients are required to provide proof of residency, particularly ADAP or Medicaid, as confirmation of continued eligibility for LCEIS, and whenever possible, recipients should use available data sources to confirm client eligibility before requesting additional documentation from the client. If the client still meets the residency eligibility criteria based on recent, reliable, available data, recipients may renew that client's eligibility without requesting additional information from the client.

A recent, reliable, and available data source is defined as:

- **Recent:** Confirmation, conducted within the past year, that client resides in Wisconsin.
- **Reliable:** The source meets one of the two criteria below:

- Is from another government agency or social services program providing benefits that has required the client to provide proof of residency, or has checked residency against available databases, and has a reasonable expectation of accuracy and quality assurance.
- Is from a data source that automatically checks client residency against available databases and has a reasonable expectation of accuracy and quality assurance.
- **Available:** At the time of confirmation, information in a data source, on the client's eligibility for a social services program providing benefits or residency information, is available to recipient agency staff. The recipient should, if possible, maintain a copy or screenshot of these data. If maintaining a copy or screenshot is not possible, the recipient staff should note the source of the eligibility data, the date it was verified, and other relevant information (such as client ID number) in the client record.

In cases where a client continually is unable to provide proof of eligibility, recipients are encouraged to verify residency to the best of their ability and document doing so with an attestation on agency letterhead from a recipient staff person, as either an electronic or physical copy, that can be easily located for auditing and quality review purposes. For example, if a case manager spoke to staff at an emergency department (ED) who confirmed that a client was a resident of Wisconsin and had insurance, the case manager can write an attestation statement on recipient letterhead that the case manager spoke to ED staff who had seen client residency and insurance verification.

## 4.4 Discontinuing Services to Ineligible Clients

Services should not be discontinued to clients until there is a formal confirmation that the client is no longer eligible. If a client has not provided proof of residency eligibility in the last two years, recipients should continue to vigorously pursue this documentation, while continuing to allow the client to access LCEIS until the recipient has formal confirmation that the client has moved out of Wisconsin.

Initial eligibility determinations and annual eligibility confirmation may be performed simultaneously to testing and treatment. If services are initiated prior to eligibility being established, recipients must conduct a formal eligibility determination within 30 days and reconcile (that is, properly account for) any LCEIS funds to ensure that these funds are only used for allowable costs for eligible individuals.

If a client becomes ineligible for services between annual eligibility confirmations, the recipient organization is responsible for discontinuing services when recipient organization becomes aware of the change in client's eligibility. If the client becomes ineligible for services because of relocation outside the recipient service area, the recipient can continue to provide medical case management or linkage to care services for a limited time to facilitate a warm handoff to medical care services and social support services in the client's new location. Recipients can also cover the cost associated with providing up to 90 days of HIV medication after the client relocates in order to ensure continuity of care, if this cost is not covered by the Wisconsin ADAP.

If, during a CDHR site visit, it becomes known that someone who was ineligible received LCEIS due to recipient failure to verify eligibility through initial eligibility determinations and/or annual eligibility confirmations, the recipient organization is responsible for repaying the cost of that person's care to the Wisconsin CDHR, which will then be repaid to the state.

## 4.5 Eligibility Data-Sharing Agreements

Recipients may utilize certification data-sharing agreements with other LCEIS recipients in order to reduce burden on recipients and clients. A single client eligibility record is acceptable only if all of the following criteria are satisfied:



- All proof documents and any supporting documentation must be available for review at each of the recipients' sites.
- The individual recipient must be aware that the responsibility of providing allowable services to eligible clients still rests with the individual recipient.
- There is a clear understanding and procedure in place indicating which recipient is responsible for conducting annual eligibility confirmations.

The sharing of eligibility application and documentation can be done by copying the original application and documents or by electronic access to the application and documentation.

# Appendix A: Acceptable Verification Documents

This appendix lists acceptable documents for verifying eligibility criteria for LCEIS programs.

## A.1 Acceptable Documentation for Verifying Residing in Wisconsin

Any document used to verify that the client resides in Wisconsin must be from the list below and meet the following requirements:

- Is current, dated as described below, and not expired.
- Shows the client's name and the client's current residential address; residency documents with a post office box are not acceptable.
- Shows a residential address in the state of Wisconsin.

The following forms of documentation can be used to verify Wisconsin residency if the above requirements are met:

- State-issued documentation
  - A current and valid State of Wisconsin Driver License or State ID card
  - Any other official identification card or license issued by a Wisconsin governmental body or unit.
  - A check or other document issued by a unit of federal, state, local, or tribal government dated within the last six months.
  - A letter issued by a unit of federal, state, local, or tribal government dated within the last six months.
- Bill or bank statement
  - A real estate tax bill or receipt for the current year or the six months preceding the current date.
  - A gas, electric, or telephone (landline or mobile) utility bill or service statement dated within the last six months.
  - A bank statement or credit card bill dated within the last six months.
- Employer documentation
  - Paycheck or paystub dated within the last six months.
  - Any identification card issued by an employer in the normal course of business and bearing a photo of the card holder and current residential address, but not including a business card.
- Lease or rental agreement: residential lease that is effective on the current date.
- Attestation
  - A letter on public or private social service agency letterhead documenting that a client is homeless and describing the individual's residence.
  - An intake document from a residential care facility such as a nursing home or assisted living facility
  - A signed letter or statement from a family member, roommate, or other person living in the same home or apartment as the client.
  - A signed letter from a case manager attesting that the case manager has conducted a home visit and seen the client in their residence.
    - ◆ **Note:** This letter can be retained as either a physical or electronic copy and can be combined with other eligibility requirement attestations for LCEIS but must be easily located for auditing and quality review purposes.

## A.2 Acceptable Documentation for Verifying PrEP Prescription for Client not Living with HIV

For any clients not living with HIV that are receiving PrEP clinical services and laboratory testing using LCEIS funds, documentation of the PrEP prescription must be from the list below:

- A document signed by a physician, nurse practitioner, or physician's assistant stating that the client is HIV-negative and on PrEP to prevent HIV.
- A prescription for PrEP either on paper or electronically.
- A prescription bottle for a current prescription for PrEP.

## A.3 Acceptable Documentation for Verifying HIV Diagnosis

The following forms of documentation can be used to verify HIV status:

- A document signed by a physician, nurse practitioner, or physician's assistant stating that the client has a diagnosis of HIV.
- A positive confirmatory HIV test result from the State Lab of Hygiene or another accredited laboratory.
- A diagnosis in an electronic medical record (EMR); if this diagnosis is used, the recipient agency must make a notation in their records identifying the date they verified the client's HIV diagnosis.

## A.4 Acceptable Documentation of Insurance Status

The following forms of documentation can be used to document insurance status:

- A copy of an insurance card from any insurance provider
- Real-time data from insurance providers that is updated daily or on end-user demand in a medical record; if real-time data are used, the recipient must document the source of the eligibility data, the date it was verified, and other relevant information (such as client ID number) in the client record.
- A screenshot of the ForwardHealth portal showing that the client is eligible for Medicaid.
  - **Note:** The date this information was accessed in the ForwardHealth portal must also be included in the screenshot
- A screenshot of the ForwardHealth portal showing that the client is eligible for Wisconsin ADAP
  - **Note:** The date this information was accessed in the ForwardHealth portal must also be included in the screenshot.
- A signed letter from a client or a case manager attesting that the client is uninsured.
  - **Note:** This letter can be retained as either a physical or electronic copy and can be combined with other eligibility requirement attestations for LCEIS but must be easily located for auditing and quality review purposes.

## A.5 Acceptable Documentation of Enrollment in Another Government Program Requiring Wisconsin Residency

Recipients can also confirm the client is eligible for LCEIS by verifying the client's current enrollment in Medicaid, ADAP\*, SeniorCare, WIC, SNAP, HUD, or another government program that requires clients to reside in Wisconsin, for which the client must submit proof of residency. Proof of enrollment in a program that meets these requirements satisfies the LCEIS residency requirement.

In this case, any of the following are acceptable verification documents:

- A current ForwardHealth identification card
- A Medicaid eligibility determination letter
- A screenshot of the ForwardHealth portal showing that the client is enrolled in Medicaid.
  - **Note:** The date this information was accessed in the ForwardHealth portal must also be included in the screenshot.
- An ADAP letter showing eligibility from the most recent ADAP annual recertification.
  - **Note:** The letter must be for the current ADAP eligibility period.

- A screenshot of the ForwardHealth portal showing that the client is enrolled in Wisconsin ADAP
  - **Note:** The date this information was accessed in the ForwardHealth portal must also be included in the screenshot.

\*If the client is eligible for ADAP, and the address on file in the ForwardHealth Portal does not match the client's current address, proof of enrollment in ADAP can still be used as proof of income and residency for Ryan White eligibility.