



# Wisconsin Ryan White Part B Eligibility and Recertification Policy and Procedures

## Contents

- 1. Introduction ..... 2
- 2. Components of Ryan White Eligibility ..... 2
  - 2.1 Verification of HIV Diagnosis ..... 2
  - 2.2 Verification of Wisconsin Residence ..... 3
  - 2.3 Verification of Household Income ..... 3
    - 2.3.1 Determining Household Size ..... 4
    - 2.3.2 Determining Whose Income to Include in Household Income ..... 5
    - 2.3.3 Income Sources to Count Toward Household Income ..... 7
    - 2.3.4 Recognizing Individualized Situations When Calculating Household Size and Household Income ..... 8
    - 2.3.5 Calculating Household Income ..... 9
    - 2.3.6 Clients With No Income ..... 10
    - 2.3.7 Clients With No Income Documentation ..... 10
  - 2.4 Verification of Insurance ..... 10
- 3. Required Eligibility Screens and Certifications ..... 11
  - 3.1 Initial Eligibility Screen ..... 11
  - 3.2 Annual Eligibility Confirmation ..... 11
- 4. Subrecipient Organization Responsibilities ..... 12
  - 4.1 Documentation Requirements ..... 12
  - 4.2 Timeline for Eligibility Determination ..... 12
  - 4.3 Using Existing Databases and Resources to Lessen the Barrier of Eligibility Documentation ..... 13
  - 4.4 Discontinuing Services to Ineligible Clients ..... 14
  - 4.4 Eligibility Data-Sharing Agreements ..... 14
- Appendix A: Acceptable Verification Documents ..... 15
  - A.1 Acceptable Documentation for Verifying HIV Diagnosis ..... 15
  - A.2 Acceptable Documentation for Verifying Wisconsin Residency ..... 15
  - A.3 Acceptable Documentation for Verifying Client’s Household Income ..... 16
  - A.4 Acceptable Documentation of Insurance Status ..... 18
  - A.5 Acceptable Documentation of Enrollment in Another Government Program Requiring Wisconsin Residency and Income Below 500% FPL ..... 18

# 1. Introduction

Organizations receiving Ryan White Part B funds, or subrecipients, must have an eligibility determination process and an eligibility confirmation process that meets federal funding requirements. The principal purposes of the initial eligibility determination and annual eligibility confirmation are to ensure that residency, income, and insurance statuses of people living with HIV (PLWH) meet and continue to meet the grantee eligibility requirements and to verify that the Ryan White program is the payer of last resort.

This eligibility policy applies to all Ryan White Part B services in the state of Wisconsin except the AIDS Drug Assistance Program (ADAP) and Insurance Assistance Program (IAP), effective April 1, 2022. ADAP and IAP services are provided directly by the Division of Public Health and use separate eligibility guidelines outlined in the [Wisconsin ADAP Policy Manual](#).

To be eligible for Ryan White Part B services in Wisconsin, a client must meet the following criteria:

- Be living with HIV or be an infant with indeterminate HIV diagnosis born to a person who is living with HIV <sup>1</sup>
- Reside in Wisconsin
- Have a household income not exceeding 500 percent of the federal poverty level
- Be uninsured or underinsured

Immigration status is irrelevant to Ryan White eligibility. Recipients and subrecipients of Ryan White funds cannot share immigration status of Ryan White clients with immigration enforcement agencies.

## 2. Components of Ryan White Eligibility

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

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

### 2.1 Verification of HIV Diagnosis

When the client first accesses Ryan White services, the subrecipient organization must verify the client's HIV diagnosis. Any of the following documents can be used to verify HIV diagnosis:

---

<sup>1</sup> In rare cases, as specified by the Wisconsin Communicable Disease Harm Reduction Section (CDHR) and the Health Resources and Services Administration of the U.S. Department of Health and Human Services, people who do not have a diagnosis of HIV but are affected by HIV may be eligible for limited services. These cases are the exception, not the rule, and must always be undertaken with the knowledge and cooperation of the Wisconsin CDHR. The definition of affected individuals is laid out in [Policy Clarification Notice \(PCN\) 16-02: RWHAP Services Eligible Individuals and Allowable Uses of Funds](#).

- 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 subrecipient 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.

For infants with an indeterminate HIV diagnosis, the subrecipient organization must maintain and keep on file verification that the person who gave birth to the client has been diagnosed with HIV or AIDS. Any of the documents listed above can be used to verify that the person who gave birth to the client has a diagnosis of HIV or AIDS.

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 subrecipient 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 Verification of Wisconsin Residence

Clients must reside in Wisconsin in order to be eligible for Ryan White-funded services. For the purposes of Ryan White, a resident of Wisconsin is anyone whose primary residence is in the state. Any one of the documents listed in Appendix A 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 subrecipient agency
- Sent to subrecipient staff as an email attachment
- Sent to subrecipient 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.

## 2.3 Verification of Household Income

To be eligible for Ryan White services, household income cannot exceed 500% of the Federal Poverty Level (FPL). Subrecipient staff are responsible for calculating the client’s household income and determining whether the household income is below 500% FPL for the client’s household size.

Acceptable documentation of income can be:

- Presented as a paper copy
- Faxed or mailed to the subrecipient agency
- Sent to subrecipient staff as an email attachment
- Sent to subrecipient 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.

### 2.3.1 Determining Household Size

Household size is a factor in determining household income as it relates to the federal poverty guidelines. Individuals counted toward household size include:

- Client
- Client's legal spouse (except if legally separated)
- Client's registered domestic partner
- Client's children under 18 years of age that the client claims as dependents on their income taxes
- Client under 18 years of age, or over 18 who is claimed as a dependent on their parents'/legal guardian(s)' taxes
- Parents or legal guardians, and any children under 18 years of age that the client's parents/legal guardian(s) claim as dependents on their income taxes

There may be cases where a client should be considered a household size of one, where someone in the above list should not be included in the household size calculation for a given client, or when additional family members should be included in the client's household size. Please see section [2.3.4 Recognizing Individualized Situations When Calculating Household Size or Household Income](#) for additional information.

For a visual representation of which household members are included when calculating household size, refer to Table 1.

TABLE 1: HOUSEHOLD MEMBERS INCLUDED IN HOUSEHOLD SIZE FOR HOUSEHOLD INCOME CALCULATION\*

	Clients Above Age 26	Client 18–26, Employed and Self-Insured	Client 18–26, Employed and Insured by Parent(s) or Legal Guardian(s)	Client 18–26, Unemployed and Insured by Parents(s) or Legal Guardian(s)	Clients Below Age 18
Client	Yes	Yes	Yes	Yes	Yes
Client’s Legal Spouse (unless legally separated) or registered domestic partner	Yes	Yes	Yes	Yes	N/A
Client’s Parent(s) or Legal Guardian(s)*	No	No	Yes	Yes	Yes
Client’s Children Under 18	Yes	Yes	Yes	Yes	Yes
Client’s Children Over 18	Only if client claims the child/children as dependent(s) on taxes	N/A	N/A	N/A	N/A
Client’s Siblings Under 18	Only if client claims the sibling(s) as dependent(s) on taxes	Only if client claims the sibling(s) as dependent(s) on taxes	No	No	Yes
Client’s Siblings Over 18	No	No	No	No	Only if the sibling claims the client as a dependent on taxes

\*Refer to [Section 2.3.4](#) for potential exemptions.

### 2.3.2 Determining Whose Income to Include in Household Income

For purposes of Ryan White, earned and/or unearned income received by any of the following individuals is counted towards overall household income:

- For clients over age 26: the income of the client and the client’s legal spouse or domestic partner *is counted* toward the household income.
- For clients between ages 18 and 26 years who provide own health insurance or are uninsured: the income of the client and the client’s legal spouse or domestic partner is counted toward the household income.

- For clients between ages 18 and 26 years ***insured by parent(s) or legal guardian(s)*** and ***employed***: both the client and parent(s)/legal guardian(s)' income are counted toward the household income, and both the client and parents are counted toward the household size.
- For clients between ages 18 and 26 years ***insured by parent(s) or legal guardian(s)*** and ***unemployed***: the parent(s)' or legal guardian(s)' income is counted toward the household income, and the parent(s)/legal guardian(s) and client are counted toward the household size.
- For clients under age 18: the income of any parent(s) or legal guardian(s) living in the same household as the client.

Earned and/or unearned income received by any of the following individuals ***does not*** count toward overall household income:

- Client's registered domestic partner if the domestic partnership is terminated
- Client's spouse if legally separated
- Client's dependent children under 18 years of age or other household members under 18 years of age claimed as dependents on taxes
- Client's parent(s)/legal guardian(s) if client is over 18 years of age, employed, provides own health insurance, and lives with parent(s)/legal guardians. For the purposes of Ryan White, receiving ADAP or Medicaid counts as the client providing their own insurance.
- Siblings or other relatives, unless the sibling is under age 18 and the client claims the sibling as a dependent on their income tax, or the client is under age 18 and the sibling claims the client as a dependent on their income tax
- Romantic partners cohabitating with the client who are not married to the client or a registered domestic partner of the client
- Roommates

There may be cases where a client should be considered a household size of one, where someone in the above list should not be included in the household size and household income calculation for a given client, or when additional family members should be included in the client's household size. Please see section [2.3.4 Recognizing Individualized Situations When Calculating Household Size and Household Income](#) for additional information.

For a visual representation of which household members' income to include in the household income, refer to Table 2.

TABLE 2: HOUSEHOLD MEMBERS' INCOME INCLUDED IN HOUSEHOLD INCOME CALCULATION\*

	Clients Above Age 26	Client 18–26, Employed and Self-Insured	Client 18–26, Employed and Insured by Parent(s) or Legal Guardian(s)	Client 18–26, Unemployed and Insured By Parent(s) or Legal Guardian(s)	Clients Below Age 18
Client	Yes	Yes	Yes	No	No
Client's Legal Spouse (unless legally separated) or registered domestic partner	Yes	Yes	Yes	Yes	N/A
Client's Parent(s) or Legal Guardian(s)	No	No	Yes	Yes	Yes
Client's Children Under 18	No	No	No	No	No
Client's Children Over 18	No	N/A	N/A	N/A	N/A
Client's Siblings Under 18	No	No	No	No	No
Client's Siblings Over 18	No	No	No	No	If sibling claims the client as a dependent on taxes

\*Refer to [Section 2.3.4](#) for potential exemptions.

### 2.3.3 Income Sources to Count Toward Household Income

Income from any and all sources listed below must be included when calculating the client's income:

- Gross wages and salary from all employers
- Net self-employment income
- Social Security income
- Social Security Disability Insurance (SSDI)
- Supplemental Security Income (SSI) (unless the SSI recipient is a dependent child under 18)
- Dividend and interest income from stocks, bonds, or investments
- Trust income
- Net rental income
- Net farm income
- Royalties
- Ongoing Social Security survivor's benefits

- Annual lottery payments or lottery annuities
- Pensions, annuities, and/or veteran's pensions
- Unemployment and/or worker's compensation
- Job program stipends, including Wisconsin Works (W-2), Division of Vocational Rehabilitation (DVR) stipends, or AmeriCorps stipends

Finances not counted as income include:

- Proceeds from the sale of an asset, such as a car or house
- Gifts
- Inheritance
- Estate income or proceeds from the sale of an asset related to the estate
- Lump sum lottery payments
- Life insurance proceeds
- One-time settlements
- Income tax refunds
- Proceeds from loans, such as student loans, home equity loans, or bank loans
- Scholarships
- Supplemental Security Income (SSI) received on behalf of a dependent child under 18 in the household
- Child support payments
- Federal stimulus payments
- Public assistance that provides either cash assistance or in-kind benefits to individuals and families from a government agency, such as food assistance, utility assistance, or housing assistance
- Assistance from non-profit organizations
- Past Ryan White assistance, such as Ryan White emergency financial assistance payments
- Unemployment insurance payments related to COVID-19, including additional payments on top of regular unemployment benefits, and unemployment insurance benefits to workers eligible due to the CARES Act or other COVID-19-related legislation

Sources of income from all household members as described in [Section 2.3.2: Determining Whose Income to Include in Household Income](#) are counted toward overall household income.

### 2.3.4 Recognizing Individualized Situations When Calculating Household Size and Household Income

In some cases, there are legitimate reasons not to include one or more household member(s) and/or their income in household size and income calculations when determining client eligibility. While it is not possible to outline every exact scenario in which a client's household size should be adjusted to reflect the client's individualized situation, some possible reasons are outlined here:

- A person living with HIV aged 18 to 26 is still listed on their parents' or legal guardians' insurance policy, but the client does not have any financial support from parents except for health insurance. In this case, the client should be considered as a household size of one, and only the client's income should be considered.
- A client is on a parent, spouse, or registered domestic partner's insurance, but does not want to disclose their HIV diagnosis to the insurance policy holder. In this case, the client should be considered as a household size of one, and only the client's income should be considered.



- A client is legally married to their spouse or has a registered domestic partner, but is estranged, does not receive financial support, and has not had contact with their spouse or domestic partner for a significant period of time. In this case, the spouse or domestic partner, and their income, should not be counted toward the client's household size or income determination.
- A client lives with and provides more than 50% of the financial support for a qualifying relative who has a gross income of less than \$4,300, and claims the qualifying relative on their tax return, as described in [IRS Publication 501](#). To be considered a qualifying relative of a client, a person must not be a qualifying child and must pass the member of household or relationship test, the gross income test, and the support test as outlined in IRS Publication 501. In this case, the qualifying relative can be included in the client's household size.

Ryan White subrecipient agencies are expected to use their best judgement in relation to household size and household income requirements, and to consider the well-being of the client and the spirit of Ryan White legislation to provide services for people living with HIV who have lower incomes. The rationale for adjustments to the household size and household income calculations must be meticulously documented in the client record. Ryan White subrecipients are encouraged to contact the Wisconsin Communicable Disease Harm Reduction Section (CDHR) with questions regarding whether a client's situation merits an adjustment to the household size and household income eligibility requirements.

### 2.3.5 Calculating Household Income

For clients who earn wages through employment, income is calculated by using the following recommended methods. The lesser of the two calculations is used in determining the applicant's eligibility.

- **Method 1**

The year-to-date (YTD) gross income from the applicant's pay stub is divided by the number of paychecks the applicant has received during the calendar year. To obtain the applicant's annual income, the resulting amount is multiplied by either 52 (if paid weekly) or 26 (if paid biweekly).

***Sample Calculation***

A person employed full time applies for Ryan White services on April 15 and submits a pay stub for a biweekly pay period that ended on Friday, March 28. This means that the person would have received six paychecks during that time. The gross YTD income listed on the pay stub is \$6,924. This amount divided by the six paychecks is equal to \$1,154 per pay period. Since the applicant is paid biweekly, this number is multiplied by 26 to obtain an annual income of \$30,004.

- **Method 2**

This method utilizes the applicant's hourly rate to determine annual income. The hourly rate listed on the pay stub is multiplied by 2,080 hours for full-time employees.

***Sample Calculation***

The pay rate listed on the pay stub for the applicant in the previous example is \$14.45/hour. Since the applicant is employed full time, this amount is multiplied by 2,080 (hours) to obtain an annual income of \$30,056. If the applicant works less than full time, the hourly rate is multiplied by the number of hours the applicant works within the year.

The lesser amount (in this case, \$30,004) from the two methods is used as the annual income for purposes of eligibility determination.

For clients who receive monthly income from sources such as pensions, Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), and/or public assistance income is determined by multiplying the monthly amount by 12.

For clients who receive unemployment and/or worker's compensation, annual income is calculated by multiplying the amount received by the frequency received (multiplied by 52 if paid weekly or by 26 if paid biweekly).

Income calculations should be adjusted as needed to reflect actual income in cases of unemployment, temporary employment, part-time employment, or changes in client wages.

For clients who are self-employed, income can be calculated from their most recent Form 1040 or 1040-SR, which shows total annual income from the previous year. A client can also provide their most recent quarter's Form 1040-ES, which is used quarterly to determine whether a self-employed individual needs to file quarterly estimated tax with the IRS. The quarterly income can be multiplied by four to estimate annual income.

Once calculated, household income and household size are used to determine the client's income as it relates to the federal poverty guidelines, which are updated annually around March 1. Only clients with calculated incomes at or below the designated threshold of FPL are eligible for services. The [federal poverty guidelines](#) are updated annually.

### 2.3.6 Clients With No Income

Documentation for a client who does not have any income must state how they are being supported financially using an Affirmation of Zero Income form that has been signed by the client. A subrecipient organization can create an Affirmation of Zero Income form for this purpose. This form should include a certification from the client affirming that the client currently does not have income from any of the sources of income included in Wisconsin Ryan White Part B eligibility income calculations and a signature from the client.

### 2.3.7 Clients With No Income Documentation

If the client is unable to obtain proof of income, a written statement from a case manager (on subrecipient organization letterhead) or employer (on company letterhead) that indicates an average income may be accepted. This statement can be retained as either a physical or electronic copy but must be easily located for auditing and quality review purposes and must represent the client's actual income to the best of the case manager or employer's knowledge. By accepting a case manager or employer attestation as proof of client income, the subrecipient agency is attesting that to the best of their knowledge the information on the attestation is an accurate representation of the client's income.

## 2.4 Verification of Insurance

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

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

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

- Food bank services
- Housing
- Legal services
- Emergency financial assistance
- Referral to health care and support services (brief 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 Ryan White services. Subrecipient organizations are responsible for conducting these screenings within the timelines indicated. Subrecipient agencies are encouraged to lessen the burden of providing this eligibility documentation as much as possible. Whenever possible, subrecipients should use client enrollment in other income-limited and residency-restricted government programs where clients are required to provide proof of residency and/or income, particularly ADAP or Medicaid, as confirmation of continued eligibility for Ryan White services, and whenever possible, subrecipients 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 subrecipient should obtain verification of HIV diagnosis, proof of Wisconsin residence, and household income below 500% FPL within 30 days of the first time the client accesses Ryan White services at the subrecipient.

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

For a table showing which documents are required at initial Ryan White eligibility screening and annual eligibility confirmation, see Table 3.

#### **3.2 Annual Eligibility Confirmation**

Once per year, subrecipients must collect documents showing that the client is a Wisconsin resident and the client's household income is below 500% FPL and obtain updated documentation of the client's insurance.

Subrecipient 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 subrecipient organization must have a formal process in place for collecting annual eligibility confirmation documentation.

Once every two years, subrecipients can accept verbal client attestation that their income, 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 subrecipient 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 Ryan White eligibility screening and annual eligibility confirmation, see Table 3.

TABLE 3: PROOF DOCUMENTS REQUIRED FOR INITIAL ELIGIBILITY SCREEN AND ANNUAL ELIGIBILITY CONFIRMATION

	<b>Initial Ryan White Eligibility Screening</b>	<b>Annual Eligibility Confirmation</b>
	<i>First Time Accessing Services with Subrecipient</i>	<i>Once Every 12 Months</i>
Proof of HIV diagnosis	Required	Not required
Wisconsin residence	Required	Required*
Income below 500% FPL	Required	Required*
Insurance	Required	Required*

\*Once every two years, subrecipients can accept verbal client attestation that their income, 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 subrecipient 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.

## 4. Subrecipient Organization Responsibilities

All Ryan White Part B subrecipients are responsible for verifying and maintaining their own documentation of client eligibility.

### 4.1 Documentation Requirements

Subrecipient organizations must maintain copies of documents proving client eligibility and make them available to Wisconsin CDHR 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 Ryan White services at the subrecipient organization. If services are initiated prior to eligibility being established, subrecipients must conduct a formal eligibility determination within 30 days and reconcile (that is, properly account for) any Ryan White 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:

- Emergency financial assistance.
- Health insurance premium and cost-sharing assistance.
- Housing.
- Food services (if vouchers are provided).

If a client requires these services, it is the responsibility of the subrecipient to ensure that the client has had an initial eligibility determination, annual eligibility confirmation, or attestation of no change within the previous twelve 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 Ryan White 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 and income requirements to receive Ryan White services.

Subrecipient agencies are encouraged to lessen the burden of providing this eligibility documentation as much as possible. Whenever possible, subrecipients should use client enrollment in other income-limited and residency-restricted government programs where clients are required to provide proof of residency and/or income, particularly ADAP or Medicaid, as confirmation of continued eligibility for Ryan White services, and whenever possible, subrecipients should use available data sources to confirm client eligibility before requesting additional documentation from the client. If the client still meets the residency and income eligibility criteria based on recent, reliable, available data, subrecipients 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 has income below 500% FPL and resides in Wisconsin
- Reliable: The source meets one of the two following criteria:
  - Is from another government agency or social services program providing benefits that has required the client to provide proof of income and residency, or has checked income and residency against available databases, and has a reasonable expectation of accuracy and quality assurance
  - Is from a data source that automatically checks client income and 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 income and residency information, is available to subrecipient agency staff. The subrecipient should, if possible, maintain a copy or screenshot of these data. If maintaining a copy or screenshot is not possible, the subrecipient 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, subrecipients are encouraged to verify income and residency to the best of their ability and document doing so with an attestation on agency letterhead from a subrecipient 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 below income limits, was a resident of Wisconsin, and had insurance, the case manager can write an attestation statement on subrecipient letterhead that the case manager spoke to ED staff who had seen client income, 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 income and residency eligibility in the last two years, subrecipients should continue to vigorously pursue this documentation, while continuing to allow the client to access Ryan White services until the subrecipient has formal confirmation that the client has moved out of Wisconsin or has income above 500% FPL.

Initial eligibility determinations and annual eligibility confirmation may be performed simultaneously to testing and treatment. If services are initiated prior to eligibility being established, subrecipients must conduct a formal eligibility determination within 30 days and reconcile (that is, properly account for) any Ryan White 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 subrecipient organization is responsible for discontinuing services when subrecipient organization becomes aware of the change in client's eligibility. If the client becomes ineligible for services because of relocation outside the subrecipient service area, the subrecipient 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. Subrecipients 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 site visit or audit by HRSA, it becomes known that someone who was ineligible received Ryan White services due to subrecipient failure to verify eligibility through initial eligibility determinations and/or annual eligibility confirmations, the subrecipient organization is responsible for repaying the cost of that person's care to the Wisconsin CDHR, which will then be repaid to HRSA.

## 4.4 Eligibility Data-Sharing Agreements

Subrecipients may utilize certification data-sharing agreements with other Ryan White HIV/AIDS Program (RWHAP) subrecipients in order to reduce burden on recipients, subrecipients, 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 subrecipients' sites.
- The individual subrecipient must be aware that the responsibility of providing allowable services to eligible clients still rests with the individual subrecipient.
- There is a clear understanding and procedure in place indicating which subrecipient 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 Ryan White programs.

## A.1 Acceptable Documentation for Verifying HIV Diagnosis

- For people over the age of two:
  - 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 subrecipient agency must make a notation in their records identifying the date they verified the client's HIV diagnosis
- For infants with an indeterminate HIV diagnosis:
  - The subrecipient organization must maintain and keep on file verification that the person who gave birth to the client has been diagnosed with HIV or AIDS.
  - Any of the documents listed above can be used to verify the HIV or AIDS diagnosis of the person who gave birth to the client.

## A.2 Acceptable Documentation for Verifying Wisconsin Residency

Any document used to verify Wisconsin residency must be from the following list and meet these 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 Ryan White Part B Services but must be easily located for auditing and quality review purposes.

### A.3 Acceptable Documentation for Verifying Client’s Household Income

See Table 4: Acceptable Verification Documents for All Sources of Countable Income. All countable sources of income must be included when determining a client’s income eligibility.

TABLE 4: ACCEPTABLE VERIFICATION DOCUMENTS FOR ALL SOURCES OF COUNTABLE INCOME

Countable Source of Income	Acceptable Verification Documents
Gross wages and salary from all employers	<ul style="list-style-type: none"> <li>• Most recent paycheck stub(s) (within the last 60 days) from all employers</li> <li>• W-2(s) from all employers from the most recent tax year</li> <li>• Most recent Internal Revenue Service (IRS) form 1040 or 1040-SR</li> </ul>
Net self-employment income	<ul style="list-style-type: none"> <li>• Most recent IRS form 1040-ES</li> <li>• Most recent IRS form 1040 or 1040-SR Schedule C, line 31</li> </ul>
Social Security Income	Most recent award letter from Social Security Administration (SSA) (SSA-1099)
Social Security Disability Insurance (SSDI)	Most recent award letter from SSA (SSA-1099)
Supplemental Security Income (SSI)	Most recent award letter from SSA (SSA-1099)
Dividends and interest income from stocks, bonds, or investments	<ul style="list-style-type: none"> <li>• Most recent IRS form 1040 or 1040-SR Schedule B</li> <li>• Most recent IRS form 1099</li> </ul>



Countable Source of Income	Acceptable Verification Documents
Income from a trust	<ul style="list-style-type: none"> <li>Trust agreement, certificate of trust, or trustee statement confirming amount, frequency, and duration of payments.</li> <li>Most recent IRS form Schedule K-1</li> <li>Most recent IRS form 1041</li> </ul>
Net rental income	<ul style="list-style-type: none"> <li>Most recent IRS form 1040 or 1040-SR, Schedule E, line 26</li> </ul>
Net farm income	<ul style="list-style-type: none"> <li>Most recent IRS form 1040-ES</li> <li>Most recent IRS form 1040 or 1040-SR Schedule F, line 34</li> </ul>
Royalties	<ul style="list-style-type: none"> <li>Most recent IRS Form 1040 or 1040-SR Schedule E, line 26</li> </ul>
Ongoing Social Security survivor's benefits	<ul style="list-style-type: none"> <li>Most recent award letter from SSA (SSA-1099)</li> </ul>
Annual lottery payments or lottery annuities	<ul style="list-style-type: none"> <li>Most recent IRS form W-2G</li> <li>Most recent IRS form 1040 or 1040-SR</li> </ul>
Pensions, annuities, and/or veteran's pensions	Most recent letter stating pension or annuity amount
Unemployment and/or worker's compensation	Most recent letter stating amount of unemployment or worker's compensation benefit
Job program stipends including Wisconsin Works (W-2), Division of Vocational Rehabilitation (DVR) stipends, or AmeriCorps living allowance	<ul style="list-style-type: none"> <li>Most recent communication confirming job program placement or enrollment</li> <li>Job program placement letter stating amount of stipend or living allowance.</li> <li>W-2(s) from all job placements from the most recent tax year, if available</li> <li>AmeriCorps Earning Statement, W-2, or Income Disregard Letter</li> </ul>
No income	Affirmation of Zero Income form that has been signed by the client (see <a href="#">Section 2.3.6: Clients with No Income</a> )
No documentation of any of the above forms of income	A written statement from a case manager or employer (on company letterhead) that indicates an average income (see <a href="#">Section 2.3.7: Clients with No Income Documentation</a> ). This letter can be retained as either a physical or electronic copy and can be combined with other eligibility requirement attestations for Ryan White Part B Services but must be easily located for auditing and quality review purposes and must represent the client's actual income to the best of the case manager or employer's knowledge. By accepting a case manager or employer attestation as proof of client income, the subrecipient agency is attesting that to the best of their knowledge the information on the attestation is an accurate representation of the client's income. This option should be used only when no other form of income verification can be provided.

## 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 subrecipient 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 Ryan White Part B Services but must be easily located for auditing and quality review purposes.

## A.5 Acceptable Documentation of Enrollment in Another Government Program Requiring Wisconsin Residency and Income Below 500% FPL

Subrecipients can also confirm the client is eligible for Ryan White services 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 and have household income below 500% FPL, for which the client must submit proof of residency and proof of income. Proof of enrollment in a program that meets these requirements satisfies both the Ryan White residency requirement and the income 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.
- A screenshot or copy of a document showing that the client is enrolled in another government program with an income limit of 500% FPL or lower, for which the enrollee must submit proof of income  
**Note:** This could be an identification card, award letter, benefits statement, or screenshot of an online database showing the client's eligibility for the program. If a screenshot is used, the date this information was accessed must 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.



**WISCONSIN DEPARTMENT**  
*of* **HEALTH SERVICES**

P-02024 (04/2022)