

Ryan White Portal

Insurance Support Document Guide Sheet

This guide is to support case managers and clients in completing the insurance section of the Ryan White and ADAP application. During the review, the eligibility team may ask for additional support documents as needed.

Ryan White Portal

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INSURANCE	
Common Situations	Possible Documents Required
New Clients	<ul style="list-style-type: none"> ● Current taxes <ul style="list-style-type: none"> ○ Note: If income shows client is under 150% FPL client will need to apply for AHCCCS ● Benefit Verification Form (BVF), if applicable ● Note: <ul style="list-style-type: none"> ○ Clients currently enrolled into FFM, requesting enrollment or re-enrollment must obtain additional ADHS approval ○ OE (open enrollment) occurs during different time for different insurances types ○ SEP (Special Enrollment Period) applies to client who have a life changing event (recently married, had children, or loss of insurance) reviewer must obtain FFM approval from ADHS ○ ADAP is payor of last resort and reviewer will screen for other insurances before requesting FFM
Enrolled in Indian Health Services (IHS)?	<ul style="list-style-type: none"> ● No documents needed
Enrolled in Veterans Affairs Services (VA)?	<ul style="list-style-type: none"> ● No documents needed
Enrolled in AHCCCS (Arizona Medicaid)	<ul style="list-style-type: none"> ● Health E Arizona (HEA) screenshot of enrollment verification document <ul style="list-style-type: none"> ○ <u>Note: If insurance cards are available upload those too, but insurance cards alone are not sufficient proof of enrollment.</u> ○ AHCCCS enrollment verification screening document can be printed from this link Health-e-Arizona (healthearizonaplus.gov)
Client Denied from AHCCCS & is Under 150% FPL	<ul style="list-style-type: none"> ● AHCCCS Denial Notification Letter <ul style="list-style-type: none"> ○ All pages of denial letter ● Notes <ul style="list-style-type: none"> ○ The denial reason must be due to being over income, if denied for any other reason, the client will need to re-apply to receive a valid denial ○ Clients 138% FPL and under should be approved for AHCCCS ○ If the Household Income <150% FPL, individual must apply for AHCCCS if not already enrolled regardless of other insurance enrollment ○ Client receiving SSI automatically qualify for AHCCCS
Disenrolled from AHCCCS & is Over 150% FPL	<ul style="list-style-type: none"> ● AHCCCS termination letter <ul style="list-style-type: none"> ○ Note: The denial reason must be due to being over income, if denied for any other reason, the client will need to re-

Ryan White Portal

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	<p>apply to receive a valid denial. This applies even if income is over 150% FPL.</p>
<p>Undocumented, a Lawful Permanent Resident (LPR), OR are DACA recipients Under 150% FPL</p>	<ul style="list-style-type: none"> ● If the client has Federal Emergency Services (FES) <ul style="list-style-type: none"> ○ We need the HEA+ Enrollment Verification screening document ● If employed <ul style="list-style-type: none"> ○ Benefit Verification Form (BVF) from employer ○ Note: If no employer insurance is available, they are encouraged to apply for FES
<p>Has Medicare Part A, B, C, D</p>	<ul style="list-style-type: none"> ● Submit copies of insurance cards ● Client has Medicare Saving Plan (MSP) we need HEA Enrollment verification document <ul style="list-style-type: none"> ○ Note: If a client is 65 years or older, or has received SSDI (Social Security Disability Income) for 24 months, they are eligible for Medicare if not already enrolled
<p>Enrolled in Employer Insurance (including spouse's insurance)</p>	<ul style="list-style-type: none"> ● Provide a summary of benefits and the monthly cost of the premium(s) ● Unable to obtain Benefit Verification Form (BVF) from employer? <ul style="list-style-type: none"> ○ Employer coverage tool is needed ● If previously reported insurance is no longer active, proof of loss of coverage may be requested . <ul style="list-style-type: none"> ○ Examples: AHCCCS termination Notice for being over income, Cobra Notice from employer sponsored plan, or Letter from the employer benefit representative detailing coverage term date and reason ○ If needed, reviewer can request Emdeon search fom Genoa Pharmacy
<p>Enrolled in Private Insurance (including parents or spouse insurance)</p>	<ul style="list-style-type: none"> ● Provide a summary of benefits and the monthly cost of the premium(s) ● Insurance Cards <ul style="list-style-type: none"> ○ If the client does not have insurance coverage ask for Benefit Verification Form (BVF) ● Unable to obtain Benefit Verification Form (BVF) from employer? <ul style="list-style-type: none"> ○ Submit an Employer Coverage tool instead ● If previously reported insurance is no longer active, loss of coverage may be requested. <ul style="list-style-type: none"> ○ Examples: AHCCCS termination Notice for being over income, ○ Cobra Notice from employer sponsored plan, or ○ Letter from the employer benefit representative detailing coverage term date and reason ○ If needed, reviewer can request Emdeon search fom Genoa Pharmacy

Ryan White Portal

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Federally Facilitated Marketplace (FFM)	<ul style="list-style-type: none">● Current taxes<ul style="list-style-type: none">○ Note: If income shows client is under 150% FPL client will need to apply for AHCCCS● BVF if applicable● Note:<ul style="list-style-type: none">○ Clients currently enrolled into FFM, requesting enrollment or re-enrollment must obtain additional ADHS approval○ OE (open enrollment) occurs during different time for different insurances types○ SEP (Special Enrollment Period) applies to client who have a life changing event (recently married, had children, or loss of insurance) 8/reviewer must obtain FFM approval from ADHS● Note: ADAP is payor of last resort and reviewer will screen for other insurances before requesting FFM
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