

DEPARTMENT OF SOCIAL SERVICES

40 NORTH PEARL STREET, ALBANY, NEW YORK 12243-0001

MARY JO BANE
Commissioner



(518) 474-9475

LOCAL COMMISSIONERS MEMORANDUM

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.

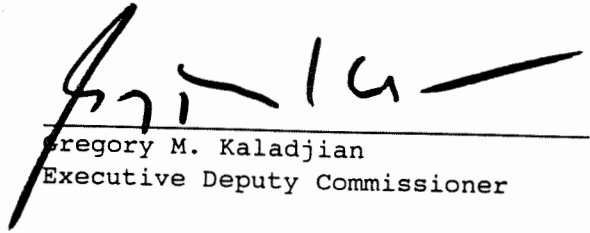
c. WMS - Upstate

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 I4 (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