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OFFICE OF AIDS
AIDS Drug Assistance Program (ADAP)

Management Memorandum
Memorandum Number: 2013-01

Date: January 23, 2013

TO: LOCAL ADAP COORDINATORS
ADAP ENROLLMENT WORKERS

SUBJECT: IMPLEMENTATION OF FEDERALLY MANDATED BI-ANNUAL ADAP
ELIGIBILITY RECERTIFICATION – PHASE I

In April 2011, Human Resources and Services Administration (HRSA) released the Ryan White (RW) Part B Program Monitoring Standards. These new Standards mandate that grantees screen RW clients for program eligibility every six months. It is the State Office of AIDS (OA)'s goal to implement this HRSA-mandated requirement in a manner that supports both continued client access to ADAP services and allows clients and ADAP enrollment sites time to transition to this process. Therefore, OA's implementation plan phases in the six-month eligibility recertification requirement for ADAP clients over a one year period.

Effective February 1, 2013, OA will require ADAP Enrollment Workers (EWs) to notify clients of the new bi-annual recertification timeframe requirement at the time of their scheduled annual recertification (existing clients) or during the initial enrollment process (new clients).

PHASE I – INITIAL NOTIFICATION TO CLIENTS

ADAP EW Notification Responsibilities

Effective February 1, 2013, existing clients who recertify for ADAP on their birthday (current annual recertification date) and new clients applying for ADAP must be informed that they will be required to recertify ADAP eligibility in six months. As a result,

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no ADAP client would experience a new six-month recertification sooner than August 2013.

- For existing clients the self-recertification date will be six months after the client's birthday. For example, an existing ADAP client with a birthday in February would be told during their February 2013 recertification that their next recertification will be a self-recertification in August 2013. Clients will continue to be required to return annually, in person, to an ADAP enrollment site to complete their birthdate eligibility determination.
- For new clients the initial self-recertification date will be six months after the client's enrollment date. For example, a client who first enrolls in ADAP in February 2013 would need to self-recertify for ADAP in August 2013. After that, the client will return to the enrollment site for their annual eligibility recertification on their next birthday. All subsequent self-recertification will be due six months after the client's birthday.

EWs must:

- inform the client of their next six month recertification due date;
- inform the client they will receive notification/instruction on the recertification process by mail;
- provide the client written documentation of his/her recertification due dates and the notification by mail process (see attached form);
- verify/update the client's correct mailing address; and
- for clients who elect not to receive mail notifications from ADAP, offer the client the option of returning to the enrollment site to complete the Six-Month Self-Recertification Form.

ADAP EW Statewide Conference Calls - Phase I Technical Assistance

In addition to providing guidance in this management memo, OA/ADAP has scheduled ADAP EW calls at the end of January 2013 to provide technical assistance (TA) on Phase I of the bi-annual recertification process. These calls will also provide an opportunity for EWs to have any questions addressed regarding the Phase I process. Please note that participation in the conference calls is required for all current ADAP EWs.

In order to assure participants on the calls do not exceed the conference calling system capacity, ADAP recommends EWs try to participate on the date/time that has been designated for their local health jurisdiction (LHJ) and, whenever possible, use a single phone line for multiple EWs to call in. If EW schedules preclude them from participating on their LHJ's designated date/time, they may call in on either of the other dates.

As previously notified in an e-mail to all EWs on January 17, 2013, the following dates/times and LHJ designations have been set aside for the TA calls:

<u>Date</u>	<u>Time</u>	<u>LHJ (recommended)</u>
January 24	10:00 am – 11:00 am	Los Angeles
January 30	10:00 am – 11:00 am	Alameda, Butte, Contra Costa, Kern, Orange, San Diego, San Francisco, San Mateo, Santa Clara, Ventura
January 31	2:00 pm – 3:00 pm	All other LHJs

The call in number and passcode for the all three calls will be the same. The call in number is: (888) 469-0939 and the Participant Passcode is: 7608733.

PHASE II – IMPLEMENTATION OF THE BI-ANNUAL RECERTIFICATION PROCESS

OA will be expanding participation in our ADAP Bi-Annual Recertification Work Group. Currently the Work Group is composed of ADAP Coordinators and EWs; the expansion will add representative consumers, HIV advocates, and local AIDS Directors to the Work Group. OA, in collaboration with our expanded ADAP Bi-Annual Recertification Work Group and the ADAP Pharmacy Benefits Manager, will be developing the next steps and processes for ADAP compliance with the federal bi-annual eligibility recertification requirement and ensuring that recertification documents are available in Spanish and other required languages.

After the process is finalized and approved by HRSA, ADAP EWs and Coordinators will be informed of the details pertinent to implementation of Phase II via ADAP Management Memos, associated EW TA calls and training.

Please contact your OA/ADAP Advisor if you have any questions regarding Phase I of the new bi-annual recertification process. The most current “OA/ADAP Staff Assignments by LHJ” list is available on the OA website at:

<http://cdphinternet/programs/aids/Documents/ADAP-LHJStaffAssignments.pdf>



Celia Banda-Brown, Chief
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Attachments

Notice to Current Clients

CHANGE IN ELIGIBILITY RECERTIFICATION CYCLE

Federal Program Standards require clients to recertify eligibility every six months.

Your six-month self-recertification date is:

A self-recertification form will be **mailed to your address** prior to this date. The form will provide instruction on how to complete the six-month self-recertification process, including where to return the form. Because the self-recertification information will be mailed, a **current mailing address** must be on file. Therefore, immediately inform your enrollment worker of any change to your mailing address.

In order to assure you have continued access to your medications, please return the six-month self-recertification form by the due date above so there is no interruption in your care.

Also, please be aware that you are still required to return annually, in person, to an enrollment site to complete your “birthdate” eligibility determination.

Acknowledgment of Receipt:

Client Signature: _____ Date ____/____/____

A Spanish translation of the above is to be provided here.

Notice to New Clients

ELIGIBILITY RECERTIFICATION AND ANNUAL ENROLLMENT CYCLES

Federal Program Standards require clients to recertify eligibility every six months.

Your six-month self-recertification date is:

A self- recertification form will be **mailed to your address** prior to this date. The form will provide instruction on how to complete the six-month self-recertification process, including where to return the form. Because the six-month eligibility recertification information will be mailed, a **current mailing address** must be on file. Therefore, immediately inform your enrollment worker of any change to your mailing address.

In order to assure you have continued access to your medications, please return the six-month self-recertification form by the due date above so there is no interruption in your care.

Also, please be aware that you will be required to return annually, in person, to an enrollment site to complete the same eligibility determination and enrollment process that was done today. **Your annual return date is your birthday.**

Acknowledgment of Receipt:

Client Signature: _____ Date ____/____/____

*A **Spanish** translation of the above is to be provided here.*