



**AIDS DRUG ASSISTANCE PROGRAM (ADAP) & PRE-EXPOSURE
PROPHYLAXIS ASSISTANCE PROGRAM (PrEP-AP)
ELIGIBILITY EXCEPTION REQUEST (EER)**

INSTRUCTIONS:

This form is used by a **certified ADAP/PrEP-AP enrollment worker** to request extended eligibility for an ADAP/PrEP-AP client who is on a 30-day Temporary Access Period (TAP) and is unable to obtain and submit required ADAP/PrEP-AP eligibility supporting documentation within the 30-day TAP timeframe. This form should be used prior to the expiration of a client’s 30-day TAP. Please complete all sections then submit it through the ADAP Enrollment System (AES) via a work item. Only ADAP/PrEP-AP staff can approve or remove EERs. Once processed, the enrollment worker will receive an auto notification letting them know that the EER request was either rejected or approved.

ADAP/PrEP-AP CLIENT INFORMATION:

(Current Date)

(AES ID Number)

(Client First Name)

(Client Last Name)

(Date of Birth)

(Social Security Number, if applicable)

ADAP/PrEP-AP ENROLLMENT WORKER INFORMATION:

(Enrollment Worker First Name)

(Enrollment Worker Last Name)

(Enrollment Worker ID Number)

(Enrollment Site Name and Number)

(Phone Number)

(Fax Number)

(Enrollment Worker Email Address)

REASON FOR ELIGIBILITY EXCEPTION:

Select one:

Missing or incomplete proof of identity

Missing or incomplete proof of California residency

Missing or incomplete proof of household income

Client has a future employment start date within the next 30 days

Other (please explain):

QUESTIONS or COMMENTS:

Please contact the ADAP call center at (844) 421-7050
Monday through Friday, 8 a.m. — 5 p.m. (excluding holidays).