TO: Local District Commissioners, Medicaid Directors, AHIP Contact Person
FROM: Betty Rice, Director
        Division of Consumer and Local District Relations, OMM
SUBJECT: AIDS Health Insurance Program (AHIP) and ADAP Plus Insurance Continuation (APIC)
EFFECTIVE DATE: July 1, 2000
CONTACT PERSON: AHIP-Barbara Pukis, Off. Medicaid Mgmt. (518) 474-9193
               APIC-HIV Uninsured Care Programs 1-800-542-2437

In addition to the AIDS Health Insurance Program (AHIP) that will continue to operate, a new method to pay insurance premiums for people who are HIV positive will begin in the AIDS Institute, another office of the New York State Department of Health, on July 1, 2000. It is called, "ADAP Plus Insurance Continuation (APIC)".

The attached ADAP Plus Insurance Continuation fact sheet (Have Health Insurance) explains the basic eligibility criteria for this new program. Unlike AHIP which is funded by Medicaid with state and local funds (no federal participation), APIC is paid for by Ryan White funds with no local funds. Local departments of social services do not determine eligibility. However, since both AHIP and APIC will be operating concurrently, applicants need to understand the advantages and disadvantages of each program. To assist you in this effort, a comparison chart (AHIP versus APIC Major Differences) is attached. Applicants are free to choose either AHIP or APIC.

If someone applies for AHIP but is determined ineligible for the premium payment, he/she should be notified by issuance of the "Notice of Action on Application/Benefit for MA Payment of HIP under AHIP", DSS-4329 and a copy of the attached ADAP Plus Insurance Continuation fact sheet that explains APIC and lists contact information if the individual appears to be eligible and wants to apply.

Any questions about AHIP can be addressed by Barbara Pukis in the Office of Medicaid Management at (518) 473-5604. Questions about APIC should be referred to the HIV Uninsured Care Programs in the AIDS Institute at (800) 542-2437.
HAVE HEALTH INSURANCE?
COBRA BENEFITS?
YOU MAY BE ELIGIBLE FOR ADAP PLUS

The ADAP Plus Insurance Continuation Program (APIC) may pay for your health insurance if:

° You recently lost your health insurance and qualify to continue coverage through COBRA

° You are employed, but the cost of your insurance is too high for your income

° You have self-pay insurance, but the cost of your insurance is too high for your income

Eligibility Criteria (same as ADAP Plus)

° You must be a New York State resident (U.S. citizenship or immigration documentation is not required)

° You must be HIV-positive (asymptomatics are eligible)

° You must have an income less than $44,000/year for a household of one, $59,200 for two, and $74,400 for three or more

° Your liquid assets (savings, stocks, bonds, etc.) must be less than $25,000

Insurance policy criteria - each policy will be reviewed for:

° Cost effectiveness: Does your insurance cost less than ADAP/ADAP Plus coverage?

° Quality of coverage: Does your insurance pay for HIV specialists, drug and medical care like ADAP/ADAP Plus?

° Work related coverage: If you can join the health insurance offered by your employer:
  - Is the cost of your insurance premium too high for your income? and
  - Is your employer paying at least 50% of the cost of your insurance?

How to apply: After 7/1/00 - Contact the ADAP Plus Insurance Continuation Program (APIC) - Call toll free at 1-800-542-2437
TDD at 1-518-459-0121/Relay operator 1-800-421-1240
Write: ADAP, Empire Station, PO Box 2052, Albany, NY 12220-0052

ADAP Plus Insurance Continuation
New York State Department of Health - AIDS Institute
## AHIP VERSUS APIC MAJOR DIFFERENCES

<table>
<thead>
<tr>
<th>ELIGIBILITY FACTOR</th>
<th>AHIP CRITERIA</th>
<th>APIC CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Unemployed or working part-time</td>
<td>Can be fully employed</td>
</tr>
<tr>
<td>Health</td>
<td>Aids or HIV-related disease</td>
<td>Asymptomatics are eligible</td>
</tr>
<tr>
<td>Income in 2000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>One Person</td>
<td>$15,448</td>
<td>$44,000</td>
</tr>
<tr>
<td>Two People</td>
<td>$20,813</td>
<td>$59,200</td>
</tr>
<tr>
<td>Three People</td>
<td>$26,178</td>
<td>$74,400</td>
</tr>
<tr>
<td>Resources</td>
<td>Exempt</td>
<td>Liquid Assets less than $25,000</td>
</tr>
<tr>
<td>Insurance Premium</td>
<td>No cost-effectiveness determination</td>
<td>Must be cost-effective</td>
</tr>
<tr>
<td>Insurance Policy</td>
<td>Group Health</td>
<td>Can be self-paid policy</td>
</tr>
<tr>
<td></td>
<td>Insurance Only</td>
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<tr>
<td>Eligibility Determined By</td>
<td>LDSSs</td>
<td>AIDS Institute ADAP program</td>
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