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Eligibility Checklist

Signed application (Re- intake closed for more than 1 year /new client)

Initiation of Services

Consents/ Releases

Proof of HIV - Applicants are required to have documentation of a medical diagnosis of HIV disease with a laboratory test documentation confirmed HIV infection for their initial determination of eligibility)

- Positive HIV Immunoassay (IA) test result from an initial antibody or combination antigen/antibody (Ag/Ab) test followed by a positive(reactive) HIV-1/2 type – differentiating test (Supplemental IA), qualitative Nucleic Acid Test (NAT)/Nucleic Acid Amplification Test (NAAT) , Western Blot or Immunofluorescence Assay (IFA)
- Positive qualitative HIV NAT (DNA or RNA) or HIV-1 p24 antigen test
- Detectable (quantitative) HIV viral load (undetectable viral load tests are NOT proof of HIV)
- An HIV nucleotide sequence (genotype)

Photo Identification

Proof Living in Florida

- Current utility bill w/ your name and street address
- Current mortgage or rental agreement w/ your name and street address
- Statement of support letter from family or friend whom the client resides with
- Bank Statement with name and street address
- Property tax receipt or IRS W-2 Form for previous year
- Recent school records
- Bank Statement with name and street address
- Current documentation from FLMMIS or MEVSNET
- Current voter’s registration card
- Official correspondence (recently released)
- Current documentation from Florida Medicaid Management Information System (FLMMIS) or the Medical Eligibility Verification System (MEVSNET) showing that the client is currently receiving Medicaid or assistance from Supplemental Nutrition Assistance Program (SNAP)
- Prison Records (if released in the last 2 weeks) or DOC offender search photo print out
- Unemployment documentation w/name and street address
- Declaration of Domicile

Social Security Card

Proof of income or verification of no income

Documentation applied for SSI/ SSDI, unemployment compensation, pension, TANF, SNAP, self- employed documentation Federal Income Tax Form 1040 Schedule SE, Schedule C

Proof of Insurance (copy front and back of card)

- **Copy of Benefit Summary / Policy coverage page**

If applicant has access to insurance and open enrollment is not immediate complete the Insurance Wavier Form

Applicant must access insurance during open enrollment and provide insurance documents, refusal to access employer- based insurance is justification to deny eligibility

- **If client has no insurance :**

Letter from employer stating applicant has no access to insurance

- **Medicaid** – all applicants potentially eligible for Medicaid and not currently accessing some form of insurance must be pre-screened for Medicaid www.myflorida.com/accessflorida - Access you benefits click “ Am I Eligible” print result page

Veteran’s Administration (VA)
Medicare card Part A, B, C, D (front and back)
Medically Needed (Share of Cost Medicaid)

Children’s Medical Services (CMS)
Florida KidCare
ADAP Premium Plus

Need the list of medications and prescriptions