



Orange County Ryan White Services Program Eligibility Frequently Asked Questions for Clients

The following document provides information about the Ryan White eligibility screening process. The questions and answers below are provided based on information known as of March 1, 2020.

1. Why do I need to be screened for Ryan White eligibility?

All individuals who need services funded by the Ryan White Program must be screened for Ryan White eligibility.

2. What is the difference between eligibility for the Ryan White Program and qualifying for a service?

- Eligibility for the Ryan White program is based on Health Resources Services Administration (HRSA)¹ requirements. It states that a person must have:
 - Proof of HIV status
 - Proof of Orange County residency, and
 - Proof that the client has no other way to receive the service (for example, proof of no health insurance).
- Qualifying for a Ryan White service is based on HRSA eligibility and Planning Council determined requirements (for example, proof of disability, income limits, etc.).
- You may be eligible for the Ryan White program, but not qualify for some Ryan White services.

3. How will I know if I am eligible and qualify for a service?

Once you have completed eligibility, your case manager or service provider can help determine the services you are qualified to receive. Some services require additional information to qualify for the service (for example, proof of disability, homebound status). The case manager or service provider, not the eligibility worker, will request any additional required information to qualify for a service.

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¹ HRSA-The federal program that funds the Ryan White program.



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4. Where will I go to be screened for eligibility?

- All clients must be screened at 17th Street Eligibility (1725B W. 17th Street, Santa Ana, Annex Building) unless they do not receive care at 17th Street Clinic. There are exceptions for eligibility screening, clients who are only receiving services from Radiant Health Centers or Shanti will be screened for eligibility at those agencies.

Agency where you receive services	Eligibility Site
17 th Street Clinic	17 th Street Eligibility (1725B W. 17th Street, Santa Ana, Annex Building)
APAIT	17th Street Eligibility (1725B W. 17th Street, Santa Ana, Annex Building)
Laguna Beach Community Clinic	17 th Street Eligibility (1725B W. 17th Street, Santa Ana, Annex Building)
Radiant Health Centers (and not receiving <i>any</i> services at 17 th Street Clinic)	Radiant Health Centers (17982 Sky Park Circle, Suite J Irvine, CA 92614)
Shanti Orange County (and not receiving <i>any</i> services at 17 th Street Clinic)	Shanti Orange County (23461 South Pointe Drive, Suite 100 Laguna Hills, CA 92653)

5. What documents do I need to bring to my eligibility appointment?

- Documents for eligibility need to prove:
 - HIV status (Proof of HIV is only required for new patients at intake.),
 - Proof of Identification (State issued Driver's license or ID Card),
 - Orange County residency,
 - Income, and
 - Health insurance or lack of health insurance.
- ADAP, Medi-Cal, and Covered California screening may require additional documents to determine eligibility for those programs.
- See the "Required Eligibility and Program Overview" document for information on acceptable documents that support proof of eligibility.

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6. What is the process for eligibility screening?

The process usually includes:

- An initial and bi-annual 1-2 hour appointment with the eligibility worker;
- Eligibility documents are reviewed (see “Required Eligibility and Program Overview” document), if any documents are missing, you will be given a “Pending Documents” form;
- If needed, an application and/or referral for ADAP, Covered California, or Medi-Cal are submitted;
- Additional information may be requested from ADAP or Medi-Cal to complete eligibility;
- A release of information/authorization to disclose is completed to share information (with the exception of ADAP information) with other service providers; and
- Eligibility for services is entered into ARIES (the Ryan White services database).

7. How often must I be screened for eligibility?

- HRSA requires eligibility screening at initial enrollment and every six (6) months thereafter.
- Any change in your insurance, income, and/or residency, must be reported to the eligibility worker within five (5) business days.
- The six (6) month reassessment is completed using a client Self-Attestation Form.

8. Is there assistance to help me get to my eligibility appointment?

Transportation assistance is available to help you get to your eligibility appointment. Ask your eligibility worker or case manager for transportation assistance options.

9. What happens if I miss my eligibility appointment?

Call your eligibility location to make or reschedule an appointment:

- 17th Street Eligibility: (714) 834-8456
- Radiant Health Centers: Eligibility worker or (949) 809-5700 (Reception)
- Shanti: (949) 452-0888

10. What happens if I do not complete eligibility?

Failure to complete eligibility will lead to services being stopped. However, once eligibility is completed services can be provided. It is important to go to your eligibility appointment. Contact your case manager, eligibility worker, or service provider if you are having difficulty completing the eligibility process.