

EMORY HEALTHCARE

THE EMORY CLINIC

DIVISION OF INFECTIOUS DISEASES

Dear Patients:

Our clinic receives federal grant funding through the Ryan White Treatment Modernization Act. These grants allow us to provide services such as counseling, testing, primary care, subspecialty referrals, and medical social work to those who are uninsured or underinsured. All patients, however, regardless of insurance status or income, benefit from the funds since they are directed toward staff resources, medication co-payment assistance, and other services.

To continue to prove financial need in the communities we serve, we are required to provide to the federal sponsor income and other demographic information on our patients **before the first visit** and then **every six months**. This information **must** be obtained from all new and established patients regardless of insurance status or income. Some of the information can be self-reported and other parts require documentation.

One of our staff will be calling you to request the following information:

- Annual total household income level – You will be asked to provide copies of documents received from all sources before taxes, including:
 - Wages/salary
 - Payments from public assistance, social security, military allotments, disability, child support, government or private pensions
 - Dividends (including permanent fund & longevity dividends), interest, rents, royalties, estates or trusts

Individuals who have household incomes equal to or below 300% of the current Federal Poverty Level (FPL) are eligible for Ryan White supportive services (medical social work, co-payment assistance, transportation, etc.) and may receive supportive services free of charge through the program. Clients with incomes that exceed 300% FPL are **not** eligible for the Ryan White supportive services. Patients can also sign a declination letter stating they are above 300% FPL and not provide income information.

- At the initial enrollment and every subsequent 6-month recertification date, the patient must provide documentation of income for all household members.

NOTE: For eligibility purposes, household is defined as the client, and the client's spouse, co-located partner, dependent children or adult dependents. It may also be defined as an adult client living with her/his parent(s).

MARRIED	documentation for the spouse's income must be provided.
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- If the client is married,
- If the client is being supported by her/his parent(s), their income should be considered. Parental income should be documented on the "Financial/Income Information Section" of the ADAP Application (see Appendix B). However, attachment of income documentation is unnecessary for the parent(s).
- There may be household combinations with other relatives or friends. A client with no dependents, living with a friend who is providing food and shelter, would be counted as a household of one but must complete a notarized Support and Residency Verification Letter and submit a statement from the person with whom s/he is living.
- If a client states that s/he has had zero or extremely low income coming into the household, there needs to be a notation as to how food, shelter, and utilities are being managed. A notarized Support and Residency Verification Letter must be provided.

- Self Employed Applicants:
Clients who are self employed and who do not receive pay checks, may submit a signed notarized statement identifying average monthly wages. The notarized statement will be accepted by the clinic as Proof of Income along with the most recent or previous year's tax return.
- ***Documentation of all sources of income, both taxable and nontaxable, must be taken into account. Income that must be counted in determining eligibility includes:***
 - Employment income
 - Social Security (SSDI)
 - Supplemental Security Income (SSI)
 - General assistance
 - Unemployment benefits
 - Veteran Administration benefits
 - Retirement benefits
 - Private disability
 - Worker's Compensation
 - Interest income or other investment income
 - Cash support from family and friends
 - Food stamps
 - Labor pool employment – Day Laborers
- ***Documentation of all sources of income can include:***
 - Individual Federal Income Tax Return
 - Individual Georgia Income Tax Return
 - Current W-2 (most recent year) or current 1099 (most recent year)
 - Pay stubs for a full thirty days of consecutive income for pay periods, indicating a year-to-date total and the pay period, e.g., weekly, bi-monthly, monthly, etc.
 - Signed employer statements with dates, position, salary and phone number
 - Disability Award Letter indicating the pay period, e.g., weekly, bi-monthly, monthly, etc.
 - Bank statement, acceptable for SSI, VA, SSDI
 - Food stamp letters
 - Documentation of alimony
 - Signed notarized statement by client identifying average monthly wages
 - Self employed individuals may also submit a Signed Notarized statement identifying average monthly wages

Please note that all information is confidential and kept in a locked file cabinet in a locked room. The clinic only reports what percent of our patients fall into various categories; NO INDIVIDUAL PERSONAL INFORMATION IS REPORTED.

If your information is due, it must be received before we can schedule your first or follow-up appointment. You can fax (404-686-5723, Attention: Data Department), mail (Emory Infectious Disease Clinic, 550 Peachtree Street, Suite 7000, Atlanta, GA, 30308), or deliver the needed documents to the office. If any questions, please contact us at (404) 686-8114.

Thank you!