## Comments on Eligibility to Receive HIV Services Policy (220.001)

#	Item (in new policy)	Comment (include citation or justification if applicable)	DSHS Response	Resolution
1	7.1.3 Documentation of Texas Residency	I feel that the Revision to the Documents List will create barriers for clients who have none of the other items listed within the policy. Some individuals live with family members or friends and may only have some type of business correspondence with their current address listed. Working in a Case Management capacity in the past and now currently in a funder capacity (completing audits and Technical Assistance) on the AA level, clients will likely not have items listed but will have some type of formal business	The changes made to section 7.1.3: Documentation of Texas Residency were intended to expand options and increase flexibility for clients to prove their state residency. This updated list includes a variety of documents that provides options for clients who come from many different situations. There are some limitations or requirements we have established; however, these were included to ensure that the address provided is the client's physical address.	Edited content to clarify policy
		correspondence. Especially if they receive services from another agency (unrelated to homelessness).  The Credit Card or Cable Bill was not something I would see often from this population but I have seen several phone bills detailing the clients Texas residency and other formal	A few examples of accepted Texas residency verification that will not create barriers for clients include:  • a letter of identification and verification of residency from a verifiable homeless shelter or community center serving homeless individuals	

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		correspondence (not junk mail). I agree with DSHS regarding the Statement from landlord/neighbor/another reliable source, as it was too loose and not easily verifiable.	<ul> <li>a statement/attestation (does not require notarization) with client's signature declaring that client has no resources for housing or shelter. For THMP, a letter from an agency worker attesting that the individual has no resources for housing or shelter will be accepted.</li> <li>A piece of mail with the client's name and address printed and proof it went through the mail system (a person could even send themselves a piece of mail or a case manager/service agency could send a piece of mail to the address simply to fulfill the residency verification requirement)</li> <li>Observance of personal effects and living arrangement (e.g., visit to residence). For THMP, a signed statement on agency letterhead detailing this observance and why other forms of</li> </ul>	

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		proof of residency were not available will be accepted.	
		In other words, the client can sign the attestation form stating that they attest to living at a specific address with family/friends, or a case manager, outreach worker or similar agency employee may make a field visit to the location where the client resides and document this in the primary record. The above are examples of an acceptable verification of residency.	
		The examples above are not exhaustive. If there are unique living situations or other issues regarding acceptable documentation of proof of residency, service providers should contact their Administrative Agency or THMP as applicable in writing or via email.	
7.1.3 Documentation of Texas Residency	The line between the first and second part of the Proof of	Official source documentation	
		7.1.3 Documentation of The line between the first and	proof of residency were not available will be accepted.  In other words, the client can sign the attestation form stating that they attest to living at a specific address with family/friends, or a case manager, outreach worker or similar agency employee may make a field visit to the location where the client resides and document this in the primary record. The above are examples of an acceptable verification of residency.  The examples above are not exhaustive. If there are unique living situations or other issues regarding acceptable documentation of proof of residency, service providers should contact their Administrative Agency or THMP as applicable in writing or via email.  7.1.3 Documentation of The line between the first and second part of the Proof of Official source documentation

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		says: "If none of the items listed above are available, Texas residency may be verified through:" I would like propose that this line be removed and here is my reasoning: Having two separate lists to choose from with directions saying "if none of the above listed area available" leaves this open for questions by monitors and auditors about why the selections above weren't available. Either an item is	are preferable whenever available.  Monitors and other individuals performing oversight responsibilities must be able to find acceptable documentation of Texas residency in the client record; it is not in their purview to decide why one document was used over another	
		approved to be acceptable or it is not		
3	7.1.3 Documentation of Texas Residency	I would like to object to the removal of using "Credit card, phone, or cable bill with address clearly indicated on document". Reasoning: With the exception of a valid TX DL or ID and a formal lease, this is one of the most used items for Proof of Residence. The requirement includes that it be dated within the last 30 days, so it really shows the client actually is registered at that address and that it is coming from a reputable business.	See Response to Comment #1 above	

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		Also, the another part that they are removing that is problematic is "statement from a landlord". Many clients rent rooms from individuals who are not actually running an apartment house and they rent on a month to month basis. There is no actual formal agreement or lease in these situations.  The removal of these options just puts up more barriers to		
		care, which is something that the system has been trying hard to reduce.		
4	7.2 Screening Clients for Third Party Payers	"Programs/benefits that must be applied or billed first." Here again, the change does not make much of a difference, the issue is how this requirement will be monitored and audited. What is going to be required as proof that we have accomplished this and if they do require it, is there going to be any training on all of the types of programs that they want us to make sure we ask	We require all Ryan White Part B recipients have a system in place to verify other payors. Documentation that a client has been run through an insurance verification database is required for any service that may be paid for by public or private health insurance coverage. Acceptable documentation varies by region—please refer back to your Administrative Agency's policies for details on this	No change— follow payor of last resort requirement

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		about? Many staff people who do eligibility work are not trained case managers or social works and those individuals do not typically have in depth knowledge of those types of programs to be able to question the clients on their participation in such programs.	process. Some examples of acceptable documentation of insurance verification include copy of insurance card, insurance coverage termination letters, certificate of prior coverage, and/or COBRA paperwork.  Reach out to your Administrative Agency for any training requests because processes vary by region.	
5	7.1.0 Requirements to apply for Initial Eligibility and Maintain Program Eligibility  Comment on addition of new language as follows: "In addition to all of the requirements and acceptable forms of documentation outlined in the policy language below, THMP can request additional information to verify an applicant's eligibility when needed."	Comment Policy and eligibility requirements should be fixed and well defined. This statement is open ended, provides no guidance or detail regarding what type of "additional information" may be needed by any potential THMP patient, nor the scope of what it may entail to provide such documentation. An open ended, non-defined eligibility expectation could easily be subject to inconsistent understanding and/or implementation resulting in disparate access to care.	THMP verifies eligibility through third party systems and as a result of this verification we may need additional information which will vary on a case-by-case basis with the objective of ensuring timely access to prescribed medications.	No change

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		Recommendation Develop the full scope of what is needed to verify eligibility instead of utilizing non-defined and open-ended eligibility requirements.		
6	7.1.3 Documentation of Texas Residency (middle of section)  "All eligibility staff shall be made aware of this policy no less frequently than annually."	Comment This requirement is oddly placed, showing only under Section 7.1.3 Proof of Residency following the acceptable documentation list. This is not repeated in the sections outlining required proof of HIV status or proof of income.  Recommendation Place this statement/requirement somewhere within the policy that is more general to the document if the DSHS expectation is for subrecipients to document that eligibility staff review this entire policy on an annual basis.  Note If the DSHS intent is for subrecipients to ensure eligibility staff just conduct an annual	Agreed	Moved tosection

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		review of acceptable proof of residency documents then this is properly placed in this section and the recommendation is retracted.		
7	7.1.3 Documentation of Texas Residency  Revision to documents list  - removal of "credit card, phone or cable bill with address clearly indicated on the document; or formal business correspondence; or statement from landlord/neighbor/another reliable source"	Comment Case managers within our organization who work with the most marginalized clients express sincere concern regarding the removal of these documents as proof of residency. They state that doing so will most definitely and negatively impact the ability of some clients to provide proof of residency needed to quality for care.  Previously these documents were used as the "last resort documentation" for eligibility which did streamline access to care. Given the original intent of adding the above noted documents as proof of residency was to decrease barriers – the removal of them logically would result in increased barriers to care as noted by front line staff.	See response to Comment #1 above	

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		<u>Recommendation</u>		
		Do not remove these documents		
		as acceptable for proof of		
		residency.		