



Client Fact Sheet

AIDS HEALTH INSURANCE PROGRAM (AHIP)

What is the AIDS Health Insurance Program (AHIP)?

AHIP is designed for people with AIDS or HIV-related disease who are not Medicaid eligible, but cannot afford their own insurance. The AHIP pays your health insurance premiums, excluding any required co-payments and deductibles. You'll be able to keep your health insurance and you can continue to see your same doctor and other primary care providers.

What eligibility criteria must I meet to be in AHIP?

■ You must have AIDS or HIV-related disease;
■ you must be ineligible for Medicaid and have existing insurance at the time of application for AHIP. (note: if you are eligible for Medicaid, then Medicaid will pay your health insurance premiums as well as other medical costs not covered by your health insurance);

■ your monthly income can be no higher than \$1,670* if you are single or higher than \$2,247* for a household of two.

** These figures are effective as of April 2009 and are updated periodically.*

If your income is too high for the AHIP program, you may qualify for a new health insurance premium payment program which started July 1, 2000. The ADAP Plus Insurance Continuation Program (APIC) is administered by the New York State Department of Health's AIDS Drug Assistance Program (ADAP). The program pays health insurance premiums for people with HIV/AIDS who meet the eligibility criteria for the ADAP program. An individual can have annual gross income of up to \$44,000, a family of two can have up to \$59,200 and a family of three or more can have up to \$74,400. The resource limit is \$25,000 for individuals and families. If you are not eligible for AHIP but think you are eligible for the APIC program, you can obtain more detailed information and an APIC application by calling the Client Advocacy Helpline at 212/367-1125 weekdays from 2:00 to 5:30 P.M.

Will AHIP count my assets when determining eligibility?

Unlike Medicaid, AHIP does not count assets, but AHIP

... will examine any income generated by those assets. Income generated by assets or resources is added to existing monthly income when determining eligibility.

What documents will I need as proof of eligibility?

- 1) For proof of citizenship: birth certificate, green card, naturalization certificate, or passport.
- 2) For proof of residence: rent receipt or copy of lease.
- 3) For proof of income: SSI/SSD award letter, pay stub, unemployment benefits statement, etc.
- 4) For medical documentation: letter of diagnosis from doctor or M11Q form.
- 5) For verification of health insurance: insurance premium or COBRA statement.
- 6) Social Security card.
- 7) Insurance card.

What is the application process for AHIP?

■ You need to complete a Medicaid application. You can obtain applications by calling the GMHC Advocacy Helpline at 212/367-1125. Be sure to write AHIP across the top of the application (as the same form is used for other programs).

■ Once you have completed the application, you must call the Client Representative Unit at 212/643-7969 to schedule an appointment.

■ You or your representative can then deliver the application to the Client Representative Unit at 330 West 34th Street, 11th floor, New York, NY 10001.

When should I apply for AHIP?

As soon as possible. You **must** apply **before** the date your health insurance coverage is scheduled to end. If you lose your health insurance because you did not apply for AHIP before this date, AHIP cannot replace the insurance you lose or buy new insurance for you.

Can someone else apply for me?

Yes. A friend, relative, advocate or significant other can go to the Medicaid office and apply for you as long as they bring all of your required AHIP documentation.

The Client Advocacy Unit at GMHC is available to assist you. For more information, please call our Helpline: 212/367-1125, Wednesdays, 2:00 to 5:30 P.M. Walk-in services are available Tuesdays and Thursdays, 10:00 A.M. to 1:00 P.M.