

## SERVICE CAPS/LIMITS\* AND ELIGIBILITY

Currently Funded Service Category	Cap/limit <small>All limits are established per client per contract year beginning with the '07 program year unless otherwise indicated</small>	Eligibility Criteria
Food Bank Nutritional Supplements	No cap/limit established	HIV+, proof of residency, proof of income, income <150% Federal Poverty level (FPL) which includes a provision for waiver when required.
Transportation	No cap/limit established	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)
Substance Abuse	No cap/limit established	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)
Mental Health	No cap/limit established	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)
Drug Reimbursement	No cap/limit established  No coverage is provided for over-the-counter medications except diabetic supplies	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)
Health Insurance	Enrolled clients receive up to \$275 per month for co-pays and up to \$400 per month for COBRA, group and individual insurance premium payments	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)
Oral Health	\$2000  Covered services are limited to: exams, x-rays, fillings, extractions, cleanings (prophylaxis, scaling and root planing, gross debridement), dentures (partial or full) and oral health instruction.	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)  Grantee considers exceptions on a case by case basis only if medically necessary
Primary Care   Patient Education/ Treatment Adherence	No limit on office visits or labs	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)  Babies born to HIV+ mothers (Pediatric indeterminate) may be served until 2 years of age. Must be receiving primary care from a Ryan White funded provider.

Treatment Adherence	No cap/limit established	Available only to Minority AIDS Initiative (MAI) clients HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL)
Case Management	\$2400	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL) Grantee considers exceptions on a case by case basis
Case Management (non-medical)	No cap/limit established	HIV+, proof of residency, proof of income, income <400% Federal Poverty level (FPL) State Eligibility Rule 64D allows a one-time exception.

It is the Provider's responsibility to respond flexibly to a changing environment as long as they do not exceed the cap established for a particular service. (revision 9/2/09)

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