

**Ryan White**

**Services Division**

**BOSTON  
PUBLIC  
HEALTH  
COMMISSION**



**Boston Eligible  
Metropolitan Area (EMA)  
Health Programs  
Coverage Guide**

**Ryan White Services Division  
Infectious Disease Bureau  
Boston Public Health Commission**

Table of Contents

Introduction..... 3

Overview of Health Coverage Programs ..... 4

MassHealth..... 4

    Introduction to MassHealth ..... 4

    Eligibility Requirements ..... 4

    Coverage Details..... 5

    Application Process ..... 6

    Annual Recertification..... 8

HIV Drug Assistance Program (HDAP)..... 9

    Introduction to HDAP..... 9

    Eligibility Requirements ..... 9

    Coverage Details..... 10

    Application Process ..... 11

New Hampshire Care (ADAP)..... 12

    Introduction to New Hampshire Care (ADAP) ..... 12

    Eligibility Requirements ..... 12

    Coverage Details..... 13

    Application Process ..... 14

Ryan White Dental Program (RWDP) ..... 15

    Introduction to RWDP ..... 15

    Eligibility Requirements ..... 15

    Coverage Details..... 16

    Application Process ..... 18

Medicare ..... 20

    Introduction to Medicare..... 20

    Eligibility Requirements ..... 20

    Coverage Details..... 20

    Application Process ..... 20

Frequently Asked Questions (FAQs) ..... 21

Key Terms..... 24

Comparative Overview ..... 26

Additional Resources..... 32

    Contact Information for Each Program..... 32

    Online Resources and Links..... 33

## Introduction

### Purpose of the Handbook

The goal of this Health Programs Coverage Guide is to inform clients, healthcare providers, and case managers, associated with the Ryan White Part A program at the Boston Public Health Commission, to successfully serve and connect clients with the various health programs that require annual coverage. The programs reviewed within this Guide include:

- MassHealth,
- the Community Resource Initiative (CRI) funded for the HIV Drug Assistance Program (HDAP),
- the New Hampshire CARE Program funded for the HIV Drug Assistance Program (H/ADAP),
- the Ryan White Dental Program (RWDP) funded for Oral Health Care (OHC), and
- Medicare.

For our clients, the handbook offers a clear and concise roadmap to determine their eligibility and understand the extent of coverage provided by different health programs. It includes step-by-step instructions on how to apply for these programs, what documents are needed, and important deadlines to keep in mind. This ensures that clients can make informed decisions about their healthcare options, ultimately improving their access to necessary medical services.

For providers and case managers, this guide serves as an invaluable resource to better assist clients in securing the health coverage they need. It includes detailed comparisons between different healthcare plans, highlighting key differences in coverage, exclusions, and benefits. By understanding these nuances, providers and case managers can offer more targeted and effective support to their clients, ensuring that they receive the best possible care and support.

Overall, this handbook is dedicated to educating and guiding all stakeholders through the health programs' landscape. It aims to enhance understanding, streamline processes, and facilitate access to essential healthcare services. By doing so, we hope to improve health outcomes and quality of life for all clients served under the Ryan White Part A program.

# Overview of Health Coverage Programs

## MassHealth

### Introduction to MassHealth

MassHealth, Massachusetts' Medicaid and Children's Insurance Program (CHIP) provides comprehensive healthcare coverage to eligible low- and moderate-income residents, including Ryan White Part A clients living with HIV/AIDS. It offers a wide range of services such as preventive care, doctor visits, hospital stays, prescription medications, mental health services, and long-term care. Eligibility is determined by income, residency, and other criteria, ensuring access to necessary medical and support services. MassHealth collaborates with numerous healthcare providers statewide to deliver high-quality care to its members.

### Eligibility Requirements

#### 1. Residency

- **Requirement:** Applicants **MUST** be residents of Massachusetts. Temporary visitors DO NOT qualify.
- **Documentation:** Acceptable proofs include a Massachusetts driver's license or state ID, a signed lease or mortgage statement, utility bills in your name, or official mail from any government entity.

#### 2. Income:

- **Eligibility Determination Method:** MassHealth uses the Modified Adjusted Gross Income (MAGI) method to determine financial eligibility for most applicants. This method aligns with federal tax rules to assess household income and size. Eligibility income levels are specified as a percentage of the Federal Poverty Level (FPL), which updates annually.
- **Income Limits:** Eligibility for MassHealth is primarily determined by income, which must fall within specific limits based on family size and the type of coverage.

### **Updated Income Thresholds for MassHealth (2023)**

Here's a table summarizing these values based on the FPL:

Category*	% of FPL	Income Limit for One Person	Income Limit for a Family of Four
Adults (19-64)	138%	\$20,120	\$41,400

*Information Collected and Reviewed by R. Dai & M. Lopez*

Pregnant Women and Infants	200%	\$29,160	\$60,000
Children (1-18)	150%	\$21,870	\$45,000
Seniors (65 and older)	Varies (up to 247%)	Varies (up to \$35,978)	Varies widely
500% of FPL	500%	\$72,900	\$150,000

\*Sources:

- ASPE. (2023). 2023 Poverty Guidelines. Retrieved from [ASPE - 2023 Poverty Guidelines](#)
- Federal Register Notice - 2023 Guidelines. Retrieved from [Federal Register Notice](#)

**3. Citizenship/Immigration Status:**

- U.S. citizens, nationals, and certain non-citizens (such as lawful permanent residents and individuals with humanitarian statuses) are eligible for MassHealth if they meet income and other criteria. Documentation proving status, such as a passport, birth certificate, or immigration papers, is required.
- Other Important Notes:
  - Applicants must provide documentation to prove citizenship or eligible non-citizen status.
  - No SSN is required if the applicant does not have one.
  - MassHealth verifies immigration status through the SAVE program, ensuring privacy and protection of information.

**4. Other Criteria:**

- Additional criteria may include age, disability status, pregnancy, and specific health conditions. For instance, children, pregnant women, seniors, and individuals with disabilities might have different eligibility thresholds and benefits.
- For Ryan White Part A clients, MassHealth specifically considers the specialized needs of individuals living with HIV/AIDS. If you are unsure if you fall under this category, please contact your case manager or Health Connector agent for assistance.

**Coverage Details**

**1. MassHealth Standard:**

- **Description:** Comprehensive coverage for low-income families, pregnant women, SSI recipients, and residents under 65 with disabilities.

*Information Collected and Reviewed by R. Dai & M. Lopez*

- **Benefits:** Doctor visits, hospital stays, surgery, emergency care, prescription medications, mental health and substance abuse services, long-term care, vision and dental care.
- **Eligibility:** Based on income, residency, and specific criteria for families with children, pregnant women, and people with disabilities.

## 2. MassHealth CommonHealth

- **Description:** Medical benefits for adults and children with disabilities, regardless of income.
- **Benefits:** Same coverage as MassHealth Standard.
- **Eligibility:** Must meet state disability requirements; no income limit.

## 3. MassHealth Family Assistance

- **Description:** Health insurance support for those with incomes too high for other MassHealth programs.
- **Benefits:** Covers private health insurance premiums and provides additional benefits similar to MassHealth Standard.
- **Eligibility:** Aimed at families with children and pregnant women with higher incomes who find private insurance costly.

## 4. MassHealth CarePlus

- **Description:** Coverage for adults under 65 without dependents, including additional services like dental and vision care.
- **Benefits:** Primary care, specialized services, behavioral health, physical therapy, occupational therapy, and speech therapy.
- **Eligibility:** Under 65, without dependents, meeting specific income criteria.

## Application Process

### 1. Methods to Apply

Applicants have multiple channels through which they can apply for MassHealth, each designed to accommodate different preferences and needs:

- **Online:**
  - **Platform:** Massachusetts Health Connector website.
  - **Process:** Complete the application form by providing detailed information about your household, income, and any relevant health coverage details.

- **Convenience:** The fastest and easiest method, available 24/7 with immediate confirmation of submission.
- **By Mail:**
  - **Process:** Download and print the application form from the MassHealth website or request a form to be mailed to you. Complete the application by hand and mail it to the address provided on the form.
  - **Consideration:** Allow for processing time; it may take several weeks from the date of mailing to receive a response.
- **In Person:**
  - **Locations:** MassHealth Enrollment Centers (MECs).
  - **Process:** Visit any MEC with all required documents to complete your application with the help of staff.
  - **Benefit:** Personal assistance and the ability to ask questions and resolve any issues on the spot.

## 2. Required Documentation

To ensure a smooth application process, having all necessary documentation ready is crucial. Here's what you'll typically need:

- **Proof of Income (not limited to):**
  - Recent tax returns, pay stubs for the last 30 days, or other proof of current income such as unemployment benefits statements.
- **Proof of Residency (not limited to):**
  - Massachusetts driver's license or state ID, utility bills in your name, or a rental agreement showing a Massachusetts address.
- **Proof of Citizenship or Eligible Immigration Status:**
  - U.S. passport, birth certificate, green card, or other legal documents demonstrating U.S. citizenship or lawful presence in the U.S.
- **Documentation of Any Special Condition:**
  - Documentation from a medical professional about a disability, or eligibility documents for special programs like SSI.

## 3. Additional Considerations

- **Application Assistance:** Free help is available. You can get assistance from navigators at the Massachusetts Health Connector or outreach workers at community centers.

- **Language Support:** Applications and assistance are available in multiple languages to accommodate non-English speakers.
- **Renewal:** MassHealth requires annual renewal to maintain coverage. You will need to update or confirm your information to renew your benefits.
- **Processing Time:** Online applications may be processed more quickly than those submitted by mail or in person. Typically, you'll receive a response or request for additional documentation within 45 days of application submission.

#### 4. Tips for a Smooth Application Process

- **Double-check information:** Ensure all information is accurate before submission to avoid delays.
- **Organize Documents:** Keep all relevant documents in order, as you may need to submit them or present them at an enrollment center.
- **Follow Up:** If you haven't heard back within the expected time frame, don't hesitate to contact MassHealth for an update on your application status.

### Annual Recertification

#### 1. Purpose of Annual Recertification

- MassHealth members are required to renew their health plan annually to ensure continued eligibility and coverage. This process, known as annual recertification, involves verifying that members still meet the necessary income, residency, and other program-specific criteria.

#### 2. Recertification Process:

- **Notification:** Members are notified 45-60 days before coverage ends via mail, email, or the MassHealth online portal.
- **Completion Methods:**
  - **Online:** Through the Massachusetts Health Connector.
  - **Mail:** Send completed forms and documents.
  - **In Person:** At a MassHealth Enrollment Center.
- **Assistance:** Available through customer service, enrollment centers, and public health insurance navigators.
- **Deadline:** Submit recertification by the deadline to avoid coverage interruption.



# HIV Drug Assistance Program (HDAP)

## Introduction to HDAP

The Massachusetts Department of Public Health (MDPH)'s HIV Drug Assistance Program (HDAP) is a crucial program for individuals living with HIV/AIDS in Massachusetts that ensures access to essential medications and health insurance coverage. HDAP covers antiretroviral therapies (ART), and treatments for opportunistic infections, and assists with medication co-pays and health insurance premiums, reducing financial barriers. Eligibility is based on income, residency, and HIV status, prioritizing those most in need. By covering medication costs not funded by other insurance programs, HDAP ensures continuous access to necessary treatments while acting as a payer of last resort to maximize resources. HDAP is administered by **Community Resource Initiative (CRI)** on behalf of MDPH.

## Eligibility Requirements

To qualify for the Massachusetts HIV Drug Assistance Program (HDAP), applicants must meet the following criteria:

- **Residency:** Must be a resident of Massachusetts.
- **HIV Status:** Must be HIV-positive, confirmed by medical documentation.
- **Income:** Gross annual income must not exceed 500% of the Federal Poverty Level (FPL), with allowances made for each legal dependent.

## **Required Documents**

When applying for HDAP, the following documents must be submitted:

### **1. Proof of Massachusetts Residency (not limited to):**

- Utility bill
- Lease Agreement
- Paystub/earnings statement
- Valid driver's license or Massachusetts ID
- Government assistance mailing (dated within the past six months)

### **2. Proof of HIV-Positive Status:**

- Medical documentation from a healthcare provider confirming HIV-positive status, such as:
  - A letter from a licensed clinician
  - A signed Clinician Form verifying HIV diagnosis

### 3. Proof of Income (not limited to):

- Recent tax returns
- Pay stubs from the past three months
- Unemployment statements
- Award letters for SSI/SSDI, TAFDC/EAEDC, long-/short-term disability, and/or Worker's Compensation
- Monthly pension statements
- If working but without documentation, a letter from a case manager stating weekly, monthly, or yearly gross income and its source.
- If no income, a zero-income case manager letter with a statement of how the client is supporting themselves.

### 4. Health Insurance Information:

- Copies of all health insurance/prescription cards (front and back)
- MassHealth determination letter (if applicable)
- Summary of benefits for employer-based insurance plans (if applicable)

### 5. Client Consent:

- Signed HDAP Client Consent for the Release of Information and Client Certification Statement.

### Recertification

- **Frequency:** All HDAP participants are required to recertify **every six months** to maintain their eligibility.
- **Process:** The recertification process involves submitting a recertification application (Long Form) and updated documentation to verify continued eligibility based on residency and income. HDAP participants who are continuously enrolled can submit a Self-Attestation (Short Form) once per year in lieu of a Long Form.

### Coverage Details

#### 1. Covers prescription costs, including co-pays.

- HDAP covers the cost of HIV-related prescription medications. This includes providing direct payment for the drugs themselves and assisting with any related copayments that might otherwise be a financial burden to the patient.
- Does not cover cosmetic medications, erectile dysfunction drugs, fertility treatments, and certain named medications like Finasteride (Propecia) and Minoxidil (Rogaine).

## 1. Pays for health insurance premiums (for eligible plans).

- HDAP helps with the payment of health insurance premiums for eligible insurance plans. This is particularly important for those who do not have access to employer-sponsored health insurance or other forms of coverage, ensuring they can maintain essential health insurance.

## 2. Temporary Full Pay Coverage

- HDAP offers full pay coverage for prescriptions when clients are temporarily uninsured, ensuring continuous access to necessary medications.

### Application Process

1. **Obtain and Complete Application:** Download from the CRI website or request by mail. Fill out personal, medical, and financial information.
  - **Preferred:** Complete the electronic application through the HDAP Provider Portal (for case managers/providers) or the Client Portal (for clients).
  - Download from the CRI website at <https://crihealth.org/printable-forms/> or request by mail.
2. **Submit Documentation:** Include proof of residency, HIV status, income, insurance cards (if applicable), MassHealth determination letter (if applicable).
3. **Submission Methods:**
  - **Online:** Through the HDAP Client or Provider Portal. To request a portal account, contact [HDAP@crihealth.org](mailto:HDAP@crihealth.org).
  - **Fax:** 617-502-1703
  - **Mail:** HDAP, 529 Main Street, Suite 301, Boston MA 02129
  - **Secure Email:** Instructions available on the CRI website at <https://crihealth.org/contact/#Secure>.

Incomplete applications will delay processing. Once complete, applications are typically processed within 2-4 weeks. Recertification every six months is required to maintain eligibility. For assistance, contact HDAP at 617-502-1700, Option 1, or [hdap@crihealth.org](mailto:hdap@crihealth.org).

For more detailed instructions, refer to the full [HDAP Application Instructions](#).

## **New Hampshire Care (ADAP)**

### **Introduction to New Hampshire Care (ADAP)**

New Hampshire Care, also known as the AIDS Drug Assistance Program (ADAP) in New Hampshire, provides essential support for individuals living with HIV/AIDS. The program offers comprehensive medication coverage, including antiretroviral therapies (ART) and treatments for opportunistic infections, covering medication co-pays, deductibles, and premiums to reduce financial burdens. NH Care (ADAP) also covers the full cost of certain medications not funded by other insurance programs, ensuring continuous access to necessary treatments. Eligibility is based on income, residency in New Hampshire, and HIV status. Clients must be actively enrolled in the NH CARE Program, with ADAP serving as a payer of last resort after other insurance options are utilized.

### **Eligibility Requirements**

To qualify for NH Care (ADAP), applicants must meet the following criteria:

- **Residency:** Must be a resident of New Hampshire.
- **HIV Status:** Must be HIV-positive, confirmed by medical documentation.
- **Income:** Gross annual income must not exceed 500% of the Federal Poverty Level (FPL).
- **Utilization of Other Insurances:** Applicants must use other available insurances first.

### **Required Documents**

When applying for HDAP, the following documents must be submitted:

- **Proof of New Hampshire Residency (not limited to):**
  - Utility bill
  - Lease Agreement
  - Paystub/earnings statement
  - Current driver's license or New Hampshire ID
  - Government assistance mailing (dated within the past six months)
- **Proof of HIV-Positive Status:**
  - Medical documentation from a healthcare provider confirming HIV-positive status, such as:
    - A letter from a doctor or clinic
    - HIV lab test results
    - A completed HIV Verification Form

- **Proof of Income (not limited to):**
  - Recent tax returns
  - Pay stubs from the past three months
  - Unemployment statements
- **Health Insurance Information:**
  - Copies of all health insurance/prescription cards (front and back)
  - Explanation of Benefits (EOB) from insurance provider
  - Letters from other insurance programs confirming coverage or denial of specific medications

### **Recertification**

- **Frequency:** All NH Care (ADAP) participants are required to recertify every six months to maintain their eligibility.
- **Process:** Recertification involves submitting updated documentation and forms to verify continued eligibility based on residency, HIV status, and income.

For more detailed information, you can visit the [NH Ryan White CARE Program page \(NH DHHS\)](#).

### **Coverage Details**

The NH Care AIDS Drug Assistance Program (ADAP) provides extensive support for individuals living with HIV/AIDS, covering:

- **Health Insurance Premiums:** Payments for ACA Marketplace plans, COBRA, some private plans, Medicare Part D prescription plans, and Medicare supplemental plans.
- **Medication Coverage:** Includes prescribed medicines, antiretroviral therapies (ART), and treatments for opportunistic infections.
- **Outpatient Medical Services:** Covers related office visits, lab tests, and diagnostic testing.
- **Dental Services:** Provided through contracted dental providers, with coverage according to the NH CARE fee schedule.
- **Medical and Dental Co-pays:** Coverage includes co-pays and deductibles for outpatient services but not for inpatient or emergency care.

Clients must be actively enrolled in both the NH CARE Program and NH ADAP to qualify for these benefits. For more detailed information, visit the [NH Ryan White CARE Program page](#).

## Application Process

### Steps to Apply:

1. **Initial Contact:**

- Contact a local AIDS Service Organization or your healthcare provider to start the application process.

2. **Documentation:**

- Gather required documents, including proof of New Hampshire residency, medical documentation confirming HIV-positive status, proof of income, and health insurance information.

3. **Submission:**

- Submit the completed application and required documents through the recommended channels provided by the local AIDS Service Organization or healthcare provider.

4. **Assistance:**

- For questions or assistance, contact the NH CARE Program at 603-271-4502 or 800-852-3345 (toll-free within NH).

# Ryan White Dental Program (RWDP)

## Introduction to RWDP

The Ryan White Dental Program is a comprehensive dental access program working to reduce barriers to dental care for people living with HIV. The program ensures access to a wide range of dental services, including preventative, diagnostic, and restorative treatments, to support oral health and overall well-being. Coverage includes routine check-ups, cleanings, fillings, and other necessary dental procedures, alleviating financial burdens by covering costs that are not supported by other insurance plans. Eligibility for the program is based on residency, HIV status, and income, with a consideration of utilization of other insurances to fulfill the requirements.

## Eligibility Requirements

To qualify for Ryan White Dental Program (RWDP), applicants must meet the following criteria:

- **Residency:** Must be a resident of Massachusetts or specific counties in Southern New Hampshire (Hillsborough, Rockingham, Strafford).
- **HIV Status:** Must be HIV-positive, confirmed by medical documentation.
- **Income:** Gross annual income must not exceed 500% of the Federal Poverty Level (FPL).
- **Utilization of Other Insurances:** As payor of last resort RWDP can only pay if all other insurers have declined to pay and it is within the RWDP scope of service. If a client has MassHealth, they are required to see a dentist who accepts MassHealth. The RWDP cannot pay for any co-payments and remaining balances if the client has private dental insurance.

## **Required Documents**

When applying for RWDP, the following documents must be submitted:

- **Proof of Residency (not limited to):**
  - Utility bills
  - 2 pay stubs showing your address
  - Copy of most recent tax form showing your address
  - Copy of active driver's license or state identification card
  - Copy of Health Insurance Premium statement showing your address
  - Letter from case manager attesting to your residency
- **Proof of HIV-Positive Status:**
  - Medical documentation from a healthcare provider confirming HIV-positive status, such as:
    - A letter from a doctor or clinic

- HIV lab test results
- **Proof of Income (not limited to):**
  - Recent tax returns
  - 2 most recent pay stubs
  - Letter from a case manager attesting to your income
  - Copy of SSI/SSDI statement
- **Health Insurance Information:**
  - HDAP approval letter
  - Letter from insurer
  - Copy of insurance card
  - Health Insurance Premium statement
  - MassHealth Approval Letter
  - Letter from case manager attesting to your medical insurance

### **Recertification**

- **Frequency:** All RWDP participants are required to recertify annually to maintain their eligibility.
- **Process:** Recertification involves submitting updated documentation and forms to verify continued eligibility based on residency, HIV status, and income. Applications sent earlier than 30 days before the previous expiration date will not be processed. Once an application is approved, a letter will be sent explaining the dates of coverage.

### **Coverage Details**

The Ryan White Dental Program (RWDP) offers essential dental care services for individuals living with HIV/AIDS. These services\* include, but are not limited to:

\*Please refer to the [2024 Provider Manual](#) for more detailed coverage. The coverage amount is different based on different services. Some services require prior authorization. The dental office and RWDP staff will collaborate on these treatment plans.

- **Preventative Care:**
  - Prophylaxis (cleanings) for adults and children twice per 12-month period
  - Topical fluoride applications and fluoride varnish applications
  - Caries arresting medicament applications

*Information Collected and Reviewed by R. Dai & M. Lopez*



- **Diagnostic Services:**
  - Periodic and comprehensive oral exams
  - Intraoral and bitewing radiographic images
  - Panoramic radiographic images
- **Restorative Treatments:**
  - Amalgam fillings (one to four or more surfaces, primary or permanent)
  - Resin-based composite fillings (one to four or more surfaces, anterior and posterior)
  - Crowns (resin-based composite, porcelain, prefabricated stainless steel, prefabricated resin)
  - Cast post and core in addition to crown
- **Endodontics:**
  - Root canal treatments (anterior, bicuspid, molar)
  - Apicoectomy/periradicular surgery
  - Retrograde filling
  - Root amputation
- **Periodontics:**
  - Periodontal scaling and root planning
  - Periodontal maintenance
  - Gingivectomy or gingivoplasty (various types based on teeth and quadrants)
  - Gingival flap procedures (including root planning)
  - Full mouth debridement
  - Localized delivery of antimicrobial agents
- **Prosthodontics:**
  - Complete dentures (maxillary and mandibular)
  - Partial dentures (maxillary and mandibular, including resin base and metal frameworks)
  - Denture repairs and adjustments

- Relining and rebasing of dentures
- Adding teeth or clasps to existing partial dentures
- **Exodontics:**
  - Extractions (simple, surgical, and impacted teeth)
  - Root removal
  - Alveoloplasty
  - Biopsy of oral tissue
- **Adjunctive General Services:**
  - Palliative treatment of dental pain
  - Local and General anesthesia
  - Oral appliances like mouthguards and occlusal guards

### Application Process

- **Complete the Enrollment Form:**
  - Fill out the RWDP Enrollment Form with all required personal, medical, and contact information.
- **Gather Required Documents:**
  - Proof of HIV status, income, residency, and medical insurance as specified by the program guidelines.
- **Consent for Release of Information:**
  - Read, complete, sign, and date the Consent for Release of Information form. If a dental referral has not been set up, leave the dentist fields blank.
- **Read and Sign the Grievance Procedure:**
  - Read the Ryan White Dental Program Grievance Procedure, sign, and date it.
- **Submit the Application:**
  - Applications can be submitted via fax or mail to the following address:
    - **Ryan White Dental Program**  
1010 Massachusetts Avenue, 2nd Floor Boston, Massachusetts 02118

*Information Collected and Reviewed by R. Dai & M. Lopez*

**TEL:** 617-534-2344

**FAX:** 617-534-2819

**Email:** RWDP@bphc.org

- **Confirm Eligibility and Participation:**
  - Before making a dental appointment, confirm your eligibility and the participation status of the dental office. The program has special arrangements with contracted dentists, and referrals should come directly from RWDP staff.
- **Await Approval:**
  - Once the application is approved, a letter will be sent explaining the dates of coverage. If mail should be sent to your case manager, provide the case manager's address in the "Mailing Address" line.

# Medicare

## Introduction to Medicare

Medicare is a federal health insurance program providing coverage for individuals aged 65 and older and certain younger individuals with disabilities or specific conditions. It offers essential support for Ryan White Part A clients living with HIV/AIDS, ensuring access to comprehensive healthcare services.

## Eligibility Requirements

- **Age:** Individuals aged 65 and older automatically qualify.
- **Disability:** Individuals under 65 may qualify if they have certain disabilities or conditions, such as end-stage renal disease or amyotrophic lateral sclerosis (ALS).

## Coverage Details

Medicare consists of four parts:

- **Part A (Hospital Insurance):** Covers inpatient hospital stays, skilled nursing facility care, hospice care, and some home health care.
- **Part B (Medical Insurance):** Covers outpatient care, preventive services, doctor visits, and medically necessary services and supplies.
- **Part C (Medicare Advantage Plans):** Offered by private companies, these plans provide all Part A and B benefits, often including additional services like vision, dental, and wellness programs.
- **Part D (Prescription Drug Coverage):** Provides coverage for prescription medications, crucial for managing chronic conditions like HIV/AIDS.

## Application Process

- **Automatic Enrollment:** Individuals receiving Social Security benefits are automatically enrolled in Medicare Parts A and B when they turn 65.
- **Manual Enrollment:** Those not receiving Social Security must apply through the Social Security Administration during their initial enrollment period (three months before turning 65, the month they turn 65, and three months after).
- **Disability Enrollment:** Individuals under 65 with qualifying disabilities are automatically enrolled after receiving disability benefits for 24 months.

For more information, visit the [Medicare website](#).

## Frequently Asked Questions (FAQs)

### MassHealth:

1. **Will I be fined for not having health insurance?**

Massachusetts law requires that all residents have health insurance, and you may face tax penalties if you are uninsured, underinsured, or your insurance coverage does not meet state coverage standards. For more information on the penalty you can contact the Department of Revenue (DOR) at **800-392-6089**.

2. **When should I report a change?**

You should report changes to your information as soon as possible, but no later than 10 days from the date of the change. This includes any change to your income, address, phone number, family size, disability, job, or other health insurance.

3. **What if I have no changes to report to my renewal?**

Even if you have no changes to report, make sure all the information on your renewal form is correct. Submit it on or before the due date by going online, calling MassHealth Customer Service, by mail, or [schedule an appointment with a MassHealth representative](#).

4. **Can I just update my information instead of completing my MassHealth renewal?**

No. You must submit the entire renewal application online, by phone, in person, or by mail or fax.

### CRI (HDAP)

1. **What services does HDAP cover?**

HDAP typically provides extensive coverage for HIV medications and may support premiums for health insurance plans.

2. **How does HDAP coordinate with other health coverage programs?**

HDAP works as a payer of last resort, coordinating payments after other health insurance options have been exhausted to cover costs like copayments and deductibles.

### NH Care/ADAP

1. **How do I apply to the NH CARE Program?**

If you are new to the NH CARE Program, contact us at 603-271-4502 during business hours, Monday-Friday, 8:00 am - 4:30 pm. You will be referred to a case management agency that will assist you in coordinating your NH CARE Program enrollment.

2. **How long will it take to approve my application?**

The enrollment process may take up to two weeks. You will receive your enrollment card within two weeks of approval.

3. **How long is the enrollment period?**

The enrollment period is six months. To avoid a lapse in coverage, a new application must be received two weeks prior to your enrollment end date. There is no grace period for late enrollments. Services are not covered during a lapse of enrollment.

4. **Will the NH CARE Program pay my insurance premiums and copays?**

Yes. Premiums for private insurance\*, Medicare Part D, and COBRA can be paid if you are taking HIV medications and your coverage is a cost savings to the Program. We will need an invoice or statement to make payments. The NH CARE Program will also cover copays for prescription drugs. *\*Some exclusions apply*

5. **Are all prescription medications covered?**

Yes, with some exclusions. The NH CARE Program follows the Medicaid Preferred Drug List (PDL) and has a list of excluded items. Both the PDL and the list of excluded medications may be found at the NH AIDS Drug Assistance Program (ADAP) website: <https://nhadap.magellanmedicaid.com/>

**RWDP**

1. **What do I need to be approved for RWDP?**

A completed application includes completed RWDP Enrollment Forms, verifications for positive HIV Diagnosis, insurance status, a maximum income of \$75,300 per family of one, and proof of physical residency in either Massachusetts or in the New Hampshire counties of Hillsborough, Rockingham, or Strafford. Please see our full application for further details on eligibility requirements and note that we are unable to process incomplete applications.

2. **How long will it take for my application to be processed?**

We aim to have applications processed within 2 weeks of receiving a completed application. Please reach out to RWDP staff to inquire on the status of an application.

3. **How do I get a referral to a dental provider that is contracted with RWDP?**

Call us at 617-534-2344 to look for a contracted provider in your area! We cannot publish a public list of providers due to privacy concerns so we can only give out referrals directly.

4. **How long does my coverage last?**

Active coverage lasts 12 months. Once approved, a client must update their coverage with a new application and new forms of verification for income, insurance, and residency every 12 months to remain active.

5. **Can I be seen at dental schools like Boston University, Harvard, or Tufts?**

Dental schools receive Ryan White Part F funding, meaning they have their own Ryan White Programs that clients would need to apply for. For extensive dental work, we may refer to

dental schools, however, please note that additional paperwork may be required to enroll in their separate programs.

## Medicare

### 6. **When do I need to enroll in Medicare?**

You should enroll during the Initial Enrollment Period, which starts three months before you turn 65 and ends three months after the month you turn 65. If you are already receiving Social Security or Railroad Retirement Board benefits, you will be automatically enrolled in Medicare Parts A and B.

### 2. **Do I need to renew my Medicare coverage every year?**

Original Medicare coverage is automatically renewed each year as long as you remain eligible and pay any necessary premiums. However, if you have a Medicare Advantage plan or a Medicare Part D plan, you should review and renew your plan during the Open Enrollment Period each year.

### 3. **What happens if I move to a new state?**

If you move, you will need to notify Social Security to update your address. Your Original Medicare benefits will remain the same, but if you have a Medicare Advantage or a Medigap policy, you might need to choose a new plan that is available in your new state.

### 4. **Does Medicare automatically cover prescription medications?**

Original Medicare does not cover most prescription drugs. To get coverage, you need to enroll in a Medicare Part D plan or have a Medicare Advantage plan that includes drug coverage. If you do not enroll in Part D when you are first eligible, you might pay a late enrollment penalty unless you have other creditable drug coverage.

### 5. **How can I get help with Medicare costs if I have limited income?**

If you have limited income and resources, you may qualify for the Medicare Savings Program, which can help pay your premiums, deductibles, and other out-of-pocket costs. Additionally, the Extra Help program can help with the costs of Medicare prescription drug coverage.

## Sources:

- Ryan White Dental Program FAQ. (n.d.). Retrieved from [Boston Public Health Commission](#).
- Medicare Information. (n.d.). Retrieved from [Medicare.gov](#).
- Massachusetts Health Insurance FAQ. (n.d.). Retrieved from [Massachusetts Government](#).
- NH CARE Program FAQ. (2021). Retrieved from [New Hampshire Department of Health and Human Services](#).

*Information Collected and Reviewed by R. Dai & M. Lopez*

## Key Terms

- **ADAP (AIDS Drug Assistance Programs):** Federally funded initiatives that provide HIV-related prescription drugs to underinsured and uninsured individuals living with HIV/AIDS.
- **Alveoloplasty:** Surgical reshaping of the alveolar ridge, typically after tooth extraction.
- **Apicoectomy:** Surgical removal of the tip of a tooth's root.
- **Amalgam Fillings:** Silver-colored fillings used to restore cavities in teeth.
- **Antiretroviral Treatment:** Medications used to manage HIV infection, aiming to reduce viral load, maintain immune function, and prevent HIV transmission.
- **Caries Arresting Medicament:** Medication used to stop the progression of tooth decay.
- **Complete Dentures:** Removable replacements for missing teeth and surrounding tissues.
- **Composite Fillings:** Tooth-colored fillings used for restoring cavities.
- **Crowns:** A type of dental restoration that covers a tooth.
- **Drug Formulary:** A list of prescription medications, both generic and brand name, that are preferred by a health plan and are available to patients as a part of their insurance coverage.
- **Gingivectomy:** Surgical removal of gum tissue.
- **Extractions:** Removal of teeth.
- **Federal Poverty Level (FPL):** A measure of income issued annually by the Department of Health and Human Services to determine eligibility for various public assistance programs.
- **Fluoride Varnish Application:** A highly concentrated form of fluoride applied to the tooth's surface for long-lasting protection against decay.
- **Insurance Premium:** The amount of money that an individual or business must pay for an insurance policy, ensuring coverage is maintained.
- **Modified Adjusted Gross Income (MAGI):** A calculation used by the IRS to determine eligibility for certain tax benefits. In the context of health insurance, it's used to determine eligibility for premium tax credits and other savings on Marketplace insurance.
- **Occlusal Guards:** Mouthguards used to protect teeth from grinding or clenching.
- **Out of Pocket:** Expenses for medical care that aren't reimbursed by insurance. This includes deductibles, copayments, and coinsurance for covered services plus all costs for services that aren't covered.
- **Palliative Treatment:** Treatment to relieve pain without addressing the underlying cause.

*Information Collected and Reviewed by R. Dai & M. Lopez*



- **Payer of Last Resort:** A funding principle where this source pays only after all other available sources have met their commitment. It ensures that all other avenues are exhausted before utilizing these funds.
- **PEP (Post-Exposure Prophylaxis):** A short-term antiretroviral treatment to reduce the likelihood of HIV infection after potential exposure, through sex or injection drug use.
- **Periodontal Scaling and Root Planning:** Deep cleaning procedures to treat gum disease.
- **PrEP (Pre-Exposure Prophylaxis):** A drug taken daily by HIV-negative individuals to prevent the acquisition of HIV.
- **Prophylaxis:** Preventive treatment to clean the teeth and maintain oral health.
- **Recalcification:** Treatment to restore calcium levels in demineralized tooth areas.
- **Recertification:** It is the process to confirm the accuracy of a beneficiary's eligibility status for a program on a regular basis.
- **Resin-Based Fillings:** Tooth-colored, plastic, and ceramic fillings used to restore teeth.
- **Retrograde Filling:** A filling placed at the root end of a tooth during an apicoectomy.
- **Supplemental Security Income (SSI):** SSI provides monthly financial assistance to individuals with limited income and resources who are aged 65 or older, blind, or disabled.
- **Social Security Disability Insurance (SSDI):** SSDI provides monthly financial benefits to individuals who are disabled and have a sufficient work history of paying Social Security taxes.
- **Topical Fluoride Application:** Application of fluoride directly on the teeth to prevent cavities.

## Comparative Overview

This table outlines the key features and differences across the various health coverage programs for people living with HIV/AIDS (PLWHA).

Category	Ryan White Part A	RWDP	NH Care (ADAP)	CRI (HDAP)	MassHealth	Medicare
<b>Target Population</b>	PLWHA	PLWHA	PLWHA	PLWHA	General population	General population
<b>Residency Requirement</b>	Boston EMA	Massachusetts & 3 counties in Southern New Hampshire (Hillsborough, Rockingham, Strafford)	New Hampshire	Massachusetts	Massachusetts	U.S. Citizens or legal permanent resident status of at least five continuous years.
<b>Income Threshold</b>	≤500% of Federal Poverty Level	≤500% of Federal Poverty Level	≤500% of Federal Poverty Level	≤500% of Federal Poverty Level	Varies (more inclusive criteria)	No specific income threshold for enrollment. but subsidy programs and cost assistance have income limits.
<b>Other Requirements</b>	Proof of HIV diagnosis; Proof of insurance; Payer of last resort;	Must have no dental third-party payment source or limited coverage	Payer of last resort	N/A	N/A	N/A

<b>Medications</b>	Comprehensive medication coverage, including antiretrovirals and medications for opportunistic infections; ADAP may cover additional drugs not funded by other programs.	N/A	Covers medication copays; covers some medications at full cost not covered by Medicaid.	Extensive HIV medication coverage, some exclusions.	Broad medication coverage; may include HIV meds.	Covers a wide range of medications through Medicare Part D; specifics vary by plan.
<b>Drug Formulary</b>	Includes a comprehensive list of HIV-related medications, periodically updated to include new treatments.	N/A	Contact the program for specific formulary details and pre-approval requirements.	Open for HIV medications, with some exceptions; contact program for specific exclusions.	Broad coverage includes most medications, with prior authorization required for some.	Part D plans each have their formulary; must cover all drugs in certain protected classes.
<b>Health Services</b>	Extensive services include medical case management, non-medical case management, emergency financial assistance, psychosocial services, etc.	Comprehensive dental care, including diagnostic, preventive, restorative, and periodontal services.	Extensive (incl. mental health care)	Limited to HIV-related services	Comprehensive (all services)	Covers hospitalization (Part A), medical services (Part B), and prescription drugs (Part D). Optional supplemental coverage (Part C) offers additional benefits.

<b>Case Management</b>	Intensive case management offered to assist with treatment adherence and navigating healthcare and social services.	N/A	Offers case management services; specifics should be verified directly with the program.	Focuses primarily on medication management and insurance navigation.	Provides comprehensive case management services across various needs.	Limited; mainly provided through some Part C (Medicare Advantage) plans.
<b>Provider Network</b>	Specialized network of providers experienced in HIV care	Over 80 contracted dental practices in Massachusetts.	HIV-specific network; contact program for details on out-of-network coverage.	Specializes in HIV care; limited out-of-network services.	Extensive provider network includes out-of-network options under certain plans.	Varies by plan; Original Medicare has a broad network, while Medicare Advantage plans have specific networks.
<b>Additional Benefits</b>	Support services such as transportation, nutrition assistance, housing support, etc.	N/A	Substance use treatment, etc.	N/A	Dental, vision, etc.	Covers preventive, emergency services, and hospital management.
<b>Recertification Frequency</b>	Annually	Annually	Every 6 months	Every 6 months	Annually	N/A

<b>Application Process</b>	Application through local Ryan White providers requires documentation of HIV status, income, residency, and insurance coverage.	Providers submit a participation letter; clients need annual re-enrollment.	Online or mail submission; requires HIV status, income, and residency proof.	Online with detailed documentation; urgent processing available.	Available online, in-person, or by mail; requires comprehensive eligibility documentation.	Enroll during initial, general, or special enrollment periods via Social Security or Medicare.gov.
<b>Program Funding</b>	Funded by The Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS).	Funded by Ryan White Part A and Massachusetts Department of Public Health.	Federally supported by Ryan White CARE Act Part B, with state resources; ensures comprehensive HIV/AIDS care.	Funded through a mix of state, federal, and pharmaceutical rebates.	Stable federal and state funding, supporting a broad range of services.	Funded through payroll taxes, premiums, and federal government contributions.
<b>Exclusions</b>	Non-HIV-related services and conditions are not covered. See PCN 16-02 for more detailed unallowable costs.	Inpatient hospital or surgical bills, emergency room visits, orthodontics, implants, cosmetic dentistry.	Does not cover ambulance, urgent care, ER, or inpatient care.	Similar exclusions; focused on outpatient care and meds.	Cosmetic procedures, cough/cold meds, fertility treatments, experimental drugs, sexual dysfunction treatments.	Excludes dental, vision, dentures, cosmetic procedures, acupuncture, hearing aids, and long-term care.

This table outlines the required documentation to verify eligibility for various services, including examples (but not limited to) for proving HIV status, income, residency, and insurance coverage.

Category	Documentation Required
HIV Verification	<p>Medical documentation from a healthcare provider confirming HIV-positive status. Including:</p> <ul style="list-style-type: none"> <li>• Provider statements acknowledging HIV status</li> <li>• Labs*</li> </ul> <p>* For clients with an undetectable viral load, a provider's note along with lab results confirming the HIV diagnosis is recommended.</p>
Income Verification	<p>Programs must have documentation of each client's income. Examples of documentation include (but are not limited to):</p> <ul style="list-style-type: none"> <li>• Benefits statements</li> <li>• Pay stubs</li> <li>• Copy of most recent tax form</li> <li>• Copy of SSI/SSDI statement</li> <li>• A written letter signed by the client attesting to no income</li> <li>• Employer letter stating wages (signed/dated by Employer)</li> <li>• A letter from the case manager attesting to your income.</li> <li>• Bank Statement (NH Care)</li> <li>• Monthly Pension statements for the current year (CRI)</li> </ul>
Residency Verification	<p>Proof of residency can be in the form of (but not limited to):</p> <ul style="list-style-type: none"> <li>• Driver's license (<i>Not accepted by MassHealth</i>)</li> <li>• Utility bill</li> <li>• Bank statement</li> <li>• Copy of lease and record of most recent rent payment</li> <li>• mortgage statement</li> <li>• Letter from case manager attesting to your residency</li> <li>• Property tax statement</li> <li>• Statement from a homeless shelter</li> <li>• Paycheck or benefits statements, if applicable</li> <li>• Proof of childcare, public school, or private school enrollment showing current residential address (MassHealth)</li> <li>• A signed and dated <a href="#">Affidavit of Massachusetts Residency</a> (MassHealth)</li> </ul>

Insurance Status	<p>Programs** must have documentation of each client’s insurance status. Types of insurance coverage can include public (Medicare, Medicaid/MassHealth, Commonwealth Care), private (employer-based, private non-group, COBRA, or subsidized individual plans via Commonwealth Choice), or other types of coverage (VA Benefits). Examples of acceptable documents include:</p> <ul style="list-style-type: none"> <li>• HDAP approval letter</li> <li>• Letter from insurer</li> <li>• Health Insurance Premium Statement</li> <li>• MassHealth Approval Letter</li> <li>• Copy of active driver’s license or state identification card</li> <li>• Copy of Health Insurance Premium statement showing your address</li> <li>• Letter from case manager attesting to your residency</li> <li>• Copy of insurance card</li> <li>• Letter from case manager attesting to your medical insurance*</li> </ul> <p>*If a client is not eligible for any existing insurance plans, the provider should document the reason and how the client will access medical services and prescription drugs.</p> <p><b>**The above information does not apply to MassHealth and Medicare.</b></p>

Sources:

- RWDP (Ryan White Dental Program). (2024). [RWDP Application English 2024](#). Retrieved from Boston.gov.
- NH Care (ADAP). (2024). [NH Care Program Application](#). Retrieved from New Hampshire Department of Health and Human Services.
- CRI (HDAP). (2023). [HDAP Application Instructions Long Form](#). Retrieved from Access Health.
- MassHealth. (n.d.). [Verification Documents](#). Retrieved from Massachusetts Health Connector.

## Additional Resources

### Contact Information for Each Program

#### **Ryan White Part A**

- 1010 Massachusetts Ave, 2nd Floor, Boston, MA, 02118
- 617-534-5395
- [ryanwhiteservices@bphc.org](mailto:ryanwhiteservices@bphc.org)

#### **Ryan White Dental Program**

- 1010 Massachusetts Ave, 2nd Floor, Boston, MA, 02118
- Phone: 617-534-2344
- Fax: 617-534-2819
- [RWDP@bphc.org](mailto:RWDP@bphc.org)

#### **Community Resource Initiative (HDAP)**

- Schrafft's Center, 529 Main Street, Suite 301, Boston, MA 02129
- Phone: 617-502-1700
- [HDAP@crihealth.org](mailto:HDAP@crihealth.org)

#### **NH Care (ADAP)**

- 29 Hazen Drive, Concord, NH 03301
- (603)-271-4502
- [nhbdc@dhhs.nh.gov](mailto:nhbdc@dhhs.nh.gov)

#### **MassHealth**

- 100 Hancock St., 1st Floor, Quincy, MA 02171
- MassHealth Enrollment Center Locations, please visit [MassHealth Enrollment Center Locations](#)
- (800) 841-2900
- TDD/TTY 711

#### **Medicare**

- (800)-633-4227
- TTY (877)-486-2048

#### **Health Connector**

- 133 Portland Street, Boston, MA 02114
- 146 Main Street, Worcester, MA 01608
- (877)-623-6765
- TTY (877)-623-7773



## **Online Resources and Links**

### **Ryan White Part A Program:**

- [Ryan White Services Division](#)
- [Ryan White Dental Program](#)
- [RWDP Enrollment/Recertification Form \(English\)](#)
- [RWDP Enrollment/Recertification Form \(Spanish\)](#)
- [RWDP Enrollment/Recertification Form \(Portuguese\)](#)
- [RWDP Enrollment/Recertification Form \(Haitian Creole\)](#)
- [RWDP Provider Manual](#)

### **NH Care (ADAP)**

- [NH ADAP \(AIDS Drug Assistance Program\)](#)
- [NH Ryan White CARE Program](#)
- [How to Enroll in HIV / AIDS Care in NH](#)
- [NH Ryan White CARE Application \(English\)](#)
- [Solicitud de NH Ryan White CARE \(Spanish\)](#)
- [Demande de soins NH Ryan White \(French\)](#)
- [NH CARE ADAP Preferred Drug List](#)

### **CRI (HDAP)**

- [HIV Drug Assistance Program \(HDAP\)](#)
- [CRI HDAP Client Portal](#)
- [CRI HDAP Case Manager Portal](#)
- [CRI HDAP Houses of Correction Portal](#)
- [HDAP Portal Resources](#)
- [HDAP Application Instructions – Long Form](#)
- [HDAP Application Instructions – Short Form](#)
- [CRI HDAP Paper Applications and Forms](#)

### **MassHealth**

- [MassHealth](#)
- [Information for MassHealth Applicants](#)
- [Schedule an appointment with a MassHealth representative](#)
- [MassHealth Resources](#)

### **Health Connector**

- [Massachusetts Health Connector](#)

### **Medicare**

- [Medicare](#)
- [Medicare Log In Page](#)