EIP ELIGIBILITY GUIDE

For clients in group 1

WHAT IS EIP?

The Early Intervention Program (EIP) is run by the Washington State Department of Health (DOH). We are the AIDS Drug Assistance Program (ADAP) for Washington State, not an insurance company.

WHAT DOES EIP HELP WITH?

EIP offers

- financial assistance with insurance premiums,
- co-pays for HIV related drugs,
- co-pays and co-insurance for doctors and lab visits,
- some dental coverage if you qualify.

WHAT IS MY ELIGIBILITY BASED ON?

EIP eligibility is based on your HIV status, gross monthly income, insurance status and antiretroviral drug (ART) usage. Eligibility is granted for 6 months at a time.

HOW DO I RENEW MY ELIGIBILITY?

We will send you and your HIV Medical Case Manager (if you have one) a renewal in the mail about two months before your eligibility ends. If we can renew your eligibility using in office resources, you won't need to fill out a renewal. We will send you an eligibility letter.

If your income, address, insurance or ART usage changes, you need to inform EIP within 20 days.

DEFINITIONS

EIP client ID
We issue a client identification number the first time you apply. This number will not change. Please use this number when you contact us.

Group number
You are in Group 1 because you have insurance and your doctor prescribed antiretroviral therapy (ART). Your group number determines the services you can get from EIP.

EIP cost share
We require some clients to pay a part of the cost of their drugs; we call this a cost share. You are sharing the cost of your co-pay. We base your cost share amount on your gross monthly income. If you have a cost share, you pay this to the pharmacy once a month. **Example:** Your EIP cost share is $10 and you fill 3 prescriptions that are on the EIP formulary every month. Each co-pay is $20, for a total of $60. Pharmacy will bill $50 to EIP and you will pay $10 at the pharmacy.

Insurance
This identifies the health insurance plan you have and is called your primary insurance. The primary insurance must be billed first before EIP can pick up any costs.

HIV Medical Case Manager
This is your HIV Medical Case Manger you listed on your application. We send eligibility status along with updates to this person. This person usually communicates EIP updates and information to clients on our behalf.

Dates of Eligibility
These are the dates you are eligible for allowed services.

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Eligibility status
We base your eligibility on many things. These include your income, family size, ART use and county of residence. You might be eligible for one EIP service but not another. Your eligibility letter tells you which of these services you get. Please refer to the eligibility section of your letter to see what you are eligible for.

- **Dental -** We can pay for services on our approved list. We pay a maximum of $2500 per year. You must work with your provider to make sure your care does not go over this amount. You will have to pay costs that go over our limit. You must go to a provider who has a contract with us. We need you to tell us if you have or get other dental coverage. We cannot pay for dental care if you have other coverage or live in King County and are under 200% of the Federal Poverty Level (FPL). You can see a list of covered services and contracted providers on our website, www.doh.wa.gov/HIVcare.
- **Drugs -** We can pay your insurance deductibles, co-pays and pre-exist costs. Our payments are limited to drugs on our approved list. This list is called a formulary. We contract with Ramsell to process medication claims for our clients. In a few weeks, you will get a card from Ramsell to use at the pharmacy. Until then, you or your pharmacist will need to call Ramsell directly to get your billing information. You must go to a pharmacy that contracts with Ramsell. You can find our formulary and contracted pharmacies through our website.
- **Premium Assistance -**We can pay your health insurance premiums in certain cases. We contract with the Evergreen Health Insurance Program (EHIP) to manage this for us. They can answer your questions about insurance.
- **Medical & Mental Health -** We can pay many of your insurance-related costs. These include deductibles (up to $3000 per year), co-pays, co-insurance and pre-existing condition costs. Our payments are limited to doctor visits, lab tests and procedures on our approved list. You must go to a provider who has a contract with us. You can see a list of services we cover and contracted providers on our website.

NOTE: Make sure your provider is contracted with us before being seen. There are only specific services we can pay for. Please refer to the covered services and contracted providers list on our website, www.doh.wa.gov/HIVcare.

We do not issue cards for medical, mental health or dental care. Show your eligibility letter to your provider.

CONTACT INFORMATION

- **Case managers** are trained to help you get services through EIP and other ways. You can go to our website to find a case management agency in your area.
- Contact **EIP** about eligibility, services, and problems.
  - 1-877-376-9316
  - Fax: 360-664-2216
  - www.doh.wa.gov/HIVcare
  - Email: ask.eip@doh.wa.gov
  - Mailing address:
    PO Box 47841
    Olympia, WA 98504-7841
- Contact **EHIP** about insurance payments or questions.
  - 1-800-945-4256
  - www.ehip.org
- Contact **Ramsell** about getting drugs at the pharmacy.
  - 1-888-311-7632
  - www.ramsellcorp.com/individuals/wa.aspx