

**PUBLIC & PRIVATE BENEFIT PROGRAMS & LAWS
IMPORTANT TO PEOPLE WITH HIV/AIDS
August 2011**

Note that most of the public benefits discussed below are not available to immigrants (with a few exceptions for legal immigrants after five years). The states are permitted to deny cash assistance and food stamps to drug felons, and North Carolina has adopted this policy.

HIV/AIDS SPECIFIC PROGRAMS	
Ryan White Care Act	<p>Ryan White is the largest federally funded program for people living with HIV/AIDS. It is aimed at providing care and services for low income uninsured and under-insured people living with HIV/AIDS. Under "Part A," funds are provided to cities with large HIV populations. "Part B" provides block grants to states, which then fund AIDS drugs, health care, prevention, case management, housing, and even legal services. (Duke Legal Project is partially funded by a Ryan White grant from the state of North Carolina.) Ryan White is a "payer of last resort," and funds treatment when no other resources are available. Ryan White services ARE available to immigrants, even if undocumented. The rationale is that treating HIV is an important public health concern</p>
ADAP:	<p>This is the acronym for the AIDS Drug Assistance Program. The program is federally created, funded jointly by federally Ryan White Care Act funds and the state. The specific program guidelines are determined by each state. The program provides free drugs for treatment of HIV, opportunistic infections, and some other common conditions associated with HIV (including some psychiatric medications). Only drugs on the program's formulary are provided. To qualify for ADAP, the client must have gross income at or below 125% of the federal poverty level, and have no other coverage for medications. There is often a waiting list to get onto ADAP. Applications are generally made through medical providers. ADAP is available to undocumented immigrants.</p>
HOPWA	<p>"Housing Opportunities for People with AIDS" is the largest federal program for people living with HIV. To qualify, a</p>

	<p>person must have AIDS or HIV and must be low-income, defined as below 80% of the area median income. HOPWA funds are distributed to cities and states based on the area's population and AIDS rate. It can be used to fund a variety of activities including assistance in housing searches, case management, short-term supported housing, and rental subsidies. In the rental subsidy program, tenants pay 30% of adjusted monthly income, or 10% of gross income.</p>
INCOME	
Social Security Disability	<p>"SSDI." Monthly payment for disabled people who have paid payroll taxes (FICA). Administered through the Social Security Administration. Amount of payment based on work history. Claimants apply at the local Social Security Administration office, by telephone, or online.</p>
Supplemental Security Income:	<p>"SSI." Monthly needs-based payment for the aged, blind, and disabled. Program is also administered through the Social Security Administration. Applications at local Social Security office, by telephone, or online.</p>
Temporary Aid to Needy Families:	<p>Known as "TANF." A monthly payment to families with children. The basic program rules are set by federal statute. Each state runs its own program, and North Carolina program's is called "Work First." To receive benefits, the parent generally must be involved in work search or education. There is a federally mandated 60 month lifetime maximum eligibility for TANF, regardless of the state where benefits were received. North Carolina's Work First has a 24 month cap. After 36 months, a parent can begin receiving benefits again, as long as they haven't exceeded the 60 month lifetime cap. Applications taken at the local county Department of Social Services.</p>
Unemployment Compensation:	<p>Weekly payments for unemployed workers who are able and available for work. Funded through employer contributions, this is a federal program which is administered through states. Payments are normally available for up to 26 weeks, but in times of high unemployment the federal government will provide extended benefits for 13 additional weeks. Clients apply at</p>

	<p>the local office of the North Carolina Employment Security Commission.</p>
<p>Worker's Compensation:</p>	<p>Worker's comp is an important benefit relied on by injured workers. This is insurance coverage for workers who suffer accidents or injuries on the job, as well as 27 occupational diseases. Employers with 3 or more employees must carry worker's compensation benefits. Covers medical expenses, drugs, transportation, and compensation for lost salary, and compensation for partial or permanent loss. Clients make a claim with the employer's insurance carrier. The monthly benefit is 60% of wages. If someone receives both worker's compensation and Social Security Disability, Social Security Benefit offsets the worker's comp benefit, i.e., reduces the Social Security benefit by the amount of the monthly worker's comp benefits.</p>
<p>Veteran's Benefits</p>	<p>Various income benefits are available for veterans, including Compensation for Service-Connected Full or Partial Disability and Disability Pension for Needy Wartime Veterans. Service Connection Compensation is monthly income, which can be relatively high, depending on the disability "rating" (i.e. how disabled the veteran is). The Pension for Needy Wartime Vets is a welfare benefit for low income veterans who served in wartime.</p>
<p>Private Disability Insurance – Short Term Disability; Long Term Disability</p>	<p>Payment for disabled workers through private disability insurance. Disability is defined by the insurance contract, and will be somewhat different from the Social Security definition. The amount of the monthly payment is usually significantly higher than that offered by Social Security Disability. A disabled worker may be able to qualify for both Social Security Disability and private disability insurance, but many private insurance policies provide for a reduction in benefits if the recipient has income from other sources, including Social Security.</p> <p>This insurance coverage is often provided by employers as part of the employee benefit package. Self-employed workers can purchase their own disability insurance. When offered as an employee benefit, the federal ERISA statute governs.</p>

	Disabled workers initially make a claim through their employer. The claim is determined by the insurance company. Denials are challenged in Federal Court.
FOOD PROGRAMS	
Food Stamps:	Now known as “Supplemental Nutrition Assistance Program” (“SNAP”). This is a monthly allotment for purchase of food. It’s a federal program, administered through county Departments of Social Services. The amount of the allotment is based on family size and income. The benefits are no longer in the form of “stamps,” but are distributed through ATM cards. Applications at the local county Department of Social Services.
HEALTH	
Medicare:	The federal health care program for retired and disabled workers. Disabled people become eligible after they have received Social Security Disability benefits for two years. People receiving Disability benefits are automatically enrolled in Medicare Part A, the hospitalization benefit. Beneficiaries can elect to participate in Medicare Part B, which covers doctors and outpatient services. There is a monthly premium, which is deducted from the Social Security check. Medicare Part B pays 80% of cost.
Medicare Prescription Drug Benefit (“Part D”)	Medicare Part D benefit is a government funded, but privately managed prescription drug benefit available to people who qualify for Medicare. Beneficiaries sign up for a plan of their choosing, and pay premiums, co-pays, and deductibles. Costs and drugs covered are different for each program. People with very low incomes can get “extra help” with costs, but many people with low incomes and high drug costs face challenges affording medications under the program.
Medicaid:	This is a joint federal-state health care program for those receiving TANF and low income elderly and disabled people. It covers medical care and prescriptions drugs. There is no monthly premium, but there may be small co-payments. The basic program rules are mandated by

	<p>federal statute and regulation. Each state determines the details of its own program, within federal guidelines. In North Carolina, people may apply for Medicaid at the local county Department of Social Services. In addition, anyone applying for SSI is automatically considered for Medicaid. In North Carolina and many other states, people who receive SSI automatically receive Medicaid. Persons who receive both Social Security Disability and SSI are “dually eligible” for Medicare and Medicaid. They are required to get their prescription drugs through Medicare Part D</p> <p>Disabled adults who do not receive SSI may qualify for Medicaid as “categorically needy” if they meet the Social Security standards for disability and have income less than the federal poverty level (\$908/month in 2011) and resources (assets) less than \$2000. Disabled adults with incomes over this amount may qualify for Medicaid with a deductible, also called a “spend down,” under the Medically Needy Medicaid program. The deductible is usually so high that only people with extremely high expenses will receive much benefit from the program. People in this income group may also qualify for a special Medicaid program that covers Medicare Premiums (Medicaid “Buy-In” or Medicaid QMB).</p>
<p>Health Choice:</p>	<p>A health insurance program for uninsured children who are ineligible for Medicaid under the age of 19 whose countable income falls under a specified percentage of the Federal Poverty Limit. At the national level, this program is known as Children's Health Insurance Program (CHIP). Funding is state and federal. Applications taken at the county Department of Social Services. There is frequently a waiting list.</p>
<p>Patient Assistance Programs</p>	<p>Low income persons who have no private or government health insurance often get their medications through pharmaceutical company patient assistance programs. These programs require extensive paperwork that is generally handled by clinic social workers. Many patient assistance programs have withdrawn assistance to people who are now eligible for Medicare Part D, even though the costs of Part D may be prohibitive for many low income people.</p>

Veteran's Administration:	Health care is available to veterans at facilities of the Veteran's Administration. Some co-payments apply to higher income veterans. Prescriptions drugs are available with a low co-payment. Veterans access services by making an appointment at any Veteran's Administration health care facility.
Employer Provided Group Health Insurance	Many of our employed clients have group health insurance through their employers. Employee health insurance is usually offered through a policy purchased by the employer from a private insurance company, though some companies "self insure." Employees typically pay a portion of the premiums through a payroll deduction. Most plans have co-payments and coverage varies from plan to plan. Most plans also have an exclusion period for pre-existing conditions. Employer provided health insurance plans are governed by the federal ERISA statute.
COBRA	This federal statute provides that employees who leave their job can maintain their group health insurance at their own expense. The employer must send the employee a notice of COBRA rights, and the employee has a limited period in which to sign up for COBRA coverage. Coverage is extended for up to 18 months (up to 29 months if the employee is determined to be disabled under Social Security rules). COBRA coverage is often prohibitively expensive, but if a client can afford it, it is advisable to take the coverage, so as to avoid pre-existing condition limitations when the employee gets new insurance.
HIPAA	The federal Health Insurance Portability and Accountability Act. This statute sets standards for privacy of medical information, but also provides some protections for employees leaving employer-provided group insurance. Under the statute, if the employee maintains "continuous creditable coverage," no pre-existing condition limitation can be applied.
Affordable Care Act	Federal health reform legislation will have a major effect on our clients. Most notably, as of 2014, all citizens with incomes under 133% of poverty will be eligible for Medicaid without the requirement of being disabled. Subsidies for health insurance will be available to people

	<p>buying insurance through health care Exchanges that will be in place in each state. The ACA has already ended lifetime caps in health insurance policies, and in 2014 will end all pre-existing condition limitations in insurance. The ACA also provided for the creation of a temporary Federal High Risk Insurance Pools in each state, serving people with chronic diseases that are virtually uninsurable. North Carolina currently has a State and Federal High Risk Pool, administered under the name “Inclusive Health.”</p>
HOUSING	
Public Housing:	<p>Federal program, administered at the local level, to build, own, and operate, low rent housing for low income people. The rent is based on income, generally 30% of income. The housing is run by local public housing authorities, and the reduced rent is available only in housing authority developments. Clients often refer to public housing as “projects.” There is a long waiting list for public housing.</p>
Section 8/Housing Vouchers:	<p>This is a rent subsidy supplied by the federal government, through the Department of Housing and Urban Development. The subsidy is paid directly to a private landlord, who agrees to abide by federal rules for housing quality standards and rent payments. The subsidy can either be “portable,” or “project based.” When the subsidy is portable, the recipient gets a “certificate” or “voucher” which s/he can offer to any willing private landlord. If the tenant wants to move to a new rental unit, she can do so, as long as the new landlord agrees to participate in the Section 8 program. Project based subsidies are tied to a particular rental unit. If the tenant moves out, the subsidy stays with the unit.</p>
OTHER	
Family and Medical Leave Act	<p>Requires employers with 50 or more employees to permit workers to take up to 12 weeks unpaid leave necessitated by their medical needs or those of immediate family. Also provides for parental leave.</p>
Americans with Disabilities Act	<p>Prohibits discrimination against disabled persons in employment (ADA Title I), public services (Title II), and</p>

	<p>private places of public accommodations (Title III). Includes protections against medical examinations and inquiries by employers (generally permitted only after a job offer, and must be applied to all new employees), and requires information obtained to be kept confidential. The ADA also prohibits adverse job action against a “qualified individual” based on disability, including demotion, reassignment, etc. The statute requires employers to make a “reasonable accommodation” of an employee’s disability.</p>
Rehabilitation Act	<p>Provides similar protections to those offered by the ADA, with respect to employers or programs receiving federal funds.</p>