

# Instructions for Completing the *CAREAssist* Client Eligibility Review (CER)

IMPORTANT. PLEASE READ.

- **You MUST complete the entire CER.** If you do not, your CER will be returned to you. This could delay or end your eligibility with the *CAREAssist* program.
- **You MUST return all requested documentation.** If you fail to provide proof of income as noted in the CER, it will be returned to you. This could delay or end your eligibility with the *CAREAssist* program.
- ***CAREAssist* must have received your CER by the close of business by the deadline given by the program. If *CAREAssist* does not receive your CER by this date, your eligibility with the program will end.**
- **Please answer all questions completely** so that *CAREAssist* can determine your eligibility as quickly as possible and guarantee that all information on file for you is correct and current.

To continue to qualify, you must meet the following criteria:

- 1) You must live in Oregon.
- 2) Your income must be within our guidelines.

If you have questions not answered below, please call your HIV case manager for help.

## NOTES on some of the CER questions:

**Part 2: Address Information** Home address - The home address is where you physically live, sleep at night, etc. If you are homeless, do not complete this. Mailing address - **Everyone** must give us a mailing address, even if you are homeless. Your mailing address may be the same as your home address. If you are homeless, ask if you can use an HIV case manager's or health care provider's address. You can also use a family member's address. Whichever address you use, be sure to advise that person that they will be getting mail for you. In all cases, **you** are responsible for timely replies to our mailed requests. (In other words, check in regularly for your mail.)

**Part 3: Phone Information** When we ask if we can leave a detailed message at your home, we want to insure if we leave a message that we are not breaking your confidentiality. When we ask about your work number, please give it only if you wish. When we call clients at work we identify ourselves only by staff member's name and phone number. **Do not complete if** you do not work, do not want us to call you at work, or are not allowed to take personal calls at work. If there is a family member or friend that you say we can talk to, please list the person and phone number.

**Instructions continued next page.**

**Part 5: HIV Case Manager** HIV case managers are professionals who help HIV-positive clients. They may help you apply for assistance programs, get insurance, help arrange housing, help complete paperwork to get disability income, and get Ryan White emergency funds. If you do not already have an HIV case manager, we **strongly** urge you to get one. If you live in a county other than Multnomah, Washington, Clackamas, Yamhill, or Columbia, you **MUST** have an HIV case manager.

### **Part 6a: Financial Information - INCOME**

**Important Note on Family Size:** We use the same criteria as the Oregon Health Plan to define family. A family of two or more is a group of persons related by birth, marriage, or adoption/legal guardianship who live together. Going by the OHP guidelines, here are some examples of how to count household members:

- If you have a life partner or roommate (and no children in common), you have a household **one**.
- If you have a child by and live with the child's other biological parent, you have a family of **three**.
- If you have only your children living with you, you have a household of that many **children plus yourself**. (For purposes of verification we may require that child or those children are counted as a deduction on a federal income tax return.)
- A husband and wife who live together are a family of **two**.

If you claim as a dependent a person outside the definitions discussed here, you must provide proof that person is legally adopted or that you have legal guardianship of that person. All dependents claimed must appear on the client's most recent federal and state income tax returns.

**For EACH family member/dependent and for EACH income source**, you must include proof of income with the CER. We reserve the right to request more proof of your earnings to help insure we have a clear picture of your family income. So, sending too much proof is better than sending too little. That way, you avoid delays while we wait for more proof. We strictly follow our income guidelines. However, we will interpret income as favorably as we can. Once a year we ask for a copy of your most recent federal income tax return. **(Note: If you get Social Security Disability, the preferred proof of your income is a copy of your current year's award letter. We will accept a recent bank statement which shows a "U.S. Treasury Automatic Deposit." However, if you have Medicare, CAREAssist will assume the amount on your bank statement is AFTER a Medicare premium is withheld; we will add that premium amount to the figure appearing on your bank statement to properly reflect your gross income.)**

**Note for self employed clients only** - We determine income for clients who are self-employed the same way the Oregon Health Plan does. The sum of your gross income will be divided by the number of months involved. That figure will be halved. Thus, your gross monthly income can be no more than double our limit. Once a year, your proof of income must include a copy of your federal tax return and it **must include a copy of your Schedule C**.

**Instructions continued next page.**

## **Part 6a: Financial Information – INCOME – continued**

**A note regarding income limits:** Expect a *CARE*Assist benefit booklet soon, which will discuss in detail the program's income limits, which in most instances, have been expanded.

**Part 6b: Financial Information - ASSETS** The limit for assets for *CARE*Assist clients is \$10,000 for all clients not income-eligible for the Oregon Health Plan (OHP). If you qualify for OHP, then our asset limit matches that of OHP. As clients submit their regularly scheduled CERs, those with assets over the amount allowed will be reviewed again in six months. If your assets remain over the allowed amount, your coverage with *CARE*Assist will end.

The following are **exempted, that is, NOT counted as assets:**

- One house (owned or buying).
- One vehicle (owned or buying). A client may have one car registered in his or her name.
- Tax-deferred retirement accounts.

The following **ARE counted as assets:**

- Liquid assets, including savings and other bank accounts.
- All real estate holdings other than one house (owned or buying). This includes vacation homes, rental property, business property.
- All investments at the reasonable market value for those holdings (for example: stocks, bonds, securities, etc.).
- All limited partnerships, expense reimbursements, compensations to expense accounts as officers or employees of a corporation.