



May 2, 2019

Dear Ryan White HIV/AIDS Program Colleagues,

Viral suppression is critical to improve health outcomes for people living with HIV (PLWH) and to prevent transmission of infection. In order to facilitate the rapid start of antiretrovirals for those newly diagnosed or re-engaged in care and the maintenance of patients on therapy,^{1,2,3,4} the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) has revised language in Policy Clarification Notice (PCN) *13-02 Clarifications on Ryan White Program Client Eligibility Determinations and Recertifications Requirements*. The PCN now clarifies that “for both initial/annual and six-month recertification procedures, eligibility determinations may be performed simultaneously with testing and treatment. Recipients and subrecipients assume the risk of recouping any HRSA Ryan White HIV/AIDS Program (RWHAP) funds utilized for clients ultimately determined to be ineligible, and instead charge an alternate payment source, or otherwise ensure that funds are returned to the RWHAP program.”

HRSA RWHAP remains the payor of last resort. As such, recipients and subrecipients must certify and document a client’s eligibility and recertify the client’s ongoing eligibility to receive HRSA RWHAP services. In the context of a public health program and understanding that HIV treatment is prevention, HIV care and treatment services may be provided to PLWH before HRSA RWHAP eligibility is documented, on a time-limited basis as defined by the recipient. HAB defers to the recipient to determine if and which services they are willing to provide to clients during the time-limited rapid eligibility determination period. Use of RWHAP funds for services to PLWH who are ultimately determined to be ineligible for RWHAP are unallowable and must be recouped by the program from an alternate payment source. HRSA HAB continues to expect RWHAP recipients to establish and monitor procedures to ensure funded providers verify and document client eligibility, as described in HRSA HAB PCN 13-02.

HRSA HAB is conducting an assessment examining more broadly recipient burden and current requirements related to eligibility and recertification of ongoing eligibility. We look forward to continued work with our RWHAP recipients, partners, and stakeholders to improve health outcomes for PLWH and to make continued advancements toward ending the HIV epidemic.

Sincerely,
/Laura W. Cheever/
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¹ Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents: <http://aidsinfo.nih.gov/guidelines>

² The RAPID ART Program Initiative for HIV Diagnoses (RAPID) in San Francisco. Beacon et al. *Conference on Retroviruses and Opportunistic Infections*. Abstract 93. Boston, Massachusetts, March 4-7, 2018
<http://www.croiconference.org/sessions/rapid-art-program-initiative-hiv-diagnoses-rapid-san-francisco>.

³ INSIGHT START Study Group, Lundgren JD, Babiker AG, et al. Initiation of antiretroviral therapy in early asymptomatic HIV infection. *N Engl J Med*. 2015;373(9):795-807. Available at: <http://www.ncbi.nlm.nih.gov/pubmed/26192873>.

⁴ TEMPRANO ANRS Study Group, Danel C, Moh R, et al. A trial of early antiretrovirals and isoniazid preventive therapy in Africa. *N Engl J Med*. 2015;373(9):808-822. Available at: <http://www.ncbi.nlm.nih.gov/pubmed/26193126>.