



Payment Options for Immediate Antiretroviral Treatment (iART) for People With HIV

All clients should be able to get immediate antiretroviral treatment (iART) on the day of an HIV diagnosis or a first clinic visit. There are many ways to provide free or affordable coverage for health care costs and access to medications for all clients, regardless of the client’s insurance or immigration status. Please see the following pages for the correct payment option for your client.

For Uninsured Clients

(people with no health insurance)

Program	Program Details	Eligibility Criteria
For People With a U.S. Social Security Number		
Medicaid	Provides coverage for HIV primary care, including medical services, labs and medications. For more information, visit benefits.gov/benefit/1637 .	For individuals with incomes less than or equal to 138% of the Federal Poverty Level (FPL).*
Medicare	Provides coverage for HIV primary care, including medical services, labs and medications. For more information, visit ssa.gov/benefits/medicare/ .	For individuals age 65 and older, younger than age 65 with a physical disability or at end-stage renal disease.
For People With or Without a U.S. Social Security Number		
New York State Uninsured Care Program (UCP)	AIDS Drug Assistance Program (ADAP): Provides no-cost medications for the treatment of HIV and opportunistic infections.	Requires proof that the person lives in New York State and has an income less than or equal to 500% of the FPL.
	ADAP Plus: Provides HIV primary care. Covers costs of medical services, including labs provided 30 days prior to account activation.	
	UCP RapidAccess: UCP revised the enrollment process to facilitate same-day enrollment for ADAP and ADAP Plus. For more information, contact the New Enrollment Unit at 800-542-2437 or 800-682-2437, or apply online at nyucp.providecm.net . Visit health.ny.gov/diseases/aids/general/resources/adap/ to learn more.	

For Uninsured Clients

(people with no health insurance)

Program	Program Details	Eligibility Criteria
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For People Without a U.S. Social Security Number

RapidTx Program: Provides eligible clients at participating clinics with a RapidTx card, which covers a one-month supply of ADAP-covered medications (no refills), and one month of ADAP Plus covered primary care services. Clinic staff should immediately submit a full ADAP/ADAP Plus application to continue coverage after the first month.

Pharmaceutical Patient Assistance Programs: Offer no-cost or low-cost HIV medications for short-term (seven to 30 days for all) or long-term treatment (for people who do not qualify for any other insurance or assistance programs such as Medicaid, Medicare or ADAP). These programs do not require a U.S. Social Security number.

Program	Medications Covered	Eligibility Criteria
Gilead Advancing Access Program	<i>Atripla, Biktarvy, Complera, Descovy, Emtriva, Genvoya, Odefsey, Stribild, Truvada, Tybost, Viread</i> For more information, visit bit.ly/gileadaa .	For individuals with incomes less than or equal to 500% of the FPL.
Janssen CarePath Savings Program	<i>Edurant, Intelence, Prezcobix, Prezista, Symtuza</i> For more information, visit bit.ly/janssencare .	For individuals with incomes less than or equal to 300% of the FPL.
Merck Helps	<i>Crixivan, Delstrigo, Isentress, Isentress HD, Pifeltro</i> For more information, visit merckhelps.com .	For individuals with incomes less than or equal to 400% of the FPL.
ViiVConnect	<i>Combivir, Epivir, Epzicom, Juluca, Lexiva, Rescriptor, Retrovir, Selzentry, Tivicay, Triumeq, Trizivir, Viracept, Ziagen</i> For more information, visit viivconnect.com .	For individuals with incomes less than or equal to 500% of the FPL.

For Underinsured Clients

(people with health insurance that does not provide complete coverage for HIV medications or care)

Program	Program Details	Eligibility Criteria
For People With Or Without a U.S. Social Security Number		
New York State Uninsured Care Program (UCP)	<p>ADAP Plus Insurance Continuation Program (APIC): Provides assistance in paying health insurance premiums for comprehensive coverage.</p> <p>ADAP/ADAP Plus: Can pay insurance copayments and deductibles. For more information and same-day enrollment, contact the New Enrollment Unit at 800-542-2437 or 800-682-2437, or apply online at nyucp.providecm.net. Visit health.ny.gov/diseases/aids/general/resources/adap/ to learn more.</p>	Requires proof that the person lives in New York State and has an income less than or equal to 500% of the FPL.*

Pharmaceutical Cost-Sharing Assistance Programs: Offer cost-sharing assistance (including deductibles, co-payments and co-insurance costs) for people with private health insurance to obtain HIV drugs at the pharmacy. There is no income requirement for CAPS. These programs do not require a U.S. Social Security number.

Program	Medications Covered	Program Details
Gilead Co-Pay Coupon	<i>Atripla, Biktarvy, Complera, Descovy, Emtriva, Genvoya, Odefsey, Stribild, Truvada, Tybost, Viread</i> For more information, visit bit.ly/gileadcoupon .	Provides up to \$7,200 in co-pays per year with no monthly limit (coverage varies based on medication).
Janssen Prescription Assistance	<i>Edurant, Intelence, Prezobix, Prezista, Symtuza</i> For more information, visit bit.ly/janssencare .	Eligible patients pay \$0 per month, with a \$10,500 maximum program benefit per calendar year.
Merck Co-Pay Coupon	<i>Delstrigo, Isentress, Isentress HD, Pifeltro</i> For more information, visit activatethecard.com/8030 .	Provides out-of-pocket costs for Isentress, Isentress HD, Pifeltro, or Delstrigo up to a total program savings of \$6,800.
ViiV Healthcare—Savings Card	<i>Combivir, Epivir, Epzicom, Juluca, Lexiva, Rescriptor, Retrovir, Selzentry, Tivicay, Triumeq, Trizivir, Viracept, Ziagen</i> For more information, visit myviivcard.com .	Provides \$4,800 to \$7,500 per year with no monthly limit (coverage varies based on medication).

For Insured Clients

For People With a U.S. Social Security Number

Program	Program Details	Eligibility Criteria
Private Insurance	<p>ART is covered by private insurance, but particular drugs may be recommended based on the insurance, or prior authorization may be needed. Check the client's existing insurance to confirm what medications are covered or need prior authorizations. Use ADAP, APIC and Cost-Sharing Assistance Programs (see previous pages) for help paying insurance costs or to compare coverage options on the insurance marketplace to meet your client's need.</p> <p>For more information, visit healthcare.gov.</p>	Varies based on the individual.
Medicaid	<p>Provides coverage for HIV primary care, including medical services, labs and medications.</p> <p>For more information, visit benefits.gov/benefit/1637.</p>	For individuals with incomes less than or equal to 138% of the FPL.
Medicare	<p>Provides coverage for HIV primary care, including medical services, labs and medications.</p> <p>For more information, visit ssa.gov/benefits/medicare/.</p>	For individuals age 65 and older, younger than age 65 with a physical disability or at end-stage renal disease.

* 2022 FPL: A measure of income issued by the Department of Health and Human Services (HHS), and used to determine eligibility for certain programs and benefits. Values can change on an annual basis. For the latest numbers, visit [aspe.hhs.gov/poverty-guidelines](https://www.aspe.hhs.gov/poverty-guidelines).

Household Size	138% of FPL	300% of FPL	400% of FPL	500% of FPL
1	\$18,754	\$40,770	\$54,360	\$67,950
2	\$25,268	\$54,930	\$73,240	\$91,550
3	\$31,781	\$69,090	\$92,120	\$115,150
4	\$38,295	\$83,250	\$111,000	\$138,750
5	\$44,809	\$97,410	\$129,880	\$162,350
6	\$51,322	\$111,570	\$148,760	\$185,950
7	\$57,836	\$125,730	\$167,640	\$209,550
8	\$64,349	\$139,890	\$186,520	\$233,150