



Insurance Waiver Form

ATTACHMENT I

Date	Client's Name
<input type="text"/>	<input type="text"/>

Client's Address

Eligibility Staff Name	Phone
<input type="text"/>	<input type="text"/>

Address

Patient care programs under Chapter 64D-4 are payers of last resort. As such, any applicant/client eligible to receive health insurance through employment or COBRA must access the insurance. Exceptions can be granted if the insurance policy is considered not viable. See Section 9 of the eligibility manual for details.

Please check the appropriate box:

Date of open enrollment:

<input type="checkbox"/>	Applicant/client has available insurance during open enrollment.	<input type="text"/>
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Applicants/clients can be served while waiting for open enrollment. After the date listed above, applicants/clients are not eligible for services if they did not access the insurance.

<input type="checkbox"/>	Applicant's/client's insurance is not viable.
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Applicants/clients are eligible if the insurance policy is deemed not viable. This would include ADAP.

Proof of availability of insurance or policy description must be in the applicant's/client's file. Refer to Section 9 of the eligibility manual for details.