

AFFIDAVIT OF UNDERSTANDING FOR INDIVIDUALS DECLINING ENROLLMENT IN THE FEDERALLY FACILITATED MARKETPLACE (FFM)

BEFORE SIGNING READ THIS DOCUMENT CAREFULLY AND BE SURE YOU UNDERSTAND

The FFM, available at <u>www.HealthCare.gov</u>, is the health insurance marketplace set up as part of the Patient Protection and Affordable Care Act. If you have any questions, please call ADAP at 602-364-3610 or 800- 334-1540. You may also contact your case manager with any questions or concerns.

By declining to enroll in the FFM and choosing instead to receive services from the Ryan White program, with medication delivery through ADAP only, I understand that I may be subject to:

Initial Below	Statement of Understanding
	The ability to access only the covered medications as listed on the ADAP Formulary.
	The ability to receive care and services only from my local Ryan White provider network.
	Charges for certain services, such as emergency room or inpatient healthcare. I
	understand that I could access emergency treatment at most hospitals under the
	Federal Emergency Treatment and Active Labor Act (EMTALA), and that EMTALA also
	does not provide funding for the emergency treatment.
	The inability to access certain services, such as employment, vocational rehabilitation,
	or employment readiness services and other allowed services as defined under policy.
	A waiting list, if imposed, due to the non-availability of funding through the Ryan
	White program and/or the ADAP program.

I have completely read this affidavit of understanding. By signing, I agree to the facts and conditions contained herein.

Applicant signature:

Case Manager or ADAP witness signature:

Date signed: _____

References:

• ADAP Formulary can be found at <u>https://www.azdhs.gov/documents/preparedness/epidemiology-</u> <u>disease-control/disease-integrated-services/adap/adap-formulary-providers.pdf</u>

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Health and Wellness for all Arizonans