

# Ryan White Eligibility Assessment User Guide / Help

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## Login Overview

In order to access the Community Services system, a user must login with given User Name and Password using the following link:.

<https://secure.co.palm-beach.fl.us/CommSvcLogin/Main/MLogin.aspx>

The following is an image of the landing page:



- Enter **User Name**
- Enter **Password**
- Click **Login** or hit **Enter**

There is several options provided to the user during the login process:

- **Forgot User ID** – Will take user through process to retrieve the User ID
- **Forgot Password** – Will take user through password reset
- **Need to Register** – New users use this option to create a User ID and Password
- **Privacy Policy** – Disclosure of the Privacy Policy of the website
- **HIPAA Agreement** – Presents HIPPA Document

## Log Out Bar



This bar is displayed towards the top of the application. It gives the following options:

- **Home** – Takes user back to menu page
- **Application** – Drop Down List of available Application access
- **Log Out** – To back out of the database and end time as user

The Log Out Bar displays which user is currently logged in to the database on that computer system.

## Accessing Ryan White

After successful login, the following screen will appear:

The screenshot shows the Palm Beach County Community Services website. The header includes the county logo, the text "Palm Beach County Community Services", and the tagline "Helping People Build Better Communities". Navigation links for "Home", "Applications", and "Logout" are visible. A central image depicts a collage of community members. Below this image is a grid of buttons for various services:

CACODE TABLE	CSCMS	DOSS CODE TABLE
EDICIRTS	Fix Address Doss	Fix Address Non Doss
HIPAA	Med Waier	PIT
<b>Ryan White</b>	Security Admin System	

At the bottom of the page, a footer contains the URL "/CommsVclLogin/Main/WelcomePage.aspx", a session expiration notice "session expires by 5/3/2013 7:26:26 AM", and copyright information "©2012 - Palm Beach County, FL".

Select the **Ryan White** button

# Ryan White Eligibility Assessment

RYAN WHITE Home Applications Logout

Palm Beach County Community Services  
*Ryan White*

## Ryan White Eligibility Assessment

New Assessment

Saved Drafts  
(Over 45 day old drafts are automatically deleted)

Assessment List

Reports

Reassessment

Administrative Functions

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/3/2013 7:30:10 AM

The Ryan White Eligibility Assessment home page offers the following options:

- **New Assessment** – Add a new client
- **Saved Drafts** – Return to an assessment in progress
- **Assessment List** – Shows all assessments and eligible statuses
- **Reports**
- **Reassessment** – Shows all assessments and next assessment date
- **Administrative Functions**

## Saved Drafts

RYAN WHITE Home Applications Kathie Brannen Logout

Palm Beach County Community Services  
*Ryan White*

## Assessment Draft List

Assessment#	Applicant Name	URN	Assessment Start Date	Assessed by
137	Production Test 2	PT212121955	07/16/2013	KATHIE BRANNE <a href="#">Edit</a>

Records: 1 - 1 of 1

**\*Note: Assessment Drafts are saved for 45 days**

New Assessment

When you click the Saved Drafts button you will see and started but not yet completed Assessment. Click the Edit link to continue the Assessment.

# New Assessment

RYAN WHITE | Home | Applications | Logout

Palm Beach County Community Services  
*Ryan White*

**Client Details**

First Name:*	<input type="text"/>
Last Name:*	<input type="text"/>
Date of Birth*:	<input type="text"/>
Social Security Number:*	<input type="text"/>
URN:*	<input type="text"/>

Next->

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL session expires by 5/3/2013 7:30:10 AM

When a New Assessment is started, the following Client Details are required:

- **First Name** – Alpha Data Entry
- **Last Name** – Alpha Data Entry
- **Date of Birth** – MM/DD/YYYY
- **Social Security Number** – NNN-NN-NN
- **URN** – Alphanumeric Data Entry

The following box will open if a New Assessment is started and the client information matches to a Saved Draft:

**Client Details**

First Name:*	Production
Last Name:*	Test 2
Date of Birth*:	12/12/1955
Social Security Number:*	987-65-4321

**Confirm Client** [X]

A draft assessment exists for this client with the SSN: 987654321. Do you want to open?

Yes No

- **Yes** – Select the link to open the Saved Draft
- **No** – Click this button to start a New Assessment

The following questions require a response and documentation:

<b>Proof of HIV</b>	
Do you have documentation to confirm the HIV status? <a href="#">?</a>	<input type="text"/>
If client is an exposed infant (up to 12 months) document mother's HIV status <a href="#">?</a>	<input type="checkbox"/>
Western Blot or Immunofluorescence Assay (IFA) or Nuclear Acid Testing (Aptima) by blood, oral fluid or urine <a href="#">?</a>	<input type="checkbox"/>
A positive HIV direct viral test such as PCR or P24 antigen <a href="#">?</a>	<input type="checkbox"/>
PAC Physician Referral Form <a href="#">?</a>	<input type="checkbox"/>
A detectable HIV-viral load or viral resistant test result <a href="#">?</a>	<input type="checkbox"/>
PRISM Reports <a href="#">?</a>	<input type="checkbox"/>
4th Generation testing	<input type="checkbox"/>

<b>Proof of Residence</b>	
Applicant's Zip Code (for verification only)	<input type="text"/>
Check all applicable items. Photo ID is not required but encouraged. One form of documentation other than photo ID must be obtained.	
Unemployment documentation with address	<input type="checkbox"/>
Recently postmarked letter mailed to client at address <a href="#">?</a>	<input type="checkbox"/>
Current and valid Health Care District card <a href="#">?</a>	<input type="checkbox"/>
Current and valid license or photo ID	<input type="checkbox"/>
Receipt of payment for rent with name, address and signature of landlord	<input type="checkbox"/>
Mortgage or rent agreement with name and address (the entire document is not required - signature page and page with client name and address are required)	<input type="checkbox"/>
Letter from person with whom client resides	<input type="checkbox"/>
Letter from homeless shelter or social service agency	<input type="checkbox"/>
Utility bill with name and address	<input type="checkbox"/>
Documentation of homeless with client signature and date	<input type="checkbox"/>

Applicant's Zip Code is a dropdown that has been populated with all valid Palm Beach County Zip Codes. Zip Code is a required field.

### Social Security Verification

I have verified the client has either:

Social Security Card 

or

Pseudo Number

The following questions are about other programs the Client may participate in:

### Screening for Other Programs

An Applicant cannot be receiving services or be eligible to participate in local, state or federal programs where the same type of services are provided. The following is a list of programs where the same types of services are provided. Please select all applicable to the Applicant.

Health Care District 	<input type="checkbox"/> Option 1 (Full Benefits)	Medicare (specify which parts) 	<input type="checkbox"/> Part A (Hospital)
	<input type="checkbox"/> Option 2 (Preventive Care)		<input type="checkbox"/> Part B (Insurance)
	<input type="checkbox"/> Option 3 (Ryan White)		<input type="checkbox"/> Part C (Advantage Plus)
Medicaid (specify type)	<input type="checkbox"/> SSI	Private Health Insurance (list type) 	<input type="checkbox"/> Part D (Drug Plan)
	<input type="checkbox"/> Title XIX	Veterans Benefits	<input type="checkbox"/>
	<input type="checkbox"/> LTC	Project AIDS Care	<input type="checkbox"/>
	<input type="checkbox"/> EMA	Children Medical Services	<input type="checkbox"/>
	<input type="checkbox"/> Family Planning	Patient Assistant Programs (PAPs) 	<input type="checkbox"/>
	<input type="checkbox"/> MediKids	WIC (Women, Infants and Children) 	<input type="checkbox"/>
	<input type="checkbox"/> PEPW		
	<input type="checkbox"/> QMB		
	<input type="checkbox"/> SLMB		

### Verification of Services

I verified the Applicant's Medicaid through the FI Medicaid Information System 

I verified the Applicant's Medicare by calling 877-309-4290

### Comments on Pending Items

The following screen requires information on the household. This information is used to see what programs the Client is eligible for. The following screen asks how many Adults and Children reside in the household besides the Client:

**Household Members**

Applicant's Age : 65

Number of Adult Household members (Applicant not included)

Number of Applicant's dependent Children in the home (Applicant not included)

Income can be entered for each household member. Click the dollar amount next to the Income Type to be updated:

	<a href="#">Delete</a>	<a href="#">Delete</a>	
Income Type (Annual)	APPLICANT	ADULT1	CHILD1
<a href="#">Employment Income</a>	\$0.00	\$0.00	\$0.00
<a href="#">Unemployment</a>	\$0.00	\$0.00	\$0.00
<a href="#">Veteran Benefits</a>	\$0.00	\$0.00	\$0.00
<a href="#">Pension</a>	\$0.00	\$0.00	\$0.00
<a href="#">Alimony</a>	\$0.00	\$0.00	\$0.00
<a href="#">Child Support</a>	\$0.00	\$0.00	\$0.00
<a href="#">SSI</a>	\$0.00	\$0.00	\$0.00
<a href="#">Workers Comp</a>	\$0.00	\$0.00	\$0.00
<a href="#">TANF</a>	\$0.00	\$0.00	\$0.00
<a href="#">Survivor Benefits</a>	\$0.00	\$0.00	\$0.00
<a href="#">SSDI</a>	\$0.00	\$0.00	\$0.00
<a href="#">Investments</a>	\$0.00	\$0.00	\$0.00
<a href="#">Monetary Assistance From Supporter</a>	\$0.00	\$0.00	\$0.00

Enter the Gross Amount of the Income Type and select how often it is received:

Employment Income

[Calculate Average](#)

Additional income

Gross Amount: 250.00

Weekly  
 Bi-Weekly  
 Monthly  
 Bi-Monthly  
 Yearly

The Income Type will update with the Annual Amount automatically:

		<a href="#">Delete</a>	<a href="#">Delete</a>
Income Type (Annual)	APPLICANT	ADULT1	CHILD1
<a href="#">Employment Income</a>	\$13,000.00	\$0.00	\$0.00
<a href="#">Unemployment</a>	\$0.00	\$0.00	\$0.00
<a href="#">Veteran Benefits</a>	\$0.00	\$0.00	\$0.00
<a href="#">Pension</a>	\$0.00	\$0.00	\$0.00
<a href="#">Alimony</a>	\$0.00	\$0.00	\$0.00
<a href="#">Child Support</a>	\$0.00	\$0.00	\$0.00
<a href="#">SSI</a>	\$0.00	\$0.00	\$0.00
<a href="#">Workers Comp</a>	\$0.00	\$0.00	\$0.00
<a href="#">TANF</a>	\$0.00	\$0.00	\$0.00
<a href="#">Survivor Benefits</a>	\$0.00	\$0.00	\$0.00
<a href="#">SSDI</a>	\$0.00	\$0.00	\$0.00
<a href="#">Investments</a>	\$0.00	\$0.00	\$0.00
<a href="#">Monetary Assistance From Supporter</a>	\$0.00	\$0.00	\$0.00

## Calculate Average

The screenshot shows a software interface with a dialog box titled "Average Income Calculator". The dialog box has a close button (X) in the top right corner. Inside the dialog, there is a prompt "Please enter the amount:" followed by six numbered input fields. The first three fields contain the values 125.55, 312.67, and 150.00. Below these fields, the text "Average Amount: \$ 196.07" is displayed. At the bottom of the dialog, there are two buttons: "Calculate Average" and "Ok".

Income Type (Annual)	Amount
Employment	
Unemployment	
Veterans	
Permanently Disabled	
Alimony	
Child Support	
SS Disability	
Work Incentive	
TANF	
Supplemental Security Income	
SS Retirement	
Investments	
Monetary Assistance From Supporter	\$0.00

This will allow you to average income by entering pay stub information when the person has different amounts per a selected income frequency (Weekly, Monthly, etc.). Enter the amounts, click Calculate Average and then click OK.

The screenshot shows a software interface with a dialog box titled "Employment Income". The dialog box has a close button (X) in the top right corner. Inside the dialog, there is a "Calculate Average" button. Below it, the text "Gross Amount" is followed by an input field containing the value 196.07. To the right of the input field, there is a checkbox labeled "Additional income" which is currently unchecked. Below the checkbox, there are five radio button options for income frequency: "Weekly" (selected), "Bi-Weekly", "Monthly", "Bi-Monthly", and "Yearly".

Then select the income frequency.

The Calculated Household Income will display and update based on the entries of the household:

<b>Calculated Household Income</b>	
Total Household Income:	\$0.00
Total Federal Poverty Level:	0.00 %
Max Household Income for selected HH size:	\$19,530.00

The Calculated Household Income box will update the following areas:

- **Total Household Income** – All household members combined income
- **Total Federal Poverty Level** – The poverty % based on income
- **Max Household Income for HH size** – The poverty threshold based on members

<b>Calculated Household Income</b>	
Total Household Income:	\$16,300.00
Total Federal Poverty Level:	83.46 %
Max Household Income for selected HH size:	\$19,530.00

After all income has been entered, it must be verified that the proper documentation was provided to confirm income totals:

<b>Verification of Income/No Income</b>			
Acceptable Documentation Required for Income	APPLICANT	ADULT1	CHILD1
Employment (Pay Stubs, Tax Rtn, Self-Emp, Self-Track, SEQY)	<input type="checkbox"/>		
Unemployment (TPQY, Ltr of Sup/Unemp, Tax Rtn, SEQY)			
Veterans Benefits (Military Docs)	<input type="checkbox"/>		
Pension (Pension Docs)			
Alimony (Alimony Docs)			
Child Support (Child Support Docs)			<input type="checkbox"/>
SSI (Social Security Benefits)		<input type="checkbox"/>	
Workers Comp (Workers Comp Docs)			
TANF (Temporary Assistance for Needy Families Docs)			
SSA (Social Security Survivor Benefit Docs, TPQY)			
SSDI (Social Security Disability Benefit Docs, TPQY)			
Investments (Investment Docs)			
Monetary Assistance (Monetary Assistance Docs)			

The following screen displays all the programs the Client is eligible for as well as what they were previously eligible for:

**RYAN WHITE** Home Applications Logout

**Palm Beach County Community Services**  
*Ryan White*

Household Members		Household Income	
Number of Adult Household members(Applicant not included):	0	Total Household Income:	\$9,100.00
Number of Applicant's dependent Children in the home(Applicant not included):	0	Total Federal Poverty Level:	79%

SERVICE_DESCRIPTION	PREVIOUS_ELIGIBILITY	ELIGIBILITY
Local Drug Reimbursement	Yes	Yes
Nurse Care Coordination	Yes	Yes
Ambulatory Outpatient Medica	Yes	Yes
Emergency Financial Assistanc	Yes	Yes
Food Bank/Home Delivered Mt	Yes	Yes
Health Insurance Continuation	Yes	Yes
Lab	Yes	Yes
Local Drug Reimbursement	Yes	Yes

Records: 1 - 20 of 20

Print Export To Excel Finish

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/3/2013 7:30:10 AM

One of the following two messages will display based on the responses:

**Assessment # 137**

Based on the assessment information, this applicant is Eligible.

OK

**Assessment # 123**

Based on the assessment, verification of information and required documentation, this application is Not Eligible.

OK

# Saved Drafts

RYAN WHITE Home Applications Sandeep Jadala Logout

 Palm Beach County Community Services  
*Ryan White* 

## Assessment Draft List

Assessment#	Applicant Name	Assessment Start Date	Assessed by
116	Roger K	05/09/2013	SANDEEP JADALA <a href="#">Edit</a>

Records: 1 - 1 of 1

*\*Note: Assessment Drafts are saved for 45 days*

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/15/2013 10:24:49 AM

Client Assessments can be started and saved if documentation is not present at the time. The Assessment Draft List displays all assessments that are in progress. Selecting the **Edit** link allows the assessment to be accessed with the previous answers filled in. The **New Assessment** button is offered if the draft was not saved or the Client wants to start over.

# Assessment List

RYAN WHITE Home Applications Logout

Palm Beach County Community Services  
*Ryan White*

## Ryan White Eligibility Assessment

Agency: All Assessed by: Show All Show Eligible Show Not Eligible

Assessment#	Applicant Name	Eligible	Assessment Date	Agency	Assessed by	Time
119	T T	YES	05/15/2013	PLAM BEACH COUNTY	Sandeep Jadala	00:04:20
118	T T	NO	05/14/2013	PLAM BEACH COUNTY	Sandeep Jadala	00:15:14
117	Test K	YES	05/14/2013	FRANK GRAHAM	Test Test	00:10:45
116	Roger K	NOT ASSESSED		PLAM BEACH COUNTY	Sandeep Jadala	00:05:26
115	Cori P	YES	05/09/2013	PLAM BEACH COUNTY	Sandeep Jadala	00:03:15
114	Shane M	YES	05/10/2013	FRANK GRAHAM	Test Test	00:07:30

Records: 1 - 6 of 6  
Average Time: 00:07:45

Print Export To Excel

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/15/2013 10:24:49 AM

The Assessment List will display all Clients that have been put into the system. The list can be narrowed down to the following:

- **Processed By**
- **Show All**
- **Show Eligible**
- **Show Not Eligible**

RYAN WHITE Home Applications Logout

Palm Beach County Community Services  
*Ryan White*

## Ryan White Eligibility Assessment

Agency: All Assessed by: Show All Show Eligible Show Not Eligible

Assessment#	Applicant Name	Eligible	Assessment Date	Agency	Assessed by	Time
119	T T	YES	05/15/2013	PLAM BEACH COUNTY	Sandeep Jadala	00:04:20
118	T T	NO	05/14/2013	PLAM BEACH COUNTY	Sandeep Jadala	00:15:14
117	Test K	YES	05/14/2013	FRANK GRAHAM	Test Test	00:10:45
116	Roger K	NOT ASSESSED		PLAM BEACH COUNTY	Sandeep Jadala	00:05:26
115	Cori P	YES	05/09/2013	PLAM BEACH COUNTY	Sandeep Jadala	00:03:15
114	Shane M	YES	05/10/2013	FRANK GRAHAM	Test Test	00:07:30

Records: 1 - 6 of 6  
Average Time: 00:07:45

Print Export To Excel

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/15/2013 10:24:49 AM

The following buttons are offered:

- **Print**
- **Export to Excel**

## Reports

Assessments that have been completed can be reviewed and printed with the information from the assessment including eligible programs.

RYAN WHITE Home | Applications | Logout

Palm Beach County Community Services  
*Ryan White*

### Search Completed Assessment

URN:  SSN:  Assessment#:

Assessment#	Applicant Name	Assessment Start Date	Assessed Date	Assessed by
There are no records available.				

Records: 0 - 0 of 0

/CommsvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/15/2013 10:24:49 AM

Assessment can be searched by the following:

- URN
- SSN
- Assessment #

RYAN WHITE Home | Applications | Logout

Palm Beach County Community Services  
*Ryan White*

### Search Completed Assessment

URN:  SSN:  Assessment#:

Assessment#	Applicant Name	Assessment Start Date	Assessed Date	Assessed by
119	T T	05/15/2013	05/15/2013	SANDEEP JADALA <a href="#">view</a>
117	Test K	05/14/2013	05/14/2013	TEST TEST <a href="#">view</a>
118	T T	05/14/2013	05/14/2013	SANDEEP JADALA <a href="#">view</a>
114	Shane M	05/10/2013	05/10/2013	TEST TEST <a href="#">view</a>
115	Cori P	05/09/2013	05/09/2013	SANDEEP JADALA <a href="#">view</a>

Records: 1 - 5 of 5

/CommsvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
session expires by 5/15/2013 10:24:49 AM

Click the **View** link to populate report

RYAN WHITE Home Applications Logout

**Palm Beach County Community Services**  
*Ryan White*

URN: Name: Cori P Assessment Date: 05/09/2013

**Proof of HIV:**

Do you have documentation to confirm the HIV status? :Yes  
 If client is an exposed infant (up to 12 months) document mother's HIV status  
 Western Blot or Immunofluorescence Assay (IFA) or Nuclear Acid Testing (Aptima) by blood, oral fluid or urine  
 A positive HIV direct viral test such as PCR or P24 antigen  
 PAC Physician Referral Form  
 A detectable HIV-viral load or viral resistant test result  
 4th Generation testing

**Social Security Verification:**

Social Security Card :Y

**Proof of Residence:**

Applicant's Zip Code (for verification only) :33419  
 Unemployment documentation with address  
 Recently postmarked letter mailed to client at address  
 Current and valid license or photo ID  
 Receipt of payment for rent with name, address and signature of landlord  
 Mortgage or rent agreement with name and address (the entire document is not required - signature page and page with client name and address are required)  
 Letter from person with whom client resides

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 session expires by 5/15/2013 10:24:49 AM

The report will populate on the screen and can be reviewed.

RYAN WHITE Home Applications Logout

**Palm Beach County Community Services**  
*Ryan White*

Ambulatory Outpatient Medical Care	Yes
Emergency Financial Assistance	Yes
Food Bank/Home Delivered Meals	No
Health Insurance Continuation	Yes
Lab	Yes
Local Drug Reimbursement	Yes
Medical Case Management Services	Yes
Medical Transportation	No
Mental Health Services	Yes
Non Medical/Support Case Management Services	Yes
Oral Health	Yes
Home and Community Based Health Services	Yes
Housing Services	Yes
Substance Abuse Services Outpatient	Yes
Substance Abuse Residential Treatment	Yes
Treatment Adherence Counseling	Yes
Peer Mentor Program	Yes
Legal Services	Yes

[Print](#)

/CommSvcLogin/Main/AppHomeFrame.aspx (sjadala, webdev11 is connected to )©2012 - Palm Beach County, FL  
 session expires by 5/15/2013 10:24:49 AM

Click the **Print** button to print a copy of the Assessment Eligibility Report.

<b>URN:</b>	<b>Name:</b> T T
<b>Proof of HIV:</b>	<b>Assessment Date:</b> 05/15/2013
Do you have documentation to confirm the HIV status? :Yes Western Blot or Immunofluorescence Assay (IFA) or Nuclear Acid Testing (Aptima) by blood, oral fluid or urine PAC Physician Referral Form	
<b>Social Security Verification:</b>	
Social Security Card :Y	
<b>Proof of Residence:</b>	
Applicant's Zip Code (for verification only) :33402 Current and valid license or photo ID	
<b>Screening for Other Programs:</b>	
<b>Verification of Services:</b>	
<b>Comments:</b>	

**Verification of Income/No Income:**

Acceptable Documentation Required for Income	APPLICANT
<a href="#">Employment Income</a>	\$520.00
<a href="#">Unemployment</a>	\$0.00
<a href="#">Veteran Benefits</a>	\$0.00
<a href="#">Pension</a>	\$0.00
<a href="#">Alimony</a>	\$0.00
<a href="#">Child Support</a>	\$0.00
<a href="#">SSI</a>	\$0.00
<a href="#">Workers Comp</a>	\$0.00
<a href="#">TANF</a>	\$0.00
<a href="#">Survivor Benefits</a>	\$0.00
<a href="#">SSDI</a>	\$0.00
<a href="#">Investments</a>	\$0.00
<a href="#">Monetary Assistance From Supporter</a>	\$0.00

**Household Members:**

Applicant, 0 Adult, 0 Children.

**Calculated Household Income:**

Total Household Income: \$520.00

Total Federal Poverty Level: 5%

Max Income for HH Size: \$11,490.00

**Service Eligibility:**

Local Drug Reimbursement	Yes
Nurse Care Coordination	Yes
Ambulatory Outpatient Medical Care	Yes
Emergency Financial Assistance	Yes
Food Bank/Home Delivered Meals	Yes
Health Insurance Continuation	Yes
Lab	Yes
Local Drug Reimbursement	Yes
Medical Case Management Services	Yes
Medical Transportation	Yes
Mental Health Services	Yes
Non Medical/Support Case Management Services	Yes
Oral Health	Yes
Home and Community Based Health Services	Yes
Housing Services	Yes
Substance Abuse Services Outpatient	Yes
Substance Abuse Residential Treatment	Yes
Treatment Adherence Counseling	Yes
Peer Mentor Program	Yes
Legal Services	Yes

# Reassessment

RYAN WHITE Home | Applications | Kathie Brannen | Logout

 Palm Beach County Community Services  
*Ryan White* 

## Ryan White Due For Reassessment

SSN:  URN:  Assessment Due by:  

Agency: All  Assessed by:

Assessment#	Applicant Name	Eligible	Assessment Date	Agency	Assessed by	Next Assessment	
137	Production Test 2	YES	07/16/2013	PALM BEACH COUNTY	KATHIE BRANNEN	01/12/2014	<a href="#">Reassess</a>
136	Production Test	YES	07/15/2013	PALM BEACH COUNTY	KATHIE BRANNEN	01/11/2014	<a href="#">Reassess</a>

Records: 1 - 2 of 2

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session expires by 7/16/2013 10:52:51 AM

The Reassessment List will display all Clients that have been put into the system. This list will display when the Client must provide updated information for the assessment. The list can be narrowed down to the following:

- **SSN**
- **URN**
- **Assessment Due By**
- **Agency**
- **Assessed By**

RYAN WHITE Home | Applications | Kathie Brannen | Logout

 Palm Beach County Community Services  
*Ryan White* 

## Ryan White Due For Reassessment

SSN:  URN:  Assessment Due by:  

Agency:  Assessed by:

Assessment#	Applicant Name	Eligible	Assessment Date	Agency	Assessed by	Next Assessment	
137	Production Test 2	YES	07/16/2013	PALM BEACH COUNTY	KATHIE BRANNEN	01/12/2014	<a href="#">Reassess</a>
136	Production Test	YES	07/15/2013	PALM BEACH COUNTY	KATHIE BRANNEN	01/11/2014	<a href="#">Reassess</a>

Records: 1 - 2 of 2

/CommSvcLogin/Main/AppHomeFrame.aspx (kbrannen, secure.co.palm-beach.fl.us is connected to )@2012 - Palm Beach County, FL  
session expires by 7/16/2013 10:52:51 AM

The following buttons are offered:

- **Print**
- **Export to Excel**