

**MEDICAL ASSISTANCE PROGRAM SERVICES (MAPS)  
CRITERION GUIDELINES**

1. Can NOT be a client of ARCARE or eligible for Ryan White Services
2. Can NOT be a client of Housing Opportunity for People with AIDS (HOPWA)
3. Can NOT be on Medicaid
4. If private insurance or Medicare, MAPS will ONLY assist with drug plan co-pays
5. MUST be between 200% – 300% poverty level (\$21,660 - \$32,490) – family of one
6. MUST use the medical providers determined by the Arkansas AIDS Foundation
7. MUST use the pharmacies determined by the Arkansas AIDS Foundation
8. ALL lab work (once you are billed) the invoice MUST be given to Arkansas AIDS Foundation (AAF) for direct payment
9. MUST reside/live within one of the following counties (Pulaski, Conway, Faulkner, Grant, Perry, Saline, Lonoke, Prairie)

If ALL above is met, the APPROVED applicant will be conditionally admitted to MAPS and credited/allotted \$1,000.00 dollars for various medical assistance services. ALL monies will be paid directly to the medical provider, pharmacy, and/or lab of choice. No monies will be given to a MAPS client directly. All clients have the right to decide monetarily how to spend his/her \$1,000.00 allotment, whether it is for either one or all three core medical services.

**If approved: Clients of MAPS MUST produce and submit a copy of the following for record purposes:**

1. Western Blot (confirmation of HIV positive status)
2. Proof of current residence (utility bill is acceptable)
3. Driver's Licenses
4. Social Security Card
5. Private Insurance/Medicare Card (if applicable)
6. Proof of income - prior year's taxes and/or SSI/SSDI benefits statement