

Clarifications Regarding Medicaid-Eligible Clients and Coverage of Services by the Ryan White HIV/AIDS Program

Policy Clarification Notice (PCN) #13-01 (Revised 12/13/2013)

Scope of Coverage: Ryan White Parts A, B, C, D, and Part F where funding supports direct care and treatment services.

Purpose of PCN

By statute, RWHAP funds may not be used “for any item or service to the extent that payment has been made, or can reasonably be expected to be made...” by another payment source.¹ This means grantees must assure that subgrantees make reasonable efforts to secure non-RWHAP funds whenever possible for services to individual clients. Grantees and their subgrantees are expected to vigorously pursue Medicaid enrollment for individuals who are likely eligible for coverage, to seek payment from Medicaid when they provide a Medicaid-covered service for Medicaid beneficiaries, and to back-bill Medicaid for RWHAP-funded services provided for all Medicaid-eligible clients upon determination.^{2,3} This is a continuation of current program policy, applying both to individuals who are eligible for traditional Medicaid and to those eligible for Alternative Benefit Plans as part of Medicaid expansion.

Instructions

Medicaid-Eligible Clients and the Ryan White HIV/AIDS Program

Currently Uninsured Clients

RWHAP grantees must make every effort to expeditiously enroll individuals in Medicaid if eligible and inform clients about any consequences for not enrolling. Specifically, RWHAP clients should be informed that under the Affordable Care Act, starting in 2014, if someone can afford it but doesn't have health insurance

¹ See Sections 2605(a)(6), 2617(b)(7)(F), 2664(f)(1), and 2671(i) of the Public Health Service Act.

² See HIV/AIDS Bureau Policy Letter dated August 10, 2000. Available online at <http://www.hab.hrsa.gov/manageyourgrant/files/medicaidnotice08102000.pdf>.

³ See also Policy Notice 10-02: Eligible Individuals & Allowable Uses of Funds for Discretely Defined Categories of Services. Issued April 8, 2010 and available online at <http://www.hab.hrsa.gov/manageyourgrant/pinspals/eligible1002.html>.

coverage,⁴ they may have to pay a fee.⁵ Some individuals may be exempt from the Affordable Care Act's requirement to enroll in health coverage. In these circumstances, the Health Insurance Marketplace or the Internal Revenue Service (IRS) will provide individuals with certificates of exemption if they meet certain criteria.⁶ RWHAP clients who obtain a certificate of exemption may continue to receive services through the RWHAP. Under no circumstances may RWHAP funds be used to pay the fee for a client's failure to enroll in minimum essential coverage.

HAB will require grantees to maintain policies regarding the required process for the pursuit of enrollment for all clients, to document the steps during their pursuit of enrollment for all clients, and establish stronger monitoring and enforcement of subgrantee processes to ensure that clients are enrolled in Medicaid if eligible. If after extensive documented efforts on the part of the grantee, the client remains unenrolled in Medicaid, the client may continue to receive services through the RWHAP.

It is also expected that RWHAP grantees collect and maintain documentation verifying client eligibility for Medicaid or a certificate of exemption from the Marketplace or IRS. See *Policy Clarification Notice #13-02: Clarifications on Ryan White Program Client Eligibility Determinations and Recertifications Requirement* (<http://hab.hrsa.gov/manageyourgrant/pinspals/pcn1302clienteligibility.pdf>).

Clients Currently Enrolled in a Private Health Insurance Plan

⁴ To meet the individual responsibility requirement under the Affordable Care Act individuals will need coverage such as individual market policies, job-based coverage, Medicare, Medicaid, CHIP, TRICARE or certain other coverage. See HealthCare.gov, What if someone doesn't have health insurance?, <https://www.healthcare.gov/what-if-someone-doesnt-have-health-coverage-in-2014>. See also Internal Revenue Service, Questions and Answers on the Individual Shared Responsibility payment Question #5, <http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>.

⁵ Starting January 1, 2014, if someone doesn't have a health plan that qualifies as minimum essential coverage, he or she may have to pay a fee that increases every year: from 1% of income (or \$95 per adult, whichever is higher) in 2014 to 2.5% of income (or \$695 per adult) in 2016. The fee for children is half the adult amount. The fee is paid on the 2014 federal income tax form, which is completed in 2015. See HealthCare.gov, What if someone doesn't have health insurance?, <https://www.healthcare.gov/what-if-someone-doesnt-have-health-coverage-in-2014>.

⁶ Individuals may be exempt from paying the fee for failing to enroll in minimum essential coverage if they (1) are members of a religious sect that is recognized as conscientiously opposed to accepting any insurance benefits and adhere to the tenets of that sect; (2) are members of a recognized health care sharing ministry; (3) are members of a federally recognized Indian tribe; (4) have household income below the minimum threshold for filing a tax return; (5) only went without the required coverage for a short coverage gap of less than three consecutive months during the year; (6) were certified by a Health Insurance Marketplace as having suffered a hardship that makes them unable to obtain coverage; (7) cannot afford coverage because the minimum amount the individual must pay for premiums is more than eight percent of the individual's household income; (8) are in jail, prison or similar penal institution or correctional facility after the disposition of charges; and (9) are not U.S. citizens, U.S. nationals, or aliens lawfully present in the U.S. See IRS, Questions on Individual Shared Responsibility Provision Question #6, <http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>.

By law, RWHAP funds may be used to help individuals purchase and maintain health care coverage. Some RWHAP grantees may be currently paying for private health insurance for clients who were determined ineligible for Medicaid in the past. Many of these individuals may become “newly eligible” for Medicaid in states that choose to expand coverage under the Affordable Care Act. Grantees and subgrantees must ensure that they are maximizing RWHAP resources by enrolling clients in a health care coverage option that is more cost-effective than paying the full cost for medications and other essential medical services. RWHAP funds, including AIDS Drug Assistance Program (ADAP) funds, may only be used to continue to pay for private health insurance for Medicaid-eligible clients if it is more cost-effective to do so and in accordance with RWHAP policy. *See Policy Clarification Notice #13-05: Use of Ryan White HIV/AIDS Program Funds for Premium and Cost-Sharing Assistance for Private Health Insurance* (<http://hab.hrsa.gov/manageyourgrant/pinspals/pcn1305premiumcostsharing.pdf>).

Coverage of Services by the Ryan White HIV/AIDS Program

Once an individual is enrolled in Medicaid, RWHAP funds may be used to pay for any medically necessary services which Medicaid does not cover or only partially covers, as well as premiums, co-pays, and deductibles if required. RWHAP funds will continue to cover other core medical services such as adult dental, vision, or enhanced adherence and prevention counseling services as part of primary care if those services are not covered or are partially covered under Medicaid, even when those services are provided at the same visit as Medicaid-covered services.

Effective Date of Coverage

Medicaid coverage may start retroactively for up to 3 months prior to the month of application, if the individual would have been eligible during the retroactive period had he or she applied then.⁷ RWHAP services received between the retroactive date of coverage and the date the client is enrolled in Medicaid will need to be back-billed and reimbursed to the RWHAP.

⁷ See <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Eligibility/Eligibility.html>.