



Updates for Ryan White HIV/AIDS Program Grantees: Policy Clarification Notices and the Affordable Care Act

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HIV/AIDS Bureau

Health Resources and Services Administration

U.S. Department of Health and Human Services



Webcast Presenters



- Sylvia Trent-Adams - Welcome
- Antigone Dempsey – PCN Updates
- Yolonda Campbell – CMS Final Rule, Coverage to Care
- Kim Brown – Affordable Care Enrollment (ACE) Center
- Antigone Dempsey – ACA cooperative agreement
- Sylvia Trent-Adams – Q & A



Webcast Objectives



- Provide updates regarding HIV/AIDS Bureau (HAB) Policy Clarification Notices (PCNs) 14-01, 13-05 and 13-06
- Share information about the Centers for Medicare & Medicaid Services' (CMS) Final Rule for the Exchange/Insurance Market Standards for 2015 and Beyond
- Discuss CMS' Coverage to Care
- Provide updates about HAB's Affordable Care Act (ACA) Technical Assistance Projects
- Conduct a brief Q & A session



Updates to Policy Clarification Notices (PCNs)

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Update on PCNs



New Policy Clarification Notice (PCN) 14-01 on reconciliation of Advance Premium Tax Credits

- **On June 6th, HRSA released PCN 14-01**, which clarifies HRSA policy regarding the use of Ryan White HIV/AIDS Program (RWHAP) funds to purchase health insurance for clients in the Marketplace and the reconciliation of advance premium tax credits
- **RWHAP grantees and sub-grantees must vigorously pursue** any excess premium tax credit a client receives from the Internal Revenue Service (IRS) upon submission of the client's tax return
 - Collect excess premium tax credit attributed to individual client



Update on PCNs



PCN 14-01, continued

- HRSA is considering allowing RWHAP grantees and sub-grantees to use RWHAP funds to pay the IRS any additional income tax liability a client may owe to the IRS solely based on reconciliation of the premium tax credit
- **HRSA is seeking comments from the public** regarding this proposed policy in a Federal Register Notice; comments are accepted through August 13, 2014 by [email to RyanWhiteComments@hrsa.gov](mailto:RyanWhiteComments@hrsa.gov)
- View the notice at <http://www.gpo.gov/fdsys/pkg/FR-2014-07-14/pdf/2014-16406.pdf>

Revised Policy Clarification Notice (PCN) 13-05 on formulary equivalency

- On June 6th, HRSA released a revised PCN 13-05 that changes the formulary requirement that it, at a minimum, **includes at least one drug in each class of core antiretroviral therapeutics** from the HHS Clinical Guidelines for the Treatment of HIV/AIDS as well as appropriate primary care services
- Please note that grantees still need to do a cost-effectiveness analysis
- <http://hab.hrsa.gov/manageyourgrant/pinspals/pcn1305premiumcostsharing.pdf>



Revised Policy Clarification Notice (PCN) 13-06 on Formulary Equivalency

- Revised PCN 13-06 clarifies that when RWHAP Part A planning bodies, Part B, Part C, and Part D grantees provide funding for *Medicaid* premium and cost-sharing assistance for low-income individuals, **the grantee must also assure that they are buying health insurance that, at a minimum, includes at least one drug in each class of core antiretroviral therapeutics**
- <http://hab.hrsa.gov/manageyourgrant/pinspals/pcn1306medicaidpremiumcostsharing.pdf>





CMS Final Rule for Exchange/Insurance Market Standards for 2015 and Beyond

Yolonda Campbell

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Final Rule for Exchange/Insurance Market Standards for 2015 and Beyond

- On May 16, the Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), issued the final rule for *Exchange/Insurance Market Standards for 2015 and Beyond*. The rule promotes affordability, transparency and takes the first step toward providing additional quality related tools for consumers shopping in the Health Insurance Marketplace



CMS Final Rule



This rule will help to improve consumer protections, keep premiums affordable, and make additional information available to consumers in the future

Provisions of the rule most relevant to RWHAP include:

- Strengthening of the prescription drugs exceptions process, so consumers with an urgent medical issue have quicker access to needed drugs that aren't already covered by their plan
- Clarification of standards for Navigators and other consumer assisters



CMS Final Rule



The rule finalizes policies to (continued):

- Collect information from issuers to generate quality rating scores for plans on the Marketplace beginning in 2016
- Provide flexibility to states to ensure the Small Business Health Options Program (SHOP) works in the best interest of consumers in 2015
- Strengthen standards for Navigators and other consumer assisters
- Improve premium stabilization policies for 2015



Highlight: 24 Hour Expedited Review of Formulary Requests



- Qualified Health Plans (QHPs) must have an expedited exceptions process for beneficiaries with exigent circumstances to seek a medication not covered under a plan
 - Exigent circumstances exist when an enrollee is suffering from a health condition that may seriously jeopardize the enrollee's life, health, or ability to regain maximum function or **when an enrollee is undergoing a current course of treatment using a non-formulary drug**
- QHPs must decide **within 24 hours** of receiving the request
- QHPs must provide coverage of any drug obtained through this expedited exceptions process **for the duration of the exigency**



Highlight: Consumer Assistance



- “...in specific circumstances, certified application counselor (CAC) designated organizations can serve target populations without violating the broad non-discrimination requirement related to Exchange functions.”
- RWHAP providers may offer CAC services exclusively to their client populations (e.g., enrollment assistance, post-enrollment assistance, outreach and education about getting covered), so long as they do not discriminate based on race, color, national origin, disability, age, sex or other prohibited factors



CMS Final Rule



- To access the full copy of the final rule:

<http://www.gpo.gov/fdsys/pkg/FR-2014-05-27/pdf/2014-11657.pdf>

- CMS' fact sheet on the final rule:

<http://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/marketstandards-5-16-2014.html>



CMS Letters to Territories



- On July 16, 2014, CMS issued letters to the U.S. territories: American Samoa, Puerto Rico, Virgin Islands, Guam and Northern Mariana Islands
- Definition of "state" should follow the definition used in the Affordable Care Act (ACA), which does not include the territories
- This means that the following ACA requirements will not apply to individual or group health insurance issuers in the U.S. territories: guaranteed availability, community rating, single risk pool, rate review, medical loss ratio, and essential health benefits



From Coverage to Care



What is *From Coverage to Care (C2C)*?

- <http://marketplace.cms.gov/help-us/c2c.html>
- C2C is an effort to help educate the newly insured about their coverage and to connect them with primary care and preventive services so they can live long, healthy lives
- Builds on existing networks of community partners to educate and empower the newly insured
- Resources include the Roadmap, Discussion Guide, videos, and more

Your ROADMAP to health

1 Start here

Put your health first.

- Staying healthy is important for you and your family.
- Get a regular check-up.
- Keep all of your health information in one place.

2

Understand your insurance plan.

- Check with your insurance plan to see what services are covered by your plan.
- Be familiar with your copayments, deductibles, and coinsurance.
- Know the difference between in-network and out-of-network.

3

Find a provider.

- Ask people you trust.
- Check your plan's provider network.
- If you are assigned a provider, contact your plan if you want to change.
- Do research on the internet.

4

Make an appointment.

- Mention that you are a new patient.
- Provide the name of your insurance plan.
- Tell them the name of the provider you want to see and why you want an appointment.
- Ask for days or times that work for you.

5

Be prepared for the first visit.

- Have your insurance card with you.
- Make a list of any medicines you are currently taking.
- Bring a list of questions and things to discuss with the provider and write notes during your visit.
- Bring someone with you to help if you need.

6

Decide if you like the provider.

- You should feel comfortable with who you see.
- You should understand and be able to communicate with your provider.
- Remember: It is okay to change to a different provider!

7

Next steps after your appointment.

- Follow your provider's instructions.
- Fill any prescriptions you were given.
- Schedule a follow-up visit if necessary.
- Contact your insurance plan or provider with any questions.



How to Use the Roadmap



- **Start the Conversation.** Use the Roadmap and Discussion Guide as a tool to help newly insured understand insurance and understand the importance of getting the right preventive services
- **Help Consumers Understand.** The Roadmap has a lot of information for consumers. You can help them use it as a resource to refer back to as they journey to better health and well-being
- **Personalize it.** You know your community. Consider adding local resources and information



ACA Technical Assistance



- Supporting the Continuum of Care: Building Ryan White Program Grantee Capacity to Enroll Eligible Clients in ACA Health Coverage Programs
- Engaging in Marketplace Insurance Plans under the Affordable Care Act
- Establishing AIDS Service Organization (ASO) Service Models



Affordable Care Enrollment (ACE) TA Center

Supporting Ryan White HIV/AIDS Program grantees,
providers, and people living with HIV

Kim Brown

Division of State HIV/AIDS Programs

HIV/AIDS Bureau



Who Could Use These Tools?



- Designed for:
 - Program managers, case managers and other staff that conduct outreach, benefits counseling and enrollment activities
 - Grantee staff that support these programs
- Grantees: Please share these resources with your subgrantee providers!



New Enrollment Tools from the ACE TA Center



- **Resources, Tips, and Tools for Enrolling RWHAP Clients in Coverage:** for each step of the enrollment process, including AIDS Drug Assistance Program (ADAP) enrollment links and a plan selection worksheet
- **Eligibility Decision Tree:** a tool to help assess client eligibility for Marketplace insurance and Medicaid
- **Topics to Consider When Helping People Living with HIV to Enroll in Health Care Coverage:** specific enrollment concerns for PLWH
- **Common Questions and Suggested Responses for Engaging Clients in Health Coverage:** sample language for talking with clients about enrollment
- **Plain Language Quick Reference Guide for Health Care Enrollment:** glossary of health insurance terms



Introducing New Tools/Resources to Enroll Clients in Health Care Coverage



- *July 10 from 3:00-4:00 PM (ET) In this webinar, the **ACE TA Center** introduced a collection of practical tools and resources to support culturally competent enrollment of Ryan White clients in health insurance. **ARCHIVED***
- *July 17, 3-4 PM (ET) **Ready for the next open enrollment period?** A new Online Resource Guide to help enroll people living with HIV in health insurance **ARCHIVED***
- **July 24, 3-4 PM (ET) Are we speaking the same language?** Tools to assist with complicated conversations about enrolling in health insurance.
- **July 31, 3-4 PM (ET) Trouble keeping track of your clients in the enrollment process?** A worksheet to assist them through every step



- Find the tools and learn about training webinars: targethiv.org/ace
- Subscribe to the ACE TA Center eNews list for updates: <http://eepurl.com/JPUVj>
- *The ACE TA Center helps RWHAP grantees and providers enroll diverse clients, especially people of color, in health insurance, and builds providers' cultural competence*



National Training and Technical Assistance Program

Contracting with Medicaid and Marketplace Insurance Plans

Antigone Dempsey

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Goals



- Provide technical assistance for RWHAP core medical providers on contracting with Medicaid, Managed Care Organizations and/or Qualified Health Plans
- Increase capacity of RWHAP core medical providers to establish and/or expand third-party billing
- Increase capacity of RWHAP core medical providers to facilitate client enrollment in Qualified Health Plans



Core Training & Technical Assistance



Target Focus:

- Ryan White HIV/AIDS Program Core Medical Provider Support
- Web-based Tools and Products
- Webinars
- Email Updates
- TARGET Center Content
- Special Sessions at National Conferences and Meetings



Enhanced Training & Technical Assistance



Target Focus:

- Individualized Core Medical Provider Support

- Enhanced Expert and Individualized Training & Technical Assistance
- Enhanced Peer-to-Peer Individualized Training & Technical Assistance



Specialized Training & Technical Assistance



Target Focus:

- Cluster for RWHAP Grantees, Medical Providers, and Project Officers
- Learning Communities
- Coordination with other HAB-funded ACA Training & Technical Assistance Partners
- HAB-Specific Staff Training



National AIDS Service Organization Training Center



Goals



- Improve the capacity of ASOs to adopt service models that more effectively engage vulnerable populations in health care to improve client outcomes on the HIV Care Continuum
- Establish formal business agreements with core medical providers
- Increase the number of clients successfully enrolled in Qualified Health Plans



Strategies Include:



- Webinar Trainings
- Virtual Panel Discussions
- Peer Coaching Teleconferences
- Online Toolkit
- Individualized Technical Assistance
- Reverse Site Visits
- Live Training Events at National Conferences or Meetings



Q & A



To ask a question, please dial:
0000 and give the password
“0000”

Please dial *1 to enter the question queue.

Please mute your speakers
when asking a question.

For questions related to RWHAP and the ACA, please email: RyanWhiteACA@hrsa.gov



Affordable Care Act and Ryan White Program Resources



Healthcare.gov: <https://www.healthcare.gov/>

Assister Resources: <http://marketplace.cms.gov/>

HIV/AIDS Bureau Affordable Care Act and Ryan White Resources:
<http://hab.hrsa.gov/affordablecareact/>

Target Center Affordable Care Act Resources:
<https://careacttarget.org/library/affordable-care-act-ryan-white-hivaids-program>