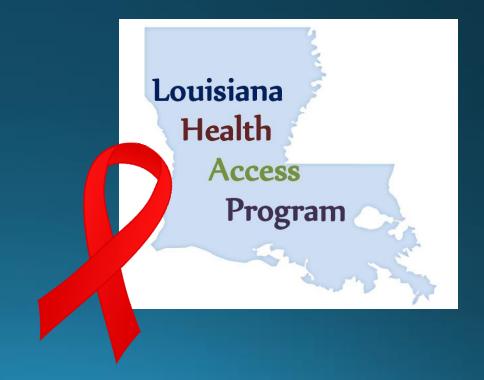
# Welcome to LA HAP!



### This webinar will cover...

- The background and structure of LA HAP
- What LA HAP does and does not cover for particular client populations
- Tips for using LA HAP coverage
- Tips for completing LA HAP application

# Background/Structure

### What is LA HAP?

#### -The LOUISIANA HEALTH ACCESS PROGRAM

- The AIDS Drug Assistance Program (ADAP) is a federal Ryan White funding source awarded to every state by the Health Resources and Services Administration (HRSA).
  - ▶The Louisiana STD/HIV Program (SHP) receives ADAP funding from HRSA.
- ADAP funds can be used to provide medication and insurance services to eligible individuals with a positive HIV diagnosis.
  - SHP uses ADAP funding to support medication and insurance services through our programs called L-DAP and HIP— collectively known as LA HAP.

### Louisiana Health Access Program (LA HAP)

- Process L-DAP & HIP enrollment through single application
- Available to applicants up to 500% FPIG with LA residency and HIV diagnosis who are not eligible for full Medicaid

- Aged 19-64
- Meet U.S. citizenship requirements
  - Income 0-138% FPIG

### Louisiana Drug Assistance Program (L-DAP)

- •Full drug costs for uninsured clients
- •Drug cost shares for insured clients

Managed through



#### <u>Louisiana Health Insurance</u> <u>Program (HIP)</u>

- Insurance premiums: medical, dental& vision plans for insured clients
- Non-drug cost shares for insured clients

Managed through



# Some changes over the years

- We rebrand: "ADAP" becomes "LA HAP"
- We centralize our enrollment process
  - Previously: insured clients apply through separate HIP application
  - Now: Single application, staff at SHP office
- We contract with a Pharmacy Benefits Manager: Ramsell
  - New, larger pharmacy networks
  - Electronic medication claims processing
  - Ability to enter & track client eligibility data through centralized database
- We enter a new era for insurance coverage
  - The Patient Protection and Affordable Care Act
  - Medicaid Expansion

# Coverage

### What does HIP cover?

- Insurance premiums
  - Medical
  - Dental
  - Vision
  - Prescription drug

- Insurance cost-shares
  - Co-pays
  - Coinsurance
  - Deductibles
  - Durable Medical Equipment (capped at \$5000 per year per client)
  - Medical supplies (i.e. diabetic supplies)

- Excluded:
  - any costs associated with an inpatient hospital stay
  - Any service/product not covered by primary insurer

### What does L-DAP cover?

- Uninsured clients
  - Full cost of medications on <u>LA</u> <u>HAP uninsured</u> <u>formulary</u>

- Insured clients
  - Medication cost-shares for all prescription drugs on primary insurer's formulary

- Excluded for uninsured:
  - Any medications not on formulary, including all non-HIV/HCV medications

- Excluded for insured:
  - Erectile dysfunction drugs
  - Nutrition supplements
  - OTC drugs
  - Cosmetic drugs

### Medicare

- Offered to most
   Americans when they
   turn 65
- Offered to disabled
   Americans (Parts A and B)
   after receiving disability
   benefits from Social
   Security for 24 months
- If you turn it down, you can take advantage of an annual open enrollment period later. But, you will have to pay a penalty

"Original" Medicare

Part A: hospital insurance

Part B: medical insurance

Part D: prescription drug coverage

Part C: privatelyadministered plan combining Parts A, B, and usually D



## LA HAP & Medicare (1)

LA HAP Coverage area	Medicare Only / Partial Dual Eligible	Full Dual Eligible	
Part A premiums/cost-shares	Not covered		
Part B premiums	Covered	Not covered	
Part B cost-shares	Covered	Not covered	
Part C premiums	Covered		
Part C cost-shares	Covered	Not covered	
Part D premiums/cost-shares	Covered	Not covered	
Medicare Supplement premiums/cost-shares	Covered	Not covered	
LA HAP/Guardian Dental Plan	Covered		

LA HAP CANNOT pay for late enrollment penalties associated with Parts B or D plans.

# LA HAP & Medicare (2)

- All Medicare applicants with income <150% FPL should apply for Low Income Subsidy (LIS) at regular intervals
  - Exception: dual eligible clients automatically receive LIS
- Apply at https://www.ssa.gov/medicare/prescriptionhelp/
- If receiving LIS:
  - LA HAP may contact you for documentation if we are unable to verify LIS status with Medicare
- If not receiving LIS:
  - Attach printout of LIS online application submission page dated within current calendar year, OR
  - Attach printout of LIS denial letter dated within the last 12 months

### LA HAP & Medicaid

- No LA HAP services available for full Medicaid recipients
  - Exception: HIV/HCV co-infected applicants may apply for assistance with HCV medications ONLY
- Applicants presumed eligible for Medicaid based on reported age and income are ineligible for LA HAP
  - Exception: applicant has applied for/been denied Medicaid coverage within the past 6 months
  - Denial letter must be attached to LA HAP application
- Some services available for partial Medicaid recipients
  - Examples: dual Medicare/Medicaid recipients, applicants within the Corrections system

### LA HAP & Employer-based plans

- Can cover premiums and cost-shares for employerbased plans
- HIP will reach out to employer to explain program and receive permission to pay premiums on behalf of client
  - No medical information will be disclosed
  - HIP can only pay client portion of premium

# The application

## How to apply

- An applicant may work with a case manager at a communitybased organization or clinic, or
- Complete the application themselves
- www.lahap.org

Per HRSA, recertification must be completed every 12 months.

- Eligibility ends 12 months after application approval date <u>at the end of that month</u>
  - Example: A client enrolls and is approved May 16<sup>th</sup>. They must recertify 12 months later (May) by the end of the month (30<sup>th</sup>)

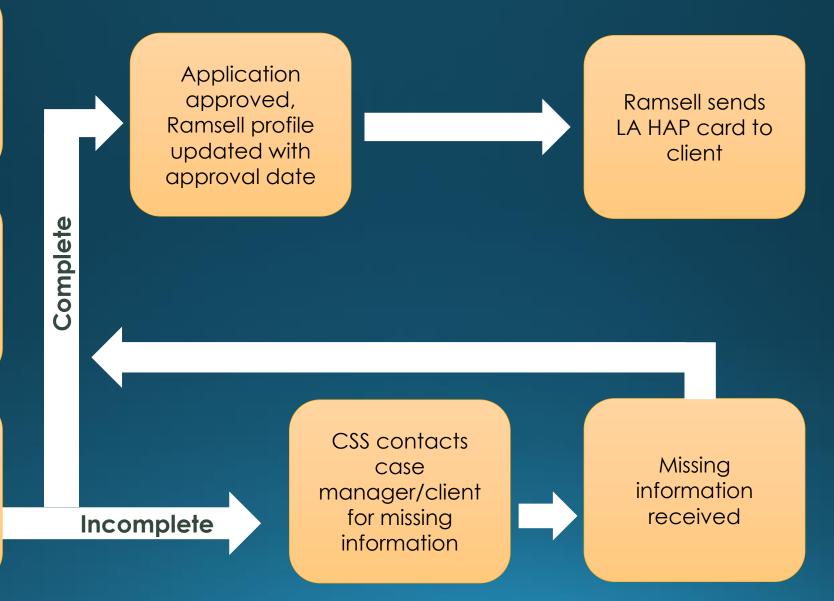
Approved May 16<sup>th</sup> 2022  $\rightarrow$  Recertify by May 31<sup>st</sup> 2023  $\rightarrow$  Recertify by May 31<sup>st</sup> 2024  $\rightarrow$  etc.

# The process

LA HAP sends recertification packets to clients whose eligibility is due to expire

Application received at SHP, entered into Ramsell profile, placed in line for review

Client Services
Specialist reviews
applications by
eligibility end
date; then by
date received



### Which forms do I fill out when I apply/recertify?

- $\rightarrow$ If your insurance status isn't changing, fill out the LA HAP application only.
- →If you **do not have insurance but are about to enroll in an insurance plan**, fill out the <u>LA HAP application</u> for uninsured services **and** the <u>Insurance</u> <u>Add/ Change form</u> for your new insurance plan.
- →If you have insurance but are about to enroll in a different insurance plan, fill out the LA HAP application for your existing insurance plan and the Insurance Add/Change form for your new insurance plan.

See <u>www.lahap.org</u> -> "Apply for LA HAP" for more information on which forms to submit when.

#### Form(s) to submit to LA HAP when a client enrolls in, loses, or changes their insurance

past LA HAP Plan End Date, a LA HAP Plan End Date within 6 Step 1: Log into the Ramsell system and check to see if the client is New: , OR if the client's LA HAP Plan Enrollment has a weeks, or a future LA HAP Plan End Date If you do not have Ramsell access, submit the Ramsell User Request and Confidentiality Form to request access. Step 2: Confirm with the client if they are/have currently insured, currently uninsured, or lost insurance and choosing to remain uninsured. Step 3: Complete and submit the appropriate form(s) based on the decision tree below. All forms are available on lahap.org under "Forms and Applications." Currently insured and staying in the LA HAP **Application** to request assistance for Past LA HAP Plan End Date same insurance plan same insurance policy LA HAP **Application** to request assistance for <u>existing</u> insurance policy<sup>1</sup> 6 weeks Currently insured and AND changing insurance plans expired/about to expire) LA HAP Insurance Add or Change Form to request assistance for new and/or requested assistance insurance policy OR New client LA HAP Application to request assistance for uninsured medication services<sup>2</sup> Currently uninsured and AND enrolling in an insurance plan LA HAP **Insurance Add or Change Form** to request assistance for future insurance policy LA HAP Plan LA HAP Application to request assistance for uninsured medication Enrollment services. LA HAP application must include a detailed explanation Lost insurance and choosing to providing the reason insurance was lost, the insurance remain uninsured coverage termination/cancellation letter, or the creditable coverage statement stating coverage end date. Currently insured and LA HAP Insurance Add or Change Form to changing insurance plans request assistance for new insurance policy and/or requested assistance Future LA HAP Plan End Date Currently uninsured and LA HAP Insurance Add or Change Form to request enrolling in an insurance plan assistance for future insurance policy Lost insurance and choosing to LA HAP **Information Change Form** to request assistance for remain uninsured uninsured medication services.

<sup>&</sup>lt;sup>1</sup> LA HAP application is completed to request assistance for the existing insurance policy which will be needed until the new insurance policy is active.

Questions? Call us at 504-568-7474 or email info@lahap.org.

<sup>&</sup>lt;sup>2</sup> LA HAP application is completed to request assistance for uninsured medication services which will be needed until the future insurance policy is active.

## Required documentation

- Attach to application:
  - For all applicants: proof of income for all sources
  - For all applicants: proof of Louisiana residence for client
  - For non-dual eligible Medicare beneficiaries: Proof of LIS status or LIS application
  - For applicants requesting premium assistance for first time on a new plan: Copy of premium invoice
  - For applicants continually requesting premium assistance: annual submission of updated premium invoice for the current calendar year

More detailed information found on <a href="www.lahap.org">www.lahap.org</a> under "Apply for LA HAP"

### Proof of income

# Attach one of the following for each source of income your household has:

- Pay stub from the last 6 months (2 preferred)
- A signed legal affidavit from the last 6 months
- The LA HAP Certification of No Income/Cash Only Income
   Form from the last 6 months
- Benefit award letter from the current award year (SSDI, etc.)
- Benefit check from current award year
- Tax document from most recent available year

# Are you requesting premium help for the first time on a new plan?

- Include an invoice from the insurance company.
- If LA HAP is already paying your premiums, you do not need to include an invoice if the amount hasn't changed.
- Premium invoices for the current calendar year should be submitted at the beginning of each year

### Submitting the application

#### Fax:

504-568-3157

#### Online:

www.lahapenroll.com www.lahap.org/apply

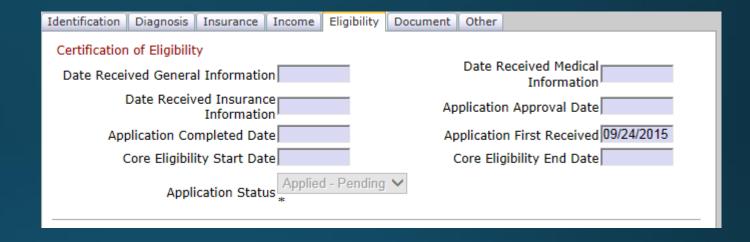
#### Mail/drop-off:

LA HAP 1450 Poydras St, Suite 2136 New Orleans, LA 70112 No applications accepted by email.

# Tracking the application

When the application is received, LA HAP staff updates the client's Ramsell profile.

- Only caseworkers have access to the Ramsell Member Profile
- Don't have access? Return the <u>Ramsell User Request form</u> to <u>Idap@lahap.gov</u>
- Clients can call LA HAP at 504-568-7474 to verify that an application was received



 Clients who submit their applications online can monitor application status via client online portal at www.lahapenroll.com

### Incomplete applications

#### LA HAP staff:

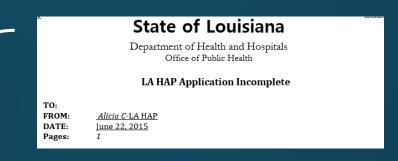
- Will call client/case manager if the problem can be solved over the phone
- Sends "Application Incomplete" fax to case manager or letter to client if issue – can't be resolved on phone
- Updates "Other" tab of client's Ramsell profile to document application status

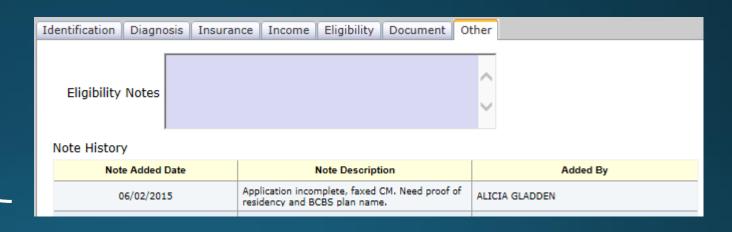
#### 2) Client/Case manager:

- Tracks down missing information
- Returns to LA HAP: missing information +
   "Application Incomplete" fax sent by
   LA HAP staff as reference

#### 3) LA HAP staff:

- Confirms follow-up information was received in "Other" tab; files for processing
- Application will be reviewed again by LA HAP staff





06/16/2015 Follow-up fax appropriate I	received. To be given to A HAP Staff.	LATRICE TULENSA
--	--	-----------------

# Important application tips (1)

- To the extent possible, assist your clients with the application process— not the other way around
  - LA HAP fields complaints from clients who were unaware which insurance plan they were placed into, which paperwork has been submitted on their behalf, etc.
- If your client wishes you to have access to their LA HAP information:
  - Make sure your name and agency are entered into Section 15 of the LA HAP application

SECTION 15: PROVIDER INFORMATION				
<ol> <li>Do you have one or more providers or records?</li> </ol>	case managers who you want to have access to	your LA HAP	Yes No	
2. Provider 1 First and Last Name	3. Provider 1 Entity/Agency Name	4. Provider 1 Phone	Number and Extension	
5. Provider 2 First and Last Name	6. Provider 2 Entity/Agency Name	7. Provider 2 Phone	Number and Extension	

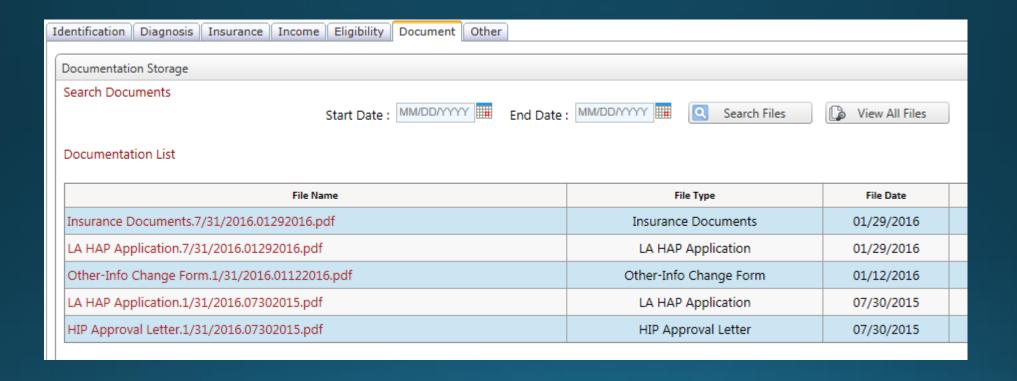
# Important application tips (2)

- Report any information change to LA HAP, especially:
  - Address change
    - Information Change Form
  - Loss of insurance coverage
    - Information Change Form
  - Gain of insurance coverage
    - Insurance Add/Change Form
  - Change in insurance premium amount (example: Medicare Part D premiums change at the beginning of each calendar year)
    - Send updated invoice to HIP

### Additional Forms

Certification of No Income/Cash-Only Income	Certify that a client has either ZERO income or CASH income; cannot be used to certify any other form of income
Disenrollment	Disenroll a client from LA HAP
Insurance Add/Change	Add or change an insurance plan, or to add or change types of insurance assistance, to your LA HAP coverage
Information Change	Inform LA HAP of loss of insurance coverage, change of address, change of name, etc.
Proof of Positivity	Verify proof of positivity; this is especially useful for clients who are newly diagnosed or who have moved to Louisiana from another state
Release of Information	Grant permission to an agency to access and release client information to/from LA HAP; form MUST be initiated and signed by client

# Interpreting the Ramsell UI (1)



Tabs under each client profile allow you to view information about client and access submitted documents

# Interpreting the Ramsell UI (2)

- Updated manually by LA HAP staff based on information provided by case managers/clients
- Do not use information in Ramsell UI to complete an application



Primary Insurance Name	BCBS Blue Max 100/100 \$4000		
Plan ID		Insurance ID	
Policy	Individual 💙	Group	
Start Date	01/01/2016	End Date 12/31/2016	
Premium Payments			
Monthly Premium		Frequency Monthly V	
Note			0
Primary Insurance Name	AlwaysCare ONEplus Preferred	Plan + Vision	
Plan ID		Insurance ID	
Policy	Individual V	Group	
Start Date	01/01/2016	End Date 01/01/2017	
Premium Payments			
Monthly Premium		Frequency Monthly V	

# Using coverage

# Using LA HAP benefits (1)

- Uninsured: medication-only
  - Make sure pharmacy is in the LA HAP/Ramsell network for uninsured clients
  - Present LA HAP Card at pharmacy
    - LA HAP is billed electronically
    - No further action required by client

#### LA HAP Enrollment Card

Louisiana Health Access Program

Member Name: JOHN DOE Identification No: 12345678900

#### SAMPLE

#### Approved Services

Vision Premiums
Vision Copays Deductibles
Health Premiums
Health Copays Deductibles
Drug Copays Deductibles
Dental Premiums
Dental Copays Deductibles

Card Expiration Date: MM/DD/YYYY

Notice to Patient: Please carry this card with you and present it when receiving any

services that are covered by LA HAP.

Rx BIN: 004519

Rx PCN: LA01AP

Group No: 12345

Notice to Providers: Approval is based on member eligibility at the time of service.

Health/Dental/Vision Calls: 1-225-424-1799 Monday - Friday: 8:00am - 4:30pm CST

Pharmacy Calls: 1-888-311-7632 Fax: 1-800-848-4241

Calls for questions regarding manual claims or prior authorization processing

Monday - Friday: 7:00am - 9:00pm CST, Saturday: 10:00am - 7:00pm CST

Member Eligibility Calls: 1-504-568-7474 Monday - Friday: 8:00am - 5:00pm CST

Submit Health/Vision/Dental secondary claims and Explanation of Benefits (EOB) to:

Health Insurance Program

PO Box 66913

Baton Rouge, LA 70896

Fax: 1-225-927-1267 or 1-225-927-2462

# Using LA HAP benefits (2)

- Insured (co-pays, coinsurance, deductible, and/or premium assistance):
  - **Premiums:** If client requests premium assistance and provides correct information, HIP will pay premiums regularly.
  - Medical services: Insurance company (including Medicare) is always the first payer.
     Provider or client must then bill HIP for cost-shares/deductible.



2) Bill + Explanation of Benefits  $\rightarrow$  HIP

Pharmacy services: Insurance company (including Medicare) is always the first payer.
 Client should then use LA HAP card for cost-shares so pharmacy can bill LA HAP electronically.



LA HAP
Enrollment Card

Member Name: JOHN DOE
Identification No: 12345678900

SAMPLE

Rx BIN: 004519
Rx PCN: LA01AP
Group No: 12345
Card Expiration Date: MM/DD/YYYY

Card Expiration Date: MM/DD/YYYY

# Important tips for using benefits

- Clients must use a <u>LA HAP network pharmacy</u> when accessing medications
  - Network for uninsured clients is a smaller subset of the network for insured clients
- HIP has no specified provider network
   – clients should
   make sure their provider is familiar with HIP and will agree
   to bill HIP before attending an appointment
  - Provider may send bill to HIP directly, or may send to client in order to forward to HIP
- HIP cannot reimburse clients directly for any healthcarerelated costs, even for services/time periods when client was eligible

# Communicating with LA HAP

If you have questions about	Contact
General LA HAP policies	lahap@la.gov; 504-568-7474
Specific applications	The Client Services Specialist assigned to the application at their direct line, or 504-568-7474
Claims status, payments or billing	HIP at 225-424-1799
Insurance status	Insurance company
Technical difficulties/lockouts with Ramsell	Ramsell HelpDesk at 1-888-311-7632

Never send client-identifying information or application by email.

See <a href="https://www.lahap.org/contact">www.lahap.org/contact</a> for staff extensions.

## LA HAP/HIP leadership

- Erika Sugimori, Services Manager
- Erin Jensen, Health Insurance Program Coordinator
- Tranisha Walker, Client Service Specialist Supervisor
- Matt Pham, HIP Director (HAART)
- Gale Toussant- Customer Affairs Coordinator (HAART)

## Thank you, thank you, thank you!

Louisiana case managers help thousands of clients access their medication and other services every month. Your work is EXTREMELY critical and valuable!

When things get stressful, please know that you are APPRECIATED beyond measure by your coworkers, clients, and partners in the field.

