



California Department of Public Health



Office of AIDS

ADAP Update for Stakeholders

June 27, 2018, Notice #64

Contact Information

ADAP Call Center

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Pool Administrators Inc. (PAI)

Open 8 a.m. to 5 p.m. Monday through Friday.

Toll-Free Phone: (877) 495-0990

Updates

The California Department of Public Health (CDPH) is committed to providing excellent customer service to its ADAP clients. Thank you for all of your hard work ensuring clients receive their life-saving medication.

Employer Based Health Insurance Premium Payment (EB-HIPP) Program

The Office of AIDS (OA) scheduled two additional EB-HIPP trainings on June 26 for enrollment workers who were unable to attend the first three sessions.

On June 15, all enrollment workers received Management Memorandum 2018-23: Employer Based Health Insurance Premium Payment (EB-HIPP) Program Client Letter. The document informed enrollment workers that on June 18, CDPH mailed letters to clients explaining the new EB-HIPP

Program. A copy of the client letter, outlining program and documentation requirements and providing instructions on how to enroll in the EB-HIPP Program, was attached to the memorandum.

The EB-HIPP Program Participation Agreement Form has been updated. Enrollment workers have been provided with a copy of the updated form and a link to the form in the Enrollment Worker SharePoint site.

Expansion of the Medicare Part D Premium Payment (MDPP) Program

On June 8, all enrollment workers received Management Memorandum 2018-22: Implementation of Medigap Premium Payments and Medical Out-of-Pocket (MOOP) Benefits for the Medicare Part D Premium Payment (MDPP) Program, informing them that effective June 14, 2018, the MDPP Program benefits have expanded to include payment of Medigap premiums and outpatient MOOP claims.

To be eligible for these benefits, the client must have:

- Active ADAP enrollment.
- Active MDPP Program eligibility (if a client is deemed 100% Low Income Subsidy (LIS) they are no longer eligible).
- Active Medigap plan, if applying for Medigap premium assistance.

Once a client has enrolled in the MDPP Program, they are automatically eligible to submit MOOP claims. Reimbursements will be made to the medical provider and all MDPP clients will receive an identification (ID) card from Pool Administrators, Inc (PAI), our medical benefits manager, outlining the MOOP process.

For a MDPP Program MOOP claim to be successfully paid the:

- Date of Service must be on or after June 1, 2018, and must be within MDPP Program and Part D Plan Start and End Dates.
- Claim Type must be for an outpatient service, and must count towards the client's out-of-pocket maximum.
- Billing Requirements: CDPH must not be the primary payer; the client's primary insurance must be billed first.

A training was provided to enrollment workers on June 12.

ADAP Enrollment System (AES) Update

On June 14, the following functionalities were available in the AES:

- The Medicare Part D Premium Payment (MDPP) Program expanded benefits to include the following:
 - MDPP Clients with a Medigap plan can receive premium payment assistance.
 - All MDPP clients will be able to submit outpatient service Medical Out-of-Pocket (MOOP) claims for reimbursement.

- Sexual orientation field has been added to the Demographics Tab (Assembly Bill No. 959).

Attached to the email was the “Navigating AES for EW Release 15” and “MDPP: Medigap & MOOPs for EWs” job aids. Enrollment workers were also provided with links to the job aids in the Enrollment Worker SharePoint site.

Enrollment Site Payments

Enrollment site payments for enrollment services rendered during the third quarter—January 1, 2018 through March 31, 2018—have been processed. Enrollment sites began receiving payment the third week of June. Payments were made using the existing reimbursement rate. As enrollment sites continue to sign and return contract amendments with updated reimbursement rates, ADAP will begin paying sites with an executed contract amendment at the new, higher, reimbursement rate. This will occur when payments are processed for services rendered during the fourth quarter. Payments made for the fourth quarter will include a supplemental payment which will retroactively pay enrollment sites the difference between the existing fee schedule and the updated fee schedule for services rendered back to July 1, 2017.

Spousal/Dependent Medical Out-of-Pocket (MOOP) Claims Benefit Policy

On May 21, all enrollment workers received Management Memorandum 2018-18: Spousal/Dependent Medical Out-of-Pocket Claims Benefit Policy. Effective July 1, 2016, ADAP began covering medical out-of-pocket expenses for clients co-enrolled in ADAP and OA-HIPP. This benefit also covers spouses and dependents who are enrolled in ADAP and are named on an OA-HIPP client's health insurance policy.

Effective February 23, 2018, the Spousal/Dependent MOOP Claims benefit functionality was added to the AES, allowing ADAP clients who are listed as spouses or dependents of another ADAP/OA-HIPP client's health plan to electronically enroll in the Spousal/Dependent Medical Out-of- MOOP benefit through the AES.

Please refer to the Release 11 – February 23, 2018: Managing Spousal Medical Benefits Management (MBM) ADAP Enrollment Workers job aid for information on how to submit a spousal claim through the AES.

In order to be electronically enrolled in the Spousal/Dependent MOOP benefit, new and existing clients are required to complete and sign an Acknowledgment of Policies and Responsibilities – Family plan form. Applicants must also complete and sign the Family Plan Consent Form. The OA-HIPP client and the ADAP client who is a spouse/dependent must each sign a separate consent form, and provide proof of a family health insurance policy including the named spouse and/or dependent.

Enrollment workers were advised to contact their ADAP Advisor with any questions.

Blue Shield of California- New Payment System

On May 24, all enrollment workers received Management Memorandum 2018-20: Blue Shield's New Payment System. Beginning February 2018, Blue Shield of California began mailing letters to clients requesting that they enroll into their new payment system known as Easy\$Pay. Clients do not need to enroll in Easy\$Pay since CDPH makes premium payments on the client's behalf. CDPH will continue to pay for the client's premiums as long as the client maintains program eligibility. Therefore, there is no action required on the client's part. If the client already enrolled into Easy\$Pay, Blue Shield of California is working on canceling Easy\$Pay on the client's account. Blue Shield of California has assured that this will not impact the client's eligibility. Attached to the memorandum was a copy of the letter that was sent to clients with a Blue Shield of California health plan.

Enrollment workers were advised to contact their ADAP Advisor with any questions.

ADAP Formulary Updates

On May 21, all enrollment workers received Management Memorandum 2018-19: Addition of atazanavir to the ADAP Formulary. Effective May 7, 2018, copay coverage for generic atazanavir is available to ADAP clients with private insurance or Medicare and a valid prescription.

On May 24, all enrollment workers received Management Memorandum 2018-21: Removal of Hepatitis C Virus (HCV) Medication simeprevir (Olysio®) from the ADAP Formulary. Effective May 25, 2018, simeprevir was removed from the ADAP formulary. The ADAP Medical Advisory Committee voted to recommend the removal of simeprevir from the ADAP formulary based on the manufacturer's notice of discontinuation on March 23, 2018.

On June 15, all enrollment workers received Management Memorandum 2018-24: Addition of crofelemer to the ADAP Formulary, informing them that effective June 14, 2018, crofelemer (Mytesi™), a 125 mg delayed-release tablet, indicated for symptomatic relief of non-infectious diarrhea in adults with HIV who are on antiretroviral (ARV) therapy, was added to the ADAP formulary. The ADAP Medical Advisory Committee (MAC) members voted to recommend that ADAP limit the dispensing of crofelemer, using the prior authorization process, to clients who have failed treatment with atropine/diphenoxylate (Lomotil).

PrEP-AP Updates

On May 18, all enrollment workers received Management Memorandum 2018-17: Announcement of Go-Live Date for Phase Two (Insured) of the Pre-Exposure Prophylaxis Assistance Program (PrEP-AP). The go-live date for phase two of the PrEP-AP was June 14, 2018, and expands services to individuals with insurance, including those with Medicare. As of June 15, there are 113 PrEP-AP enrollment sites.

On June 7 and 8, OA conducted training sessions, dedicated to enrolling insured individuals in the PrEP-AP. Session 2 of the New Enrollment Worker Training has been modified and will include a consolidated PrEP-AP policy training, encompassing both the uninsured and insured policies.

The OA webpage has been updated to include tools to assist enrollment workers in enrolling insured clients in the PrEP-AP. These resources, along with job aids and policy documents, are available in the ADAP Enrollment Worker SharePoint.

As of June 15, OA has executed 19 contracts covering a total of 31 clinics that currently make up the PrEP-AP Provider Network:

Clinical Provider Name	County	# of clinics on contract
Primary Care at Home, Inc.	Alameda	1
Clinicas de Salud del Pueblo	Imperial	4
Los Angeles LGBT Center	Los Angeles	1
Kern County Department of Public Health	Kern	1
Dignity Health - St. Mary's Medical Center	Los Angeles	1
APLA Health & Wellness - Baldwin Hills	Los Angeles	2
Watts Healthcare Corporation	Los Angeles	1
St. John Well Child and Family Center	Los Angeles	1
East Valley Community Health Center	Los Angeles	2
Vista Community Clinic	Oceanside	1
Desert AIDS Project, Inc.	Riverside	1
One Community Health	Sacramento	1
San Ysidro Health	San Diego	2
San Francisco AIDS Foundation	San Francisco	1
UCSF 360 Positive Care	San Francisco	1
HealthRIGHT360	San Francisco	4
Asian & Pacific Islander Wellness	San Francisco	1
Santa Rosa Community Health Center	Sonoma	1
West County Health Centers	Sonoma	4

For More Information

Thank you for your partnership and commitment to the health and safety of Californians living with HIV. With your assistance, we strive to ensure all eligible ADAP clients get the life-saving medication they need. We welcome and value your feedback. Please contact me with any suggestions, questions, or concerns.

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