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OFFICE OF AIDS
AIDS Drug Assistance Program (ADAP)

Management Memorandum
Memorandum Number: 2015-23

Date: December 10, 2015

TO: LOCAL ADAP COORDINATORS
ADAP ENROLLMENT WORKERS

SUBJECT: NEW AND UPDATED ENROLLMENT WORKER TOOLS FOR
TRANSITIONING CLIENTS TO COMPREHENSIVE HEALTH
COVERAGE

The purpose of this memo is to provide ADAP Enrollment Workers (EWs) with the following new and updated tools which will assist you in transitioning your clients to other payer sources, as applicable:

ADAP “Quick Reference Guide” for Covered California (Covered CA)

ADAP created the “Quick Reference Guide” document for Covered CA agents, navigators, and call center staff. The goal of the document is to provide an overview of ADAP so that Covered CA staff can better assist current or potential ADAP clients. The document also conveys how critical it is for ADAP clients to have continuous access to care. Covered CA has made the document available for download in their toolkit here: <http://hbex.coveredca.com/toolkit/webinars-briefings/>. The document is attached to this memo for your reference and potential use or distribution.

“Screening for Medi-Cal and Covered California” flowchart

The flowchart has been updated to identify the income levels for referral to Medi-Cal Expansion (MCE) or Covered CA based on the 2015 Federal Poverty Level Guidelines released by the U.S. Department of Health and Human Services. The flowchart also reflects the new ADAP income eligibility limit which is now based on the applicant’s Modified Adjusted Gross Income based on household income and family size.

As a reminder, text boxes with italicized text contain web links to web pages that have information associated with each box. The web link to the Covered CA website continues to be provided for easy access by EWs. The easiest way to apply for, or enroll in, health care coverage (whether MCE, M/C or Covered CA) and obtain the proof

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of application is through the Covered CA portal. Please encourage your clients to fully complete and comply with the MCE, Standard M/C, or Covered CA application processes.

If your clients are potentially eligible for Covered CA, they may also seek enrollment assistance from a Covered California Certified Enroller. Information on where to locate in-person Covered CA enrollment assistance can be found at the [Covered CA](#) website in the “Find Local Help” link. From that link, click on Certified Insurance Agents, Certified Enroller, or County Services Agency, whichever applies to your clients’ needs.

“Comprehensive Health Care Coverage” fact sheet

Also attached for your reference is a copy of the updated **“Comprehensive Health Care Coverage” fact sheet** (also known as the “ACA Client Handout,” as identified on the revised flowchart) that you must review with your clients who may be eligible for Covered CA. The changes include information based on 2015 Federal Poverty Guidelines and the 2016 open enrollment dates. **Reminder:** EWs must check and initial this fact sheet, acknowledging that they have reviewed the information with the client, have the client sign and date the fact sheet, and maintain a signed/initialed copy in the client’s ADAP file. The “Comprehensive Health Care Coverage” fact sheet is also accessible in multiple languages to all EWs on the Ramsell website in the forms option under the Utilities tab.

“ADAP – Covered California 2016 Formulary (Antiretroviral and Hepatitis C drugs) Comparison Chart”

The chart indicates what antiretroviral and hepatitis C drugs on ADAP’s formulary are covered by Covered CA health plan formularies for 2016. The changes include the addition of two new health plans (Oscar Health Plan and United Healthcare), additional mail order opt-out phone numbers by plan name, and Covered CA requirements to help consumers better understand their prescription drug coverage. This chart is located on the Office of AIDS (OA) website

at: <http://www.cdph.ca.gov/programs/aids/Documents/ADAPCoveredCaliforniaFormularyARVComparisonChart.pdf>. If you have questions regarding this chart please contact Cynthia Reed-Aguayo at Cynthia.Reed-Aguayo@cdph.ca.gov or (916) 449-5791.

Please contact your ADAP Advisor if you have any questions regarding the content of this memo. The most current “OA/ADAP Staff Assignments by LHJ” list is available on the OA website

at: <http://www.cdph.ca.gov/programs/aids/Documents/ADAPStaffLHJAssignments.pdf>



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Attachments

Medication and Insurance Access Programs for People Living with HIV

WHAT IS HIV?

Human Immunodeficiency Virus (HIV) is the virus that attacks the immune system and if left untreated, can lead to **Acquired Immunodeficiency Syndrome (AIDS)**. HIV can be controlled with antiretroviral medications. When these medications are taken ***correctly*** and ***consistently (i.e. without treatment interruptions)*** individuals can reach viral suppression, meaning they have a very low level of HIV in their body. Adhering to a medication regimen can help individuals living with HIV/AIDS stay healthy, live longer, and prevent the transmission of HIV by 96%. That is why ***it is critical for people living with HIV/AIDS to have comprehensive and continuous access to care.***

AIDS DRUG ASSISTANCE PROGRAM (ADAP)

ADAP was established in 1987 to help ensure that HIV-positive, uninsured, and under-insured individuals have access to their life-saving HIV-related medications. Individuals are eligible for ADAP if they are: a California resident, HIV infected, 18 years of age or older, and have a Modified Adjusted Gross Income of not more than 500% of Federal Poverty Level (FPL) based on family size and household income. ADAP is the payer of last resort and consists of a medication program and a premium payment program:

ADAP's Medication Program

ADAP's medication program pays prescription deductibles and co-pays for medications on the ADAP formulary for eligible individuals with private health insurance (e.g. employer-based, Covered California health plans). Individuals with income below 400% FPL get assistance at no cost. Individuals with income between 400% and 500% FPL may have a share of cost obligation. Individuals must have a valid prescription from a licensed California physician.

ADAP's Premium Payment Program (OA-HIPP)

ADAP's premium payment program, the Office of AIDS Health Insurance Premium Payment (**OA-HIPP**) program pays monthly private health insurance premiums on behalf of eligible individuals who are co-enrolled in ADAP's medication program. Along with health plan premiums, OA-HIPP covers dental and vision plan premiums. Family plans are also covered by OA-HIPP. Starting sometime in mid-2016, OA-HIPP anticipates being able to cover allowable medical out of pocket costs.

ADAP & COVERED CALIFORNIA

If an individual enrolls in a Covered California health plan, accepts the full federal Advance Premium Tax Credit (APTC), and enrolls in ADAP's medication program and OA-HIPP:

- ADAP's medication program will pay the prescription co-pays and deductibles for medications on the **ADAP formulary** that are dispensed from a pharmacy that is in-network for the Covered California health plan and ADAP.
- OA-HIPP will pay the individual's monthly insurance premiums. Clients are free to select any metal tier and any Covered California health plan they are eligible for. However, depending on the client's income, there are ways to minimize out-of-pocket costs. For clients with income between 139% and 200% FPL, the Enhanced Silver plan is usually most cost-effective. For clients with income of 201% FPL or higher, the Platinum plan is usually most cost-effective. If clients are eligible for an APTC, they must select the full tax credit to be applied to their premium.

Before enrolling in a Covered California health plan, prospective OA-HIPP clients are encouraged to contact their doctor's office to see which Covered California health plan(s) their doctor is participating in. Once enrolled in a health plan, clients must pay their premium(s) until it has been confirmed that their OA-HIPP application has been processed and a payment has been posted to their health plan account.

RESOURCES

- For more information or questions about ADAP's medication program, call (888) 311-7632 or visit <http://www.ramsellcorp.com/individuals/ca.aspx> or <http://www.cdph.ca.gov/programs/aids/Pages/tOAADAP.aspx>
- For more information or questions about OA-HIPP call (844) 421-7050 or visit <http://www.cdph.ca.gov/programs/aids/Pages/OAIAS.aspx>
- For more information regarding Covered California & ADAP visit [**"Information for Individuals with HIV or AIDS"**](#)
- Link to the ADAP drug formulary: http://www.cdph.ca.gov/programs/aids/Documents/ADAP_Formulary.pdf
- "How to choose a plan in Covered California" guide: <http://www.projectinform.org/coveredca/>

Medi-Cal Referral Criteria

Medi-Cal Expansion (MCE):

- Age 19-64 years;
- Income less than or equal to 138% FPL (about \$16,243 in calendar year 2015); and
- Legal CA resident.

MCE Exclusionary Criteria:

- Eligible for or receiving Medicare Benefits (except SSDI recipients in two year wait period for Medicare eligibility); and
- Client is not a lawfully present immigrant. Visit: <https://www.coveredca.com/individuals-and-families/getting-covered/immigrants/> for full information.

Standard Medi-Cal (M/C):

At least one of the following:

- Disabled or potentially disabled;
- Blind;
- Pregnant;
- On refugee status dependent on length of stay in the U.S.; or
- A parent or caretaker relative or a child under 21.

Standard Medi-Cal Exclusionary Criteria:

- Excess assets (e.g. \$2,000 in savings, second car or home, etc.);
- Currently employed and not disabled;
- Receiving unemployment insurance;
- Denied Medi-Cal, Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) within the past 12 months; and
- Client is an undocumented immigrant.

Affordable Care Act Requirements

Ten Essential Health Benefits:

For information on the required health benefits, visit: <https://www.coveredca.com/individuals-and-families/getting-covered/coverage-basics/essential-health-benefits/>

Penalties:

- **2016** - 2.5% of income or \$695, whichever is greater; and
- **2017 - and going forward**, the penalty will be the rate of inflation or 2.5%, whichever is greater.

Covered California Referral Criteria

- Income greater than 138% FPL;
- Legal CA resident;
- Not a Medicare Beneficiary;
- Not enrolled/eligible for Medi-Cal; and
- Cannot have employer-based coverage that costs <9.5% of income.

Covered California

Open Enrollment Period:

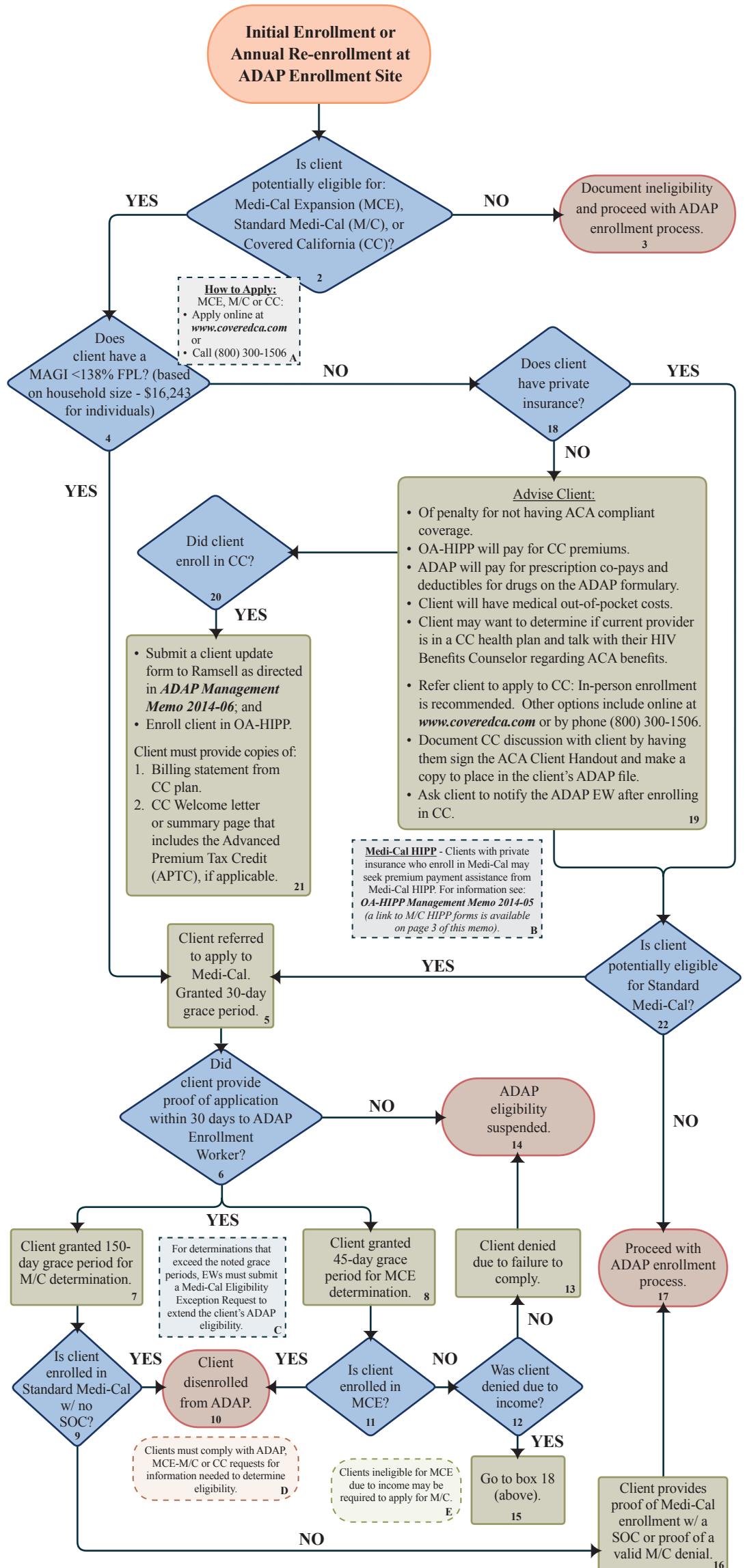
The open enrollment period for 2016 coverage is 11/01/15 - 01/31/16.

Special Enrollment:

Allows enrollment in Covered California outside of the open enrollment period due to a life-changing event. Special enrollment can take place within 60 days of a life-changing event.

Full details on the Special Enrollment qualifying events listed above can be found on the Covered California website at: https://www.coveredca.com/fact-sheets/PDFs/SEP_Factsheet_MECH_062614.pdf

Screening for Medi-Cal & Covered California



Comprehensive Health Care Coverage

Available through Covered California (Covered CA)

The Affordable Care Act (ACA) ensures that all legal U.S. residents are able to obtain affordable health care coverage, regardless of any pre-existing conditions. Legal California residents are able to get affordable private health care coverage from a variety of plans through Covered CA. **Open Enrollment:** Open enrollment for 2016 coverage begins November 1, 2015 and ends January 31, 2016. **Special Enrollment periods:** Special enrollment periods occur within 60 days of a qualifying life event such as: a job loss, death of a spouse, birth of a child, became a new resident of the state, released from incarceration, etc. For a complete list of qualifying events, contact Covered CA (see contact information below).

There are Four Levels of Coverage:

Platinum, Gold, Silver and Bronze:

Speak to an enrollment counselor who can help choose a plan and level of coverage that would best cover your specific health care and financial needs.

- **Enhanced Silver Plan** - Individuals who earn between 138 and 200% (\$16,243 – \$23,540 for individuals) of the Federal Poverty Level (FPL)* will have the lowest out-of-pocket costs by choosing a plan with this level of coverage.
- **Platinum Plans** – Individuals who earn more than 200% FPL and up to 500% FPL (\$58,850 for individuals) can minimize their out-of-pocket costs by selecting a plan with this level of coverage.

*Based on 2015 FPL

Contact a Covered CA Certified Enrollment Counselor for details.

| Income has to be more than: | For a family Size of: |
|-----------------------------|-----------------------|
| \$16,243 | 1 |
| \$21,984 | 2 |
| \$27,725 | 3 |
| \$33,465 | 4 |

Is Your Doctor in the Network?

Contact your doctor's office to find out if they are in the Covered CA network or if they plan to join the network. If not, you can visit the Covered CA website to find a suitable doctor in your area.

If you enroll in a health care plan through Covered CA and qualify for ADAP:

- **ADAP will be able to help with your drug co-pays and deductibles** for drugs on the ADAP formulary that are dispensed from a pharmacy that is in-network for the Covered CA health insurance plan and ADAP.
- **OA-HIPP may be able to pay your monthly insurance premiums** for clients who are co-enrolled in ADAP and take the maximum federal subsidy. It is expected that sometime in mid-2016, OA-HIPP may be able to cover allowable medical out-of-pocket costs.

Penalties if you don't get coverage: ACA requires adults enroll in a public or private health insurance or face a federal financial penalty.

- By 2016, the fine will be 2.5 percent of yearly income above the tax filing threshold or \$695 per person, whichever is more.
- By 2017 and going forward, the tax penalty will increase by the rate of inflation or 2.5 percent, above the tax filing threshold, whichever is greater.
- Fines will be enforced by the Internal Revenue Service based on the number of months without coverage.

For more information visit the Covered CA website at: www.CoveredCA.com or call (800) 300-1506 where you can:

- Apply for private insurance or Medi-Cal; and
- Find a location for a Covered CA Certified Enrollment Counselor or a County Human Services Agency to apply in person.

I have been given information about health care coverage available through Covered CA. I understand that having health care coverage is required by law and that I may incur a financial penalty if I do not have comprehensive healthcare coverage.

Clients Signature: _____ Date: _____

I have reviewed the information on this page with the client whose signature appears above. Worker initials: _____



California Department of Public Health

Office of AIDS

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