Summary of 10/31/2011 Teleconference with the California Office of AIDS (OA), DHCS Low Income Health Program (LIHP), Health Resources and Services Administration (HRSA) and Legacy County Representatives

Requests for Additional HRSA Guidance for Ryan White (RW) Parts A, C and D

OA has no fiscal involvement in Parts A, C and D and therefore cannot provide guidance for these Parts.

HRSA clarified that the August 9, 2011 correspondence regarding transitioning clients to LIHP applies to Parts A, B, C and D. No additional federal guidance specific to Parts A, C and D will be forthcoming. HRSA clarified that the Part A, B, C, or D grantee is responsible for determining Ryan White eligibility and that screening for LIHP should be incorporated into screening for other payer sources during the next standard eligibility screening. This screening can occur as part of the ADAP re-enrollment process if desired, as long as an alternative screening process is in place for Part A, B, C, and D clients who are not ADAP clients. HRSA does recognize that county LIHP programs may need some transition time for them to be able to accommodate patients with HIV, and this is why they issued the August 9th letter. HRSA cannot guarantee that counties with LIHP transition plans will be precluded from a federal audit finding based on Ryan White payer of last resort statute, because HRSA does not have control over OIG audits. However, in the event of an audit, counties can point to the August 9th HRSA letter and document what they are doing to get LIHP ready to accept clients with HIV. Counties are encouraged to continue working closely with their HRSA Project Officer and document their efforts to transition clients to LIHP.

340 B Pricing Availability for LIHP Programs

Federal law related to 340 B pricing does not allow this pricing to apply to the LIHP program. However, individual pharmacies can apply for 340 B status. Specific questions regarding 340 B pricing should be directed to HRSA's 340 B Program contact, Krista Pedley at Kpedley@HRSA.gov .

Provision of Medications

DHCS indicated that if a drug is determined to be medically necessary for an enrollee, it must be provided by the local LIHP.

Client Communication/Tracking/Notification

The County LIHP will take the lead on communicating with clients regarding the status of their enrollment in LIHP. OA is working with Medi-Cal to develop a system that updates the Pharmacy Benefit Manager database on a monthly basis. When in place, the pharmacist will have timely information regarding client enrollment status.