

MIAMI-DADE COUNTY RYAN WHITE PROGRAM
LOCAL AFFORDABLE CARE ACT (ACA) IMPLEMENTATION
(2016 – 2017 open enrollment period)

11- 07-16

The Health Resources and Service Administration (HRSA) requires Ryan White Programs to vigorously pursue enrolling eligible clients in the ACA Marketplace and inform such clients of the consequences of not enrolling. Open enrollment began November 1, 2016 and ends January 31, 2017.

NOTE: It is critical that all Ryan White Program Medical Case Managers follow proper and consistent directions when screening Ryan White Part A and ADAP clients for ACA participation and share a clear and appropriate message with clients.

ADAP-approved ACA Marketplace Health Insurance Plans for Miami-Dade County

- Celtic Insurance Company - Ambetter Balanced Care 10
- Florida Blue - BCBS of Florida - BlueOptions Gold 1505
- Florida Blue - BCBS of Florida - BlueOptions Gold 1708S
- Florida Blue - BCBS of Florida - BlueOptions Platinum 1418
- Florida Blue - BCBS of Florida - BlueOptions Platinum 1424
- Florida Blue - BCBS of Florida - BlueOptions Platinum Premier 1418V
- Florida Blue - BCBS of Florida - BlueSelect Gold 1535
- Florida Blue - BCBS of Florida - BlueSelect Gold 1738S
- Florida Blue - BCBS of Florida - BlueSelect Platinum 1451
- Florida Blue - BCBS of Florida - BlueSelect Platinum 1457

*****IMPORTANT REMINDERS*****

- Clients enrolling in an ACA Marketplace health insurance plan ARE REQUIRED to file income tax returns. A copy of the client's income tax return, including ACA reconciliation IRS form 8962 (if the client received an ACA premium tax credit in the previous year), must be presented to the Medical Case Manager (MCM) and filed in the client's chart to be eligible for re-enrollment in an ACA Marketplace health insurance plan.
- Clients enrolling in an ACA Marketplace health insurance plan ARE RESPONSIBLE for applying all applicable tax credits upfront at the time of enrollment or re-enrollment in an ACA Marketplace health insurance plan.
- Clients enrolling in an ACA Marketplace health insurance plan ARE REQUIRED to use the process facilitated by American Exchange in order to receive assistance with health insurance services through the Ryan White Program in Miami-Dade County.

If you have questions or need clarification, please contact your BSR TA person:

Peggy Jones- Gonzalez

(305) 448-0907 or Pjonesgonzalez@behavioralscience.com

- AIDS Healthcare Foundation (AHF)
- PHT/SFAN
- PHT/SFAN Hialeah
- PHT/PET
- PHT/North Dade
- UM CAP

Susy Martinez

(305) 448-3327 or Smartinez@behavioralscience.com

- Citrus Health Network
- Empower U
- Miami Beach Community Health Center
- The Village South

Sandra Sergi

(305) 448-2837 or Ssergi@behavioralscience.com

- Community Health of South Florida (CHI)
- Borinquen Health Center
- Care Resource
- Jessie Trice Community Health Center
- PHT/SFAN Florida City

Ryan White Part A clients ENROLLED in ADAP

Ryan White Part A clients <u>ENROLLED</u> in ADAP	Part A/ADAP ACA wrap-around	<ol style="list-style-type: none"> 1. MCM reviews current documentation to confirm client's legal status (U.S. citizen, national, or be lawfully present in the U.S.). 2. MCM confirms client's current Ryan White Part A/MAI program eligibility; MCM assesses client for ACA eligibility/exemption. 3. MCM informs client of required documentation for ACA enrollment appointment: copy of 2015 Income Tax return, Premium Tax Credit IRS form 8962 for ACA re-enrollment process (if client received premium tax credit in the previous year); proof of monthly gross income; names and dosages of all medications; name, date of birth, social security number, and proof of monthly gross income for all members of the tax household. 4. MCM meets with client and completes the 2017 ACA Assessment Tool, ACA Acknowledgement Form and revised SDIS Consent (i.e. reflects addition of American Exchange). MCM may complete assessment online at - www.americanexchange.com/acaassessmentflorida/ or PDF fillable form at https://www.americanexchange.com/wp-content/uploads/2016/10/2017-Miami-Dade-County-ACA-Assessment-Fillable-V3-2.pdf; MCM uploads the completed printable PDF form to www.americanexchange.com/upload-pdf/ or faxes to 1-866-408-1848. NOTE: MCM calls Enrollment Specialist at American Exchange (1-844-367-6535) with questions and/or concerns; Plan selection will occur within 48 hours and will be communicated to MCM in a weekly report (see #5). 5. Behavioral Science Research (BSR) and MBCHC receive a weekly enrollment report from American Exchange through a secure file share portal and this information is shared with ADAP and medical case management agency, as appropriate. 6. MCM updates the Ryan White Program Financial Assessment with new 2017 ACA Marketplace health insurance plan information. 7. MCM generates a Ryan White Program Certified Referral to MBCHC in Casewatch (i.e. electronic submission of certified referral eliminates the need to fax referral and supporting documentation) for Ryan White Part A/ADAP Wrap Around health insurance assistance to complete enrollment process; MCM documents insurance plan name, policy number, plan effective date, and plan end date then selects all of the following: Medication Co-Pays/Co-Insurance, Medical visit Co-pay/Co-insurance, and Deductibles (assistance with HIV-related doctor office visit co-pays, lab/diagnostic co-pays, and non-ADAP medication co-pays for drugs on Part A Formulary). 8. BSR generates a GAP card and distributes cards to all MCM agencies.
	Client Declines ACA Enrollment	If CLIENT declines enrollment, CLIENT must complete the ACA Decline Enrollment form in his/her own words and sign the form. In the SDIS, the MCM selects a reason from a drop down list that most closely matches the client's reason for declining enrollment. MCM reminds client of federal penalty for not enrolling (\$695 or 2.5% of income, whichever is higher), and that the Part A Program cannot assist with paying any related penalties. The Ryan White Part A Program will <u>not cover</u> any health insurance costs if CLIENT enrolled in ADAP declines enrollment in an ACA health insurance plan. MCM must send ADAP copy of the ACA Decline Enrollment form.
	<u>NOT</u> Eligible for ADAP ACA	NO ACTION IS TAKEN. Client stays in ADAP uninsured program to receive prescription drugs on the ADAP Formulary and continues receiving all other locally-funded Ryan White Part A Program services for which the client is eligible.

*****IMPORTANT*****

- Clients eligible for Part A/ADAP wrap-around services must be enrolled in ADAP and must be 100% - 400% FPL (2016-2017)
- ADAP clients may ONLY select from the pre-selected ADAP-approved plans currently limited to the options indicated on page 1 of this document. (ADAP clients who signed up for an ACA health insurance plan on their own and did NOT follow these guidelines will have to disenroll from the non-ADAP approved plan, or risk losing ADAP assistance).
- ADAP clients who signed up for an ACA health insurance plan on their own and did NOT follow these guidelines will not receive Ryan White Part A wrap around services.
- CVS Caremark (CVS, CVS Target and Navarro) is no longer a participating pharmacy for all Florida Blue ACA Marketplace health insurance plans.

Ryan White Part A clients NOT ENROLLED in ADAP

Ryan White Part A clients NOT ENROLLED in ADAP

NOT being assisted by Part A/ADAP ACA wrap-around

1. MCM reviews current documentation to confirm client's legal status (U.S. citizen, national, or be lawfully present in the U.S.).
2. MCM confirms client's current Ryan White Part A/MAI program eligibility; MCM assesses client for ACA eligibility/exemption.
3. MCM informs client of required documentation for ACA enrollment appointment: copy of 2015 Income Tax return, Premium Tax Credit IRS form 8962 for ACA re-enrollment process (if client received premium tax credit in the previous year); proof of monthly gross income; names and dosages of all medications; name, date of birth, social security number, and proof of monthly gross income for all members of the tax household.
4. MCM meets with client and completes the 2017 ACA Assessment Tool, ACA Acknowledgement Form and revised SDIS Consent (i.e. reflects addition of American Exchange). MCM may complete assessment online at - www.americanexchange.com/acaassessmentflorida/ or PDF fillable form at <https://www.americanexchange.com/wp-content/uploads/2016/10/2017-Miami-Dade-County-ACA-Assessment-Fillable-V3-2.pdf>; MCM uploads the completed printable PDF form to www.americanexchange.com/upload-pdf/ or faxes to 1-866-408-1848.
NOTE: MCM calls Enrollment Specialist at American Exchange (1-844-367-6535) with questions and/or concerns; Plan selection will occur within 48 hours and will be communicated to MCM in a weekly report (see #5).
5. MCM calls Enrollment Specialist at American Exchange (1-844-367-6535) and client completes the enrollment process in an ACA Marketplace health insurance plan in Miami-Dade County.
6. Behavioral Science Research (BSR) and MBCHC receives a weekly enrollment report from American Exchange through a secure file share portal and this information is shared with ADAP and medical case management agency, as appropriate..
7. MCM updates the Ryan White Program Financial Assessment with new 2017 ACA health insurance plan information.
8. MCM generates a Ryan White Program Certified Referral in Casewatch (i.e. electronic submission of certified referral eliminates the need to fax referral and supporting documentation) to MBCHC for Ryan White Part A/ACA (Non-ADAP) health insurance assistance to complete enrollment process; MCM documents insurance plan name, policy number, plan effective date, and plan end date then selects all of the following: Premiums, Medication Co-Pays/Co-Insurance, Medical visit Co-pay/Co-insurance, and Deductibles.
9. BSR generates a GAP card and distributes card to all MCM agencies.

Client Declines ACA Enrollment

If CLIENT declines enrollment, CLIENT must complete the ACA Decline Enrollment form in his/her own words and sign the form. In the SDIS, the MCM selects a reason from a drop down list that most closely matches the client's reason for declining enrollment. MCM reminds client of federal penalty for not enrolling (\$695 or 2.5% of income, whichever is higher), and that the Part A Program cannot assist with paying any related penalties.

Assistance with private/ employer-based insurance

NOTE: Clients who are offered employer-sponsored health insurance **MUST** accept that insurance unless the plan does not offer the required ACA Essential Health Benefits or the premium costs exceed 9.66% of the client's gross household income. Supporting documentation is required. Do **NOT** send these clients to ADAP as these clients are **NOT** in the ADAP program.

*****IMPORTANT*****

- The local Ryan White Part A Program may be able to provide eligible clients with health insurance assistance, subject to local program limitations, **ONLY** up to the following limits:
 - Premiums of \$1,000 per month
 - Deductibles of \$4,500 per year
 - Drug Co-pays; no limit, but medication must be on the local Part A Formulary
 - ACA health plan's maximum out-of-pocket costs must be at or below \$6,500 per year
- Referrals to Ryan White Part A health insurance assistance will expire annually on December 31st, with an SDIS pop-up reminder 30 days prior.