OBTAINING HEALTH COVERAGE

With the implementation of the Affordable Care Act, most people are eligible for public or private insurance coverage. Case managers are expected to strongly pursue all available options for obtaining enrollment in third party payers, and secure non-Ryan White HIV/AIDS Program (RWHAP) funds whenever possible for services provided to individual clients.

Ryan White is a safety net program that is a payer of last resort. Granted by statute, RWHAP Part B funds may not be used for items or services where payment has been made, or can be expected to be made by another payment source, to pay Medicaid recipient liability (i.e. spend-down), or penalty due to not having health coverage.
RWHAP funds may still be used to cover gaps in care such as co-pays, deductibles, and services not covered under the client's primary health coverage.

The North Dakota Ryan White Part B Program policy on obtaining health coverage is as follows:

Public Assistance:

- Clients with income below 200 percent of the Federal Poverty Level are required to apply for Medicaid and provide proof of acceptance or denial.
    - Clients with incomes below 138 percent of the federal poverty level ($15,510 for a single person) qualify for Medicaid Expansion. North Dakota's Medicaid Expansion coverage is a Sanford Health Plan. Information on Medicaid Expansion is found at www.nd.gov/dhs/medicaidexpansion.

- Clients eligible for Medicare are required to apply for Medicare Part D.

Private Insurance:

- Clients eligible for affordable private insurance through their or their spouse's employer need to apply for it.

- Clients who do not qualify for affordable insurance through their employer or state programs need to apply for the Qualified Health Plan through the marketplace. North Dakota has Federally Facilitated Marketplace located at www.HealthCare.gov.

Refusal of Coverage:

- If clients choose to refuse enrollment into third party coverage, they are required to complete the "Request to Decline Health Coverage" form at least annually, and get counseled on consequences of being uninsured or they will be removed from the program.

PROCEDURE

1. With each recertification, clients are required to provide proof of coverage (i.e. insurance card) or denial letter. Case managers will counsel clients on their options, and provide them with instructions on how to sign up.

2. Clients not eligible for public assistance or affordable employer insurance will need to provide:

    a. Proof of acceptance or denial by public assistance program.

    b. Client's employer must complete Employer Coverage Tool to ensure that the client does not have access to affordable employer sponsored coverage.

3. Clients not eligible for public or employer sponsored coverage can choose to enroll into a Qualified Health Plan (QHP) that best fits their health care needs. Please forward clients to a navigator in the area to help them sign up, or help them yourself.

   North Dakota Ryan White Program Part B can assist with premium payments for any Qualified Health Plan after the premium tax credits have been applied. Out of the three plans sold in the marketplace in North Dakota (BCBS, Sanford, and Medica), Blue Cross Blue Shield of North Dakota plans are the best at meeting the needs of North Dakota person's living with HIV due to most comprehensive provider network and formulary. Gold Direct 1900 100 ($1900 deductible and zero co-insurance) has been vetted to be the most cost effective for clients with income above 250% FPL. Clients eligible for cost sharing (having gross income between 100% and 250% FPL) should sign up for Silver level plans, as they are most cost beneficial for them. The requirements for signing up into QHP are:

    a. Clients will need to apply for Advanced Premium Tax Credits (APTC).

    b. Clients will need to report any changes in income, household size, employment and other major life changes to the case manager, as well as to the marketplace.

    c. Clients will need to file their taxes for the year in which they received tax credits. If clients do not file taxes, they may lose ability to get tax credits in the future.

4. Clients opting to remain uninsured despite available coverage will be permitted to continue to receive services only if the client record includes documentation that client received a counseling on:

    - The benefits of enrolling in health coverage (i.e. hospital stay, emergency room, ambulance services and medical care not related to HIV will be covered).

- The consequences of not enrolling in health coverage (i.e. penalties imposed by the federal government which cannot be covered by RW, limited services assistance based on funding availability, possible refusal of treatment by providers and others).

And have:

- Completed "**Request to Decline Health Coverage**" form to document that the clients were fully informed of benefits and consequences and still opted to decline health coverage.

5. Clients that fail to follow up on the instructions provided to them or sign the "Request to Decline Health Coverage" will no longer be eligible to receive RW/ADAP services.

6. North Dakota RWHAP will cover co-pays, deductibles and other expenses related to HIV after health coverage has been applied, based on funding availability.

7. For auditing purposes, the case manager maintains documentation of all actions, and pursuits in securing third party payers in the client's file. This documentation will be made available upon request to the RW Coordinator.