

ND Ryan White Program Training

Gordana Cokrlc
Ryan White/ADAP Coordinator
05/30/2014



- For audio please dial:
 - 866.637.9769
- Please mute your phone to prevent feedback

RW Training Overview

- Program Overview and legislation
- ND Ryan White
- Program Requirements
- Funded Services
 - ADAP
 - Supportive Services
- Case Management
 - Definition
 - Services
 - Forms
 - Policies
 - Reimbursement
- CPG
- Contact Information

3

Who was Ryan White

- Born in Kokomo, Indiana
- Born with hemophilia that required frequent blood transfusions
- Diagnosed with HIV at age 13 (1984)
- With his mother raised HIV/AIDS awareness and fought for right to attend school
- Died on April 8, 1990
- Few months later Congress passed the Ryan White CARE (Comprehensive AIDS Resources Emergency) Act



4

RWHAP



- largest federal program that focuses on HIV/AIDS care.
- Offers assistance to HIV positive individuals with medication, primary care and supportive services to:
 - enhance access to and retention in care.
 - reduce the use of more costly inpatient care
 - increase access to care for underserved populations
 - Improve quality of live for those affected by HIV disease

5

Legislation

- The Ryan White HIV/AIDS Program is administered by the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB)
- Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87, October 30, 2009)

6

Legislation

- Legislation was first enacted in 1990 as the Ryan White CARE (Comprehensive AIDS Resources Emergency) Act.
 - It is amended every four years to appropriate funding accordingly to new and emerging needs
 - In 2009 program was reauthorized to have no sunset clause
- RWHAP is currently funded at 2.1 billion.

7

Legislation

- Program is divided in parts:
 - Part A
 - Funds Eligible Metropolitan Areas and areas most severely affected by HIV/AIDS.
 - **Part B**
 - **Funds all 50 states and territories**
 - Part C
 - Funds outpatient clinics that provide primary health care to People Living with HIV/AIDS (PLWHA)
 - Part D
 - Funds outpatient or ambulatory care for women, infants, children and youth with HIV
 - Part F
 - Funds programs such as The Special Projects of National Significance (SPNS), The AIDS Education and Training Centers (AETC) and The Minority AIDS Initiative

8

ND RWHAP Part B

- North Dakota only receives Part B funding
 - \$300,000 ADAP
 - \$250,000 services
- As of the end of 2013, there were approximately 357 people with HIV/AIDS in ND
- 160 Ryan White clients

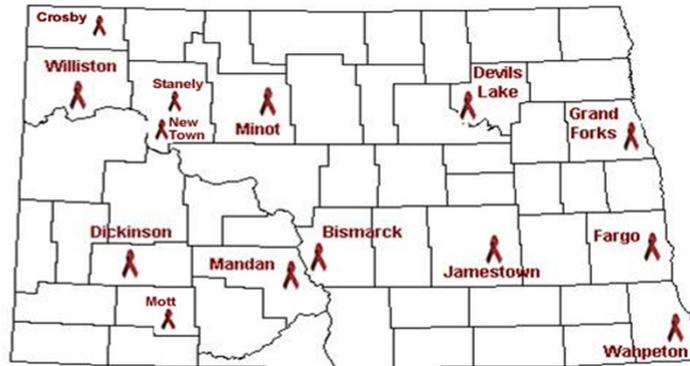
9

ND RWHAP Part B

- 18 sites that provide case management and supportive services
- www.ndhealth.gov/hiv

10

Case Manager Locations



11

ND RWHAP Part B

Eligibility Criteria:

- Proof of HIV status
- Resident of ND
 - Must provide a state issued ID within 60 days
- Gross income below 300% FPL
 - \$35,010/year for a single person
- Proof of Health Coverage
 - RW is “Payer of last resort”
 - Client are required to sign up for eligible health coverage, as RW funds cannot be used for services that would otherwise be covered by other programs

12

Services

- ADAP
- Case Management
- Outpatient/Ambulatory Services
- Insurance Premium Assistance
- Oral health
- Mental health
- Vision care
- Emergency assistance
- Transportation
- Nutritional supplements

13

Aids Drug Assistance Program (ADAP)

- Provides medication assistance
- Medication must be on the RW Formulary
 - Can request HIV medication not on the formulary by filling out a request form
- List of pharmacies can be found at:
<http://www.ndhealth.gov/HIV/HIV%20Care/ADAP/ADAP.htm>

14

Case Management

- Initial comprehensive assessment of needs
- Development of service plan
- Coordination of services to implement the plan
- Client monitoring to assess efficacy
- Periodic re-evaluation/revision
- Client-specific advocacy, and review of utilization of services

15

Enrollment

- Assist client with filling out the enrollment
 - Proof of HIV, income, residency and medical coverage (acceptance/denial letters)
 - if client has no income, they will need to fill out the income tax verification
- Fax to state at 328.0355 (confidential fax line) attn. Gordana
- We will assign a number (ex. RW201401)
- Takes about a week to get the client active in the MMIS system

16

Recertification

- Client eligibility is reassessed twice a year:
 - Reenrollment is April 1st-31st (with 30 day grace period)
 - Proof of income, residency and health coverage
 - Annual client survey sent out with reenrollment
 - Recertification is October 1st-31st (with 30 day grace period)
- Clients that do not reenroll/recertify within the designated period, they are removed from the program.

17

Supportive Services

- **Outpatient service**
 - **Specific to preventive care for treatment of HIV/AIDS**
 - **reimbursed up to 100%**
 - **Does not include in-hospital stay, emergency room, or ambulance services**
- Insurance premium assistance
 - Premiums due in 6 weeks or less will need to be paid by case management agency and submitted on the RFR under ADAP funds
 - Submit to state insurance premium letters
 - Any changes need to be reported right away

18

Supportive Services

- Oral Health care
 - preventive services
 - up to \$1000
- Mental Health services
 - Covered up to 80%
- Vision Care
 - Up to 80%
 - Glasses up to \$200 every other year (emergency assistance funds)
- Substance abuse treatment services
 - Up to 80%

19

Supportive Services

- Transportation
 - To medical appointments or support groups
 - Gas cards or bus tickets
- Nutritional supplements
 - Ordered by MD
- Emergency assistance
 - Must be related to situations that may arise due to client's HIV status, and are necessary to maintain access to care
 - Limited funding, limited uses, and limited time period
 - Rent, utility bills
 - Up to \$1000/year

20

Bill Submission

- Bills need to be submitted within 30 days of the statement date
- Fill out the required form for requested service, sign by the provider if needed, and keep in client file.

21

Online Resources

- Found online at: www.ndhealthg.gov/hiv
 - HIV Care tab
 - Policies and forms tabs on the right screen side
 - Ryan White Case Managers tab
 - Ryan White case manager tools

22

North Dakota nd.gov Official Portal for North Dakota State Government

NORTH DAKOTA
DEPARTMENT OF HEALTH
HIV/Ryan White

Medical Services • Disease Control

Programs and Services

- About HIV
- HIV Data
- Reporting Requirements
- HIV Prevention
- HIV Care
- Contact us
- Events
- Training
- Resources
- HIV Homepage

Information for Contracted Sites

- CTR
- Ryan White Case Managers

Welcome to the North Dakota Department of Health HIV Program website. The HIV program is divided into three sections: HIV Surveillance, HIV Prevention, and HIV Care.

The North Dakota Department of Health (NDDoH) HIV/AIDS surveillance program receives funding from the U.S. Centers for Disease Control and Prevention (CDC) to collect information about HIV infection and AIDS diagnoses among North Dakota residents. The HIV/AIDS data are used to characterize and predict the changing epidemic at the local, regional and national levels. North Dakota HIV/AIDS data are summarized annually to help the NDDoH to:

- Monitor the incidence and estimated prevalence of HIV/AIDS in the state.
- Assess the risks for HIV infection and develop effective HIV prevention programs.
- Develop surveillance methods to allow for a more current estimate and characterization of HIV/AIDS risks and needs.
- Justify necessary federal and state funding to support continued HIV/AIDS prevention, services and surveillance activities.

The HIV prevention program exists in North Dakota to reduce the spread of HIV by decreasing risky behaviors which include unprotected sex, needle-sharing for drug use, or tattooing and body piercing. The HIV program is expanding the reach of HIV testing through the use of rapid HIV testing and providing new opportunities to reach people who are at risk of becoming infected with HIV.

North Dakota CARES (Comprehensive AIDS/HIV Resources and Emergency Services) is a program that assists low-income North Dakota residents living with HIV or AIDS to access confidential health and supportive services.

HIV can happen in North Dakota. [You need to know, get tested. 1.800.70.NDHIV](#)

Copyright © 2009 North Dakota Department of Health

Frequently Requested

- Newsletters
- Current HIV Epi Report
- Fact Sheet
- HIV Program Materials
- Current Ryan White Formulary
- Ryan White Case Management Sites

Performance Measures

- Annual site visits to all case management sites
 - Review agency's policies
 - Review charts
 - Current recertification
 - Developed care plan
 - Client is in care
 - 2 medical visits per year
 - 2 labs per year (physician may request testing less frequently; note in client chart if this is the case)
 - Medication adherence
 - Proof of health coverage (or lack of)

CPG

- Community Planning Group for HIV and Viral Hepatitis Prevention
 - Christopher Wegner (Outreach Coordinator) and Gino Jose (HIV Prevention Coordinator) serve as chairs
 - CPG serves as RW advisory board
 - CPG members coordinate support groups
- Regional representatives meet on quarterly basis, and all regions meet once a year
- If interested in participating contact Christopher Wegner:
 - 701.271.6373
 - cwegner@familyhealthcare.org

25

Contact Information

Gordana Cokrlic

Ryan White Program Coordinator
North Dakota Department of Health
2635 E Main Ave
Bismarck, ND 58506
701.328.3278 (phone)
701.328.0355 (fax)
gcokrlic@nd.gov

Lindsey VanderBusch

HIV/STD/Hepatitis/TB Program
Manager
North Dakota Department of Health
2635 E Main Ave
Bismarck, ND 58506
701.328.4555 (phone)
701.328.2499 (fax)
lvanderbusch@nd.gov

26