

# VIGOROUS PURSUIT OF COMPREHENSIVE HEALTH CARE COVERAGE POLICY



## RI Executive Office of Health & Human Services Ryan White HIV Provision of Care, Medicaid Division

**To:** Ryan White Part B Contractors

**Subject:** Client Enrollment into Comprehensive Health Care Coverage

To ensure the Health Resources and Services Administration (HRSA) mandated payer of last resort regulation is adequately enforced; this policy will be effective immediately as of November 1, 2014.

**References:** HRSA Policy #13-04- *Clarifications regarding Clients Eligible for Private Health Insurance and Coverage for Services by Ryan White HIV/AIDS Program.*

### ***I. Purpose***

The purpose of this, State of Rhode Island, Executive Office of Health & Human Services (EOHHS), Ryan White Part B policy is to inform Ryan White (RW) Part B contractors of the EOHHS, Ryan White HIV Provision of Care expectations regarding pursuit of enrollment with clients who are eligible for comprehensive health care coverage (e.g. Medicaid, Medicare, Healthcare Marketplace (HealthSource RI), employer sponsored health insurance coverage, and/or other private health insurance) and the documentation requirements of those activities.

These activities are important in ensuring that RW funds are not used for services that reasonably can be paid for by another funding source. The requirements for documentation and reporting are to show that all reasonable steps have been taken to vigorously pursue enrollment into comprehensive health care coverage for all eligible clients.

### ***II. Enrollment and Documentation Requirements***

**Contractors are required to evaluate eligibility for other payment sources with all clients at intake and at six month recertification. New requirements are:**

1. Contractors must provide the following information to their clients who do not have comprehensive health care coverage:
  - a) The benefits of comprehensive health care coverage, including that purchased through the Healthcare Marketplace.
  - b) Medicaid and Healthcare Marketplace (HealthSource RI) eligibility including possible eligibility for federal premium assistance and cost sharing subsidies.
  - c) Open enrollment dates for the Healthcare Marketplace (HealthSource RI) including special enrollment periods due to a qualifying life event such as marriage, divorce, birth or adoption of a child, or loss of job. Medicaid enrollment is on-going.

- d) Fines for failure to obtain comprehensive health insurance as well as information on the qualifications for exemptions from fines.
  - e) Premium assistance offered through the RI Health Insurance Premium Assistance Program facilitated by the EOHHS, Ryan White HIV Provision of Care (ADAP).
  - f) How to find a Certified Enrollment Counselor for assistance with completing the application for Medicaid or the Healthcare Marketplace.
  - g) If they receive medical or mental health services from your agency, inform the client whether their current provider is a member of a covered network or Medicaid Managed Care plan.
1. Documentation- Contractors must ensure that detailed client notes are maintained, which capture all activities taken in pursuing enrollment into comprehensive health care coverage over a period of time (intake and six-month recertification)
  2. Contractors must update their policy and procedures to include all requirements defined in this memo.
  3. Contractors will be required to ensure all subcontractors/providers are in compliance with the activities defined in this memo.

### ***III. Delayed or Declined Enrollment/Client Acknowledgement***

In order for contractors to be in compliance with the Health Resources and Services Administration (HRSA) policy that Ryan White be the Payer of Last Resort, Ryan White HIV Provision of Care is requiring that additional steps be taken with clients who, while eligible, may either delay or decline enrollment in health insurance coverage and have not received an IRS exemption. Contractors must continue to provide the information defined in section II.1.a-g at every encounter with particular attention focused on the benefits of receiving comprehensive health care coverage. Contractors should also assist their clients in addressing any barriers which might be delaying their enrollment. While there are limitations when a client can sign up for HealthCare Marketplace insurance as defined by Open Enrollment date, contractors should be aware that there are special open enrollment periods. There are no enrollment restrictions when a person can sign up for Medicaid.

For those clients not yet enrolled in comprehensive health care coverage, contractors must have the client sign or initial an acknowledgment that they have received, at a minimum, all the information listed in Section II a-g and are aware that they may incur a fine for not having health insurance. In order to show that you have met the HRSA standard of vigorously pursuing enrollment for your clients, contractors should have clients sign a copy of the client acknowledgement form at intake and at their six-month recertification. Additionally, contractors must also include documentation in client files of their efforts to address the identified barriers for enrollment of those clients over a period of encounters. EOHHS will provide agencies with a template for Client Acknowledgement documentation on 9/23/2014.

### ***IV. Quarterly Reporting Requirements***

In order to show compliance with these required activities, contractors will need to describe successes and challenges in assisting clients with pursuing enrollment in comprehensive health care coverage to be submitted to Garlete.Parker@ohhs.ri.gov, (cc Phanida Phivilay-Bessette and Garlete Parker) in their quarterly Quality Management narrative report/s. Providers are requested to submit this information with their January 15, 2015 Quality Narrative Report. EOHHS will provide guidance with this prior to the November 15, 2014 Rhode Island HealthCare Marketplace Open Enrollment.

### ***V. Monitoring***

During the annual monitoring site visits, the Ryan White team will be reviewing evidence of compliance with policy and procedures required in Section II.3 of this memo. Additionally, the Ryan White team will also confirm that client level documentation is thorough and meets all of the above requirements.

## ***VI. Continuation of Ryan White Services***

If an eligible client does not have comprehensive health care coverage, the client may continue to receive services through Ryan White and efforts to “vigorously pursue enrollment into health care coverage for which clients may be eligible” must continue and be documented. “Ryan White will continue to be Payer of Last Resort and will continue to provide those RW services not covered, or partially covered, by public or private health insurance plans.” (HAB Policy Notice #13-04)

## ***VII. Ryan White Service Categories for Enrollment Activities***

For information on which RW service categories can be used to support outreach, benefits counseling and enrollment activities see the HRSA information located at- Ryan White and Affordable Care Act Outreach, Enrollment and Benefits Counseling at: <http://hab.hrsa.gov/affordablecareact/outreachenrollment.html>

## ***VIII. EOHHS, RI Ryan White, Health Insurance Premium Assistance Refunds & Reconciliation***

If Health Insurance Premium Assistance payments are made on behalf of an ADAP (AKA EOHHS, Drug Assistance Program) eligible client through the EOHHS, RI Health Insurance Premium Assistance Program and an overpayment of an Advanced Premium Tax Credit (APTC) occurs, all refund amount/s will be reconciled and must be refunded to the EOHHS, Ryan White ADAP (EOHHS Drug Assistance) Program. Individuals who have enrolled in QHP’s through the Marketplace (HealthSource RI) will receive form 1095-A, which will provide instructions on how to complete IRS form #8962. This form is used to reconcile the advance premium credits (APTC) that were received in the previous year with the amount of premium tax credits they were entitled to that was based upon actual income for that year.

Sincerely,

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