

FLORIDA AIDS DRUG ASSISTANCE PROGRAM
January 30, 2014 Statewide Conference Call Minutes
10:00 AM – 12 NOON

Counties Represented: Alachua, Bradford, Brevard, Broward, Calhoun, Charlotte, Collier, Columbia, Duval, Hendry/Glades, Hernando, Hillsborough, Holmes, Lake, Lee, Leon, Martin, Miami-Dade, Monroe, Okaloosa, Orange, Palm Beach, Pasco, Pinellas, Polk, Putnam, Sarasota, Seminole, St. Johns, St. Lucie, Sumter, Volusia

ADAP Headquarters Participants: Steven Badura, Jimmy Liaque, Paul Mekeel, Eunice Sawaya, Lorraine Wells, Nicholas Dudley, Cherrishe Brown

WELCOME NEW ADAP HEADQUARTER STAFF MEMBERS

- Cherrishe Brown is the new regional consultant for the midsection of the state.
- Nicholas Dudley is the new regional consultant for the panhandle.

PROGRAM UPDATES

- New ADAP training opportunities will be presented this year in 2014. ADAP will be scheduling face-to-face and WebEx trainings. Calendar for these events will be sent out once confirmed.
- Opportunity to share program critical information statewide: ADAP will be implementing the use of SharePoint to post information, documents, training and conference call dates, updates and other information specific to the FL ADAP. Look for the upcoming announcement of when this tool will be available.

AICP TRANSITION UPDATE

- A 'FINAL NOTICE' letter will be going out to AICP clients who have not transitioned to ADAP reminding them to register in ADAP to continue insurance coverage.
- Transition must be completed by the end of February, 2014.
- ALL AICP clients must register in ADAP regardless of the type of assistance needed.

INCIDENT REPORT

- A new Incident Report will be implemented starting February 2014. This tool will be used to capture incidents occurring in the counties that are in violation of ADAP policy or may have financial impacts to the program.
- Examples of situations: Clients getting meds when not qualified, waiver reasons not correct, numerous enrollments for same client, PDAs not being printed.
- The reports will be used to identify possible problems and the need to emphasize training on various issues that are reoccurring.
- Reports will be filled out by ADAP headquarters and sent to managers for review and discussion.

INSURANCE MODULE

- It is imperative to select the correct waiver reason when enrolling or reenrolling a client. This will help prevent issues at a CVS pharmacy and also make sure TrOOP dollars are applied to Medicare Part D clients.

- Please confirm that all the text fields are populated correct. If not correct, this will be a financial impact of clients and to our program. Some files needed to be corrected after being audited.
- Select the type of help needed: Premiums only (no temporary card is generated), Premiums, copays & deductibles. This will ensure that the correct temp card is generated. This is critical for the file to be activated and sent to CVS on a daily basis.
- If a waiver reason needs to be changed, then print out a new temporary card, as the numbers may be different and is required for CVS to process correctly.

Insurance Type

- Once you have selected the insurance waiver reason on the registration page, select "Go to Insurance Module" to enter the data for a client's private insurance. The "Check Boxes" have modified to help select the correct type of insurance.
 - Check the box "AICP/PI – (Private Insurance) when you are enrolling or re-enrolling an AICP client.
 - Check the box "Unaffordable Copay (Not AICP)" if you have selected "Unaffordable Copays / Deductibles" as the Insurance Waiver reason on the registration page.
- For Medicare Part D clients:
 - When you select Medicare Part D, you do not have the option of selecting the type of assistance needed.
- You can view the insurance information entered at the bottom and also edit it if needed – this shows that it has been saved.

Is client receiving assistance with prescription copays and deductibles?

- *Note: Both 'Yes' or 'No' questions will appear only when the 'AICP/PI- Private Insurance' box is selected, not for the other insurance categories.*
- Select "Yes", if the client is getting assistance through the local CBO and HCSF for copays/deductibles.
- Select "No", if the client is getting assistance with any other local program for copays/deductibles.
- Type the program name where the client is getting assistance in the text field.
- Please do not forget to SAVE once you have entered all the data.

AUTO-CLOSURES

- I want to thank all of you, ADAP staff who are committed to the continual care of our clients, making every effort to ensure that persons are able to pick up their medications timely and without hindrances.
- As a program we also want to prevent clients from closing, but realize that there are instances where a client may close to the system -- with the goal to reopen them as quickly as possible. This is where our IT team has implemented a number of enhancements which will help prevent a client from closing or allow them to reopen in a timely manner:

■ LOG MISSING DRUG PICKUPS

- What does this screen enable you to do?
 - When drug pickups are not captured in the database, this feature will allow staff to manually enter pickup dates.
 - This will be used for insurance clients only, whose pick-ups from a CVS or CVS mail order have not been captured in the client's record. When a claim is not adjudicated due to ADAP not being a secondary payer a pick-up is not recorded.
 - This screen should not be confused with the log drug pick-up page for uninsured clients who receive medications through Central Pharmacy.
 - If you have a client on a drug study, you may enter that information under the 'other' drop down selection and type in the information.
 - For migrant workers who pick up from CVS, an override needs to be requested from CVS corporate as well as the primary insurance (if needed).
 - If a client does close-out in the system, you will need to fill out the exception form that automatically pops-up.

Populating the 'Log Missing Drug Pickup' screen

- You may use this feature when an insurance client has provided documented proof of picking up medications (as when picking up from CVS and is not getting recorded in the client's record). This will prevent the client's record to being closed due to '2+ Months No Drug Pick-up'.

Steps to enter data into "Log Missing Pick-up" table:

1. Under the EDIT section of a client's detail page, click the "Log Missing Pick-ups" tab
2. Select the ADAP fiscal YEAR in the first drop down list.
3. Type the SSN of the client whose pick-up information that you are trying to enter, and then click "Search". It will populate the client's first and last name.
4. Select pick-up month that is missing,
 - a. Example: If the pick-up was for the month of May, Check the box for May.
5. Enter the "Actual Pick-up Date" on the next field.
6. 'Expected Date of Pickup' field is for the next date the client is expected to pick-up.
7. Select "Type of Pick". Example: CVS or CVS Mail Order, etc.
8. Select your county under "County of Pickup".
9. Click 'SAVE" button.

This information will prevent the client's name to appear on the 30 days Closure report and the client record will not close after 90 days.

■ 30-day closure notice

- This is a tool that can be used to prevent closures. Each Monday ADAP staff is provided with an email notification containing the 30-day closure report. Please review the report to identify those who will close with-in 30 days. If needed, contact

the client to determine why there has not been a pick-up or reenrollment. You may contact ADAP headquarters for any resolution.

- UPDATE: Insurance clients will not appear on the 30-day closure report.

Request for Exception Form

- The main purpose of the Exception Form is to monitor insurance client's regimen adherence as well as track the reasons why they are closed to the ADAP program. As stated earlier, our goal is not to have clients close, however if they do, this form helps with linkage and retention efforts.
- There are some scenarios where a client does not have to pay their copays & deductibles and therefore ADAP is not identified as the payer. When this occurs, ADAP is not receiving the pick-up information and it is not captured in the database. The IT team is working with CVS to capture all pickups.
- The Exception form will pop-up when you search a client whose record was closed because of No Drug pick-up. Please be sure to use the form on-line and fill it out electronically so that the information will be stored in the database. There have been a couple instances where counties have printed the exception form and are filling it out manually and sending it to ADAP HQ for approval. This prevents the form from being sent to the IT team through the database and makes the process to open a client more cumbersome. Please fill out the form completely on-line, select 'Save Data', the form will be sent electronically to ADAP IT.
- TO RETRIEVE THE INFORMATION YOU HAVE JUST ENTERED: When the form pops up again (it will be blank), go to the bottom of the form, enter the SSN of the client, click on 'Search By SSN or Member ID' the form will repopulate. Print it out for your records, obtain signatures where appropriate, then you may send it to ADAP HQ via email (encrypted) or fax, which alerts the IT team that the form has been completed and is ready for final approval. Please allow up to 5 business days for approval.
- Supporting documentation must be included:
 - Print out from the pharmacy of medication pickup if the client has been picking up.
 - Doctor's approval for restarting medications if the client has stopped taking meds.

MEDICAID MATCH & BACK BILLING

- As a reminder, ADAP is the payer of last resort. If service is provided for a Medicaid eligible client, ADAP must back-bill for those months.
- Check with FMMIS to see if a client is Medicaid eligible, then go ahead and submit the information to Douglass Woodlief at central pharmacy to initiate back-billing process of those identified. Write your findings in the notes section in the database and close the record.
- HRSA requires ADAP to remain the payer of last resort for all of its clients (Please see HRSA Policy Clarification Notice (PCN) #13-01). Sections 2605(a)(6), 2617(b)(7)(F), 2664(f)(1), and 2671 (i) of the Public Health Service Act state that RWHAP funds may not be used "for any item or service to

the extent that payment has been made, or can reasonably be expected to be made by another payment source”.

- Grantees must assure that sub-grantees make reasonable efforts to secure non-RWHAP funds whenever possible for services to individual clients. Grantees and their sub-grantees are expected to vigorously pursue Medicaid enrollment for individuals who are likely eligible for coverage, to seek payment from Medicaid when they provide a Medicaid-covered service for Medicaid beneficiaries, and to back-bill Medicaid for RWHAP-funded services provided for all Medicaid-eligible clients upon determination. This is a continuation of current program policy.
 - However, once an individual is enrolled in Medicaid, RWHAP funds may be used to pay for any medically necessary services which Medicaid does not cover or where Medicaid coverage is limited in scope.
- Most Medicaid eligible applicants are not eligible for ADAP. However, there are a few instances when a Medicaid recipient may be eligible to receive services from ADAP. ADAP Policy, Section VIII addresses clients with Medicaid who may receive ADAP services:
- A client's Medicaid coverage does not provide prescription medications.
 - A client's Medicaid plan only provides full benefits if the cost of treatment (including medications) exceeds the share-of-cost amount. The Medicaid approval/denial for a "share of cost" client is determined on a monthly basis. To qualify for this waiver, a client's medication costs must be less than their Medicaid Share-of-Cost.
- Florida ADAP will perform a match with Medicaid, and back-bill Medicaid for Medicaid eligible clients.
- The program recognizes that Medicaid may determine retroactively.
 - The Program Central Office anticipates automating this process, and performing the match on a monthly basis.
 - The Medicaid back-billing form is available online at Central Pharmacy website for submission.
 - Counties may contact Douglas Woodlief or Dr. Broxton at Central Pharmacy at 850-922-9036.

MEDICARE PART D ELIGIBLE

- A list of clients who were eligible to enroll into Medicare Part D was sent in September to counties to follow up and remind persons of open enrollment. 34 did not enroll. The follow-up list will be sent to the counties to confirm status.

Thank you for your help in the last year, if you don't look good, we don't look good. You are doing a great job with helping clients, communication, participating on calls, etc. We depend on each and every one of you. This year may be challenging with moving parts and we depend on you.

Updated information will be coming in April in the new ADAP CAPSULE. This will be an informative newsletter covering a variety of issues: upcoming trainings, articles from the medical team, important updates performance measures, upcoming travel for Q/A & Q/I.