FLORIDA AIDS DRUG ASSISTANCE PROGRAM

November 19, 2015 Statewide Conference Call Minutes

10:00AM – 11:00AM

Counties Represented: Alachua, Bay, Bradford, Brevard, Broward, Citrus, Collier, Desoto, Dixie, Duval, Escambia, Flagler, Gadsden, Gulf, Hernando, Hillsborough, Jefferson, Lake, Lee, Manatee, Marion, Martin, Miami-Dade, Okaloosa, Orange, Palm Beach, Pasco, Pinellas, Polk, Putnam, Santa Rosa, Sarasota, St. Lucie, Sumter, Taylor, Union, Volusia, Wakulla.

ADAP Headquarters Participants: Jimmy Llaque, James Easton, Steven Badura, Joseph Cohen, Cherrishe Brown, Amanda Jones, David Kolar, Paul MeKeel, Nneka Abara.

ADAP Insurance Client Calls held in November

- As all should be aware, ADAP has been conducting a series of calls with our clients that are designed to share information with those receiving assistance through the ADAP Premium Plus Program. These calls provide clients with information specific to the Marketplace Open Enrollment timeline, along with the opportunity for clients to ask questions or discuss concerns, regarding 2016 insurance coverage.
- The goal of these calls is to ensure that our clients have the information needed to retain the receipt of ADAP Premium Plus assistance.
- ADAP plans to enroll more than 3,600 clients into federally facilitated Marketplace insurance plans for the 2016 benefit year.
- Calls are held at 10 A.M. and 7 P.M. to ensure that it is feasible for clients to attend.
- The November 10th calls were directed towards clients who were enrolled in ADAP approved plans during the 2015 benefit year.
- These calls were designed, specifically, to inform existing clients that ADAP has approved auto re-enrollment for the same plans supported in 2015. The 2015 plan options continue to meet ADAP Premium Plus guidelines.
- Suitable insurance plans were released by the Centers for Medicare and Medicaid Services at the end of October.
- ADAP supervisors and HAPCs should have received this notification from Steven Badura on Friday, November 6, 2015.
- Upcoming calls on December 8th, January 12th, and February 9th will include updates and relevant enrollment information for clients who are new to the federally-facilitated Marketplace.
- As a reminder, any changes made to plans after the December 15th deadline will create a gap in coverage. These plans will not go into effect until February 1, 2016.

GoToMeeting: Walk-through of Marketplace Module

- A few weeks ago, ADAP staff were notified that the database would be inaccessible while system updates were performed.
- The updated Insurance Module can now capture insurance information for all clients receiving assistance under a private insurance plan.

- In the updated module, required insurance plan information, as well as the cost of the assistance for each formulary prescription co-pay / deductible or premium will be captured.

Screenshots of the updated ADAP Insurance Module were made available by James Easton, via email, on November 17, 2015. For those who do not have the examples that were provided, please contact your area consultant to obtain this.

New Static Box: Client Mail Consent

- The presence of a static box, which notifies our program if the client consents to receive mail communications, can now be found in the ADAP database.
- Staff should never send mail communication regarding enrollment, eligibility or health records. This information, along with all clients' right to privacy is protected by HIPPA rule.
- Mail communication sent from the program office should contain educational materials and related publications related to the assistance available through our program.
- Upon initial enrollment and client re-enrollment, CHD staff is to ask clients if they consent to receive programmatic updates via mail.
- If consent is given, please select the static check-box next to the consent statement. Once this is done, these clients will be included on the ADAP mail contact list.

Enter 2016 Plan Information Only

- It is not necessary to re-enter the client's 2015 plan information into the new Insurance Module.
- The program has arranged for December premium payments to be applied towards 2015 plans.
- Entering 2015 plan information can cause various issues for the client.
- Please be certain that only plan information for the 2016 benefit year is entered.

Binders and First Month Payment Requirements

- Marketplace plan updates and any new insurance information must be provided by new clients, so that the data is captured in the ADAP system.
- Binder payments must be made before clients receive a welcome package from their selected insurance carrier.
- Following enrollment, applicants will receive an Acknowledgement Letter from their provider. ADAP staff should enter the client's binder payment amount and biller I.D. into the Insurance Module. Both the payment amount and biller I.D. should be found on this document.
- After the initial binder payment is applied to the account, the client should expect their welcome package from their plan provider.
- The PDFs, provided to ADAP staff, did not include this updated payment process information, as the information had not yet been shared.
- As opposed to previous instruction, clients should be advised to re-enroll as soon as possible. Encourage this so that the information needed, to make binder payments, becomes available and a lapse in coverage is prevented.

Marketplace Enrollment Update

- In order to guard the privacy of our clients, no identifiable ADAP logo is present on the envelopes addressed to those, who have consented to mail delivery.
- Printed flyers and re-enrollment packets have already been mailed.

- Enclosed in these packets is 2016 insurance information only.
- In September, the lists of identified clients eligible for 2016 coverage, along with the health plans for each county, was provided to staff. It has been found that some of this client data collected was incorrect.
- If you discover a client with the wrong associating data, such as plan / coverage type, please inform central ADAP staff.
- Please notify us of the client, so that we may update their file. We do realize that a few clients have been inaccurately categorized.
- In addition, when sending a client to be added to the list, do not simply provide the client's name and social security number. Also include their FPL and current insurance status, along with the carrier.

Q&A Session

- **Have the letters regarding Navigator information been sent to clients?** Yes. Clients who have opted in to receive mail delivery have been sent this information. Those who do not receive mail from our program should be contacted by ADAP staff.

- **Are clients who plan to re-enroll required to see a Navigator? Can they re-enroll on their own?** Clients are not required to see a local Navigator. However, staff should encouraged them to make a Navigator appointment, as these individuals are knowledgeable of the available insurance policies and the needs of ADAP clients.

- **Is it possible to enter more than one SSN into the Insurance Module if the client has a family plan?** No, not currently. If all individuals are under a family plan, please notify your area consultant to ensure that all members receive premium coverage.

- **What if an eligible client declines federally facilitated Marketplace coverage?** Eligible clients who choose not to enroll will be served through ADAP traditional. Nevertheless, this decision will subject him/her to IRS penalties. ADAP will not pay the $695.00 individual responsibility fee, once this occurs. It is important to help wavering clients make an informed decision by sharing this information.

  If a client knowledgably rejects coverage, in the notes section provided, please state that they are eligible for Marketplace coverage but declined to receive. Also, please notify ADAP central office so that the Marketplace icon can be removed from the client's profile.

- **If we do not have the required insurance information, how will we complete all fields in the Insurance Module?** Please instruct clients to contact their insurance provider, via phone, four days after they have re-enrolled. They should be provided with their new insurance information, which should then be shared with ADAP staff.

Please join us on the next statewide call scheduled for December 17, 2015. If you have further questions regarding any of the topics above, please contact your ADAP area consultant.