

## Health Insurance Premium and Cost Sharing Assistance

### HRSA Definition (2-1-2016)

Health Insurance Premium and Cost Sharing Assistance provides financial assistance for eligible clients living with HIV to maintain continuity of health insurance or to receive medical and pharmacy benefits under a health care coverage program. To use RWHAP funds for health insurance premium and cost-sharing assistance, a RWHAP Part recipient must implement a methodology that incorporates the following requirements:

- RWHAP Part recipients must ensure that clients are buying health coverage that, at a minimum, includes at least one drug in each class of core antiretroviral therapeutics from the [Department of Health and Human Services \(HHS\) treatment guidelines](#) along with appropriate HIV outpatient/ambulatory health services
- RWHAP Part recipients must assess and compare the aggregate cost of paying for the health coverage option versus paying for the aggregate full cost for medications and other appropriate HIV outpatient/ambulatory health services, and allocate funding to Health Insurance Premium and Cost Sharing Assistance only when determined to be cost effective

The service provision consists of either or both of the following:

- Paying health insurance premiums to provide comprehensive HIV Outpatient/Ambulatory Health Services and pharmacy benefits that provide a full range of HIV medications for eligible clients
- Paying cost-sharing on behalf of the client

### Key Service Components

To facilitate the maintenance high quality health care and viral suppression the Ryan White program provides for the payment of insurance premiums, co-pay, and deductible through the Health Insurance Premium and Cost-sharing Assistance Program. The services provides a cost -effective alternative to the direct distribution of medications (ADAP). It can purchase health insurance that provides comprehensive primary care and pharmacy benefits for low income clients. The service extends since the implementation of Affordable Care Act to the client's Medicare Part D true out-of-pocket (TrOOP) costs.

Cost sharing assistance includes the payment on behalf of the client of co-pays (including co-pays for prescription eyewear for conditions related to HIV infection) and deductibles.

### QUALIFICATIONS

Staff /Other Service Qualification	Expected Practice
An agency able to make short term payments to insurance companies within 7 days off receiving the invoice;	Payments are done within 7 days of receiving



Agency able to receive, review, and approve client applications for the service;	invoice; Approval of eligibility within 7 days of receipt of application;
An agency able to carefully monitor these short term payments to assure the amounts and use correspond to the necessary period of times to keep the insurance current and for it not to lapse;	There is a system in place to track clients' premium amount and payment due date in order to flag and get insurance premiums that missed the due date paid within the grace period;

**QUALITY**

**Unit of Service:**

- Number of successful monthly premiums to insurance companies.
- Number of successful co-payments and deductibles billed by physician offices or pharmacies.

**Service outcome**

Medically related health insurance premiums, co-pays, and deductibles completed on behalf of the HIV infected persons.

**Indicators**

100% of clients access HIV-related PMC or HIV medications supported by premiums, deductibles, and co-payment assistance.

<i>Standard</i>	<i>Outcome Measure</i>	<i>Numerator</i>	<i>Denominator</i>	<i>Data Source</i>	<i>Goal/Benchmark</i>
Provider agency has clearly stated written guidelines that list all criteria, including review of eligibility criteria and if a client is eligible for health insurance premium or cost sharing assistance;	Agency has documented criteria to determine eligibility for health insurance premium and cost sharing assistance;	Number of agencies with written guidelines for the payment of health insurance on behalf of client;	Number of contracted agencies for the payment of insurance, copay and deductible;	Agency files Policy & Procedure Manual;	100% of agencies have written guidelines for payment of health insurance premiums and/or cost sharing assistance;



Agency provides comprehensive orientation for new staff members that include LALAP written guidelines;	Client charts document adherence to guidelines;	Number of new staff with documented orientation;	Number of new staff;	Personnel file	100% of new staff receive orientation on guidelines;
Services are made available to all individuals who meet TGA program eligibility requirements;	Eligibility application and documents	Number of clients eligible for the service;	Number of clients requesting the service;	Client Chart Log	100% of charts documents client eligibility for Part A assistance;
Agency follows written guidelines, without exception, for all requests.	Providers of service knowledgeable of guidelines;	Instances for which guidelines were not followed;	Number of clients;	Client chart	100% charts document adherence to written guidelines;
Provider agency pays routine requests for payment within 7 days;	Client insurances not to be cancelled as a result of non-payment of premium;	Number of clients for which a cancellation notice was received;	Number of clients paid;	Client chart Payment logs	100% of client charts document payment within 14 days;
Provider agency pays emergency requests for payment within 48 hours;	100% of charts documents client eligibility for Part A assistance;	Number of clients with no eligibility documentation on record;	Number of eligible clients;	Client chart Payment logs	100% of client charts document emergency payment within 48 hours;



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Agency payable journal/logs document payment of insurance;	Number of clients for which the agency has received a insurance cancellation notice;	Client with insurance cancellation notice	Number of clients requesting premium payments	Client chart Log journals	90% of client case managers receive notice of payment within 5 days after check is sent;
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