



Prime Time Priorities for MADAP: Tips on Open Enrollment Preparations and Outreach to Uninsured

Hosted by Client Services
Maryland AIDS Drug Assistance Program
Prevention and Health Promotion Administration

October 22, 2024



Mission and Vision

MISSION

The mission of the Prevention and Health Promotion Administration is to protect, promote and improve the health and well-being of all Marylanders and their families through provision of public health leadership and through community-based public health efforts in partnership with local health departments, providers, community based organizations, and public and private sector agencies, giving special attention to at-risk and vulnerable populations.

VISION

The Prevention and Health Promotion Administration envisions a future in which all Marylanders and their families enjoy optimal health and well-being.



IDPHSB COMMITMENT STATEMENT

Our Commitment as a Bureau is to partner with communities to achieve health equity for all Marylanders. Our priority is to advance social and racial justice and we are committed to undoing racism within our public health systems. It is our responsibility to serve Marylanders without any bias or discrimination and ensure open access to services and resources.



Prime Time for 2024 – Session 2 Agenda

- MADAP/MADAP Plus Basic
- Health Care Insurance Benefits, Requirements and Notifications
- ☐ Plans Payable by MADAP
- Best Practices Q&A



Prime Time for 2025

MADAP Priorities



MADAP Eligibility

- ☐ To be eligible for MADAP services, an individual must:
 - Be a Maryland resident
 - ✓ Be HIV positive and prescribed HIV medication(s) on the MADAP formulary (MADAP does not cover pre or post-exposure treatment)
 - ✓ Have a household gross income below 500% of the Federal Poverty Level (FPL)
- An individual is prohibited from receiving full MADAP services if eligible for any Maryland Medicaid Programs or coverage groups that provide Medical Assistance (MA) with pharmacy benefits. MADAP provides temporary assistance (TAP) for clients with pending MA applications.



MADAP's Goal

The goal of MADAP is:

- To improve client access to HIV medications
- To increase viral suppression by increasing client adherence to medication regimens and helping clients monitor their progress in taking their medications
- To educate stakeholders with respect to the dynamic health insurance environment that we live in
- To support Ending the HIV Epidemic: A Plan for America in securing at least a 90% reduction of new HIV infections by 2030



MADAP Services

What MADAP covers for eligible clients:

- 100% of the cost of drugs on the formulary for clients with no insurance
- Deductibles, copays and coinsurance of drugs on the formulary for clients with insurance, except for Medical Assistance (MA)
- Health care insurance and prescription plan premiums for eligible clients



How does MADAP flow?

Eligibility

- Application submitted
- Determination made

Insurance & Payments

- Insurance verification
- Insurance premiums paid

Quality Assurance

- Client file audits for accuracy
- Client file audits for compliance

Pharmacy and Rebates

- Pharmacy claims
- Rebate dollars earned



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Insurance Verification and COB

After an applicant is deemed eligible for MADAP, the client's health care insurance information is verified to assist with coordination of benefits for pharmacy services and to determine MADAP Plus eligibility for premium assistance.

- Prescription coverage
- Medical coverage
- Dental coverage
- Vision coverage

Medicare plans (Part D prescription, Medicare Advantage, Medigap) QHPs (on and off exchange) **Employer Based Plans Private Insurers**



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MADAP Plus



MADAP Plus

- MADAP Plus is funded under the federal Ryan White CARE Act's Part B legislation.
- Assists clients with paying for their health insurance premiums to facilitate access to inpatient and outpatient health care as well as prescription coverage.
- MADAP must ensure that funds for drug costs and insurance premiums are spent as the *payer of last resort*.





MADAP Insurance and Payment Teams

Misty Carney, MADAP Center Chief
Nancy Etheridge-Guest, MADAP Deputy Chief

Insurance Eligibility Team

Patt Carter, Supervisor
Latashia Lemmon, Lead
Tanisha Carter, Specialist
Wanda Cunningham, Specialist
Fanta Tunkara, Specialist
Valencia Holmes, Specialist
Jasmine Manigault, Specialist

Insurance Payment Team

Ebone Forehand, Supervisor Hillary Fasciano, Lead Laketa Sherrill, Specialist Melissa Robinson, Specialist Sheryl Coleman, Specialist Kodon Leary, Specialist

MADAP Plus Eligibility

To qualify for MADAP Plus and receive insurance premium assistance, an applicant must:

- be MADAP eligible,
- be enrolled in an individual health or prescription plan, or covered under a spouse's or parent's health insurance plan that is eligible for MADAP Plus coverage

Medicare plans (Part D prescription, Medicare Advantage, Medigap)

QHPs (on and off exchange)

Employer Based Plans

Private Insurers



Eligible Health Care Plans

To be MADAP Plus eligible a health care insurance or prescription plan must:

- Cover the essential benefits required under the Affordable Care Act (ACA) or meet the current guidelines under Medicare:
 - Primary care services; HIV specialty services; inpatient and outpatient care;
 emergency services and pharmacy benefits,
- Provide coverage in the State of Maryland,
- Have a prescription cap no less than \$2,500 with billable (<u>not reimbursable</u>) prescription benefits,
- Have a formulary comparable to the MADAP formulary (this is a federal requirement)

Employer-Based Plans

Employer/Union/Retiree Plans

- Clients may receive premium assistance for employer-based plans, if
 - ✓ the client pays 50% or more of the premium, and
 - premiums can be billed to the client directly
 - ✓ Clients must provide a letter on company letterhead saying they pay 50% or more of their premium
- IF CLIENT'S EMPLOYER OFFERS HEALTH INSURANCE THAT COMPLIES WITH ACA STANDARDS FOR ESSENTIAL BENEFITS, THE CLIENT MUST ACCEPT IT DURING THE EMPLOYER'S OPEN ENROLLMENT PERIOD
- If the employer-based plan does not comply, the client must submit an explanation of the plan's benefits to MADAP in order to be approved for coverage of a qualified health plan



Plans Ineligible for MADAP Plus

MADAP Plus cannot pay for:

- Flexible Spending Accounts (FSA),
- Life insurance policies,
- Indemnity policies (AFLAC)
- Other non-medical benefits

Note: The client is responsible for payment of any ineligible portion of the premium.



Family Policies

Family Policies

- When a MADAP client is covered by a family health insurance plan and all other requirements are met, MADAP will pay the full premium costs for the plan.
- If the MADAP client is not the listed policyholder, the client's name and MADAP ID must be written on the invoice to avoid delays in payment and possible policy termination. If the client cannot be identified, MADAP can not pay the premium.

(Note: When possible, have the family policy listed in the MADAP client's name for plans that include non-MADAP family members.)

MADAP Can Pay for the Following Plans

Part D Plans

- MADAP will be able to pay for the following Insurer's Part D plans (PDP):
- •Cigna Rx
- Elixir (formerly Envision)
- Humana Insurance Co.
- Mutual of Omaha Rx
- SilverScript (Aetna Medicare Company)
- United HealthCare Ins Co (AARP Medicare)
- WellCare

Medicare Advantage Plans

- MADAP will be able to pay for the following Insurer's Medicare Advantage plans:
- Alterwood Advantage
- CareFirst Advantage
- Cigna Healthspring
- Humana Advantage
- Johns Hopkins AdvantageMD
- Kaiser Permanente Medicare Plan

Medigap Plans

- MADAP will be able to pay for the following Insurer's Medigap plans:
- CareFirst
- Cigna Health and Life Insurance Co.
- Humana Insurance Co.
- •United HealthCare Insurance Co.

Qualified Health Plans

- •MADAP will be able to pay for the following Insurer's QHP plans:
- •CareFirst On Exchange
- CareFirst Off Exchange
- •Kaiser Permanente On Exchange
- Kaiser Permanente Off Exchange
- United HealthCare

Dental Plans

- MADAP will be able to pay for the following Insurer's Dental plans
- CareFirst





Qualified Health Plan Open Enrollment

2025 Qualified Health Plans November 01, 2024 to

January 15, 2025





Qualified Health Plan Metal Level

QHP premiums and co-insurance are based on the plan's metal level (% insurer vs % enrollee)

Platinum = 90% vs 10% (limited availability)

Gold = 80% vs 20%

Silver = 70% vs 30%

Bronze = 60% vs 40%





Qualified Health Plan Costs

Sample consumer cost table

Cost-sharing reductions are available for Silver Plans if you are eligible.

	BRONZE	SILVER	GOLD	PLATINUM
What You Pay Each Month (Premium*)	\$	\$\$	\$\$\$	\$\$\$\$
What You Pay When You Go for Care (Out of Pocket Costs, including Deductible, Copays & Coinsurance)	\$55\$	\$\$\$	\$\$	\$
Percent of Total Average Costs of Care Your Plan Will Cover (Actuarial Value)	60% Your Plan 40% You	70% Your Plan 30% You	80% Your Plan 20% You	90% Your Plan 10% You
Might be good for you if you	don't plan to need a lot of health care services for the year.	need to balance your monthly premium with your out-of- pocket costs.	want to keep your out-of- pocket costs low but can afford a higher monthly premium.	plan to use a lot of health care services.

The actuarial value of your plan is the percentage of total average costs for covered benefits that a plan will cover. For example, if a plan has an actuarial value of 70%, on average, you would be responsible for 30% of the costs of all covered benefits. However, you could be responsible for a higher or lower percentage of the total cost of covered services for the year, depending on your actual health care needs and the terms of your insurance policy.

*Note: These numbers are not real and give an idea of different premium costs. Check the plans in your area for exact costs. You may find a lower premium on a higher metal level plan.



On-Exchange Qualified Health Plans

QHP Enrollment

- MADAP urges applicants to enroll in a qualified health plan through the Exchange, if they are eligible to use this option:
 - U.S. Citizen
 - Permanent resident for more than 5 years
 - "Lawfully present" non-citizens
- Individuals may be eligible for the Premium Tax Credit of varying levels based on the adjusted gross household incomes when applying for a qualified health plan through the *Exchange*.



Off-Exchange Plans

Off-Exchange plans:

- Some authorized brokers also enroll clients in Off-Exchange Plans
- In some cases, these plans may be more cost effective for the jurisdiction
- In general, these plans follow the same rules and timelines as Exchange plans
- However, these plans are not eligible for Exchange assistance (PTCs and CSRs)

Considerations when choosing a plan:

- Is an individual's preferred doctor and/or pharmacy in network?
- Does the local Part B/ADAP recommend and/or support specific plans?
- What are the costs of HIV medications and other medications under this plan?
 (Is your ARV covered?)
- What financial help is available for this individual?



Off-Exchange Plans

Using and maintaining coverage:

- After enrolling, individuals will receive their insurance card in the mail.
- They can use the card with in-network providers and pharmacies.
- Paying monthly premiums on time is essential, otherwise the individual risks being dropped from their plan.

Re-enrollment is required each year during open enrollment.

 The ACE TA Center recommends active enrollment each year to ensure the plan is the best fit.



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MADAP Plus and Premium Payments



Premium Payments

MADAP Plus Eligible, Yes or No?

The insurance vendor must be approved by the State Payment System (SPS) to be eligible for payment.

- In addition to the applicant's premium bill, the SPS requires information from the vendor (insurance companies, benefits managers) to receive approval for processing.
- MADAP has compiled a list of insurance vendors approved by the SPS used to determine MADAP Plus eligibility.
- If an applicant request premiums to be paid to a vendor not already on the approved list, the applicant must submit a completed W9 form with the insurance premium to be considered for MADAP Plus.

Premium Payments

- Once a client has submitted an insurance premium bill to MADAP and been approved by an insurance specialist for MADAP Plus, the bill is processed by a payment specialist for submission to the State Payment System (SPS) or remitted by credit card payment.
- Payment checks processed through the SPS are written from the State of Maryland, not from MADAP.

Send bills to MADAP!

Insurance invoices and bills:

Fax: 410-244-8617

Email: mdh.csopen_enrollment@maryland.gov

Premium Payments

- MADAP Plus processes premium payments for a three-month for most clients or may make as many six-month payments as possible to cover clients for more of the length of their eligibility period. It is vitally important that we have complete and accurate premium information in order to due so.
- For insurers that do not accept payment through SPS, a credit card is used if accepted.
- Applicants should notify MADAP of any past due payment notices from their insurance carriers so MADAP can confirm the status of processed payments or make payment adjustments if needed.
- Applicants must complete their Annual Recertification when due to avoid delays in processing premium payments.

Loss of Coverage

- Contact MADAP as soon as the applicant's coverage is suspended, or the applicant receives a notice of termination
- Send documentation or updated information to MADAP to:
 - verify termination of insurance coverage, and
 - address any changes in MADAP eligibility
- For applicants with CareFirst Off-Exchange QHP or Medigap plans, only:
 - Fax the completed Reinstatement Request Form to CareFirst,
 Fax #: 410-720-6067; <u>Attention: Josee Bihinda</u>
 - Notify MADAP to coordinate premium payment with reinstatement https://member.carefirst.com/carefirst-resources/pdf/reinstatement-request-form.pdf



Loss of Coverage, continued

- Contact MADAP as soon as the applicant's coverage is suspended, or the applicant receives a notice of termination
- Enrolling in a QHP under qualifying circumstances, must be done within 60 days of the applicant losing employment health benefits.







Prevention and Health Promotion Administration https://phpa.health.Maryland.gov



Contacting MADAP



MADAP 1223 W. Pratt Street Baltimore, MD 21223

Telephone Lines:

Local: 410-767-6535;

Toll Free:1-800-205-6308

Office hours:

8:30 AM to 4:30PM, Mon-Fri

Fax Lines:

410-333-2608,

410-244-8617

Pharmacy Help Line:

1-800-932-3918



MADAP applications and forms: Insurance invoices and bills:

client.services@maryland.gov

mdh.csopen_enrollment@maryland.go

Website for MADAP Forms:

https://health.maryland.gov/phpa/OIDPCS/Pages/MADAP.aspx



Questions and Answers



