

# **Ryan White Part A Quality Management**

Health Insurance Premium & Cost  
Sharing Assistance  
Service Delivery Model

**Palm Beach County**

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Palm Beach Care Council  
Quality Management Committee  
Medical and Support Services Committee

# **Ryan White Part A Quality Management**

## **Health Insurance Premium & Cost Sharing Assistance Service Delivery Model**

### **Statement of Intent**

All Ryan White Part A funded practitioners are required by contract to adhere, at a minimum, to the Public Health Service (HHS) Guidelines.

The goal of this program is to maintain a client's private health insurance coverage, thereby minimizing the client's reliance on the Ryan White Part A Program for services. Under no circumstances shall payment be made directly to recipients of this service.

**Please Note:** Medical case managers and insurance enrollment specialists must work with clients to explore in a diligent and timely manner all insurance options and evaluate the client's best option to ensure that deductibles and co-payments are reasonable. For Medicare Part D recipients, any client whose gross household income falls below 135% of the 2012 Federal Poverty Level (FPL) must be enrolled in the Low Income Subsidy (LIS) Program. In addition, for Medicare Part D recipients, any client whose gross household income falls between 136% and 150% of the FPL must be enrolled in the ADAP Wrap Around Pilot Project (AWAPP). For Medicare Part D recipients, any client whose gross household income falls above 150% of the FPL or does not qualify for the LIS and who fall into the "donut hole," must be referred to the ADAP Program.

### **Service Definition**

Provision of financial assistance for eligible individuals living with HIV, to maintain a continuity of health insurance or to receive medical benefits under a health insurance program. This includes premium payments, risk pools, co-payments, and deductibles.

An annual cost benefit analysis that includes an illustration of the greater benefit of using Ryan White funds for Insurance/Costs-Sharing Program vs. having the client on ADAP. Documentation of the low-income status of the client must be available. Insurance programs must cover comprehensive primary care services and a full range of HIV medications. Funds may not be used for social security.

## Standards of Care

### *Insurance Deductibles & Premiums*

Standard	Indicator	Data Source
1. Agency will have criteria to determine client eligible for Health Insurance deductibles & premiums assistance.	1.1 100% of clients are determined eligible for Health Insurance coverage assistance.	1.1.1 Documentation in client chart
2. Health Insurance policies provide comprehensive coverage.	2.1 100% of client's insurance policies provides comprehensive medical care and has a formulary with a full range of ARV medications.	2.1.1 Documentation in client chart

### *Co-Payments*

Standard	Indicator	Data Source
3. Agency will have criteria to determine client eligible for Health Insurance co-payments assistance.	3.1 100% of clients are determined eligible for Health Insurance coverage assistance. 3.2 100% of clients have private insurance and are required to pay a co-payment for their medications and/or medical care.	3.1.1 Documentation in client chart 3.2.1 Documentation in client chart
4. Health Insurance policies provide comprehensive coverage.	4.1 100% of client's insurance policies provides comprehensive medical care and has a formulary with a full range of ARV medications.	4.1.1 Documentation in client chart

\*Standards of Care are guidelines or flexible directions to be used in the treatment of HIV/AIDS. Departures from these standards may arise due to a client's unique situation and/or based on an experienced professional's judgment.