The ACA Illinois Experience and the Future for HIV Providers and Allied Health Workers

AAHIVM Health Reform Implementation Forum - Chicago

John Peller
AIDS Foundation of Chicago
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We can help you & your clients enroll!

• Questions about the Affordable Care Act and how the Marketplace affects you and your clients?
• AFC & AIDS Legal have a team of In-Person Counselors who can answer your questions about enrollment and eligibility and help enroll your clients!
• Call our hotline at (312) 784-9060
• Monday through Friday from 9:00-5:00
• For additional information about our In-Person Counselor Program, contact:

  Molly McAndrew
  In-Person Counselor Program Manager
  (312) 334-0915
  MMcandrew@aidschicago.org
Check out HIVHealthReform.org

And watch recent webinars!

- Health Reform Enrollment Begins on October 1st – Learn How to Pick a Plan!

- “We Can Do It!” Webinar series on Marketplaces 101 – The New Basics of Health Reform for Frontline HIV Workers

- Health Care Reform Open Enrollment: What HIV/AIDS Housing Providers Need to Know

- Get Ready to Enroll! Strategies to prepare your agency, staff & community for ACA open enrollment
Two ways people with HIV in IL will benefit from health care reform

1. Middle-income people will be able to buy more affordable, private insurance
   - ADAP clients: 17% will be eligible for the marketplace
   - 15% of ADAP clients will be ineligible (1,000 clients)

2. Most low-income adults will get Medicaid
   - ADAP clients: 68% will be eligible for Medicaid: 4,100 clients
   - 12,000+ additional clients added because of Medicaid by 2017

Marketplace ADAP & Medicaid Eligibility

**ADAP 0-500% of FPL**

- Medicaid 0-138% FPL
  - + Ryan White services

- Marketplace 139-400% FPL (with subsidies)
  - + Ryan White services

- Marketplace 401% FPL and up

**HIV HEALTH REFORM**
How’s the IL Marketplace Looking?

• 6 plans in Chicago (Aetna, BCBS, Coventry, Humana, Health Alliance, Land of Lincoln)

• Most Ryan White providers are in-network for at least 2 PPO plans
  – Exception: County & city clinics are not in any networks but can bill any PPO out-of-network

• HIV med coverage generally looks good, but drugs are on VERY high cost-sharing tiers
  – One company has all drugs on prior approval
  – One company is not covering any single tablet regimens
What is Illinois ADAP doing to help with costs?

- Will coordinate with ONLY with Aetna, Blue Cross, Humana, and Health Alliance plans.
- Will pay premiums up to $750/month
  - Including vision and dental add-ons.
- Will pay ALL out-of-pocket costs for HIV meds that are on the IL ADAP formulary.
- Will cover HIV meds that are not on the plan formulary.
- Enrollment information available at www.HIVCareConnect.com

IL Marketplace & HIV bottom line

- People with HIV will pay no premiums.
- People with HIV will pay no out-of-pocket costs for HIV meds.
- ADAP will help people with HIV meet their maximum out-of-pocket costs in the first few months of the year.
- Most people with HIV won’t have to switch providers.
- But – enrollment is challenging.
WHAT’S HAPPENING WITH MEDICAID?
Medicaid & ADAP

• People with HIV in Illinois CAN & should get ADAP benefits
  – Cover meds that Medicaid or managed care plans won’t cover because of prior approval (e.g., Complera, Stribild) or for other reasons
  – Pay co-pays for medications (if ADAP pharmacy is in-network)
Medicaid 1115 Waiver

• “Global waiver” to increase Medicaid funding for IL, including things that are not currently matchable

• Four domains: care coordination, population health mgmt, workforce, long term services

• Includes a health home for people with HIV
  – Additional funding for care coordination
Illinois moving at least 50% of all Medicaid recipients into a “Care Coordination Program” by January 2015.

This shift is because of a 2011 Illinois Medicaid Reform Law. Illinois has been traditionally a primarily fee for service system.

Illinois Medicaid Program moving from “fee-for-service” to “capitated, risk-based” payments.
Managed Care Structures in Illinois

Illinois Medicaid will have a unique structure - four different models of “Managed Care Entities”

1. Health Maintenance Organizations (HMO) (sometimes called Managed Care Organization (MCO)) - traditional insurance-based, with full-risk capitated payments.
   – Aetna Better Health, BlueCross, IlliniCare, Meridian, HealthSpring, Humana (others outside Chicago)

2. Managed Care Community Network (MCCN) - new provider-organized entity, with full-risk capitated payments.
   – Community Care Alliance of IL
   – CountyCare (will become an MCCN)
Illinois Medicaid will have a unique structure: Four different models of “Managed Care Entities”

3. Care Coordination Entity (CCE) – new provider-organized network, care coordination fee, medical/other services paid fee-for-service
   • Together4Health, Be Well, EntireCare (others outside Chicago)

4. Accountable Care Entity (ACE) – new provider-organized entity, initially paid through fee-for-service structure, transition to partial risk at month 19 and full-risk capitated payments after 3 years
   • Not established yet

• Illinois Medicaid will use a common set of quality measures to evaluate the performance of all managed care entities (HMOs, MCCNS, CCEs, and ACEs)
Important Managed Care Initiatives

- **Medicare-Medicaid Alignment Initiative:** Dual Eligibles - Begins in March.
  - commercial HMOs: Aetna Better Health, BlueCross, IlliniCare, Meridian, HealthSpring, Humana (others outside Chicago)

- **Integrated Care Management:** Seniors & People with Disabilities (SPD) - Begins in March.
  - Commercial HMOs: Aetna Better Health, BlueCross, IlliniCare, Meridian, HealthSpring, Humana (others outside Chicago)
  - CCEs Together4Health, Be Well, EntireCare (others outside Chicago)
  - MCCN: Community Care Alliance of IL
What about CountyCare?

- Started as an 1115 waiver – special Medicaid program that was an early expansion of Medicaid to low-income adults without children
  - CountyCare will continue!
  - Anyone enrolled now can stay enrolled in CountyCare
  - In July, Medicaid expansion population will be able to choose CountyCare or another plan
Enrollment Information For Recipients

• Recipients will receive information in the mail about the Managed Care Entity options (e.g. HMO, MCCN, ACE, CCE) available to them and have a certain window of time to pick one.

• Once an entity is picked, the Medicaid recipient is locked into that entity for one year – Some exceptions (including Medicare)
How can case managers & providers can help clients

• Encourage clients to open all of their mail. Clients should save letters/mail for the case manager or someone they trust to review with them.

• Assist with calling the enrollment broker with the client or make sure client has phone number and knows when to call broker and which plan to request.

• Remind clients that if they do not choose a plan they will be assigned to one. Clients may need to be reminded about deadlines.

• Help clients switch plans if there are any problems or issues with the plan they chose or were assigned to. Assess problems and come up with solutions to work on together.
What keeps me up at night

- Undetectable viral load = reduced risk of HIV transmission = fewer HIV cases = less cost to the taxpayer
  - Financial incentive to the state – get people to undetectable
- But Medicaid managed care organizations & commercial insurance aren’t monitoring HIV outcomes – what are they doing to help people with HIV get to undetectable? What’s their incentive?
Resources

- List and short description of 5 CCEs and 1 MCCN
- ACE Background and Overview
  - [http://www2.illinois.gov/hfs/SiteCollectionDocuments/ACE_overview.pdf](http://www2.illinois.gov/hfs/SiteCollectionDocuments/ACE_overview.pdf)
- Integrated Care Project (ICP)
  - [http://www2.illinois.gov/hfs/PublicInvolvement/cc/icp/Pages/default.aspx](http://www2.illinois.gov/hfs/PublicInvolvement/cc/icp/Pages/default.aspx)
- Medicare-Medicaid Alignment Initiative (e.g. Duals Project)
  - [http://www2.illinois.gov/hfs/PublicInvolvement/cc/mm/Pages/default.aspx](http://www2.illinois.gov/hfs/PublicInvolvement/cc/mm/Pages/default.aspx)
- Children With Complex Health Needs
  - [http://www2.illinois.gov/hfs/PublicInvolvement/cc/ccmn/Pages/default.aspx](http://www2.illinois.gov/hfs/PublicInvolvement/cc/ccmn/Pages/default.aspx)
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