

Client Name/Client ID: _____



Health Insurance Assistance (HIA) Acknowledgement Form

HRSA Definition:

Health Insurance Premium and Cost Sharing Assistance (Health Insurance Assistance or HIA) 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 Ryan White HIV/AIDS Program (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.

Services:

The 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 out-of-pocket costs such as premium payments, co-payments, coinsurance, and deductibles. Please refer to Texas Department of State Health Services (DSHS) Policy 260.002 (Health Insurance Assistance) for further clarification and guidance.

The cost of insurance plans must be lower than the cost of providing health services through grant-supported direct delivery (be “cost-effective”), including costs for participation in the Texas AIDS Drug Assistance Program (ADAP).

HIA may be extended for job or employer-related health insurance coverage and plans on the individual and group market, including plans available through the federal Health Insurance Marketplace (Marketplace). HIA funds may also be used towards premiums and out-of-pocket payments on Medicare plans and supplemental insurance policies, as long as the primary purpose of the supplemental policy is to assist with HIV-related outpatient care.

Funds may be used for:

- Purchasing health insurance (both job or employer-related plans and plans on the individual and group market) that provides comprehensive primary care and pharmacy benefits for clients that provide a full range of HIV medications;
- Standalone dental insurance premiums when cost effective and/or cost sharing assistance when provided in compliance with requirements described in HRSA Policy Clarification Notice (PCN) 16-02, including the FAQ;
- Paying co-pays (including co-pays for prescription eyewear for conditions related to HIV infection), deductibles, and co-insurance for medical and dental plans on behalf of the client;
- Providing funds to contribute to a client’s Medicare Part D true out-of-pocket (TrOOP) costs; and/or
- Certain tax liabilities

Limitations:

Funds may NOT be used for:

- HIA cannot be in the form of direct cash payments to clients.
- HIA excludes plans that do not cover HIV-treatment drugs; specifically, the plan must cover at least one drug in each class of core antiretroviral therapeutics from the HHS clinical guidelines as well as appropriate primary care services.
- Any cost associated with liability risk pools cannot be funded by RWHAP.
- RWHAP funds cannot be used to cover costs associated with Social Security.
- HIA funds may not be used to pay fines or tax obligations incurred by clients for not maintaining health insurance coverage required by the Affordable Care Act (ACA).
- HIA funds may not be used to make out-of-pocket payments for inpatient hospitalization and emergency department care.
- HIA funds may not be used to support plans that offer only catastrophic coverage or supplemental insurance that assists only with hospitalization.
- HIA must not be extended for Consolidated Omnibus Budget Reconciliation Act (COBRA) coverage if a client is eligible for other coverage that provides the required minimal level of coverage at a cost-effective price.

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Education Provided to Client Regarding the following:

Co-payments, Premiums, Deductibles, and Co-insurance

- Otherwise eligible Clients with job or employer-based insurance coverage, Qualified Health Plans (QHP), or Medicaid plans can be provided assistance to offset any cost-sharing programs may impose. Clients must be educated on the cost and their responsibilities to maintaining medical adherence.
- Education was provided to the Client regarding what is reasonably expected to be paid for by an eligible plan and what RWHAP can assist with to ensure healthcare coverage is maintained.
- Agencies will ensure payments are made directly to the health or dental insurance vendor within five (5) business days of approved request.

Cost Sharing Education

- Education was provided to the Client regarding cost-sharing reductions to lower their out-of-pocket expenses. It must be evidenced in the Client's primary record that the individual must receive a premium tax credit and enroll in a *silver level plan* offered in the Marketplace.
- Clients who are not eligible for cost-sharing reductions (those under 100% FPL in Texas; those with incomes above 400% FPL; clients who have minimum essential coverage other than individual market coverage and choose to purchase in the marketplace; and those who are ineligible to purchase insurance through the marketplace) are provided education on cost-effective resources available for the Client's health care needs.

Premium Tax Credits Education

- Agencies have documented evidence in the Client's primary record of the enrollment in a QHP in the Marketplace, as applicable to the individual (clients that are between 100-400% FPL without access to minimum essential coverage).
- Education was provided to the Client regarding tax credits and the requirement to file income tax returns is/will be documented in the Client's primary record.
- Additionally, Client was provided education on the importance of reconciling any Advanced Premium Tax Credit (APTC) well before the IRS tax filing deadline.

By signing this form, Client is acknowledging the above education was provided, as well as understood.

Client Signature: _____ Date: _____

Case Manager Signature: _____ Date: _____