

Group	Plans	Description*	Eligible Services Under Plan							
			Uninsured Drug Costs	Health Premiums	Health Copays and Deductibles	Drug Copays and Deductibles	Dental Premiums	Dental Copays and Deductibles	Vision Premiums	Vision Copays and Deductibles
18005	LA NI	Uninsured (no HIP services)	X							
	LA DV	No health/drug insurance but has dental or vision. Receives uninsured drug services and insured dental/vision services.	X				X	X	X	X
	LA CH	Insurance in flux - to be treated like uninsured for meds, but eligible for premium payments	X	X			X		X	
	LA MPB	Insured under Medicare Part B, but no Part D plan to provide drug coverage. Receives uninsured drug coverage.	X	X	X		X	X	X	X
	LA MEU	Clients who have applied for Medicaid but are not yet active. Currently uninsured.	X							
18002	LA PI	Insured drug cost-shares only				X				
	LA PIPR	Insured drug cost shares and premium payments only (no non-drug cost shares)		X		X	X		X	
	LA HPML	Insured with medical and drug cost-shares (no premiums)			X	X		X		X
	LA HFI	Insured with full HIP (premiums, all cost-shares)		X	X	X	X	X	X	X
	LA MEI	Clients who have applied for Medicaid but are not yet active. Currently insured.		X	X	X	X	X	X	X
18400	LA HPR	Insured with premium payments ONLY (no cost-shares or uninsured drug coverage)		X			X		X	
	LA HML	Insured with non-drug cost-shares ONLY (no premiums or any drug coverage)			X			X		X
	LA HF	Insured with non-drug cost-shares and premiums ONLY (no drug coverage)		X	X		X	X	X	X
18902	LA 01	Medicare Part D drug coverage and eligible for all other insured services		X	X	X	X	X	X	X
	LA CT	Medicare Part D recent entry into donut hole or recent recovery from donut hole. Automatically assigned by Ramsell as needed. Not manually assigned by LA HAP staff.		X	X	X	X	X	X	X
18600	LA MCHCV	Full Medicaid; approved for uninsured HCV medications only	X							