



# Louisiana Health Insurance Program

*A component of the Louisiana Health Access Program*

P.O. Box 66913

Baton Rouge, LA 70896

(888) 647-1269 (toll free phone)

(225) 424-1799 (phone)

(225) 927-1267 (fax)

## Introduction to LA HAP and HIP Coverage for Dental Providers

**The Louisiana Health Access Program (LA HAP)** is a secondary payer program that uses federal grant resources to provide access to medications and/or insurance services for individuals who meet specified medical and financial criteria. Funding is made available through the Health Resources and Services Administration (HRSA) and LA HAP is administered through the Louisiana Office of Public Health.

Providers may verify a member's current eligibility by calling LA HAP staff at 504-568-7474.

**The Health Insurance Program (HIP)** is a component of LA HAP that is administered by a Baton Rouge-based social services organization, HAART Inc., to process payments to medical and dental providers on behalf of LA HAP members.

Providers may check status of claims by calling HIP staff at 225-424-1799.

### **Coverage of Dental Services: Medicare & Employee Group Plans**

HIP covers the costs of copays, coinsurance, and deductibles associated with a member's primary insurer. Additionally, the following services may be covered by HIP:

- Insurer-covered services whose cost exceeds the annual dollar maximum set by the insurer, up to an overall maximum of \$5,000 per year;
- Insurer-covered services whose frequency exceeds the service limit set by the insurer, provided the cost does not exceed an overall maximum of \$5,000 per year
  - Example: if the insurer covers a crown replacement every 3 years and a member requires one sooner, LA HAP can cover the cost of an earlier crown replacement if considered medically necessary.

In both instances described above, HIP will reimburse network providers according to the fee schedule of the member's primary insurer. For example, if a dentist bills \$700 for a service and the insurer's negotiated in-network reimbursement rate for that service is \$500, HIP will reimburse the provider \$500.



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## **Coverage of Dental Services: LA HAP/Guardian Dental Plan**

HIP has worked with Guardian to offer an optional group plan specially designed for and exclusively available to HIP members called the LA HAP/Guardian Dental Plan. This plan is designed to simplify the billing process for both members and providers by having no waiting period, no deductible, and no cost-sharing. More information on this plan, including the complete Certificate of Coverage, can be found at [www.lahap.org/dental](http://www.lahap.org/dental).

## **Billing HIP**

*For LA HAP/Guardian Dental Plan members:* Providers may bill Guardian for the full cost of covered services. In-network providers are reimbursed according to Guardian's negotiated fee schedule; out-of-network providers are reimbursed according to the 95% percentile of usual, customary and reasonable (UCR) charges.

*For members with other dental coverage:* After billing the member's primary insurance, providers have the option of billing HIP directly by submitting a HCFA-1500 form along with a copy of the service-related Explanation of Benefits. If the provider chooses to bill the member directly instead, the HIP member must forward medical bills to the HIP office for payment. *Please note that HIP cannot reimburse its members for any payment they may make to providers themselves.* While it is every provider's choice as to whether or not they agree to work with HIP, most members have few options for accessing affordable health care apart from HIP and we encourage you to contact us with any questions you may have about the program.

Please note that changes in income or insurance coverage may affect a member's eligibility for services and cause their LA HAP/HIP benefits to be terminated at any time. Therefore, your office should contact LA HAP at 504-568-7474 to verify eligibility on the day that services are rendered, prior to them being rendered.

If you have any questions about billing, HIP staff can be reached by calling 225-424-1799. Medical cost-share bills and EOBs can be provided to HIP via fax or mail:

### **Via fax:**

**225-927-1267**

**Attn.: HIP**

### **Via mail:**

**HAART Attn.: HIP**

**P.O. Box 66913**


**Baton Rouge, LA 70896**



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## LAHAP Enrollment Card: Sample

|   |   |
|---|---|
| <b>LA HAP<br/>Enrollment Card</b>       | <br>Louisiana Health Access Program   |
| Member Name<br><b>JOHN DOE</b>          | <b>Approved Services</b><br><br>Health Premiums<br>Health Copays and Deductibles<br>Drug Copays and Deductibles<br>Dental Premiums<br>Dental Copays and Deductibles<br>Vision Premiums<br>Vision Copays and Deductibles |
| Member ID<br><b>12345678900</b>         |   |
| RxBIN <b>004519</b>                     |   |
| RxPCN <b>LA01AP</b>                     |   |
| RxGroup <b>18002</b>                    |   |
| Card Expiration Date: <b>MM/DD/YYYY</b> |   |

Front of Card

|   |  |
|---|--|
| <b>Manage your<br/>benefits online</b><br><a href="http://www.lahap.org/apply">www.lahap.org/apply</a>  | <br>Louisiana Health Access Program  |
| <b>Notice to Member:</b> Present this card when receiving any services covered by LA HAP.   | <b>Customer Service<br/>and Provider Inquiries</b><br><br><b>Health/Dental/Vision:</b> 225-424-1799<br>Weekdays 8:00am - 4:30pm CST<br><br><b>Pharmacy:</b> 888-311-7632<br>Fax: 800-848-4241<br>Weekdays 7:00am - 9:00pm CST<br>Saturdays 10:00am - 7:00pm CST<br><br><b>Member Eligibility:</b> 504-568-7474<br>Weekdays 8:00am - 5:00pm CST |
| <b>Notice to Provider:</b> Approval depends on member eligibility at time of service.   |  |
| <b>Mail Health/Vision/Dental secondary claims and Explanations of Benefits (EOBs) to:</b><br>Health Insurance Program<br>PO Box 66913<br>Baton Rouge, LA 70896<br><b>Or Fax to:</b> 225-927-1267 or<br>225-927-2462 |  |

Back of Card

The LA HAP card serves to verify eligibility only. Non-drug claims cannot be adjudicated at point of care. Insured HIP members should first present their primary private insurance card for adjudication. Any remaining copay, coinsurance or deductible should then be billed to HIP via submission of a claim form within 180 days.



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## LA HAP Organizational Structure

### Louisiana Health Access Program (LA HAP)

- Process L-DAP & HIP enrollment through single application
- Available to applicants up to 500% FPL with LA residency, specific medical criteria, and who are ineligible for Medicaid

*Managed through the Office of Public Health at the Louisiana Department of Health*

### Louisiana Drug Assistance Program (L-DAP)

- Drug costs for uninsured members
- Drug cost shares for insured members

*Contracted through Ramsell, a California-based Pharmacy Benefits Manager*

### Louisiana Health Insurance Program (HIP)

- Insurance premiums
- Medical (non-drug) cost shares

*Contracted through HAART, a Baton Rouge-based social services agency*

