

Welcome to LA HAP!



This webinar will cover...

- The background and structure of LA HAP
- What LA HAP does and does not cover for particular client populations
- Tips for using LA HAP coverage
- Tips for completing LA HAP application

Background/Structure

What is LA HAP?

-The LOUISIANA HEALTH ACCESS PROGRAM

- The AIDS Drug Assistance Program (ADAP) is a federal Ryan White funding source awarded to every state by the Health Resources and Services Administration (HRSA).
 - The Louisiana STD/HIV/Hepatitis Program (SHHP) receives ADAP funding from HRSA.
- ADAP funds can be used to provide medication and insurance services to eligible individuals with a positive HIV diagnosis.
 - SHHP uses ADAP funding to support medication and insurance services through our programs called L-DAP and HIP– collectively known as LA HAP.

Louisiana Health Access Program (LA HAP)

- Process L-DAP & HIP enrollment through single application
- Available to applicants up to 500% FPIG with LA residency and HIV diagnosis who are not eligible for full Medicaid

- **Aged 19-64**
- **Meet U.S. citizenship requirements**
- **Income 0-138% FPIG**

Louisiana Drug Assistance Program (L-DAP)

- Full drug costs for uninsured clients
- Drug cost shares for insured clients

Managed through



Louisiana Health Insurance Program (HIP)

- Insurance premiums: medical, dental & vision plans for insured clients
- Non-drug cost shares for insured clients

Managed through



Some changes over the years

- March 2021: LA HAP launched online application
 - Client's can now apply, update information, message LA HAP staff all through the LA HAP online portal
 - www.lahapenroll.com
- July 1st, 2021: LA HAP increased the household income eligibility to up to 500% of the Federal Poverty Level ([FPL](#))
 - Previously 400% FPL
- July 1st, 2022: LA HAP eliminated the 6 month recertification requirement to align with [HRSA's Policy Clarification Notice \(PCN\) 21-02](#)
 - LA HAP switched to an annual/12 month enrollment schedule for all eligible LA HAP clients

Coverage

What does HIP cover?

- Insurance premiums
 - Medical
 - Dental
 - Vision
 - Prescription drug
- Insurance cost-shares
 - Co-pays
 - Coinsurance
 - Deductibles
 - Durable Medical Equipment (capped at \$5000 per year per client)
 - Medical supplies (i.e. diabetic supplies)
- Excluded:
 - any costs associated with an inpatient hospital stay
 - Any service/product not covered by primary insurer

What does L-DAP cover?

- **Uninsured clients**

- Full cost of medications on LA HAP uninsured formulary

- Excluded for uninsured:
 - Any medications not on formulary, including all non-HIV/HCV medications

- **Insured clients**

- Medication cost-shares for all prescription drugs on primary insurer's formulary

- Excluded for insured:
 - Erectile dysfunction drugs
 - Nutrition supplements
 - OTC drugs
 - Cosmetic drugs

Medicare

- Offered to most Americans when they turn 65
- Offered to disabled Americans (Parts A and B) after receiving disability benefits from Social Security for 24 months
- If you turn it down, you can take advantage of an annual open enrollment period later. But, you will have to pay a penalty

“Original” Medicare

Part A: hospital insurance

Part B: medical insurance

Part D:
prescription drug coverage

Part C: privately-administered plan combining Parts A, B, and usually D

Optional coverage for Medicare,
Requirement for LA HAP clients

Medicare Supplemental

Part A: hospital insurance

Part B: medical insurance

Part D: prescription drug coverage

Part C: privately-administered plan combining Parts A, B, and usually D



Medicare Supplemental Plans (sometimes referred to as "Medigap")



Optional coverage for Medicare,
Requirement for LA HAP clients



Optional coverage for Medicare,
Optional for LA HAP clients

LA HAP & Medicare (1)

LA HAP Coverage area	Medicare Only / Partial Dual Eligible	Full Dual Eligible
Part A premiums/cost-shares	Not covered	
Part B premiums	Covered	Not covered
Part B cost-shares	Covered	Not covered
Part C premiums	Covered	
Part C cost-shares	Covered	Not covered
Part D premiums/cost-shares	Covered	Not covered
Medicare Supplement premiums/cost-shares	Covered	Not covered
LA HAP/Guardian Dental Plan	Covered	

LA HAP & Medicare (2)

- All Medicare applicants with income <150% FPL should apply for Low Income Subsidy (LIS) annually
 - Exception: dual eligible clients automatically receive LIS
- Apply at <https://www.ssa.gov/medicare/prescriptionhelp/>
- If receiving LIS:
 - LA HAP may contact you for documentation if we are unable to verify LIS status with Medicare
- If not receiving LIS:
 - Attach printout of LIS online application submission page dated within current calendar year, OR
 - Attach printout of LIS denial letter dated within the last 12 months

LA HAP & Medicaid

- No LA HAP services available for full Medicaid recipients
- Applicants presumed eligible for Medicaid based on reported age and income are ineligible for LA HAP
 - Exception: applicant has applied for/been denied Medicaid coverage within the past 6 months
 - Denial letter must be attached to LA HAP application
- Some services available for partial Medicaid recipients
 - Examples: dual Medicare/Medicaid recipients, applicants within the Corrections system

LA HAP & Employer-based plans

- Can cover premiums and cost-shares for employer-based plans
- HIP will reach out to employer to explain program and receive permission to pay premiums on behalf of client
 - No medical information will be disclosed
 - HIP can only pay client portion of premium
 - Employer Insurance HR Form must be completed

The application

How to apply

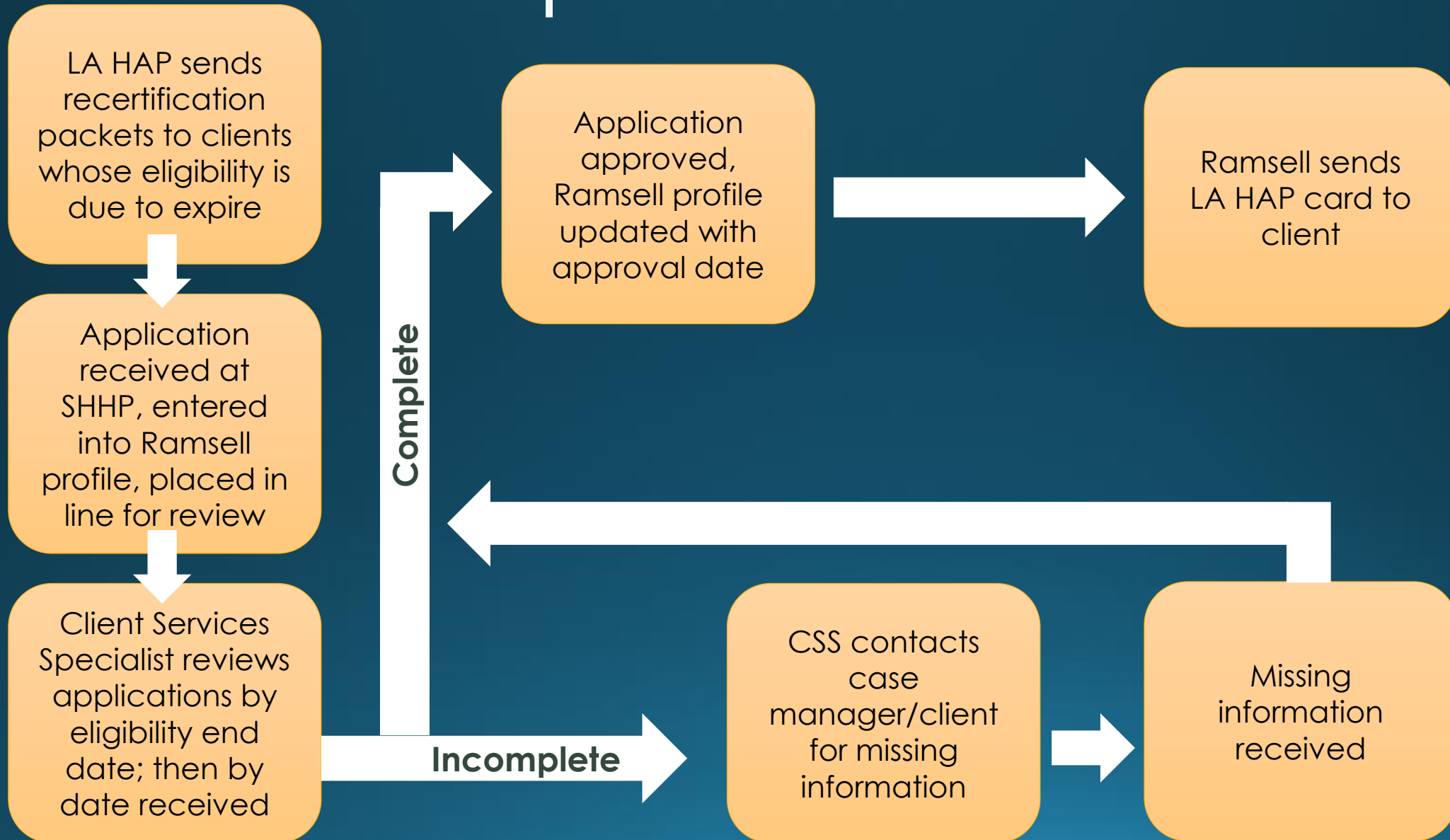
- An applicant may work with a case manager at a community-based organization or clinic, or
- Complete the application themselves
- www.lahap.org/apply

*Per HRSA, recertification must be completed **every 12 months**.*

- Eligibility ends 12 months after application approval date at the end of that month
 - Example: A client enrolls and is approved May 16th. They must recertify 12 months later (May) by the end of the month (30th)

Approved May 16th 2024 → Recertify by May 31st 2025 → Recertify by May 31st 2026 → etc.

The process



Which forms do I fill out when I apply/recertify?

- If **your insurance status isn't changing**, fill out the LA HAP application only.
- If you **do not have insurance but are about to enroll in an insurance plan**, fill out the LA HAP application for uninsured services **and** the Insurance Add/ Change form for your new insurance plan.
- If you **have insurance but are about to enroll in a *different* insurance plan**, fill out the LA HAP application for your existing insurance plan **and** the Insurance Add/Change form for your new insurance plan.

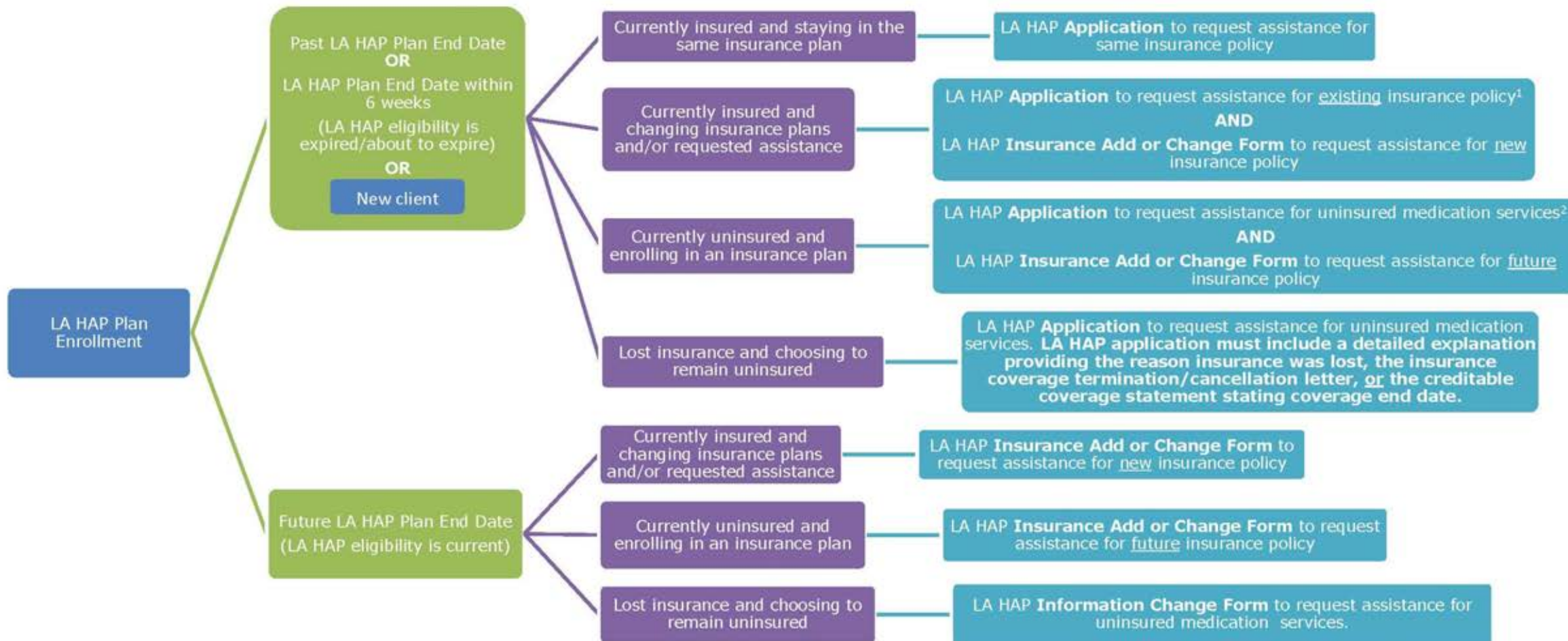
See www.lahap.org → “Apply for LA HAP” for more information on which forms to submit when.

Form(s) to submit to LA HAP when a client enrolls in, loses, or changes their insurance

Step 1: Log into the Ramsell system and check to see if the client is **New**, OR if the client's **LA HAP Plan Enrollment** has a **past LA HAP Plan End Date, a LA HAP Plan End Date within 6 weeks, or a future LA HAP Plan End Date**.
 If you do not have Ramsell access, submit the [Ramsell User Request and Confidentiality Form](#) to request access.

Step 2: Confirm with the client if they are/have **currently insured, currently uninsured, or lost insurance and choosing to remain uninsured**.

Step 3: Complete and submit the **appropriate form(s)** based on the decision tree below. All forms are available on lahap.org under ["Forms and Applications."](#)



¹ LA HAP application is completed to request assistance for the existing insurance policy which will be needed until the new insurance policy is active.

² LA HAP application is completed to request assistance for uninsured medication services which will be needed until the future insurance policy is active.

Required documentation

- Attach to application:
 - *For all applicants:* proof of income for all sources
 - *For all applicants:* proof of Louisiana residence for client
 - *For non-dual eligible Medicare beneficiaries with income < 150% FPL:* Proof of LIS status or LIS application
 - Updates to LIS in 2024
 - *For applicants requesting premium assistance for first time on a new plan:* Copy of premium invoice
 - *For applicants continually requesting premium assistance:* annual submission of updated premium invoice for the current calendar year

More detailed information found on www.lahap.org under "Apply for LA HAP"

Proof of income

Attach one of the following for each source of income your household has:

- Pay stub from the last 6 months (2 preferred)
- A signed legal affidavit from the last 6 months
- The [LA HAP Certification of No Income/Cash Only Income Form](#) from the last 6 months
- Benefit award letter from the current award year (SSDI, etc.)
- Benefit check from current award year
- Tax document from most recent available year

Are you requesting premium help for the first time on a new plan?

- Include an **invoice** from the insurance company.
- Premium invoices for the current calendar year must be submitted at the beginning of each year

Submitting the application

Fax:

504-568-3157

REDCap:

<https://laredcap.opd.dhh.la.gov/surveys/?s=EYNAR7LHJXFW4CDT>

Online:

www.lahapenroll.com
www.lahap.org/apply

Mail/drop-off:

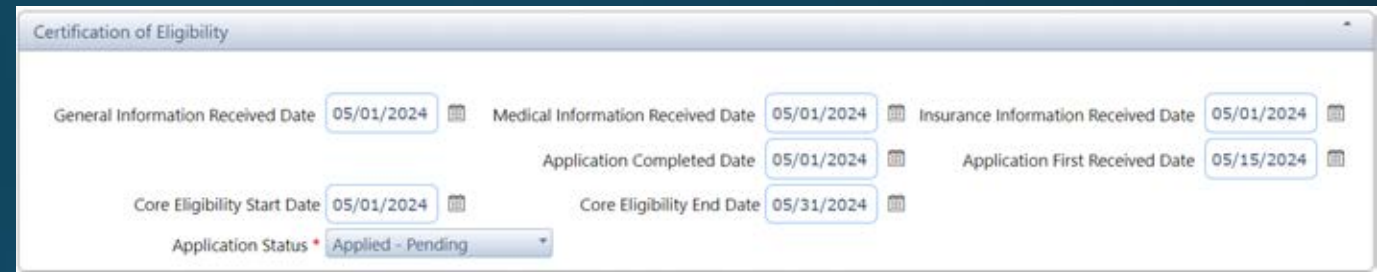
LA HAP
1450 Poydras St, Suite 2136
New Orleans, LA 70112

No applications
accepted by
email.

Tracking the application

When the application is received, LA HAP staff updates the client's Ramsell profile.

- Only caseworkers have access to the Ramsell Member Profile
- Don't have access? Return the [Ramsell User Request form](#) to ldap@lahap.gov
- Clients can call LA HAP at 504-568-7474 to verify that an application was received



The screenshot displays a web form titled "Certification of Eligibility". It contains several date fields with calendar icons, an application status dropdown, and a "Print" icon. The data shown is as follows:

Field	Value
General Information Received Date	05/01/2024
Medical Information Received Date	05/01/2024
Insurance Information Received Date	05/01/2024
Application Completed Date	05/01/2024
Application First Received Date	05/15/2024
Core Eligibility Start Date	05/01/2024
Core Eligibility End Date	05/31/2024
Application Status	Applied - Pending

- Clients who submit their applications online can monitor application status via client online portal at www.lahapenroll.com

Incomplete applications

1) LA HAP staff :

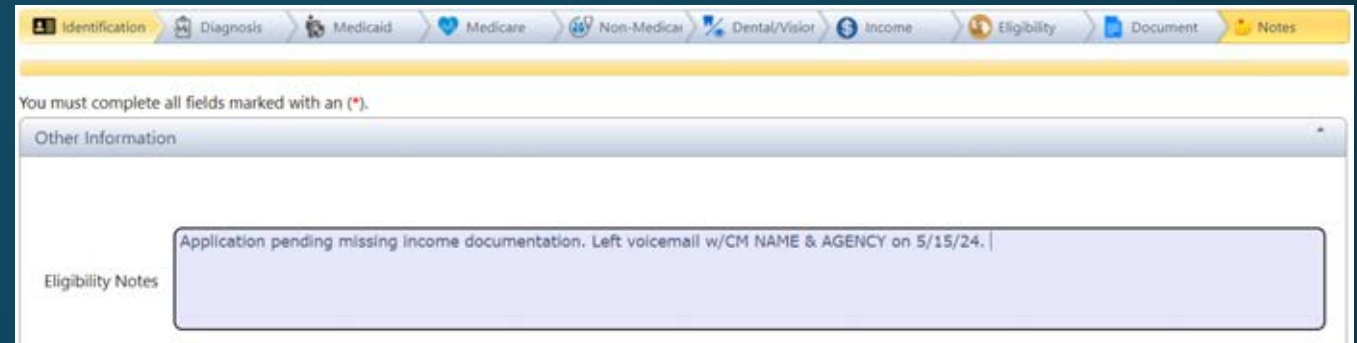
- Will call client/case manager if the problem can be solved over the phone
- If client cannot be reached, an incomplete letter will be sent
- If client is case managed and cannot be reached, voicemail will be left
- Updates “Notes” tab of client’s Ramsell profile to document application status

2) Client/Case manager:

- Tracks down missing information
- Returns to LA HAP

3) LA HAP staff:

- Confirms follow-up information was received in “Notes” tab; files for processing
- Application will be reviewed again by LA HAP staff



The screenshot shows a web application interface with a navigation bar at the top containing tabs for Identification, Diagnosis, Medicaid, Medicare, Non-Medical, Dental/Visior, Income, Eligibility, Document, and Notes. Below the navigation bar, a message reads: "You must complete all fields marked with an (*)." The main content area is titled "Other Information" and contains a text box with the following text: "Application pending missing income documentation. Left voicemail w/CM NAME & AGENCY on 5/15/24." The text box is labeled "Eligibility Notes" on the left side.



The screenshot shows a web application interface with a navigation bar at the top containing tabs for Identification, Diagnosis, Medicaid, Medicare, Non-Medical, Dental/Visior, Income, Eligibility, Document, and Notes. Below the navigation bar, a message reads: "You must complete all fields marked with an (*)." The main content area is titled "Other Information" and contains a text box with the following text: "Application pending missing income documentation. Unable to reach client via phone call or leave a voicemail 5/15/24. Incomplete letter mailed to client 5/15/24." The text box is labeled "Eligibility Notes" on the left side.

Note Added Date	Note Description	Note Added By
05/15/2024 09:54 AM	Follow up fax received. To be given to appropriate LA HAP staff.	ERIN JENSEN

Important application tips (1)

- To the extent possible, assist your clients with the application process– not the other way around
 - LA HAP fields complaints from clients who were unaware which insurance plan they were placed into, which paperwork has been submitted on their behalf, etc.
- If your client wishes you to have access to their LA HAP information:
 - Make sure your name and agency are entered into Section 15 of the LA HAP application

SECTION 15: PROVIDER INFORMATION		
1. Do you have one or more providers or case managers who you want to have access to your LA HAP records? <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Provider 1 First and Last Name	3. Provider 1 Entity/Agency Name	4. Provider 1 Phone Number and Extension
5. Provider 2 First and Last Name	6. Provider 2 Entity/Agency Name	7. Provider 2 Phone Number and Extension

Important application tips (2)

- Report any information change to LA HAP, especially:
 - Address change
 - Information Change Form
 - Loss of insurance coverage
 - Information Change Form
 - Gain of insurance coverage
 - Insurance Add/Change Form
 - Change in insurance premium amount (*example: Medicare Part D premiums change at the beginning of each calendar year*)
 - Send updated invoice to HIP

Additional Forms

Certification of No
Income/Cash-Only Income

Certify that a client has either ZERO income or CASH income; cannot be used to certify any other form of income

Disenrollment

Disenroll a client from LA HAP

Insurance Add/Change

Add or change an insurance plan, or to add or change types of insurance assistance, to your LA HAP coverage

Information Change

Inform LA HAP of loss of insurance coverage, change of address, change of name, etc.

Proof of Positivity

Verify proof of positivity; this is especially useful for clients who are newly diagnosed or who have moved to Louisiana from another state

Release of Information

Grant permission to an agency to access and release client information to/from LA HAP; form MUST be initiated and signed by client

Interpreting the Ramsell UI (1)

You must complete all fields marked with an (*).

Document Upload

Document Checklist

Applicant must include proof of income for themselves and their household. Applicant applying for premium assistance time with LA HAP must include a copy of the premium statement/invoice. Applicant with Medicare must include proof application or status.

- Proof Of Residency *
- Copy of Health Insurance Card *
- Proof of Income - Applicant *

Document Type

Select Document Type

Document List

File Name	File Type	File Processed Date
'Insurance Documents.05092024.103242.pdf'	Insurance Documents	05/09/2024 12:33 PM
'Insurance Documents.03202024.112834.pdf'	Insurance Documents	03/20/2024 01:27 PM
'LA HAP Application.08022023.111457.PDF'	LA HAP Application	08/02/2023 01:15 PM
'LA HAP Application.08042022.062044.PDF'	LA HAP Application	08/04/2022 08:21 AM
'LA HAP Application.02102022.062851.PDF'	LA HAP Application	02/10/2022 08:29 AM
'Copy of Insurance Card.01202022.091221.PDF'	Copy of Insurance Card	01/20/2022 11:12 AM
'Insurance Documents.01202022.091158.pdf'	Insurance Documents	01/20/2022 11:12 AM
'LA HAP Application.08192021.085139.PDF'	LA HAP Application	08/19/2021 10:52 AM

Tabs under each client profile allow you to view information about client and access submitted documents

Interpreting the Ramsell UI (2)

- Updated manually by LA HAP staff based on information provided by case managers/clients
- Do not use information in Ramsell UI to complete an application

Applicant Income Information

Check each type of INCOME that applicant and others in applicant's household receive and any DEDUCTIONS claimed on a tax return.

Household Member Name* test.test Relationship Applicant Cash Only Income Income No Income of Any Kind

Income Documentation Tax Return Pay Stubs Award Letters Bank Statements Other

Source Of Income	Amount(\$)	Frequency	Total Amount(\$)
Cash	\$0.00	Select One	\$0.00
Salary/Wages/Commission/Tips	\$700.00	Weekly	\$36,400.00
Self-Employment	\$0.00	Select One	\$0.00
Any Foreign Earnings	\$0.00	Select One	\$0.00
Any Non-Taxable Interest	\$0.00	Select One	\$0.00
Unemployment Benefits	\$0.00	Select One	\$0.00
Pensions	\$0.00	Select One	\$0.00

1st Non-Medicare Insurance

Insurance Type Employer-Sponsored Grc

Insurance Company & Plan Name AARP Medicare Dental Insurance Plan

Member ID Number ID#

Group Number GROUP#

Insurance Start Date 01/01/2024

Insurance End Date 12/31/2024

2nd Non-Medicare Insurance

Insurance Type Marketplace

Insurance Company & Plan Name BCBC Blue Max 60/60 \$3000

Member ID Number ID#

Group Number GROUP#

Insurance Start Date 01/01/2023

Insurance End Date 12/31/2023

Delete 1st Non-Medicare Insurance

Using coverage

Using LA HAP benefits (1)

- **Uninsured**: medication-only
 - Make sure pharmacy is in the LA HAP/Ramsell network for uninsured clients
 - Full cost of any medications on the LA HAP uninsured formulary
 - Present LA HAP Card at pharmacy
 - LA HAP is billed electronically
 - No further action required by client

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

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

Using LA HAP benefits (2)

- **Insured** (co-pays, coinsurance, deductible, and/or premium assistance):
 - **Premiums:** If client requests premium assistance and provides correct information, HIP will pay premiums regularly.
 - **Medical services:** Insurance company (including Medicare) is always the first payer. Provider or client must then bill HIP for cost-shares/deductible.

1)



2)

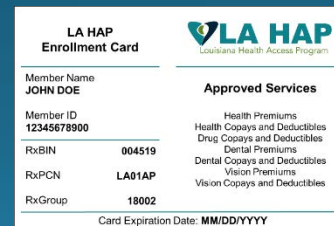
Bill + Explanation of Benefits → HIP

- **Pharmacy services:** Insurance company (including Medicare) is always the first payer. Client should then use LA HAP card for cost-shares so pharmacy can bill LA HAP electronically.

1)



2)



Important tips for using benefits

- Clients must use a [LA HAP network pharmacy](#) when accessing medications
 - Network for uninsured clients is a smaller subset of the network for insured clients
- HIP has no specified provider network– clients should make sure their provider is familiar with HIP and will agree to bill HIP before attending an appointment
 - Provider may send bill to HIP directly, or may send to client in order to forward to HIP
- HIP cannot reimburse clients directly for any healthcare-related costs, even for services/time periods when client was eligible

Communicating with LA HAP

<i>If you have questions about...</i>	<i>Contact...</i>
General LA HAP policies	lahap@la.gov; 504-568-7474
Specific applications	The Client Services Specialist assigned to the application at their direct line, or 504-568-7474
Claims status, payments or billing	HIP at 225-424-1799
Insurance status	Insurance company
Technical difficulties/lockouts with Ramsell	Ramsell HelpDesk at 1-888-311-7632

Never send client-identifying information or application by email.

See www.lahap.org/contact for staff extensions.

LA HAP/HIP leadership

- Erika Sugimori, Services Manager
- Erin Jensen, Health Insurance Program Coordinator
- Tranisha Walker, Client Service Specialist Supervisor
- Matthew Arnold, Treatment Access Supervisor
- Gale Toussant, HIP Director (HAART/OHCC)
- Debbie Douglas, HIP Assistance Director (HAART/OHCC)

Thank you, thank you, thank you!

Louisiana case managers help thousands of clients access their medication and other services every month. Your work is **EXTREMELY** critical and valuable!

When things get stressful, please know that you are **APPRECIATED** beyond measure by your coworkers, clients, and partners in the field.

