



Webinar Transcript | September 26, 2018

Tips and Resources for Enrollment Assisters to Help Enroll People Living with HIV in Health Coverage

Mira Levinson: Hello everyone and welcome to today's ACE TA Center Webinar. I'm Mira Levinson, the ACE TA Center's Project Director and Co-director of the Center for HIV and infectious diseases here at JSI. Today's Webinar is focused on the unique health coverage needs of people living with HIV and financial health available to eligible clients through the Ryan White HIV/AIDS program to help these clients enroll into marketplace health insurance.

Mira Levinson: Before we get started, here are some technical details for anyone that might be new to our webinars. First, attendees are in listen only mode, but we encourage you to ask lots of questions throughout the Webinar using the chat box. You can submit your questions at any time. Our presenters along with ACE TA Center staff will take as many of your questions as we can at the end of the session, and if you think of a question after the Webinar, you can always email us at acetacenter@jsi.com.

Mira Levinson: The easiest way to listen to our Webinar is through your computer, but if you can't hear very well, here are a couple of tips. First, you can check to make sure your computer audio is turned on, but if you can't hear us or if you experience a sound delay at any point, try refreshing your screen. And finally, if you're still having issues, you can mute your computer audio and call in using the telephone line, we've just chatted that out. It's 855-303-0072, and the pass code is 904012.

Mira Levinson: Our goal here at the ACE TA Center is to help Ryan White program recipients and sub-recipients support their clients especially people of color to navigate the healthcare environment through enrollment in health coverage and improved health literacy. We're focused on helping you engage, enroll, and retain clients in health coverage, and we do this by building capacity and helping you communicate with clients about how to stay enrolled and use health coverage. We help build organizations health insurance literacy capacity thereby improving client's capacity to use the healthcare system, and we disseminate best practices and supporting resources as well as providing technical assistance and training through national and localized activities.

Mira Levinson: We have a number of target audiences, including program staff, clients, program managers and administrators, and also people who enroll Ryan White clients like navigators, certified application counselors. So today, we'll focus primarily on resources for enrollment assisters and other staff that work directly with consumers.

Mira Levinson: As a reminder, today's Webinar will be archived along with all of our other webinars on our Target Center webpage, and all participants in today's Webinar

will also receive an email when it's posted so you can share it with your colleagues. For those of you that have visited the Target Center before, you may notice that it has been updated with a new look, but don't worry, you can still find all of our ACE TA center resources by going to targethiv.org/ace, and you can find links at this website for all the resources we're going to present today.

Mira Levinson: Now, let's get started. On today's Webinar. I'll be joined by Molly Tasso and Carrie Mead. Molly Tasso is a policy analyst for the ACE TA Center here at JSI and she specializes in health reform and its implications for people living with HIV. Previous to her work here at JSI, Molly was the policy manager and director of a health care navigator program at a Chicago based HIV nonprofit organization. And Carrie Mead is a project manager at Community Catalyst, which is one of the ACE TA centers partners. Carrie runs the day to day operations of two outreach and enrollment projects, In The Loop, which is a joint project between the National Health Law program and Community Catalyst, and another national project focused on creation and dissemination of consumer facing materials promoting the marketplace.

Mira Levinson: Carrie leads the team that creates resources and disseminates information to enrollment assisters across the country and works with national partners who educate eligible consumers on their health coverage benefits. We'll be hearing quite a bit from Carrie today about her In The Loop work so that you can all learn more about this great resource.

Mira Levinson: Here's a roadmap of what you can expect during today's session. By the end of today's session, we hope that all of you will have a better understanding of the unique health coverage needs and concerns of people living with HIV. We want you to be able to answer clients' basic questions about enrolling in health coverage and staying covered and to be able to describe how the Ryan White HIV/AIDS program, including the AIDS Drug Assistance Program or ADAP, complements health coverage and supports continuity of care.

Mira Levinson: I'm going to start by providing an overview of key benefits of health coverage for people living with HIV and how the Ryan White Program supports [inaudible 00:05:13].

Mira Levinson: Hi everyone, it's Mira. I'm back. I need to do a little bit of a quick sound check. So Molly, can I ask you to unmute your line and let me know if you can hear me.

Molly Tasso: Hi Mire. Yes, I can hear you.

Mira Levinson: All right, great. Sorry about that everyone. Not really sure what just happened, but here we go again. I'm just going to go ahead and continue. So, let's see. Let's start at the top of the session overview slide. So by the end of today's session, we hope all of you will have a better understanding of the unique health coverage needs and concerns of people living with HIV. We want you to be able to answer clients' basic questions about enrolling in health coverage and staying

covered and be able to describe how the Ryan White Program compliments health coverage and supports continuity of care.

Mira Levinson: I'm going to start with an overview of benefits of health coverage for people living with HIV and how the Ryan White Program supports consumers, and I'm also going to talk about some important plan considerations that are relevant to the upcoming open enrollment period.

Mira Levinson: After that, Molly's going to share a series of concrete steps that enrollment assisters can take to support people living with HIV during the enrollment process. These steps are a helpful way to organize key concepts related to health coverage for people living with HIV, whether you're an enrollment assister yourself or whether you are training enrollment partners on the particular needs of your clients.

Mira Levinson: And finally, before we take your questions, we'll hear from Carrie who's going to tell us about her work with In The Loop and lets you know how to join the In The Loop community if you're eligible. Carrie's going to share some resources and new enrollment considerations as well.

Mira Levinson: So let's start off with a couple of quick polls to get a sense of who is on today's Webinar. First, let us know if you have provided enrollment assistance for people living with HIV in the past. If you have or if you do now, click yes, and otherwise, click no. So I see a bunch of responses coming in. I'm glad to see it looks like people are connected with the Webinar and it looks like it's about 60/40, 60% yes, and 40% no, in terms of people who have provided enrollment assistance for people living with HIV.

Mira Levinson: Okay, great. Now, let's do another one and let's find out how many trained or certified enrollment assisters we have on the call today. So let us know, are you a funded navigator, a CAC, a broker or agent, another type of enrollment assister or not. For example, if you're a program manager or a case manager that has not been trained or certified, then select, no.

Mira Levinson: So, I'm going to give you all a couple of minutes, well, seconds to answer. And this is great to see, it's a good mix. It's about 60% of you, 55 or 60% of you looks like are not actually trained or certified as enrollment assisters, but I know that a lot of you are still working with consumers around enrollment, and then it looks like about, let's say 35% of you combined are trained or certified enrollment assisters, maybe 40%. So, thank you all for your responses.

Mira Levinson: And now let's talk briefly about the benefits of health coverage as they pertain to people living with HIV. So most of you are already familiar with the overall benefits of health coverage, but here are three especially important health related protections and benefits that are meaningful for people living with HIV as a result of the Affordable Care Act.

Mira Levinson: First, if you have health insurance, you can't be denied coverage just because you have a preexisting condition like HIV. This is a particularly important protection as before the ACA, many people living with HIV were unable to get health insurance because of their diagnosis. Second, health coverage provides access to services and medications as well as medical providers, for primary care and specialty service for complex health conditions as well as coverage for mental health and substance use services. Health coverage also protects against catastrophic expenses such as those related to injury or hospitalization. You also can't be dropped by your health insurance company if you have an existing medical condition or if you get one after enrolling, and insurers can no longer impose lifetime caps on insurance benefits.

Mira Levinson: Because of the law, millions of Americans no longer have a lifetime dollar limit on essential health benefits. So, now that many people have expanded access to health coverage, what's the role of the Ryan White Program?

Mira Levinson: I know that there are a number of you who are not experienced in the Ryan White Program who are on today's call, so I'm going to give a brief overview of the Ryan White program and also an eight ADAP. The Ryan White Program is administered by the health resources and services administration HIV/AIDS bureau, and it works with cities, states and local community based organizations and health providers to provide services to those who do not have sufficient healthcare coverage or financial resources to manage their HIV care. The Ryan White Program provides HIV care and treatment to over half a million people every year, more than half of all those diagnosed with HIV in the United States. Most Ryan White Program funds support primary medical care and essential support services. A small portion of the program supports technical assistance, clinical training, and development of innovative care models.

Mira Levinson: The program serves as an important source of ongoing access to HIV medication that can enable people living with HIV to live close to normal lifespans. However, the Ryan White Program is not health insurance. For one thing, the Ryan White HIV/AIDS program must be considered the payer of last resort, which means that Ryan White funds may not be used for any item or service for which payment has been made or can reasonably be expected to be made by another payment source. Also, while the Ryan white program covers HIV care, many people living with HIV have healthcare needs beyond their HIV, including complex health conditions like diabetes, heart disease, expensive hospitalizations, just like any of us might have, as well as coverage needs for family members. And the Ryan White Program is not designed to address all of these complex issues.

Mira Levinson: Having health insurance can help clients manage their overall health and also avoid the financial impact of unexpected medical costs. One part of the Ryan white program, part B, includes the AIDS Drug Assistance Program, or ADAP, sometimes called HDAP in some states. ADAPs are typically administered by state health departments, provide HIV related prescription drugs to low income people living with HIV who have limited or no prescription drug coverage, and in

addition, after health coverage options were expanded for people living with HIV, the Ryan White Program began supporting insurance purchasing both on and off the marketplace to secure a comprehensive medical insurance for people living with HIV.

Mira Levinson: So ADAPs and other Ryan White recipients are now permitted to pay for eligible clients' health insurance premiums and/or out-of-pocket medication costs if they can demonstrate cost effectiveness in the aggregate. At this point, most eight ADAPs and some local health departments funded under part A of the Ryan White Programs do pay for some clients' health insurance premiums and/or out-of-pocket costs based on income and eligibility for coverage. These options vary between states in terms of whether all plans are covered or just specific plans and also whether this support is handled through the health department or a contracted provider agency.

Mira Levinson: The Ryan White Program also remains available to ensure coverage completion for insured clients to help them stay in care through services such as medical case management, housing assistance, and transportation. Plus, the Ryan White Program is available for clients that are not eligible for coverage and those that are eligible for insurance but haven't enrolled yet.

Mira Levinson: ADAP programs and other Ryan White programs often evaluate available health insurance plans and many make recommendations or requirements of particular plans for enrollment. In some instances, this means that in order to get premium and/or out-of-pocket assistance through the program, people need to choose one of these recommended plans. In aggregate, the plans chosen either on or off marketplace must contribute to a calculation of coverage that is both cost effective and comprehensive in terms of drug coverage and network adequacy. In a few minutes, Molly's going to show you how to contact your state ADAP program if you want to find out what their recommendations and requirements may be in your state or community.

Mira Levinson: So speaking of plan review, I want to direct your attention to a couple of new options that are not recommended for people living with HIV and are not ACA compliant. As some of you may know already, there are new federal regulations that expand the availability of association health plans and short term limited duration plans. For association health plans, the new regulations make it easier for self employed individuals and small employers to band together and form plans. Similarly, new regulations expand the availability of short term plans and notably allow them to last up to 364 days as opposed to the usual three months or so. These plans, again, do not have to be compliant with many of the ACA protection, and as a result, it's unlikely that they're going to meet the coverage needs of most Ryan White clients.

Mira Levinson: For example, studies have shown that short term plans often don't include prescription drug coverage which may result in very high out-of-pocket costs for people living with HIV and other chronic conditions, and often they're not subject to the affordability rules found within the ACA.

Mira Levinson: Because of the expanded availability of these plans, it's especially important that clients understand that they need to receive enrollment assistance. If clients enroll on their own or through a broker or an agent that's not collaborating with a local Ryan White program, there's a chance they could enroll into one of these plans by mistake. And for those of you that are Ryan White case managers or program staff, I particularly want to ask you to encourage your clients to work with an assister that's collaborating with the Ryan White program to enroll and make sure that due diligence is done to review the plans, including prescription drug coverage to make sure clients are enrolling into plans that best meet their health and financial needs.

Mira Levinson: Now, as enrollment assisters, you are important links between clients and access to the comprehensive care they need. You become the helping hand to support clients through what can be a complicated process to enroll in coverage and you can help clients stay covered throughout the year by educating them on the re-enrollment process and helping them if needed. Health plan selection is a critical step in enrollment and re-enrollment particularly for people living with HIV. It's essential that they are supported and selecting health plans that provide affordable access to the medications they need and includes trusted providers who can deliver the care that they need.

Mira Levinson: So we're going to do a quick poll and then I'm going to hand it over to Molly. So I would like to ask you all, based on your knowledge of the Ryan White Program and the explanations that I just provided, tell me which of these items might be available to eligible clients through the Ryan White HIV/AIDS program.

Mira Levinson: So as you can see on the list is medication purchasing, emergency room visits, medical care, premium payment assistance, out-of-pocket payment assistance, and medical case management. And it looks like lots of responses are coming in. I'm gonna give you all just one more second. And I'm sure if you've submitted your responses you can see that it's emergency room visits that are typically not available through the Ryan White program because that's really not considered part of the HIV comprehensive care that the Ryan White program is intended to cover. So great job everyone in those answers.

Mira Levinson: So with that, I'm going to turn it over to Molly Tasso, and she's going to talk about what's unique about enrollment for people living with HIV.

Molly Tasso: Great. Thanks so much, Mira. So, now that we've talked about resources available for people living with HIV and some information about the Ryan White program, let's spend some time discussing the unique considerations involved in enrolling people living with HIV into health insurance and how you can help answer their questions and facilitate a successful enrollment.

Molly Tasso: Let's begin by talking about some common fears and concerns related to enrollment. Our team here at the ACE TA Center has been talking to people living with HIV since the beginning of the first open enrollment period all over the country as well as their case managers and medical providers. Here's what

we've learned. First, some people living with HIV may not understand why they need health insurance. Many of them have been getting their HIV care through the Ryan White Program and aren't aware of the benefits of health coverage such as coverage for non HIV services and medications.

Molly Tasso: As Mira mentioned earlier, the Ryan White HIV/AIDS program is not health insurance. Also, many people living with HIV are concerned that they would need to see a different doctor if they enroll into health insurance. In some cases, this may be true, while in other cases they may be able to find a plan that allows them to continue seeing their HIV doctor as a primary care provider or as a specialist. Many consumers are working hard to take their HIV medications every day and worry that they won't be able to get their medications through insurance or that they won't be able to afford them. Also, consumers who applied in the past, who applied for health coverage in the past but were denied because of preexisting conditions may be hesitant to apply again.

Molly Tasso: Recognizing these unique considerations of enrollment for people living with HIV, we've identified eight ways you, as enrollment assisters, can help people living with HIV enroll into coverage.

Molly Tasso: As you can see, these include explaining insurance terms and benefits, knowing that the Ryan White HIV/AIDS program provides HIV care and support. Knowing how to contact the Ryan White Program or ADAP in your state, helping consumers find plans that cover their current HIV drugs. Listening to consumers needs and concerns, encouraging continuity of care, understanding why continuous medication coverage is essential, and showing compassion and cultural sensitivity.

Molly Tasso: I'm going to go over each of these eight steps in a bit more detail and show you some tools and resources that we at the ACE TA Center have developed that can help you support your enrollment efforts.

Molly Tasso: So as Mira mentioned, before the ACA and active protections against preexisting conditions, many people living with HIV were denied health insurance coverage or charge more because of their diagnosis. In fact, before the ACA, around 30% of people living with HIV had never had health insurance. Since the ACA has expanded coverage options for people living with HIV, a significant portion of this population gained access to coverage, but the confusing and unfamiliar insurance and enrollment terms present a barrier to enrolling into and accessing care. For individuals new to health insurance, terms such as open enrollment, the marketplace and special enrollment periods can be unknown and it takes time to become familiar and comfortable using these new terms.

Molly Tasso: After enrollment, an individual may have difficulty accessing care and using their coverage benefits due to similar confusion or unfamiliarity with insurance terms such as copay, deductible, and premium. As we all know, insurance and enrollment terms are complicated, and as for reasons like this, enrollment assisters like you exist. To help you, the ACE TA Center has created a number of

resources that can help you educate individuals about health insurance terms and benefits.

Molly Tasso: This resource is called get covered for a healthy life, and it's designed to help clients who have not enrolled in health insurance learn about the benefits of health coverage. This resource addresses common questions about the importance of health insurance and how to enroll. Excuse me. And you can go over this tool with them while sitting with an individual or you can give it to them to take home. It's really intended to motivate individuals to enroll and to move them from the contemplation stage hopefully to the action stage. And like all of our consumer facing tools, this has also been translated into Spanish and the link to download this resource is going to be chatted out right now along with all the other resources that we're going to discuss today.

Molly Tasso: We've also created a resource called Making The Most of Your Coverage, which is designed to help individuals get oriented to health insurance. Making the most of your coverage provides plain language explanations of how to use a health insurance card, how to contact and ensure how to identify important documents and why it's crucial to check the mail for correspondence from insurance companies. It also explains to clients the basics of health care costs like premiums and out-of-pocket expenses. And again, the link to download that is going to be chatted out right now.

Molly Tasso: And this third tool, it's called Stay Covered All Year Long, provides information to share with consumers to help them understand what they can do to maintain their coverage, such as paying premiums on time, reporting income and household changes, and what to do if they lose coverage. For individuals who transitioned between coverage through the marketplace in Medicaid, this resource, Stay Covered All Year Long, also includes information on what clients need to do to manage these changes. It also includes a section on premiums which provides clear basic information about how often premiums need to be made and what to keep in mind if the Ryan White program is paying the premium. That particular section also goes over what happens if a payment is missed and what to do if the consumer loses coverage or experiences a gap in coverage. And again, Leah just chatted out that link to download.

Molly Tasso: So moving on, the second important thing to understand is how the Ryan White HIV/AIDS program provides HIV care and support in the context of health insurance coverage, including additional financial support for medication in HIV care and how you can support individuals to access that assistance. As Mira mentioned before, and we are going to be sort of continuing to hit on throughout this presentation, it's very important to underscore the fact that the Ryan White program, including the AIDS Drug Assistance Program, ADAP, can often pay for premiums and out-of-pocket costs. So in many cases, this program helps consumers pay for the cost of their health insurance.

Molly Tasso: Because it's so important that people stay on their medications and maintain access to their doctors, the Ryan White Program does everything possible to

make sure that there are very few barriers including financial ones to consumers. One of the most important ways that you can help consumers gain or maintain access to this assistance is by encouraging them to stay engaged with the Ryan White Program by staying enrolled in ADAP and continuing to see their Ryan White case manager. Case managers play a particularly helpful role for clients navigating the healthcare system, including navigating any gaps in coverage that they may experience. And so for this reason, it's very important to encourage them to maintain their relationship with that individual throughout the year.

Molly Tasso: And again, as a reminder, Ryan White Program support all consumers whether they are insured or not. However, the program only cover services that help people stay in HIV care. So eligible individuals must enroll into a health insurance plan to receive that coverage and guarantee that they can receive any financial assistance that they may be eligible for and that they can secure that comprehensive coverage that's so important.

Molly Tasso: As discussed on the previous slide, you can help consumers enroll in coverage and receive financial assistance by encouraging them to stay enrolled in ADAP. In fact, consumers must maintain up to date certification with the program if they want to get help from ADAP to pay for their insurance costs. One way you can find out what assistance is available to individuals in your community is to contact a local Ryan White provider in your area. You can use the hiv.gov testing sites and care services locator, there's a screenshot of that on the slide, on the right hand side, you go there, you just enter your zip code and filter the results to find the contact information for a Ryan White provider in your area. You can contact them and they can give you information about what assistance is available to individuals, including premium payment assistance and medication assistance. We're going to chat out a link to the care services locator now.

Molly Tasso: You can also contact the ADAP coordinator in your state directly. In many cases, Ryan White programs only provide financial support for specific plans, usually at the silver medal level, and Mira mentioned that earlier. So it's really important to contact ADAP directly to learn which plans, if any, they are going to support. The ADAP coordinator directory is routinely updated. And again, chatting out the link to that right now.

Molly Tasso: So before we move on, we're going to take a quick break and do what's called an idea boards, and it's basically an online sticky wall, and we're curious to know how, if at all, you get updates from the Ryan White program including ADAP in your state. So we're chatting out the link to you right now that you click through and it will take you to a group board that only those on this webinar have access to, and when you click on the link, you'll see the question there. If you have an answer to this question, go ahead and press the green plus sign at the end of the question and it will bring up a little post it note where you can type in your answer. You'll also be able to see the posted notes and responses from other people.

Molly Tasso: If you happen to see that someone else has written something that you like, you can go ahead and click on that note and press the thumbs up button on the bottom left, and you can close the note in the right hand, top corner, a small blue box will appear when you hover over the top right. So go ahead and click to that link and put up there on a sticky note, your response.

Molly Tasso: Mira, I'm going to ask that you please talk through the responses of the idea boards while I get situated a bit on my end.

Mira Levinson: Sure. So it looks like there's lots of good stuff coming in, and I see it's kind of ranging from a bunch of people who say that they get email or mail updates to some people that they say, well, we talk with our ADAP daily. And then there's a few people who say that they really aren't sure, or that some people get them through meetings and there are a handful of people, it looks like a good number of people actually that are getting updates through their state health department or their state part B program. So thank you all for that. It looks like there's quite a wide array of sort of different ways that case managers in particular and HIV direct service providers are getting information from their ADAP programs.

Mira Levinson: So we want to make sure that you have that ADAP contact information if you want to be getting more information from them so that you can send them your questions as they come up if they're not already in touch with you. All right. So Molly, are you ready to pick it back up?

Molly Tasso: Yes, I am. Thanks Mira.

Mira Levinson: Okay.

Molly Tasso: So moving on, the next thing that you should be considering when helping consumers find a plan is the importance of finding a plan that covers their HIV medications. So HIV treatment can be very complicated. There are more than two dozen HIV drugs, also known as antiretroviral therapy or ART, approved for treating HIV, and many people tolerate some medications much better than others. Single tablet regimens, which is one pill taken once a day, are especially important for many people because of course, taking fewer pills per day makes it much easier to stay on their medication schedule. People living with HIV may also be prescribed additional drugs to prevent other conditions or to manage HIV related illnesses.

Molly Tasso: Once a patient and a doctor find a drug treatment that works well for that person, it's critical that they are able to maintain that treatment. For this reason, it's very important that consumers enroll into insurance plans that cover their medications. HIV meds are expensive and a list of medications covered by health plans can vary widely. Sometimes, particular HIV medications also cost more, especially if they're in higher tier or if the plan requires increased cost sharing. As enrollment assisters, you can help people living with HIV identify

which medications are covered under the plan they're considering and find out which plans are supported by the Ryan White program in your area. With this information, you can make sure the consumer is enrolling into a plan that covers their HIV meds.

Molly Tasso: Similar to having unique medication needs, people living with HIV have other important needs and concerns when it comes to selecting health coverage and medical providers. For example, consumers may be concerned about being able to stay on their medication afford their plan and their medications and continue seeing their same medical provider. They may have concerns about non HIV related health conditions as well. As a way to ensure concerns are alleviated and consumers are being enrolled into a plan that they're comfortable with and that best fits their health and financial needs, it's important that you have a direct conversation about these topics before you conduct the actual enrollment. Once you know more about the coverage priorities and concerns, you can facilitate a successful enrollment.

Molly Tasso: To help facilitate these conversations, we've created a pre-enrollment worksheet resource, shown here, that's designed to help clients prepare for open enrollment. This would ideally be completed by the client and their case manager before an enrollment appointment. There's space to write down the client's preferred providers and medications they need, where they like to go for care and how they prefer to get their medications. There's also a space to document key information that will be needed for the application and a space to write down marketplace account details like username and a password hint.

Molly Tasso: We encourage strong collaboration between case managers and enrollment assisters, and if you're working with an individual who may have been referred from a case manager, you should go ahead and ask them if they filled out this pre-enrollment worksheet or if they've documented in any other way these topics, and hopefully that information can help you as you're preparing to conduct enrollments. If they haven't written any of this information down, that's no problem. You can use this enrollment, sorry, you can use this pre-enrollment worksheet during the enrollment to document meds and provider preferences before you begin the actual enrollment, and this will help ensure that the process is smooth and that all coverage priorities and concerns are addressed. The worksheet is available on our website, and again, we're going to chat out the link now.

Molly Tasso: Moving on. Another important health coverage consideration for people living with HIV is the importance of continuity of care. This means that individuals see the same provider regularly and maintain a consistent supply of medication. As we discussed earlier, HIV treatment can be incredibly complex and many people have a long trusted relationship with their HIV care doctor who not only has HIV expertise but accepts the person's identity, life experiences and challenges.

Molly Tasso: As an enrollment assister, you can help the consumer look at the various health plan options and find those that would allow them to see their current doctor if

available. Finding a plan with their doctor in network means they won't have to start over with a new provider and can rest assured knowing their information is being kept confidential. Similar to the idea of continuity of care, continuous uninterrupted access to HIV medication is crucial to the health of a person living with HIV. People who consistently take their HIV medication can maintain viral suppression. Viral suppression means there's a very low level of HIV in a person's blood. When the virus is suppressed, the person is much less likely to get sick and is less likely to pass HIV onto others.

Molly Tasso: On the other hand, any gaps in medication access and missed dosages can quickly lead to increased viral load and other complex health issues. As we've discussed throughout today's Webinar, finding a plan that, first, covers a particular medication, and two, is affordable, is absolutely paramount to this population. Individuals find themselves enrolled into a plan that might not cover their particular HIV med or a plan that puts that drug on the highest cost sharing tier, there is a much higher likelihood that that person may experience a gap in access to medication. To ensure continuous access to meds, people living in living with HIV must have coverage that includes the medications they need and it must be affordable and accessible.

Molly Tasso: If for some reason an individual you're working with experiences or anticipates they might experience a gap in coverage or medication, please encourage them to contact their case manager or their HIV provider immediately.

Molly Tasso: And finally, it's important to remember that compassion and cultural sensitivity are key. In many cases, people living with HIV may not want to share the details about their medical status and other sensitive topics because of concerns related to stigma, which includes negative reactions in treatment by others, discrimination because of their HIV status, or for other reasons such as their race, ethnicity, sexual orientation, or gender identity. Additionally, anxiety around stigma can keep people living with HIV from accessing HIV care, either for fear of being treated with disrespect or because of concerns about confidentiality. If someone has had a negative experience with the healthcare system or an individual provider in the past, they might be reluctant to engage again.

Molly Tasso: To help people feel comfortable and confident in their decision to seek enrollment assistance, let consumers know that your conversations are confidential and judgment free. Each person brings a unique cultural identity and life experience and it's important that you accept each person, listen to how they feel about their concerns and how they talk about their concerns. Avoid making assumptions and that you give people the space to be themselves.

Molly Tasso: To that end, I do want to recognize and just acknowledged that discussing sensitive health information with an individual you may not know, can feel uncomfortable. I completely understand this and you should know that the decision to disclose ones HIV status is left to the client and you are not responsible for asking that question. As we say, and it's up on the slide here, we

encourage people to take the client's lead. What you can do, however, is start every conversation in a judgment free space and make it known both verbally and non verbally, that you are comfortable. Of course, assure the client that the conversation is confidential and take the time to listen to their needs and concerns. By setting this tone early in the enrollment process, both you and the consumer will feel comfortable with the discussion and you'll be able to enroll that individual into a health plan that best fits their needs.

Molly Tasso: So, we're going to take a quick break and do another idea boards, this time answering the question, how do you help individuals feel comfortable during enrollment sessions? And again, we're going to chat out the link to access that right now.

Molly Tasso: And Mira, when you get a chance and when we're ready, I'm going to ask that you please facilitate this discussion as well.

Mira Levinson: Sure. So I am looking at the screen. I know that lots of you have had conversations with clients about their general coverage needs and have tried to figure out these kinds of questions that Molly's been talking about in terms of making the client feel comfortable around disclosure and talking about what they particularly need in terms of a plan. So I'm seeing some comments starting to come in. Lots of good stuff. So I see somebody says, I allow clients to share what they would like, I also give them space to be comfortable. I start by allowing clients to tell me what it is that they're looking for in their insurance needs. Here's a great strategy, provide a comfortable, safe, private meeting room to have the conversation.

Mira Levinson: There's a couple of people that have liked the first one, asked what questions clients have and make sure to address those questions. Introduce myself first and explain my role. Find things in my own life that relate to the topic at hand. Treat people the way you'd want to be treated. And of course I know that a bunch of you are already working within Ryan White program, you already know people's HIV status in that case. So I see somebody said, I'm a medical case manager within a Ryan White program, so I already know. And I see people sort of talking about treating people with respect, displaying objects like rainbow flag, using correct pronouns, letting them know that the person speaks Spanish. So lots of great ... oh look at this, I have a photo of myself and my same sex partner on my desk. So there's lots of good ways to sort of say I'm open, I'm ready to have this conversation with you in whatever way that you want to have it.

Mira Levinson: So with that, Molly, I think I can turn it back to you. Thanks everyone for all of those great suggestion.

Molly Tasso: Great. Thanks Mira. So really quickly before I hand it over to Carrie. I just want to let you know, you can see up on the slide here that we have this resource, it's a one page fact sheet that actually goes through the eight topics that I just covered, and we also have a very short video that also walks through it in sort of

a fun light way. All of these can be downloaded, again, on our website and Leah is going to be chatting out the links to those now. And we really encourage you to please share these resources with anyone you may work with who wasn't able to join today's Webinar.

Molly Tasso: And with that, thank you so much for letting me speak with you today and I'm going to hand it over to Carrie, the project manager for In The Loop. Carrie.

Carrie Mead: Hi everyone. All right. Well, thank you so much for having me today. I'm going to talk a little bit about In The Loop. So as Molly said, my name is Carrie Mead and I'm the project manager for In The Loop.

Carrie Mead: And In The Loop is a national online community that is jointly run by Community Catalyst and the National Health Law Program, which are both two national healthcare advocacy organizations. And we've been running In The Loop since the first open enrollment period.

Carrie Mead: So, what is In The Loop? In The Loop is a free password protected online community that's specifically designed for the nonprofit enrollment assister community. Assisters are able to log into the website and share their experiences and get answers from their peers directly. We have close to 3000 active assisters on In The Loop nationwide across 50 states, but it's most highly utilized in the states that use healthcare.gov, so [inaudible 00:45:07] states. We also have In The Loop staff and monitor every post to make sure that's what shared is accurate and that questions that are posted get resolved.

Carrie Mead: So here's just a visual for you all to get a sense of what In The Loop is. As I said, since it's an online community, I wanted to give you a sense of what it's like when you would log in. So this is a screenshot of our home screen. So, when you log in first you'd see kind of the most recent post populated. We also have the ability to curate what are called updates on that right hand side, so we're able to share their upcoming webinars, like this one that are relevant to enrollment assisters. We share lots of webinars from national partners as well as other resources and those get emailed out regularly so the users don't miss them.

Carrie Mead: In The Loop is also a resource hub for enrollment resources. So we have In The Loop fact sheets that are specifically tailored to assisters on topics like reconciliation of advanced premium tax credits, and we bring together all the national resource in one place, so it's a one stop shop. And as I mentioned, In The Loop staff review every post for accuracy, but we also work with national experts to ensure that the information is accurate and answers are resolved. Additionally, we monitor the community for enrollment trends or challenges that assisters are facing so that we can help resolve the issues. And lastly, we send a weekly newsletter to the community that dives into timely enrollment topics, policy updates, or upcoming webinars and resources.

- Carrie Mead: I'm going to walk through some of the top reasons to join In The Loop. So our top five reasons to join In The Loop are peer-to-peer education, complex cases, keeping up-to-date on enrollment issues, assister best practices and issue specific resources.
- Carrie Mead: So our first reason is peer-to-peer education and this is the primary reason we hear from users or loopers as to why they joined In The Loop and why it's so helpful to them, because it gives them access to others who are doing the same work day in and day out. So, as an example, an assister in Michigan can post a question about if the deductible resets when a consumer switches plans, and an assister in Alabama can respond with their experience helping consumers do similar things. Assisters can also share challenges with the federal application, healthcare.gov and other common experiences that assisters face.
- Carrie Mead: We particularly hear from assisters that are in rural areas or those that don't have other colleagues based with them that are doing this work. They find access to the In The Loop community to sort of be a proxy for having someone next door that you can ask a quick question to.
- Carrie Mead: So our second reason is for complex case resolution. So obviously, there are a lot of different complex scenarios that can come up when you are enrolling consumers, and assisters have to be prepared for it all. So we hear frequently that In The Loop is really helpful for resolving complex cases, for example, things with mixed status families, challenging income calculations, tax filing questions, or challenging eligibility determinations can sometimes be tough for people to work through on their own, and by posting on In The Loop, you gain access to other people's experiences as well as expert knowledge.
- Carrie Mead: So this is one example of a looper posted about a consumer who's trying to understand the benefits and downsides of them getting married and how the changes in their income due to getting married would affect their access to affordable healthcare. So other loopers were able to weigh in and respond how they would help the consumer, and ultimately, one of our tax experts weighed in to share their expert knowledge.
- Carrie Mead: So our third reason is to keep up-to-date on enrollment issues. Things are changing all the time. There might be new regulations that are getting put out, new tweaks to enrollment policy and so In The Loop gives you access to the most up-to-date enrollment information so you can keep track of the rapidly changing world. So we regularly share enrollment updates, like policy changes or new roles, and when we post an update, you'll receive an email directly to your inbox. We also feature articles in our weekly newsletter that dive into the specifics of a policy issue, like when the cost sharing reduction payments were terminated by HHS last year, or for example, this year as they have recently announced proposed changes to the new public charge rules.
- Carrie Mead: Our fourth reason is to gain access to assister best practices. So assisters frequently share best practices directly on the site that others are able to

benefit from. For example, in the past, we've had discussions on the training materials that loopers used to onboard new assisters. We've had discussions on what materials to keep handy at your desk. We've had someone share a custom excel spreadsheet that they created that helps demonstrate to consumers how to understand their plan costs, and we've also had discussions about what are best practices for working with the call center. So it's a great way to learn from season assisters who've been doing this work for many years. Additionally, we try and feature assisters and their best practices in our weekly newsletter from time to time, to help highlight innovative strategies that we think others might benefit from.

Carrie Mead: Our fifth reason is issue specific resources. So as I mentioned, In The Loop, has a number of resources that we've created. We actually just updated our resources for this year, so we have a number of different fact sheets on topics like modified adjusted gross income, renewed premium determinations, and they're all created to be tailored towards enrollment assisters. So with the questions that you might have, it's really meant to be resources for you all. As I said, we also bring together resources from other national organizations, so we have resources that are on specific issues and topics like we have immigration resources from the national immigration law center and other resources that are more issue specific as well.

Carrie Mead: So now that I've run through the top reasons to join In The Loop, I wanted to run through who In The Loop is open to. So as I mentioned, it's a password protected online community so that users feel comfortable posting their questions and responding actively. So to apply, you visit www.enrollmentloop.org, which I'll also highlight later, and you submit an application to join and then our staff would review your application and approve you. So I just listed on the screen who is able to join In The Loop. It's for navigators, non-profit, in-person assisters, non-profit certified application counselors, community health center staff and other providers like hospital staff, non-profit health and consumer advocates, staff from legal aid and enrollment organizations as well as all of you doing enrollment in the Ryan White Program and ADAP coordinators.

Carrie Mead: I also want to explicitly say we do not allow agents and brokers on the site as well as philanthropy foundation staff and state and federal government employees.

Carrie Mead: So I wanted to close with a few quotes directly from our In The Loop members. So there's a quote from an assister in Michigan. They say, "I just want to say thank you to everyone who provides information on this resource sites. It's a fabulous go-to for information. The cheat sheets and fact sheets are extremely helpful to me. I've learned to look here first if I have a question dealing with unusual issues and can usually find the answer I'm looking for very quickly." We also have a quote from an assister in Georgia and they say, "Thank you for all the work you continue to do. I don't know what I'd do without this as a resource. It's the first one I turn to you for accurate information on changes to

policies and suggestions from other assisters who are in the trenches and really understand what's going on."

Carrie Mead: So again, to join in the loop, you can visit www.enrollmentloop.org, and I see that that has been posted in the chat box so people can easily access that. Additionally, if you have other questions, feel free to email us directly at theloop@enrollmentloop.org, which we can also share in the chat box. Thank you so much.

Mira Levinson: Thank you, Carrie. That was great. I hope all of you that are eligible will check out the great resources from In The Loop. I know that you'll find them helpful as you get ready for open enrollment and get into open enrollment season.

Mira Levinson: So in our last few minutes, we have received a few questions, and I'm going to go ahead and take those. And I also wanted to let you know that an evaluation form is going to pop up in your screen at the end. So just keep that open and be sure to let us know what you thought about today's session, how we can improve our offerings and share any ideas you might have.

Mira Levinson: So the first question was, how does enrollment work for individuals who are HIV positive and undocumented or don't have a social security card? And the answer to that one is that the Ryan White HIV/AIDS Program and its services are available to everyone as long as the Ryan White Program is the payer of last resort.

Mira Levinson: Another question asks, Can a client use Ryan White to afford ACA coverage but then get their HIV care covered by Ryan White outside the insurers network? So basically they're saying, the person wants to use the Ryan White resources to help afford an ACA plan, but then use Ryan White HIV care itself to access a particular provider. So that would not typically be allowed because once the client has health insurance, they would be able to get HIV care through their insurer even though it might not be with their preferred provider. So in other words, another payment option is available, so it'd be difficult to justify the Ryan White program paying for a direct service like that. That's why it's really important to carefully compare plan options during open enrollment every year.

Mira Levinson: And a third question that's come in asks, is a participant able to opt out of an expensive work sponsored insurance HMO and opt to use the Ryan White program to assist in gaining insurance through the marketplace? And for that one, we recommend that you check with your local Ryan White program. In most cases, it probably wouldn't be an option, but it probably depends on the employer plan. For example, there may be some scenario where if the employer plan doesn't qualify as minimum essential coverage, then you may be able to decline it. So check with your local Ryan White Program. You can take a look at the definition for minimum health essential coverage, which I'll chat out to you in just a second.

Mira Levinson: And yeah, let's see. Are there any other questions from people? Go ahead and chop them and if you have them, we have another minute or so.

Mira Levinson: Okay. I see that there are a couple more questions coming in. It looks like there's a question that's asking if a person that is not a permanent resident can enroll in insurance? So we're looking into that. I think that that depends on your conversation with the insurer, that that may be an option through some plans, but we're just looking into an answer for that.

Mira Levinson: In the meantime, I will remind you about just a couple of things. One, definitely, if you aren't already on our email list, be sure to sign up for that. We can go to the next slide where you can see some links. And also you can see our email address here, acetacenter@jsi.com if you have any questions. The resources that we provided here, someone just asked, will we be able to get the resources provided here via email? The answer is yes. We will be sending out information about all the resources when we send you a post webinar email, so you'll get all of that. And there was somebody who asked if we could repeat an answer, we'll chat that right to you individually.

Mira Levinson: So Molly, do you want to try to take this question about permanent residence before we wrap up?

Molly Tasso: Sure. I guess the information that I can provide is not ... what I can say is that it depends on the individuals personal status and whether they are here deemed to be lawfully present or not, and that then determines the health insurance that they made, if whether or not they may qualify for premium assistance or cost sharing through the market place, or if they might need to just enroll into a health insurance plan on the private market place, so off of the healthcare.gov website. But it is very unique to an individual situation and we would encourage you to contact your local Ryan White provider ADAP to figure out what services and assistance might be available to that individual.

Mira Levinson: Okay, thanks Molly. So the last question that we have time to answer today is somebody asked, if a client is on Ryan white and is eligible for ACA coverage, do they have to enroll in an ACA plan to keep Ryan White? So the answer to that is that Ryan White programs really need to make every effort to vigorously pursue enrollment for all clients who are eligible for ACA coverage. If a client declines or is in a place where their life is too complicated and they can't enroll just yet, it's important to document your efforts to enroll them, but in the majority of cases you really do need to enroll the client in Ryan White and look to your own Ryan White programs policy in your jurisdiction around enrollment requirements.

Mira Levinson: So with that, I would like to thank everyone for your patience with our little glitches early on in today's Webinar and for joining us today. I hope you all have a great afternoon. Goodbye and thanks again.