

# Changes in the Louisiana ADAP Model in an ACA-resistant and non-Medicaid Expansion State

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# Objectives

1. Identify programmatic changes to the Louisiana ADAP model which correlated with improved HIV-related health outcomes
2. Discuss key elements of an ADAP's increased insurance adoption in a non-Medicaid and ACA-resistant Southern state
3. Review plan for moving forward into Medicaid expansion

**“If you’ve seen one ADAP, you’ve seen one ADAP”**

# Introduction to Louisiana

2014

4.5 million residents

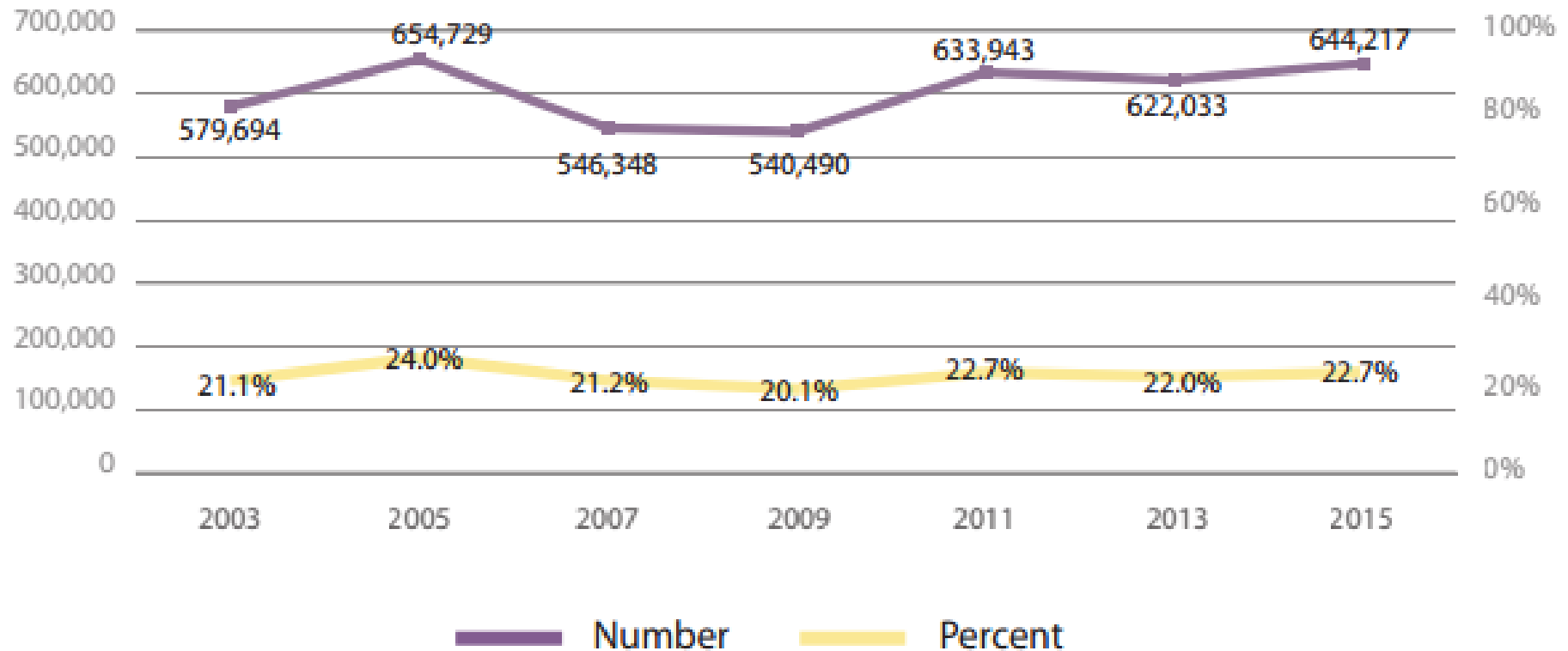
44% 0-199% Federal  
Poverty Guideline

23% Below 100% FPG

22% Of adults ages 19-64  
were uninsured

Location	Under 100%
1. Louisiana	23%
2. Mississippi	22%
3. Arizona	21%
3. West Virginia	21%
5. Kentucky	20%
5. New Mexico	20%
7. Arkansas	19%
7. District of Columbia	19%
9. Alabama	18%
9. Oklahoma	18%
11. Florida	17%
11. Georgia	17%

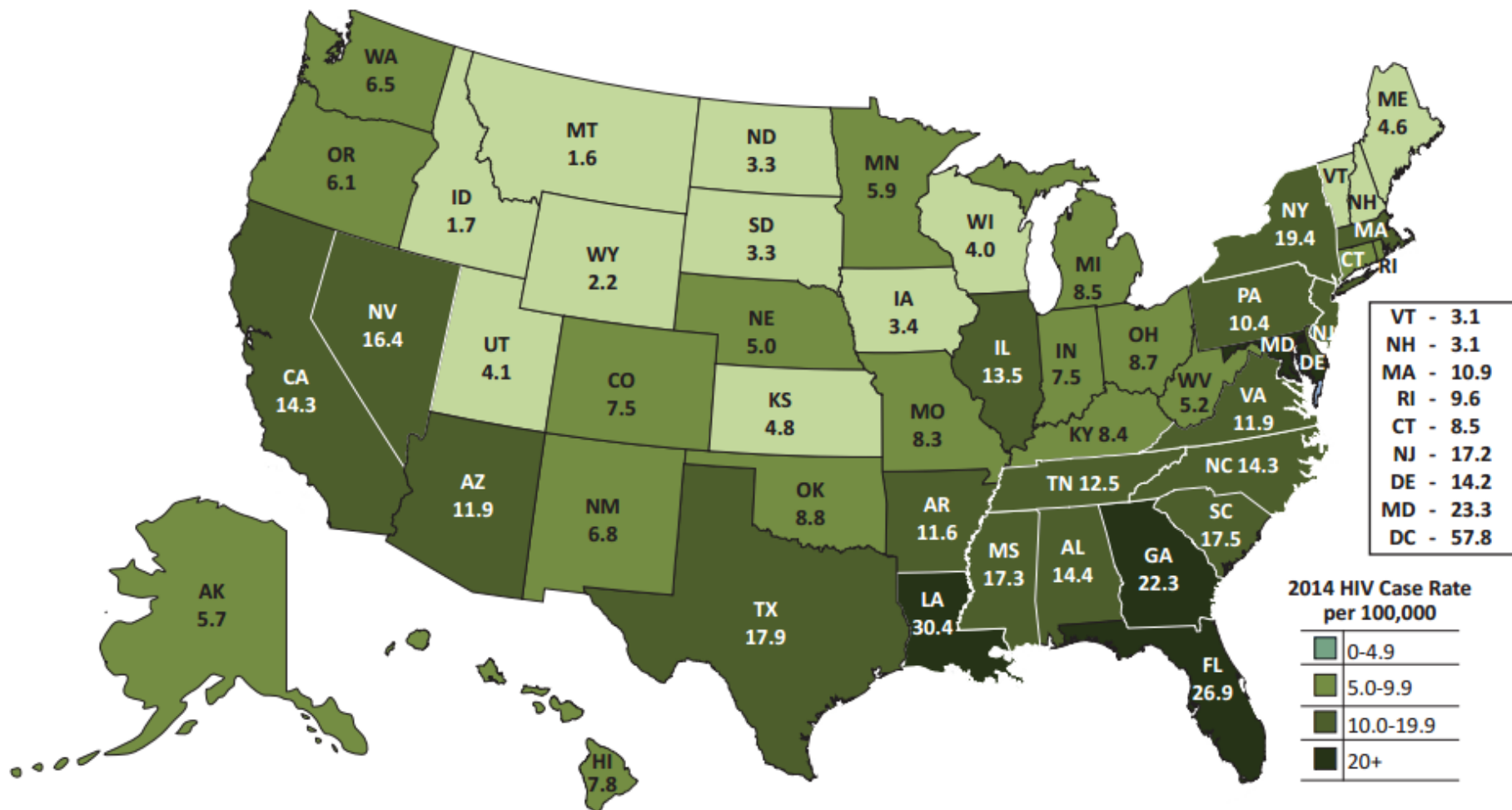
# Percent and Number of Uninsured Adults in Louisiana, 2003-2015



2015 Louisiana Health Insurance Survey

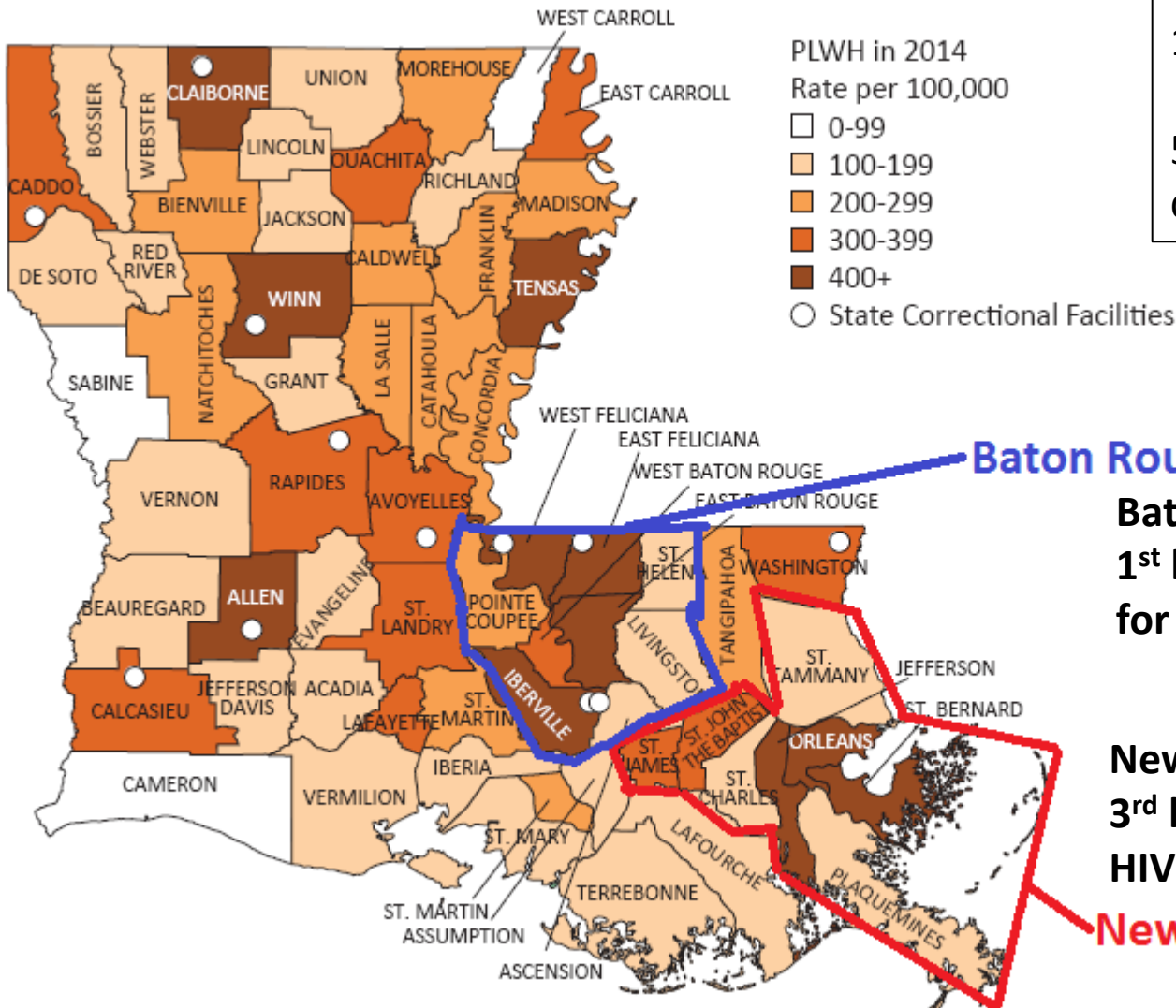
[http://dhh.louisiana.gov/assets/medicaid/LHIS/2015LHIS/LHIS\\_2015\\_Final.pdf](http://dhh.louisiana.gov/assets/medicaid/LHIS/2015LHIS/LHIS_2015_Final.pdf)

# HIV RATES IN THE US



8 Centers for Disease Control and Prevention. *HIV Surveillance Report, 2014*; vol. 26. <http://www.cdc.gov/hiv/library/reports/surveillance/>. Published November 2015. Accessed [January 8,2016].

# Persons Living with HIV Infection by Parish



In 2014:  
19,612 PLWHA in LA  
53% have been diagnosed with AIDS

**Baton Rouge TGA**

**Baton Rouge TGA  
1<sup>st</sup> highest in nation  
for HIV case rates**

**New Orleans Part A EMA  
3<sup>rd</sup> highest in nation for  
HIV case rates**

**New Orleans Part A EMA**

2014 STD/HIV Surveillance Report for State of Louisiana

# Louisiana ADAP (LA HAP)

## Eligibility

- Louisiana resident
- HIV-positive
- Pre-Medicaid: 0-400% FPG
- Post-Medicaid: 139-400% FPG or Medicaid-denied



## Services

- Uninsured: ARV and OI full pay medications
- Insured: Health, dental, vision premiums  
Non-drug cost shares (health, dental, vision)  
Drug cost shares

# LA ADAP Current Structure

## Louisiana Health Access Program (LA HAP)

Central ADAP administrator, located at Louisiana Department of Health (Part B)

## Louisiana Drug Assistance Program (L-DAP)

Uninsured & Insured drug costs

Managed through



## Louisiana Health Insurance Program (HIP)

Insurance premiums  
Non-drug cost shares

Coordinated through







# LA ADAP in 2015



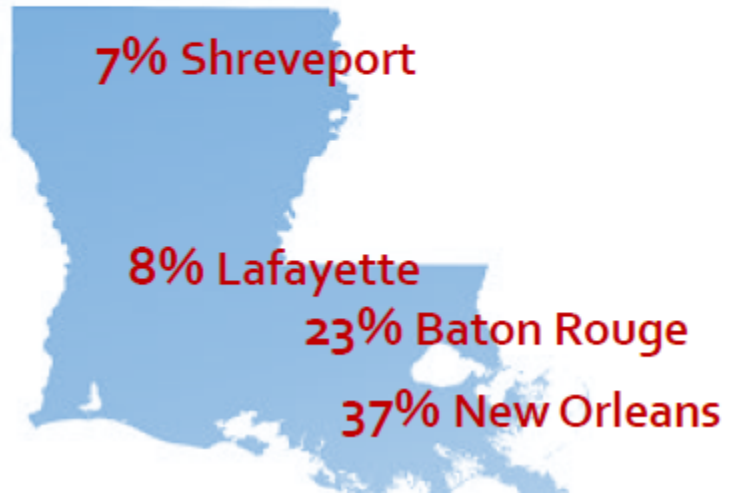
There were **6,943** active, enrolled clients in LA HAP

The majority of LA HAP clients live...

**DEMOGRAPHICS**

73% Male	67% Black	7% 13-24 years
26% Female	27% White	49% 25-44 years
1% Transgender	4% Hispanic	42% 45-64 years
	1% Other	3% over 65 years

**83% under 200% FPL**

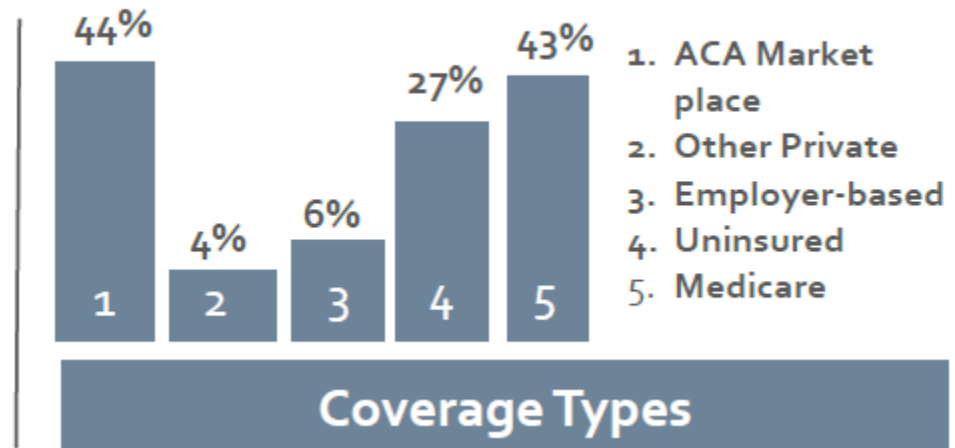


# LA ADAP in 2015

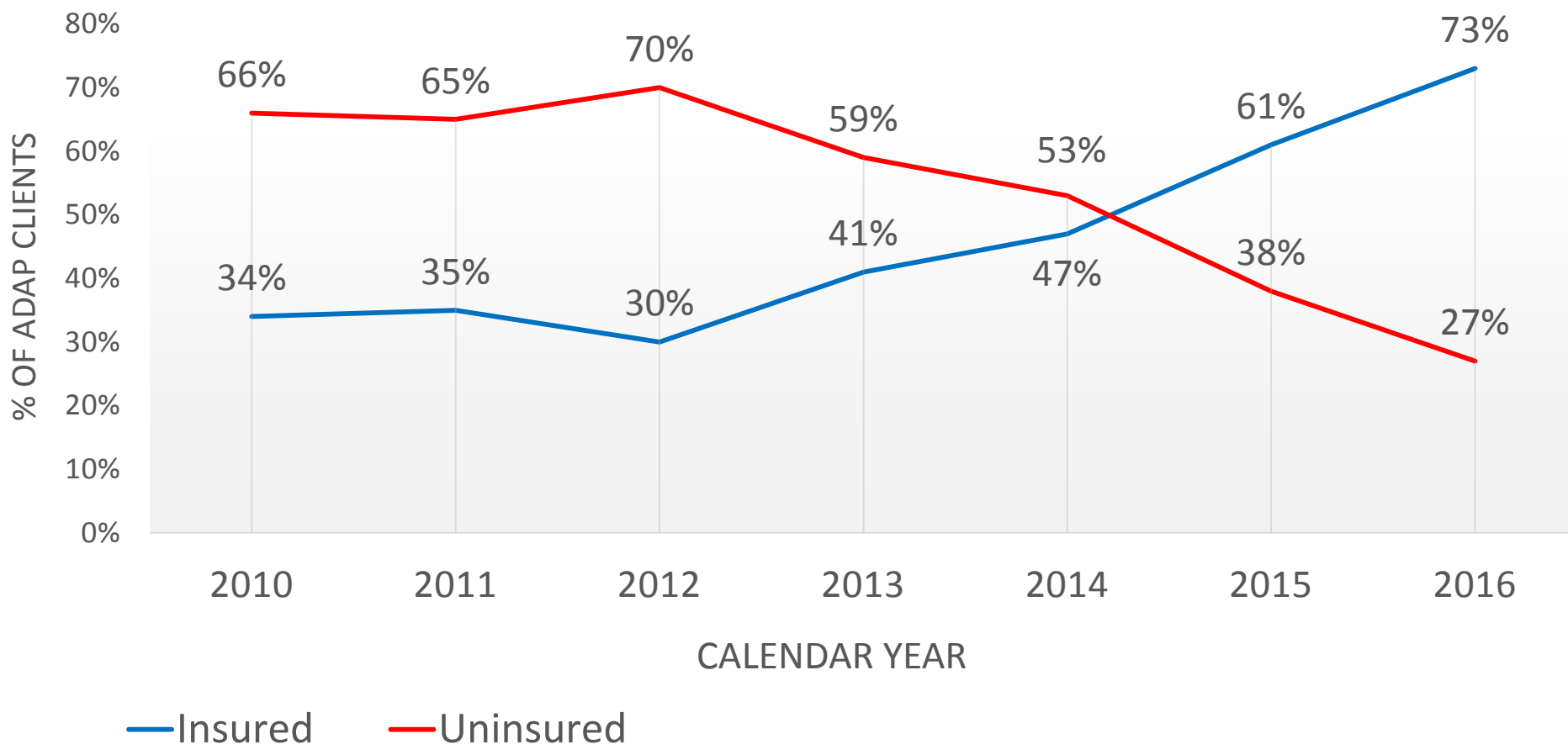


LA HAP paid  
**66,400**  
Claims in 2015

- 64% Medications
- 33% Premiums
- 3% Copays
- 1% Deductibles

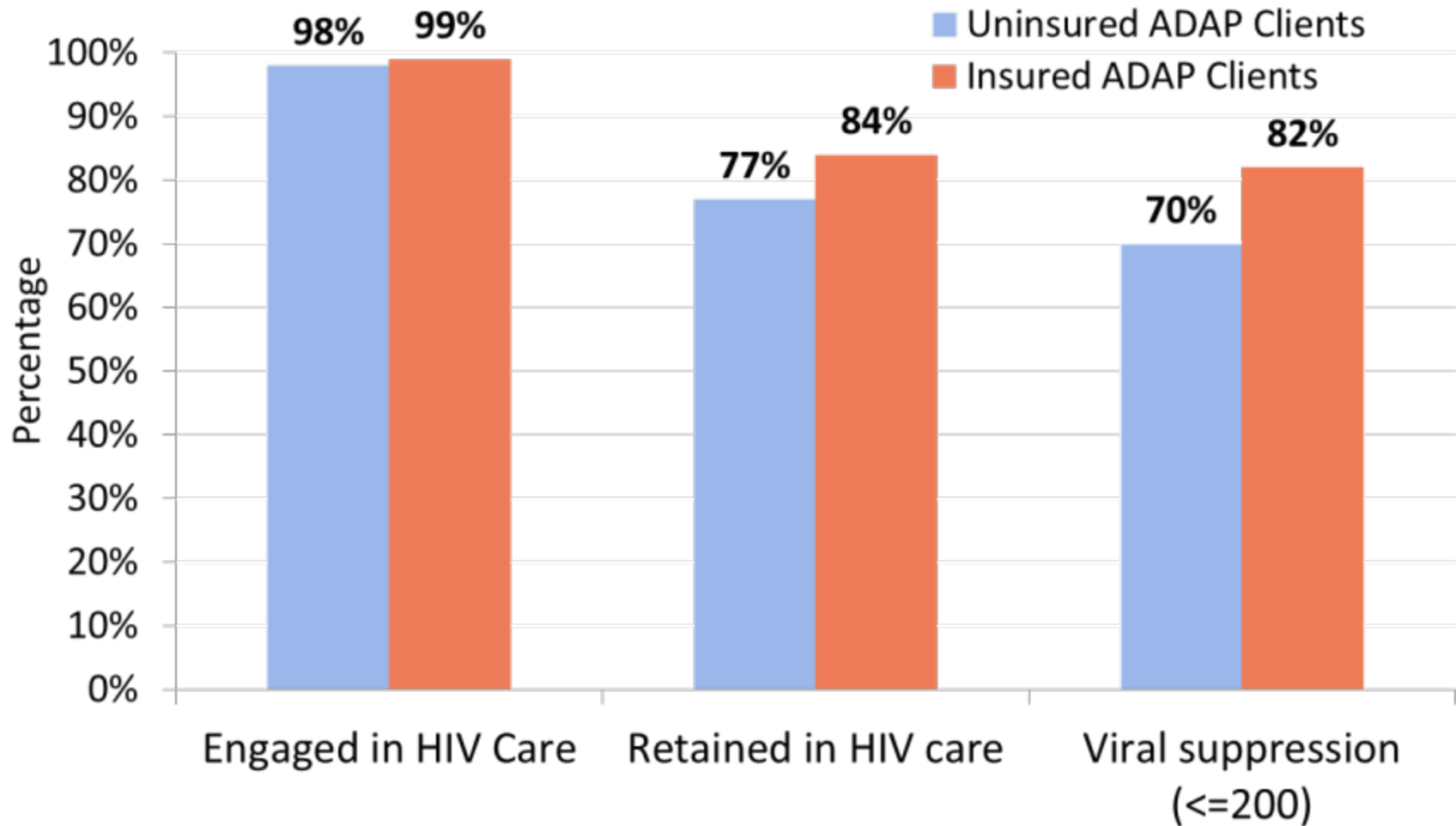


# Louisiana ADAP Insured vs Uninsured: 2010-2016



# Continuum of Care: Uninsured vs Insured LA ADAP Clients

## April 2014-March 2015



# Moving Clients onto Insurance: VL Suppression

## Of clients uninsured in 2014:

- If insured 9+ months in 2015, VL suppression rate of 89%
  - **Increase** from 86% for same population in 2014
- If uninsured in 2015, VL suppression rate of 76%
  - **Stable** from 76% for same population in 2014

# Where we started from... 2008-2014

**Barrier** Separate applications for insured and uninsured programs

- ✓ Fragmentation between programs
- ✓ Separate data storage & duplication of data efforts
- ✓ Overwhelmed insurance contractor
- ✓ Confused clients & case managers

**Barrier** Poor system for claims adjudication & small pharmacy network

- ✓ Collecting rebates extremely difficult due to poor data
- ✓ Uninsured had shrinking options for picking up medications
- ✓ Insured often faced barriers at their network pharmacies

**Barrier** ADAP operating in crisis mode

- ✓ Unable to plan for change when constantly putting out fires
- ✓ Reactive instead of proactive
- ✓ **Cannot pivot quickly for emergency/disaster situations**

# Catalysts for Change

Rising Costs	Community Needs	Organizational Capacity	Healthcare Landscape
<ul style="list-style-type: none"><li>• Uninsured drugs cost more per client</li><li>• Insured care was more cost effective per client</li><li>• Improvement meant taking advantage of drug rebates</li></ul>	<ul style="list-style-type: none"><li>• End to 2+ year wait list</li><li>• Needed better access to insurance for better health outcomes</li><li>• Deserved simplified ADAP application and approval process</li><li>• Needed clearer communication</li></ul>	<ul style="list-style-type: none"><li>• Better program would mean more staff</li><li>• Data improvements necessary for accurate reporting</li><li>• Needed new data system and electronic claims adjudication</li></ul>	<ul style="list-style-type: none"><li>• Affordable Care Act</li><li>• LA Medicaid shrank instead of expanding</li><li>• Infrastructure change: LA privatized the public hospital system</li></ul>

# Making positive changes when everything feels like a crisis

How did we turn all these immediate needs into change?

## LOTS of technical assistance

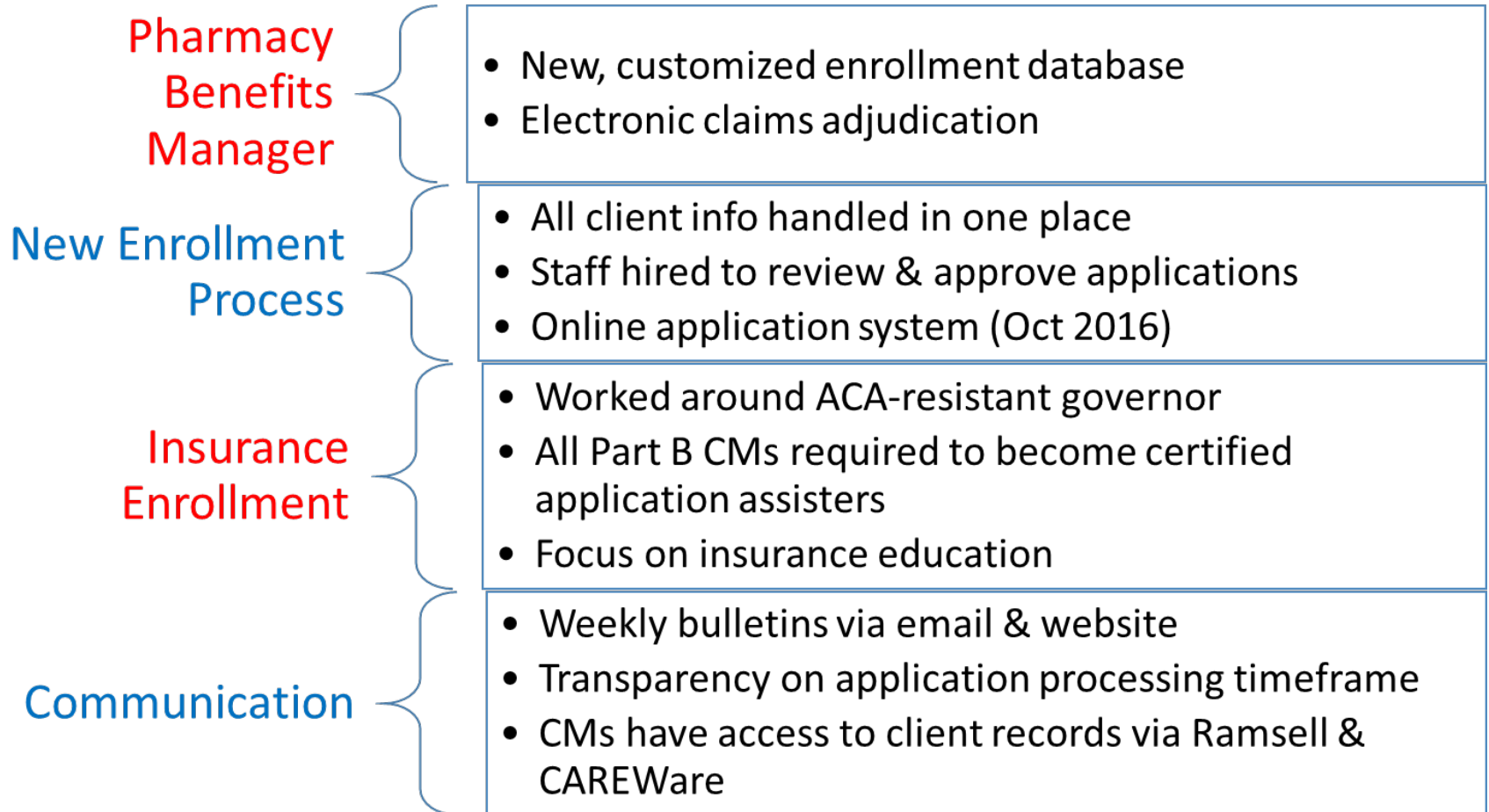
- NASTAD
- Fellow ADAPs
- HRSA

## Agreement to stop applying band-aids and make large changes

- Pharmacy Benefits Manager: Ramsell
- In-house enrollment & recertification
- Vast reduction of paperwork
- Online application
- More ADAP staff



# Our Plan & Results



Last Name

test 2

First Name

another

Patient ID

18850727027

URN

AOTS0611743U

Group

18902 - Medicare

Plan

LA 01

Identification

Diagnosis

Insurance

Income

Eligibility

Document

Other

**Certification of Eligibility**

Date Received General Information

Date Received Medical Information

Date Received Insurance Information

Application Approval Date 01/01/2016

Application Completed Date 06/25/2016

Application First Received 06/25/2016

Core Eligibility Start Date 01/01/2016 \*

Core Eligibility End Date 07/31/2016 \*

Application Status **Enrolled - Eligible** ▼**Plan Enrollment**Group **18902 - Medicare** ▼Plan Start **01/01/2016** \*Plan End **07/31/2016** \*Plan **LA 01** ▼ \*Plan Enrollment Status **Enrolled receive services** ▼**Approved Services**Health Premiums **Yes** ▼Health Copays & Deductibles **Yes** ▼Drug Copays & Deductibles **Yes** ▼Dental Premiums **Yes** ▼Dental Copays & Deductibles **Yes** ▼Vision Premiums **No** ▼Vision Copays & Deductibles **No** ▼



# LA HAP

- Home
- 2016 Open Enrollment
- 2016 Medicaid Expansion
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## [Procedures for Accessing Medication in a State of Emergency](#)

*Posted 8/19/16:*

LA HAP staff is currently working on applications received **August 11th-August 16th** from applicants whose eligibility end date is **8/31/16**.

*Stay up to date on all things LA HAP by [reading our Bulletins](#).*

### WHAT IS LA HAP?

LA HAP stands for Louisiana Health Access Program, which is the ADAP for the state of Louisiana. ADAP stands for AIDS Drug Assistance Program, a funding source available to every state through the federal Health Resources and Services Administration (HRSA) that can be used to provide access to medications for uninsured individuals and assistance with cost shares for insured individuals. Assistance is provided through two LA HAP components know as L-DAP and HIP.

- **LDAP stands for LOUISIANA DRUG ASSISTANCE PROGRAM** and covers drug costs for uninsured individuals as well as drug copays, coinsurances, & deductibles for insured individuals.
- **HIP stands for the HEALTH INSURANCE PROGRAM** and covers insurance plan premiums as well as non-drug copays, coinsurances, & deductibles for insured individuals.





# LA HAP Bulletin

August 16th & 18th, 2016

## 8/18/16: Update to Emergency Protocols Regarding Flooding

The number of parishes declared to be in a [state of emergency](#) is now 20. Clients residing in these parishes, as well as in West Baton Rouge parish, will be able to access medication as outlined in [Tuesday's bulletin](#). As additional parishes are added to the list of disaster areas, they will be able to follow the same procedures.

Clients residing outside the officially designated disaster region but who have been affected by the flooding may contact Ramsell at 1-888-311-7632 to request an early fill. Ramsell will handle these situations on a case-by-case basis.

Please remind clients to apply for disaster assistance at [DisasterAssistance.gov](http://DisasterAssistance.gov).

### **Additional insurers have started implementing emergency measures:**

[Louisiana Medicaid](#)

[Blue Cross Blue Shield](#)

[Humana](#)

[People's Health](#)

### *LA HAP Staff are:*

**Erin Jensen**  
Client Services  
Specialist Supervisor

**Alicia Cooke**  
Capacity  
Building/Training  
Specialist

**Tonda London**  
Administrative  
Coordinator

### *Client Service Specialists:*

**Alicia Gladden**  
**Danielle Hill-Gaines**  
**Mikelle Humble**  
**Cherrika Lewis**  
**Jan Mandani**  
**Abigail Riddick**  
**Tranisha Walker**

LA HAP is part of the  
Office of Public  
Health's STD/HIV  
Program  
[www.hiv.dhh.louisiana.gov](http://www.hiv.dhh.louisiana.gov)

# Moving into Medicaid



- Louisiana Medicaid expansion: July 1, 2016
- Estimated that 375,000 people will enroll by June 30, 2017
- As of Aug 22: 2,221 of ADAP's clients active in 2016 had enrolled in Medicaid

## Thank you to:

Kira Radtke Friedrich

LA Part B HIV Services Manager

Alicia Cooke

LA Part B Capacity Building  
Specialist

Kristina Larson

LA HIV Services Data Manager

Debbie Wendell

Data Management & Analysis  
Manager

# Questions?

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Louisiana Health Assistance  
Program (LAHAP)

[Louisiana Health Assistance  
Program \(LAHAP\)](#)