

Ryan White Grant Administration & the Health Insurance Marketplace

CERTIFIED APPLICATION COUNSELOR (CAC)

To ensure all case management providers have the knowledge and resources necessary to provide accurate information on how Affordable Care Act provisions will affect consumers in the Houston EMA, beginning October 1, 2013 all Ryan White Part A funded case management staff (MCM, CCM, and SLW) must be certified as a Certified Application Counselor (CAC). RWGA will verify certification of staff at designated organizations.

CERTIFIED APPLICATION COUNSELOR DESIGNATED ORGANIZATION (CDO)

Per guidance issued by the Centers for Medicare & Medicaid Services (CMS), the Insurance Marketplace may designate organizations to certify staff or volunteers to perform the duties of CACs. To ensure CACs are available and certified, RWGA will require that all funded case management providers become CDOs. All Certified Application Counselor designated organizations must enter into an agreement with the Marketplace to comply with CMS issued standards and requirements¹. CDOs will maintain all required staff certification documentation for RWGA review.

RESPONSIBILITIES OF CACS

Certified Application Counselors will assist individuals with enrollment into Qualified Health Plans (QHPs) through the Health Insurance Marketplace, and Medicaid enrollment (if applicable). Ryan White funded CAC responsibilities include:

- Providing information about insurance affordability programs and coverage options;
- Assisting individuals to apply for coverage in a QHP through the Marketplace and for insurance affordability programs; and
- Helping to facilitate enrollment of eligible individuals in QHPs and insurance affordability programs. QHP enrollment assistance will include:
 - Helping to identify if clients adult primary care provider of choice is available on selected exchange policy
 - Ensuring clients current anti-retro virus regimen is available on selected Marketplace Insurance policy
 - Providing information regarding available co-pay, deductible and premium assistance through Ryan White Health Insurance Assistance service category (including referral and enrollment assistance)

¹ <http://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/CAC-guidance-7-12-2013.pdf>

CAC PERFORMANCE

To assess the effectiveness of CAC efforts, RWGA will require that the following measures be tracked:

- Number of clients to complete Face to Face ACA related CAC meeting
- Number of Application Completed
- Number of clients determined to be eligible for Marketplace insurance
 - Reason for ineligibility
- Number of clients to complete enrollment
 - Reason for failure to enroll

Providers should use the patient in-reach list as the sample population for measurement tracking during the initial October – March open enrollment period. The CMS Certified Application Counselor Designated organization agreements signed by Ryan White case management providers, also requires that CDOs maintain a method for tracking the performance of each CAC. RWGA performance requirements will coordinate with the contractual obligation.

ACA RELATED PAYER OF LAST RESORT REQUIREMENTS

Per policy clarification issued by the HRSA HIV/AIDS Bureau, Ryan White grantees and contracted providers must make “*every reasonable effort*” to ensure all uninsured Ryan White program clients enroll in any health coverage options for which they may be eligible. If after extensive documented efforts on the part of the contracted provider, the client remains unenrolled in health care coverage, the client may continue to receive Ryan White services. To meet the standard of “*every reasonable effort*”, Ryan White providers must ensure that every client over 100% FPL must:

- Complete 3 Face to Face CAC visits related to ACA Marketplace Enrollment (or until enrollment is completed) during the Health Insurance Marketplace open enrollment period
- Complete Marketplace Application during the Health Insurance Marketplace open enrollment period
- Provide documentation of Marketplace eligibility notice

Should a client fail to complete enrollment during the Health Insurance Marketplace open enrollment period he/she must provide signed documentation for their client record that outlines the following to meet “*every reasonable effort*” guidelines:

- The client may face a tax penalty
- The client will be required to complete application process during the next Health Insurance Marketplace open enrollment period (November 15th – February 15th)
- The reason the client did not complete enrollment

HEALTH INSURANCE MARKETPLACE TIMELINE

- August - RWGA will distribute Marketplace eligible client list for each agency that will include client codes and corresponding FPL.
- September - training for all case managers, service linkage workers and supervisors
- October/November - Agencies will schedule appointments with individuals on in-reach list
- October Joint Meeting will solicit feedback on FAQ and/or additional training needs
- December 20th – Performance measure submission due date (Status of marketplace eligible clients enrolled as of December 15th for 1/1/14)
- February 15th - Performance measure submission due date (Status of marketplace eligible clients for FY 14 start, 3/1/14).