



Facts For Action

Improving patient outcomes through data informed decisions

Cambridge Health Alliance

Volume 2, Issue 4

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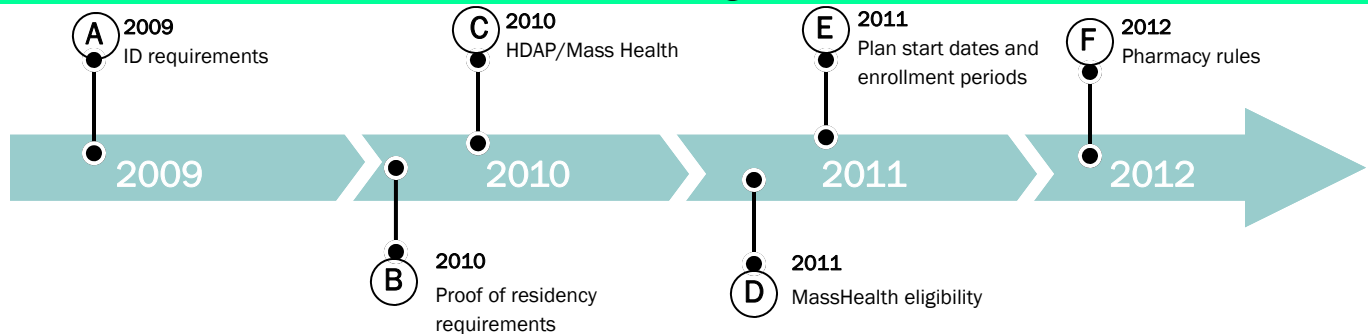
HIV and Insurance: The Problem

- HIV patients need regular medication to stay healthy, so it is especially important that they are always insured
- Case management staff work very hard to help patients complete insurance applications and ensure patients are covered
- 63% of our HIV patients are on Medicare, Medicaid, or other public insurance, and 24% are on private insurance plans. Of those on private plans, most have their premiums paid through HDAP¹. Our HIV patient population is especially vulnerable to changes in insurance policies and requirements.

Insurance policy changes have **quadrupled** the amount of time it takes case managers to ensure that each patient has adequate coverage.



HIV Insurance Changes Timeline²



HIV Insurance Changes and Its Effects on Patients

Label	Insurance change (e.g., policy, requirements, etc.)	Effect on patients
(A)	Individual Tax ID# can no longer be used for insurance applications - must provide SSN	Undocumented patients cannot provide the required documents.
(B)	With MA health reform, proof of residency requirements became more strict	Low-income patients often do not have access to the types of documents that are required (e.g., mortgage papers, utility bills).
(C)	To use HDAP, patients must first prove that they are not eligible for MassHealth	Patients must wait for confirmation from MassHealth before HDAP application can be approved.
(D)	After status changes (e.g., changes to family members, income, address, jobs), patients may no longer be eligible for certain insurance policies	Patients may have to apply for new insurance with every status change. This can happen month-to-month, causing confusion about which insurance is active and therefore which pharmacy can be used to get medications.
(E)	Open enrollment periods for insurance plans may only be once a year	If patients lose insurance, they may not be able to apply for a new policy until the next open enrollment period. In some cases, this could be almost a full year away.
(F)	With some insurance plans, only specific pharmacies can be used for medication refills	Patients may not have an eligible pharmacy nearby and there is often confusion about where to pick up medications. Coordination between pharmacy, patient, and provider takes more time.

Insurance regulations have become more complex. It is a time-consuming process to ensure each patient gets coverage. These issues can easily cause gaps in coverage, making it difficult for patients to obtain needed treatment and care.

Footnotes: 1) The Massachusetts HIV Drug Assistance Program (HDAP) provides access to HIV medications to residents of Massachusetts who are otherwise unable to obtain the medications; 2) Policy changes were implemented over a long period of time, making it difficult to identify the specific date that each change took effect. Years given in the timeline are approximate.



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What you need to know to prevent gaps in insurance coverage and medication access

Insurance can change with any of these situations:

- Changes in members of family
- Changes in address
- Changes in income
- Changes in job status

The pharmacies that can supply medications may change with insurance

PROVIDERS

- If a patient mentions any of the situational changes listed above, please tell them **they need to see their case manager immediately**, and make a note on the Exit Sheet to **schedule the next available appt** with a case manager, indicating which change the patient experienced. **Inform a case manager** about the situation immediately.
- Remind patients to **request medication refills** at least 3 business days in advance
- Tell patients that when they request refills, they should ask the pharmacy to **check insurance** and make sure there are no problems.
- If your patient experiences any problems with insurance, **notify a case manager** immediately

PATIENTS

- **See your case manager regularly**, at least every 6 months, and **return all requested documents** as soon as possible
- **Inform your case manager immediately** if you experience any of the changes listed above
- When you request refills (at least 3 business days in advance), ask the pharmacy to **check your insurance** and make sure there are no problems.
- If you are experiencing any problems with insurance, **call your case manager** immediately for assistance
- If you are planning **extended travel** and you need medications, talk to your case manager about this at least 2 months in advance

Ordering refills

When you call for a refill, you will need:

- Name
- Date of birth
- Medication name
- Prescription number

If the number of remaining refills is 0, you need a **new prescription**. Call the clinic front desk immediately for a new prescription.

