



# Surviving Open Enrollment: Tools and Strategies for SF HIV Frontline Workers

## CEU Information:

This course meets the qualifications for 3.0 contact hours of continuing education credit for nurses as required by the California Board of Registered Nursing, Provider # CPE 13741. Bay Area North & Central Coast AIDS Education & Training Center is approved by the California Association of Marriage and Family Therapists (CAMFT) to sponsor continuing education for LMFTs, LCSWs, LPCCs, and/or LEPs. Bay Area North & Central Coast AIDS Education & Training Center maintains responsibility for this program/course and its content. This course meets the qualifications for 3.0 hours of continuing education credit for LMFTs, LCSWs, LPCCs, and/or LEPs as required by the California Board of Behavioral Sciences, Provider # 133640. Any activities within the program that do not have instructional time are not offered for continuing education credit. Course completion certificates will be awarded upon completion of course evaluations. *Documentation must be retained by the Participant for a period of four years after the conclusion of this program.*



# SF HIV FOG Steering Committee

**Andy Scheer**, SF City Clinic

**Beth Mazie**, PRC

**Dawn Evinger**, PRC

**Jessica Price**, UCSF Bay Area  
& North Coast AETC

**Monica Reyes**, MNHC

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Program (WHP) at UCSF

**Brian Elliot**, ALRP

**Jason Cinq-Mars**, PRC

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Infirmary

**Talia Roven**, Shanti Project

**Kevin Hutchcroft**, HIV Health  
Services SF DPH



San Francisco Department of Public Health: HIV Health Services  
And All of Our Community Partners

# Welcome & Housekeeping

- Importance of the Evaluations
- Closed Captions available
- We will be recording today's sessions
- Participation is encouraged!!
  - Open discussion is available in chat
  - Polling questions
  - Have fun while we all learn
- The slides, links to resources and links to recorded presentations will be emailed and available on the website.



**HIV+?** Don't Let COVID-19  
Stop You From  
Getting Care



**Discuss Care Options  
with Your Doctor**



Wear a Mask



Lab Work



Vaccine



Mental Health



Connect

**Self Care is  
Health Care**



San Francisco HIV Frontline Organizing Group Funded by SF DPH

In the chat, please sign-in and provide the following:

- Name and Pronouns
- Which agency you are from and your role?
- Have you attended an Open Enrollment training from SF HIV FOG? If so, how many?

Please be sure to sign in so we can send you your DoorDash gift codes for lunch 😊





## Polling Question #1:

Have you seen our community outreach campaign – “Reconnect with Care”?

A. Yes 😊

B. No 😞

C. Not sure 😐



# Agenda

- |                         |   |
|-------------------------|---|
| <b>11:00 – 11:15 am</b> | Welcome and Introductions                       |
| <b>11:15 – 12:00 pm</b> | Healthcare Basics                               |
| <b>12:00 – 12:30 pm</b> | Medicare Open Enrollment                        |
| <b>12:30 – 1:00 pm</b>  | Lunch and Open Forum                            |
| <b>1:00 – 1:45 pm</b>   | Covered California: Updates and Open Enrollment |
| <b>1:45 – 2:30 pm</b>   | Support Programs                                |
|                         | Wrap Up and Thank You for Attending!            |



# Learning Objectives

By the end of this training, frontline workers will be able to:

1. Summarize Open Enrollment periods and timelines for Covered California and Medicare
  - ❖ What you can do to assist your clients, what to remember, and important deadlines
2. Identify wrap-around benefits and practice tips to ensure seamless enrollment
  - ❖ ADAP, OA-HIPP, and Part D Premium Payment Program eligibility
3. Describe what happens when a client misses Open Enrollment
  - ❖ Tax Penalties, Special Enrollment Period, Medi-Cal





# Q & A

Please type your questions in the chat

We have A LOT to cover today!

- If we don't get to your particular question during the presentation, we will be sure to follow up with you via email





# Thank You!

- SF Department of Public Health
- Getting to Zero San Francisco
- All Our Community Partners
- Speakers
- Volunteers
- And especially to all of our attendees for being here and for all the work **YOU** have done and continue to do for your clients



## Poll Question #2:

What is the San Francisco Health Plan?

- A. A healthcare access program
- B. A Medi-Cal managed care plan
- C. A system of San Francisco Department of Public Health primary care clinics and hospitals



# Health Insurance 101 Coverage for HIV Care & Treatment

Andy Scheer, LCSW 67597

Medical Social Worker

he/him/his | bilingüe español / inglés

**Surviving Open Enrollment, 2021**



# Learning Objectives

**By the end of this training participants will be able to...**

- Describe two ways that people obtain health insurance
- Describe two cost-savings programs available to People with HIV (PWH)
- Explain how to triage common benefits problems to resolution

# HIV & the Affordable Care Act (ACA)

## Key Provisions Impacting PWH

- No coverage denial for pre-existing conditions (e.g. HIV)
- Insurance Marketplace established (Covered CA)
- Medicaid expansion (Medi-Cal)
- Most “lawfully present” in the US are required to have health insurance
- CA 2020 – Fine for not having health insurance

# HIV & the Affordable Care Act (ACA), continued

## Coverage for Care & Treatment

- Traditional Medi-Cal
- Medi-Cal Expansion (**ACA**)
- Medicare (*disabled and/or 65+*)
- Private Insurance via employer
- Covered CA Marketplace (**ACA**)
- Ryan White-funded care + ADAP (safety net)
- OA-HIPP and EB-HIPP

Health Insurance 101

# PUBLIC HEALTH INSURANCE



# Medi-Cal

Full-scope, public health insurance covering medically necessary care.



- In-patient & out-patient care
- Mental health care
- Substance use treatment
- Prescription drugs
- Some vision & dental services
- Long-term care (which is not included in Medi-Cal Expansion)

*Not an exhaustive list of Medi-Cal benefits*

# Medi-Cal Eligibility

**Enrollment is open year-round for Californians who have “lawfully permanent” status in the US.**

	Traditional Medi-Cal	Medi-Cal Expansion
Income Limits	Eligibility is usually based on participation in another public assistance program like CalWORKS or SSI. These programs define income limits.	Yes. Eligibility based on income.
Resource Limits	Yes. Enrollees are subject to a “resource test”	None. Enrollees can own a primary residency and have money in the bank.

\*Immigrants over 26 years of age without “lawful” status qualify for limited scope Medi-Cal (ER + in-patient hospitalization; aka “emergency Medi-Cal”)

# Medi-Cal Expansion Income Limits

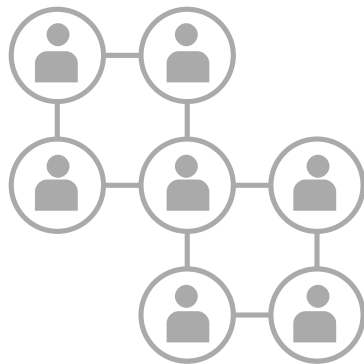
## 138% MAGI FPL (effective 4/1/2021)

- Modified Adjusted Gross Income of Federal Poverty Level
- For most people your MAGI is the same as the Adjusted Gross Income (AGI) found on your tax return
- [tiny.cc/IncomeCaps](https://tiny.cc/IncomeCaps)

Household Size	Annual Income	Monthly Income
1	\$17,775	\$1,482
2	\$23,040	\$2,004
3	\$30,305	\$2,526
4	\$36,570	\$3,048

# Medi-Cal Managed Care

Most people in Medi-Cal must enroll in a managed care plan after enrolling in either Traditional or Medi-Cal Expansion.



60 days  
to  
choose  
a plan

Call Health Care Options at (800) 430-4263 to switch managed care plans.

Call the health plan directly to change to another clinic in the same managed care plan.

# Traditional M'Cal, special program #1

## Aged, Blind, & Disabled program

- 65 years or older, blind or disabled
- Same income thresholds as MAGI Medi-Cal (138%) but add \$20 (e.g. \$1,502 single / \$2,004 couple)
- Asset test (\$2,000 single/\$3,000 couples)

### Medi-Medi

- Couple with enrollment in Medicare  
Medi-Cal pays Parts B & D premiums plus other out-of-pocket medical expenses not covered by Medicare
- Couple with ADAP to pay medication co-pays

# Traditional M'Cal, special program #2

## 250% Working Disabled program

- Disabled and Working at least one (1) hour per month
- Income under 250% of FPL (\$32,200 yearly)
- Asset test (\$2,000 single/\$3,000 couples)  
401(k), IRAs, etc. not counted

### Medi-Medi

- Couple with enrollment in Medicare  
Medi-Cal pays Parts B & D premiums plus other out-of-pocket medical expenses not covered by Medicare
- Couple with ADAP to pay medication co-pays

# Traditional M'Cal, special program #3

## Medically Needy with Share of Cost program

- 65 years or older, blind, or disabled
- Income too high for other Medi-Cal programs
- Asset test (\$2,000 single/\$3,000 couples)
- Enrollees pay a Share of Cost (SOC) before Medi-Cal pays for care and medicines
- $SOC = Income - \$20 - \$600$   
subtract \$65 more if Ct has earned income  
disability-related income is included

# Medi-Cal, Common Issues



- **Client missed Notice of Action or Annual Recertification**



- **Churn in and out of eligibility**



- **Client moved from one county to another**



# HealthySFPlanNetworkSanFrancisco

## What's the difference???

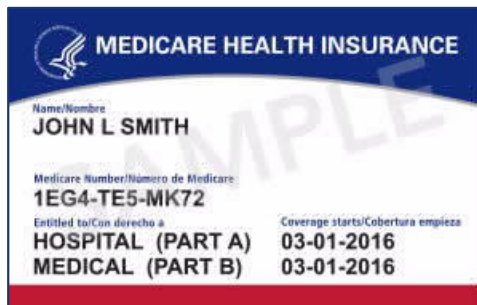
- SF Health Plan – Medi-Cal managed care plan
- Healthy SF – Healthcare access program
- SF Health Network – system of SFDPH primary care clinics and hospitals (ZSFG & Laguna Honda)

# Medi-Cal, COVID Changes

- **Enrollment Processing Prioritized**  
Re-determinations deprioritized
- **No “negative actions”**  
No terminations, increases in SOC or other actions that negatively impact coverage
- **Offices closed and services moved online**  
[MyBenefitsCalWin.org](https://www.MyBenefitsCalWin.org) (works on a cell phone)

# Medicare

## Medicare is administered by Social Security Administration (SSA)



- In-patient Care (Part A)
- Out-patient Care (Part B)
- Prescription drugs (Part D)
- Part C – Bundle of A, B, and D that a private insurance company administers
- Medicare Supplement Insurance (aka MediGap)

**Medicare has very limited coverage for mental health & substance use treatment, vision & dental services.**

# Medicare, continued

## General Eligibility

- 40 quarters of work history
- 65 year of age and older
- If under 65, deemed disabled or have a qualifying medical condition

## Coverage

- Hospitalization
- Doctor visits
- Prescription drugs

Costs depend on when someone enrolls, plan configuration, and other factors

# Public Health Insurance Enrollment & Assistance

## Medi-Cal

- Apply and manage coverage online at [MyBenefitsCalWin.org](https://MyBenefitsCalWin.org) [C4Yourself.com](https://C4Yourself.com)
- Enroll in and make changes to managed plan through
- Health Care Options (800) 430-4263

## Medicare

- [Medicare.gov](https://www.Medicare.gov)  
1-800-Medicare
- Call Part D plan directly
- PRC's EAHP or
- CA Health Advocates' HICAP

Health Insurance 101

# PRIVATE HEALTH INSURANCE

# Private Health Insurance, continued

- Covers **all or part of the medical costs** to maintain one's health and treat illnesses and accidents
- Sets **fee schedules for medical providers** thereby protecting enrollees from unexpected, high medical costs
- Free or low-cost **preventive care**  
e.g., vaccines, screenings, and some check-ups

# ACA Essential Health Benefits

Private health insurance plans must provide all these benefits for ACA compliance.

1. Ambulatory outpatient care
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health & substance use
6. Prescription drugs
7. Rehabilitative and habilitative services and devices
8. Laboratory services
9. Preventive and wellness services and chronic disease management
10. Pediatric services, including oral and vision care





# Private Insurance

## Out of Pocket Costs (OOP)

The amount of coverage varies for each plan

- **Premium** – The monthly amount you pay for a health insurance plan
- **Co-Pay** - A fixed amount you pay for a health care service
- **Co-Insurance** - A percentage of the cost of a service that you are responsible for paying
- **Deductible** - The total amount you pay for a health care services before your insurance starts to pay

# Private Insurance Enrollment Options

## Group Insurance

Provided by a client's employer



## Enrollment Periods

You can only enroll in private insurance at certain times during the year, or if you have a qualifying life event.

## Individual & Family Insurance

Purchased through Covered California, or directly from the health insurance company



# Covered CA

## CA marketplace for private health insurance

### WHERE TO APPLY

- CoveredCA.com
- (800) 300-1506
- Certified Covered CA Enrollment Worker

### WHEN

- Normally October 15 to January 15 annually
- Pandemic Special Enrollment, April 12 to December 31

### ELIGIBILITY

- U.S. citizens
- Legal permanent residents & lawfully present individuals
- Households w/o Medicare or employer-sponsored health insurance (exceptions apply)

# Covered CA, Plan Options

Plans have four levels



**Low Premiums**

**High OOP Costs**

**High Premiums**

**Low OOP Costs**

# Private Insurance

## Off-Exchange Purchase

- Great option for undocumented people, international students, people with fluctuating income
- Purchase directly from insurance company  
Kaiser, Blue Shield, HealthNet, etc.
- Available during open enrollment or ACA-defined Special Enrollment Periods
- Couple with OA-HIPP to pay monthly premiums (up to \$1,938 monthly!) and ADAP for medicine co-pays

Health Insurance 101

# CA OFFICE OF AIDS (OA) Cost Savings Programs for PWH

# tiny.cc/SFHIVCare



## SF HIV CARE OPTIONS

A guide to clinics, providers, and the healthcare coverage they accept.



**HIVReConnect**

Increasing retention and re-engagement

### Clinic-Based Care Options

HIV Clinics often offer “wrap around” care with Primary Care Physicians, RNs, Social Workers, Benefits Coordinators and other services

#### CLINIC NAME

#### BENEFITS INFO

#### Positive Health Program at Ward 86

SF General Hospital, 995 Potrero Ave.,  
(415) 206-2400, option 3 (new patient)

- Medi-Cal: SF Health Plan (23421)

#### Sister Mary Philippa Health Center

Saint Mary's Hospital, 2235 Hayes Street  
Leah Kramer, LCSW (415) 750-5923  
Andre Robertson, MPA (415) 750-5918

#### UCSF 360 Wellness Center

350 Parnassus Ave., Ste. 908  
(415) 353-2119, option 1 (new patient)

General HIV Clinic with specialty programs

#### Clinica Esperanza

Mission Neighborhood Health Ctr, 240  
Se habla español  
Robert Maldonado (415) 552-1012

### Private Practice Doctors

Medicare and private insurance—including Covered CA plans—often accepted, but usually not Medi-Cal; call to inquire which plans and if accepting new patients

- Virginia Cafaro, MD
- William Kapla, MD
- Carl Stein, PA
- One Medical Group
- Shawn Hassler, MD
- Jeffrey Manese, PA
- Lisa Sterman, MD
- Castro, South Park,
- Mark Higgins, MD
- Charles Moser, MD
- Embarcadero Center,
- Mark Illeman, NP
- John Nienow, MD
- Mission Valencia

### Paying for Care

Covered California (800) 300-1506 | CoveredCA.com  
Medi-Cal 1440 Harrison St. | (415) 863-9882 | MyBenefitsCalWin.com

#### Medi-Cal Expansion may cover meds & care if household income is at or below 138% of MAGI\* FPL

- **2020 138% FPL MAGI\***: household size of 1 = \$17,609/year or \$1,468/month | of 2 = \$23,791/year or \$1,983/month
- Managed Care Plans in SF: **SF Health Plan** (800) 288-5555 | **Anthem Blue Cross** (800) 407-4627
- **Health Care Options** (800) 430-4263 call to enroll/change your plan, or call SF Health Plan or Anthem directly

#### CA Office of AIDS programs help cover costs for meds & care if household MAGI\* FPL is 138% – 500%

- **2019 500% FPL MAGI\***: for 1 = \$63,800 | for 2 = \$86,200 | for 3 = \$108,600 | for 4 = \$131,000
- **ADAP** (tiny.cc/ADAP) covers costs of HIV & related medications for uninsured *and* insured enrollees
- **OA-HIPP** (tiny.cc/OAHIPP) pays private insurance premiums (e.g. Covered CA, COBRA) and some co-pays
- **EB-HIPP** (tiny.cc/EBHIPP) pays client's portion of employer-based insurance and some co-pays
- **Medicare Part D Premium Payment** (tiny.cc/MDPP) pays Medicare Part D and MediGap plan premiums


\*MAGI = Modified Adjusted Gross Income; more info: Google “UC Berkeley Labor Center MAGI” or “IRS Topic 403”

• = Can also help with PrEP

Direct updates: Andy Scheer, LCSW at SF City Clinic (Andy.Scheer@sfdph.org) | UPDATED: 4/22/20




# tiny.cc/SFHIVBenefits



## SF HIV BENEFITS OPTIONS

How to pay for health care and medication  
so you can stay in care and undetectable



**HIVReConnect**  
Increasing retention  
and re-engagement

### Insurance Options

☐ **Employer-based Insurance** Health insurance offered through an employer

- **Enrollment:** Your employer's HR department
- **Cost-savings Programs:** ADAP | EB-HIPP
- **Leave your job?** You have 60 days to enroll in OA-HIPP. OA-HIPP pays up to \$1,938/month. Earn under 138% of MAGI FPL<sup>1</sup>? Yes

☐ **Covered CA** Covered by California Medicaid (Medi-Cal)

- **Enrollment:** (800) 300-1506 | Covered by employer-based insurance or private insurance
- **Open Enrollment:** October 15 to January 15
- **Cost-savings Programs:** ADAP | OA-HIPP
- **Before purchasing insurance** ask your employer or insurance company
- **Ineligible to use Covered CA?** Buy private insurance

#### Medi-Cal (two versions)

- **Enrollment:** MyBenefitsCalWin.org

### CA Office of AIDS (OA) Cost-savings programs

ADAP/HIPP Call Center: (844) 421-7050

Programs in this section should be considered by people with: Private insurance | Medicare | Healthy SF

#### Traditional Medi-Cal with a Share of Cost | No insurance

- **Enrollment:** In person with an ADAP/HIPP Enrollment Worker (EW) | ask your medical provider or benefits counselor to refer you | call the ADAP/HIPP call center to find an EW
- **Open Enrollment:** ADAP, OA-HIPP, EB-HIPP and MDPP enrollment is open year round
- **General eligibility:** HIV+ | live in California | over 18 years old | Income under 500% of MAGI FPL<sup>1</sup> | Not enrolled in full-scope Medi-Cal
- Tell your EW *anytime* your income, address, phone number, or insurance changes

☐ **ADAP<sup>2</sup>** Covers the full cost of HIV & related medications for uninsured clients or co-pays for clients with insurance  
Administered by Magellan Rx (800-424-5906) | tiny.cc/CA-ADAP

- **Re-enroll** with your ADAP/HIPP EW up to 45 days *before* your birthday
- Complete the **Self-Verification Form (SVF)** that is mailed to you 6-months *after* your birthday

☐ **OA-HIPP<sup>2</sup>** Office of AIDS (OA) and Employer-Based (EB) Health Insurance Premium Payment (HIPP) programs pay insurance premiums for Covered CA, COBRA, employer-sponsored and off-exchange plans  
☐ **EB-HIPP<sup>2</sup>** Administered by Pool Administrators Inc. (PAI, 877-495-0990) | tiny.cc/OA-HIPP

- HIPP pays insurance premiums, co-pays, and co-insurance expenses if your income is below 500% of MAGI FPL<sup>1</sup> and you are not eligible for full-scope Medi-Cal or Medicare
- **Re-enroll** with your ADAP/HIPP EW up to 45-days *before* your birthday *and* 6-months after
- **File your taxes every year.** A tax return is nearly always required for re-enrollment in OA-HIPP
- Check with your insurance company regularly to ensure they are receiving HIPP payments from OA

Medicare Part D Premium Payment program pays Part D premiums. See page if not 100% covered by...



# Questions?

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Medical Social Worker  
San Francisco City Clinic (SFDPH)  
[Andy.Scheer@SFDPH.org](mailto:Andy.Scheer@SFDPH.org)





# Medicare Open Enrollment

Presented by Christiana Poynter, EAHP Staff Attorney

# Important Dates

	Sign up Dates	Effective Dates
<b>Medicare Advantage &amp; Part D</b>	<b>October 15, 2021 – December 7, 2021</b>	<b>January 1, 2022</b>
<b>Covered California</b>	<b>November 1, 2021 – December 15, 2021</b>	<b>January 1, 2022</b>
	<b>December 16, 2021- January 31, 2022</b>	<b>February 1, 2022</b>
<b>Medicare Parts A &amp; B</b>	<b>January 1, 2022 – March 31, 2022</b>	<b>July 1, 2022</b>



# MEDICARE

The Federal Insurance Program administered by the Social Security Administration (SSA)

## Eligibility Requirements

- ☐ For people who are 65 and older
- ☐ Certain Younger people with disabilities (SSDI for 24 months)
- ☐ People with End-Stage Renal Disease (ESRD)
- ☐ People with Lou Gehrig's Disease (ALS)
- ❖ Enrollment Period:



# MEDICARE

- Medicare has different parts
  - Part A = hospital insurance
  - Part B = medical/outpatient insurance
  - Part C = Medicare Advantage Plan
  - Part D = prescription drug coverage
- “Original Medicare” refers to enrollment in Parts A, B, and D
- Can enroll in either Original Medicare or Medicare Advantage plan



# Medicare Open Enrollment

Open Enrollment is from October 15, 2021 – December 7, 2021

- During the Open Enrollment period, you can:
  - Switch from Original Medicare to Medicare Advantage
  - Switch Medicare Advantage plans
  - Enroll in a Part D plan
  - Change Part D plans
- Changes or new enrollment effective January 1, 2022

## Open Enrollment for Medicare Parts A & B

- January 1, 2022 – March 31, 2022
- For more information about enrolling in Parts A & B, contact HICAP at (415) 677-7520



# What is Part C?

- Part C plans are also called Medicare Advantage Plans
- Coverage provided by private insurance companies approved by Medicare
- In California, Advantage plans include Parts A, B, & D
- Often a monthly premium in addition to the Part B premium
- Potential cost savings
- Many offer supplemental benefits such as dental, vision, health, and wellness
- Must be enrolled in Parts A & B to enroll in a Medicare Advantage



# Part D Plans

- Considerations when choosing a Part D plan
  - Check formularies for client's prescription medication
  - Check an restrictions on the medication, i.e., prior authorizations or step-therapy
  - Review the premium price and cost-sharing associated with each plan
- ADAP can help with Part D plans too!
  - ADAP will pay for co-pays for prescriptions on ADAP's formulary
  - Can also enroll in CDPH's Medicare Part D Premium Payment (MDPP) program
- To maximize benefits, enroll in a Benchmark plan





# Plan Compare Tool

- Go to [Medicare.gov/plan-compare](https://www.Medicare.gov/plan-compare) to review coverage options for clients!
- Search using your client's information, or no information, to review coverage options
- Be sure you are looking at the correct year's plans
- Select which comparisons you need
- Enter prescription information to compare formularies



# Find a 2022 Medicare plan

You can shop here for **drug plans (Part D)** and **Medicare Advantage Plans**.  
See your 2022 plan options now by logging in or creating an account.

Log in or Create Account

[Continue without logging in](#)

Feedback

## New to Medicare?

Learn about your options & enroll in a plan.

Learn more about options

## Qualify for a Special Enrollment Period?

Log in or create account to change your 2021 coverage.

Log in or Create Account

[Continue without logging in](#)

**i** You're viewing 2022 plans. [Show me 2021 plans.](#)

## Answer a few quick questions

What type of 2022 coverage are you looking for?

We'll show you 2022 plans. If you want a plan that starts before January 1, [view 2021 plans.](#)

- ☐ Medicare Advantage Plan
- ☐ Drug plan (Part D)
- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy only
- ☐ I want to learn more about Medicare options before I see plans

 You're viewing 2022 plans. [Show me 2021 plans.](#)

There may be separate drug plans available with lower drug costs. [Tell me more.](#)

[View 25 available drug plans](#)

[← Back to drugs & pharmacies](#)



MY LOCATION

San Francisco, CA [Change location](#)

PLAN TYPE

Select a Plan Type ▾

Filter by:

Plan Benefits ▾

Insurance Carrier ▾

Drug Coverage ▾

Star Ratings ▾

Special Needs Plans ▾

Showing 10 of 27 Medicare Advantage Plans

SORT PLANS BY

Lowest drug + premium cost ▾

## Aetna Medicare Elite Plan (PPO)

Aetna Medicare | Plan ID: H5521-293-0

Star rating: ★★★★★

## Aetna Medicare Elite Plan (PPO)

Aetna Medicare | Plan ID: H5521-293-0

Star rating: ★★★★★

### MONTHLY PREMIUM

**\$0.00** Includes: Health & drug coverage

Doesn't include: \$148.50 Standard Part B premium

### YEARLY DRUG & PREMIUM COST

**\$0.00**

Only includes premiums for the whole year when you don't enter any drugs

### OTHER COSTS

**\$750 annual deductible** Health deductible

**\$0.00** Drug deductible

**\$11,300 In and Out-of-network**

**\$6,700 In-network**

Maximum you pay for health services

### PLAN BENEFITS

- ✓ Vision
- ✓ Dental
- ✓ Hearing
- ✗ Transportation
- ✓ Fitness benefits
- ✓ Worldwide emergency
- ✓ Telehealth

See more benefits ▾

### COPAYS/COINSURANCE

Primary doctor: **\$0 copay**

Specialist: **\$25 copay per visit**

### DRUGS

[Add your prescription drugs](#)

Enter drugs you take regularly (if any) to see your estimated drug + premium cost

Enroll

Plan Details

☐

Add to compare

	<p><b>Aetna Medicare Elite Plan (PPO)</b> ✕</p> <p><b>\$0.00</b></p> <p>Medicare Advantage and drug monthly premium</p> <p><b>Enroll</b></p> <p>Plan Details</p>	<p><b>Anthem MediBlue Select (HMO)</b> ✕</p> <p><b>\$0.00</b></p> <p>Medicare Advantage and drug monthly premium</p> <p><b>Enroll</b></p> <p>Plan Details</p>	<p><b>Kaiser Permanente Senior Advantage Basic SF (HMO)</b> ✕</p> <p><b>\$19.00</b></p> <p>Medicare Advantage and drug monthly premium</p> <p><b>Enroll</b></p> <p>Plan Details</p>
<b>Overview</b>			
Star rating	★★★★☆	★★★★☆	★ This plan got Medicare's <b>highest rating</b> (5 stars)
Health deductible	\$750 annual deductible	\$0	\$0
Drug plan deductible	\$0.00	\$0.00	\$0.00
Maximum you pay for health services	\$11,300 In and Out-of-network \$6,700 In-network	\$7,550 In-network	\$6,700 In-network
Health premium	\$0.00	\$0.00	\$0.00
Drug premium	\$0.00	\$0.00	\$19.00

Feedback

## Using Plan Compare tool on Medicare.gov

- Once the plans come up, select “Plan Details”
- This takes you to the plan’s overview page where you can quickly see important details such as:
  - Premiums
  - Deductible
  - Co-pays for doctor visits, lab services, urgent or emergency care
  - Further down you will see Drug Coverage priced by Tiers
  - Extra benefits such as preventative dental, vision, or hearing (if available)



# Helping Clients During Open Enrollment

- No action needed if client does not wish to change or enroll in Advantage or Part D plans
- However, best practice is to review current coverage!
  - Check for changes to formulary or provider network
  - Check for changes in premium amount
  - Use the Plan Compare Tool!
- Medicare is required to send clients notices of changes, or cancellations of coverage via US Post
  - Remind clients to check their physical mail!
- If client wants to enroll in or switch their Advantage or Part D plan, they will do this using the Plan Compare Tool







What if I miss Open  
Enrollment for Medicare  
Advantage & Part D?

# Special Enrollment Period

- If you miss Open Enrollment, you can enroll in or switch Advantage or Part D plans when you have Qualifying Life Event (QLE)
- Qualifying Life Event may include, but are not limited to:
  - Moving
  - Becoming eligible for Medi-Cal
  - Qualifying for Extra Help
  - Losing other coverage such as Medi-Cal or Cobra
  - Losing employer or union coverage
  - Health plan changes its Medicare contract
  - Marriage or divorce
  - Having a baby or adopting a child



# What if I don't enroll in Medicare?

It's very important to elect Medicare Part D when you become eligible!

- If you don't choose a Part D plan during initial enrollment and later enroll, there is a penalty that remains with you throughout your enrollment
- Part D Penalty
  - 1% of the national base beneficiary premium times the number of months the individuals lacked covered
  - Added to *monthly premium*
- Exceptions
  - Have prescription drug coverage through another plan
  - If you lose employer or other drug coverage, you have 63 days to sign up for a Part D plan without facing a penalty



# What if clients have Medicare and Medi-Cal?

Clients who are Medi-Medi have additional protections

- If they have full-scope Medi-Cal (no Share of Cost), they are automatically enrolled in Extra Help and will receive the Medi-Cal State Buy-In
  - Medi-Cal pays for Parts A, B, & D premiums
  - Clients qualify for low or no co-pays/cost-sharing for prescription drugs
  - Clients qualify for LINET program to provide prescription coverage during transition periods
- Medi-Medi clients can
  - Change plans at any time
  - Enroll in Special Needs Plans
  - Enroll in ADAP



# Thank you!

- Questions?
  - Call PRC's EAHP
    - (415) 972-0870
    - [www.prcsf.org](http://www.prcsf.org)
  - Email [EAHP@prcsf.org](mailto:EAHP@prcsf.org)
  - Call HICAP
    - (800) 434-0222
- Reminder
  - Enroll at [CoveredCA.com](http://CoveredCA.com)
  - Covered California hotline: (800) 300-1506
  - Enroll at [Medicare.gov/plan-compare](http://Medicare.gov/plan-compare)

# Reminder Complete Evaluation

Check your email for the link to the evaluation





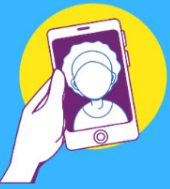


# Surviving Open Enrollment: Tools and Strategies for SF HIV Frontline Workers







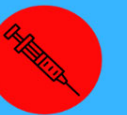


**HIV+?** Don't Let COVID-19 Stop You From Getting Care

---


**Discuss Care Options with Your Doctor**

---

Wear a Mask    Lab Work    Vaccine    Mental Health    Connect

**Self Care is Health Care**

 San Francisco HIV Frontline Organizing Group Funded by SF DPH

## Polling Question #3:

Have you seen our community outreach campaign – “Reconnect with Care”?

A. Yes 😊

B. No 😞

C. Not sure 😐



# Housekeeping

- Importance of the Evaluations
- Closed Captions available
- We will be recording today's sessions
- Participation is encouraged!!
  - Open discussion is available in chat
  - Polling questions
  - Have fun while we all learn
- The slides, links to resources and links to recorded presentations will be emailed and available on the website.





# Covered California

Presented by Jason Cinq-Mars, EAHP Supervising Attorney

# Covered California Open Enrollment

Open Enrollment is from November 1, 2021–January 31, 2022

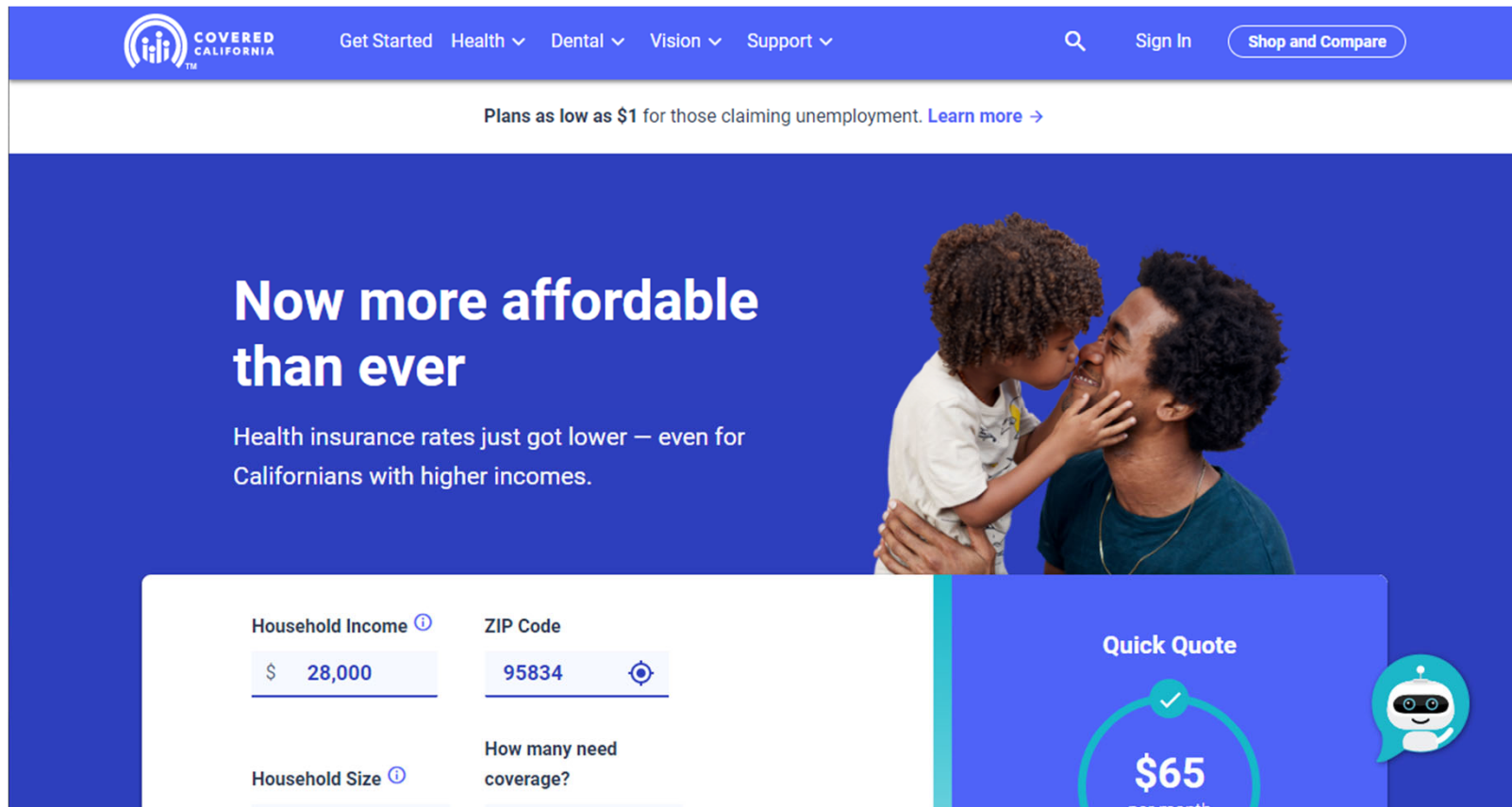
- During Open Enrollment, you can:
  - Renew your health plan
  - Enroll in a plan for the first time
  - Change your health plan
- The date you enroll or make changes determines the date the new plan goes into effect:

Enroll Between . . .	Coverage Starts . . .
Nov 1, 2021 – Dec 15, 2021	January 1, 2022
Dec 16, 2021 – Jan 31, 2022	February 1, 2022



# Covered California

CA marketplace for private health insurance  
Coveredca.com



The image shows the top portion of the Covered California website. At the top is a blue navigation bar with the Covered California logo on the left, followed by links: "Get Started", "Health" (with a dropdown arrow), "Dental" (with a dropdown arrow), "Vision" (with a dropdown arrow), and "Support" (with a dropdown arrow). On the right side of the navigation bar are a search icon, a "Sign In" link, and a "Shop and Compare" button. Below the navigation bar is a white banner with the text "Plans as low as \$1 for those claiming unemployment. [Learn more](#) →". The main content area has a dark blue background. On the left, the text "Now more affordable than ever" is displayed in white, followed by "Health insurance rates just got lower — even for Californians with higher incomes." On the right, there is a photograph of a man and a young child smiling and hugging. Below the text and photo is a white form for a "Quick Quote". The form has four input fields: "Household Income" with a value of "\$ 28,000", "ZIP Code" with a value of "95834", "Household Size" (empty), and "How many need coverage?" (empty). To the right of the form is a blue box with the text "Quick Quote" at the top, a green checkmark icon, and a large "\$65" with "per month" below it. A small chatbot icon is visible on the right side of the blue box.

COVERED CALIFORNIA

Get Started Health ▾ Dental ▾ Vision ▾ Support ▾

Search Sign In Shop and Compare

Plans as low as \$1 for those claiming unemployment. [Learn more](#) →

## Now more affordable than ever

Health insurance rates just got lower — even for Californians with higher incomes.

Household Income ⓘ ZIP Code

\$ 28,000 95834

Household Size ⓘ How many need coverage?

Quick Quote

\$65 per month



# Who May Use Covered CA?

## U.S. Citizens

***Immigrants*** with qualified legal status\*

- Legal Permanent Residents (green card holders)
- Refugee or Asylees
- Battered Spouse, Child or Parent
- Individuals with some sort of legal, but non-immigrant status (worker and student visas)

***Applicants*** for certain legal statuses

- Temporary Protected Status with Employment Authorization
- Victim of trafficking



# Special Enrollment: Qualifying Life Event

- Losing health coverage
  - including Medi-Cal
- Income changes
- Turning 26 & no longer eligible for parent's plan
- Moving to California or new region in California
- Having a child
- Getting married or entering into DP
- Becoming a citizen/national/lawfully present
- Federally recognized American Indian or Alaska Native Tribe



## Covered California: Metal Tiers



A plan with a lower premium results in a larger copayment with higher deductibles and maximum out-of-pocket expense





# PROGRAM UPDATES





# COVERED CALIFORNIA 2022 RATES GIVING MORE CONSUMER CHOICE AND LOW-RATE CHANGE

- The American Rescue Plan continues to provide record low premiums throughout the entire 2022 coverage year.
- The American Rescue Plan is lowering premiums and enabling **738,000** people in California to get covered for only **\$1 per month**.
- A record **1.6 million** people enrolled in Covered California, giving the state one of the healthiest consumer pools in the nation for the seventh consecutive year.
- The record enrollment and healthy consumer pool were key factors in being able to negotiate a lower preliminary rate increase for California's individual market. **1.8% in 2022, and a three-year average of only 1.1% (2020-2022).**



# CALIFORNIA PREMIUM CREDIT PROGRAM

Starting January 1, 2022, a new law established a permanent “**California Premium Credit Program**” through which **Covered California will make payments of \$1 per member per month (PMPM) to their qualified health plan (QHP) carriers** on behalf of all Covered California enrollees.

- Not an eligibility-based program.
- Some enrollees will now have access to **\$0 net premium plans**.
- The payment is a **state premium credit**. It is **not** part of the federal Advanced Premium Tax Credit (APTC). Consumers do not need to reconcile this state premium credit on their income taxes.
- The state premium credit will **apply to both subsidized and unsubsidized** Covered California enrollees and to those enrolled in catastrophic plans through the exchange
  - Will not apply to **individuals enrolled in a dental-only plan**.

**CalHEERS will launch the functionality to apply** the California Premium Credit of at least \$1 to all quoted Covered California enrollees.



# DISPLAY OF CALIFORNIA PREMIUM TAX CREDIT

On the CalHEERS Application, Plan Selection screen – plan tiles, the new state premium credit will be displayed as part of the **“monthly savings”** total.

For unsubsidized enrollments, the consumer will now see **“after \$1 monthly savings”** on the plan tile.

The screenshot displays the CalHEERS Plan Selection screen with four plan tiles. Each tile shows the plan name, type, and a highlighted monthly savings amount. The first tile, 'blue california Silver 94 Trio HMO', shows a savings of \$0.00. The second tile, 'blue california Silver 70 Trio HMO', shows a savings of \$466.58. The third tile, 'KAISER PERMANENTE Silver 70 HMO', shows a savings of \$484.27. The fourth tile, 'Anthem BlueCross Silver 70 EPO', shows a savings of \$489.23. Each tile also lists additional details such as primary care visits, generic drugs, yearly deductible, total expense estimate, quality rating, and provider search options.

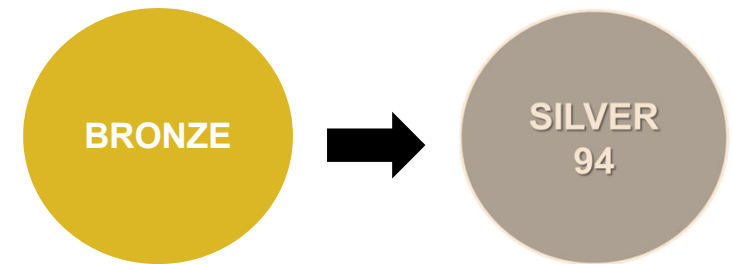
Plan Name	Plan Type	Monthly Savings
blue california Silver 94 Trio HMO	SILVER HMO CSR	\$0.00
blue california Silver 70 Trio HMO	SILVER HMO	\$466.58
KAISER PERMANENTE Silver 70 HMO	SILVER HMO	\$484.27
Anthem BlueCross Silver 70 EPO	SILVER EPO	\$489.23



# PROPOSAL POLICY TO AUTOMATICALLY MOVE CERTAIN ENROLLEES IN BRONZE TO SILVER PLANS

Covered California proposes to automatically move Bronze enrollees into Silver Plans during their upcoming renewal if:

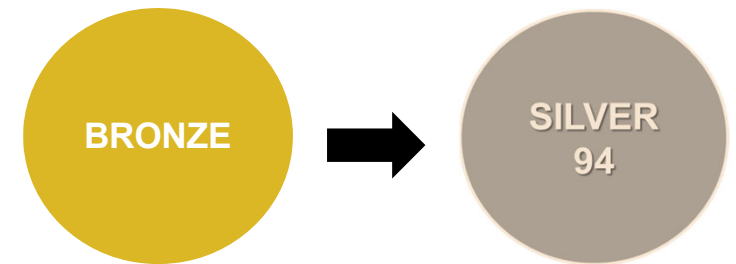
- Their income is under 150% FPL (Federal Poverty Level).
- They can get a \$0 per member per month (PMPM) Silver plan with the same carrier in the same plan.
- Enrollees in Bronze High Deductible Health Plans (HDHPs) will be moved to a Silver product with the same carrier if the Silver product meets the \$0 PMPM requirement.



# PROPOSAL POLICY TO AUTOMATICALLY MOVE CERTAIN ENROLLEES IN BRONZE TO SILVER PLANS

## Next Steps:

- Covered California has engaged state and federal partners, issuers and consumer advocates in program development; and will need finalize the proposed emergency state regulation to revise the passive renewal hierarchy allowing for this auto-enrollment.
- Covered California Board discussed the proposed regulations for adoption in September 2021.
- File regulations with the Office of Administrative Law.
- Communication with stakeholders before any action.

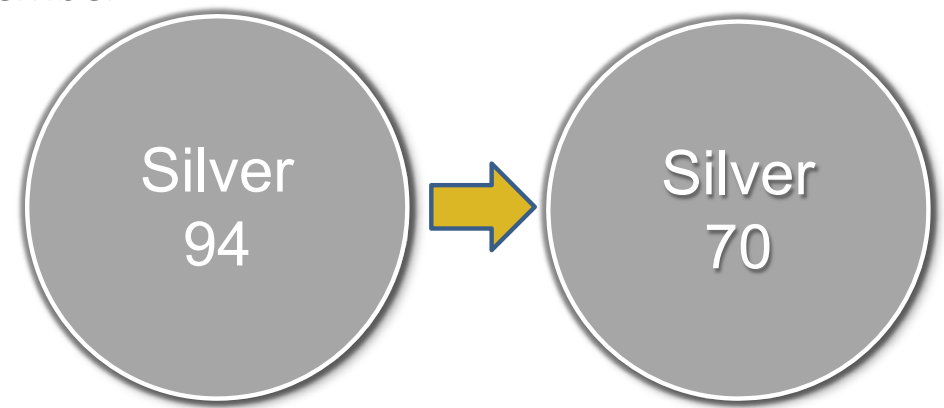


# PASSIVE RENEWALS FOR 2021 UNEMPLOYMENT BENEFIT RECIPIENTS

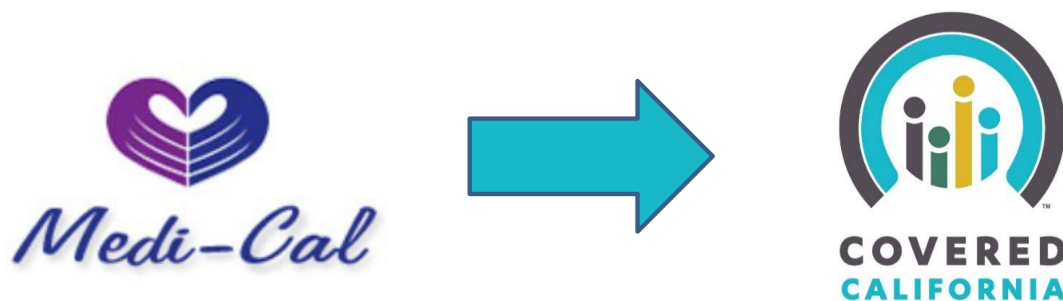
- Eligibility for the Silver 94 plan provided by the American Rescue Plan for those that reported Unemployment Benefits in 2021 **will end December 31, 2021**
- During the 2022 renewal period unemployment beneficiaries can:
  - **Actively renew** into a new plan they are eligible for

OR

- **Passively renew** into a Silver 70 unless eligible for an enhanced Silver plan (73,87,94) based on household income.



# AUTO ENROLLMENT TO COVERED CALIFORNIA FROM MEDI-CAL



- California Senate Bill 260 directs Covered California to **automatically** enroll individuals who lose Medi-Cal coverage and gain eligibility for subsidized coverage.
- Individuals will be enrolled in the lowest cost silver plan available, unless Covered California has information that enables enrollment with the individual's previous managed care plan.
- Enrollment is to occur **before** the Medi-Cal termination date.
- The first premium payment (binder payment) due date to be no sooner than the last day of the first month of enrollment.



# AUTO ENROLLMENT TO COVERED CALIFORNIA FROM MEDI-CAL

- Covered California must provide a notice that includes the following information:
  - The plan in which the individual is enrolled.
  - The right to select another available plan and any relevant deadlines for that selection.
  - How to receive assistance to select a plan.
  - The right not to enroll in the plan.
  - Information for an individual appealing their previous coverage through Medi-Cal
  - A statement that services received during the first month of enrollment will only be covered by the plan if the premium is paid by the due date.

## Implementation Timing

- SB 260 called for implementation of auto enrollment no later than July 1, 2021. But This was delayed due to COVID-19 impacts.
- CalHEERS will be programmed to perform auto-enrollments beginning July 2022.
- Covered California is considering a pilot phase prior to June of 2022 to coincide with the anticipated end of the Public Health Emergency







# 2022 BAY AREA REGIONAL RATES



## BRONZE

## 2022 REGION 4 RATES

Lowest  
Price

	Health Plan	2021 Monthly Gross Premium	2022 Monthly Gross Premium	YOY Change	Consumer Pays	Market Share
1	Kaiser HMO	\$433	\$432	▼ -0.2%	\$3	61.2%
2	CCHP HMO	\$449	\$455	1.4%	\$26	18.8%
3	Anthem EPO	-	\$486	-	\$56	-
4	Blue Shield PPO	\$505	\$517	2.2%	\$87	15.2%
5	Oscar EPO	\$468	\$533	▲ 13.8%	\$103	4.6%
6	HealthNet EPO	\$640	\$655	2.3%	\$225	0.2%

- 1.1% weighted average increase
- Anthem new entrant for 2022



Monthly Gross Premium and Consumer Pays amount based on 40 years old at 250% FPL - \$430 APTC

SILVER

## 2022 REGION 4 RATES

Lowest Price	Health Plan	2021 Monthly Gross Premium	2022 Monthly Gross Premium	YOY Change	Consumer Pays	Market Share
1	Anthem EPO	-	\$530	-	\$100	-
2	Blue Shield HMO	\$607	\$537	▼ -11.5%	\$107	3.4%
3	Kaiser HMO	\$536	\$546	1.8%	\$116	66.6%
4	CCHP HMO	\$601	\$614	2.2%	\$185	9.5%
5	Oscar EPO	\$571	\$636	▲ 11.4%	\$206	2.3%
6	Blue Shield PPO	\$649	\$661	1.8%	\$231	18.1%
	HealthNet EPO	\$959	\$981	2.3%	\$551	0.1%

- 1.6% weighted average increase
- Anthem new entrant for 2022
- \$451 price spread (consumer could save by switching from highest to lowest)

Monthly Gross Premium and Consumer Pays amount based on 40 years old at 250% FPL - \$430 APTC





# 2022 REGIONAL HEALTH PLAN RATES

Bronze and Silver Plans



# San Francisco County (Region 4):

## Rates for 25 and 40-year-old

- The lowest-priced plan for each metal tier is shown in **bold green font**
- The second-lowest silver plan is shown with a **red square**
- Premium rates shown are for a 25-year-old and a 40-year-old single individual.
- Plans that are not offered in all ZIP codes in the county are shown with an asterisk (\*)

### 25-year-old Single Individual

Plan	Minimum	Bronze HDHP	Bronze	Silver	Gold	Platinum
Anthem EPO	\$264	\$364	\$382	<b>\$416</b>	\$535	\$736
Blue Shield PPO	\$390	\$402	\$406	\$519	\$611	\$818
Blue Shield HMO	-	-	-	<b>\$422</b>	<b>\$442</b>	<b>\$517</b>
CCHP HMO	\$345	\$357	\$358	\$483	\$536	\$593
Health Net EPO	\$406	-	\$515	\$771	\$852	\$1,005
Kaiser HMO Coin	<b>\$259</b>	<b>\$358</b>	<b>\$340</b>	-	\$465	-
Kaiser HMO Copay	-	-	-	\$429	\$492	\$528
Oscar EPO	\$283	\$404	\$418	\$499	\$549	\$736

### 40-year-old Single Individual

Plan	Minimum	Bronze HDHP	Bronze	Silver	Gold	Platinum
Anthem EPO	\$336	\$464	\$486	<b>\$530</b>	\$681	\$936
Blue Shield PPO	\$496	\$511	\$517	\$661	\$777	\$1,041
Blue Shield HMO	-	-	-	<b>\$537</b>	<b>\$562</b>	<b>\$659</b>
CCHP HMO	\$440	\$455	\$455	\$614	\$682	\$755
Health Net EPO	\$516	-	\$655	\$981	\$1,084	\$1,280
Kaiser HMO Coin	<b>\$330</b>	<b>\$431</b>	<b>\$432</b>	-	\$592	-
Kaiser HMO Copay	-	-	-	\$546	\$626	\$672
Oscar EPO	\$360	\$515	\$533	\$636	\$698	\$937

# San Francisco County (Region 4): Hospital Network

- Hospital network as of July 2021
- May not be a complete list of hospitals
- Kaiser Permanente hospitals are not listed
- Verify with the health plan if the hospital is in-network

Hospital	Anthem EPO	Blue Shield HMO	Blue Shield PPO	CCHP HMO	Health Net EPO	Oscar EPO
California Pacific Medical Center - D/PAPH						
California Pacific Medical Center - Davies Campus Hospital	X		X	X	X	
California Pacific Medical Center – Mission Bernal Campus	X		X	X	X	
California Pacific Medical Center - Van Ness Campus			X	X	X	
Chinese Hospital	X	X	X	X	X	
Kentfield Hospital San Francisco		X	X			
St. Francis Memorial Hospital		X	X	X	X	X
St. Mary's Medical Center, San Francisco		X	X	X	X	X
UCSF Medical Center	X	X	X	X		X
UCSF Medical Center at Mission Bay		X	X			X
UCSF Medical Center at Mount Zion		X	X			X



**X = New in-network hospital for health plan**



# 2022 DENTAL AND VISION OFFERINGS



## 2022 FAMILY DENTAL CARRIERS



Dental Health Services





# 2022 ADULT VISION COMPANIES



<http://coveredca.eyemed.com/>



<https://www.vspdirect.com/4CA/welcome>

<https://www.coveredca.com/vision/adult/>



# Covered California vs. Medi-Cal Eligibility

- MAGI Medi-Cal and Covered California use **Modified Adjusted Gross Income** to determine eligibility
  - MAGI is the Adjusted Gross Income on tax returns with taxable Social Security Benefits, tax exempt interest and excluded foreign income added back in
- If monthly income is . . .
  - \$0 - \$1,482 (up to 138% FPL)
    - eligible for MAGI Medi-Cal
  - \$1,463 – \$2,684 (between 139% and 250% FPL)
    - eligible for Covered California with premium assistance (APTC) and cost-sharing reductions (CSRs)
  - \$2,659 - \$6,380 (between 251% and 600% FPL)
    - eligible for Covered California with premium assistance only



# Who can enroll in Covered California?

- US citizens, Qualified Immigrants, and applicants for certain legal statuses
- Individuals not eligible for MAGI Medi-Cal
- Individuals not eligible for Medicare with free Part A
- Individuals who don't have employer based coverage
  - Limited exceptions apply to this rule



## How to Enroll

- Before you meet with your client . . .
  - Ask your client to bring income, immigration, and family information
  - Ask your client who their doctor is and to bring a medication list
    - Best Practice: call doctor's office billing department and ask which Covered California plans they accept, including the metal tier
  - Ask your client if they anticipate needing specific procedures or services in the next year





# How to Enroll

- Enroll online, by phone, or in person
  - [CoveredCA.com](https://coveredca.com) or (800) 300-1506 or [storefronts.coveredca.com](https://storefronts.coveredca.com)
  - “No Wrong Door” – Can enroll in Covered California or Medi-Cal through Covered California’s website
- When working with a client
  - Remind your client that there are many affordable options
  - Practice Tip: you don’t have to be an agent to help your client enroll
  - Call Covered California with your client
    - Request a delegation code – helpful for ADAP EW completing OA-HIPP enrollment
    - Practice Tip: if having trouble reaching an agent, enter incorrect client information to speak to a Covered California agent more quickly




www.CoveredCA.com

[Get Started](#) [Health](#) [Dental](#) [Vision](#) [Support](#)  [Sign In](#) [Shop and Compare](#)

## More financial help for just about everyone.

It's true: Health insurance now costs even less — and you can enroll today.



**Household Income**

\$ 28,000

**ZIP Code**

95834

**Household Size**

1

**How many need coverage?**

1

**When do you want to start coverage?**

Next year (2022)

**Age of People Needing Coverage**

45

Calculate

**Quick Quote**



**\$63**  
per month

**for a Silver plan.**  
**Bronze plans as low as \$0.**

After financial help from: Covered California

 Financial Help: \$507 per month

 Bronze, Gold and Platinum plans also available

Learn More



Answer these questions to find out if you qualify for help to lower your health care costs.

Coverage Year:

2022



What is your Zip Code? ⓘ

94103

What is your total household income per year? ⓘ

\$50000

How many people are in your household? ⓘ

1



Enter the age of each person in your household, and tell us if they need coverage.

Age of Head of Household:

40

☒ Needs Coverage?

☐ Pregnant? ⓘ

☐ Blind or Disabled? ⓘ

See My Results



## Online Enrollment Tip

- If your client's income is above 138% FPL and they are not enrolled in Medicare . . .
  - **DO NOT** answer “yes” to this question about disability
  - A “yes” response will stop the Covered California application and direct you to apply for Medi-Cal
- If your client is not eligible for Medicare and their income is above 138% FPL, they are eligible for Covered California regardless of any disability





## Time to Enroll!

- Decide which plan level is best for your client
  - Metal tiers refer to cost-sharing levels
  - Bronze, silver, gold, platinum
- Review plan formularies and doctor networks
  - Formularies on insurance company website
  - “Find a Provider” tool on insurance company website
- Add plan to your cart and proceed with enrollment
- Application takes 20-30 minutes to complete online



## After Enrollment

- Summary → Current Enrollment
  - Includes information about the enrollment, including the initial payment due date
  - Save and Print this page for OA-HIPP enrollment
  - From this page you will be directed to the insurance carrier website to make the initial payment aka binder payment
- Binder payment must be received by the insurance carrier before the plan goes into effect



# What about ADAP & OA-HIPP?

- If client's monthly income is less than \$5,370, they are eligible for ADAP & OA-HIPP
- If not already on ADAP, will need to enroll in ADAP first
  - ID, proof of California residency, proof of income, labs, & letter of diagnosis required
- Print Current Enrollment page
  - OA-HIPP will need the premium amount, APTC, and name of the plan
- Submit insurance information ASAP to request binder payment
  - OA-HIPP says that binder payments can be made if they are requested within 48 hours of enrollment in a plan
  - If request submitted after that time, safest to have client pay premium and wait for reimbursement from insurance company



# Like Your Plan? Keep Your Plan!

- Renewal occurs automatically for most plans
  - However, it is important to still meet with your client!
- Make sure Covered California has updated information, provide:
  - Address change
  - Income change
- Make sure to note any premium increases
- Practice Tip: Enrollment Worker has to submit renewal information and new premium amount to OA-HIPP
- Fax or upload updated premium and verification of plan name, plan carrier, and APTC



# Hate Your Plan? Change Your Plan!

- Why might a client change their plan?
  - Their doctor left the network
  - Their plan's formulary changed
  - They want to attend a different hospital network
  - They were defaulted into a plan they don't like
- If your client wants to change their plan, follow the same steps . . .
  - Review provider network and formulary
  - Complete application online, on the phone, or in person
- Remember to follow up with ADAP & OA-HIPP
  - Provide new plan and premium information ASAP





What if I miss Covered  
California Open Enrollment?

# Can I still get insurance?

- Special Enrollment Period (SEP) required to enroll in Covered California outside of Open Enrollment
- Qualifying Life Event (QLE) triggers SEP and may include:
  - Losing other health insurance
  - Permanently move to or within California
  - Having a baby, adopting a child, or getting married
  - Returning from active military duty
  - Gaining citizenship/lawful presence
  - Job/income loss due to CA Wildfires or COVID-19
- SEP is 60 days



# What if I don't enroll?

- Tax Penalty
  - California state income tax penalty applied by the California Franchise Tax Board
  - Penalty is the at least \$750 per adult and \$375 per dependent child under 18
  - Limited exceptions
- Healthy San Francisco
  - Must be uninsured for 3 months before applying
  - Not minimum essential coverage
- Medi-Cal enrollment year around
  - Contact PRC to see if your client qualifies





# Thank you!

- Questions?
  - Call PRC's EAHP
    - (415) 972-0870
    - [www.prcsf.org](http://www.prcsf.org)
  - Email [EAHP@prcsf.org](mailto:EAHP@prcsf.org)
  - Call HICAP
    - (800) 434-0222
- Reminder
  - Enroll at [CoveredCA.com](http://CoveredCA.com)
  - Covered California hotline: (800) 300-1506
  - Enroll at [Medicare.gov/plan-compare](http://Medicare.gov/plan-compare)



# Support Programs

Presented by Bill Stewart, EAHP Staff Attorney

# CA Office of AIDS Programs

Cost savings programs for PLWH



# California OA Programs

## General Enrollment Procedures

- Enroll with an Office of AIDS-certified Enrollment Worker
- **Not** restricted by open enrollment periods – enroll any time
- Re-enrollment up to 45 days before client's birthday
- Re-certification via Self Verification Form (SVF) completed 6-months after client's birthday
- [Tiny.cc/ADAPEnrollmentSites](http://Tiny.cc/ADAPEnrollmentSites)



# ADAP

## AIDS Drug Assistance Program

- Managed by CA State Office of AIDS (OA)
- Administered by a Pharmacy Benefits Manager (PBM) Magellan Rx (contracted by OA)
- Complements private insurance
  - pays ADAP formulary medication co-pays
- Pays for full cost of drugs for uninsured not enrolled in private insurance; undocumented clients



**MagellanRx**  
MANAGEMENT<sup>SM</sup>

# ADAP

## General Eligibility Criteria

- CA resident  
Immigration status not a bar
- HIV+ w/ CD4 & VL results w/i last year
- 18+ years of age
- Income between 138% and 500% of MAGI FPL based on household size
- Rx from CA physician
- Do not qualify for insurance that pays 100% of medication costs
  - i.e. Traditional or Expanded Medi-Cal
  - Medi-Medi should enroll



## OA-HIPP

### Office of AIDS Health Insurance Premium Payment Program

- Pays premiums for health, dental, and vision → up to \$1,938/month!
- Pays medical out-of-pocket (MOOP) expenses
- Private insurance plans purchased via Covered CA, COBRA, or directly from insurance carrier
- Administered by OA contractor  
Pool Administrators, Inc. (PAI)



**OA-HIPP is a sister program to ADAP**

## OA-HIPP (continued)

### General Eligibility Criteria

- ✓ Enrolled in ADAP  
all eligibility criteria met
- ✓ Not enrolled in Medicare or  
Medi-Cal with no share of cost
- ✓ Enrolled in private health insurance with  
Rx drug coverage





## EB-HIPP

# Employer-Based Health Insurance Premium Payment Program

- Pays premiums for medical, dental, and vision → up to \$1,938/month!
- Pays medical out-of-pocket expenses (MOOP) such as co-pays and co-insurance
- Private insurance plans obtained via an employer
- Administered by OA contractor  
Pool Administrators, Inc. (PAI)



**EB-HIPP is a sister program to ADAP**

## EB-HIPP (continued)

### General Eligibility Criteria

- ✓ Enrolled in ADAP  
all eligibility criteria met
- ✓ Current employment verified via paystub from last three months
- ✓ Enrolled in employer-based insurance
- ✓ Employer must agree to participate in the EB-HIPP program



# MDPP Program

## Medicare Part D Premium Payment Program

- Pays monthly premiums—up to \$1,938—for Medicare Part D (Rx) and Medicare Supplement plans
- Pays medical out-of-pocket (MOOP) expenses that count towards annual out-of-pocket maximum
- Plan premiums and MOOP costs paid directly to health plans



**MDPP is a sister program to ADAP**

# MDPP Program (continued)

## General Eligibility Criteria

- ✓ Enrolled in ADAP  
all eligibility criteria met
- ✓ Enrolled in Medicare Parts A, B and D  
not enrolled in Medicare Part C
- ✓ Enrolled in Medicare Supplement (aka MediGap) plan  
(optional; not required for Part D premiums to be paid)



## ADAP & HIPP common issues

- Missed Re-enrollment
  - 45-days before birthday
- Missed completion of Self-Verification Form
  - 6-months after birthday
- Private Insurance or Medicare not aligned w/ ADAP
  - not in ADAP system
- Incomplete documentation
  - proof of income, Dx, residency
- Can't find an ADAP/HIPP Enrollment Worker



## Medi-Cal HIPP

Medi-Cal Health Insurance Premium Payment (HIPP) Program pays private or employer-related health insurance premiums when deemed “cost effective”.

### General Eligibility:

- Full scope and fee-for-service Medi-Cal
- A confirmed medical condition determined by the Department of Health Care Services (DHCS) to be a high cost medical condition (HIV included).
- Current health insurance through an employer with employee contributions or enrolled in a self-pay plan
- Not enrolled in Medicare
- Not enrolled in Medi-Cal managed care plan



# Low Income Subsidy (LIS) for Medicare Rx Drug Coverage (Part D)

- Also known as “Extra Help,” LIS is a federal assistance program that helps people pay for their prescription drug costs in a Medicare Part D or Medicare Advantage Prescription Drug plan.
- Savings vary depending on beneficiaries income and assets.
- Auto enrollment for those on Medi-Cal, Part B Savings Program, SSI OR Ask to apply for
  - LIS online (<https://secure.ssa.gov/i1020/start>),
  - by phone 1-800-772-1213, or
  - in person at local SSA office
- Eligibility:
  - Income limits - under 150% FPL - \$1,610/mo or \$19,320/yr for individual
  - Asset limits (under \$13,290/mo or \$26,520/yr for couple) (2021)



# Medicare Savings Plans

	Qualified Medicare Beneficiary (QMB)	Specified Low-Income Medicare Beneficiary (SLMB)	Qualified Individual (QI)	Qualified Disabled and Working Individual (QDWI)
What is covered?	Medicare Part A & B premiums, deductibles, and/or coinsurance	Medicare Part B premium	Medicare Part B premium	Medicare Part A premium (exclusions apply)
Income limit	Individuals \$1,094 Couples \$1,472	Individuals \$1,308 Couples \$1,762	Individuals \$1,469 Couples \$1,980	Individuals \$4,379 Couples \$5,892
Resource limit	Individuals \$7,970 Couples \$11,960	Individuals \$7,970 Couples \$11,960	Individuals \$7,970 Couples \$11,960	Individuals \$4,000





# Healthy San Francisco

San Francisco plan designed to make health care services available and affordable to uninsured San Francisco Residents.

- Eligibility requires ALL of the following:
  - Combined family income at or below 500% FPL
  - SF Resident with proof of SF Residency
  - Uninsured for at least 90 days
  - Age 19 or over
- If eligible, may join regardless of immigration status, employment status or pre-existing medical conditions

Must apply through a Certified Application Assistor (CAA) at one of the various enrollment sites throughout San Francisco



# Employment and Health Coverage

If you were working and recently stopped:

- COBRA or Cal-COBRA
  - ADAP/OA-HIPP
  - Medi-Cal HIPP
- Covered California
  - ADAP/OA-HIPP
- Medi-Cal
- Healthy San Francisco (regardless of immigration status)



# Thank you!

- Questions?
  - Call PRC's EAHP
    - (415) 972-0870
    - [www.prcsf.org](http://www.prcsf.org)
  - Email [EAHP@prcsf.org](mailto:EAHP@prcsf.org)
  - Call HICAP
    - (800) 434-0222
- Reminder
  - Enroll at [CoveredCA.com](http://CoveredCA.com)
  - Covered California hotline: (800) 300-1506
  - Enroll at [Medicare.gov/plan-compare](http://Medicare.gov/plan-compare)



# Thank You!

- SF Department of Public Health
- Getting to Zero San Francisco
- All Our Community Partners
- Speakers
- Volunteers
- And especially to all of our attendees for being here and for all the work **YOU** have done and continue to do for your clients

