

HIV Client Services Update

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From the Program Manager



Richard Aleshire, MSW
HIV Client Services Program Manager

In the 2009-11 biennium budget passed by the Legislature and signed by the Governor, the HIV Client Services' Early Intervention Program's (EIP) budget is "capped at 98 percent of its current expenditures". We received clarification regarding the term "cap" and it does not mean the program has to cap the number of clients or services in the program or that we cannot seek or receive additional revenues from other sources. It simply means that we must reduce our costs by 2 percent or \$1M over the biennium, however we choose to accomplish that.

The program's advisory board, the Steering Committee, met on Monday, May 4, 2009. In past meetings, the Committee brainstormed and prioritized several possible options to reduce the program's expenditures. At this May meeting, the Committee finalized its recommended contingency plan for reducing costs over the upcoming biennium. The Committee is taking a multi-pronged approach and its recommendations include:

1. Highly recommend that clients obtain insurance/WSHIP, which premiums can be paid by the program. On average, insurance premiums cost \$384 per month per client less than paying for clients' medical care and medications.
2. Reduce administrative and staff costs by HIV Client Services by at least \$100,000 annually.
3. Retain some of the federal Ryan White grant increase for the EIP program rather than passing it all to the community.
4. Eliminate events such as our annual statewide conference, CAREvent.
5. Decrease the amount paid for medical/lab services (currently 133 percent of Medicaid) to 125 percent/100 percent of Medicaid's rate.
6. Decrease the amount paid to pharmacies by one percent.
7. Reduce the formulary for clients without insurance (an incentive for them to get insurance) to save \$100,000.
8. Increase clients' cost share slightly for those without insurance, again as an incentive to obtain insurance.

By spreading the cuts across many entities, services to clients will be less disruptive but still reduce program costs to stay within its budget for the upcoming biennium.

We may still see additional cuts over the biennium. The current biennium began July 1, 2009 and runs through June 30, 2011. Making the cuts mentioned above, allows HIV Client Services to continue providing services to

clients while reducing our expenditures. These reductions would reduce costs more than required by the Legislature's cuts, allowing us to absorb additional cuts if needed, and at the same time accept more clients if appropriate. We are seeing an increase in the number of new clients enrolling in EIP due to the state of the economy and the fact that people are still losing jobs. We are prepared to be able to assist these additional clients. We also anticipate the possible increase of clients due to recommendations that people living with HIV should start on HIV medications earlier.

We are prepared to continue providing services to all who need it for the immediate future.

If you have questions, please let me know. These are hard times but we're all in this together to lessen the impact on our clients and to help allay their concerns.

If you have thoughts about any of our programs and services, we'd love to hear your ideas. Feel free to contact me via phone or email at 360-236-3477 or richard.aleshire@doh.wa.gov.

Until next time, good health!

The Early Intervention Program (EIP)

EIP Updates

Submitted by: Teri Eyster

EIP Eligibility Supervisor

1) Getting EIP clients on Health Insurance & Reductions to EIP Formulary for Uninsured Clients

We appreciate all of the work case managers have already done to assist clients in moving to health insurance and hope this work continues throughout the year so we can keep cutting costs and avoid wait lists for uninsured clients coming onto EIP.

An additional cost cutting step took effective July 1, 2009. It involves a reduced formulary (list of covered medications) for uninsured EIP clients. There is no change to EIP's formulary for insured clients.

Hopefully, this reduction to our formulary for uninsured clients will be an added incentive for them to move to insurance as well as getting comprehensive health insurance and reducing EIP costs.

Both formularies are accessible through our website by scrolling down the left hand column and clicking on EIP Formulary. Our web address is: http://www.doh.wa.gov/cfh/HIV_AIDS/Client_Svcs/default.htm

When you get to our Pharmacy Benefits Manager, Ramsell Public Health Rx, click on "What Drugs are covered?" at the bottom of the screen and you will find a link to each formulary.

2) New Option for Meeting Mandatory Medicaid Requirement for Non-Disabled Clients

Ryan While funding requires EIP to be the payer of last resort. For this reason, EIP requires certain clients to apply to Medicaid. We refer to this as the mandatory Medicaid process. Medicaid determination is based on both the client's disability as well as income status. EIP clients who are required to apply to Medicaid now have an alternative to this process if they are not disabled.

Beginning July 1, 2009, non-disabled EIP clients who are given temporary eligibility while applying to Medicaid can provide EIP with a letter from their health care provider stating that they are not disabled. The letter or note should be sent to EIP as early in the mandatory Medicaid coverage period as possible and should include the following:

- Statement that the client is not disabled,
- Doctor's printed name and title,
- Office or clinic name, address and phone, and
- Signature and date.

After receiving this letter, EIP will grant regular eligibility to the client as long as the client meets other EIP eligibility criteria.

If the doctor feels the client is disabled, then the client will need to follow through with EIP's requirement to apply for Medicaid. EIP will continue to provide temporary eligibility for these clients, allowing them time to apply for Medicaid.

3) Medicare Advantage Plans and Spenddown

EIP will now allow clients with Medicare who are trying to meet their Medicaid spenddown to get assistance from the Evergreen Health Insurance Program (EHIP) to pay premiums for Medicare Advantage plans. EHIP can also provide clients with documentation of those Medicare Advantage premium payments that can help in meeting client's Medicaid spenddown. If you have questions about Medicare Advantage plans or premium assistance, please call EHIP at: 800-945-4265.

4) Client Services Representatives (CSR) Vacancies

EIP has been able to fill both full-time and half time CSR vacancies. Both of our new staff began on July 16, 2009. George Cruz is our full-time CSR, and Fran McBride is our half-time CSR. They will work behind the scenes initially while they are in training.

Our current alpha-split remains the same:

CSR	Alpha	Phone
Lori	A - I	360-236-3493
Teri	J - L	360-236-3449
Abby	M - Z	360-236-3452

Many thanks to case managers for all of their understanding and support while we have been short staffed. We will let you know as soon as each new CSR is ready to take your calls and handle a section of our alpha-split.

EIP Snapshots

Submitted by: Barbara Gimenez

Information and Data Specialist, EIP Operations

Rhonda Bierma

EIP Operations Supervisor

The Early Intervention Program serves a diverse population. Here are snapshots of the clients enrolled in May 2009.

Gender	
Male	3033
Female	442
Other	17

Age	
1-13	1
14-19	7
20-29	282
30-44	1395
45-59	1539
60+	266

Monthly Income (adjusted by family size)	
\$ 0 – 903	1220
\$ 904 – 1805	1409
\$1806 – 2708	740
\$2709 – 3339	109
\$3339+	14

Primary Payer*	
DOH – EIP only	745
Medicare	518
Medicaid (spenddown)	37
Medicare and Medicaid	726
Insurance	1464

Race	
American Indian, Alaskan Native	49
Asian	66
Black/African American	454
Multi-racial	249
Native Hawaiian, Pacific Islander	14
Other	173
Unknown	315
White	2172

***A note on the primary payer data and a thank you.** With the help of case managers, the Evergreen Health Insurance Program and our clients, EIP has been able to shift 90 clients to insurance since April 2009. We could not have done this without the efforts of our community partners. This effort supports the federal government requirement that we be the payer of last resort. It also decreases EIP costs and, most importantly, provides more comprehensive coverage and care to our clients.

Information for EIP Providers

Submitted by: Carri Comer

Coordination of Benefits, Contracts & Training Specialist

Rhonda Bierma

EIP Operations Supervisor

EIP will no longer contract with Quest Diagnostics as of September 1, 2009

If you currently use Quest and need assistance locating an EIP-contracted laboratory in your area, please call us at 877-376-9316 or view our list of contracted providers on-line at http://www.doh.wa.gov/cfh/HIV_AIDS/Client_Svcs/documents/medprov0409.pdf.

Reimbursement for lipid panel procedure codes 80061 and 83704

The Washington State Health Insurance Pool (WSHIP) no longer reimburses for the lipid panel procedure code 80061 unless the v58.69 diagnosis for long-term drug use is included. If you order either 80061 or 83704 nuclear magnetic resonance (the NMR lipid panel test that we recently added), you must include the long-term drug use diagnosis. If you received denials for invalid diagnosis, please submit a corrected claim to WSHIP with the diagnosis. If you are still unable to resolve your claim with WSHIP, please contact Carri Comer at Carri.Comer@doh.wa.gov or 360-236-3420.

Reminder - Updated Schedule of Medical Coverage and Maximum Allowances

Effective July 1, 2009, EIP adjusted medical and laboratory reimbursements. We now reimburse laboratory services at 100 percent of the Washington State Medicaid rate and all other medical services (except tropism assay) at 125 percent of Medicaid's rate. Our current schedule is located on our website at http://www.doh.wa.gov/cfh/HIV_AIDS/Client_Svcs/documents/medlabserv0609.pdf.

The Early Intervention Program offers dental services

Please help our clients manage their oral health by referring them to an EIP-contracted dental provider. Many of our clients are eligible for limited dental services if treated by an EIP-contracted provider. There is a \$2,500 allowance per year and the services must be listed on our Schedule of Dental Coverage and Maximum Allowances. You can find this list and a list of current dental providers on our website at http://www.doh.wa.gov/cfh/HIV_AIDS/Client_Svcs/default.htm.

Pharmacy reimbursement rates reduced as of July 1, 2009

Due to budget constraints, the rates paid to pharmacies by Ramsell Public Health Rx, EIP's pharmacy benefits manager, were reduced July 1, 2009 by one percent. Ramsell notified their network of pharmacies of this change in a fax broadcast sent in May. These rates are based on Average Wholesale Price (AWP) of the prescription drug less a certain percent. For non-public health pharmacies, Ramsell now pays AWP less 14.5 percent for brand products and AWP less 36 percent for generic.

Community Programs

August Clinician Consultation Call

Submitted by: Karen Robinson

Community and Case Management Programs Supervisor

HIV Client Services scheduled the next Case Management Consultation for August 17 from 9 a.m. to 11 a.m. Pacific time. Dr. Karina Uldall's presentation will be on Accessing Care. Jill Dickey, Blue Mountain Heart to Heart, will present a client issue for the Case Consultation. Monique Ossa will facilitate the call. For information about the call, contact Monique at 360-236-3457.

Ryan White HIV/AIDS Program Interim Service Report

Submitted by: Karen Robinson

Community and Case Management Programs Supervisor

The Health Resources and Services Administration (HRSA) Web system is open for electronic submission of the interim 2009 Ryan White Service Report (RSR). The interim report documents each client served and services provided during the first six months of the calendar year (January 1 through June 30, 2009).

ALL Ryan White Part B providers must register on the HRSA Electronic Handbook (EHB). This process is very similar to the registration process you have experienced with the annual Ryan White Data Report (RDR) or Care Act Data Report (CADR).

Full Client Level Data reports will be required **only** of agencies providing Ryan White-funded primary care and case management.

HIV Client Services distributed registration codes to Ryan White Part B providers on July 1, 2009. For assistance with registration or using the RDR Web System, providers should contact the HRSA Call Center at **877-Go4-HRSA (877-464-4772)** between 9:00 a.m. and 5:30 p.m. ET or by email at callcenter@hrsa.gov.

You can find provider information at HIV/AIDS Bureau (HAB)/HRSA's website <http://hab.hrsa.gov/manage/CLD.htm>. This includes links to **Ryan White Service Report Instruction Manual**, **Before You Begin Checklist**, **Important Submission Information**, and **Information for Providers**.

The report is due September 1 and, similar to the RDR, will be reviewed by the Washington State Department of Health. Providers will revise and submit any Provider Reports returned for changes by the Department of Health. The final report is due September 8 (3:00 p.m. PDT). If you have questions, contact Karen Robinson at 360-236-3437.

New Staff in Client Services

Submitted by: Karen Robinson

Community and Case Management Programs Supervisor

Meet Anneke Jansen

Anneke Jansen joined the staff of HIV Client Services on July 1, 2009, as the Quality Management Coordinator. Anneke will coordinate the quality management activities for Washington's Ryan White HIV/AIDS Part B Program. This includes providing technical assistance and training on quality management, developing a work plan for quality management, coordinating the client-level data system, and designing and updating resource materials.

Anneke comes to us from Washington State Department of Health's Tobacco Program where she was a Community Contract Specialist. Before that position, she worked for University of Arizona's College of Public Health as the Assistant Program Director in Program Planning and Evaluation. In this position, she coordinated evaluation of state and federal funded projects and prepared annual reports, evaluation plans, and logic models. Anneke has a Bachelor's degree from the University of Montana and a Masters in Public Health from the University of Arizona. Anneke is excited to join Client Services and looks forward to working with our community partners. You can reach Anneke at anneke.jansen@doh.wa.gov or at 360-236-3453. She will also be visiting case management agencies and coming to regional meetings to meet all of you. Please give her a warm welcome.

Welcome Abby Gilliland

On September 1, Abby Gilliland will take over as the Community Contracts Coordinator. For the last four years, Abby worked in our program as a Client Service Representative. We expect Abby's transition to be a smooth one for providers and clients. We look forward to welcoming Abby to her new position.

Medical Case Management Agency Chart Review Follow Up Visits

Submitted by Monique Ossa

Statewide Case Management Coordinator

This past spring each agency received a report of their program's compliance with the Statewide Standards for Medical HIV Case Management. Agencies developed an improvement plan in collaboration with HIV Client Services and the Regional AIDSNET Coordinator. Your agency is now midway through implementing the strategies developed in your plan. I will contact your agency in the next month to set up a time for another site visit where we will assess the areas in your improvement plans. The data collection will be implemented using appropriate sampling methodology and include both concurrent and retrospective review.

We are looking forward to meeting with you, learning about your improvement processes, and supporting you in your continuing quality improvement activities.

Please contact Monique Ossa at 360-236-3457 or Monique.Ossa@doh.wa.gov for more information about the Statewide Medical HIV Case Management Standards or the DOH-sponsored case manager training.

Support Staff News

HIV Client Services Web Redesign

Submitted by: Sheila Ichita

Support Staff Supervisor

HIV Client Services is in the process of redesigning our web pages. This redesign is to increase usability, to be more user friendly, and make information easier to find. This project should be completed by the end of the summer.

Fiscal Facts

Submitted by: Jayme Emmons

Fiscal Coordinator

Did you know that the Early Intervention Program receives rebates from pharmaceutical companies for medications we pay on behalf of our clients? HIV Client Services receives funds from the Ryan White AIDS Drug Assistance Program (ADAP), which requires pharmaceutical companies pay rebates based on the total amount of product purchased. Additionally, the National ADAP Crisis Task Force negotiated on behalf of all 50 states' ADAP programs with the largest makers of HIV drugs and obtained agreements from them to pay a higher rebate amount than that required by the federal government.. Each quarter HIV Client Services details the amount spent by each pharmaceutical company and they send a rebate to HIV Client Services. In State Fiscal Year 2009 (July 1, 2008 to June 30, 2009), rebates from all the pharmaceutical companies totaled about \$4.3 M.



Staff Profile



Sheila Ichita, Support Staff Supervisor

Submitted by: Karen Robinson

Community and Case Management Programs Supervisor

Sheila Ichita

Sheila was born in Swedish Hospital in Seattle. Her parents adopted Sheila when she was six months old. After Sheila her parents adopted her brother and sister, and raised numerous foster children. Sheila attended Weatherwax High School in Aberdeen where she later met her husband. Sheila and her husband have one daughter who is a senior at Washington State University in Vancouver.

Sheila's Work History

Over the years, Sheila attended South Puget Sound Community College and received a technical degree in medical assisting. Sheila worked at hospitals in Aberdeen and Spokane and for Thurston County's Environmental Health Department. She started working for the State of Washington in 1997 as an office assistant for the Department of Natural Resources. In 2004, Sheila transferred to HIV Client Services, where she continues to work as our Support Staff Supervisor.

Working for HIV Client Services

Sheila enjoys her job in HIV Client Services primarily because no two days are the same. Every day there is something different happening. Sheila loves the challenge of being in charge of the details that keep our office moving ahead. Her duties include compiling the Quarterly Update, designing the Client Services web page, coordinating the steering committee, and being ready to respond to last minute requests.

Enjoying her Spare Time

Sheila uses her spare time to attend Evergreen State College. When not at work or in school, she enjoys spending time with her family and friends. She looks forward to being able to spend more time traveling after she earns her Bachelor's degree. Her favorite place to travel is the south coast of Italy. A good day for Sheila is one that begins with a trip to the gym. In fact, if you want to have lunch with Sheila, you had better bring a pair of walking shoes, as she spends her lunch hour walking at least 3 miles everyday.

Staff News

HIV Client Services Staff Update

Submitted by: Richard Aleshire

HIV Client Services Program Manager

We in HIV Client Services congratulate Jayme Emmons as she takes on the duties of fiscal coordinator for HIV Client Services. This position was previously filled by Barb Stuart, who died suddenly last November, and temporarily filled by Evelyn Linton until her retirement last month. Jayme previously was the Community Contracts Coordinator in our program so she already knows our program, staff, community partners, and state and federal requirements of the Ryan White program. We are excited to have Jayme with us in this new capacity.

Client Services Staff

Program Manager: Richard Aleshire, 360-236-3477

Support Staff Supervisor: Sheila Ichita, 360-236-3430

Fiscal Coordinator: Jayme Emmons, 360-236-3451

Office Assistant: Martha Davis, 360-236-3489

Community Programs & Case Management

Community Programs and Case Management Supervisor: Karen Robinson, 360-236-3437

Ryan White Contracts Coordinator: Vacant (Abby Gilliland starting Sept. 1, 2009), 360-236-3438

Statewide Case Management Coordinator: Monique Ossa, 360-236-3457

Quality Management Coordinator: Anneke Jansen, 360-236-3453

Early Intervention Program (EIP) Eligibility

Eligibility Supervisor: Teri Eyster, 360-236-3449

Client Services Representative (Alpha A-I): Lori Miller, 360-236-3493

Client Services Representative (Alpha J - L): Teri Eyster, 360-236-3449

Client Services Representative (Alpha M - Z): Abby Gilliland, 360-236-3452

Early Intervention Program (EIP) Operations

Operations Supervisor: Rhonda Bierma, 360-236-3476

Information and Data Specialist: Barbara Gimenez, 360-236-3476

Coordination of Benefits Specialist, Provider Training: Carri Comer, 360-236-3420

Eligibility and Claims Processing Specialist: Mardene Eldred, 360-236-3429

Resources

This update and additional information about the programs in this update are posted on our website at http://www.doh.wa.gov/cfh/HIV_AIDS/Client_Svcs/default.htm

Medicare: <http://www.medicare.gov>

Evergreen Health Insurance Program: <http://www.EHIP.org> or 1-800-945-4256

Social Security Administration (Extra Help): <http://www.SSA.gov> or 1-800-772-1213

Centers for Medicare and Medicaid Services (CMS): <http://www.cms.hhs.gov> or 1-877-267-2323

Public Health Service Bureau (PHSB): http://www.phsb.com/patient/wa_what.html or 1-888-311-7632

Free HIV Consultation for Medical Providers:

Medcon (U. of Washington): Available 24 hours/7 days 800-326-5300

National HIV Telephone Consultation Service (Warmline): M-F 6 a.m. to 5 p.m. 800-933-3413

Northwest AETC (AIDS Education and Training Center):

Dr. Chris Behrens 206-994-8773 pager

Dr. David Spach 206-731-5166

Washington State
Department of Health

HIV Client Services Mission Statement

The mission of HIV Client Services is to reduce the transmission and medical consequences of HIV by assuring that persons with HIV in Washington have access to health care and supportive services.

We welcome your input!

Suggestions for information you would like to see included in the quarterly update, or any comments or suggestions regarding the formulary, covered services or any other issue, can be sent to Richard Aleshire by any of the means listed below:

Washington State Department of Health
PO Box 47841
Olympia, WA 98504-7841

Voice: 360-236-3477

Email: Richard.Aleshire@doh.wa.gov