

**AIDS Emergency Fund – Health
Insurance Premium Payment
Program (AEF-HIPP)**



- We will go over:
 1. Why AEF HIPP is needed
 2. Client Stories
 3. Results of CY 1617 and 1718 (data thru May 2018)
 4. Integration of AEF and PRC's EAHP

Introduction

- Why AEF HIPP?
 - can be a safety net program for those having issues with the health insurance premium payment program from the State's Office of AIDS (OA HIPP)
 - can handle high medical costs (v. AEF's Emergency Assistance)
 - a flexible program for clients at different income levels

AEF HIPP as a Safety Net

- Diana is a HIV+ SF resident. She decides to get a Covered California but does not know about OA HIPP. OA HIPP requires the client to apply for OA HIPP within 48hrs in order for OA to pay for the first month of premium. Her insurance won't be active until the first payment is made. What can she do?
- AEF HIPP + OA HIPP

AEF HIPP as a Safety Net

- Diana's insurance premium increased by \$100/mo but OA did not pay the difference for a few months, and now Diana is at risk of losing the insurance. What can she do?
- AEF HIPP can pay the difference immediately while awaiting OA to correct the payment.

AEF HIPP v. Traditional AEF Grants

Jorge is a HIV+ SF resident. He works part time and earns \$2500 per month. He doesn't have insurance from work but has an individual policy. He is having financial issues at the moment. Can AEF help him pay for the policy?

EA: No

AEF HIPP: YES

AEF HIPP v. Traditional AEF Grants

What if the premium is \$700/mo?

EA: No

AEF HIPP: YES

Because the AEF HIPP limit is \$4000 every 12 months, if Jorge needs another payment for the second month, he is eligible.

AEF HIPP v. Traditional AEF Grants

	AEF-HIPP	Emergency Assistance (EA)	Eviction Prevention/ Stabilization
Income limit per month	\$4020	\$2010	\$4020
Payment limit (per yr)	\$4000	\$500	\$1000
Disability Requirement	None	None	None

AEF HIPP's flexibility

For clients who qualify for MAGI-Medi-Cal, AEF HIPP can still be used to pay for medical costs beyond health insurance premiums.

Dentistry and Optometry are popular categories.

It can also pay for Medicare premiums (OA HIPP cannot).

Client Stories

- “James” – was given a regular \$500 AEF grant to pay his COBRA premium after he was forced to leave his employment due to disability. He was in the process of applying for SSDI benefits, but still owed an additional \$1898.62. In order to keep his COBRA insurance, AEF-HIPP was able to step in and pay the premiums until his income stabilized and he was enrolled in MAGI-Medi-Cal, and as long as his income remains the same, he will have no ongoing health insurance premiums.

Client Stories

- “Paul” – currently a MAGI Medi-Cal beneficiary; however, his provider is not in network for any of the Medi-Cal Managed Care plans available in SF, and does not accept fee-for-service. He decided to use his Medi-Cal status to apply for Medi-Cal HIPP to pay his Covered CA plan. He and his benefits attorney were engaged with Covered CA and he was allowed to purchase an unsubsidized Covered CA plan. His attorney plans to transition him to a third-party payer, but he has to pay the first month’s premium in order for the plan to go into effect. The premium is \$1327.99, which he is unable to afford. The stress of his ongoing treatment for heart disease and HIV is immense. His Covered CA plan with Blue Shield required payment of a second month on top of what we already paid. Because of HIPP funding from DPH, we were able to pay the two premiums and stabilize his insurance.

Client Stories

- “Richard” – was previously on a MAGI Medi-Cal program which paid his Medicare Part B premiums. When he turned 65, without being notified, he was transitioned into a non-MAGI Medi-Cal program, which has a \$2000 resource limit. Although he doesn't have resources in excess of \$2000, his Medi-Cal was terminated due to an old bank account (which was closed). Although he provided proof that the account was closed in 2013, Medi-Cal requested information on a bank account that was closed in 2011. Despite having provided all the necessary information, he had not been assigned a case analyst. He is self-employed, and his income varies considerably but remains under \$15,000/year. AEF-HIPP was able to intervene and take care of the Medicare premiums until a case analyst was able to reinstate his Medi-Cal.

Results: How \$ was spent on grants

	Total Carry Over Funding Available for grants	Total \$ Amount Spent on HIPP grants	Total \$ spent on Non-HIPP grants	Total \$ Spent	Total \$ Unspent
<u>CY1617</u> 3/16 to 2/17 RWPA	\$232,000	\$27,566	\$99,934	\$127,500	\$104,500
<u>CY1718</u> 3/17 to 5/17* HHS General	\$87,000	\$8,796	\$65,204	\$74,156	\$12,844†

* The entire contract year is from 3/17 to 2/18

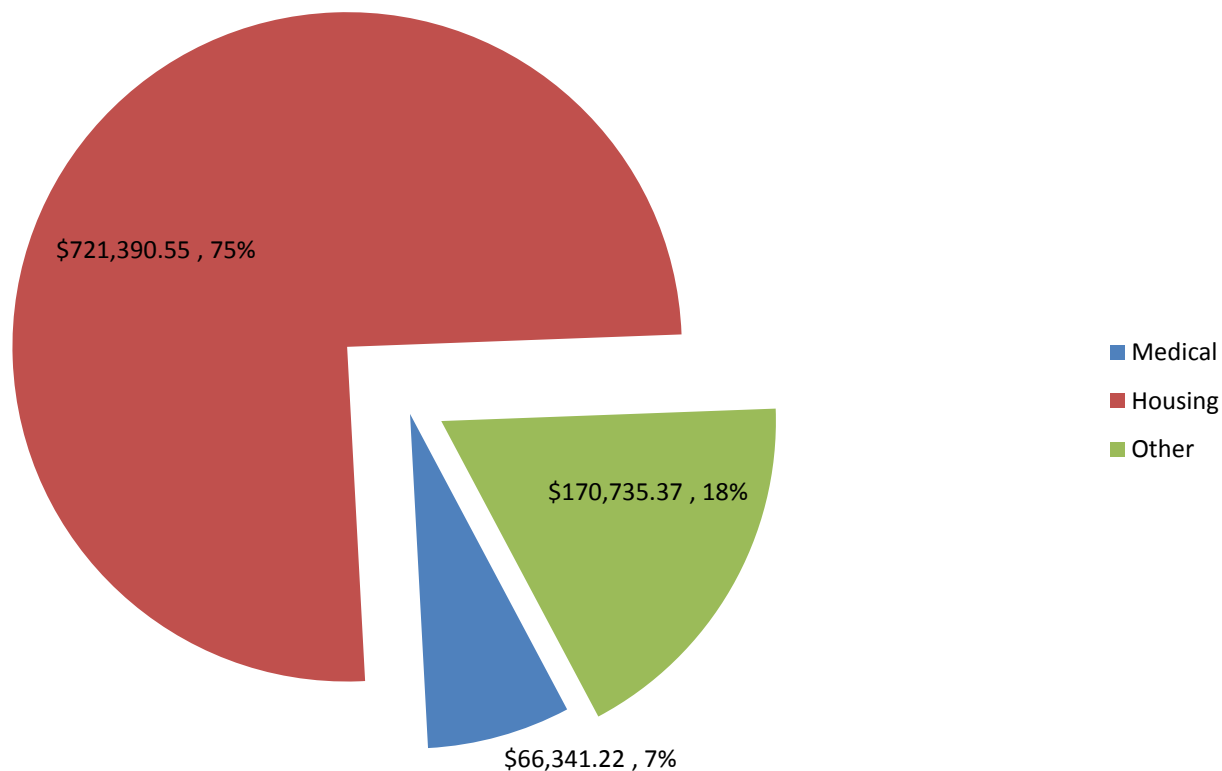
† Will be spent by end of 6/17

Results: How HIPP \$ was spent

	Total \$ Amount	Total \$ for Insurance	Total \$ for other medical costs	Total # of Clients
<u>CY1617</u> 3/16 to 2/17 RWPA	\$27,566	\$15,020	\$12,546	23
<u>CY1718</u> 3/17 to 5/17* HHS General	\$8,796	\$649	\$8,147	15

*The entire contract year is from 3/17 to 2/18

Results: Total \$ spent on grants by AEF in CY1617



- Total Grant \$= \$958,467.14 (includes grants from AEF's private funds)
- These data can be used as references for future funding allocation

Integration of AEF and PRC's Equal Access to Healthcare Program (EAHP)

One year of **HIV** treatment
can cost more than **10,000**
Muni rides!



Save your cash
Get help with:

- Medication costs
- Copays for labs and doctor visits
- Premiums for health, vision, and dental insurance

SF resident and HIV+? Call **POSITIVE RESOURCE CENTER**
at **415.777.0333** for more info.

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Integration of AEF and PRC's Equal Access to Healthcare Program (EAHP)



- EAHP launched marketing campaign to inform clients and providers of HIPP
- Every EAHP client is screened for AEF HIPP
- Very quick processing time due to integration



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