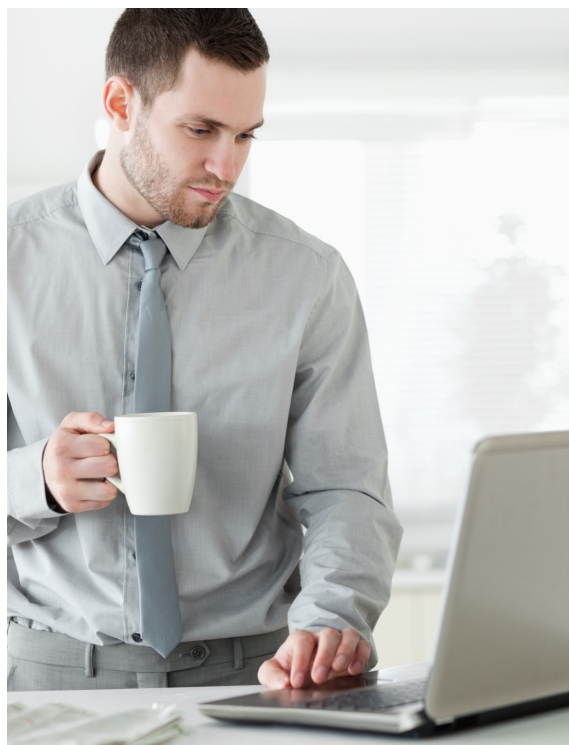


People Living with HIV or AIDS



Beginning Jan. 1, 2014, health insurance companies can no longer deny coverage based on pre-existing conditions, including HIV or AIDS. This document provides basic information to people living with HIV or AIDS who enroll in a health insurance plan through Covered California.

Choosing the Right Health Insurance Plan for You

Choosing the right health insurance plan is important. Health insurance plans sold through Covered California have standard benefits — including prescription drug coverage, doctor’s visits, hospitalization, labs, and mental health and substance abuse services — which helps you compare health insurance options. It is important to review each plan’s price, provider network, “Summary of Benefits and Coverage,” as well as more detailed coverage descriptions, to find the plan that best suits your needs. You should consider all of your expected costs when you pick a health insurance plan. Costs may include monthly premiums and out-of-pocket costs such as copayments, coinsurance and deductibles. The out-of-pocket maximum is the most you could have to pay out of pocket for medical expenses during the year. Keep in mind that out-of-pocket maximums differ depending on your income and which metal tier of plan you select (Platinum, Gold, Silver or Bronze).

The metal-tier system is based upon how much individuals must contribute toward their health care upfront as premium versus out-of-pocket costs when using services. A Bronze-level plan may have a lower monthly premium than a Platinum plan, but it has higher deductibles,

copays and other out-of-pocket expenses. It is important to figure out what level of health insurance plan best suits your health care needs.

You may be eligible to get help paying your monthly premium if your income is between 138 percent and 400 percent of the federal poverty level (FPL), which, for 2014, would be an income of about \$15,856 to \$45,960 per year for a single person. If you are eligible for financial assistance, your monthly premium will be lower.

You may be eligible for even more financial help paying your out-of-pocket costs if your income is between 138 percent and 250 percent of the FPL (which, for 2014, is about \$15,856 to \$28,725 per year for an individual). These additional cost-sharing reductions will lower your out-of-pocket health care costs, such as copays and deductibles. This additional financial assistance is only available if you select a Silver plan and is known as an Enhanced Silver plan. Depending on your situation, costs may be lower with a Platinum plan than with an Enhanced Silver plan, so make sure to look closely at your options.

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If you would like to continue seeing the same doctors you see now or continue using the same pharmacy as you use now, contact the health insurance company to find out which doctors and pharmacies are in the health insurance plan's network. You can also ask your doctors or pharmacy about which health insurance plan networks they are in. Be sure to check the health insurance companies' lists of covered medications — known as drug formularies — to make sure any drugs you currently take are covered by the plan you select. To find the health insurance companies' drug formularies, contact each health insurance company directly or contact the California Department of Public Health's Office of AIDS. It is important to remember that plans' drug formularies can change at any time and the plan will have the most up-to-date formulary.

Additional Drug and Premium Payment Assistance Programs

You may be able to get help paying for your HIV or AIDS medications. The AIDS Drug Assistance Program (ADAP) within the California Department of Public Health helps ensure that eligible individuals living with HIV or AIDS who are uninsured and underinsured have access to life-saving HIV medications. An individual earning

less than \$50,000 adjusted gross income may qualify for ADAP. For ADAP eligibility information, including where to go to enroll, drug formulary lists and participating ADAP pharmacies and locations, please call (888) 311-7632 or visit the website of ADAP's pharmacy benefits manager, Ramsell Corp. ADAP can provide drug deductible and copayment assistance for drugs on the ADAP formulary. In order for ADAP to assist you with these drug costs, your health insurance plan's pharmacy must also be a participating ADAP pharmacy.

A list of the antiretroviral (ARV) drugs that are available on the ADAP formulary, along with those available through the Covered California health insurance plans, is available as a downloadable PDF.

Qualified individuals enrolled in ADAP can also receive help paying Covered California monthly premiums through the Office of AIDS' Health Insurance Premium Payment (OA-HIPP) program.

If you and a third party, such as OA-HIPP, both paid your premium for the same month, you may contact the health insurance company and request a refund. You may also contact the health insurance company for any other issues relating to premium payments.

Keeping Your Same Doctor for Services

"Continuity of care" is the continuation of a care plan for a limited amount of time despite switching to a new health insurance plan or experiencing a change in the provider, hospital or pharmacy network of your health insurance plan. Individuals in this situation may want to continue health care services with their previous doctor or hospital. To receive continuity-of-care services, you must contact your new health plan and request continuity of care. Your doctor or hospital also must agree to keep you as a patient.

Only people with certain types of health problems or conditions can receive continuity of care. HIV and AIDS may qualify as "serious chronic conditions," which would allow for a maximum of 12 months of continuity of care. A complete list of qualifying circumstances is available from the Department of Managed Health Care website.

If you think you might be eligible for continuity of care, contact your current Covered California health insurance plan and request it. Ultimately, a continuity-of-care request is between your current health insurance plan and your previous doctor or hospital. If your health insurance plan denies your request for continuity of care or

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delays giving you an answer, you can file a formal grievance (also known as a complaint or appeal) with the health insurance company. If your health insurance company does not resolve your grievance/complaint/appeal to your satisfaction, contact the California Department of Managed Health Care's Help Center at (888) 466-2219 for help. If your Covered California health insurance plan is a Health Net PPO plan, contact the California Department of Insurance at (800) 927-HELP (4357).

Note: Covered California does not decide on continuity-of-care requests. Additional continuity-of-care information related to health insurance plans regulated by the Department of Managed Health Care can be found on the Department of Managed Health Care website. For free, confidential and local help with grievance process, contact the Health Consumer Alliance at (888) 804-3536 or visit www.healthconsumer.org.

Keeping Your Same Drugs and Medications

If you enroll in a Covered California health insurance plan, your new plan may cover any drugs and medications you were taking before enrolling, but this depends on many factors. Also, the list of drugs (also known as the formulary) that Covered California health plans cover may periodically change. If you have questions or concerns about your access to a particular medication, first contact your health insurance plan directly and request that medication. If your request is denied, file a formal grievance (also known as a complaint or appeal) with the health insurance plan. If your health insurance plan does not resolve your grievance/complaint/appeal to your satisfaction, contact the California Department of Managed Health Care's Help Center at (888) 466-2219 for help. If your Covered California health insurance plan is a Health Net PPO plan, contact the California Department of Insurance at (800) 927-HELP (4357). If you need medications urgently and your health insurance plan is not responding, you can also contact the Department of Managed Health Care or the California Department of Insurance for help.

For free, confidential and local help with the grievance process, contact the Health Consumer Alliance at (888) 804-3536 or visit www.healthconsumer.org.

Additional Services and Resources

Individuals living with HIV and AIDS may be eligible for additional services funded through the Ryan White Program, including case management, nutritional support, transportation and free legal services. Contact the California Department of Public Health's Office of AIDS at (916) 449-5900 for more information.

Free, Confidential and Local Assistance Is Available

Working through payment issues, medication requests, continuity of care and other issues can be difficult. Covered California has made available free, confidential and local assistance to all enrollees. The Health Consumer Alliance can help enrollees work with their health insurance company and, if necessary, work with health insurance regulators. Call (888) 804-3536 or visit www.healthconsumer.org.

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More Information

For questions about enrolling in health coverage, contact Covered California at (800) 300-1506 or visit www.CoveredCA.com.

For questions or additional information about drug or premium assistance programs for eligible individuals living with HIV or AIDS, contact the California Department of Public Health's Office of AIDS at (916) 449-5900 and ask to speak to someone in ADAP or OA-HIPP, or visit their website.

Links to websites mentioned in this document

ADAP Pharmacy Benefits Manager

www.ramsellcorp.com/individuals/ca.aspx

Antiretroviral (ARV) drugs available on the ADAP formulary, along with those available through Covered California health insurance plans (PDF)

www.cdph.ca.gov/programs/aids/Documents/ADAPCoveredCaliforniaFormularyARVComparisonChart.pdf

Office of AIDS' Health Insurance Premium Payment (OA-HIPP) program enrollment

www.cdph.ca.gov/programs/aids/Pages/OAIAS.aspx

Qualifying circumstances for continuity of care

www.dmhc.ca.gov/dmhc_consumer/br/br_continuity.aspx

Health insurance plans regulated by the Department of Managed Health Care

www.dmhc.ca.gov/dmhc_consumer/br/br_continuity.aspx

California Department of Public Health's Office of AIDS

www.cdph.ca.gov/programs/aids/Pages/Default.aspx



CoveredCA.com

Covered California is the new online "marketplace" that makes it simple and affordable to purchase quality health insurance and get financial assistance to help pay for it. If your income is limited, you may be eligible for free coverage through Medi-Cal. **Questions? Call (800) 300-1506**