

Stocks
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stock market was mostly lower at the
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nge volume was about 147.33 million
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Tables in Business Section

Council Friday
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Snyder, a controversial and
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(UPI)—President Pieter
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Rock Hudson Is Dead at 59; His AIDS Moved the World



One of First to Go Public With Illness

By BURT A. FOLKART,
Times Staff Writer

Rock Hudson lost a months-long struggle with AIDS early today, dying of the incurable disease he personally chose to bring to the attention of a concerned and puzzled world.
The once archetypally rugged and handsome actor, whose film triumphs carried him into a successful television career, died peacefully in his Beverly Hills home. He was 59.
His public

This Month in History:
Actor Rock Hudson dies of AIDS on October 2nd, 1985

**UNITED WE FIGHT.
UNITED WE WIN.**

LIVE UNITED

October 26, 2022 Part B Network Meeting

Yasmin Andre, Director
Doris Huff, Planning & Evaluation
Vera Smith, Accountant

Mika Mendoza, CQM
Whitney Marshall, PCS Manager



UNITED WE FIGHT.
UNITED WE WIN.

LIVE UNITED

Welcome & Happy Halloween!

Please drop your name, role, and agency in the chat 😊

“We deal with our pain in many ways, but it is over the years that I have discovered that it is through JOY that the uniqueness of every individual is revealed.

If I can help a person back to a state of joy...

Well, my role has its rewards.”

Counselor Deanna Troi, Star Trek: TNG



LIVE UNITED

Central Florida HIV Planning Council

Whitney Marshall



Heart of Florida United Way

UNITED WE FIGHT.
UNITED WE WIN.

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World AIDS Day

The Shakespeare Theatre

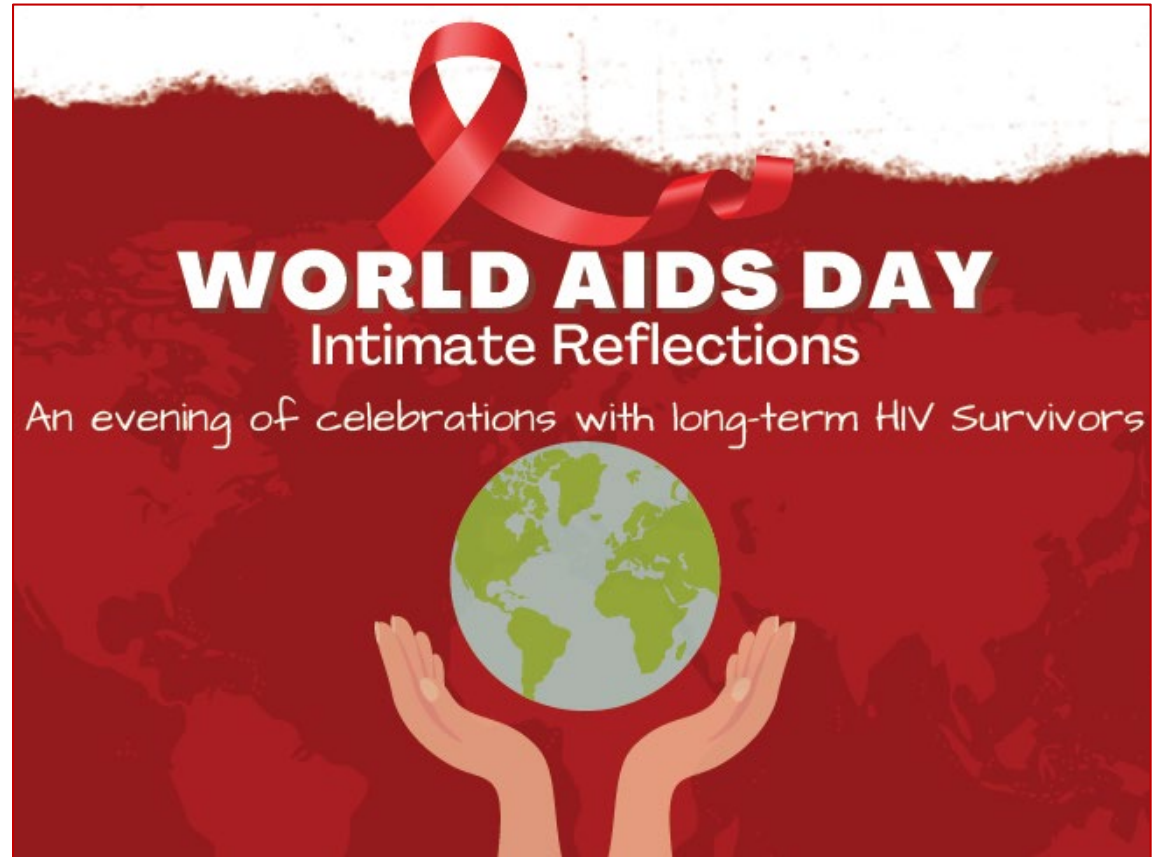
812 E. Rollins Street
Orlando, FL 32803

December 1st, 2022

6:00 PM to 9:00 PM

*Transportation available through
Planning Council Support for RW clients*

(407) 835-0906



Red Ribbon Times

Being Diagnosed	Love and Relationships	Seeking Treatment
Addiction and Recovery	Believing in Yourself	Emotional Struggles and Successes
Friendship and Community	Experiences in Clinics and Hospitals	Spirituality and Connection

Call for Client Submissions

- The *Red Ribbon Times* newsletter is published by CFHPC digitally & in print
- Looking for submissions relating to lived experiences as a person with HIV
- Submissions can be in the form of:

Articles

Poetry

Photography

Visual Art

- Flyer will be sent with meeting materials

LIVE UNITED

Florida Department of Health ADAP Marketplace Enrollment Overview

Chanel Folston



Heart of Florida United Way

Florida Department of Health

ADAP

Marketplace Enrollment

November 15, 2022- January 15, 2023



ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

September

Housekeeping

- ADAP Recertifications
- NOEs
- Address Updates
- Household #/Income Update
- Plan Update (2022 Marketplace Enrolled)

Mail Out - Marketplace

For currently enrolled 2022 Marketplace clients to contact ADAP Coordinator

- Changes in Household, Contact Information, Income, Health Insurance Plan Choice, EIS availability.

CASE MANAGEMENT AGENCY

How to Help

- Identify Marketplace Enrolled Clients
- Monitor NOEs and Update 30 days prior to Exp. Date (ADAP sends monthly NOE renewal reports)
- Make any address/income/household changes on NOE
- Check client pay slip/report for evidence of health/medical deductions (employer sponsored insurance)

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

October

Identifying New Marketplace Candidates among ADAP clients

- ADAP Enrolled
- Income Eligibility (75% - 400% FPL) on NOEs
- Send listings to case management agencies

Mail Out Cards - Marketplace

For 2023 Marketplace candidates to contact ADAP Coordinator

- Changes in Household, Address/Contact Information, Income, EIS availability.

Continued Housekeeping for Current 2022 Marketplace enrolled

Monitor mail outs (returned mail) for needed follow-up contact

Continue Recertifications and NOE updates in Provide

CASE MANAGEMENT AGENCY

How to Help

- Monitor Income: 75% - 400% FPL
- Check lists of “Candidates” to assist ADAP in contacting clients
- Monitor NOEs and Update 30 days prior to Exp. Date (ADAP sends monthly NOE renewal reports)
- Make any address/income/household changes on NOE
- Check client pay slip/report for evidence of health/medical deductions (*employer sponsored insurance*)

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

November

CMS Identifies ACA Plans in late October. Florida ADAP chooses plans by November 15th for each county.

ADAP begins 2023 Assessments for Marketplace Enrollment

- Broward Regional Health Planning Council Site
- Assessments continue through January 15, 2023
- Appointments made with clients via telephone or face to face

ADAP checks completed 2023 Policy (SureFyre)

- Enters policy information into Provide for premium payment set up
- 1st payments go out around beginning of December
- BRHPC makes payments (in batch)

CASE MANAGEMENT AGENCY How to Help

- Continue to monitor income of clients: 75% - 400% FPL
- Monitor NOEs and Update 30 days prior to Exp. Date (ADAP sends monthly NOE renewal reports)
- Make any address/income/household changes on NOE
- Check client pay slip/report for evidence of health/medical deductions (*employer sponsored insurance*)

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

November

ADAP calls clients who have not responded to mail out or who do not allow mail

- Completes Assessments for Clients when contacted

ADAP sends list of unreachable clients to Case Management Agencies/Case Managers

- To assist in contacting/locating client

2nd Mail Out Cards– Marketplace

- Candidates not Marketplace enrolled
- Enrollment Deadline Reminder

CASE MANAGEMENT AGENCY

How to Help

- Check list of Unreachable Clients
- Continue to monitor income of clients: 75% - 400% FPL
- Monitor NOEs and Update 30 days prior to Exp. Date (ADAP sends monthly NOE renewal reports)
- Make any address/income/household changes on NOE
- Check client pay slip/report for evidence of health/medical deductions (*employer sponsored insurance*)

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

December

ADAP continues to call clients who have not responded to mail out or who do not allow mail

- Completes Assessments for Clients when contacted

ADAP Contacts Local Pharmacies

- Client Demographics
- Client Health Insurance Information
- ADAP Copay Card
- Arrange to have RX sent to Pharmacy (pharmacy or ADAP call prescriber)

ADAP continues 2023 Assessments for Marketplace Enrollment

- Assessments continue through January 15, 2023

ADAP checks completed 2023 Policy (SureFyre)

- Enters policy information into Provide for premium payment set up
- BRHPC makes payments (in batch) every few weeks

CASE MANAGEMENT AGENCY

How to Help

- Continue to monitor income of clients: 75% - 400% FPL
- Monitor NOEs and Update 30 days prior to Exp. Date (ADAP sends monthly NOE renewal reports)
- Make any address/income/household changes on NOE
- Check client pay slip/report for evidence of health/medical deductions (*employer sponsored insurance*)

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

January

ADAP Continues To:

- **Call clients who have not responded to mail out or who do not allow mail**
 - Completes Assessments for Clients when contacted
- **Contacts Local Pharmacy**
- **Complete Assessments for Marketplace Enrollment**
- **Check completed 2023 Policy (SureFyre)**
 - Enters policy information into Provide for premium payment set up
 - BRHPC makes payments (in batch) every few weeks

2023 Marketplace Enrolled Clients

- Run Report of Clients and Plans
- Send to CM Agencies and Providers

CASE MANAGEMENT AGENCY

How to Help

- Continue to monitor income of clients: 75% - 400% FPL
- Monitor NOEs and Update 30 days prior to Exp. Date (ADAP sends monthly NOE renewal reports)
- Make any address/income/household changes on NOE
- Check client pay slip/report for evidence of health/medical deductions (employer sponsored insurance)

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

January 15- February/March/April

2023 Marketplace Enrolled Clients

- Monitor Premium Payments in Provide
- Monitor RX pick up

Monitoring Enrollment with Marketplace

- Run Report (SureFyre) for “Documents Needed”
 - Income, Citizenship, COB
- ADAP can send documents to American Exchange to forward to Marketplace or can contact client to send documents directly

CASE MANAGEMENT AGENCY

How to Help

- Assist ADAP Coordinator in acquiring necessary documentation for client to remain in Marketplace.

ADAP – Marketplace Enrollment

November 15, 2022 – January 15, 2023

Questions?

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Ryan White Reminders

Doris Huff

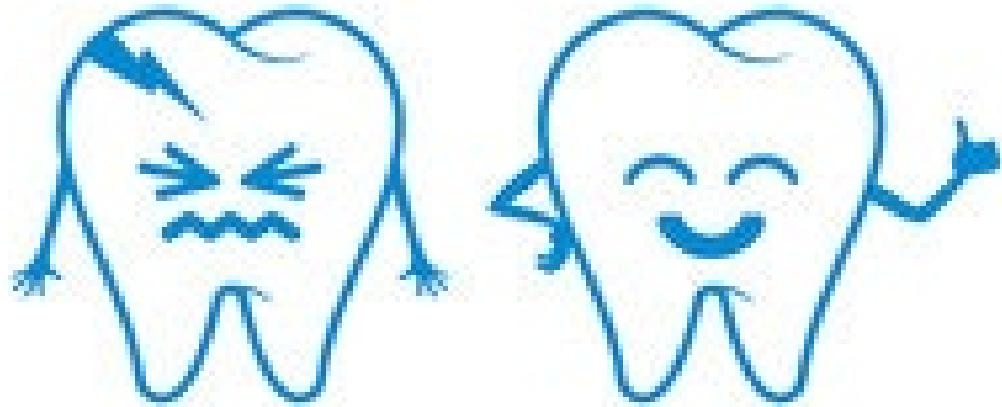
Yasmin Andre



UNITED WE FIGHT.
UNITED WE WIN.

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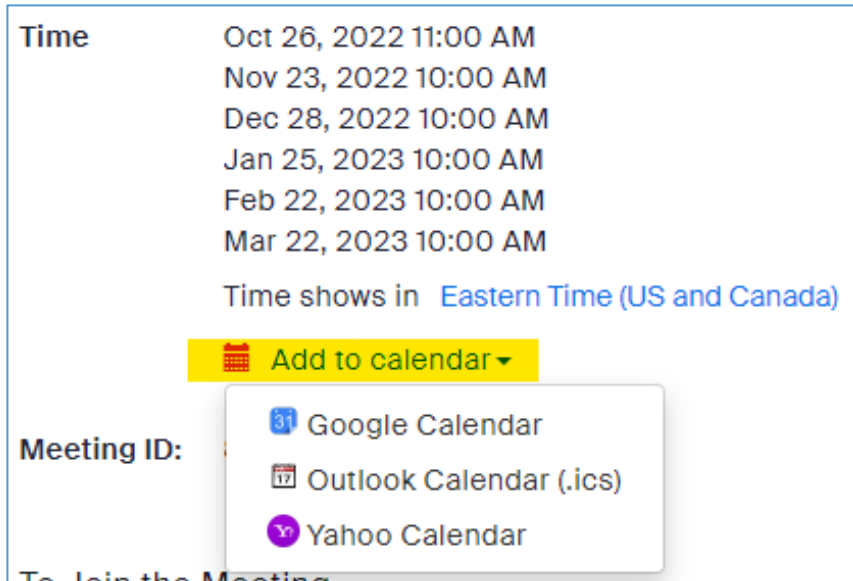
Delta Dental Program Expectations



Please remind clients to utilize their dental insurance by scheduling & attending minimum appointments!

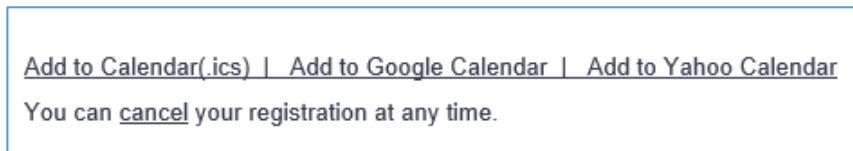
Tuesday, November 1, 2022 is the deadline for preventive services

Zoom Recurring Meetings



The screenshot shows a list of recurring meeting times: Oct 26, 2022 11:00 AM; Nov 23, 2022 10:00 AM; Dec 28, 2022 10:00 AM; Jan 25, 2023 10:00 AM; Feb 22, 2023 10:00 AM; and Mar 22, 2023 10:00 AM. Below the times, it says 'Time shows in Eastern Time (US and Canada)'. A yellow button labeled 'Add to calendar' is highlighted, with a dropdown menu showing options for Google Calendar, Outlook Calendar (.ics), and Yahoo Calendar. The 'Meeting ID:' field is also visible.

Screenshot from registration confirmation webpage



The screenshot shows a confirmation email with links: 'Add to Calendar(.ics) | Add to Google Calendar | Add to Yahoo Calendar'. Below the links, it says 'You can cancel your registration at any time.'

Screenshot from registration confirmation e-mail

Reminder:

- Zoom meetings can be added as a recurring event to your calendars
- Once registered, click **Add to Calendar**
 - Google Calendar: Allow Zoom to access Calendar
 - Outlook: Download .ics file, open downloaded file, and save to Calendar

Client Choice of Providers

- New memorandum regarding policies related to Provider Choice & Coordination of Services.
- Eligible clients have the right to choose the provider and the type of services and care required within the scope of clinical responsibility.
- Clients may enroll in case management at any participating Part B agency, regardless of where the client receives medical care.
- Services should not be denied to a client who elects to enroll in services with multiple providers.

Give. Advocate. Volunteer. LIVE UNITED



MEMORANDUM

TO: Part B/General Revenue Providers

FROM: Heart of Florida United Way, Area 7 Lead Agency *YFA*

DATE: October 25, 2022

SUBJECT: Provider Choice & Coordination of Services

RWHAP Part B and General Revenue funding is available to individuals who have been diagnosed with HIV, reside in the State of Florida, and have a combined family income below 400% of the Federal Poverty Level (FPL). Services available to eligible PWH under the RWHAP Part B program include all covered services that relate to HIV diagnosis and care and that are provided by participating Part B providers. The Orlando EMA Part A Recipient and Area 7 Lead Agency is responsible for ensuring that Service Standards are implemented through the service system.

To facilitate care coordination across the five-county area, the RWHAP Part A and Part B programs have adopted uniform standards of care. The objectives of the [System Wide Service Standards](#) are to help achieve the goals of each service category by ensuring that programs:

- Have policies and procedures in place to protect clients' rights and ensure quality of care
- Provide clients with access to the highest quality services through experienced, trained and, when appropriate, credentialed staff
- Provide services that are culturally and linguistically appropriate
- Meet federal, state, and local requirements regarding safety, sanitation, access, public health, and infection control
- Guarantee client confidentiality, protect client autonomy, and ensure a fair process of grievance review and advocacy
- Comprehensively inform clients of services, establish client eligibility, and collect client information through an intake process
- Effectively assess client needs and encourage informed and active client participation
- Address client needs effectively through coordination of care with appropriate subrecipients and referrals to needed services
- Are accessible to all people with HIV in the Orlando Service Area (Brevard, Lake, Orange, Osceola and Seminole)

Client Choice of Providers

Case Manager Responsibilities

- Explain client rights and responsibilities
- Assess that services are culturally and linguistically appropriate
- Protect confidentiality, client autonomy, and ensure a fair grievance process
- Comprehensively inform clients of services
- Effectively assess and address client needs through coordination of care with appropriate providers and referrals
- Assist clients in selecting appropriate health coverage for their needs

Provider Responsibilities

- Establish policies to protect clients' rights and ensure quality of care
- Provide services through experienced, trained, and credentialed staff
- Establish policies for making services accessible, available, and appropriate for clients
- Establish uniform and timely referral process
 - 2-3 business days for urgent referrals
 - 7-10 business days for routine referrals

RYAN WHITE UNLIMITED

Ryan White Updates

Eligibility Procedures & Area 7 Standardization

Yasmin Andre

Mika Mendoza



Eligibility Procedure Updates

- Memorandum released by FDOH establishes new eligibility procedures around:
 - Reciprocity between Parts
 - Eligibility period extended to one year
- FDOH contact:
DiseaseControl@flhealth.gov or
850-245-4422



Eligibility Procedure Updates: **Reciprocity between Parts**

- Part B agencies (including ADAP) can use a valid NOE from a Part A agency *from anywhere in the state* in determining a client's initial Part B eligibility or redetermination

“Reciprocity allows a valid, current notice of eligibility (NOE) from the Florida Department of Health or from a Ryan White Part A Program to serve as the source documentation to provide allowable Ryan White services statewide.”

Eligibility Procedure Updates: One-Year Eligibility Period

“The maximum time allowed before eligibility confirmation has been extended to 366 days, with a self-attestation allowed every other 366-day period...

A client remains responsible to notify the lead agency, the ADAP office, or any subcontracted agency of changes that affect eligibility, including to household size, income, address, and payer/insurance. The Ryan White program remains payer of last resort.

Applies to all eligibilities completed beginning
Tuesday, November 1, 2022

- All eligibilities completed from November 1 onward must contain all documents (proof of HIV, proof of FL residency, proof of income, proof of insurance, and releases)
- Confirm accuracy of all client profile information (demographics, contact information, HIV status, HIV risk factors, etc.)
- Self-attestation accepted every other year

Eligibility Procedure Updates: Questions & Concerns

Please unmute or type in the chat any questions or concerns regarding the eligibility update

We will collect your questions and reach out to FDOH for response.



Area 7 Standardization

- Standardizing the Authorization to Disclose Confidential Information form
- Introducing HFUW-Part B Income Assessment Tool
- Clarifying the use of the Insurance Waiver Form



Area 7 Standardization: **Authorization to Disclose Form**



- Standardizing the Authorization to Disclose Confidential Information form across Part B agencies
- Ensuring that at least the minimum required sections are disclosed
- Fillable PDF sent to supervisors and will be sent with meeting materials

Area 7 Standardization: Income Assessment Tool

- Newly developed Income Assessment Tool
- For use in calculating monthly and annual income to ensure standard process across agencies
- Not required, but preferred
- Can use Part A tool if already in use



Area 7 Standardization: Insurance Waiver Form

State (will add new) **Insurance Waiver Form** Required Form

Date Clients Name

Clients Address Phone

Eligibility Staff Name Phone

Address

Patient Care Programs under Chapter 64D-4 are payor of last resort. As such, any applicant/client eligible to receive health insurance through employment or COBRA, must access the insurance. Exceptions can be granted if the insurance policy is considered not viable. (See section 9 of eligibility manual for details.)

Please check the appropriate Applicant/client has available insurance during open enrollment Date of open enrollment

Applicant/client is not viable. (describe)

Applicants/clients are eligible if the insurance policy is deemed not viable. This would include **NOT** of availability of insurance or policy description must be in the file. Refer to Section 9, Screening for Other Programs for details.

* This form must be placed in the client file.

- Insurance Waiver Form is for limited use *only* when client is employed & eligible for employer-sponsored insurance
- ACCESS Florida Medicaid eligibility pre-screening must be completed for all uninsured clients
- Medicaid enrollment checks do not replace the pre-screening

Area 7 Standardization: Insurance Waiver Form

Unemployed	Employed & <u>Ineligible</u> for Employer-Sponsored Health Insurance	Employed & <u>Eligible</u> for Viable Employer-Sponsored Health Insurance	Employed & <u>Eligible</u> , but Employer-Sponsored Health Insurance Is NOT Viable
<p style="text-align: center;">Do <u>not</u> complete Insurance Waiver Form</p> <p>Eligibility staff should upload proof of Medicaid pre-screening to Attachments.* (Eligibility Procedures Manual, Section 9, page 3-4)</p> <p>*This pre-screening will also be required once we move to the RW Portal</p> <p>A Medicaid eligibility screening should be completed through the Access Florida website "Am I Eligible?" screening tool and results should be printed** with date of pre-screening</p> <p>**when printing from Chrome, check box for "Headers and Footers" and the date will auto-populate</p>	<p style="text-align: center;">Do <u>not</u> complete Insurance Waiver Form</p> <p>Eligibility staff should upload proof of ineligibility to Attachments.</p> <p>Proof of ineligibility must be documented by uploading either:</p> <ul style="list-style-type: none"> ➤ Letter from employer confirming client is not eligible for insurance ➤ Copy of personnel handbook that includes information on insurance eligibility 	<p style="text-align: center;">Do complete Insurance Waiver Form</p> <p>Eligibility staff should check box for "<u>Applicant/client has available insurance during open enrollment</u>" and indicate date of employer open enrollment (usually 90 days from date of hire or annually).</p> <p>Eligibility staff should assist the client in enrolling by the specified date. Clients who are eligible for employer-sponsored insurance are expected to enroll when available..</p>	<p style="text-align: center;">Do complete Insurance Waiver Form</p> <p>Eligibility staff should check box for "<u>Applicant/client's insurance is not viable</u>" and include description in the text box. Staff should upload personnel handbook or benefits summary.</p> <p>Insurance is not viable only if:</p> <ul style="list-style-type: none"> ➤ Insurance premiums are more than 10% of the client's income, ➤ Policy does not offer prescription coverage, or ➤ Policy does not meet the minimal essentials based off Marketplace criteria

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Evaluation

Mika Mendoza



Heart of Florida United Way

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Mentimeter



Menti.com code:
1754 5464

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Provider Announcements & Updates

Meeting Attendees

