State of Kansas

Ryan White Part B Program/
AIDS Drug Assistance Program
Provider Manual

with

Kansa
Department of Health and Environment

with

hsi
Healthcare Strategic Initiatives

Provider Manual
For Claims and Medical Services Questions:
Healthcare Strategic Initiatives
Care Services Department
1836 Lackland Hill Parkway
St. Louis, MO 63146

Care Services (877) 541 – 6822

For Ryan White Part B/ADAP Eligibility:
Ryan White Eligibility Coordinator
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Kansas Department of Health and Environment
Bureau of Disease Control & Prevention
STI/HIV Section
RYAN WHITE PART B PROGRAM GUIDELINES

UNIVERSAL CONDITIONS AND GUIDELINES:

1. Kansas Ryan White Part B Program funds are to be accessed only when no other support is available, serving as payer of last resort.

2. No Kansas Ryan White Part B Program or AIDS Drug Assistance Program services are available to clients while accessing inpatient care.

3. Kansas Ryan White Part B Program and AIDS Drug Assistance Program reimbursement is not available for emergency room (ER) or Urgent Care visits.

4. The rate of reimbursement for program-covered services shall be the rate established by Kansas Medicaid as of January 1st of the current year.

5. Prior to providing services, providers shall assure that the client has been authorized by the Kansas Ryan White Part B Program to receive services. See Participant Card on page 9.

6. The Kansas Ryan White Part B Program will not make payment for any item or service to the extent that payment has been made, or can reasonably be expected, through the following:
   - Under any federal or state health benefits program (i.e., Medicaid and/or Medicare);
   - Under a group/individual private compensation program/insurance policy; and/or
   - By an entity that provides health services on a prepaid basis.

7. When clients are approved retroactively for any state-administered benefits program, such as Medicaid, providers will be required to invoice that state-administered program back to the first of the month that status had been approved.

8. The Kansas Ryan White Part B Program reserves the right to review client records and provider invoices to assure that program guidelines are being followed.

9. The Kansas Ryan White Part B Program reserves the right to verify and confirm eligibility of all enrolled clients applying for services.

10. All state and federal statutes relating to a person’s confidentiality must be followed.

11. All services funded under the Kansas Ryan White Part B Program shall be conducted in accordance with all state and federal nondiscrimination requirements.
PROVIDER IMBURSEMENT

GENERAL SUBMISSION GUIDELINES:
Kansas Ryan White Part B Program providers must be current Medicaid providers. Medical providers will be reimbursed according to the rate established by Kansas Medicaid as of January 1st of the current year. Imbursement for services will only be made for program-covered services, and for those clients actively enrolled in the Kansas Ryan White Part B Program at time of service.

These general submission guidelines are a requirement of all claims. The following criteria must be utilized in order to process reimbursement for claims submitted:

- Generated on a standard HCFA-1500, RRB-1500, OWCP-1500 or provider-generated invoice document;
- Indicate the following information:
  - Client Participant Number;
  - Client Name;
  - Date of Service(s);
  - CPT Code, NDC Number, and/or Detailed Explanation of Services Rendered; and
  - Supporting HIV diagnosis coding
- Submitted within 60 days of the date of service, unless otherwise authorized by the program.

If any of this information is not included on/with the claim, the claim will be returned for insufficient information and may be subject to denial. Any claims submitted after 60 days may be subject to denial.

Claims must be sent to the following address:
Healthcare Strategic Initiatives
Care Services Department
1836 Lackland Hill Parkway
St. Louis, MO 63146

VACCINATIONS
Immunizations and vaccines may include cost of vaccine and administration.

PRIOR AUTHORIZATION
Covered services do not require prior authorization for clients who are able to show proof of current program coverage.

DENIAL OF CLAIM PAYMENT
When a claim is denied for payment, a denial letter will be sent to the provider with the reason(s) for the denial. Listed below are common situations for which services ARE NOT covered under the Kansas Ryan White Part B Program:

- Service(s) provided by a provider who does not have a current agreement with the Kansas Ryan White Part B Program;
- Service(s) NOT related to an HIV or AIDS diagnosis;
- Service(s) provided to a client not enrolled in the program at the time services were rendered;
- Claims submitted 60 days after date of service;
- Service(s) administered on an inpatient basis or in an emergency room/urgent care; or
- Service(s) submitted where there is another primary payer.

If there are questions regarding invoices, payments, or denials of payment, contact Care Services at (877) 541 – 6822.

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KANSAS AIDS DRUG ASSISTANCE PROGRAM (ADAP)

The Kansas AIDS Drug Assistance Program (ADAP) works in collaboration with the Kansas Medicaid Program, and is designed to assist in the purchase of specific medications for the treatment of HIV/AIDS. The Kansas Ryan White Part B Program is responsible for establishing and maintaining eligibility for the ADAP, while the Medicaid Program oversees all the claims processing for the program.

The Kansas ADAP is funded through a variety of sources. Although a majority of funding is received through the Health Resources and Services Administration (HRSA), the program also receives funding from the State of Kansas and rebates through pharmaceutical companies.

SERVICES

Services are available to all enrolled clients within the Kansas Ryan White Part B Program. These services provide reimbursement for medications listed on the Kansas ADAP Medication Formulary. This formulary currently includes all FDA-approved medications for the treatment of HIV infection, as well as other medications that are utilized for prevention and treatment of secondary infections.

CERTIFICATION OF PHARMACY PROVIDERS

ADAP pharmacies must be current Medicaid/KanCare pharmacy providers. For questions regarding a pharmacy’s status with Kansas Medicaid/KanCare, please contact the pharmacy’s office manager.
The Kansas Ryan White Part B Primary HIV Care Services allow clients to access qualified medical professionals throughout the state for treatment of HIV infection and illnesses related to the progression of the infection. The Primary HIV Care Services Network is one of the cornerstones of HIV care in the State of Kansas. As eligible clients access these services, they can be monitored and treated by physicians with expertise in treating HIV infection.

SERVICES

Services are available to eligible Kansas Ryan White Part B Program clients for any service related to the diagnosis, monitoring and treatment of HIV infection and those disease states or illnesses associated with this infection. These include, but are not limited to the following:

- Physician and nurse visits;
- Diagnostic tests; and
- Medication monitoring visits.

FOR CERTIFICATION, PRIMARY HIV CARE PROVIDERS WITH THE KANSAS RYAN WHITE PART B PROGRAM MUST:

- Maintain a current, valid MD, DO, PA, NP, or ARNP state license;
- Hold a current license with the Kansas Board of Healing Arts or with the comparable licensure board in the state where they practice (out-of-state providers are allowable when they practice in a border city less than 60 miles from the Kansas border);
- Be an HIV-qualified physician (or is in the process of being established in a practice of this specialty)[see Certification, Experience, and Continuing Education section below];
- Provide services with a physician who is operating under a current participation agreement with the Kansas Ryan White Part B Program;
- Be a current Kansas Medicaid provider contracted with all three KanCare MCOs; and
- Be associated with a practice that has the capacity to address client needs during weekdays and has on-call accessibility, unless there is a cooperative arrangement to meet the needs during non-business hours. (Referring clients to the emergency room for routine HIV care is not appropriate.)

Recently trained infectious diseases (ID) fellows or those recently ID certified/recertified are considered qualified providers of HIV/AIDS care. However, board certification in infectious diseases does not guarantee that an ID specialist will remain an expert in HIV disease over time. Thus, all physicians must meet the experience and education criteria outlined above to retain their certification as a Kansas Ryan White Part B Program provider.

Certification, Experience, and Continuing Education of HIV-Qualified Physicians

Physician education/training and ongoing experience working with patients with HIV disease are essential to ensure patients get optimal care. Thus, qualifications are based on patient experience and ongoing education/training in HIV care, especially antiretroviral therapy. To be an HIV-qualified physician, one must be able to show continuous professional development by meeting the following qualifications:

- Provide direct, ongoing care to at least 20 HIV patients per practice over the 24 months preceding the date of application. Note: Providers with fewer than 20 regular HIV patients per practice may still apply by indicating “1-19” as their patient count on the application. Once approved, the “lower-volume” applicant is then paired with a local, experienced, Academy-credentialed provider.
- Successfully completes a minimum of 15 hours of Category 1 continuing medical education in the diagnosis and treatment of HIV-infected patients per calendar year. Documentation is required annually.
STANDARDS OF PRACTICE FOR HIV/AIDS SERVICE PROVIDERS

REQUIRED BASELINE PRACTICES:

- Hepatitis A
- Hepatitis B
- Hepatitis C
- Hepatitis A Vaccine
- Hepatitis B Vaccine
- Pneumonia Vaccine

REQUIRED ANNUAL PRACTICES:

- RPR
- Gonorrhea
- Chlamydia
- PPD or Quantiferon Testing
- Influenza Vaccination
- Patient Education
  - Methods to reduce risk of transmission to others
  - Medication Adherence
  - (Women Only) Risk of perinatal HIV/AIDS transmission, and methods of prevention
The Ryan White Part B Participant Card MUST be shown as proof a client is eligible for services through the Kansas Ryan White Part B Program. This includes dental care, primary medical care, mental health, substance abuse, laboratory services, and other services related to the treatment of HIV infection. This card is sent out every six months to the client from the enrolling Medical Case Manager.

This card is ONLY AVAILABLE FOR USE to those clients who are accessing Kansas Ryan White Part B Program Services (dental, mental health, substance abuse, or primary medical care [including laboratory]). All of these services may not apply to every client.

Clients are eligible only for those services listed on their Participant Card. Services are only valid between the start and end dates listed.

For questions regarding medical or dental claims, please contact the HSI Care Services Department at (877) 541-6822.

AIDS DRUG ASSISTANCE PROGRAM (ADAP) CARDS:

Cards are sent out separately through the Division of Health Care Finance (DHCF) as the State of Kansas Medical Card (see page 5) for clients not enrolled in a KanCare MCO.

If a client is enrolled in a KanCare MCO, the plan card should be presented at the pharmacy. No additional cards are necessary for ADAP coverage.
Please note the following when determining benefits from the Ryan White Part B or ADAP Card:

**ADAPD**  AIDS Drug Assistance Program – Prescription
- Covers only those medications that are on the approved Kansas ADAP Formulary. This plan is the primary payer only if the client has no other insurance.

**TXIX**  Medicaid Title 19 – Medical and Dental
- **ALL CLAIMS** must be processed through the KanCare MCO first.
- Denied KanCare MCO dental claims may be sent to HSI, along with a copy of the KanCare MCO denial.

**MKN**  MediKan - Catastrophic
- **ALL CLAIMS** must be processed through fee-for-service Medicaid first.
- Denied Medicaid dental and medical/laboratory claims may be sent to HSI, along with a copy of the Medicaid denial.

**MN**  Medically Needy – Spend down, Medical, and Dental
- **ALL CLAIMS** must be processed through the KanCare MCO first.
- Medications are applied to spend downs – services outside of medications may be denied while client has a spend down and will have to be re-submitted once the spend down is met.
- Denied KanCare MCO dental claims may be sent to HSI, along with a copy of the KanCare MCO denial.

**TPL**  Third Party Liability – Private Insurance
TPL indicates that the client has other benefits through a privately owned or group-owned insurance plan. This can include but is not limited to the Kansas High Risk Pool and other such statewide and federal programs.

If TPL is indicated, the client should also have a card from the insurance company that would accompany the State of Kansas Medical Card or the KanCare MCO card.

This insurance plan is the primary payer for all claims.
- **ALL CLAIMS** must be processed through private insurance.
- Nothing should be sent to HSI.
- Clients are **EXEMPT** from co-pays on ADAP medications **ONLY**.

**Medicare**  Part A, B, C, and D
- **ALL CLAIMS** must be processed through Medicare **FIRST**, Medicaid/KanCare MCO **SECOND** (if the client has Medicaid).
- Denied Medicare dental claims may be sent to HSI, along with a copy of the Medicare (and Medicaid/KanCare MCO if client has Medicaid) denial(s).
- Clients are **EXEMPT** from co-pays on ADAP medications **ONLY**.

**QMB**  Qualified Medicare Beneficiary
- Pharmacy claims must be processed through Medicare **FIRST**, fee-for-service Medicaid **SECOND**.

**(E)LMB**  (Expanded) Limited Medicare Beneficiary
- Pharmacy claims must be processed through Medicare **FIRST**, fee-for-service Medicaid **SECOND**.

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ADAP
AIDS Drug Assistance Program

AIDS
Acquired Immune Deficiency Syndrome: A severe immunological disorder caused by the retrovirus HIV, resulting in a defect in cell-mediated immune response that is manifested by increased susceptibility to opportunistic infections and to certain rare cancers, especially Kaposi's sarcoma. It is transmitted primarily by exposure to contaminated body fluids, especially blood and semen.

ARNP
Advanced Registered Nurse Practitioner

Category 1 Continuing Medical Education
A specific form of continuing education that helps those in the medical field maintain competence and learn about new and developing areas of their field

Client
The person who is receiving services

Client Record
A collection of printed or electronic information pertaining to work done for a client

Confidential/Confidentiality
Information given by a client to a service provider will not be disclosed to a third party without the express consent of the client, as defined by the HIPAA Act of 1996.

CPT Code
A coding system, defined in the publication Current Procedural Terminology, for medical procedures that allows for comparability in pricing, billing, and utilization review

Criteria
Specific, measurable outcome expected from a standard

Diagnosis Code
A number assigned to a diagnosis using the International Classification of Diseases manual

Division of Health Care Finance (DHCF)
The Medicaid management agency of Kansas

DO
Doctor of Osteopathy

HCFA-1500
The uniform professional health care insurance claim form in the U.S.

Health Insurance Portability and Accountability Act of 1996 (HIPAA)
Health Insurance Portability & Accountability Act of 1996, A bill enacted by Congress in 1996 which established a comprehensive and uniform federal standard for ensuring privacy of health information; HIPAA broadens the scope of existing fraud and abuse provisions, and penalties for fraud violations by health care providers.
HIV
    Human Immunodeficiency Virus, the virus that causes AIDS

HRSA
    Health Resources and Services Administration, the federal government agency that oversees Ryan White services

HSI
    Healthcare Strategic Initiatives, the agency that manages SCOUT

Imbursement
    To supply or stock with money.

Kansas Ryan White Part B Participant Card
    Paper card given to Kansas Ryan White Part B clients every six months that shows the time frame clients are active and eligible for services

KDHE
    Kansas Department of Health and Environment: the state agency that oversees the Bureau of Disease Control & Prevention STI/HIV Section. The Kansas Ryan White Part B Program is administered by KDHE.

Managed Care Organization (MCO)
    A health care delivery system consisting of affiliated and/or owned hospitals, physicians and others which provide a wide range of coordinated health services; an umbrella term for health plans that provide health care in return for a predetermined monthly fee and coordinate care through a defined network of physicians and hospitals

MD
    Medical Doctor

Medicaid
    An insurance program administered by states that is jointly funded by federal and state funds for individuals and families with low income and resources

    KanCare
    The program through which the State of Kansas administers Medicaid. There are three MCOs Kansas Medicaid contracts with: Sunflower State Health Plan; Amerigroup Kansas, Inc.; and United Healthcare Community Plan of Kansas.

    Fee-for-Service Medicaid
    A payment model where services are unbundled and paid for separately

Medicare
    An insurance program administered by the federal government providing coverage to people aged 65 and older or who meet other special criteria

NDC Number
    National Drug Code, a unique product identifier used in the United States for drugs intended for human use

NP
    Nurse Practitioner
OWCP-1500
Office of Workers' Compensation Programs; a health care insurance claim form

PA
Physician Assistant

Prior Authorization
A cost containment measure that provides full payment of health benefits only if the hospitalization, dental, or medical treatment has been approved in advance

RRB-1500
A health care insurance claim form

Ryan White Part B (formerly Title II)
Provides assistance to states and territories in improving the quality, availability, and organization of health care and support services for individuals and families with HIV disease, and provides access to needed pharmaceuticals through the AIDS Drug Assistance Program (ADAP)

Spend Down
A spenddown works like an insurance deductible. Persons must incur medical costs equal to the spenddown before Medicaid will pay. When a person meets his or her spenddown, Medicaid will then pay.

TPL
Third Party Liability