2013

Provider Handbook

County of San Diego

Ryan White Primary Care Program (RWPCP)

Funded by Ryan White Treatment Extension Act (RWTEA)

2013 RWPCP Provider Handbook

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Attachments:

For your convenience, all Attachments listed in this handbook are hyperlinked to the San Diego County RWPCP website and can be accessed by clicking each attachment individually.
http://www.sdcounty.ca.gov/hhsa/programs/phs/hiv_std_hepatitis_branch/RWPC_Contractor_Resources.html

2013 RWPCP Provider Handbook

Overview

The Ryan White Primary Care Program (RWPCP) is administered by the County of San Diego HIV, STD and Hepatitis Branch (HSHB) Public Health Services with funding from the State of California and the Federal Ryan White Treatment Extension Act of 2009 (RWTEA). The RWPCP provides preventive and primary care services to HIV positive patients through a network of qualified community clinics. The Program is managed by the Administrative Service Organization (ASO), UnitedHealthcare.

Direct medical services are provided at primary care clinics that contract with HSHB and meet the quality standards required by the HIV Health Services Planning Council. The Standards of Care Committee recommends standards of care guidelines for patients enrolled in the RWPCP for San Diego County. A listing of these guidelines can be found in Attachment D. All medical conditions must be related to HIV disease and must be included in the RWPCP scope of services. A listing of all RWPCP participating medical and dental clinics can be found on Page 6 of this section.

Please direct any program questions to either contact listed below:

County of San Diego
HSHB Contract Administrator
(619) 293-4712

UnitedHealthcare, ASO
RWPC Program Manager
(858) 495-1373

Eligible Patients

In order for a patient to receive services through the RWPCP, the patient must:

- Have a positive HIV serology
- Not have or be eligible for other health coverage for treatment of HIV disease
- Not be younger than 21 years of age, or older than 64 years of age
- Eligibility certification is granted to match their birth month with the need to re-certify their eligibility for RWPC six-months after their birth month

Individuals whose disease state meets or exceeds Social Security Disability criteria for AIDS must be referred for Medicare and/or Medi-Cal. Through the RWPC application process, individuals are screened for other health care payers including Medi-Cal and Low Income Health Plan (LIHP).

To receive notice when this Handbook is updated, each Provider is required to provide the HSHB Contract Administrator a "Program Contact", including name, position or title, phone number, and email address. This individual should be involved in the day to day operations of the RWPCP and in a position to communicate information regarding the updates to interested parties at their clinic.

HIV Specialty Practitioners

HIV primary care services are provided to enrolled RWPCP patients, and provided by practitioners who must be based at RW contracted clinics. Working practitioners are encouraged to obtain an understanding of the HIV related field and are also encouraged to complete an AETC and AAHIVM annual exam.

Medical Provider Registration

Prior to billing for services, all primary care/medical and dental specialty practitioners must register with the ASO by completing the Provider Registration Form. The form should be submitted along with a facsimile of the State of California medical license and DEA certificate, if applicable.

Providers must maintain compliance with requirements of Title 22 of the California Administrative Code and the Health and Safety Code of the State of California as a licensed clinic during the time they provide and invoice for services through the RWPCP.

Services Covered

- Primary care services
- Palliative dental care
- Nutritional counseling
- Treatment Adherence (TA) counseling
- Pharmaceuticals on the approved list
- Secondary Dental patients are eligible for palliative dental services

Key Information:

- Practitioners shall use the HIV Flow Sheet which contains all required elements developed by the Standards of Care Committee.
- A Sexual Health Risk Assessment Form or another equivalent form shall need to be completed by the patient every 3 – 6 months and filed in the patient's medical record. Exceptions will be documented.
- A dental referral shall be documented annually.

Services Not Covered

- Physician or dental services provided outside the primary care clinic (available with other funding)
- Inpatient hospital services
- Emergency department services
- CT scans
- MRI and P.E.T. scans
- Invasive diagnostic tests done outside the primary care clinic

For more information on covered services, Practice Guidelines, expected practices, and required forms see Ryan White Services section beginning on Page 15.

Other Resources Available for RWPCP Patients

HSHB has information for other local, State, and national programs which may be of benefit to RWPCP patients. Other sources fund programs such as the AIDS Drug Assistance Program

(ADAP), compassionate use programs for medications not covered by RW, medical specialty care and additional dental treatment through Specialty Pool arrangements. Services covered in these Specialty Pools are addressed on Page 18 of this handbook.

Low Income Health Plan (LIHP) and RWPCP work together to provide care to dually eligible individuals (see Eligibility Section beginning on Page 7 for more information). LIHP is the first payer of services.

Medical Insurance and RWPCP

Some services may be available to individuals who have medical insurance. Typically, this is limited to dental services and some prescription medication not available through ADAP. Some specific lab tests are available to privately insured individuals through EIP. For more information contact the County or ASO.

Clinic Contacts and Service Locations

Clinic/Program Contact

Each Provider must identify an individual who will serve as the primary contact for RWPC services and issues. Examples of contact types include notification when changes are made to this Handbook, addressee of Client Service Evaluations submitted to the County, coordinator of site visits with County and/or ASO. Providers should provide the name, title/position, and contact information of the Program Contact to the County Contract Administrator. If the designated individual is no longer able to continue to serve or if contact information has change, the County Contract Administrator should be notified within 24 hours.

Adding Additional Service Locations

RWPC services must be provided at one of the clinics listed on the following page. Services provided at locations not registered with the ASO will NOT be reimbursed. Contracted Providers may add clinics by submitting a completed Clinics Information Form to the County Contract Administrator.

Standards of Care Committee (SoCC)

The SoCC is a joint County and Ryan White Planning Council committee meets at least three times a year to ensure that HIV Primary Care services provided through local RWCA-funded clinics meet or exceed established HIV clinical practice and Public Health Services (PHS) guidelines, assuring availability and access to state-of-the-art medical care for all eligible PLWH/A. One way the SoCC fulfills the above duty is the publication of the Practice Guidelines.

Each RWPCP contracted clinic must be represented on the SoCC by clinical or program management staff. Typically, meetings are held on the second Tuesday of March, July, and November, 4:00 - 5:30 PM.

Participating RWPCP Medical and Dental Service Locations

Family Health Centers of San DIego (FHC)

Chase Avenue Family Health Center
111 West Chase Avenue
El Cajon, CA 92020
(619) 515-2499
Medical Services Only

Ciaccio Clinic at North Park - FHC
3544 30th Street
San Diego, CA 92104
(619) 515-2587
Medical Services Only

City Heights Family Health Center
5454 El Cajon Boulevard
San Diego, CA 92115
(619) 515-2400
Medical & Dental Services

Downtown Family Health Center
1145 Broadway
San Diego, CA 92101
(619) 515-2525
Medical Services Only

Grossmont Spring Valley FHC
8788 Jamacha Road
Spring Valley, CA 91977
(619) 515-2330
Dental Services Only

Hillcrest Dental Clinic at North Park FHC
3544 30th Street
San Diego, CA 92104
(619) 515-2434
Dental Services Only

Family Health Centers of San DIego (FHC) - Continued

Logan Heights FHC
1809 National Avenue
San Diego, CA 92113
(619) 515-2394
Dental Services Only

Neighborhood Health Care (NBHC)

NBH – Grand
1001 East Grand Avenue
Escondido, CA 92025
(760) 737-7896
Medical Services Only

NBH – Grand
1001 East Grand Avenue
Escondido, CA 92025
(760) 737-7896
Medical Services Only

NBH - Wellness Center
425 North Date Street, Ste. 129
Escondido, CA 92025
(760) 737-2018
Dental Services Only

North County Health Services (NCHS)

NCHS - Encinitas
1130 2nd Avenue
Encinitas, CA 92024
(760) 753-7842
Medical & Dental Services

NCHS- San Marcos
150 Valpreda Road
San Marcos, CA 92069
(760) 736-6700
Medical & Dental Services

North County Health Services (NCHS) - Continued

NCHS - Oceanside
605 Crouch Str., Bldg. C
Oceanside, CA 92054
(760) 757-4566
Medical Services Only

NCHS – Oceanside Dental
2216 El Camino Real, Ste.121-122
Oceanside, CA 92054
(760) 400-0277
Dental Services Only

NCHS – Ramona
217 East Earlham Street
Ramona, CA 92065
(760) 789-1223
Dental Services Only

San Diego American Indian Health Center (SDAIHC)

2630 First Avenue
San Diego, CA 92103
(619) 234-2158
Dental Services Only

San Ysidro Health Centers (SYHC)

San Ysidro Health Center (SYHC) - Main Clinic
4004 Beyer Boulevard
San Ysidro, CA 92173
(619) 662 4100
Medical & Dental Services

King-Chavez Health Center
950 S. Euclid Ave., 2nd Floor
San Diego, CA 92114
(619) 662-4100
Medical & Dental Services

San Ysidro Health Centers (SYHC) - Continued

SYHC-CHC Ocean View
3177 Oceanview Blvd.
San Diego, CA 92113
(619) 662-4100
Dental Services Only

UCSD Mother-Child-Adolescent Program (MCAP)

4076 Third Avenue, Ste. 301
San Diego, CA 92103
(619) 543-8089
Medical Services Only

UCSD Owen Clinic

4168 Front Street, 3rd Floor
San Diego, CA 92103
(619) 543-3995
Medical Services Only

VISTA Community Clinic - Grapevine

134 Grapevine Road
Vista, CA 92083
(760) 631-5000
Medical Services Only

Ryan White Eligibility and Enrollment

Eligibility Criteria

RWPC applicants are screened for eligibility by completion of the RWPC Application. Individuals eligible for RWPC are:

- HIV positive
- Residents of San Diego County
- Between the ages of 21 and 64
- Not eligible for insurance or other publically funded programs* (i.e. Medi-Cal or LIHP)

* Individuals eligible for medical care through US Department of Veterans Affairs are encouraged to access those benefits but are eligible for RWPC.

Please note that RWPCP eligibility is not based on income or assets.

Enrollment Application Guidelines and Clinic Responsibilities

To ensure accurate collection of member information, to avoid member duplication and data entry, and to maintain an accurate enrollment database system, all patient enrollment forms must be completed accurately, using the practices listed below. An original signature must be retained in the patient's file.

- Applications must be completed by clinic staff, printed legibly, and signed by the patient.
- The name and phone number of clinic staff completing the form must be listed.
- Be precise and document which clinic site (no abbreviations) the application is processed.
- The Primary Care Clinic must provide the patient a RWPCP Patient Information Sheet, which outlines the services covered by the Program.
- The Primary Care Clinic staff must provide each patient a copy of the clinic's Patient's Rights and Responsibilities, review the Rights and Responsibilities with the patient, and obtain the patient's signature on the Rights and Responsibilities. The presenting clinic staff member reviewing the Rights and Responsibilities with the client shall also sign and retain a copy of the Rights and Responsibilities or a receipt in the patient's file.
- All applicants must sign an ARIES Consent Form to be eligible to receive services.
- If a patient appears to be eligible for Medicare, Medi-Cal or LIHP, complete the RW-2E Referral Form, giving the original to the patient, and attaching a copy to the RWPCP RW-1E application.
- Patients referred to Medi-Cal and/or LIHP will be enrolled in the RWPCP for 60 days. If a Medi-Cal and/or LIHP application is not filed within that time frame, the patient's eligibility for the RWPCP will terminate.
- Eligibility will be terminated the last day of the month the ASO is notified of a Medi-Cal or LIHP denial due to any "failure to cooperate" or "failure to provide" reason.

- Patients with another form of health insurance are not eligible to receive Ryan White funded primary care services.
- When faxing the enrollment forms to the ASO, please be sure to use the correct fax number (858) 495-1329.

When faxing Program Enrollment forms protect patient confidentiality by always using a fax cover sheet.

When a patient calls to make an appointment and/or when they present for an office visit, it is recommended that the eligibility status is verified by checking the RW Eligibility List. If the status is one of the following and the eligibility period has expired, services will not be reimbursed and application or requests for extensions will not be granted:

- RW-FP - financial documentation is pending
- RW-LR - no record of a LIHP application has been found
- RW-LF - the applicant failed to complete the LIHP application process (did not provide verification/documentation)

These eligibility codes indicate RWPC eligibility cannot be extended beyond the 30 or 60-day grace period. (Grace period for RW-LR is 60 days). The grace period for RW-FP is 30 days.) DO NOT submit a new RWPC application for someone with one of the above codes. Services provided to the individual after the grace period ends will not be reimbursed by RWPCP until the applicant has complied with the requirements, and the RW eligibility status reflects the change.

REJ Eligibility Code

Applications submitted to the ASO for patients with one of the above status codes, will prompt the ASO to change the eligibility code to REJ which indicates that an application has been submitted but rejected because the applicant has not been compliant with the LIHP referral or provided documentation of income. The applicant will need to take action as follows:

- RW-FP – provide financial documentation
- RW-LR or LF – contact LIHP and resume or complete the LIHP application process.

Application Forms and Timelines

The Ryan White Primary Care Application screens for eligibility for the Ryan White Primary Care Program and the potential eligibility for Medi-Cal, Medicare, and LIHP. There are two RWPC applications in English and Spanish (RW-1E or RW-1S and RW-1AE and RW-1AS) which may be used to enroll someone in Ryan White Primary Care.

Enrollment is conducted annually with re-certification conducted mid-year. Consult the RW Eligibility List to determine if the individuals are eligible or must submit an application to re-certify.

Enrollment

If someone has never enrolled in RWPCP, they must enroll using the RWPCP Application (RW-1E or RW-1S).

Use RW-1E or RW1S:	Use RW-1AE or RW-1AS:
▪ At initial enrollment (applicant has never been covered by RWPC before) or ▪ To re-enroll a RWPC patient in association with their birth month ▪ If an individual (currently receiving RWPC or not) is applying for ADAP and needs to enroll in or re-certify their RWPC, an ADAP enrollment worker based at a RWPC clinic may complete RW-1AE or RW-1AS to enroll the individual in RWPC.	▪ When the person is applying for RWPC and ADAP ▪ Instead of RW-1E or RW-1S and ▪ If you are an ADAP enrollment worker at a RWPC clinic.

Recertification

The re-certification process occurs on a semiannual (every six months) basis (See Re-Cert Application).

Application and Re-certification forms should be processed according to procedures described under **Enrollment Application Guidelines and Clinic Responsibilities** (Page 7 of this Handbook) which include retaining a copy for clinic records, and sending the original to the County's ASO, for processing.

Please note: clinic staffs do not determine eligibility timeframes. The eligibility will be determined by the ASO and reported monthly on the RW Patient Eligibility List referenced on Page 12 of this handbook.

Financial Documentation

Screening for referral to other publically funded programs requires documentation of income. Income should be reported on the Application as monthly income. An average monthly income may be provided if the income fluctuates between months. Such an average must be supported by the documents provided to demonstrate the applicant's income. It is preferred that a completed ADAP application be used to document the applicant's income. Other acceptable income documentations include:

- The most current Federal or State tax return including the W-2 or 1099
- Pay stub indicating a year-to-date amount (If enrolling prior to the last day of February, a December paystub from the prior year showing a year-to-date amount must also be provided.)
- Disability Award Letter
- Bank statement indicating SSDI, SSA, or VA benefits deposited

A copy of income documentation should be retained with the RWPC Application. Income documentation is not required to be submitted to the ASO .

If the individual does not have financial documentation when they apply for RWPC, the income section should be left blank and "$ PENDING" written on the top of the RWPC application. The patient will be granted **30 days** to provide the documentation. Once the income has been documented, write the income on the application, mark out the "$ PENDING", write "COMPLETE" on the top of the application, and either fax the form again to (858) 495-1329 or email to the ASO at Cielo_anderson@uhc.com (you must use secure email) as confirmation the patient has provided necessary documentation.

Eligibility and Enrollment in Ryan White Secondary Dental (RW-DO)

- RW-DO provides dental care to individuals who have medical coverage/insurance but do not have dental coverage/insurance or their dental plan does not cover a procedure available through RWPCP. Medi-Cal and private insurance enrolled individuals are eligible for RW-DO. RWPC is the last payer, so if a procedure is available through the primary provider, RWPC will not cover the procedure. LIHP enrolled individuals on the RW Eligibility List (RW-LA) are eligible for dental care through Ryan White and should not submit a RW-DO application. HIV positive individuals enrolled in LIHP should submit a RWPC application (Attachment A) and indicate they are enrolled in LIHP.
- During RW Year 23 (March 1, 2013 – February 28, 2014), RW-DO eligibility periods will be changed to coincide with the applicant's birth month. Please refer to the RWPC Eligibility List to verify eligibility prior to providing services.

To Enroll an Individual in Ryan White Secondary Dental (RW-DO)

If the applicant is new to RW-DO, if the applicant's eligibility is ending within six weeks, or if the applicant's eligibility has expired, the applicant must complete the Secondary Dental Enrollment Form. Please note: there is no re-certification form for Secondary Dental. Eligibility for Secondary Dental cannot last more than six months.

Referral to Medi-Cal and/or LIHP

Individuals are screened for referral to Medi-Cal or LIHP by completing the RWPC Application with reference to the LIHP Referral Criteria (Attached). Individuals referred to one of these programs must comply with the referral or will be denied future care until it is shown that they have a pending application.

Medi-Cal is California's Medicaid program, a public health insurance program which provides health care services for low-income individuals including families with children, seniors, persons with disabilities, foster care, pregnant women, and low income people with specific diseases such as tuberculosis, breast cancer, or HIV/AIDS. Eligibility and services available through Medi-Cal are available at http://www.dhcs.ca.gov/services/medi-cal/pages/default.aspx, http://www.medi-cal.ca.gov/, and http://www.sdcounty.ca.gov/hhsa/programs/ssp/medi-cal_program/index.html.

The Low Income Health Program (LIHP) is a medical assistance program servicing low income and indigent adult residents of San Diego County. LIHP provides medical care to qualified individuals. These services include provision of a medical home, inpatient and outpatient medical services, prescription medicines, home health care, emergency dental services, limited mental health services, and more. For additional approved services and related documents, refer to the County of San Diego LIHP website http://www.sdcounty.ca.gov/hhsa/programs/ssp/low_income_health_program/.

Use the RWPC Application along with the LIHP Referral Criteria to determine if a RWPC applicant should be referred to LIHP. The Federal Poverty Level is updated annually and is usually announced in late January or February. The effective date is determined by LIHP and is usually effective in March or April.

If the applicant meets all the criteria, refer the applicant to apply for LIHP by completing the Medi-Cal LIHP Referral (English or Spanish). Continue with the evaluation for Ryan White and notify the ASO by faxing the application RW1 and referral form RW2 to (858) 495-1329.

If the applicant does not meet the LIHP criteria, do not refer the applicant to LIHP and continue the evaluation for RWPC.

How does an applicant apply for Medi-Cal and/or LIHP?
Applicants can apply for LIHP three different ways:

1. Applying On-Line: Applicants can apply on-line at www.benefitscalwin.org.
2. At any Family Resource Center's (FRC).
3. Calling **211:** With the applicants consent, 211 will collect the necessary information and forward the application to the County for processing.

What is the enrollment grace period for patients referred to LIHP?
The grace period for patients who apply for LIHP is **60 days**. If in that time frame the patient applies, they will be granted RWPC until a determination is made on their LIHP application. This will be indicated on the RW Patient Eligibility List by the status RW LIHP Pending (RW-LP).

If the person has applied for RWPC and has been referred to LIHP and their LIHP application was approved, they will be listed on the RW Eligibility List as LIHP Approved (RW-LA). If the person has applied for RWPC and has been referred to LIHP and their application is denied for failure to complete the process, their RWPC eligibility will also be removed. These individuals may re-instate their RWPC by complying with the application process for LIHP. They will be listed on the eligibility list as RW-LF.

RW Eligibility Listing

The ASO will ensure the enrollment application is complete and will enter the patient's information into the enrollment database. The ASO will contact the clinic representative if the enrollment form is incomplete. Claims for services cannot be processed until enrollment has been entered.

At the beginning of **each month** **and** **mid-month**, the ASO will distribute via secure email an updated Eligibility List to RWPC clinics. The RW Eligibility List contains the names of each patient, the clinic enrollment site, their respective eligibility status, and start and end dates. The list will be sorted to show current eligibility periods and recent enrollment history. Clinics are required to verify eligibility for patients on the most recent list prior to billing for services. Remember the Eligibility List may have changes due to activity since last issued. If someone claims to have recently submitted a LIHP application, please verify the current status by checking the online system or calling any one of the phone numbers listed below:

- UHC Customer Service at (800) 587-8118
- (858) 495-1326
- (858) 495-1373

If your billing department does not already have the Eligibility List sent to them monthly via secure email, contact the ASO at (858) 495-1326.

Other Payer Verification

The ASO will compare RW patients against lists of Medi-Cal and Private Insurance providers to determine if any patients have another payer. The activity is to comply with funding source requirements to ensure RW is the payer of last resort. If it is determined the enrollee has other insurance coverage, the eligibility status will be changed to *D2 RW Denied - Other Payer* on the ASO's RW White Monthly Eligibility List. Claims submitted for these individuals will be denied, and should be submitted to the other payer. If the enrollee has been identified as having another payer source in error, the provider must submit an appeal to the ASO. For a detailed description of the Appeals Process refer to the following section.

Appeal Process

To appeal the other payer finding that a patient has Medi-Cal or another primary insurance, contact the ASO at 858-495-1326.

If the ASO still finds the patient has another payer source, an appeal should be filed following the same procedure outlined in the Claims Appeal Process (Page 27). The appeal should include supporting documentation showing the patient does not have another payer source. This documentation can include, but is not limited to, a print out from the insurance company's website showing the patient is no longer eligible and a letter of termination.

Patients without Social Security Numbers

When medical and pharmacy claims are processed, the Social Security Number (SSN) is used to identify the patient. Individuals without a social security number are assigned an identification number using the following method:

- 1st three digits = 999
- Remaining six digits = use the month, day and year (last 2 digits) of the patient's birth date
- Example - Patient has a birth date of July 2, 1956. The identification number would be 999-07-0256.

Types of Eligibility

The following eligibility codes are used in the monthly eligibility enrollment listing to indicate the enrollee's eligibility status.

Status	Description of Status	Bill to
RW	Ryan White Primary Care is Primary Payer	RW
RW-LR	Has been referred to LIHP; granted RWPC for 60 days	
RW-LF	Ryan White Approved, LIHP Failure to Complete Application Process	
RW-LP	An Application for LIHP has been received by LIHP; granted RWPC until LIHP application has been determined	
RW-LA	The LIHP application was approved; LIHP is primary payer, RW is secondary	LIHP
RW-LD	The LIHP application was denied; RWPC is only payer	RW
RW-FP	Documentation of annual income was not provided; granted RW for 30 days	
RW- MR	Has been referred to Medi-Cal; granted RWPC for 60 days pending proof Medi-Cal has received the application	
RW- MP	An Application for Medi-Cal has been received by Medi-Cal; granted RWPC until Medi-Cal application has been determined	
RW-MD	Medi-Cal application was denied; granted RWPC	
D1	RW Denied; Incomplete application	Other Payer/ Patient
D2	RW Denied; Other payer (i.e., private insurance or Medi-Cal)	
N-A	Medi-Cal eligible or approved	Medi-Cal
RW-DO	Secondary Dental; Has medical coverage but no dental coverage	RW
RW-EIP	EIP patient with limited access to some lab tests	
REJ	A submitted application has been rejected due to the applicant's failure to comply with eligibility determination requirements	None

Ryan White Covered Services

Medical Services

The Ryan White Primary Care Program (RWPCP) covers primary care, preventive health care, preventive, and emergency dental care, and pharmacy services related to the treatment of HIV disease.

Registered physicians, nurse practitioners, and physician assistants should provide all allowable services to RWPCP eligible patients in accordance with generally accepted community standards and practices. Providers shall utilize clinical guidelines and protocols determined by the HIV Health Services Planning Council's Standards of Care Committee.

Medical Services Covered by the RWPCP

- Invasive diagnostic services (covered only when done at the Primary Care Clinic)
- Primary care services
- Preventive dental care, extractions and fillings
- Nutritional counseling
- Treatment Adherence (TA) counseling
- Pharmaceuticals in the RW/CMS Drug Formulary

Medical Services Not Covered by the RWPCP

- Emergency Room services
- Inpatient Care
- Transportation (e.g., ambulance)
- Cat Scan
- Invasive Diagnostic Studies/tests*
- MRI and P.E.T. Scans
- Consult and/or care by Specialty physicians or dentists
- Home Health
- Hospice Care
- Infusion Center services

*Invasive diagnostic services are covered by the RWPC pool only when done at the primary care clinic by a registered primary care provider. Emergency room and inpatient services are not covered.

Supplemental Medical Services

Allowable supplemental services include non-invasive diagnostic studies, laboratory tests, and radiographs.

Excluded services include consults and treatment by non-Primary Care physicians, CT scans, MRI, invasive diagnostic tests, inpatient and outpatient hospital care, emergency room care, and transportation.

All procedures and services billed to the Ryan White Primary Care Program are subject to review. Payment will be denied if invoiced procedures or services are determined unnecessary or unrelated to the patient's HIV infection.

The procedures and services listed in Ryan White Excluded Procedure Codes (Attachment), whether billed with CPT or HCPCS codes, are never covered by the Ryan White Primary Care Program. Exceptions and special circumstances for payment are listed in RWPC Clinic Agreement Exhibit C: Ryan White Excluded Procedure Codes under the Exceptions column. HSHB may modify this list as appropriate.

Practice Guidelines

A comprehensive medical assessment of persons diagnosed with HIV positive infection is to be provided for any patient not previously treated for HIV infection regardless of the status of symptoms. The patient's medical record must reflect the completion of key assessment components as indicated by the Practice Guidelines.

Screenings and Referrals

Providers shall:

1. Follow the San Diego County Health and Human Services Agency Tuberculosis Screening Guidelines for HIV Infected Patients.
2. Provide an annual referral for preventive dental services for all patients enrolled in the Ryan White Primary Care. Providers shall refer all new patients to a network dental clinic for an oral evaluation and cleaning as part of the comprehensive visit.
3. Complete a Primary Care HIV Flow Sheet or electronic equivalent for each patient and retain as a part of the patient's medical record.
4. Assess sexual health risk and retain the assessment as a part of the patient's medical record. Clinics may utilize the Sexual Health Risk Assessment Form or their own equivalent process.

Partner Services

Providers shall discuss voluntary partner notification with each HIV positive client as part of routine service provision. Program staff may assist the client in voluntarily requesting assistance from the County Partner Services program in notifying partners of possible HIV exposure and available services.

LIHP Medical Services

The LIHP program provides medical services for Ryan White patients who qualify for LIHP, and therefore services will be paid through the LIHP program, not Ryan White. The Ryan White Primary Care Program is considered the **payer of last resort**.

LIHP offers additional health care services in contrast to the Ryan White Program. For a list of additional approved LIHP services refer to the LIHP Provider Handbook located on the County of San Diego LIHP website:
http://www.sdcounty.ca.gov/hhsa/programs/ssp/low_income_health_program/

HIV positive individuals who have been enrolled in LIHP will have access to Ryan White Primary Care (RWPC) for services not covered by LIHP.

Quality Control Processes

Complaint Process

Each clinic shall have written policies and procedures for a complaint process. The policy shall identify staff responsible, an appeal process, tracking system, follow-up procedures, and a timeline. Clinics shall use relevant Federal, State, and County regulations for investigating and resolving complaints. Providers shall provide information on the complaint process to clients upon request and must post the process prominently at each service location. Complaints and investigation results shall be forwarded to County Contract Administrator within 24 hours of both the receipt and resolution of the complaint.

Consumer Evaluation Form

Consumer Evaluation form must be posted in a prominent place. For non-AIDS specific providers, post the notice in a prominent confidential setting. Copies of the form shall be available for clients upon request and provide a means for the clients to mail the form, if the client needs assistance. Forms inadvertently collected by the agency shall be immediately forwarded to the address on the form.

Surveys

HIV Planning Council produces a service delivery and needs assessment survey. Clinics shall assist in implementing HIV related surveys that are developed by either the HIV Planning Council or County.

Ryan White Specialty Pools

The Community Clinics Health Network (CCHN) contracts with HSHB to administer the Ryan White Specialty Pools. The Ryan White Specialty Pools were developed to provide specialty care services to HIV-positive individuals who have no other source to cover expenses for specialty care services. In order to access Ryan White Specialty Pool services the patient must be enrolled in the RWPCP. The Specialty Pools address HIV related services **NOT** covered by the RWPCP and can be provided by an outside vendor.

Service is available from the following three (3) Pools:

1. **Medical Specialty Pool:** covers medically necessary, HIV-related, diagnostic, consultative, and therapeutic outpatient services.
2. **Dental Specialty Pool:** covers necessary dental specialty services.
3. **Home Health/Home Hospice Pool:** covers HIV-related home health care services, including end-of-life care.

The Medical Specialty Pool

The Medical Specialty Pool is intended to pay for medically necessary, HIV-related, diagnostic, consultative, therapeutic specialty outpatient services not included in the RWPCP Global Payment Basic Services List.

These services require authorization by completing and submitting the Ryan White Specialty Pools Authorization Request form (located in the Specialty Pools Handbook and faxing to the Specialty Pool Coordinator at (619) 718-9870.

- Determine the patient with specialty service need is eligible for RWPCP by checking the RWPC Eligibility List.
- Based on the type of Specialty care needed, select an appropriate specialist from the lists located in the Specialty Pools Handbook.
- Complete the appropriate Medical or Dental Specialty Pools Authorization Request form located in the Specialty Pools Handbook.
- Specialty Pool authorizations are valid for 90 days from date issued.
- Services must be provided within the timeframe the authorization is valid.

Authorizations and claims for Specialty Pool Services are processed by CCHN, not the RWPCP ASO. Please follow the submission process described in the Specialty Pool Handbook.

Ryan White Dental Services

Providers are required to annually refer patients for dental care. Patients can make appointments directly with a contracted dental clinic. For a list of contracting dental providers, refer to the list located on Page 6. For a listing of covered dental services refer to the RWPC Allowable Dental Services. Standard of care guidelines set forth by a working group from the Standards of Care Committee are available for reference Practice Guidelines.

Claims should be submitted electronically. If for any reason the claim cannot be submitted electronically, mail the claim to the address listed below:

Mail to:
UnitedHealthcare, ASO - RWPCP
P.O. Box 939016
San Diego, CA 92193

Secondary Dental Services

Clients with some form of health/dental coverage, other than Ryan White, may be eligible for the Secondary Dental Pool if they either do not have dental coverage or the needed service is excluded from the client dental plan. Only palliative care and pain management services are provided. Eligibility and invoicing for Ryan White Secondary Dental Services is processed and administered by the ASO.

Patients enrolled in Secondary Dental Services may receive services at any Primary Care Dental clinic funded by Ryan White.

Dental service providers must complete the Ryan White Secondary Dental Services Enrollment Form for each patient who appears eligible for secondary dental services. All questions must be answered and supporting documentation, when required, should be maintained with the form.

Claims should be submitted electronically. If for any reason the claim cannot be submitted electronically, mail the claim to the address listed below:

Mail to:
UnitedHealthcare, ASO - RWPCP
P.O. Box 939016
San Diego, CA 92193

LIHP Dental Services

The LIHP program provides limited dental services (palliative care only) for HIV Ryan White patients who qualify for LIHP and therefore covered services must be charged to the LIHP, not Ryan White. The Ryan White Dental Program is considered the **payer of last resort**.

HIV positive individuals who have been enrolled in LIHP will have access to the RWPC for services not paid through LIHP. This includes covered dental services. All dental services provided to LIHP clients must be charged to LIHP. The ASO will pay through LIHP if the service is payable through LIHP. If the service is not payable through LIHP, the ASO will pay through RWPC if the service is allowed through RWPC. If the service is not available through LIHP or RWPC, the claim will be denied.

Nutritional Services

Medical Nutritional Therapy (MNT)

All RWPCP patients are eligible to receive medical nutrition therapy, either as an individual or in a group session. Counseling will be provided by Registered Dieticians (RD) employed by a contracting community clinic.

Supplements

Patients may receive nutritional supplements designated by the Standards of Care Committee when ordered by the primary care practitioner or a Registered Dietician employed by the clinic.

- All nutritional supplements are included in the RW/CMS Drug Formulary
- Maximum supply – 90 units per month; maximum refills – 2

Prior-authorization is required to extend the time period the patient may have nutritional supplements. Patients must be screened for and/or referred to Medi-Cal to qualify for the limit override. A RWPCP Nutritional Supplement Prior Authorization form must be completed.

Claims Submission for Nutritional Therapy

Claims must be submitted electronically or on an approved claim form using the appropriate codes and numbers listed below. For instructions on submitting claims electronically, contact the RW Program Manager at (858) 495-1373.

- CPT code 97802 Initial individual assessment, for each 15 minutes.
- CPT code 97803 Individual re-assessment, intervention or follow-up for each 15 minutes
- CPT code 97804 Group education/intervention (2 or more patients), for each 30 minutes
- Dietician accredited registration number
- NPI (National Provider Identifier number) of Registered Dietician

Treatment Adherence (TA) Counseling

Each contracted clinic may offer counseling for treatment education and adherence to enrolled Ryan White primary care patients. If the clinic has another payer source, such as RW Part C funds used to support treatment adherence services, the service cannot be charged to the Primary Care Pool. Treatment Adherence Counselors are required to register with UnitedHealthcare (ASO) by completing and submitting the Treatment Adherence Counselor Certification Verification Registration form prior to providing counselor services to patients. Reimbursement will be made to clinics only for treatment adherence services provided by registered counselors who meet the criteria outlined below:

- Employed by a RWPCP contracting clinic
- Completion of an accredited Treatment Adherence Program or;
- Waiver certification from HSHB
- The Primary Care Clinic shall designate treatment educators. Treatment educators may include, but are not limited to medical assistants, RNs, LVNs, health educators, pharmacists, or case managers.
- Clinics will be reimbursed for each one-half hour of counseling by a certified counselor. A maximum of 2 units (one hour) may be billed per session a maximum of eight sessions per client per funding year (March through February).

Claims Submission for TA Counseling

- Claims must be submitted electronically using the following billing methods listed below. For instructions on submitting claims electronically, please contact the Ryan White Program Manager at (858) 495-1373.
- HCPCS code S9445
- NPI (National Provider Identifier) number of Treatment Adherence Counselor

Mail to:
UnitedHealthcare, ASO - RWPCP Claims
P.O. Box 939016
San Diego, CA 92193

Treatment Adherence Counselors are required to register with the ASO prior to providing counselor services to RW patients.

Pharmacy Services

The RW/CMS Drug Formulary does not have drugs specific for treating HIV infection. Ryan White is the payer of last resort, so LIHP will pay for anti-HIV drugs for individuals enrolled in both RWPC and LIHP (indicated by RW-LA on the RWPC Eligibility List) as posted on ADAP website.

Frequently Asked Questions (FAQ)

This collection of frequently asked questions (FAQ) provides brief answers to many common questions with reference to the Pharmacy Services.

When does the provider use the LIHP formulary vs. the CMS/RW formulary?
The provider would choose the formulary corresponding to the individual's active enrollment.

When is prior authorization required for medications?
Prior authorization is required for medications not listed in the appropriate Drug Formulary (RW/CMS or LIHP/ADAP).

How is prior authorization for prescriptions obtained?
Complete the "Drug Prior Authorization" form found at the end of the RW/CMS or LIHP Formulary and fax to Catamaran® at (866) 511-2202. Additionally, you may contact Catamaran® Customer Service by phone at (800) 626-0072 which is available 24 hours a day, every day, to assist with any formulary questions. Medical justification for using a non-formulary medication is ALWAYS required.

Is it mandatory to submit medical justification for Non-Formulary Medications?
Every provider has the right to request coverage of a non-formulary medication. However, medical justification for using a non-formulary medication is ALWAYS required.

Prior authorization may be requested 2 ways:

1. **Fax the Drug Prior Authorization form to Catamaran® at (866) 511-2202.**

2. **Call Catamaran® Customer Service Prior Authorization at (800) 626-0072 available 24 hours a day.**

Claims

Medical services are paid to a Primary Care Clinic at a negotiated global rate. The procedure codes included in this rate are listed in the RWPCP Global Services Basic Services List. For a listing of excluded procedure codes refer to RWPCP Medical Care Excluded Procedures Codes.

Claims Procedure

In order for claims to be processed for payment, all claims must follow standard billing practices and include the following information:

- Patient name
- Patient address
- Patient Social Security Number
- Patient date of birth
- Date(s) of service
- Current E&M, CPT, HCPCS and/or ADA codes
- All documentation and addendum required by Medi-Cal (e.g., full itemization of unlisted drugs and supplies)
- ICD-9 code(s) – primary and secondary diagnosis
- Practitioner's name and specific NPI number (includes medical providers, nutritionists, and TA counselors)
- Provider's tax identification number
- Full itemization of charges
- Submit medical claims with E&M and CPT codes on CMS-1500 billing form or submit electronically.
- Group CMS-1500 claims separately from County Medical Services (CMS) claims.
- Primary Care Clinics are required to submit claims electronically. If assistance is needed, please contact the Ryan White Program Manager at (858) 495-1373.

All claims must be received by the ASO no later than 30 days after the close of the funding year!

If a claim cannot be submitted electronically, you may mail your claim to:

UnitedHealthcare, ASO – RWPCP Claims
P.O. Box 939016
San Diego, CA 92193

Keep in Mind:

To avoid denials or delays in claims processing, please do not submit RWPCP claims with CMS or LIHP claims.

Supplemental Medical Services

A copy of the outside vendor's invoice is required when claiming payment for medical services ordered by the Primary Care Practitioner and provided by another vendor. Clinics will be reimbursed for approved services at Medi-Cal rates.

Medi-Cal Conversion

In the event that a RWPC patient becomes eligible for Medi-Cal during a Program Year, the clinic may bill Medi-Cal for all medical services provided after the Medi-Cal effective date and will reimburse the RWPCP the actual amount paid for services during that time-frame. If the ASO does not receive repayment within thirty (30) days of notification of Medi-Cal eligibility, future payments to the clinic may be adjusted.

Appeal Process

To appeal a denied claim, resubmit the claim with a detailed explanation and justification for payment within thirty (30) days of the date of the denial notification. Under no circumstances shall processed claims be appealed more than forty-five (45) days after the end of the federal funding cycle.

Mail payment appeals to:
UnitedHealthcare, ASO - RWPCP Appeals
Attention: Claims Department
P.O. Box 939016
San Diego, CA 92193

Claims for patients approved for LIHP

Claims for patients identified as eligible for LIHP, RW-LA on the eligibility listing, should be submitted to the LIHP program since they are the primary payer.

Mail LIHP service claims to:
UnitedHealthcare, ASO – LIHP Claims
P.O. Box 23667
San Diego, CA 92193

Useful Phone Numbers

Ryan White Eligibility Verification
(800) 587-8118
(858) 495-1326
(858) 495-1373
(858) 495-1351

General Claims Questions
(858) 495-1333

Claims Issues
Claims Supervisor
(858) 495-1351

Claims Operations Manager
(858) 495-1326

Program Information
(858) 495-1373
(619) 293-4712