Arkansas Health Care Independence Program

HP - Fiscal Agent for the
Arkansas Division of Medical Services
Agenda

- What is Arkansas Health Care Independence Program?
- Enrolling in the Arkansas Health Care Independence Program
- Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee
- How the Arkansas Health Care Independence Program affects Medicaid Billing
- Contacts
What is the Arkansas Health Care Independence Program?
What is the Arkansas Health Care Independence Program?

Arkansas has chosen to expand coverage using the Arkansas Health Care Independence Program.

The Arkansas Health Care Independence Program covers people at or below 138% of the federal poverty level ($15,856 for an individual, $32,499 for a family of four), utilizing Title XIX funding to purchase Qualified Health Plans (QHPs). The Arkansas Health Care Independence Program will expand insurance coverage to an estimated 250,000 low income Arkansas residents.

The private health plans will provide coverage that meet Medicaid standards with no deductibles.
What is Arkansas Health Care Independence Program?

Who is eligible for the Arkansas Health Care Independence Program?

- Adults who earn up to 138% of the Federal Poverty Level (FPL) and are not:
  - Currently on traditional Medicaid
  - Currently on Medicare
  - Disabled
  - Pregnant at the time of application

Who funds the program?

- The program is 100% federally funded for the first three years
- The Health Care Independence program allows Arkansans to enroll in private health plans that are available on the federal Marketplace.
Enrolling in the Arkansas Health Care Independence Program
Enrolling in the Arkansas Health Care Independence Program

1. Individuals apply for coverage through state or federal health care portals.

2. If individuals are determined eligible for the program they may proceed to register at insureark.org.

3. Upon registering at insureark.org, all recipients will be required to complete the Health Needs Questionnaire.

4. Based on the responses to the Health Care Needs Questionnaire, individuals may be determined medically frail and would be better served under traditional Medicaid. If determined not medically frail they will be directed to select a QHP.

5. Beneficiaries enrolled in traditional Medicaid will receive Medicaid ID cards. Beneficiaries enrolled in a QHP receive ID cards from the commercial carriers.
Enrolling in the Arkansas Health Care Independence Program

Individuals wanting to enroll should access one of the following websites and complete the eligibility process.

- [http://www.access.arkansas.gov](http://www.access.arkansas.gov)
- [https://www.healthcare.gov](https://www.healthcare.gov)

Additional information can be found at the following address.

- [http://www.arhealthconnector.org](http://www.arhealthconnector.org)
Enrolling in the Arkansas Health Care Independence Program

Once individuals have been determined eligible for coverage under the Arkansas Health Care Independence Program, they should access the HP Qualified Health Plan (QHP) portal at https://www.insureark.org.

Individuals are required to complete the Health Care Needs Questionnaire.

Based on the Health Care Needs Questionnaire, individuals are either enrolled in traditional Medicaid or they are given the option to select a QHP.

• In the event that individuals are determined eligible for a QHP but do not select a QHP, they will be auto assigned to a QHP plan according to their region.
• Auto assigned beneficiaries have 30 days to switch plans if they choose.
Pop Quiz

If a beneficiary is auto assigned to one of the QHP plans, how long do they have to switch plans before they are locked into that plan?
Enrolling in the Arkansas Health Care Independence Program

Letters Arkansas Health Care Independence Program enrollees receive

1. **Plan selection without a co-payment** – Informs beneficiaries they have chosen a QHP through the Arkansas Health Care Independence Program. (Beneficiaries will have no copays for health services.)

2. **Plan selection with a co-payment** – Informs beneficiaries they have chosen a QHP through the Arkansas Health Care Independence Program. (Beneficiaries will have copays for some health services.)

3. **Auto assignment without co-payments** – Informs beneficiaries they have been assigned a QHP through the Arkansas Health Care Independence Program. (Beneficiaries will have no copays for health services and they have 30 days to change plans if they want a different plan.)

4. **Auto assignment with co-payments** – Informs beneficiaries they have been assigned a QHP through the Arkansas Health Care Independence Program. (Beneficiaries will have some copays for health services and they have 30 days to change plans if they want a different plan.)
Enrolling in the Arkansas Health Care Independence Program

Letters Arkansas Health Care Independence Program enrollees receive

5. **Region change** – Informs beneficiaries they may be eligible for a new plan after moving to a new region. (If no new plan is selected, they keep their current plan.)

6. **Eligibility changed due to age or income** – Informs beneficiaries their eligibility has changed and they no longer qualify for coverage through the Arkansas Health Care Independence Program.

7. **Choice Counseling Notice**— Informs beneficiaries they have been signed up for traditional Medicaid and can choose between the Arkansas state plan or the Alternative Benefit Plan that is the fee for service equivalent of the QHP offering.
Enrolling in the Arkansas Health Care Independence Program

Qualified Health Plan (QHP) Portal
https://www.insureark.org

Technical Issues with QHP Portal
Arkansas Health Care Independence Program Call Center
1-855-550-3974
Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee
Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee

Beneficiaries who qualify for the Arkansas Health Care Independence Program are placed in aid category 06 and are referred to as the newly eligible population.

Providers can determine whether the beneficiary is an Arkansas Health Care Independence Program enrollee by checking eligibility on the Arkansas Medicaid website.

Any beneficiary with plan description 06 is Newly Eligible.

- Approximately 10% will be enrolled in traditional Medicaid.
- Approximately 90% will be enrolled in a Qualified Health Plan.
Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee

The approximate 10% enrolled in traditional Medicaid will receive Medicaid cards and have regular Medicaid benefits.

The approximate 90% enrolled through one of the QHPs (BCBS, Ambetter of Arkansas and QualChoice) will not receive Medicaid cards but will receive a notice indicating their Medicaid number and describing the following supplemental benefits.

- Traditional Medicaid benefits provided during the transition time from eligibility determination until QHP coverage starts
- Non-emergency medical transportation and EPSDT for individuals between 19 and 20 (to the extent the service is not otherwise included in the QHP benefit)
What is one of the services an Arkansas Health Care Independence Program enrollee receives after they transition to their QHP?
Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee

Newly Eligible
Enrolled in
Traditional Medicaid

Subscriber Eligibility/Service Information

<table>
<thead>
<tr>
<th>Eligibility or Benefit Information</th>
<th>1 (Active Coverage)</th>
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</thead>
<tbody>
<tr>
<td>Coverage Level Code</td>
<td>IND (Individual)</td>
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<tr>
<td>Service Type Code</td>
<td>30 (Health Benefit Plan Coverage)</td>
</tr>
<tr>
<td>Insurance Type Code</td>
<td>MC (Medicaid)</td>
</tr>
<tr>
<td>Plan Coverage Description</td>
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<td>Date Time Period</td>
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<tr>
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<td>Service Coverage Indicator</td>
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## Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee

QHP enrollee

"In Transition"

- **BCBS**
- **Ambetter**
- **QualChoice**

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### Determining If a Beneficiary Is an Arkansas Health Care Independence Program enrollee

QHP enrollee with active QHP Coverage
- **BCBS**
- **Ambetter**
- **QualChoice**

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- Service Coverage Indicator: N
- Service Copay: $0.00
- Service Coinsurance: 000

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- Service Coverage Indicator: N
- Service Copay: $0.00
- Service Coinsurance: 000
How the Arkansas Health Care Independence Program affects Medicaid Billing
How the Arkansas Health Care Independence Program affects Medicaid Billing

All services will be provided through QHPs, except for two services that are not fully covered under the QHP benefit package. Specifically, the State will provide a fee-for-service supplemental benefit for:

- Non-emergency medical transportation
- Early Periodic Screening Diagnosis and Treatment for individuals 19 and 20 (to the extent the service is not otherwise included in the QHP benefit)

Beneficiaries age 19 and 20 receive coverage for Vision and Dental services.
How the Arkansas Health Care Independence Program affects Medicaid Billing

The newly eligible population placed on traditional Medicaid will receive Medicaid cards and all of their claims will be billed to Arkansas Medicaid.

No PCP is required for beneficiaries in aid category 06 for 2014. PCPs will be required for 2015 but the start date has not been determined.

For beneficiaries enrolled in a QHP:

- All claims are billed to Arkansas Medicaid during the transition period.
- Once the QHP coverage starts, all claims should be billed to the commercial carrier with the exception of the supplemental services.
Contacts
Contacts

Claims and Billing Questions
HP Provider Assistance Center
1-800-457-4454 or 501-376-2211

Medicaid Eligibility Questions
Division of County Operations
1-855-372-1084

Arkansas Health Care Independence Program Coverage Questions
AFMC Beneficiary Relations
888-987-1200
Contacts

Ambetter of Arkansas
877-617-0390
http://www.ambetterofarkansas.com

QualChoice
800-235-7111
https://www.qualchoice.com

Arkansas Blue Cross Blue Shield
1-800-238-8379
http://www.arkansasbluecross.com

Blue Cross Blue Shield multi-State
1-888-630-BLUE(2583)
http://www.bcbs.com
Questions?
Thank you