

# DHS Part B

# Part B Funding Sources

- Part B Base
- Part B Supplemental
- ADAP
- Minority AIDS Initiative (MAI)
- Rebate
- State Allocation

# Part B Base

- Formula funding awarded by HRSA based on number of cases in Minnesota
- Available for HRSA defined Core Medical and Support Services
- Follows same rules as Part A in terms of how funding can be spent except covers state
- Current year award \$1,974,107 (estimated based on flat funding-only partial award received so far)

# Part B Supplemental

- Annual competitive grant with the amount available varying from year to year
- If awarded grant begins September 30 and must be spent within the year – funds can't be carried over.
- Funds must be used for HRSA Core Medical or Support Services or ADAP with same spending requirements

# ADAP

- Formula award based on number of people living with HIV in the state
- Provides FDA-approved medications to low-income people living with HIV who have limited or no health coverage from private insurance, Medicaid, or Medicare. ADAP funds may also be used to purchase health insurance for eligible clients and for services that enhance access to, adherence to, and monitoring of drug treatments.
- Minnesota's ADAP formulary mirrors the state medical assistance formulary
- \$5,976,071 (estimated based on flat funding-only partial award so far)

# Minority AIDS Initiative

- Part B MAI can be awarded for 'grants used for supplemental support education and outreach services to increase the number of eligible racial and ethnic minorities who have access to treatment through AIDS Drugs Assistance Programs' (ADAP)
- Formula based funding based on the number of reported living minority HIV/AIDS cases for the most recent calendar year
- Funds may only be used for ADAP outreach and education about HIV Medications only. (different than Part A)
- Annual Award is \$61,463 (estimate based on flat funding)

# Rebate

- All states ADAP programs are allowed to receive rebates from purchased drugs through the 340B program
- Rebate funds must first be used for ADAP activities
- When not needed for ADAP activities can be used for Core Medical and Support Services
- 2015 developed a plan approved by community for use of these funds over a 5 year period.
- FY2018 allocated \$2.4 m in rebate funds for Ryan White allowed services, MDH, Housing Services, expanding ADAP formulary and increasing income eligibility from 300% to 400% FPL

# State Allocation

- Annual allocation from state general fund
- Pays for medical case management and purchase of insurance
- Total allocation is \$2,219,847:
  - \$1,063,678 insurance
  - \$1,156,169 medical case management