



Health Insurance Premium & Cost Sharing Assistance

2012 Service Area Review Summary

HRSA Core Medical Service

Essential Service—Continuum of Care

Comprehensive Plan—YES

Health Insurance Premium & Cost Sharing Assistance includes the two service activities:

A. Health Insurance Premium Assistance - the provision of financial assistance for eligible individuals living with HIV to maintain a continuity of health insurance or to receive medical benefits under a health insurance program. This includes premium payments, risk pools, co-payments, and deductibles.

B. Cost Sharing Assistance - assistance with payment of cost share premiums for recipients enrolled in the HIV Insurance Program and/or ADAP.

Health Insurance Premium Assistance is provided through Program HH at the Department of Human Services and is available to any eligible person living in the State or TGA. In addition, there is 1 contract with a metro provider and 1 contract with a Greater MN provider to serve 210 and 52 clients respectively. Cost Sharing Assistance is NOT currently funded.

DATA SUMMARY HIGHLIGHTS

For the first time in recent years, Part A funds were allocated to Insurance Premium Assistance in 2010. This was done in part to offset any barriers/gaps created by the recent unallotment of State dollars which will have a yet unforeseen impact on low-income residents and how they are insured.

While Part A and Part B funds have not been allocated frequently or in large amounts to this service area, the State of Minnesota contributes \$1,150,000 per year to purchase insurance. In addition, rebate dollars also are used to purchase insurance. ADAP may also be used to purchase insurance and those allocations and utilization data are included on the ADAP Service Area Review Summary.

The cost share instituted by Program HH in years past is currently suspended. As a result, there is no need for an allocation of resources during the suspension for Cost Sharing Assistance.

The current DHS ADAP forecast indicates that the ADAP program should remain solvent and have no need for cost containment measures through FY2015.

In the 2010 Comprehensive Needs Assessment of Minnesotans Living with HIV Disease, 47% of the 516 respondents indicated that they had received assistance with health insurance premiums within the past 12 months. Some of the respondents may have accessed this assistance through emergency financial assistance services, a support service that also receives a funding allocation from the Planning Council. Of those who had not received assistance with health insurance premiums in the past 12 months, 38 people (13%) indicated they needed the service. The barriers or reasons listed by those 38 individuals who needed but were unable to access the service during the past year included did not qualify (8), unaware of service/how to apply (6), no funding available (4), no insurance/underinsured (3), not selected in lottery (2), difficult enrollment process (2), incarcerated, and county worker problematic.

Of the 2012 allocation for Emergency Financial Assistance, a small portion was budgeted for emergency medical assistance (\$13,1000) and health insurance premium assistance (\$13,637).

CURRENT RANKINGS

COUNCIL (2010)	CONSUMERS (2010)
3 out of 26 service areas	4 out of 25 service areas

ALLOCATIONS HISTORY

FY	ALLOCATION	% CHANGE	SPENT	% UTILIZED
2011	\$15,000	(50%)		
2010	\$30,000	NA	\$9,246	58%
2009	\$0	NA	\$0	NA

UTILIZATION HISTORY

FY	# Accessing Service Area or Activity	% of All HIV/AIDS Cases	% of Unduplicated RW Clients
2010	50	<1% (n=6,814)	1% (n=4,131)
2009	741	11% (n=6,552)	20% (n=3,700)
2008	781	13% (n=6,221)	17% (n=4,713)

ASSESSMENT OF NEED

2010 COMPREHENSIVE NEEDS ASSESSMENT (SELF ASSESSMENT BY CLIENTS n=516)		
Accessed Service in last 12 Months - n=226 - 47%	Did NOT Access Service in last 12 months - n=290 or 53%	
	Did not Need service n=252	Needed service, but unable to access n=38
	87%	13%



Service Area Review Summary—Legend

The HRSA definition for the service area/activity is listed in this box. The Planning and Priorities Committee reviews and revises these definitions every two years to reflect the HRSA definition and the current local practice.

This box indicates whether the service area is a **core medical** or **support** service on HRSA list of allowable services

HRSA Support Service

Essential Care Service—
Continuum of Care

Comprehensive Plan—
YES

This box indicates the number of metro and Greater MN contracts for FY 2011 and the number of clients to be served by those contracts. The number of contract reflects the funding source (Part A, Part B or both and not the number of agencies providing this service.

This box indicates the type of service as described in the Continuum of Prevention and Care Services.

This box indicates whether or not the service area is a part of a goal or activity within the current Strategic Plan.

DATA SUMMARY HIGHLIGHTS

Data Summary Highlights are drafted by the Needs Assessment & Evaluation Committee and are derived from various reports including the 2010 Comprehensive Needs Assessment of Minnesotans Living with HIV Disease, the Path to Care Study, the Study of Oral and Behavioral Health Services, the 2006 Brief Assessment of Client Need, the 2010 Minnesota Dept. of Health HIV Surveillance Report, Utilization Data, and other reports.

Data in this table is from the Planning Council Allocations tables.

Data in this table is from the Client Level Data Reporting System maintained by the Minnesota Department of

Data in this table is from the 2010 Comprehensive Needs Assessment of Minnesotans Living with HIV Disease. The number of respondents varies based on the question.

CURRENT RANKINGS

COUNCIL (2010)	CONSUMERS (2010)
Ranking from 2010 Prioritization	Ranking from 2010 Needs Assessment

ALLOCATIONS HISTORY

FY	ALLOCATION	% CHANGE	SPENT	% UTILIZED
2011				
2012				
2009				

UTILIZATION HISTORY

FY	# Accessing Service Area or Activity	% of All HIV/AIDS Cases	% of Unduplicated RW Clients
2010			
2009			
2008			

ASSESSMENT OF NEED

2010 COMPREHENSIVE NEEDS ASSESSMENT (SELF ASSESSMENT BY CLIENTS n=)		
Accessed Service in last 12 months - n=XXX - XX%	Did NOT Access Service in last 12 months - n=XXX or XX%	
	Did not Need service n=XXX	Needed service, but unable to access n=XX
	XX%	XX%