The following is a summary of the Quarterly VA Medication Assistance Program (VA MAP) call. During the call we discussed VA MAP enrollment, Medicaid confirmed clients, transitions, documentation, and adjustments due to Covid-19. There was representation from across the commonwealth.

A. VA MAP Enrollment numbers as of 4/20/2020
   - Direct MAP (Direct medication access) - 2598
   - MPAP (Medicare clients) - 859
   - ICAP (Employer based coverage) - 991
   - HIMAP (ACA based coverage) - 1950

B. Disenrollment as of 4/20/2020, of confirmed Medicaid clients who have picked up medication
   - 2159 disenrollments. VA MAP confirmed enrollment & medication access through DMAS data exchange.
   - Please continue helping eligible clients and applicants apply for Medicaid.
   - We have seen an increase in recertifications. Please do not send recertifications for clients who are eligible for Medicaid or have Medicaid.

C. Transitions to Direct MAP
   - 379 clients transitioned from HIMAP to Direct MAP this week due to clients with 2019 ACA plans not submitting 2020 ACA plan information to VA MAP.
   - LHD/pick-up sites were provided a list of clients that may pick up medications from their site.
   - Client lists were provided to providers based on the provider site listed in the VA MAP database.
   - If a client has any other type of health insurance please send a copy of the insurance cards (front and back) to VA MAP to ensure placement in the correct medication access program.

D. MPAP insurance documents
   - 290 clients have not responded to outreach efforts to obtain confirmation of their 2020 insurance information.
VA MAP and Benalytics staff will be contacting providers/case managers for information.

- Additional letter will be sent to these clients.
- Although the initial deadline for submission of the 2020 insurance information has passed, VA MAP has not suspended Ramsell access.

E. Adjustments due to the COVID-19 emergency

- **Staffing:** To ensure safety of staff and prevent disruption in care, VA MAP staff are both teleworking & coming into the office.
- **Medication Access Hotline:** Hotline is being responded to by remote staff; voicemail is checked constantly throughout the day. Please leave only one message. Most calls are returned the same day, but please allow 24 hours for your call to be returned.
- **SFTP folders**
  - SFTP can still be setup – send request to Tina Gorman – refer to recent communications for detailed instructions.
  - Do not fax the same applications or other documents if you have submitted them through the SFTP folders – causes duplication of work effort & possible delays.
  - SFTP folders can be used for emergency issues, but contact a supervisor to ensure the emergency is expedited.
  - Please do not submit documents as individual files. Scan all documents together and send as one upload per client.
  - Please complete all sections on applications, especially demographics.
  - Updated Word templates of all VA MAP documents will be posted to the VA MAP website.

F. Coronavirus Aid, Relief, and Economic Security (CARES) Act

The Division of Disease Prevention, Health Care Services has been awarded $508,526 as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act for some Ryan White services including VA MAP (formerly ADAP) to be used for preventing, preparing for or responding to COVID-19. Allowable uses include: purchasing PPE for staff and/or clients, grocery store gift cards, hygiene items, funding for additional hours, etc. Please email Jenny Calhoun (jenny.calhoun@vdh.virginia.gov) or Lashi Carroll-Jones (lashi.carroll-jones@vdh.virginia.gov) by 10:00 AM Tuesday, April 28th with possible needs for your RW staff and clients.

G. Virginia RWHAP B services for eligible clients who have lost or have higher costs for employer insurance due to COVID-19 (see below)
**VIRGINIA RWHAP B SERVICES FOR ELIGIBLE CLIENTS WHO HAVE LOST OR HAVE HIGHER COSTS FOR EMPLOYER-INSURANCE DUE TO COVID-19**

Note: Considerations for all scenarios below: DMAS application processing/approval still within 45-day period, but it encourages use of on-line applications due to high volume calls at call enter for phone applications. The Federal Marketplace has not re-opened. According to U.S. Department of Labor (DOL), employees have 60 days to make a Consolidated Omnibus Budget Reconciliation Act (COBRA) election after losing employer-based coverage. To qualify for special enrollment in a Marketplace plan, clients must select a plan within 60 days before or 60 days after losing job-based coverage. Eligibility for COBRA continuation coverage will not limit client’s eligibility for Marketplace coverage or for a tax credit. **ACA coverage does not start the day person is enrolled and it may take anywhere from 17-45 days for coverage to begin, if there are no issues with the Marketplace application.** These options maintain health insurance coverage for clients.

<table>
<thead>
<tr>
<th>Insurance Circumstance</th>
<th>RWHAP B option</th>
<th>Benalytics Assist</th>
<th>Supportive documentation to VDH or RWHAP B provider</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduced hours, still have coverage through employer increased premium cost to employee and not eligible for Medicaid</td>
<td>Pay for other eligible RW services so employee can pay for increased premium, which is through paycheck deduction</td>
<td>NO</td>
<td>Paycheck stubs pre and post COVID 19 impact to compare for increased premium costs. Clients must provide to case manager or representative at RWHAP provider agency helping client.</td>
<td>This maintains health insurance coverage and medication access. Utilities, rent, food, cost shares for medications or medical visit copays through HIPCSA as ongoing services as there are no current limits/caps on these services as long as they are not EFA categories. VDH can also extend duration for EFA during COVID-19 if needed to remove caps/restrictions.</td>
</tr>
</tbody>
</table>
| Lost job, has COBRA election option and 100% responsible for premium option, **AND** eligible for Medicaid | VA MAP | YES.  
If get bill where payment goes to insurance carrier, Benalytics can pay as 3rd party. Also, help enroll in Medicaid. | Monthly COBRA billing statement. | Pay for services for 60 days while **client applies for Medicaid.** Once enrolled in Medicaid, only pay for services not covered by Medicaid. We pay premiums and copays so we can rebate for as long as we pay both. |
| Lost job, responsible for 100% premium through COBRA election within 60 days and NOT eligible for Medicaid | VA MAP | YES  
If get bill where payment goes to insurance carrier, Benalytics can pay as 3rd party; enroll in ACA plan through SEP. | Monthly COBRA billing statement from carrier | Benalytics will pay for COBRA and then pay ACA plan when it begins (COBRA plan should be canceled). Employee has 60 days per US DOL for COBRA election; confirm that 3rd party can pay to carrier. |