

**Nebraska Ryan White Part B Program
Policy
AIDS Drug Assistance Program and Medicare Part D
Revised 05/2013**

Federal Policy Reference: Section 2617 (b) (6) (F) of the Ryan White CARE Act

The Nebraska Ryan White Program has waived all requirements for subgrant entities regarding imposition of charges for services, pursuant to Section 2617(c)(4)(A) of the Ryan White Modernization Act of 2006.

The HRSA/HAB Fiscal and Program Monitoring Standards for Ryan White B Grantees (Monitoring Standards) will guide the oversight of the ADAP by the NDHHS. The Monitoring Standards are attached to this document by reference. Annual fiscal and programmatic monitoring is required by regulation, both internally to the ADAP and by the NDHHS. <https://careacttarget.org/category/topics/program-monitoring>

Purpose: The purpose of this policy is to outline and define actions to be taken by the Nebraska Ryan White Part B AIDS Drug Assistance Program (ADAP) in response to federal policies regarding collaboration with Medicare Part D and the requirement that all Medicare Part D eligible clients who are enrolled in ADAP be enrolled in Medicare Part D.

States are required to “ensure that grant funds are not utilized to make payments for any item or service to the extent that payment has been made, or can reasonably be expected to be made, with respect to that item or service (i) under any State compensation program, under an insurance policy, or under any Federal or State health benefits program.” (From federal policy cited above.)

Since Medicare is a Federal health benefits and entitlement program, the CARE Act payer-of-last-resort requirement applies. Grantees must require Medicare-eligible ADAP clients to enroll in the prescription benefit. The following is Nebraska’s Ryan White Part B Policy regarding the AIDS Drug Assistance Program and Medicare Part D.

Oversight: The ADAP will be coordinated by the Clinic Manager and ADAP Coordinator. The Drug Utilization Review (DUR) Committee has responsibility to advise the ADAP on issues such as drug formulary, waiting list implementation and maintenance, monthly drug expenditures, budgets, and related issues.

Nebraska Ryan White Part B funds may be utilized for the payment of Medicare Part D Insurance Premiums, co-pays for approved formulary drugs and deductibles for ADAP enrolled clients who are eligible for Medicare Part D in accordance with the following requirements:

- 1) Clients must meet program eligibility requirements in accordance with the Ryan White Part B “Client Eligibility.”
- 2) Clients enrolled in Nebraska ADAP **and** eligible for Medicare Part D are required to participate in Part D.
- 3) Clients enrolled in Nebraska ADAP **and** eligible for Medicare Part D are also required to apply for the Low Income Subsidy (LIS) Program through the Social Security Administration to determine if they qualify for reduced premiums, deductibles and/or co-pays. New clients enrolled in Medicare Part D will enroll in the appropriate plan based on their LIS eligibility.
- 4) ADAP clients who are eligible or become eligible for Medicare Part D and chose **not** to enroll in a plan, will no longer be eligible for ADAP after thirty days.
- 5) ADAP and/or Nebraska Ryan White Part B Program will be responsible for paying monthly premiums, deductibles (where applicable) and co-pays for **approved formulary drugs** for clients enrolled in ADAP, and enrolled in the Medicare Part D plan(s).
- 6) Nebraska Ryan White Part B Program reserves the right to amend this policy at any time as necessary.
- 7) In no case may CARE Act funds be used to make direct payments of cash to recipients of ADAP assistance.

The AIDS Drug Assistance Program is not an entitlement program. Participation in the ADAP by consumers is voluntary. The program is dependent on the provision of federal funding to remain in existence.