Memo

To: Melanie Brown-Woofter, AHCA
From: Jesse Fry on behalf of Florida HIV/AIDS Advocacy Network (FHAAN) members
Re: Advance question for Q&A from FHAAN members, for August 6th 2:00 P.M.

Dear Melanie,

I want to make sure we preserve the original intent of asking you to be a guest speaker, that being: Member education in advent of the statewide managed care roll-out.

We need to learn about what plan choices Medicaid patients living with HIV/AIDS will have, so we can get the word out to patients and fellow treatment advocates.

With the timing of the Supreme Court decision on PPACA and the ensuing madness in the media, we anticipated that could have had a deleterious effect, working toward that member education goal.

So, I asked FHAAN members to submit their questions in writing ahead of the August 6th meeting to facilitate a positive Q&A process.

Below, I've compiled the questions submitted. If you have any need for clarification on any of these, just let me know, and I'll facilitate that.

In the meantime, let me know what support you need for your August 6th presentation at 2:00 P.M.

We've set-up our meeting agenda in a way to give you as much time as you need, so feel free.

My mobile number is (850) 339-6395

1. Plan Drug Formularies
   Will plans be required to publish their comprehensive drug formulary during the open enrollment period? How will the plans' formularies be made available to Medicaid patients to help them choose the best plan?

2. Prior Authorization
   The Florida treatment advocacy community has worked very hard, for over a decade, to ensure open access to HIV drugs for people living with AIDS. When plans publish their formularies, will they be required to clearly state for which medications any prior authorization would be required by the plan?

3. Formulary Changes and Patient Notification
   Will plans be allowed to make changes to their drug formularies after the enrollment period ends? How will plans be required to notify patients of upcoming changes to their drug formularies?
4. Pharmacy Services
A recent trend in pharmacy benefit management has been to require patients to use a mail-order pharmacy. For example, Florida’s state employees’ health benefits plan and the Preexisting Condition Insurance Plans (PCIP’s) offered through the federal government both require that patients utilize mail-order for pharmacy services. What notification will the Florida Medicaid managed care plans be required to give patients if they plan to require mail-order pharmacy use?

5. Medicaid Expansion
How many people living with HIV/AIDS in Florida would be eligible for expanded Medicaid should Florida participate? How many Floridians overall would be eligible if the state participates in Medicaid expansion?

6. Rural Areas of Florida
How is Medicaid managed care going to work in more rural areas of the state, where there are already a limited number of Medicaid providers, let alone those who currently are willing to see folks with Medicaid as their only source of payment?

7. Project AIDS Care
How will the Project AIDS Care (PAC) waiver program be affected by Medicaid managed care? If there are changes that affect or change PAC, how will patients transitioned?

MISCELLANEOUS

8. What is Medicaid Clear program of Florida?

9. Are there Medicaid programs for children of HIV+ single parent(s)?

10. If a person is HIV+, mentally ill, homeless, and they want to apply for Medicaid how do they get started without a mailing address, computer or case management?

11. If a person cannot afford an employer’s medical insurance, will Medicaid assist with coverage of PCP, hospital stay, prescriptions, home health care, rehabilitation, etc.? How much will Medicaid cover for a HIV/AIDS client per month?