

Bulletin

January 18, 2008

Minnesota Department of Human Services ■ 444 Lafayette Rd. ■ St. Paul, MN 55155

OF INTEREST TO

- County directors
- Social services supervisors and staff
- County financial workers
- Community organizations
- Healthcare providers
- Pharmacists
- MAXIS and MMIS users

ACTION

Please review updates and implement Program HH policy changes effective December 1, 2007.

EXPIRATION DATE

January 18, 2010

HIV/AIDS Programs (Program HH) updates

TOPIC

- Program HH formulary changes
- Nutritional supplement program changes
- Cost share suspension

PURPOSE

Inform Minnesota Health Care Programs (MHCP) providers, community organizations and county social and financial workers of updates on HIV/AIDS programs (Program HH).

CONTACT

David Rompa, HIV/AIDS program administrator at 651-431-2414 or toll free in Minnesota 1-800-657-3671

SIGNED

LOREN COLMAN

Assistant Commissioner
Continuing Care Administration

Background

This bulletin provides an update and important information to providers and county social workers of the services and supports offered through the HIV/AIDS Division for Minnesotans living with HIV/AIDS. The HIV/AIDS program services include:

- AIDS Drug Assistance Program (ADAP)
- ADAP Insurance Program
- Mental Health Program
- Nutrition Program
- Dental Program
- Case Management

Program HH formulary updates

As of Dec. 1, 2007, consumers enrolled in Program HH shall have access to the following new medications and procedures through the Program HH formulary. New HIV/AIDS medications added include:

- Selzentry
- Isentress.

Due to testing procedures which are required for these new medications, genotype testing, phenotype testing, and tropism testing are part of the formulary changes effective Dec. 1, 2007. For clinics providing testing to Program HH consumers, billing to Program HH needs to be established with the labs that will be used. Please contact April Beachem at 651-431-2398 or april.beachem@state.mn.us to set up the billing for lab testing.

For Program HH consumers co-infected with Hepatitis C, these new medications are added:

- Pegasys
- Pegitron
- Epogen
- Neupogen
- Ribavirin
- Procrit

Program HH nutritional supplement update

Any consumer enrolled in Program HH is eligible for monthly (calendar) nutritional supplements not to exceed \$160. Qualified nutritional supplements are based on the Medicaid formulary found at:

http://www.dhs.state.mn.us/main/groups/business_partners/documents/pub/dhs_id_059489.pdf.

There is no prior authorization needed for this program support. But, the nutritional supplements must be prescribed by a physician or primary healthcare provider and filled at an outpatient pharmacy that is a Minnesota Healthcare Provider (MHCP).

Program HH Cost Share Suspension

As of Dec. 1, 2007, Program HH has temporarily suspended the monthly cost share premium requirement for consumers with incomes between 100 percent and 300 percent of the Federal Poverty Guidelines who are enrolled in the AIDS Drug Assistance Program Drug and/or Insurance Program. The suspension is a direct result of a funding increase from the federal Ryan White HIV/AIDS Treatment Modernization Act of 2006. The suspension is temporary and it may be assessed again when necessary.

Special needs

This information is available in other forms to people with disabilities by contacting us at (651) 431-2414 (voice), toll free at 1-800-657-3761 or through the Minnesota Relay Service at 1-800-627-3529 (TDD), 7-1-1 or 1-877-627-3848 (speech to speech relay service).