

APPENDIX G

RYAN WHITE PROVIDER INTERVIEW GUIDE

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RYAN WHITE HIV/AIDS PROGRAM MODELING STUDY

RYAN WHITE PROVIDER INTERVIEW GUIDE

DRAFT

JUNE 6, 2013

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-xxxx . The time required to complete this information collection is estimated to average 1.08 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

IDENTIFYING INFORMATION

[TO BE COMPLETED BY INTERVIEWER]

Organization Name	
Respondent Name	
Type of Organization (Sampled Category)	
Respondent Telephone Number	
Date and Time of Call	
Interviewer Name	
Notetaker Name	
Additional Comments	

SECTION I: INTRODUCTION

Hi, my name is [NAME]. I work for Mathematica Policy Research. Thank you for taking the time to talk with me. As you know from the letter you recently received from the Office of the Assistant Secretary for Planning and Evaluation (ASPE) in the U.S. Department of Health and Human Services, the Mathematica project team is speaking with organizations that receive Part A, B, C, D, F, or MAI funding from the Ryan White HIV/AIDS Program to obtain insights from the field about Ryan White program-funded services.

This call will last about 60 minutes. I will ask you questions on five topics: (1) your organization's provision of HIV services; (2) other sources of funding, including reimbursements from third party payers, your organization receives for HIV services; (3) strategies your organization has used to manage your Ryan White program expenditures; (4) your organization's role in coordinating eligibility, enrollment, and benefits between the Ryan White program and other payers; and (5) factors that affect the demand for care at your organization. I will not share your individual comments with anyone. Our reports will present an aggregate analysis, describing the general experiences and viewpoints expressed across grantee and provider organizations. None of the responses will be attributed to specific individuals or organizations or jurisdictions. Also, your participation in this interview will have no effect on decisions about funding that your organization receives for HIV care and treatment. My co-worker [NAME] is taking notes of today's interview, and we'd also like to audiotape our discussion to ensure that we've captured your comments accurately. The audio recording will not be shared with anyone and will be destroyed after preparing our report. Is this OK with you?

The last thing I would like to mention is that I need to cover a wide range of topics during this interview. At times I may need to move our conversation along to make sure we have enough time to cover everything within one hour. Do you have any questions for me before we get started?

SECTION II: INTERVIEW QUESTIONS

A. Respondent Information and Context

1. What is your current position in your agency?
2. How long have you been in your position? In your agency?

B. Ryan White Program Clients

1. In 2012, how many people (unduplicated count) received Ryan White program-funded medical and/or support services at your organization, including early intervention services? (NOTE: Confirm the data are for 2012. If data are not available for 2012, please provide data for 2011.)
2. Of your total [NUMBER] clients, how many (or what percentage) were:
 - a. Enrolled in Medicaid
 - b. Enrolled in Medicare
 - c. Enrolled in private health insurance (NOTE: Private insurance, through continuation of an employer-based plan, COBRA, or other private insurance plans.)
 - d. Enrolled in a pre-existing condition insurance plan (PCIP) or a state high-risk insurance pool (NOTE: PCIPs are state or federal high risk pools for people with pre-existing conditions, such as HIV/AIDS.)
 - e. Uninsured (NOTE: This includes self-pay clients.)
3. In 2012, approximately, what percentage of your total [NUMBER] **uninsured** clients had income [NOTE: If respondents do not know the answer for uninsured clients, ask for percentages of total clients.]:
 - a. Below 138 percent of the Federal Poverty Level (FPL) (NOTE: In 2012, 138 percent of the FPL for an individual is \$15,415.)
 - b. Between 138 and 400 percent of FPL (NOTE: In 2012, 400 percent of the FPL for an individual is \$44,680.)
 - c. At 400 percent of FPL and above (NOTE: In 2012, 400 percent of the FPL for an individual is \$44,680.)
4. How many of your clients received ADAP services in 2012?
5. Of your total [NUMBER] clients who receive ADAP services, how many (or what percentage) were:

- a. Enrolled in Medicaid
 - b. Enrolled in Medicare
 - c. Enrolled in private health insurance (NOTE: Private insurance, through continuation of an employer-based plan, COBRA, or other private insurance plans.)
 - d. Enrolled in a pre-existing condition insurance plan (PCIP) or a state high-risk insurance pool (NOTE: PCIPs are state or federal high risk pools for people with pre-existing conditions, such as HIV/AIDS.)
 - e. Uninsured (NOTE: This includes self-pay clients.)
6. In 2012, approximately what percentage of your total [NUMBER] **uninsured** clients who receive ADAP services had income: [NOTE: If respondents do not know the answer for uninsured ADAP clients, ask for percentages of total ADAP clients.]
- a. Below 138 percent of the Federal Poverty Level (FPL) (NOTE: In 2012, 138 percent of the FPL for an individual is \$15,415.)
 - b. Between 138 and 400 percent of FPL (NOTE: In 2012, 400 percent of the FPL for an individual is \$44,680.)
 - c. At 400 percent of FPL and above (NOTE: In 2012, 400 percent of the FPL for an individual is \$44,680.)

C. HIV Service Needs

*For the next set of questions, please refer to the list of Ryan White program services in **Table 1** at the end of this interview guide.*

1. Among your **Medicaid clients**, which HIV medical and support services do they use most? Among your clients with **Medicaid**, which services do they use that are covered either in part or in full by Medicaid? What percentage of the cost of providing that service is paid by Medicaid? (e.g., respond with a range like ‘More than 50%’ or ‘Less than 50%’) Which services do your Medicaid clients use that are not covered by Medicaid?
2. Among your **privately insured clients**, which HIV medical and support services do they use most? Among your clients with **private insurance**, which services do they use that are covered either in part or in full by their insurance? What percentage of the cost of providing that service is paid by private insurance? (e.g., respond with a range like ‘More than

50%' or 'Less than 50%') Which services do your privately insured clients use that are not covered by private insurance?

3. Among your **uninsured clients**, which HIV medical and support services do they use most?

D. Sources of Funding for HIV Services

1. Approximately, what was your [NAME] organization's total [NUMBER] funding from all sources for HIV testing, medical and/or support services in 2012?
2. Approximately, what percentage of your [NAME] organization's total [NUMBER] funding for HIV medical and support services came from: (NOTE: Use the total number reported in the previous answer. Some people may want to provide numbers instead of percentages.)
 - a. Ryan White program (include funding from any part of the Ryan White program)
 - b. Medicaid reimbursement
 - c. Medicare reimbursement
 - d. Reimbursement from commercial insurers
 - e. Funding from State or local governments
 - f. Other federal funding for HIV testing, medical, support, or other administrative services in 2011
 - g. Foundations and private contributions
 - h. Self-pay (clients)
 - i. Other
3. Can you estimate, approximately, what percentage of the average Medicaid client's costs are covered by Ryan White program funds?
4. Can you estimate, approximately, what percentage of the average privately insured client's non-reimbursed costs are covered by Ryan White program funds?

E. Reimbursement for HIV Services

1. Is your organization certified to bill Medicaid? If so, does your [NAME] organization currently bill Medicaid for HIV-related services?

2. Does your organization have any clinicians who are certified to bill Medicaid as primary care providers? If so, what kinds of clinicians are certified? (NOTE: This may include infectious disease physicians, HIV specialists, and nurse practitioners.)
3. Do you currently contract with a Medicaid managed care plan in your state? If so, how many and which one(s)?
4. What experience have you had using all-inclusive, bundled Medicaid payment rates to cover the cost of services or procedures which are not part of regular office visits, such as phenotype testing? What services or procedures do you provide that are not reimbursable under your all-inclusive Medicaid payment rate for a regular office visit?
5. Is your organization certified to bill Medicaid as a primary care medical home?
6. Does your organization have the capacity to bill commercial insurers and other third-party payers for HIV services?

F. Strategies to Manage Your Ryan White Program Expenditures

1. In 2012, did your organization take any measures to manage or leverage your Ryan White program expenditures? If so, please specify each type of measure taken.
 - a. Did you use any other strategies to manage your Ryan White program expenditures? If so, please describe them.

G. Coordination of Client Eligibility, Enrollment, and Provider Selection

1. Do you currently work with your state's Medicaid program or with your Part A or B grantee to coordinate Medicaid services for people with HIV/AIDS? If so, how do you work together and on what programs or services? Do you currently provide services that:
 - a. Educate clients about the provisions of the Affordable Care Act
 - b. Help clients apply for and enroll in Medicaid or other insurance plans
 - c. Help clients manage their HIV care across multiple service providers

2. If so, what types of services do you provide? (NOTE: Models of assistance might include: benefits coordinators; intake services; outreach, linkage, and referral services; and patient navigation or other case management practices.)

SECTION III: CLOSING

That ends our questions. Is there anything that I haven't asked you that you think would be important for me to know to better understand the service needs of your clients?

Thank you very much for taking the time to speak with me. If I realize we missed something or have a follow-up question, can I give you a quick follow-up call?

INTERVIEWER: REMIND RESPONDENT OF ANY ITEMS HE/SHE AGREED TO SEND AND CONFIRM HE/SHE HAS YOUR CONTACT INFORMATION.

Table 1. List of Ryan White Program-Covered Services

Core Services
Outpatient Ambulatory Health Service
Oral Health Care
Early Intervention Services
Home Health Care
Home and Community-Based Health Services
Hospice Care
Mental Health
Medical Nutrition Therapy
Med Case Management
Substance Abuse Services – Outpatient
Local Pharmaceutical Assistance
Health Insurance Program
Support Services
Non-Medical Case Management
Food Bank / Home Delivered Meals
Health Education / Risk Reduction
Transportation Services
Psychosocial Support
Treatment Adherence Counseling
Childcare
Development Assessment
Emergency Financial Assistance
Housing Services

Legal Services
Linguistic Services
Outreach Services
Permanency Services
Referral for Healthcare / Supportive Services
Rehabilitative Services
Respite Care
Residential Substance Abuse Services
