



State of New Jersey  
Department of Health  
Division of HIV, STD, and TB Services

# NEWSLETTER

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**TO:** Hospitals, Physicians, Advanced Practice Nurses (APNs), Federally Qualified Health Centers (FQHCs), Independent Clinics, and Laboratories—  
**For Action**  
Managed Care Organizations – **For Information**

**SUBJECT:** **AIDS Drug Distribution Program (ADDP) Coverage and Reimbursement for medical copayments and deductibles, for ADDP-insured beneficiaries that participate in the Health Insurance Premium Payment (HIPP) program.**

**EFFECTIVE:** **Immediately**

**PURPOSE:** To notify providers of a policy change by the Division of HIV, STD, and TB Services (DHSTS) to provide coverage and reimbursement for medical co-payments, deductibles, and other out-of-pocket costs on behalf of enrollees living with HIV who participate in the HIPP program.

**BACKGROUND:** For persons living with HIV living at 500% or below the poverty line, the HIPP program provides premium assistance to uninsured ADDP enrollees to allow them to purchase medical insurance plans. To receive assistance, the person must be approved and actively enrolled in the ADDP. Historically, the HIPP program assisted beneficiaries with the cost of health insurance premiums, while beneficiaries paid their share of health care costs. DHSTS has recently contracted with American Exchange, an Insurance Benefit Manager (IBM), enabling the program to cover patients' out-of-pocket costs and directly reimburse health care providers.

**ACTION:** **Effective immediately**, the HIPP program shall provide coverage and full reimbursement of beneficiary's portion of medical expenses **after** the health benefit plan has paid its share of the cost.

Health care providers whose patients inform them that they are participating in the ADDP/HIPP program are required to bill the cost of the medical visit to a beneficiary's primary health benefit plan first, to ensure that the HIPP program is the payer of last resort. The provider shall then request reimbursement for the patient's portion of costs from the HIPP program through American Exchange. The provider shall not charge the client directly for the cost. Invoices should be uploaded to the following link <https://americanexchange.com/clients/new-jersey-upload/>. The program will cover **plan-negotiated cost-share for outpatient services only**. The invoice shall provide a detailed breakdown, including Service date, service type/description, provider name, billed amount, insurance adjustment, amount the plan paid, *and copay amount*. American Exchange will reimburse health care providers directly for qualified outpatient claims.

If you have any questions concerning this Newsletter or want to confirm that your patient is eligible, please contact the Health Insurance Premium Payment Program at **1-800-353-3232**.

**RETAIN THIS NEWSLETTER FOR REFERENCE**