

**New Hampshire Division of Public Health Services
Tuberculosis Financial Assistance (TBFA) Program
Frequently Asked Questions: 2019**

What is the Tuberculosis Financial Assistance (TBFA) Program?

The TBFA was established to ensure that New Hampshire residents with active tuberculosis (TB) suspected active TB or High-Risk Latent TB infection (LTBI) that have no other resources may access TB-specific quality patient care.

Who is eligible for TBFA?

To qualify for TBFA a prospective client must:

1. Be a resident of New Hampshire
2. Be a person living with active TB disease, suspect TB, or High-Risk LTBI
3. Meet the financial guidelines for the program
4. If approved eligibility is for one (1) year; for treatment, which extends beyond one year, clients must reapply to the TBFA Program.

What if I have insurance?

The TBFA Program is the “payer of last resort” and does not pay for drugs, diagnostics, or monitoring services that would otherwise be paid for by Medicaid, Medicare, or any other medical insurance program or policy. If you have a primary source of insurance, that coverage must be utilized first. You must also meet the gross annual income guidelines.

Copayments?

The TBFA Program may cover prescription drug copays related to TB-specific medications, however some exclusions may apply. For example, if a prescribed medication is not on the Preferred Drug List or not related to TB, it most likely will not be covered.

What are the financial guidelines to qualify for TBFA?

To qualify for TBFA, an individual’s annual gross household income is not to exceed 300% of the federal poverty income guidelines, except where household medical debt exceeds guidelines.

The Food and Consumer Services, USDA, provides the Income Poverty Guidelines effective in January 2019:

<u>Family Size</u>	<u>Gross Annual Income</u>	<u>Gross Monthly Income</u>
1	\$37,470	\$3,123.00
2	\$50,730	\$4,228.00
3	\$63,990	\$5,333.00
4	\$77,250	\$6,438.00
5	\$90,510	\$7,543.00
6	\$103,770	\$8,648.00
7	\$117,030	\$9,753.00
8	\$130,290	\$10,858.00

For family units of more than 8 members, \$13,260.00 each additional member.

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How will the TBFA Program verify my income?

As part of the NH TB Financial Assistance Program, verification of income must be provided. Please see the application for the specific documents needed for income verification. If an applicant reports income of \$0.00, they must submit an estimate of the dollar value of support provided by family or others for shelter and living expenses.

What services does the TBFA cover?

The TBFA Program will only cover services directly related to the diagnosis of Active TB, Suspect TB, or High Risk LTBI:

- Medications approved by the Federal Food and Drug Administration (FDA) for the treatment of tuberculosis, high-risk latent tuberculosis infection or any medical condition caused by tuberculosis or tuberculosis medications;
- Licensed healthcare provider visits for follow up when indicated, as follows:
 - Limited to 5 visits for patients on treatment for latent tuberculosis infection unless the TB Program authorizes additional visits; and
 - Limited to 10 visits for patients on treatment therapy with no complications unless the TB program authorizes additional visits.
- X-rays to diagnose or monitor the disease;
- Laboratory tests related to the diagnosis of tuberculosis or its treatment; and
- Home health agency visits to provide directly observed therapy (DOT).

What services are not covered?

The following is a list of procedures that are not covered by the NH TB Financial Assistance Program.

- Inpatient hospital services and procedures
- Emergency department services and procedures and urgent care visits
- Anything not directly related to the diagnosis and treatment of TB disease or High-Risk LTBI

Are there ever exceptions for those services that are not covered?

Yes. A physician's order may be issued if a procedure has been determined to be medically necessary. However, pre-approval from the TBFA Program must take place prior to the procedure.

How does the TBFA pay providers?

The TBFA pays medical providers, pharmacies and DOT providers at the current NH Medicaid rate. This could mean that the TBFA pays less than what the provider billed for the service.

If I qualify for the TBFA should I apply for other medical coverage?

The TBFA Program will only cover services directly related to the diagnosis and treatment of TB or High Risk LTBI. If you find that the TBFA is not able to provide coverage for all your TB medical needs, you are encouraged to apply for other financial assistance programs.

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How do I apply for TBFA?

Follow these instructions to apply:

1. Complete the NH TB Financial Assistance Application. The information provided is strictly confidential and your Public Health Nurse (PHN) Case Manager can assist you.

2. Return your completed application to:
NH TB Financial Assistance Program
NH Division of Public Health Services
29 Hazen Drive
Concord, NH 03301-6504

If you need further assistance in completing this application, please call the TBFA Program at 603-271-4502 or 1-800-852-3345, ext. 4502.

You will be notified within 10 days of receipt regarding your eligibility for the program.

If approved, how will my medical provider know I am covered by TBFA?

Based on the information you provided on your application, the TBFA program will notify your medical provider and pharmacy that you have TBFA coverage. Clients enrolled in the TBFA will be given a TBFA card that they may then present to medical providers and/or pharmacies for services.

What is Directly Observed Therapy?

Directly Observed Therapy (DOT) is the standard of care for individuals with active TB and involves a trained professional observing a client taking their medication. This may be done in the patient's home (in person or via confidential video conferencing) or in a medical provider's office. If you are enrolled in the TBFA and have Medicaid or other insurance coverage, a documented denial from Medicaid or your other insurance must be submitted to the TBFA before payment for DOT will be authorized.