

# Benefits Management Toolkit

April 2016

## Purpose:

This toolkit, developed as a resource for Ryan White HIV/AIDS Program (RWHAP) Part B programs and AIDS Drug Assistance Programs (ADAPs), combines best practices, policy templates, insurance plan assessment tools, cost effectiveness tools, and sample program components. For the purposes of this toolkit, “benefits management” refers to all activities RWHAP Part B programs and ADAPs may undergo in order to obtain and maintain access to private and public insurance for the clients they serve.

The toolkit is a "living" document that will be augmented as more information and resources become available.

Included in this toolkit are the following topics:

- [Application and Enrollment](#)
- [Modified Adjusted Gross Income \(MAGI\)](#)
- [Insurance Plan Assessment](#)
- [Administering Insurance Payments](#)
- [Coordinating with Tax Reconciliation](#)
- [Other Resources](#)

Note: HRSA continues to release new policy clarification notices (PCNs) that are relevant to these topics. For a comprehensive list of HRSA’s ACA-related PCNs and other resources, please see [Resources on Ryan White and the Affordable Care Act](#).

## Application and Enrollment

RWHAP Part B programs and ADAPs play a critical role in assisting clients as they navigate an evolving health care system. They coordinate with ACA outreach, eligibility, and enrollment processes to assist clients in a smooth transition to newly available public and private insurance coverage options.

The following provides an overview of various state examples and NASTAD resources related to application and enrollment for benefits.

## State Resources and Templates:

- [State Resource: ADAP Policy for Eligible ACA Marketplace Enrollees](#)  
*Arizona, August 2014*  
This letter to clients details the Arizona ADAP's policy regarding vigorous pursuit of enrollment in the ACA federally facilitated marketplace (FFM) for eligible clients.
- [State Resource: Affidavit of Understanding for Individuals Declining Enrollment in the Federally Facilitated Marketplace \(FFM\)](#)  
*Arizona, August 2014*  
This affidavit asks ADAP clients who have declined to enroll in the FFM to confirm that they are aware of the consequences of that action, including: receiving a fine from the federal government; receiving access to only those medications included as part of the ADAP formulary; and receiving access to care and services only from Ryan White service providers.
- [State Resource: Affidavit of Understanding for Individuals Enrolled in a Medicare Health Plan or a Medicare Prescription Drug Plan](#)  
*Arizona, July 2014*  
This affidavit asks ADAP clients who are enrolled in a Medicare health plan or Medicare prescription drug plan to confirm that they will submit to ADAP any refund checks received from an elected Medicare health plan or Medicare prescription drug plan for any services paid by the Arizona ADAP.
- [State Resource: ADAP ACA Presentation](#)  
*Colorado, September 2013*  
This presentation provides an overview of Colorado's ADAP, the ADAP-funded insurance program, and the ACA overall.
- [State Resource: Ryan White Part B ACA Presentation \(including service cross walk\)](#)  
*West Virginia, September 2013*  
This presentation provides an overview of West Virginia's Part B program and ADAP as well as a service cross-walk. Also included is an overview of the ACA and its impact on West Virginia's programs.

- [State Resource: Client Information Flyer on Preparing for ACA Implementation](#)  
*Florida, August 2013*  
This flyer provides ADAP clients with brief information on the first period of ACA open enrollment, including applying and enrolling in ACA marketplace plans.
- [State Resource: ADAP Fact Sheet for ACA Assister Programs](#)  
*Oregon, August 2013*  
This fact sheet provides an overview of Oregon's ADAP for newly enrolled clients. It is used as part of Oregon's ACA Assister Program for client enrollment.

#### NASTAD and Partner Resources:

- [Presentation: Vigorously Pursuing Enrollment into Insurance for MSM of Color: ACA Enrollment and Education Across Ryan White and Prevention Programs](#)  
*NASTAD, March 2015*  
This presentation discusses opportunities to implement targeted ACA outreach and education to men who have sex with men (MSM) communities of color across Ryan White and Prevention programs.
- [Presentation: Open Enrollment: Considerations for HIV/AIDS Programs](#)  
*NASTAD, October 2014*  
This presentation provides an overview of: qualified health plan (QHP) enrollment including dates and deadlines; re-enrollment considerations; maintaining access to insurance for clients; and coordination with Medicaid enrollment.
- [Issue Brief: Immigrants and the Affordable Care Act](#)  
*NASTAD, March 2014*  
This issue brief focuses on the ACA and its impact on immigrant populations, with an emphasis on implications for HIV/AIDS and viral hepatitis programs and services. It discusses ACA coverage opportunities and eligibility rules for both lawfully present and not lawfully present immigrants as well as action steps for health departments as they prepare systems and programs to maximize access to care for these populations.
- [ADAP Streamline Application](#)  
*NASTAD, August 2013*  
NASTAD created this streamline application for ADAP programs that focuses on inclusion of insurance coverage and the ability to calculate modified adjusted gross income (MAGI) as required by the Affordable Care Act (ACA).

- [Issue Brief: Outreach, Eligibility, and Enrollment](#)  
*NASTAD, July 2013*  
This issue brief focuses on the Affordable Care Act's (ACA) outreach, eligibility, and enrollment provisions and programs and how these provisions may interact with HIV/AIDS and viral hepatitis programs.
- [Presentation: ADAP and Health Reform: Conducting Outreach and Enrollment](#)  
*NASTAD, May 2013*  
This presentation provides an overview of: ACA eligibility and enrollment; ACA outreach and enrollment training and funding opportunities and how HIV/AIDS programs can be involved; and a case study of Massachusetts ADAP.

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#### **PART B PROGRAM/ADAP ACTION: APPLICATION AND ENROLLMENT**

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- Ensure that programs have developed policies and procedures to screen clients for public and private insurance
- Ensure that outreach and enrollment resources address the needs of gay men, immigrants, and other vulnerable populations and include tailored eligibility information
- Review application and recertification policies to align with ACA, including requiring clients to report income changes to the Marketplace

## Modified Adjusted Gross Income (MAGI)

**Modified adjusted gross income (MAGI)** is the formula used to determine income eligibility for most Medicaid and subsidized private insurance and other insurance affordability programs. This formula aligns the Medicaid formula with the Internal Revenue Service (IRS) practice. These rules do not require an assets test or take into account income disregards.

The following provides an overview of various state examples and NASTAD resources related to the calculation of clients modified adjusted gross income (MAGI) as part of benefits enrollment.

### State Resources and Templates:

- [State Resource: MAGI Income Definition Sheet](#)  
*Washington, October 2013*  
The following resource details how the Washington state ADAP defines and calculates MAGI income for clients.
- [State Resource: Ryan White Part B MAGI Presentation](#)  
*Illinois, August 2013*  
This presentation provides an overview of: modified adjusted gross income (MAGI) calculations; a web application demonstration; a demonstration of Illinois PROVIDE application for ADAP; and PROVIDE client profile instructions.
- [State Resource: Illinois Mock MAGI Worksheet \(for clients that do not file federal taxes\)](#)  
*Illinois, August 2013*  
The following resource is a mock worksheet to be used for client MAGI-calculation. The worksheet is specifically designed to be used only for applicant's who have not filed a tax return for the most recent tax year.

### NASTAD and Partner Resources:

- [Partner Resource: Advocates Guide to MAGI](#)  
*National Health Law Project (NHLP), October 2013*  
The following resource will be an ongoing reference for advocates providing direct services to clients who have questions or problems pertaining to eligibility for health care affordability programs.

- [Modified Adjusted Gross Income \(MAGI\) Definition Chart](#)  
*NASTAD, August 2013*  
The following resource details eligibility criteria for Medicaid and insurance affordability programs using modified adjusted gross income (MAGI) calculations.
- [Partner Webinar: Impact of Income on Coverage Eligibility](#)  
*Center on Budget and Policy Priorities, August 2013*  
The following resource details what counts as income for determining eligibility for Medicaid and premium tax credits, whose income in a household counts towards determining eligibility, and how changes in income affect eligibility.
- [Partner Resource: Modified Adjusted Gross Income under the Affordable Care Act](#)  
*University of California, Berkeley, July 2013*  
The following resource summarizes relevant federal regulations regarding the calculations of MAGI under the Affordable Care Act.

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**PART B PROGRAM/ADAP ACTION: MODIFIED ADJUSTED GROSS INCOME (MAGI)**

- Consider aligning income criteria to MAGI and/or requiring submission of federal tax returns
- Ensure that case managers and clients understand new federal income criteria

## Insurance Plan Assessment

Even with the new insurance regulations included in the Affordable Care Act (ACA), there is still some variation among plans sold in the Marketplaces. As people living with HIV apply for coverage, they will have to pick a plan that includes HIV providers, meets their care and treatment needs, and is affordable. Ryan White programs and ADAPs are critical in ensuring that clients are enrolled in the best plans available.

The following provides an overview of various state examples and NASTAD resources related to ADAPs' assessment of insurance plans.

### State Resources and Templates:

- [State Resource: Letter to Department of Insurance](#)  
*Colorado, January 2015*  
The following resource is an example from Colorado of a letter sent to the state's department of insurance regarding ADAPs' experiences with a particular insurer.
- [State Resource: Insurer's Reply to Letter to Department of Insurance](#)  
*Colorado, March 2015*  
The following resource is an example from Colorado of a response from a letter sent to the department of insurance from the insurer.
- [State Resource: ADAP Approved Plans](#)  
*Colorado, October 2013*  
The following resource is an example from Colorado of a comparison of ACA marketplace plans available to their clients.
- [State Resource: Colorado Health Care Coverage Guide Reference Handbook](#)  
*Colorado, October 2013*  
The following resource demonstrates how an ADAP and the AIDS service organization (ASO) with which they may partner may have a record that a client enrollment was completed and processed. It also attests that the client understands what costs and services ADAP will cover as part of insurance coverage.
- [State Resource: ACA Plan Comparison](#)  
*Illinois, October 2013*  
The following resource is an example from Illinois of a comparison of ACA marketplace plans available to their clients.

## NASTAD and Partner Resources:

- [Partner Resource: Marketplace Health Plans Template Assessment Tool](#)  
*Center for Health Law & Policy Innovation, Harvard Law School, October 2014*  
This tool is designed to guide assessment of QHPs by assisting low-income individuals and their health and social service providers in selecting a QHP that best meets their care and treatment needs. It is also meant to build capacity among advocates in assessing the adequacy of QHPs for vulnerable populations.
- [Partner Resource: Marketplace Health Plans Template Assessment Workbook](#)  
*Center for Health Law & Policy Innovation, Harvard Law School, October 2014*  
The following chart accompanies the Marketplace Health Plans Template Assessment Tool, which explains the importance of each category listed below. It is intended to be used in conjunction with that material to assess the adequacy of any given qualified health plan on a federally facilitated, partnership, or state run Marketplace.
- [Partner Resource: Health Plan “Red Flags”](#)  
*Center for Health Law & Policy Innovation, Harvard Law School, October 2014*  
The following resource accompanies the Marketplace Health Plans Template Assessment Workbook and Tool. It is intended to be used in conjunction with that material to assess the adequacy of any given qualified health plan on a federally facilitated, partnership, or state run Marketplace.
- [Issue Brief: Coverage of Case Management and the Affordable Care Act](#)  
*NASTAD, June 2014*  
This issue brief provides HIV/AIDS and viral hepatitis programs with the tools to assess case management coverage offered by qualified health plans (QHPs), traditional Medicaid, and the Ryan White Program.
- [Issue Brief: Plan Assessment Tools for Insurance Purchasing Programs](#)  
*NASTAD, October 2013*  
This issue brief provides tools to assist HIV/AIDS and Viral Hepatitis Programs (and AIDS Drug Assistance Programs (ADAPs) in particular) in assessing Marketplace plan options and in determining which plans the Ryan White Program insurance assistance programs will assist clients in purchasing.



- [Issue Brief: Affordable Care Act \(ACA\) Essential Health Benefits \(EHB\)](#)  
*NASTAD, July 2013*  
This issue brief focuses on the Affordable Care Act's (ACA) Essential Health Benefits (EHB) provisions and how they will affect access to care for people living with HIV and viral hepatitis who will be moving into private insurance or Medicaid expansion coverage in 2014.
- [Partner Resource: Affordable Care Enrollment \(ACE\) Technical Assistance \(TA\) Center](#)  
*John Snow, Inc., July 2013*  
These are for anyone helping Ryan White HIV/AIDS Program (RWHAP) clients apply for health insurance.

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**PART B PROGRAM/ADAP ACTION: INSURANCE PLAN ASSESSMENT**

- Review plan assessment procedures to ensure Part B program/ADAP is purchasing comprehensive and cost-effective plans
- Conduct a gap analysis to better assess vital enabling services not covered or not fully covered by public and private insurance

## Administering Insurance Payments

The Ryan White Program allows states to use ADAP dollars to pay health insurance premiums for eligible individuals, provided the insurance meets minimum coverage standards and is cost-effective. ADAPs can also pay for medication cost-sharing for clients with health insurance.

The following provides an overview of various state examples and NASTAD resources related to ADAPs' administration of insurance payments for clients.

### State Resources and Templates:

- [State Resource: IBM RFP and Contract](#)

*Tennessee, June 2014*

The following resource is an example from Tennessee of a request for proposals (RFP) and a contract between ADAP and an insurance benefits manager (IBM).

- [State Resource: IBM Contract](#)

*Colorado, April 2014*

The following resource is an example from Colorado of a contract between ADAP and an insurance benefits manager (IBM).

- [State Resource: MBM RFP](#)

*Illinois, April 2014*

The following resource is an example from Illinois of a request for proposals (RFP) between ADAP and a medical benefits manager (MBM).

- [State Resource: IBM RFP and Contract](#)

*Oklahoma, April 2014*

The following resource is an example from Oklahoma of a request for proposals (RFP) and a contract between ADAP and an insurance benefits manager (IBM).

- [State Resource: IBM RFP and Contract](#)

*Washington, April 2014*

The following resource is an example from Washington of a request for proposals (RFP) and a contract between ADAP and an insurance benefits manager (IBM).

- [State Resource: MBM RFP](#)  
*Arizona, March 2014*  
The following resource is an example from Arizona of a request for proposals (RFP) between ADAP and an medical benefits manager (MBM).
- [State Resource: PBM Contract and Amendment](#)  
*Colorado, March 2014*  
The following resource is an example from Colorado of a contract and contract amendment between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM RFP](#)  
*Georgia, September 2013*  
The following resource is an example from Georgia of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM Contract](#)  
*Montana, September 2013*  
The following resource is an example from Montana of a contract between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM Contract](#)  
*Utah, September 2013*  
The following resource is an example from Utah of a contract between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM Contract](#)  
*Washington, September 2013*  
The following resource is an example from Washington of a contract between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM RFP](#)  
*Utah, August 2013*  
The following resource is an example from Utah of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).

- [State Resource: PBM RFP](#)  
*North Carolina, July 2013*  
The following resource is an example from North Carolina of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM RFP](#)  
*Virginia, July 2013*  
The following resource is an example from Virginia of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM RFP](#)  
*Montana, June 2013*  
The following resource is an example from Montana of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM RFP](#)  
*California, August 2012*  
The following resource is an example from California of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM RFP](#)  
*South Carolina, August 2012*  
The following resource is an example from South Carolina of a request for proposals (RFP) between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: PBM Contract](#)  
*Oregon, March 2011*  
The following resource is an example from Oregon of a contract between ADAP and a pharmacy benefits manager (PBM).
- [State Resource: MBM RFP](#)  
*Ohio, August 2010*  
The following resource is an example from Ohio of a request for proposals (RFP) between ADAP and a medical benefits manager (MBM).

## NASTAD and Partner Resources:

- [Issue Brief: Insurance Purchasing and Continuation](#)  
*NASTAD, January 2015*  
This issue brief describes key considerations for ADAPs regarding insurance continuation services in light of the implementation of the ACA. The issue brief also includes examples of ADAP-funded insurance programs.
- [Fact Sheet: Pharmaceutical Company HIV Patient Assistance Programs and Cost-sharing Assistance Programs](#)  
*NASTAD, January 2015*  
This fact sheet provides background on pharmaceutical companies' patient assistance programs (PAPs) and cost-sharing assistance programs (CAPs), how to apply for them and an overview of PAP and CAP contact information, drugs covered, limits of coverage (e.g., \$6,000 per year in cost sharing assistance), and financial eligibility criteria.
- [Pharmacy Benefits Manager \(PBM\) Toolkit](#)  
*NASTAD, May 2014*  
This toolkit is designed to walk ADAPs through the planning and implementation of a pharmacy benefit manager for administrative management of their program.
- [PBM Contract Language Bank](#)  
*NASTAD, February 2014*  
This is tool to provide examples of contract language from the field for common services being contracted from pharmacy benefit managers (PBM).
- [Presentation: ADAP and Insurance](#)  
*NASTAD, June 2013*  
This webinar presentation provides an overview of ADAPs ability to purchase/continue insurance, highlighting technical assistance documents related to insurance purchasing and continuation, utilization of a pharmacy benefits manager/insurance benefits manager, and collecting rebates on insurance payments.

## **PART B PROGRAM/ADAP ACTION: ADMINISTERING INSURANCE PAYMENTS**

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- Ensure that programs have developed policies and procedures to track and monitor public and private insurance payments made on behalf of clients
- Ensure that outreach and enrollment resources include information on client enrollment in pharmaceutical companies' patient assistance and cost-sharing assistance programs

## Coordinating Tax Reconciliation

In April 2015, HRSA/HAB released an updated [Policy Clarification Notice 14-01](#), with new guidance on the premium tax credit reconciliation process. Policy Clarification Notice 14-01 states that ADAPs must put policies and procedures in place to vigorously pursue tax refunds resulting from the underpayment of the advanced premium tax credit; and ADAPs have the option to pay client tax burdens resulting from an overpayment of the advanced premium tax credit.

The following provides an overview of various state examples and NASTAD resources related to ADAPs' coordination with tax reconciliation processes.

### State Resources and Templates:

- [State Resource: Agreement Regarding ADAP Clients' Decline of Marketplace Plan Enrollment](#)  
*Arizona, June 2015*  
The following resource is an example from Arizona of a form to be completed and signed by ADAP clients in the event that they decline to enroll in a federally-facilitated Marketplace plan and instead choose to receive services from the Ryan White program, with medication delivery through ADAP only. The same form in Spanish is available [here](#).
- [State Resource: Agreement Regarding ADAP Clients' Decline of Marketplace Plan Enrollment](#)  
*Arizona, June 2015*  
The following resource is an example from Arizona of a form to be completed and signed by ADAP clients in the event that they decline to enroll in a federally-facilitated Marketplace plan and instead choose to receive services from the Ryan White program, with medication delivery through ADAP only. The form also specifies that the client will pay the total federal government fine incurred by refusing to participate in the Marketplace.

- [State Resource: Agreement Regarding Medicare Co-payment Reimbursement](#)  
*Arizona, June 2015*  
 The following resource is an example from Arizona of a form to be completed and signed by ADAP clients to document their agreement to pay ADAP the total amount they receive in refunds from a Medicare health plan or prescription drug plan for any services paid by the ADAP.
- [State Resource: Agreement Regarding Reimbursement](#)  
*Arizona, June 2015*  
 The following resource is an example from Arizona of a form to be completed and signed by ADAP clients to document their agreement to pay ADAP the total amount they receive in tax returns as the result of an under payment of premium tax credit – that is, the client’s monthly health insurance premium in the past year was more than it should have been based on their income.
- [State Resource: Tax Reconciliation Policy](#)  
*Vermont, April 2015*  
 The following resource is an example from Vermont of their ADAP’s policies regarding tax reconciliation on behalf of clients.
- [State Resource: Tax Reconciliation Policy](#)  
*Arizona, April 2015*  
 The following resource is an example from Arizona of their ADAP’s policies regarding tax reconciliation on behalf of clients.
- [State Resource: Ryan White Treatment Modernization Act Part B Providers: Health Care Reform Guidance](#)  
*Arizona, March 2015*  
 The following resource is an example from Arizona of their ADAP’s policies regarding tax reconciliation on behalf of clients.
- [State Resource: Advanced Premium Tax Credit Refund Policy](#)  
*Arizona, March 2015*  
 The following resource is an example from Arizona of their ADAP’s policies regarding advanced premium tax credit refunds.
- [State Resource: Letter to Clients Regarding ADAP-Provided Tax Vouchers](#)  
*Colorado, February 2015*

The following resource is an example from Colorado of a letter sent to clients regarding ADAP's provision of vouchers for tax filing services.

- [State Resource: Tax Reconciliation Policy](#)

*Nebraska, February 2015*

The following resource is an example from Nebraska of their ADAP's policies regarding tax reconciliation on behalf of clients.

- [State Resource: Agreement Regarding Reimbursement](#)

*Vermont, September 2014*

The following resource is an example from Vermont of a form to be completed and signed by ADAP clients to endorse any payment made to them by an insurance company or the Internal Revenue Service (IRS) via premium tax credits for ADAP-purchased medications or services.

- [State Resource: Request Form for ADAP to Pay Tax Penalty](#)

*Vermont, September 2014*

The following resource is an example from Vermont of a form to be completed and signed by ADAP clients to request that ADAP pays the client's tax penalty due to over payment of premium tax credit – that is, the client's monthly health insurance premium in the past year was less than it should have been based on their income.

#### NASTAD and Partner Resources:

- [Summary: HRSA/HAB's Policy Clarification Notice 14-01](#)

*NASTAD, April 2015*

This guidance clarifies two scenarios: one in which a client is owed a refund in premium tax credits from the Internal Revenue Service (IRS) and one in which a client owes a premium tax credit amount back to the IRS as a result of reconciliation.

- [Presentation: ACA Tax Filing: Considerations for HIV/AIDS Programs](#)

*NASTAD, February 2015*

This webinar presentation discusses the Affordable Care Act's (ACA) federal tax filing requirements with regard to premium tax credit reconciliation and exemptions from the penalty for not having insurance coverage and how these provisions may interact with HIV/AIDS and viral hepatitis programs.



- [Fact Sheet: ACA Federal Tax Filing Requirements Health Reform Issue Brief](#)  
*NASTAD, January 2015*

This issue brief focuses on the Affordable Care Act's (ACA) tax filing requirements with regard to premium tax credit reconciliation and exemptions from the penalty for not having insurance coverage and how these provisions may interact with HIV/AIDS and viral hepatitis programs.

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**PART B PROGRAM/ADAP ACTION: COORDINATING TAX RECONCILIATION**

- Consider aligning income criteria to MAGI and/or requiring submission of federal tax returns
- Review application and recertification policies to align with ACA, including requiring clients to report income changes to the Marketplace
- Consider assisting clients with tax liabilities associated with an overpayment of the advance premium tax credit

## Other Resources

The following provides an overview of other related NASTAD resources as well as information on partner organizations that may also be helpful.

### **NASTAD RELATED RESOURCES:**

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#### **Financial Forecasting**

On April 17, 2013, NASTAD released an ADAP financial projection model and companion document explaining the components of the model.

- [NASTAD ADAP Financial Projection Model](#)
- [NASTAD ADAP Financial Projection Model: Companion Document](#)

### **PARTNER RESOURCES:**

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- The Center on Budget and Policy Priorities – [Health Reform: Beyond the Basics](#)
- [The ACE TA Center](#)
- [Speak UP!](#)
- Kaiser Family Foundation – [Greater than AIDS Obamacare & You](#)
- [Robert Wood Johnson Foundation Navigator Resource Guide](#)
- TARGET Center – [Health Reform Resource Bank](#)
- Georgetown Health Policy Institute – [Center for Health Insurance Reforms Blog](#)
- [HIV Health Reform](#)
- [State Refo\(ru\)m](#)
- [Center for Consumer Information and Insurance Oversight \(CCIIO\)](#)
- [Kaiser Family Foundation Health Reform](#)
- [Enroll America](#)
- [Out2Enroll](#)

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