

# ***Paying for PrEP:***

## ***What Nurses, Administrators and Patients Need to***

Kenyon Farrow, TAG  
Amy Killelea, NASTAD  
Carole Treston, ANAC

January 26, 2016



# Housekeeping

- Participant lines muted during the webinar
- Type questions in the “Question” pane of your Dashboard
- Q & A session at the end of the webinar.

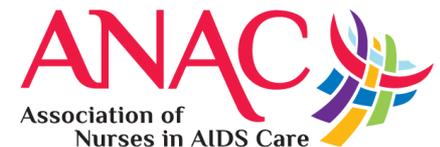


# Continuing Nursing Education

Upon full participation in this webinar & completion of an evaluation, participants will be awarded 1.0 contact hours.



The Association of Nurses in AIDS Care (ANAC) is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.



# Disclosures

## Faculty Conflict of Interest Disclosures

Kenyon Farrow, Amy Killelea, Carole Treston have no actual or perceived conflicts of interest related to the content of this program.

This program is part of a project supported by funding from Gilead Sciences, Inc. awarded to ANAC.

# Learning Objectives

At the end of presentation participants will be able to:

1. Examine the link between PrEP uptake and insurance access, enrollment and affordability
2. Describe financial and other challenges and barriers experienced by patients seeking PrEP
3. Discuss the actions and approaches nurses and other healthcare workers can take to lessen the financial barriers to PrEP.

# Agenda

1. ANAC & PrEP Overview
2. Paying for PrEP: Policy Considerations, Advocacy Priorities and Solutions
3. Patient PrEP Experiences
4. Paying for PrEP: Tips & Resources for Providers
5. Q &A/ Discussion

# ANAC & PrEP

Policy &  
Advocacy

Provider  
Education

# ANAC PrEP Policy & Advocacy

**Core Ideology:** Public policy must be grounded in patient advocacy, human rights, compassion, and social justice.

## **Two Fundamental Beliefs:**

- Nurses can have an influential and powerful voice as public policy advocates.
- Nurses have expertise related to health care and human rights.

PrEP works to prevent HIV

Education, Implementation & Uptake lags

New HIV infections disproportionately affect racial and sexual minorities.

# PrEP Evidence & Guidelines

- Nov 2010 IPREX Study
- **Jan 2011 CDC Interim Guidance MSM**
- July 2011 Partners PrEP TDF2
- **July 2012 FDA Approval of PrEP**
- **Aug 2012 CDC Interim Guidance Hetero M/F**
- **May 2014 USPHS CDC Guidelines**
- July 2014 IPREX Ole
- **Sept 2015 WHO Global Recommendations**

US Public Health Service

## PREEXPOSURE PROPHYLAXIS FOR THE PREVENTION OF HIV INFECTION IN THE UNITED STATES - 2014

A CLINICAL PRACTICE GUIDELINE

Two meds, EMTRIVA® and VIREAD®, are combined in  
1 tablet to make up TRUVADA



Pill shown is not actual size.



# USPHS CDC Guidelines

Daily oral PrEP with the fixed-dose combination of tenofovir 300 mgm/FTC 200 mgm (Truvada) has been shown to be safe and effective in reducing the risk of sexual HIV acquisition in adults; therefore PrEP is recommended as one prevention option for:

- sexually-active adult MSM at substantial risk of HIV
- adult heterosexually active men and women at substantial risk of HIV
- adult injection drug users
- In sero-discordant couples to protect the uninfected partner during conception and pregnancy

# ANAC & PrEP

## Preparing Nurses & NPs for PrEP Education & Implementation

- PrEP 1: PrEP Overview, Evidence & Resources
- PrEP 2: PrEP for Nurses: Clinical Practice Considerations in Patient-Centered PrEP Programs
- PrEP 3: Nursing Advocacy & Strategies for PrEP in Substance Abuse Treatment, Reproductive Health and Primary Care Settings
- PrEP 4: How HIV nurses' knowledge, attitudes, and behaviors impact PrEP Implementation (survey)

[www.nursesinaidscare.org](http://www.nursesinaidscare.org)

# Paying for PrEP: Advocacy Priorities and Solutions

Amy Killelea  
NASTAD

# PrEP as Part of a New Prevention Paradigm

## The Changing Science

US Public Health Service

### PREEXPOSURE PROPHYLAXIS FOR THE PREVENTION OF HIV INFECTION IN THE UNITED STATES - 2014

A CLINICAL PRACTICE GUIDELINE



The NEW ENGLAND JOURNAL of MEDICINE

HOME ARTICLES & MULTIMEDIA ISSUES SPECIALTIES & TOPICS FOR AUTHORS CME

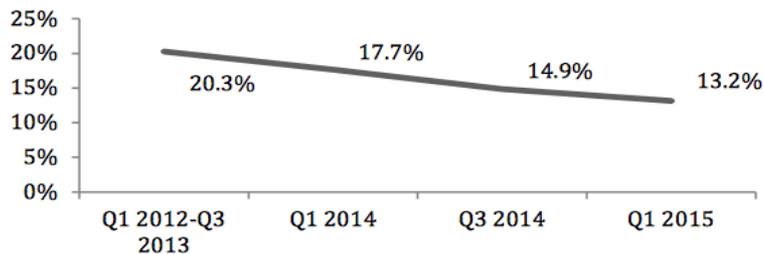
ORIGINAL ARTICLE

Preexposure Chemoprophylaxis for HIV Prevention in Men Who Have Sex with Men

## The Coverage Landscape

**16.4** million people have gained health insurance coverage through the ACA

Quarterly estimates of the Uninsured Rate  
Gallup-Healthways Well-Being Index, 2012-2015



## New Attention to **Population Health** by Medicaid and Insurance



### State Innovation Models Initiative: Round Two

The Innovation Center announced the recipients of Round Two State Innovation Models (SIM) Initiative Model Test & Design awards on December 16, 2014. Including the six SIM Round One Model Test states (Minnesota, Vermont, Massachusetts, Maine, Oregon and Arkansas) 38 total SIM awardees (including 34 states, three territories and the District of Columbia) will be working to support comprehensive state-based innovation in health system transformation.

#### State Innovation Models Initiative: Round Two Awards

Select anywhere on the map below to view the interactive version

#### Model Summary

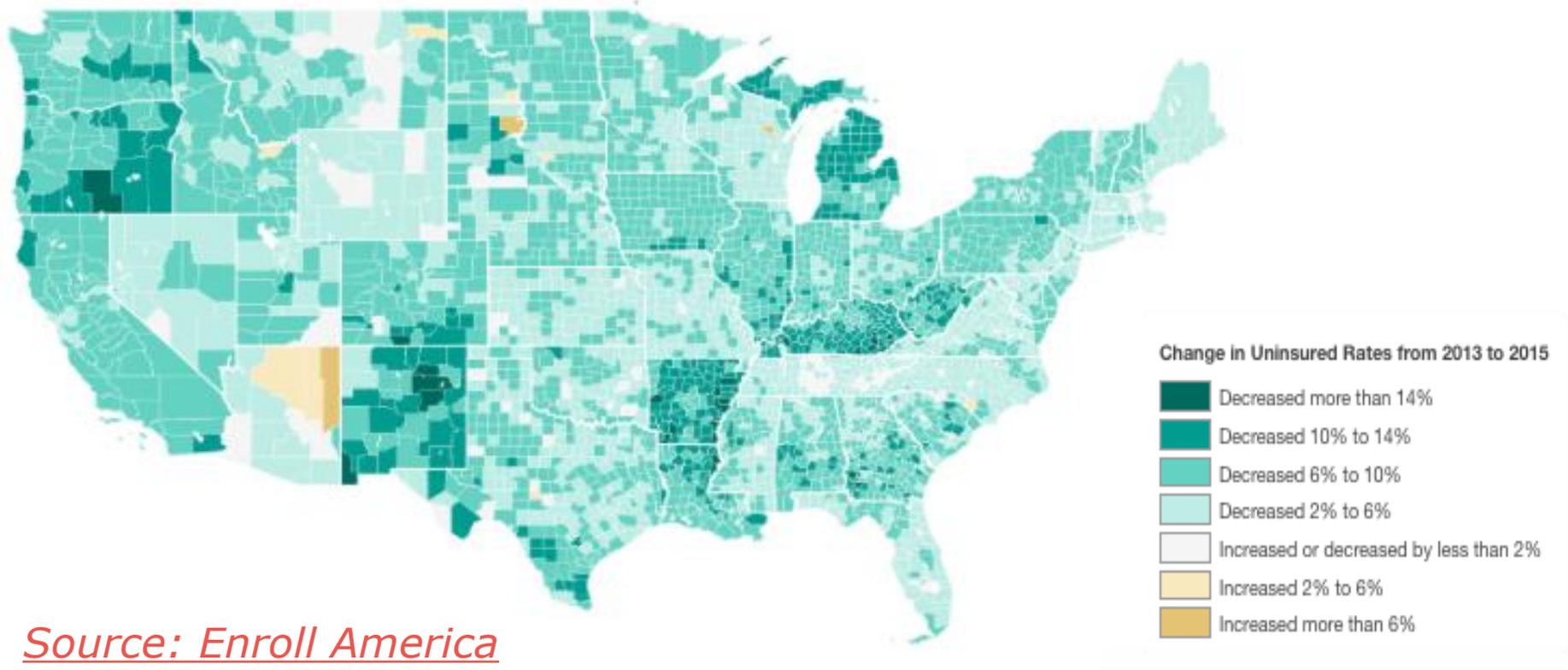
Stage: Announced  
Number of Participants: 32  
Category: Initiatives to Accelerate the Development and Testing of New Payment and Service Delivery Models  
Authority: Section 3021 of the Affordable Care Act

## A Math Problem

- CDC and HRSA do NOT cover PrEP (the medication)
- We cannot fight an epidemic with discretionary funding alone

# A New Insured Landscape Nationwide

## Changing Uninsured Rates by County: 2013-2015



*Source: Enroll America*

# The Financing Conundrum

## PrEP Services

- PrEP medication access
- Laboratory services
- Primary care visits (LGBT health)
- Linkage to social support services
- Mental illness & substance use/abuse services
- Adherence counseling and support
- Health insurance enrollment and plan navigation
- HCV, HIV and STI screening
- HIV Risk Reduction Counseling

## CDC

- Will not pay for medication and labs

## Ryan White Program

- Can pay for limited services for HIV negative individuals

## Medicaid

- 19 states have still not expanded

## Private insurance

- Co-pays are still expensive!

# Financing Considerations

- Enroll eligible individuals into insurance coverage
- Assess insurance plan options and plug affordability gaps
- Build off of existing Ryan White/ADAP infrastructure to create public health PrEP program
- Create a PrEP Public Health Safety Net

# 1) Enrollment into New Coverage

## Messages and Messengers Matter

### Most Important Motivators for People Under 30

Here are the top three messages that motivate young Americans to learn more about the new health coverage options through the Health Insurance Marketplace:

- If you or a family member gets sick, you won't have to worry about big medical bills or going bankrupt.
- You will be able to find a plan that fits your budget.
- The insurance plan you choose will be there to cover the care you need.

### Best Messengers

- Someone like them
- Someone their age and who has experienced the process of applying for health insurance
- Family member (mom)
- Doctor

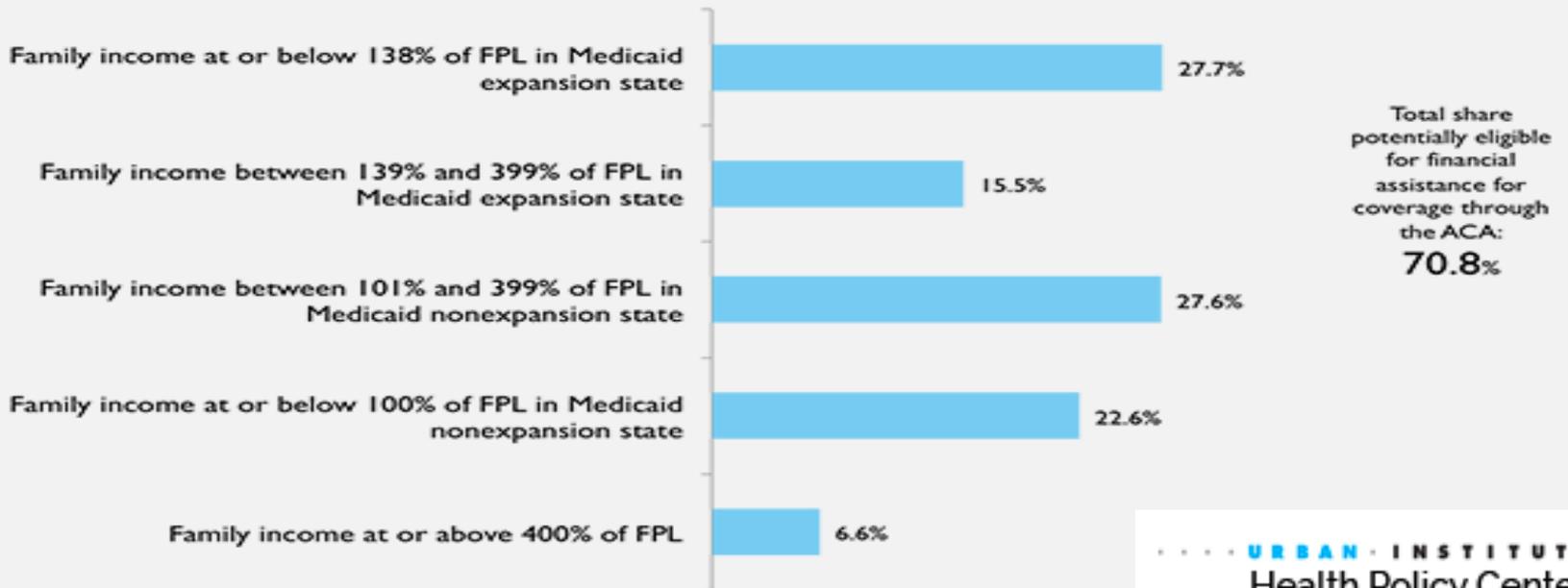


# It's Getting Harder to Identify and Enroll the Remaining Uninsured

Oct 21, 2014  
News Release

## Nine in Ten Uninsured Unaware that the Affordable Care Act's Second Open Enrollment Period Starts in November

**Figure 1. Distribution of Remaining Uninsured Adults Ages 18 to 64 by Family Income and State Medicaid Expansion Status, March 2015**



URBAN INSTITUTE  
Health Policy Center

# Insurance Education and Assistance is a New Prevention Activity

- DIS, HIV linkage staff, and other frontline prevention staff are first touch to both prevention and overall health and wellness



# Insurance Assistance as PrEP Strategy

www.projectinform.org/pdf/CCformularies.pdf

## ANTHEM BLUE CROSS, continued

(LATEST DATE: January 2015; FORMULARY CONTACT: 855-634-3381, www.anthem.com/ca/CASDL2015.pdf)

**General notes: most meds are tier 1 or 2; few PAs needed; significant combination meds not listed**

NC = not covered  
NL = not listed  
PA = prior authorization

BRAND NAME	GENERIC NAME(S)	TIER 1	TIER 2	TIER 3	TIER 4	PA	NC/NL	NOTES
Retrovir	zidovudine						XX	unknown why med is not listed; available as generic
Reyataz	atazanavir		XX					
Selzentry	maraviroc		XX					
Seroestim	somatropin						XX	unknown why med is not listed; FDA appr 1996
Stribild	elvitegravir+cobi+tenofovir+emtricitabine						XX	unknown why med is not listed; FDA appr 2012
Sustiva	efavirenz		XX					
Tivicay	dolutegravir						XX	unknown why med is not listed; FDA appr 2013
Triumeq	dolutegravir+abacavir+lamivudine						XX	unknown why med is not listed; FDA appr 2014
Trizivir	abacavir+lamivudine+zidovudine						XX	unknown why med is not listed; available as ge
Truvada	tenofovir+emtricitabine		XX					
Tybost	cobicistat (boosting drug)						XX	unknown why med is not listed; FDA appr 2014
Videx DR	didanosine DR (Videx)						XX	unknown why med is not listed; available as ge
Viracept	nelfinavir		XX					
Viramune XR	nevirapine (extended release)						XX	see generics; check on availability of XR version
Viread	tenofovir		XX			PA		unknown why prior auth is needed
Vitekta	elvitegravir						XX	unknown why med is not listed; FDA appr 2014
Zerit	stavudine						XX	unknown why med is not listed; available as ge
Ziagen	abacavir						XX	unknown why med is not listed; available as ge

PREP MEDICATIONS								
Truvada	Emtriva + Viread		XX					Rx for PrEP not stated but is available on formul

NOTES



## 2016 HIV Pre-Exposure Prophylaxis (PrEP) Coverage on the Illinois Health Marketplace in Cook County, Illinois

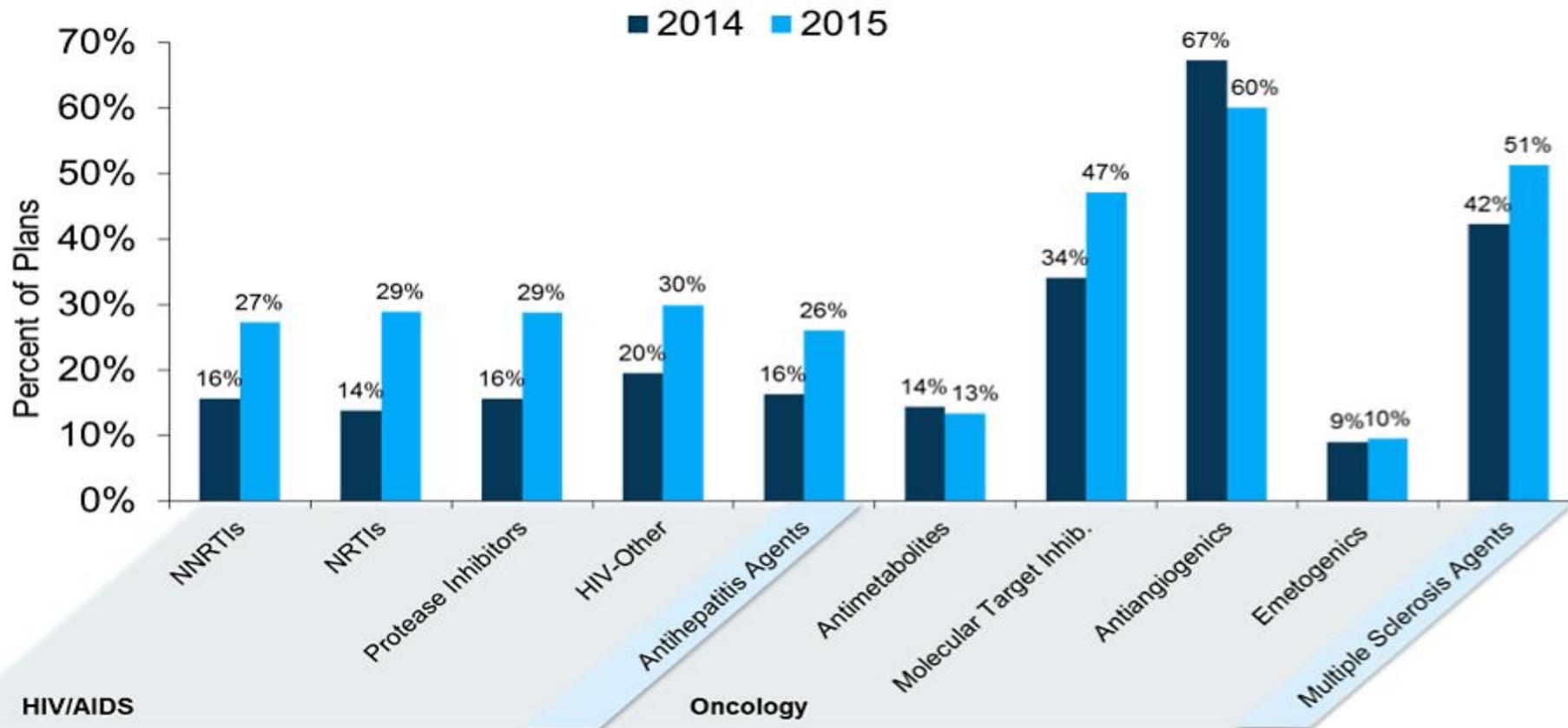
Nov. 30, 2015

People who are HIV-negative but vulnerable to HIV infection can take a daily medication to help prevent HIV. This is known as pre-exposure prophylaxis, or PrEP. A drug called Truvada was approved by the U.S. Food and Drug Administration (FDA) for use as PrEP in 2012. PrEP is recommended by the U.S. Centers for Disease Control and Prevention. When taken consistently and correctly, PrEP can reduce one's risk of contracting HIV by close to 100%.

This document summarizes the monthly out-of-pocket cost a person can expect to pay for Truvada under each of the plans on the Illinois health insurance marketplace offered in Cook County, IL. To learn more about the marketplace and health care coverage, get started at [GetCoveredIllinois.com](http://GetCoveredIllinois.com).

# 2) Assessing Affordability and Coverage and Filling Gaps

PERCENTAGE OF SILVER PLANS PLACING ALL SINGLE-SOURCE BRANDS IN THE CLASS ON THE SPECIALTY TIER



NNRTIs = Non-Nucleoside Reverse Transcriptase Inhibitors  
 NRTIs = Nucleoside and Nucleotide Reverse Transcriptase Inhibitors  
 Emetogenics = Emetogenic Therapy Adjuncts

# Assessing QHP Metal Tiers and OOP Plan Costs

QHP Metal Tiers	What It Means
Bronze	Plan pays 60% of costs (on average)/enrollee pays 40%
Silver	Plan pays 70% of costs (on average)/enrollee pays 30%
Gold	Plan pays 80% of costs (on average)/enrollee pays 20%
Platinum	Plan pays 90% of costs (on average)/enrollee pays 10%

Lower premiums,  
but less generous



Higher premiums,  
but more generous

# Putting It Together: Comparing Costs Across Plans



## John

- Makes ~\$17,000 per year (150% FPL)
- Gets \$202/month in APTC
- Prescribed Truvada

	Bronze Plan	Silver Plan (with CSR)	Gold Plan
Individual premium contribution (after tax credit)	\$13/month	\$53/month	\$130/month
Annual OOP cap	\$6,850	\$2,250	\$6,850
Cost sharing	Tier 2: 30% ~\$385/mo.	Tier 2: 20% ~\$257/mo.	Tier 2: \$35
Deductible	\$6,850	\$2,000	\$500

**Industry Co-pay Assistance Programs Can Help**



# PrEP Access is a Part of Broader Advocacy around Affordability

## HIV Health Care Access Working Group (HHCAWG) Asked and the Center for Medicaid Medicare Services (CMS) Listened!

Abigail Wood | April 16, 2014

### "I AM ESSENTIAL" COALITION URGES IMPROVEMENTS TO ESSENTIAL HEALTH BENEFITS

November 20, 2014 | Health Insurance Exchanges | Comments



### 'Cap-the-copay' movement takes off

May, 26 2015

By: Anthony Brino

As California goes, so goes the country in capping consumer costs for medicines? That's what patient advocacy groups and some pharmaceutical companies may be hoping.

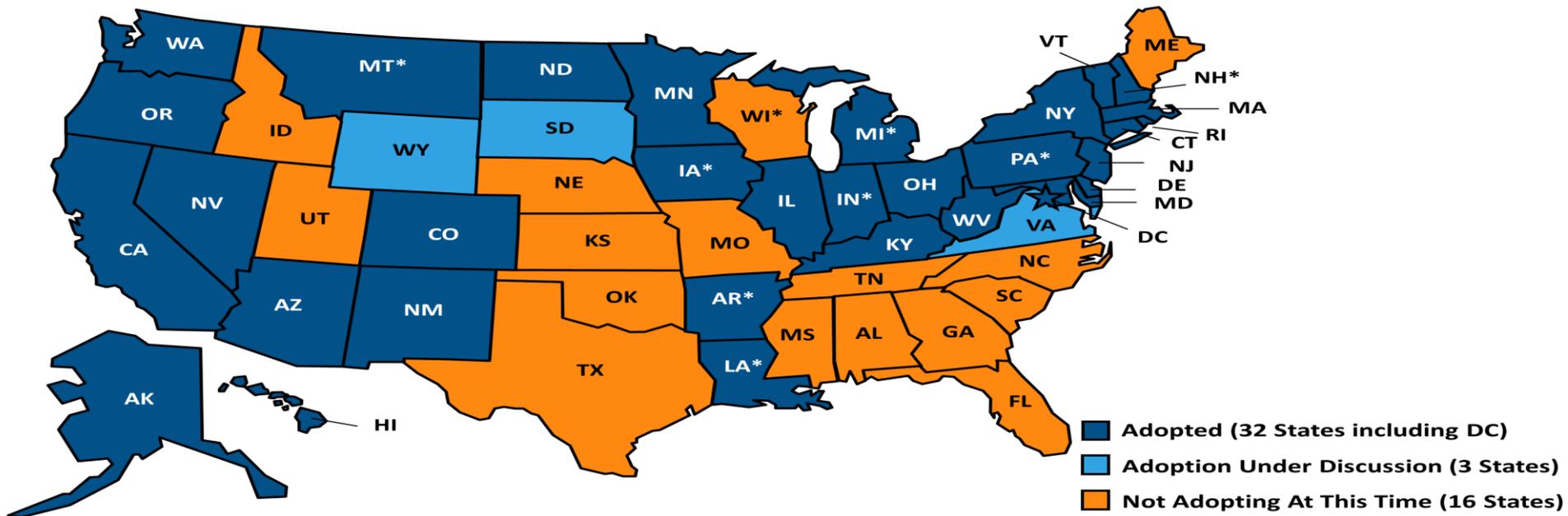
Covered California has become the first state health insurance exchange to require health plans to cap out-of-pocket costs for speciality drugs. The exchange's board voted to adopt a limit of \$150 to \$500 per month for speciality medications that treat arthritis, cancer, HIV/AIDS, diabetes, hepatitis C and other complex conditions.

# 3) Building off of RW/ADAP Infrastructure to Create a PrEP Safety Net

- PrEP Drug Assistance Programs
  - E.g., Washington and Colorado
    - Using ADAP infrastructure and purchasing PrEP medication and insurance for HIV negative individuals with state funds
    - BUT, purchasing at full price (no 340B discount)
- Ryan White Program flexibility
  - Purchasing family plans that include an HIV negative partner
  - Limited flexibility for EIS/EIHA to include PrEP

# Medicaid Expansion = PrEP Access X Factor

## Current Status of State Medicaid Expansion Decisions



NOTES: Current status for each state is based on KCMU tracking and analysis of state executive activity. \*AR, IA, IN, MI, MT, NH and PA have approved Section 1115 waivers. Coverage under the PA waiver went into effect 1/1/15, but it has transitioned coverage to a state plan amendment. Coverage under the MT waiver went into effect 1/1/2016. LA's Governor Edwards signed an Executive Order to adopt the Medicaid expansion on 1/12/2016, but coverage under the expansion is not yet in effect. WI covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion. See source for more information on the states listed as "adoption under discussion."

SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated January 12, 2016.

<http://kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act/>



# Resources

- National Alliance of State & Territorial AIDS Directors (NASTAD), [www.NASTAD.org](http://www.NASTAD.org)
  - Amy Killelea, [akillelea@nastad.org](mailto:akillelea@nastad.org)
  - Edwin Corbin-Gutierrez, [ecg@nastad.org](mailto:ecg@nastad.org)
  - Xavier Robinson, [xrobinson@nastad.org](mailto:xrobinson@nastad.org)

## Health Systems Integration resources

- Guttmacher Institute, Medicaid Family Planning Eligibility Expansions, May 2015, [http://www.guttmacher.org/statecenter/spibs/spib\\_SMFPE.pdf](http://www.guttmacher.org/statecenter/spibs/spib_SMFPE.pdf)
- HIV Health Reform, <http://www.hivhealthreform.org/>
- Treatment Access Expansion Project, [www.taepusa.org](http://www.taepusa.org)
- HIV Medicine Association, [www.hivma.org](http://www.hivma.org)
- HRSA/HAB ACA and Ryan White Resources, <http://hab.hrsa.gov/affordablecareact/>
- Health Care Reform Resources
  - Center on Budget and Policy Priorities, Beyond the Basics, <http://www.healthreformbeyondthebasics.org>
  - State Refo(ru)m, [www.statereforum.org](http://www.statereforum.org)
  - Kaiser Family Foundation, [www.kff.org](http://www.kff.org)
  - Healthcare.gov, [www.healthcare.gov](http://www.healthcare.gov)

## PrEP Billing and Operations resources:

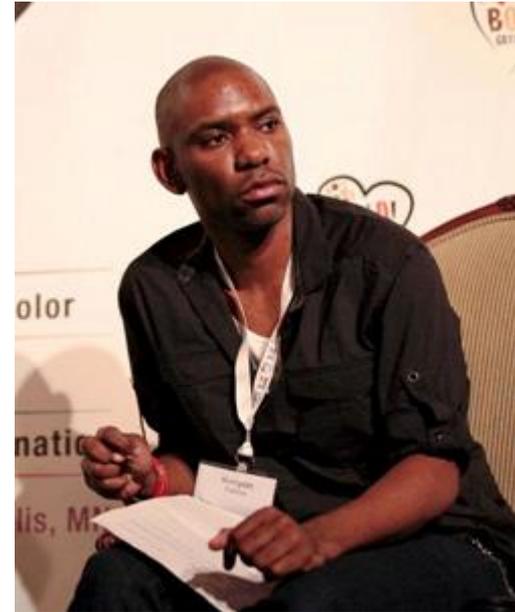
- PrEP Facts: [prepfacts.org](http://prepfacts.org)
- Project Inform: [http://www.projectinform.org/pdf/PrEP\\_Flow\\_Chart.pdf](http://www.projectinform.org/pdf/PrEP_Flow_Chart.pdf)
- Association of Nurses in AIDS Care: <http://www.nursesinaidscare.org>
- Cicatelli: [http://caiglobal.co/j\\_cba/index.php/available-cba-services](http://caiglobal.co/j_cba/index.php/available-cba-services)



THANK YOU!

# PATIENT ADVOCATE PERSPECTIVE

Kenyon Farrow  
Treatment Action Group  
U.S. and Global Health Policy Director  
HIV prevention and treatment activist



# Paying for PrEP: Tips & Resources for Providers

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## Insurance reality

- Truvada Cost \$~ \$1300/mos
- Insurance deductibles = >\$1000
- Prescriptions costs towards deductible
- Co-pays \$200-\$300

# Paying for PrEP: Tips & Resources for Providers

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- Education & discussion on financial processes
  - Deductibles
  - Prescription delivery choice/restrictions
- Manage expectations of time to obtain prescription
- Insured- multiple pre-authorizations attempts
- Patient Assistance programs for Insured & Uninsured
  - Insured: Co-pays & Deductibles
  - Uninsured: Cost of medications
- Importance of Provider-patient partnership
- Expect 2 weeks- 1 month for complete process
- Education on navigating the health care system & processes
- Timing of renewals

# Paying for PrEP: Tips & Resources for Providers

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Insurance pays for Truvada for Prep  
2016 ICD-10Codes October 2015

## **Z20.6 Contact with and (suspected) exposure to HIV**

Z20.82 Contact with and (suspected) exposure to other viral communicable diseases

Z20 Contact with and (suspected) exposure to communicable diseases

Z20.2 Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission

W46.0 Contact with hypodermic needle (hypodermic needle stick NOS)

Z72.5 High risk sexual behavior

# Paying for PrEP: Tips & Resources for Providers

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Pre- Authorizations

Commercial Insurance

Medicaid MCO

Role for Nurses and Case Managers as  
part of the PrEP Team

# Paying for PrEP: Tips & Resources for Providers

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## ***Gilead Co-pay Coupon Program for Truvada***

Enroll on line [www.gileadcopay.com](http://www.gileadcopay.com)

Call M-F 8AM-8 PM 1-877-505-6986

Deductible and co-insurance coverage is up to \$3600 per year –  
no longer limited to \$300 per month

- People must have private insurance
- This program does not cover individuals with Medicaid or Medicare
- No income requirement
- Issues a co-pay card for use at pharmacies
- [www.gileadcopay.com](http://www.gileadcopay.com)

# Paying for PrEP: Tips & Resources for Providers

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GILEAD Advancing Access

Call 1-800-226-2056 Monday through Friday,  
9am to 8pm ET. You can also leave a confidential  
message any time and day of the week.

## **Enrollment Form**

Provider & Patient information

Income & Residence documentation

Fax - process

Insurance Eligibility

Appropriate Patient Assistance Program

# Paying for PrEP: Tips & Resources for Providers

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## ***Medication Assistance Programs for Truvada***

Income below \$58,850 500% of the FPL and no other sources for health insurance or prescription coverage (reevaluated on a regular basis- Note- 6 mos recertification)

Have a prescription for Truvada

U.S. residency proof is required, but not immigration legal status

Income verified

Drugs shipped to provider's office—may take two weeks

Contact: 1-855-330-5479

# Paying for PrEP: Tips & Resources for Providers

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## ***Patient Access Network (PAN) Co-pay Program***

- \$Max. \$7500 per year – may reapply, but program funding will dictate response
- Does cover deductibles and co-insurance and is designed for those who's out-of-pocket costs are not fully covered by the Gilead program
- Income below 500% of FPL
- People must have private insurance
- This program does not cover individuals with Medicaid, but it does cover those with Medicare
- Most pharmacies should be able to bill PAN directly
- [www.panfoundation.org/fundingapplication/welcome.php](http://www.panfoundation.org/fundingapplication/welcome.php) or 1-

866-316-PANF

# Paying for PrEP: Tips & Resources for Providers

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## **Special tips:**

- Coupon does not require name in a data base
- MAP application fax: call to insure all documents received
- Income -= pay stubs ok
- Notarized letters can be used as documentation-ask!
- Signature of Patient – patient rep is guardian- not case manger, etc.
- Medication supply- ship to home or pick up at pharmacy/provider often missed!
- Assistance Denials: Possibility for Special Exceptions when denied

# Resources

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GILEAD Advancing Access

Call 1-800-226-2056

<https://www.gileadadvancingaccess.com/insurance-support>

Gilead Co-Pay Coupon

Enroll Activate Replace

<http://www.gileadcopay.com/>

Patient Access Network (PAN) [1-866-316-PANF \(7263\)](tel:1-866-316-PANF)

[www.panfoundation.org](http://www.panfoundation.org)

# Resources

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## **PrEP Support Hotline for Clinicians**

**PrEPLine, 1-855-448-7737 (1-855 HIV-PREP).**

The CCC Pre-Exposure Prophylaxis Service

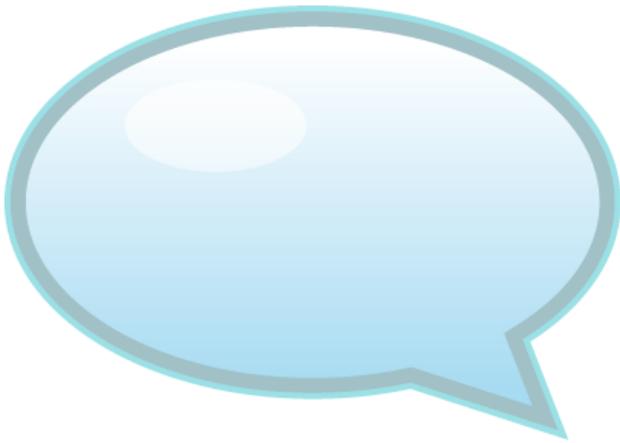
11 a.m. – 6 p.m. ET

National Clinicians Consultation Center. <http://nccc.ucsf.edu>

- CDC Guidelines:  
[www.cdc.gov/hiv/pdf/PrEPguidelines2014.pdf](http://www.cdc.gov/hiv/pdf/PrEPguidelines2014.pdf)
- Project Inform: [www.projectinform.org/prep](http://www.projectinform.org/prep)
- Patient access tracker: [www.myprepexperience.com](http://www.myprepexperience.com)
- Patient education (SFAF) : <http://prepfacts.org>

# Q & A Discussion

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**Additional questions?  
Email Erin at [erin@anacnet.org](mailto:erin@anacnet.org)**

# Continuing Nursing Education

**To be awarded contact hours for this webinar,  
complete the evaluation found at**

<http://www.nursesinaidscare.org/i4a/forms/index.cfm?id=161&widgetPreview=0>

**Additional questions?**

**Email Erin at [erin@anacnet.org](mailto:erin@anacnet.org)**

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