

The State of PrEP: Public Programs

PACHA Meeting
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OASH

Office of the
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Agenda



- Medicaid and Medicare and PrEP
- PrEP at Publically Funded Health Care:
 - **Health Centers**
 - **Indian Health Service (IHS)**
 - **Public Health/STD clinics**
 - **VA**
- Ready Set PrEP Program
- Key Takeaways

PrEP Coverage: Medicaid

- Traditional Medicaid:
 - Risk based HIV screening covered
 - Routine HIV screening optional – 43 states cover
 - PrEP medication covered; may have prior authorization
 - STI screening and adult immunizations optional
 - USPSTF Grade A and B recommended services covered without copay –optional but incentivized with 1% increase in federal match
- Medicaid Expansion:
 - HIV risk based testing and routine HIV screening covered
 - PrEP, STI screening and adult immunizations covered
 - USPSTF Grade A and B recommended services – PrEP medication and associated services covered without co-pay

PrEP Coverage: Medicare

- All ART required to be on Medicare Part D Plan formularies and available without prior authorization
- PrEP medication is under Part D – subject to cost sharing
 - **PrEP cost sharing can range \$1000 over \$2000 annually**
 - **Sliding scale co-pays available for low income Medicare beneficiaries**
 - **Change to no cost-sharing requires a National Coverage Determination**
- Prevention services with a USPSTF Grade A or B rating provided under Part B, such as routine HIV and STI screening - covered without cost sharing
 - **PrEP lab tests and visits subject to cost-sharing**
 - **Cabotegravir for PrEP would be a Medicare Part B service**

EHE and the Health Center Program: Primary Care HIV Prevention (PCHP)



- **FY 2020: \$54 million** to support **195 health centers**
- **FY 2021: \$48 million** to support **108 health centers**
 - **Applications are currently under review**
 - **Award start date: Sept 1**
- **FY 2022: \$50 million** to support up to **140 health centers**

FY 2020 PCHP Progress Report Data*

Within 11 months of award:

- **93%** had **hired** new staff
- Nearly **865,000** patients were **tested** for HIV
- **3,238** patients were **newly diagnosed** with HIV and received follow-up within 30 days
- **Nearly 63,000** patients were prescribed **PrEP**

Integrating PrEP in Indian Health Service (IHS), Tribal, & Urban Indian Clinics

HIV Screening, total coverage of

57.2%

(235,607/411,571)

Increase of approximately 20,000
unique patients screened 2016-
2019

HIV Screening, coverage of

men age 25-45

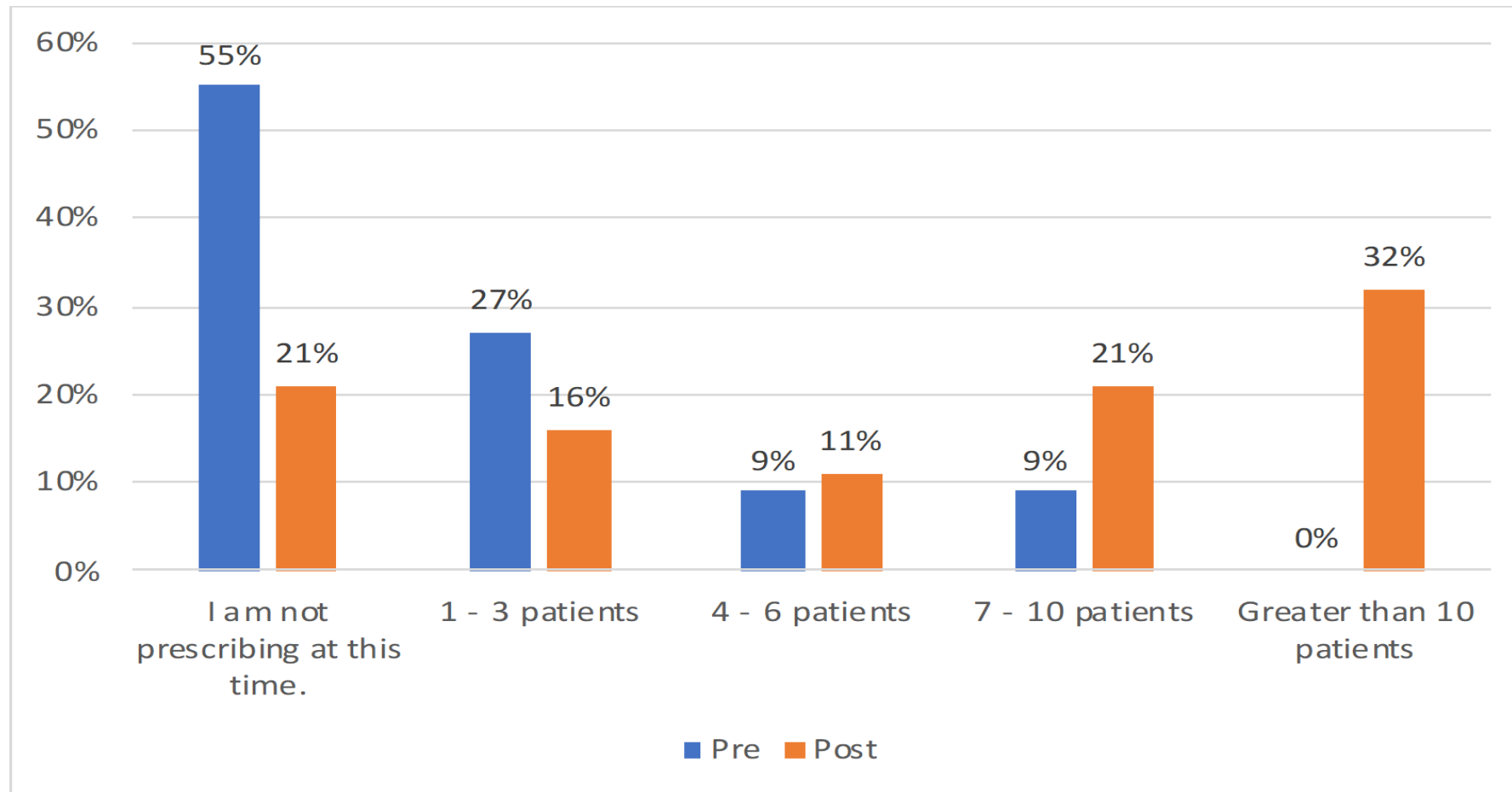
50.8%

(43,030/84,735))



IHS PrEP ECHO: Impact* (N=30)

*Preliminary Results



CDC HIV Prevention Funding: STD Clinics in EHE Priority Areas

Existing funding

- Component C of PS20-2010: Integrated HIV Programs for Health Departments to Support Ending the HIV Epidemic in the United States
- PS20-2004: National Network of Sexually Transmitted Diseases Clinical Prevention Training Centers (NNPTC)

Continued and New Funding

- Component C of PS20-2010 is a five-year award
 - **August 1, 2020–July 31, 2025**
- PS20-2004 is a three-year award, in its second year
- Competitive supplement to Component C, PS20-2010

CDC: STD Clinics in EHE Priority Areas

STD clinics are well positioned to support PrEP

- 30 of 31 clinics conduct PrEP assessment & referral
- 25 of 31 have laboratory capacity needed for PrEP labs
- 24 of 31 offer PrEP by prescription
- 15 of 31 offer PrEP starter packs onsite

Additional PrEP-related progress

- Establish telePrEP as option for people who take PrEP
- Implement nurse-driven PrEP protocols
- QI work to improve PrEP initiation and retention

Challenges

- PrEP retention
- TelePrEP

The State of PrEP: VA Ending the HIV Epidemic Plan

VA is the largest single provider of HIV care in the US

54 VA facilities located in HIV Hotspot Areas

- 5 Affinity Groups:
 - HIV Testing, HIV Care, PrEP, Syringe Services Programs, Sexually Transmitted Infections (STIs)
 - Participants: MD, NPs, PAs, Pharmacists, RNs Social Workers, Psychologists
 - Share best practices, collaborate to share resources and problem solve
 - Successes and barriers being evaluated

VA: Dashboard Data

Pharmacists developed dashboards which list patients needing action:

- **PrEP Dashboard**
 - Identifies Veterans with multiple risk factors for HIV; PrEP Candidates
 - Identifies PrEP patients who are late to refill medication
- **STI Dashboard**
 - STI patients who did not have complete STI co-testing
 - Identifies those who may need PrEP
- **HIV Dashboard**
 - Identifies Veterans late for HIV refill, late for lab, or have uncontrolled viremia
- **Hep C Dashboards**
 - Identify, treat and achieve goals to eliminate hepatitis C

Dashboard Collaboration Home Page > Reports > HIV

Actions • | 1 of 2 ? > | Find Next | 100%



STI Co-Testing Dashboard

Patient Line List - Patients Needing Any Action (e.g. Co-Testing or HIV Testing or PrEP Offer)

Report run by: VHA08\VHAORLS\azik on 4/7/2021 5:02:53 PM

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This report is updated daily.

Last updated: 4/6/2021 8:50 PM CST

| Patient Information | Chlamydia | Gonorrhea | Syphilis | HIV Screening | PrEP Risk & Offer Status | General Review Status |
|---|---|--|---|--|--|---|
| PatientName (Last4) 32yo M PC Team: KIS PACT PC 2 Incident STI Diagnosis: 4/2/2021 View All STI Results | Specimen Date: 4/2/2021 Interpretation: Negative Result: Not Detected Lab Type: Chlamydia-Genitourinary | Specimen Date: 4/2/2021 Interpretation: Positive Result: DETECTED Lab Type: Gonorrhea-Genitourinary | Specimen Date: 9/23/2020 Interpretation: Negative Result: NONREACTIVE Lab Type: Syphilis-Nontreponemal | Specimen Date: 9/23/2020 Interpretation: Negative Result: Non-Reactive Lab Type: Antibody | HIV Status Unknown | Enter Review Here |
| PatientName (Last4) 43yo F PC Team: *Unassigned* Incident STI Diagnosis: 4/1/2021 View All STI Results | Specimen Date: 4/1/2021 Interpretation: Negative Result: Not Detected Lab Type: Chlamydia-Genitourinary | Specimen Date: 4/1/2021 Interpretation: Positive Result: DETECTED Lab Type: Gonorrhea-Genitourinary | | | HIV Status Unknown | Enter Review Here |
| PatientName (Last4) 35yo M PC Team: DAY PC BLUE PACT 4 *WH* Incident STI Diagnosis: 4/1/2021 View All STI Results | Specimen Date: 4/1/2021 Interpretation: Positive Result: Detected Lab Type: Chlamydia-Genitourinary | Specimen Date: 4/1/2021 Interpretation: Positive Result: Detected Lab Type: Gonorrhea-Genitourinary | | | HIV Status Unknown | Enter Review Here |
| PatientName (Last4) 48yo M PC Team: ORL PACT HERO P4 1F Incident STI Diagnosis: 3/31/2021 View All STI Results | Specimen Date: 3/31/2021 Interpretation: Negative Result: Not Detected Lab Type: Chlamydia-Genitourinary | Specimen Date: 3/31/2021 Interpretation: Positive Result: Detected Lab Type: Gonorrhea-Genitourinary | Specimen Date: 3/31/2021 Interpretation: Negative Result: NONREACTIVE Lab Type: Syphilis-Nontreponemal | Specimen Date: 3/31/2021 Interpretation: Negative Result: Non-Reactive Lab Type: Antibody | Patient is HIV+, High Risk, and Requires PrEP Review Academic Detailing PrEP Dashboard Enter PrEP Review | Enter Review Here |
| PatientName (Last4) 35yo M PC Team: VIE PACT GEMINI PC7 Incident STI Diagnosis: 3/30/2021 View All STI Results | Specimen Date: 2/3/2021 Interpretation: Negative Result: Not Detected Lab Type: Chlamydia-Genitourinary | Specimen Date: 2/3/2021 Interpretation: Negative Result: Not Detected Lab Type: Gonorrhea-Genitourinary | Specimen Date: 3/30/2021 Interpretation: Positive Result: 1:64 Lab Type: Syphilis-Nontreponemal | Specimen Date: 2/5/2021 Interpretation: Positive Result: 4.6900 Lab Type: Viral Load | Patient is HIV+ HIV Care Dashboard | Enter Review Here Slazinski, Karen A. (3/18/2021 01:31 PM) Comments: 2/3/21 NG and CT urine were both neg. Dashboard didn't pick these up. |

Ready Set PrEP Program



OIDP is:

- Exploring ways to increase enrollment
 - Exploring stratifying enrollment data by race and ethnicity to monitor disparities
- **32,000** pharmacies with co-sponsorship agreements
 - Consideration of expanding to other pharmacies, including Health Center and IHS pharmacies
 - Expansion of RSP mail order via TrialCard and other pharmacies
 - Established EHE Pharmacy Taskforce under Public Health Service Commissioned Corps - force multipliers for pharmacy engagements
 - OIDP partnership with pharmacies to educate communities on PreP

Key Takeaways: The State of PrEP in Public Programs

- PrEP access is expanding but policy, program and cost barriers remain
- Pharmacist and nurse led programs and telePrEP can facilitate access to PrEP
- We are poised to have better data to monitor PrEP access and utilization and possibly disparities
- Further expansion of data collection, reporting and monitoring is needed
- Concern that changes to Patient Assistance Program re: 340B Drug Pricing Program and new generics negatively impact access to associated PrEP services
- Considerations underway on approaches to increase participation in Ready Set PrEP Program

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