

THE CALIFORNIA PRE-EXPOSURE PROPHYLAXIS ASSISTANCE PROGRAM: LESSONS LEARNED DURING AN INITIAL EXPANSION OF SERVICES

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BACKGROUND

- HIV Pre-Exposure Prophylaxis (PrEP) is highly effective at preventing HIV infection, but high medication and medical costs can put PrEP access and adherence out of reach for uninsured and underinsured individuals.
- Although manufacturer assistance programs have made PrEP medication more accessible, uninsured individuals still have out-of-pocket costs for:
 - Medical visits
 - Laboratory testing
 - Medication costs for sexually transmitted infection (STI) treatment and recommended vaccinations
- An integrated system can manage eligibility, provider options, and payment information to help minimize the risk of PrEP interruptions and unexpected medical bills.
- The California PrEP Assistance
 Program (PrEP-AP) removes
 financial and structural barriers
 to PrEP access by leveraging the
 administrative and technical
 infrastructure of its AIDS Drug
 Assistance Program (ADAP).

PROGRAM DESIGN

- Prepare provides funding for medical out-of-pocket costs provided by Prepare network providers and medications on the Prepare formulary.
- Uninsured clients can receive care from a centrally contracted PrEP-AP Provider Network.
- Prepared client and service utilization is managed via specialized modules in the ADAP Enrollment System, which integrates medication and outpatient care eligibility, provider details, and payment information.

PrEP-AP PROGRAM OVERVIEW

Eligibility

Eligibility mirrors ADAP eligibility. Clients may enroll if:

- A California resident
- 12 years of age or older
- HIV negative
- Modified adjusted gross income under 500% federal poverty line
- Not enrolled in Medi-Cal,
 California's Medicaid program
- Enrolled in a manufacturer's medication assistance program, if eligible

Services

- Access to and payment for medications on the PrEP-AP formulary for HIV prevention and STI treatment (excludes medications provided free by the manufacturer)
- Payment assistance for approved PrEP-related clinical out-of-pocket costs charged by a contracted provider in the PrEP-AP Provider Network for:
 - Outpatient medical visits (including telemedicine)
 - HIV/STI testing
 - Pregnancy testing
 - Renal function testing
 - Hepatitis A/B/C testing
- Copayment coverage (if insured)
- Post-exposure prophylaxis
- Rapid antiretroviral treatment coverage (if seroconversion)
- An option to enroll outside of a partner's insurance plan for confidentiality reasons

Table: Demographic Characteristics of Figure 1: California Pre-Exposure Prophylaxis Assistance Program (PrEP-AP)

People Enrolled in the California
Pre-Exposure Prophylaxis Assistance
Program (PrEP-AP) and People Who
Were Diagnosed With HIV Infection
in California in 2017

New HIV

TABLES AND FIGURES

	Active Enrollment in <u>PrEP-AP</u>	New HIV Diagnoses in California, 2017
Gender		
Cisgender men Cisgender women Transgender women Transgender men Unknown	2,775 (95%) 82 (3%) 45 (2%) 3 (0.1%) 4 (0.1%)	4,188 (87%) 526 (11%) 72 (1.5%) 5 (0.1%) 0 (0%)
Age (Years)		
18 - 24 25 - 34 35 - 44 45 - 64 ≥ 65	305 (10%) 1,461 (50%) 691 (24%) 358 (12%) 98 (3%)	914 (19%) 1,710 (36%) 1,005 (21%) 1,040 (22%) 81 (2%)
Race/Ethnicity		
Hispanic/Latinx American Indian/ Alaska Native Asian Black/African American Native Hawaiian/ Other Pacific Islander White Multiple races Unknown	1,236 (42%) 7 (0.2%) 260 (9%) 211 (7%) 11 (0.3%) 1,065 (37%) 40 (1%) 83 (3%)	2,232 (47%) 18 (0.4%) 344 (7.2%) 802 (16.7%) 12 (0.3%) 1,245 (26%) 138 (3%) 0 (0%)
Geographic Region of Residence		
Southern California Bay Area Central Valley	2,545 (87%) 268 (9%) 11 (0.4%)	3,053 (64%) 859 (18%) 503 (10.5%)

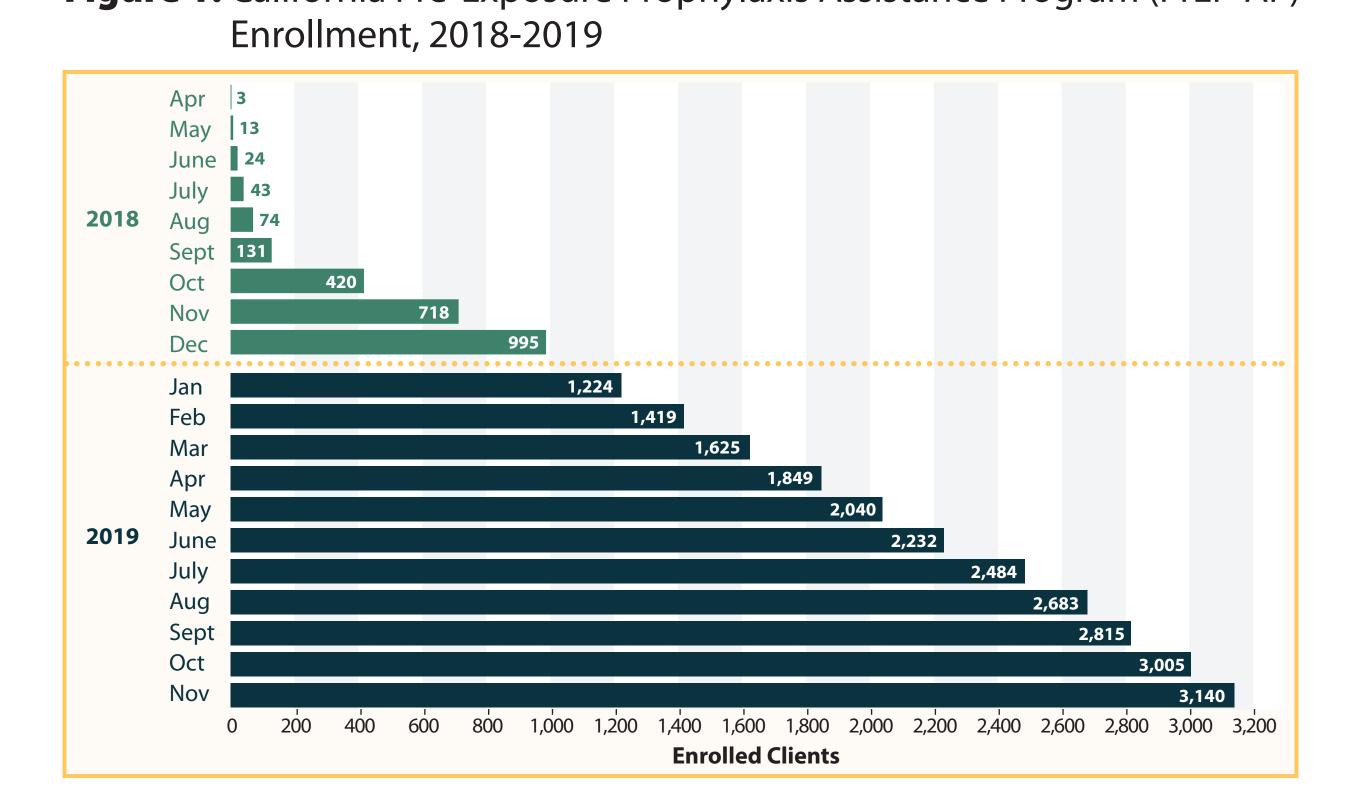
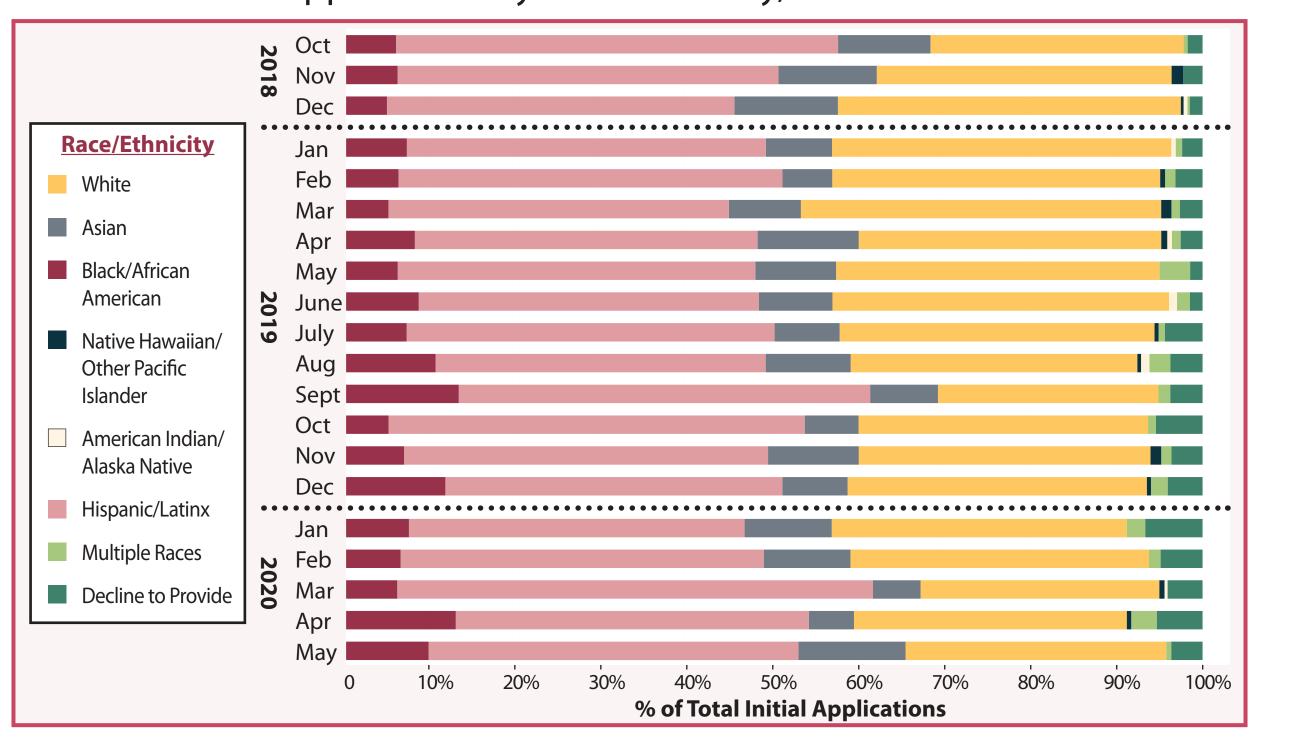


Figure 2: California Pre-Exposure Prophylaxis Assistance Program (PrEP-AP) Initial Applications by Race/Ethnicity, 2018-2019



LESSONS LEARNED

- Creation of California's PrEP-AP Leveraging ADAP Infrastructure
 Integrating PrEP-AP within ADAP's infrastructure offered multiple advantages:
 - Adapting and utilizing ADAP enrollment sites, eligibility and enrollment management training materials, software applications, and data integration workflows for PrEP-AP shortened the implementation timeline and continues to provide cost savings.
 - PrEP-AP applications are processed electronically using modified business rules to ensure privacy and confidentiality that were originally developed for California's web-based ADAP Enrollment System.
 - Knowledge of medical billing clearinghouses and insurance benefits management systems from ADAP was leveraged to streamline payment of PrEP-related claims.
 - Access to medications and vaccines on the PrEP-AP formulary was implanted using California's ADAP pharmacy benefits manager and network of ADAP pharmacies.

Rapid Program Expansion

Enrollment increased to over 3,000 people by November 2019 (Figure 1).

- Early adoption by community-based organizations drove initial enrollment.
- Later partnerships with healthcare plans helped to consistently maintain growth.

Unenrollment of Several Populations

Comparisons between PrEP-AP enrollees and people diagnosed with HIV in California in 2017 identified several groups with low PrEP-AP enrollment including cisgender women, young people (age 18 – 24 years), Black/African Americans, and people residing in the Central Valley. In response to this data, several programs have been introduced:

- In 2020 Project Empowerment was initiated, a \$4.5 million project to provide comprehensive HIV prevention to Black/African American and Latinx populations.
- In May 2020, PrEP-AP was enhanced to allow enrollment without utilizing the insurance of your family or partner to address confidentiality concerns for young people and other groups.

Flexibility to Maintain Benefits During the COVID-19 Pandemic

- Implementation of tele-enrollment procedures during "Stay-at-Home" orders.
- Automatic extensions of eligibility.
- Expansion of mail order and delivery options for PrEP.

SUMMARY

- ADAP resources can be effectively leveraged to facilitate PrEP assistance implementation.
- Prepare has expanded access to Prepin California but several populations are relatively under enrolled.
- Program flexibility is necessary to implement new enhancements and to react to unanticipated challenges.



376 (8%)

100 (3.4%)

Other regions