# Virginia AIDS Drug Assistance Program (ADAP) Advisory Committee Notes

Date: February 9, 2015 Time: 4:00pm-5:30pm

**VDH Staff Present**: Dr. Laurie Forlano, Diana Jordan, Steven Bailey, Lenore Lombardi, Jennifer Flannagan, Carrie Rhodes, Jean Cadet, and Craig Parrish (AAC member)

**ADAP Advisory Committee Members:** Dr. Robert Brennan (webinar), Dr. David Wheeler (webinar), Dr. Edward Oldfield (webinar), Sandi Dineen (webinar), Linda Eastham (webinar)

Guest Speaker: Dr. Susanna Naggie (webinar)

**Additional Participants:** Daryl Williams (Mary Washington Healthcare-webinar), Stephanie Lynch (Virginia Association of Health Plans-webinar), Paul Speidel (Optima/Sentara-webinar), Michael Horner (Kaiser Permanente-webinar)

**Absent ADAP Advisory Committee Members**: Donald Walker, Bob Higginson, Dr. Daniel Nixon, Dr. Gregory Townsend, Karen Council

#### I. Welcome and Introductions/Welcome of New Member- Dr. Robert Brennan

• Dr. Brennan provided a general welcome and introduced new member, Sandra Dineen. Dr. Brennan introduced Dr. Susanna Naggie, infectious disease faculty member at Duke University Medical Center.

# II. Hepatitis C Treatment Update- Dr. Susanna Naggie

- Dr. Naggie provided current updates on the new guidelines for treatment of HIV and Hepatitis C co-infected patients (please see presentation slides attached).
- Hepatitis C Treatment Update Q & A
  - 1. Dr. Brennan commented on idea of using once-a-day drug and asked about thoughts of utilizing even though they cost more. *Dr. Naggie response:* Combination regimens are most applicable for largest group of people.
- Dr. Naggie declined the VDH honorarium and the amount was put back into the ADAP program budget.

# III. Hepatitis C Assistance Program Overview- Steven Bailey

- Virginia ADAP will be providing short-term assistance for Harvoni (fixed dose ledipasvir and sofosbuvir) beginning no later than April 1, 2015.
- Clients that are uninsured, or who are insured but whose insurance plans have denied Harvoni, will be eligible for this assistance.
- Cost savings experienced by a high number of ADAP clients enrolled to insurance and successful competitive grant awards this year allows us to purchase a limited supply of the medication. A workgroup of the ADAP Advisory Committee considered several options, and opted to supply Harvoni as the option that could serve the most number of people.
- Based on expense of the medications, it is not yet possible to add any of the newer Hepatitis C medications to the ADAP formulary, but that will continue to be assessed. ADAP will be able to provide Harvoni to approximately 40-60 clients statewide. Additional medication will be purchased as additional resources are identified.

- Providers will submit an application for assistance directly to Virginia ADAP. Further
  information will be e-mailed, and posted to the ADAP website, as the logistics for this
  assistance are finalized.
- Question posed to AAC by VDH: What do Committee members believe volume of clients would be? What is the volume of need? Dr. Oldfield: The volume will be about 15-20 clients (multiply by two nurse practitioners, three physician assistants and six physicians). Dr. Wheeler: Is currently in a private setting, based on those who get rejected and ADAP clients, anticipates ten clients over the next six months. Dr. Wheeler asked if there has been any work with Gilead to get discounted price. VDH response: No negotiated agreement is in place except for one medication (Viekira Pak). VDH would be able to purchase Harvoni at 340B pricing.
- Craig Parrish provided an overview of Controlled Substance Registration (CSR). If medications are shipped to anywhere other than patient, the site will need to register and have a CSR in place. The Memorandum of Understanding is already in place. The cost of the CSR registration is \$90 and VDH will reimburse for that fee and the renewal fee. The CSR application will stipulate a contact person.

# IV. Program Enrollment and Affordable Care Act (ACA) Update- Lenore Lombardi and Carrie Rhodes

- Several items are needed for final enrollment push. A list of clients that have not been enrolled was sent to local health departments and medical providers to prompt staff to encourage clients to enroll into an ACA plan.
- Certified Application Counselors calls continue to be held. A stakeholder letter was recently sent stating that updated information for clients that were automatically enrolled into a plan is still needed.
- Please refer to attached enrollment presentation slides.
- Dr. Brennan stated that the ACA update was great and thanked everyone for their hard work.

# V. ACA Enrollment Maps- Jean Cadet

• Please refer to attached enrollment presentation slides.

# VI. Questions and Answers/ Topics for Next Meeting/ Closing of Call

• VDH staff will send out a request regarding an ad hoc group to determine Committee data needs. Final Remarks: Dr. Brennan had no closing remarks other than asking if there were any other questions from the field. The next meeting will be held face-to-face in about three months.