

# **AIDS Drug Assistance Program (ADAP) Advisory Committee Meeting**

## **Notes**

**October 26, 2015**

### **Welcome and Introductions (Dr. Robert Brennan)**

#### **Attendees:**

- Dr. Robert Brennan
- Dr. Rebecca Dillingham
- Dr. Kathleen McManus
- Sandra Dineen
- Dr. David Wheeler
- Robert Higginson
- Linda Eastham
- Dr. Edward Oldfield

#### **VDH Staff:**

- Dr. Laurie Forlano
- Diana Jordan
- Lenore Lombardi
- Anne Rhodes
- Carrie Rhodes
- Daniela Isayev
- Craig Parrish

### **ADAP Administrative Structure Overview (Diana Jordan)**

- The position for Director, HIV Care Services is vacant at this point. VDH will be recruiting for this position.

### **Affordable Care Act Open Enrollment Overview (Lenore Lombardi, Carrie Rhodes)**

- Open enrollment period is from November 1, 2015-January 31, 2016. Nine insurance carriers are offering plans in the ACA Marketplace for the 2016 coverage period/plan year. One of these is a new carrier.
- Just as a reminder, Health Resources and Services Administration (HRSA) requires states to ensure plans supported with ADAP funds are less costly than direct purchase of medications, include adequate access to HIV related care, and cover at least 1 antiretroviral medication/class.
- Based on these requirements and an assessment of geographic coverage, Virginia (VA) ADAP intends to pay insurance premiums and medication cost shares for plans from all nine carriers.
- VDH will hold extended hours beginning November 2. Monday-Thursday 7AM-7PM, Friday 7AM-6PM and Saturdays 10AM-2PM
- As in prior years, calls will be held for Certified Application Counselors (CACs) and other enrollment assistors. These calls will provide information on ADAP enrollment, ADAP-approved insurance plans, enrollment updates, premium payment requirements, and to address any concerns or problems. Calls will be held every Monday from 12-1pm. The first call was held today.

- Also as in prior years, there will be a weekly email update to the Stakeholder List Serv.
- The goal is to re-enroll all 3,174 current HIMAP clients. Additionally there are 1,051 Direct ADAP clients that have been deemed as potentially eligible for insurance.
- The annual report to the General Assembly has recently been posted on the Legislative Information System website. The link to the report will be sent out with the call summary.

#### **Update on University of Virginia Study (Kate McManus)**

- Presentation providing an update on the study that the University of Virginia conducted on the transition of Virginia AIDS Drug Assistance Program's health care delivery from primarily direct provision of antiretroviral therapy to purchasing Affordable Care Act insurance plans. Dr. McManus is a Fellow Physician in Infectious Diseases and International Health at the University of Virginia and received her medical degree from Columbia University College of Physicians & Surgeons.
  - See attached slides
  - Outcome of study indicates a positive correlation between ACA enrollment and viral suppression.

#### **Questions and Answers/Comments:**

- Dr. Robert Brennan – Has this information been collected for other states?
  - Kate McManus – Not at this time.
- Dr. David Wheeler – Could this data have been impacted by a shift in care? Perhaps clients that switched to ACA plans changed to different or better providers? Also, factoring in “better” clinics enrolling more clients into ACA plans?
  - Kate McManus – The data was controlled for demographic factors including HIV clinics. The results were still attributed to ACA enrollment.
- Anne Rhodes – It will be important to analyze 2015 data as well as there was more “buy-in” from clinics in terms of assisting with enrollment.
- Diana Jordan – Is it possible to examine these results specifically by carrier?
  - Kate McManus – will examine this data as well.
- Dr. David Wheeler – pointed out the possibility of selection bias as more motivated individuals may have a tendency to enroll in these plans, and stay in care additionally.
  - The study accounts for some of these individual differences.

#### **Hepatitis C/HIV Treatment Assistance Program Update (Carrie Rhodes, Dr. Robert Brennan)**

The treatment assistance program began in April 2015. In June 2015, the VA ADAP Formulary was updated to include Hepatitis C treatment. The formulary was updated to include sofosbuvir (Sovaldi), ledipasvir + sofosbuvir (Harvoni), ombitasvir + paritaprevir + ritonavir & dasabuvir (Viekira Pak), and ribavirin. A HCV/HIV Treatment Assistance Program application is needed to access these medications. To date, 18 clients have accessed the program; 14 are active and 4 clients have completed treatment.

Prior to implementation, a letter was sent to RW providers informing them of the program. A 2<sup>nd</sup> letter is in process to again inform providers of the program and the reason to treat. Additional materials include a flyer to be distributed to VDH staff that are attending meetings and trainings in the field. A survey to include with the monthly e-bulletin or to send to the list servs is also being developed.

### **Questions and Answers/Comments:**

- Dr. Rebecca Dillingham – Are there any deadlines for the distribution of Harvoni?
  - Craig Parrish – Perhaps, depending on the usage.
- Dr. Robert Brennan requested that VDH follow up to collect lab work post treatment.
  - Central Pharmacy has routine contact with clients and follow up once treatment is complete.
- Dr. Robert Brennan – Have there been issues with clients accessing these medications from Health Departments rather than Provider sites?
  - Dr. Edward Oldfield - There have been no issues with client accessing medications from Health Departments, as Eastern Virginia Medical School (EVMS) does not have a CSR in place. It has been beneficial to treat clients prior to cirrhosis.
  - Daniela Isayev – No issues reported to VDH regarding medication access via Health Departments instead of Provider sites. All feedback regarding medication access for the HCV/HIV Treatment Assistance Program has been positive.
- Dr Edward Oldfield – Is there a possibility of adding Daclastavir to the formulary?
  - Carrie Rhodes stated the committee will look into adding this medication.
- Dr. Rebecca Dillingham – Is there any way to do direct marketing to clients?
  - Diana Jordan – VDH is working on materials to reach clients directly. There is a Facebook page specifically oriented to clients.
- Dr. Robert Brennan – The biggest hurdle for submitting HCV applications is obtaining the denial letter from the insurance company.
- Dr. Rebecca Dillingham – Requested to view communication sent regarding HCV access.
- Diana Jordan – VDH is looking at how to improve platforms for communication

### **Update on ADAP Formulary Addition**

In August 2015, the human papillomavirus or (HPV) Vaccine was added to the ADAP Formulary with exception criteria of being prescribed for clients with a CD4 of at least 200 and used as indicated in males and females up to age 26. To date there have been less than 10 requests for the vaccine. We will continue to monitor and bring back to the committee to visit removing the exception criteria if the vaccine continues to be prescribed accordingly.

### **Pre-Exposure Prophylaxis (PrEP) Update (Diana Jordan)**

HIV Prevention unit applied for two grants and have been awarded both funding streams. Both grants will be administered in the Eastern region and then one will be administered in the Northern region. HIV Prevention Funding for those at risk for HIV. This includes a continuum of care for those not infected and PrEP access.

### **Program Enrollment Numbers**

***Total: 5,863***

**Direct ADAP: 1,649**

**Insurance Continuation Assistance Program (ICAP): 542**

**Medicare Part D Assistance Program (MPAP): 497**

**Health Insurance Marketplace Assistance Program (HIMAP): 3,174**