Scaling Up PrEP Use Now by Leveraging Existing Programs



Biomedical HIV Prevention Conference Seattle, Washington April 19, 2024 Scaling Up PrEP Use Now by Leveraging Existing Programs

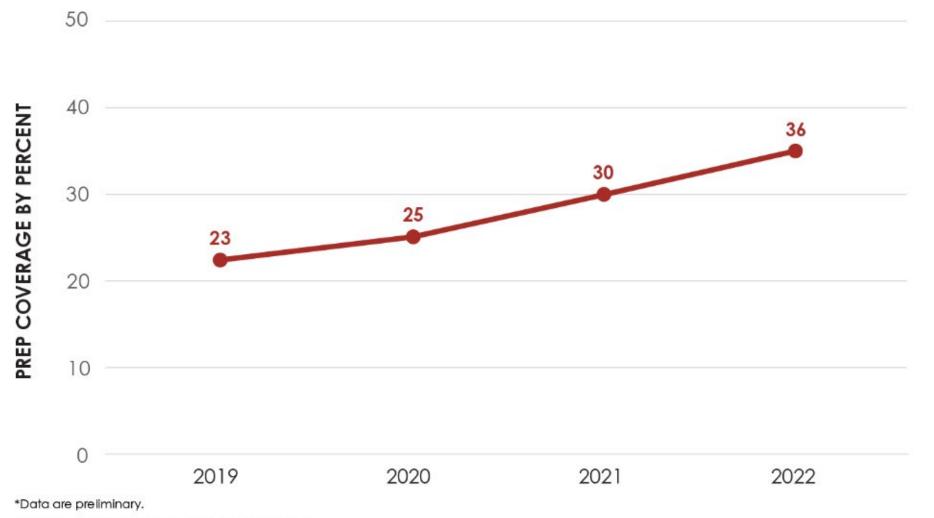
## Introduction

Carl Schmid Executive Director HIV+Hepatitis Policy Institute

Biomedical HIV Prevention Conference April 19, 2024

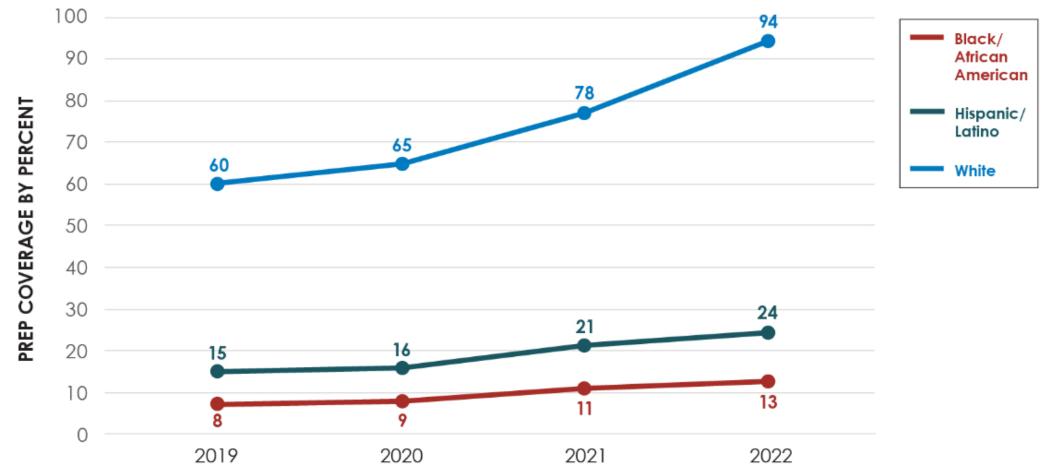


### **OVERALL TRENDS IN PREP PRESCRIPTIONS** AMONG PEOPLE WHO COULD BENEFIT, 2019-2022\*



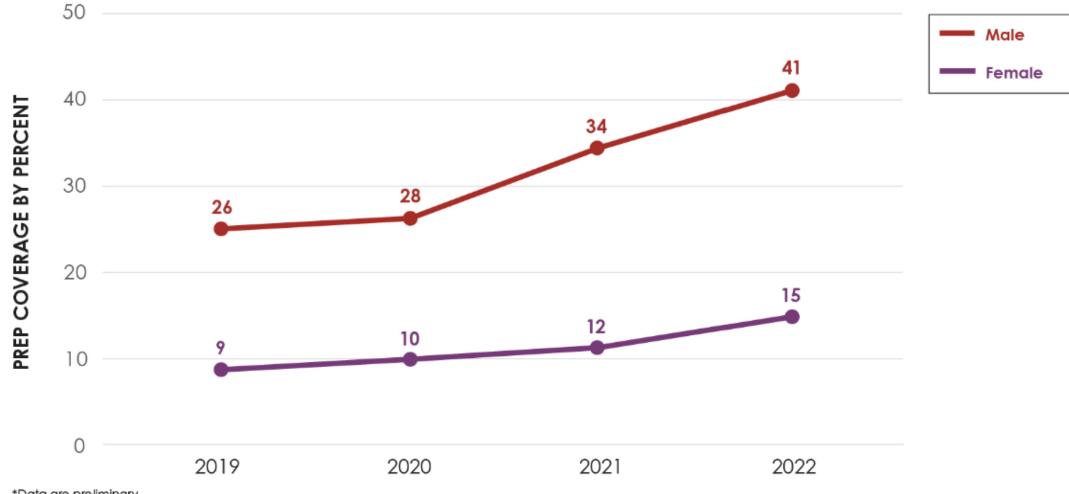
Source: Centers for Disease Control and Prevention

### TRENDS IN PREP PRESCRIPTIONS AMONG PEOPLE WHO COULD BENEFIT, BY RACE/ETHNICITY, 2019-2022\*



<sup>\*</sup>Data are preliminary. The data on PrEP prescriptions by race and ethnicity are limited, and findings are estimated. Source: Centers for Disease Control and Prevention

### TRENDS IN PREP PRESCRIPTIONS AMONG PEOPLE WHO COULD BENEFIT, BY SEX AT BIRTH, 2019-2022\*



\*Data are preliminary.

Source: Centers for Disease Control and Prevention

# Estimated number of people using PrEP by payer type and race/ethnicity, 2022

	Black	Hispanic	White	Other Race	All Race/ Ethnicities
Medicare	2,572	2,705	9,764	787	15,828
Medicaid	17,144	12,012	27,179	3,841	60,177
Private Insurance	53,414	52,857	183,523	17,923	307,718
Uninsured	9,817	11,486	15,738	2,270	39,310
All Payer Categories	82,947	79,060	236,205	24,821	423,032

# Results for number of PrEP-eligible individuals in 2019, adjusted to match AHEAD estimates

Insurance status	MSM	HET	PWID	Total
Medicare (65+ only)	20,452	6,484	1,822	28,759
Medicaid	95,836	140,769	43,566	280,171
Uninsured	156,552	64,989	20,268	241,809
Privately insured	592,090	61,973	11,408	665,472
Total	864,931	274,216	77,063	1,216,210

Number of person-years of PrEP use by payer type and race/ethnicity 2022 through 2031

Number of Person-Years among those Eligible for PrEP*	Black	Hispanic	White	Other Race	All Race/ Ethnicities
Medicare	42,309	31,210	98,173	12,045	183,739
Medicaid	570,331	290,094	273,268	108,376	1,242,069
Private Insurance	1,025,073	678,234	1,845,198	368,540	3,917,044
Uninsured	340,789	392,447	230,343	69,764	1,033,341
All Payer Categories	1,978,502	1,391,984	2,446,982	558,725	6,376,193

https://hivhep.org/wp-content/uploads/2022/11/PrEP\_Cost\_Final\_Report\_21November2022.pdf

### Estimated person-years of HIV infections averted over 10 years -UPDATED

	Men who have sex with men	Heterosexuals	People who inject drugs	All transmission groups
Person- years of infections averted	53,513	14,692	6,335	74,540
Person- years of infections averted	Updated to ind	Updated to incorporate gradual increase of long- acting agents.		

### \$4.25 billion saved (87% increase over oral PrEP only)

https://hivhep.org/wp-content/uploads/2022/11/PrEP\_Cost\_Final\_Report\_21November2022.pdf https://hivhep.org/wp-content/uploads/2024/02/PrEP\_Cost\_HIV\_Incidence\_Updates\_Memo\_20231128.pdf

### Cumulative estimated PrEP costs by category and payer type over 10 years (2021\$)

By payer	PrEP drugs	Ancillary services	Outreach & PrEP navigation	Total
Medicare	\$10,626,990	\$1,669,267	N/A	
Medicaid	\$0	\$0	N/A	
Private insurance	\$0	\$0	N/A	
Uninsured	\$421,628,704	\$995,028,874	N/A	
All payer categories	\$432,255,694	\$996,698,141	\$4,751,687,500	\$6,180,641,335

https://hivhep.org/wp-content/uploads/2022/11/PrEP\_Cost\_Final\_Report\_21November2022.pdf

# Biden Includes PrEP Program In Budget, But Specifics Unclear

By Luke Zarzecki / March 11, 2024 at 7:33 PM



The Biden administration's budget request for fiscal year 2025 includes a proposal to establish a national program for delivering HIV pre-exposure prophylaxis (PrEP) to patients, which it says would cost about \$9.7 billion over the period between 2025 and 2034 but save the government even more money, about \$10.6 billion, by proposing to eliminate barriers to accessing PrEP under Medicaid. However, the administration hasn't shared specifics on what obstacles it proposes to remove.

"To help end the HIV epidemic, the Budget eliminates barriers to accessing pre-exposure prophylaxis--also known as PrEP--for Medicaid beneficiaries and proposes a new mandatory program to guarantee PrEP at no cost for all uninsured and underinsured individuals and provide essential wrap-around services," the <u>budget proposal</u> published Monday (March 11) says.

### **Congressional Response – 118th Congress**

### PrEP Access and Coverage Act

- Rep. Adam Schiff (D-CA) (<u>HR 4392</u>)
  - ► 74 co-sponsors
- Sen. Tina Smith (D-MN) (S 2188)
  - No co-sponsors
- Zero cost-sharing coverage by all payers
- Grant programs for clinics, community & provider outreach



#### House Proposes to Gut Ending HIV Programs Spending Cuts & Policy Riders Must Never Become Law

*Washington DC...* The House Labor, HHS Appropriations Subcommittee has passed a FY2024 spending bill that would eliminate all \$542 million in funding for the *Ending the HIV Epidemic in the U.S.* initiative, a historic effort to end HIV begun by former President Trump. The Ending the HIV Epidemic (EHE) cuts include \$220 million at the CDC; \$165 million from the Ryan White HIV/AIDS Program, and \$157 million from HRSA Community Health Centers that focus on PrEP.

### Congress Agrees to Maintain Funding for Domestic HIV Programs Rejects House Republicans' Cuts & Program Eliminations

*Washington DC...* "After House Republicans initially put at risk the nation's progress in ending HIV, we are relieved that House and Senate congressional negotiators have agreed to maintain funding for domestic HIV prevention, care, and treatment programs," said **Carl Schmid, executive director** of the **HIV+Hepatitis Policy Institute.** 

### **Biden Budget Maintains Domestic HIV Funding** & Proposes PrEP & Hepatitis C Programs Also Caps Prescription Drug Costs for Patients with Private Insurance

*Washington DC...* President Biden has proposed to basically maintain current funding levels to address both HIV and hepatitis programs in the United States as part of his <u>FY2025 budget proposal</u>. The budget also includes the establishment of new mandatory spending programs to increase access to PrEP, which are medications that prevent HIV, and to end hepatitis C, which can be cured with daily oral medications in as little as 8-12 weeks. Both these initiatives must be congressionally authorized and were proposed in prior budgets.

### **Existing Programs**

Medicaid **State PrEPDAPs** CDC HIV Program CDC STD Program Community Health Centers **Private Sector Programs** Ready, Set, PrEP Private Insurance Medicare

### **Presenters**

- Health Insurance: Public and Private
  - **Kevin Herwig**, HIV+Hepatitis Policy Institute, Washington, DC
- State Health Departments
  - Amanda Rivera, CO Department of Public Health and Environment, Denver, CO
- Community Health Centers
  - Elena Usui, East Boston Neighborhood Health Center, Boston, MA
- Sexual Health Clinics
  - **Ralston Lockett, NP**, Allies in Hope, Houston, TX
- Pharmacies and Clinics
  - Michelle Sherman, PharmD, Avita Pharmacy, Dana Point, CA
- Telemedicine
  - Tristan Schukraft, MISTR, Los Angeles, CA



## Thank you!

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