

Key PrEP Policy Issues Impacting Access for Insured Populations

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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

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

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

ACA Preventive Service Requirements

- ▶ **ACA requires all non-grandfathered private insurance plans to cover preventive services with no cost-sharing**
- ▶ **June 2019: U.S. Preventive Services Task Force (USPSTF) issued "A" rating for PrEP**
 - ▶ January 2021: All plans must comply
- ▶ **FAQ issued July 2021**
 - ▶ PrEP & ancillary services must be covered w/o cost-sharing



Many Americans still paying high costs months after insurers were ordered to cover HIV preventive care

By Sarah Varney, Kaiser Health News

Published 6:19 AM EST, Mon February 28, 2022

Anthony Cantu, 31, counsels patients at a San Antonio health clinic about a daily pill shown to prevent HIV infection. Last summer, he started taking the medication himself, an approach called preexposure prophylaxis, better known as PrEP. The regimen requires laboratory tests every three months to ensure the powerful drug does not harm his kidneys and that he remains HIV-free.

HIV groups struggle to get insurance coverage for expensive prevention drugs, lab tests



Ken Alltucker, USA TODAY

September 26, 2022 · 6 min read



When Nicklaus Chalk started law school at the University of California, Berkeley, last fall, one of his top priorities was to take care of his health.

The 24-year-old student visited a doctor to get a prescription for the HIV prevention medication called preexposure prophylaxis, known as PrEP. The treatment requires routine lab testing for HIV, other sexually transmitted infections and kidney health.

He was astonished when he was billed about \$2,000 for lab tests and related medical care despite being covered by his parents' health insurance plan. Fearing another surprise bill he can't afford, he's refused to refill his prescription even though skipping the daily medication increases risk for infection.

Despite federal rules, HIV prevention drug still comes with costs

The billing errors have forced some to stop taking the medicine, putting them at heightened risk of contracting the virus.

By [Jessica Bartlett](#) Globe Staff, Updated January 8, 2023, 4:58 p.m.



Henry Henderson was billed more than \$200 every three months for a medication he should have received free of charge. CRAIG F. WALKER/GLOBE STAFF

Sens. Merkley, Smith, Colleagues Sound Alarm on Unlawful Charges for PrEP Patients

*Targeted News Service
(Press Releases)*

WASHINGTON, Sept. 9 -- Sen. Jeff Merkley, D-Oregon, issued the following news release and letter on Sept. 8, 2022:

Oregon's U.S. Senator Jeff Merkley and Tina Smith (D-MN) are joined by Senators Chris Van Hollen (D-MD), Elizabeth Warren (D-MA), Bernie Sanders (I-VT), Tammy Baldwin (D-WI), Edward J. Markey (D-MA), and Cory Booker (D-NJ) in a letter to AHIP, the trade association representing health insurance companies. The letter expresses concerns about the continued practice of unlawfully charging individuals for pre-exposure prophylaxis (PrEP) medication and related care.

AG Campbell Leads Multistate Coalition, Issues Consumer Advisory Supporting Access to HIV Prevention Drugs and Services at No Cost to Patients

FOR IMMEDIATE RELEASE:

3/01/2023

Office of the Attorney General

BOSTON — Massachusetts Attorney General Andrea Joy Campbell has led a coalition of 22 attorneys general in submitting a letter to the Centers for Disease Control and Prevention (CDC) and National Center for Health Statistics (NCHS) advocating for a new diagnostic code for Pre-exposure Prophylaxis (PrEP) for HIV prevention in the International Classification of Diseases – Tenth Revision (ICD-10), which would reduce coding ambiguity and ensure that patients are not improperly charged copays for preventative services.


Today, AG Campbell also issued an [advisory](#) for Massachusetts consumers with information about the right to PrEP and associated services without any out-of-pocket costs in most instances.

MEDIA CONTACT

Thomas Dalton, Deputy
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 Phone

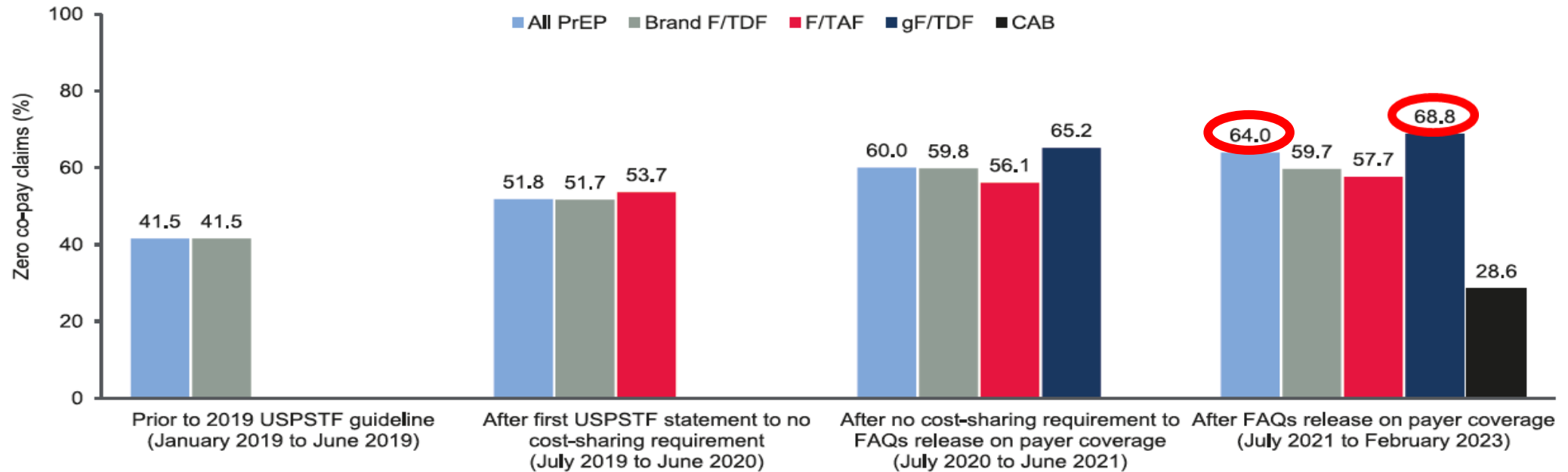
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Private insurance continues to charge unlawful copays for PrEP

Figure 3. Impact of USPSTF guidelines on breakdown of percentage zero co-pay claims (monthly average)*

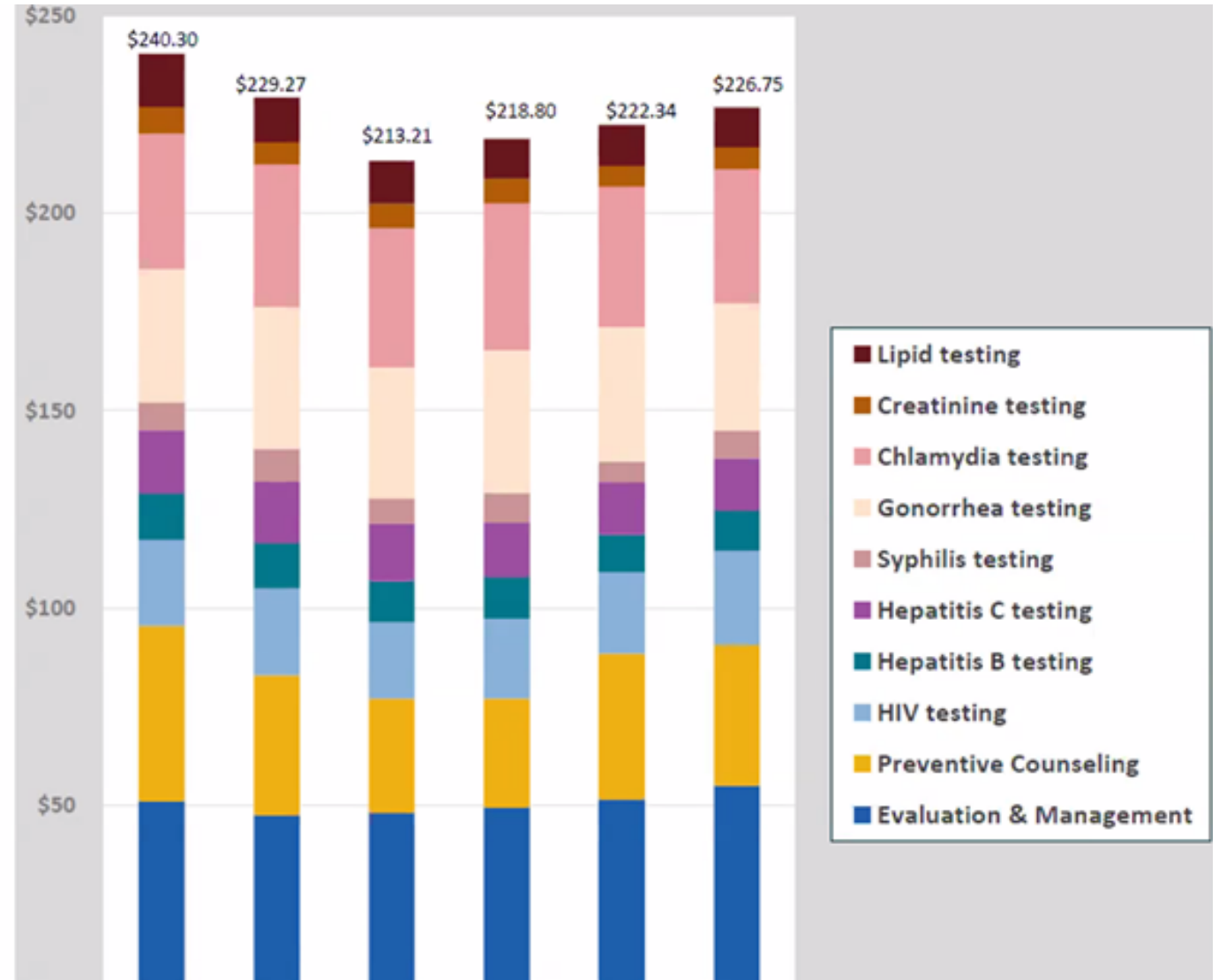


The number of claims per product are as follows: brand F/TDF, 858579; F/TAF, 1382833; gF/TDF, 1455182; CAB, 9576. *Due to the timing of product availability, some data are missing for earlier years. CAB, cabotegravir; F/TAF, emtricitabine/tenofovir alafenamide; F/TDF, emtricitabine/tenofovir disoproxil fumarate; FAQ, frequently asked questions; gF/TDF, generic emtricitabine/tenofovir disoproxil fumarate; PrEP, pre-exposure prophylaxis; USPSTF, United States Preventive Services Task Force.

Zachry et al. **Impact of the United States Preventative Services Task Force (USPSTF) Guidelines on Pre-Exposure Prophylaxis (PrEP) Claims and HIV-1 Infection Incidence: an Interrupted Time Series with Segmented Regression Analysis.** AMCP-Nexus 2023, Orlando, FL

Out of Pocket Payments

- 1 out of 3 commercially-insured persons were charged cost sharing for PrEP despite ACA financial protections (2022)
- Mean OOP annual payments for PrEP services 2017-2022: \$226.75
- ~50% of costs were for the provider visit



Out-of-Pocket Payments for PrEP Ancillary Services Among US Commercially Insured Persons, 2017-2022

Ya-Lin A. Huang, Weiming Zhu, Rupa R. Patel, Sloan A. Bowman,
Karen W. Hoover HIV Research Branch, Division of HIV Prevention, Centers for Disease Control and Prevention, Atlanta, GA

Solutions

- ▶ **Continued Complaints w/state Insurance Commissioners**
- ▶ **White House convening on PrEP copays**
 - ▶ CCIIO, DOL (ERISA plans), CDC
 - ▶ Need enforcement
- ▶ **NASTAD billing & coding guide**
- ▶ **Updated Guidance for Long-Acting & New PrEP**
- ▶ **PrEP Access & Coverage Act [HR 4392/S 2188](#)**
- ▶ **State laws & policies**
 - ▶ No prior authorizations

Medicare

- ▶ **Plans Cover PrEP (Part D)**
 - ▶ Out-of-pocket costs can be high
 - ▶ Some plans cover LA PrEP
- ▶ **National Coverage Determination (NCD) (Part B)**
 - ▶ Conducted for long-acting PrEP
 - ▶ Part D coverage for daily oral PrEP would end
 - ▶ Many pharmacies do not bill for B
 - ▶ Complicated processes
 - ▶ Gain advantage of no cost-sharing, broader coverage, including future PrEP drugs

Medicaid

- ▶ **Covers PrEP & ancillary services**
 - ▶ Daily Oral and Long-Acting
- ▶ **Little or no copay**
- ▶ **Low Utilization**
 - ▶ Need outreach to increase uptake

Thank you!

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