

# AIDS Drug Assistance Program Overview

HIV Care Services  
Division of Disease Prevention  
Virginia Department of Health  
October 12, 2017

# Background

- The Virginia AIDS Drug Assistance Program (ADAP) provides access to life-saving medications for the treatment of HIV and related illnesses for low-income clients through the provision of medications or through assistance with insurance premiums and medication co-payments.
- Waitlist implemented in November 2010
- In November 2011, new clients and wait-listed clients were enrolled back onto ADAP
- In August 2012, the waiting list was eliminated and enrollment was opened to all persons who met current ADAP criteria.
- In 2014, ACA implementation began with the majority of ADAP clients moving to insurance.

# Eligibility Criteria

- Resident of Virginia.
- Have an individual or family income at or below 500% of the Federal Poverty Level.
- Have a documented HIV diagnosis
- Not qualify for or have Medicaid.
- Provide proof of income, changes in insurance coverage, or any changes in residency every six months for recertification. Failure to report changes in factors impacting eligibility may result in discontinuation of ADAP services.

# ADAP Service Options

- **Direct ADAP-** HIV/AIDS medications distributed through Local Health Departments (LHDs) or medication access sites across the state
  - **VDH pays for:**
    - Medications on ADAP formulary.
- **Health Insurance Marketplace Assistance Program (HIMAP)-** Clients obtain health insurance through the Affordable Care Act.
  - **VDH pays for:**
    - Monthly premiums for VDH approved ACA plans.
    - Medication copayments for medications approved by primary insurance.

# ADAP Service Options

- **Medicare Part D Assistance Program (MPAP)** - Assists clients with Medicare Part D.
  - **VDH pays for:**
    - Monthly premiums for Part D plan.
    - Medication copayments for medications approved by primary insurance (Part D plan).
- **Insurance Continuation Assistance Program (ICAP)**- Assists clients with certain private health insurance plans.
  - **VDH pays for:**
    - Medication copayments/deductibles for medications on ADAP formulary AND Ryan White Part B formulary.

# Enrollment Update

Total:

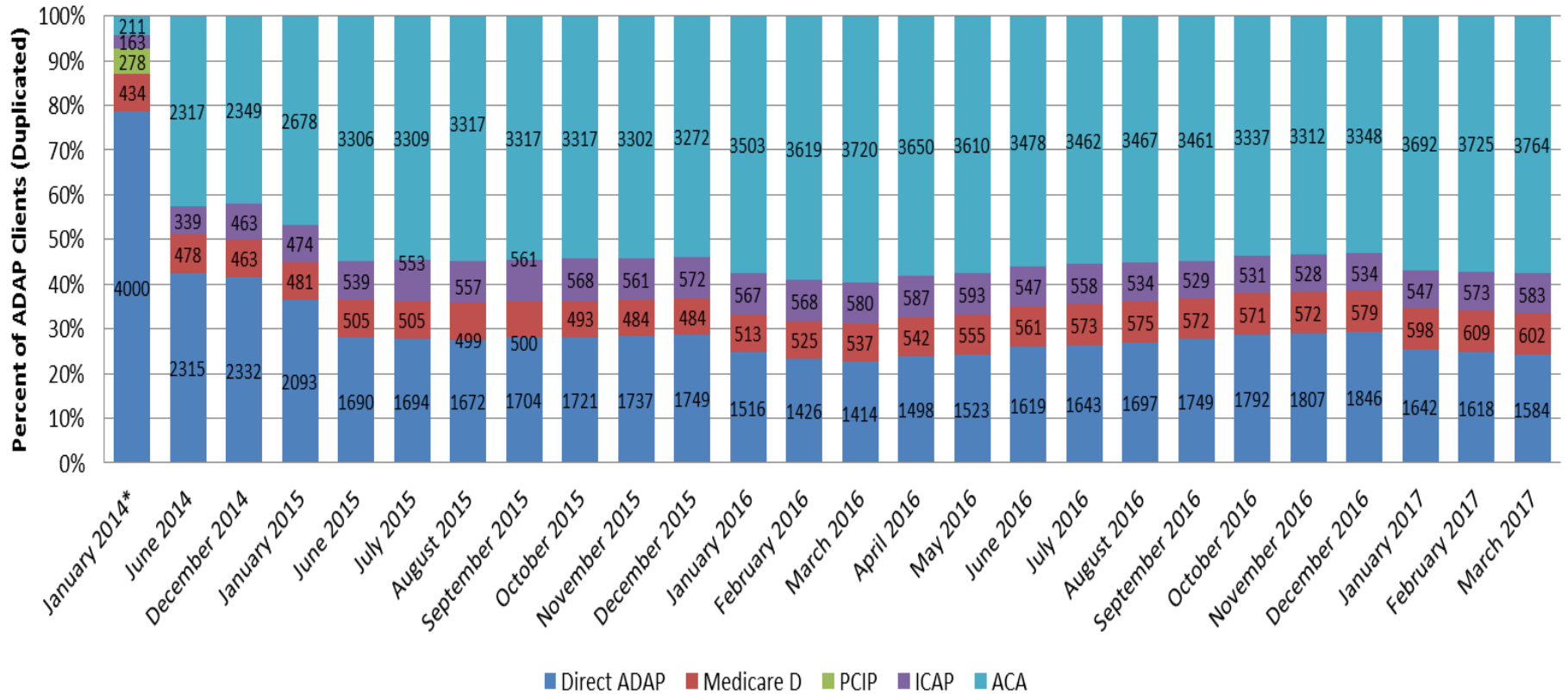
Direct ADAP:

HIMAP:

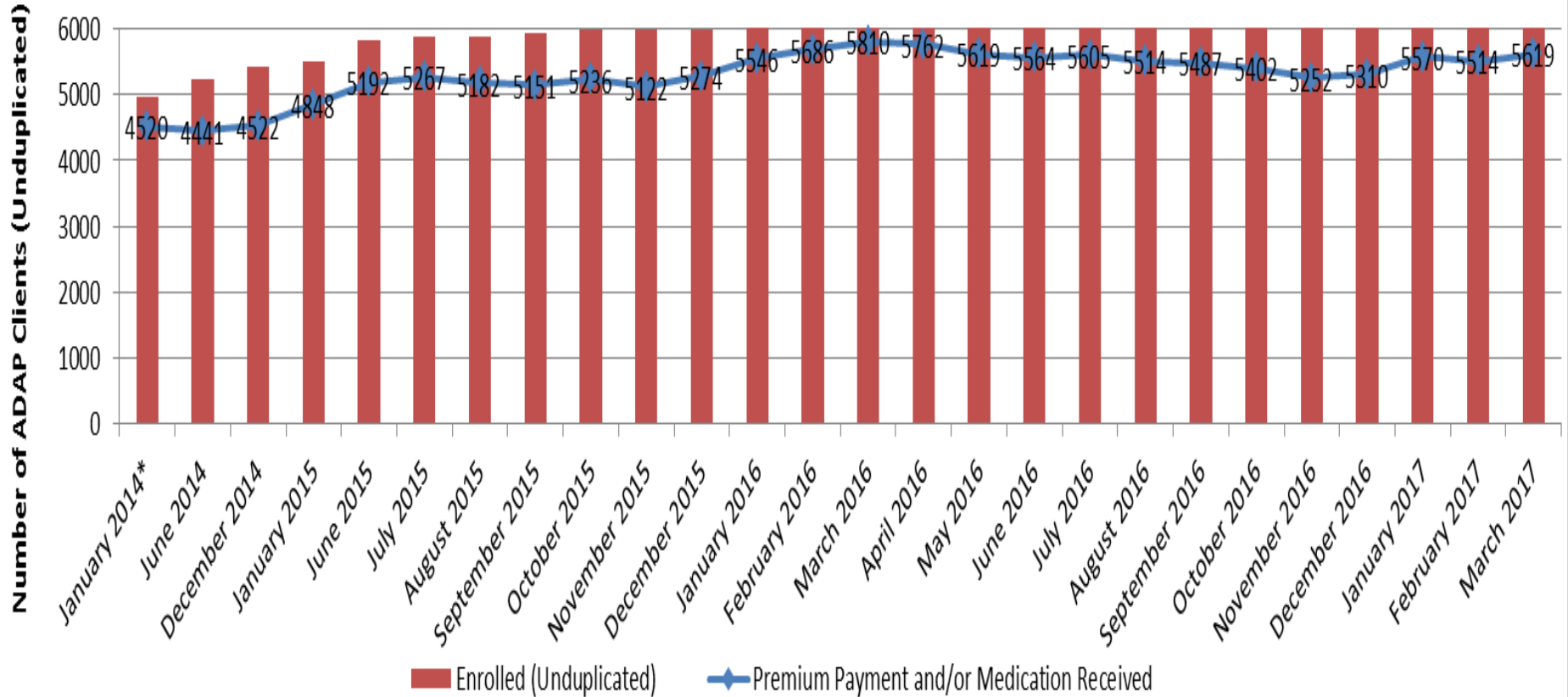
MPAP:

ICAP:

## ADAP Enrolled by Program: 2014 to 2017



## ADAP Clients Enrolled and Receiving Premium Assistance/Medications: Unduplicated 2014 to 2017





# Recertification

- The purpose of recertification is to ensure all ADAP clients meet current eligibility criteria.
- Every client is to complete recertification twice per year. VDH currently updated the recertification process and now conducts recertification during the clients last application date and 6 months after that date.

# Recertification Follow Up

- Lists are sent to each medical provider 3 months prior to eligibility end date.
- Each recertification letter that is sent out, has a due date by which the materials need to be returned.
- VDH follows up with clients about missing supporting documentation. Clients that do not return recertification documents by due date are not eligible to receive Ryan White services.

# ADAP Quarterly Calls

- Held quarterly to inform stakeholders of any programmatic, policy and formulary updates.
- Opportunity to engage stakeholders, obtain feedback, and answer questions.

# Formulary

- Includes over 100 medications
  - Includes medications from all ARV drug classes
  - Opportunistic Infection medications
  - Smoking Cessation medications and Nicotine Replacement Therapy products
  - Vaccines
- In June 2015, Hepatitis C medications were added to the formulary

# Pharmacy Model

- Central Pharmacy distributes Direct ADAP medications to over 100 LHDs and medication access sites across the state.
- Central Pharmacy tracks all ADAP medication purchases including the balance of available funds for medication purchase.

# Affordable Care Act Implementation

- Began with the Pre-Existing Condition Insurance Program (PCIP) in January 2013.
- Continued during the inaugural open enrollment period for the Affordable Care Act (ACA) in 2014.

# ACA Implementation

- VDH reviews insurance plans to ensure federal funds can be used towards premiums and medication copayments. Review criteria includes:
  - Premium Costs
  - Medication Formulary
  - Provider Network
  - Geographic coverage
- VDH worked with the Bureau of Insurance (BOI) to obtain access to the insurance plan information beginning in 2015.

# Pharmacy Benefits Manager

- VDH currently utilizes Ramsell for the insured population to access medications.
- There are over 1,200 retail pharmacies in Pharmacy Benefits Managers (PBMs) network.
- Provides:
  - Point of service drug cost-sharing
  - Drug utilization review
  - Service utilization reports
  - Help Desk Support



# Third Party Premium Payer

- VDH contracted with Transition Assist to pay monthly premiums for health insurance from 2014 to August 2016.
- A contract with Benalytics was established in September 2016.

# ADAP Advisory Committee

- Created in 1996.
- Comprised of HIV/AIDS medical providers, a pharmacist, consumer, and LHD staff.
- Advises VDH on formulary changes, as well as programmatic, clinical, and educational issues as needed.
- Meetings held quarterly.

# Medication Eligibility Hotline

1-855-362-0658

ADAP website

[www.vdh.virginia.gov/ADAP](http://www.vdh.virginia.gov/ADAP)