Rapid ART Payment Options for Same-Day Medication Provision

Paying for Rapid ART

Providing Rapid ART to clients often involves making sure that clients have access to medication prior to being enrolled in an insurance they qualify for. Because of this, it is important to know what options are available to ensure that clients can access medication during their initial visit without facing an unexpected cost (for the client and/or the clinic) that will prevent the client from starting medication.

Advance Planning Option

Some options for ensuring that clients can access ARTs require advanced planning. To provide starter packs, clinics need to have a process in place to make sure that starter packs are available onsite. If starter packs are provided by pharmaceutical companies, you will need to find out whether your clinic has any policies that prohibit accepting samples. If you choose to purchase medication and make your own starter packs, you could use the Ryan White Ambulatory Outpatient Medical budget. Both options require planning in advance to develop a workflow to ensure that starter packs are available on site.

Starter Packs

- Starter packs are a package of pills that you can provide same-day to your client for access to Rapid ART medication
- Pill packs typically include 3-7 days of coverage dispersed by clinic during Rapid visit
- Starter packs allow flexibility when beginning clients on ART

Who is eligible?

- ✓ When a client can't stay for the whole visit, or the visit needs to be expedited for any reason
- ✓ When insurance barriers prevent a client from receiving a full prescription in a timely manner
- ✓ When a client is ineligible for state-funded programs.
- ✓ When clinic staffing prevents other enrollment options
- √ When a pharmacy is closed or out of stock
- If your clinic does not have pharmaceutical donation restrictions

How to Access

- Contact your local pharmaceutical representatives
- Starter packs can be purchased through your Ryan White Ambulatory Outpatient Medical (AOM) budget using the line item "Other" (contact your DHSP program manager)











No Advance Planning Required

Some options to ensure clients can receive ART prior to obtaining insurance require no advanced planning, justknowledge of what programs are out there. Patient Assistance Programs are made available through pharmaceutical companies or the state and provide temporary access to medications at no cost to the clinic or the client. Steps will need to be taken to make sure the client is eligible for one of these programs and a short application is usually needed to get the client on one of these options.

Patient Assistance Programs

Patient assistance programs are easy-to-access programs that can cover drug costs up to the first year of ART. These are made available by pharma companies or other organizations. Some patient assistance programs include, but are not limited to:

Who is eligible?

ViiV Connect (Dolutegravir)

- When a client is uninsured, not fully covered by Medi-Cal or other third-party payers
- When a client does not have a Social Security Number
- ✓ Have a household income less than or equal to 500% of the Federal Poverty Level based on household size

How to Access

Via fax or online portal https://www.viivconnect. com/for-providers/financial-support/

Gilead Advancing Access (Bictegravir/TAF/FTC, TAF/FTC, and TDF/FTC)

- When a client is uninsured, not fully covered by Medi-Cal or other third-party payers
- When a client does not have a Social Security Number
- ✓ When a client has an annual Modified Adjusted Gross Income (MAGI) that does not fall below 100% of the Federal Poverty level (FPL) (\$13,590 for single person in 2023) or exceed 500% of the FPL (\$67,950 for single person in 2023) based on family size and household income
- Via fax or online portal https://www.gileadad vancingaccess.com/financial-support/uninsured
- Gilead's Advancing Access Program also works as a tool to perform a soft benefits verification for sites that do not have insurance look-up access. Enrollment denials due to existing insurance coverage will produce a "Summary of Benefit" report that typically includes plan name and ID number
- Once an application is submitted, call Advancing Access for expedited determination

Janssen 30 Day Trial (Darunavir/cobicistat/TAF/FTC)

- Patients who have commercial insurance, government coverage, or no insurance; however, there is no guarantee of continuous accessibility after the program ends
- To get a Trial Offer, text "VOUCHER" to 41949. Message and data rates may apply
- Once registered, an electronic version of the Trial Offer card that can be saved to a digital wallet on an iPhone or Android device will be accessible

Patient Advocate Foundation (PAF) Co-Pay Relief Program

- Client must have active insurance coverage.
- Client must have household income at or below 300% or 400% of the FPL
- When a client with Medicare falls into the Part D donut hole (\$4,660 in 2023)
- https://copays.org/providers/
- PAF will provide instant approval and printable benefits info that may be used immediately at pharmacy

Co-Pay Card Programs

Almost all pharmaceutical companies have some form of co-pay card or coupon assistance that are quickly accessible online with minimal or no application process.

This is useful for clients with varying private insurance coverage who may have a copay while ADAP or other longer-term assistance is pending approval. Often excludes individuals with Medi-Cal, Medicare, VA, or Tricare. Works with most pharmacies, however some mail-order pharmacies may not accept copay cards

(commonly used pharmaceutical companies)

- Gilead: Bictegravir/TAF/FTC, TAF/FTC, and TDF/FTC https://www.gileadadvancingaccess.com/copaycoupon-card
- Will cover up to \$7,300 annually
- ViiV: Dolutegravir https://myviivcard.com/
- Janssen: Darunavir/cobicistat/TAF/FTC https://www.myjanssencarepath.com/user/ register/patient?flow=express&product=Symtuza
- Other Medications:
 - Manufacturer websites will have copay card info as needed

ADAP Temporary Access Program

ADAP Temporary Access Program (TAP) allows immediate coverage for ART for 30 days prior to eligibility determination

Note: The ADAP drug formulary also includes several non-ART meds such as OI treatments, Hep B and C treatments, and substance use and mental health treatments

Who is eligible?

- ✓ For first pharmacy fill after starter pack completion
- ✓ For patients who need 4 drug regimen or other special regimens not stocked as a starter pack
- ✓ For someone who is not Medi-Cal eligible, for instance due to income requirements, but is also uninsured
- ✓ For clients who are ADAP eligible and for clients who present without all documents necessary for full enrollment

How to Access

- Proof of diagnosis is needed to trigger TAP acceptance
- Submit an application online. This typically takes 20 minutes to complete