

FLORIDA AIDS DRUG ASSISTANCE PROGRAM
September 27, 2012 Statewide Conference Call Minutes
10:00 a.m. – 11:20 a.m.

Counties Represented: Alachua, Bay, Brevard, Broward, Charlotte, Collier, Duval, Escambia, Flagler, Franklin, Gadsden, Hendry/Glades, Hillsborough, Holmes, Indian River, Jefferson, Lake, Lee, Leon, Liberty, Madison, Manatee, Martin, Miami-Dade, Monroe, Nassau, Okaloosa, Okeechobee, Orange, Palm Beach, Pasco, Pinellas, Seminole, St. Johns, St. Lucie, Taylor, Volusia, Wakulla, Washington

Headquarters Participants: Lorraine Wells, Stephanie Brown, Steven Badura, Jimmy Llaque, Makeshia Barnes, Paul Mekeel, Ashok Rajendran, Joe May, Eunice Suwaya, Annie Roderick, Allison Roberts

PROGRAM UPDATE

■ Funding update.

We have good news to report on Florida's ADAP funding. We have received our final ADAP Part B supplemental award for 2012-13 in the amount of \$1.8M.

In April, Florida received the Ryan White Part B notice of grant award. Over \$94 million was earmarked for ADAP and supplemental funds.

In July 2012, the Health Resources and Services Administration (HRSA) announced that Florida ADAP would receive \$6.9 million in continuing ADAP Emergency Relief Funds (ERF), and an additional \$4.5 million in new, competitive ERF funding.

During the 2012 Legislative Session, Florida lawmakers provided an additional \$2.5 million to ADAP for the 2012-2013 state fiscal year.

In August 2012, HRSA awarded Florida an additional \$1.8 million in ERF—for a total of \$13 million in ERF for Ryan White FY 2012/2013.

Our final award from HRSA for the 2012 Ryan White year was received on September 10th. Florida ADAP was awarded \$1.8 million in Part B Supplemental Funding, an increase of \$785K from last year. This funding will be used to remove more clients from the waiting list and meet the increasing demand for services.

■ ITN

The Invitation To Negotiate (ITN) has been posted since August, 2012. If you have not read it, please take a moment to do so to get an idea of what services are being solicited.

The time-line for the ITN is as follows:

- Vendors submit their proposals by 8/27/2012
- Evaluation of the proposals ended 9/26/2012
- Negotiation session will begin on the 10th of October, 2012
- Awards posted 10/22/2012

Once the awards are posted, we will begin the process of having more open discussions and planning for implementation. Given the guidelines and structure of DOH's procurement process, there cannot be discussions at this time.

Your feedback through the county self-assessment is being utilized to inform the ITN process.

The implementation timeline will be determined once a vendor or vendors are selected.



COUNTY SELF-ASSESSMENTS

- ADAP headquarters received great feedback and response from all but one county—due to the fact that no one is currently there as staff or backup. County consultants will be looking at the assessments for feedback or responses if needed.

Assessments will be used for future program planning.

MEDICARE PART D CLIENTS

- 803 clients with Medicare Part D are currently enrolled in the ADAP Premium Plus with a majority of clients having moved through the donut hole and are now in the catastrophic phase of their Part D plans.

We have received calls from case managers regarding the ADAP Premium Plus services. Please share with your ADAP-Part D clients that they can access Premium Plus services through CVS Caremark continuously year-round, even after they go through the donut hole, as ADAP will cover co-pays.

Our program office sent a list of clients who have not accessed Premium Plus services through CVS within the last 60 days. Local ADAP staff must contact these clients and follow-up with each person to determine if or where they have been picking up their medications. ADAP does not hold slots for clients who leave the program or are closed at anytime during their enrollment. If a client is closed for any reason, he/she may be placed on the waiting list until such time that funding is available.

- **MEDICARE PART D OPEN ENROLLMENT**

Medicare Part D Open Enrollment starts October 15. The lists of clients who are eligible for this year's open enrollment were sent out to the corresponding counties on September 13. ADAP staff should work in coordination with their local case management agencies to contact these clients accordingly. Clients who are eligible but choose not to enroll in a Part D plan during the open enrollment period will not be eligible to receive ADAP services and their records will be closed on December 31. Such clients will not be placed on the ADAP waiting list.

In addition, this open enrollment period is an opportunity for many clients to review their current available options and perhaps switch to a plan that better suits their needs and services. Clients who need assistance from ADAP should consider Part D plans that include CVS Caremark within their network of pharmacies. A list of Medicare Part D plans that do not have CVS as part of their network of pharmacies will be sent to the counties. This will assist clients in making a decision for Part D enrollment.

PAP – SINGLE FORM

- There is a new PAP application form titled:
COMMON PATIENT ASSISTANCE PROGRAM APPLICATION (HIV)

HHS, working collaboratively with seven pharmaceutical companies, the National Alliance of State and Territorial AIDS Directors, and community stakeholders, has taken the lead in developing a common patient assistance program application tool that can be used by patients and providers beginning on September 12, 2012. This form is a one-stop shop that collects the necessary information required of HIV patient assistance program applicants.

Seven companies, Abbott Laboratories, Boehringer Ingelheim, Bristol-Myers Squibb, Gilead Sciences, Johnson & Johnson (Janssen Therapeutics), Merck and ViiV Healthcare are participating.

To date, uninsured individuals who relied on PAPs to pay for their HIV meds had to apply separately to each manufacturer for the various drugs in their regimens. Requirements vary by drug company and are noted on the application.

The application can be found at <http://hab.hrsa.gov/patientassistance/index.html>.

Please note: this is a standard paper application that will need to be faxed or mailed. The form will also be linked from the ADAP intranet site under 'LINKS' and internet site under the 'PROGRAM INFO' tab, under 'REPORTS AND OTHER DOCUMENTS'.

HARBORPATH

- HarborPath is a "one stop shop" portal designed to provide a streamlined, online process helping the uninsured living with HIV/AIDS gain access to free medications offered by Patient Assistance Programs. FL ADAP will be working with HarborPath to implement a pilot program in Miami-Dade and Broward.

HarborPath worked closely with the National Alliance of State and Territorial AIDS Directors (NASTAD) and the Clinton Health Access Initiative (CHAI) to create this program. More information about the program is available on their website located at www.harborpath.org

ADAP TRAININGS

- The training format will be changed in 2013 and will offer face-to-face trainings in Tallahassee. For information on available trainings in 2012, please visit the ADAP intranet site.

TRANSFER OF CLIENT RECORDS

- If a client relocates or chooses to receive services in a different county:
 1. The new ADAP servicing county must request the client's file, verbally and in writing (encrypted e-mail) from the previous CHD. The new servicing CHD should then select Transferred in the database.
 2. The previous ADAP servicing county must transfer a copy of client's file within five (5) days of the request. The files may be placed in the ADAP confidential folder, sent via encrypted e-mail, saved in CAREWare, or mailed by overnight postal. If mailed, the copy must be double enveloped per DOH policy 50-10f-07.
 3. If a file that has been closed previously and is more than 2 years old, does not need to be transferred.
 4. ADAP staff of the new servicing county must immediately notify Central Pharmacy, in writing (encrypted e-mail), of the transfer to ensure the client's mailing address is updated in their system. Please include the client's name, DOB, address and county.

CENTRAL PHARMACY

- The drug refill time-frame of 21 days will not change at this time. If there are any difficulties with refills or delivery dates, please call Central Pharmacy for assistance.

MEDICAL TEAM

■ Stribild

The new drug Stribild from Gilead will be added to the ADAP formulary within the next 45 days. This drug is indicated for treatment naïve patients and has less side effects than other comparable drugs. In addition to three ARVs, it also contains a new boosting agent. It must be taken with a meal.

Until Stribild is added to the formulary, it can be accessed from Welvita for those on the waiting list or the Gilead PAP at 1-800-226-2056. Gilead has removed the waiting list letter criteria due to clients currently in ADAP who may need to access Stribild. Stribild also has a \$400 copay card available.

Pick-ups for Stribild cannot be logged in the ADAP database, since it is currently not on the FL ADAP's formulary.

The medical team will be monitoring Stribild to see how the drug is being used.

■ PrEP

Pre-exposure Prophylaxis

Information and guidelines about TRUVADA when taken for PrEP or for treating HIV infection is available at <http://www.truvada.com/>.

The therapy is for those who will not change their habits and place partners in harms way. PrEP does not qualify to receive funding from ADAP or Part C programs.

CONFERENCE CALL

- Next scheduled conference call is for October 30, 2012.