### Social Determinants of Health Legal Series - Healthcare

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### Welcome and Introductions



### Social Determinants of Health Team



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For more information regarding Social Determinants of Health programming at NASTAD please feel free to contact us.

### Objective

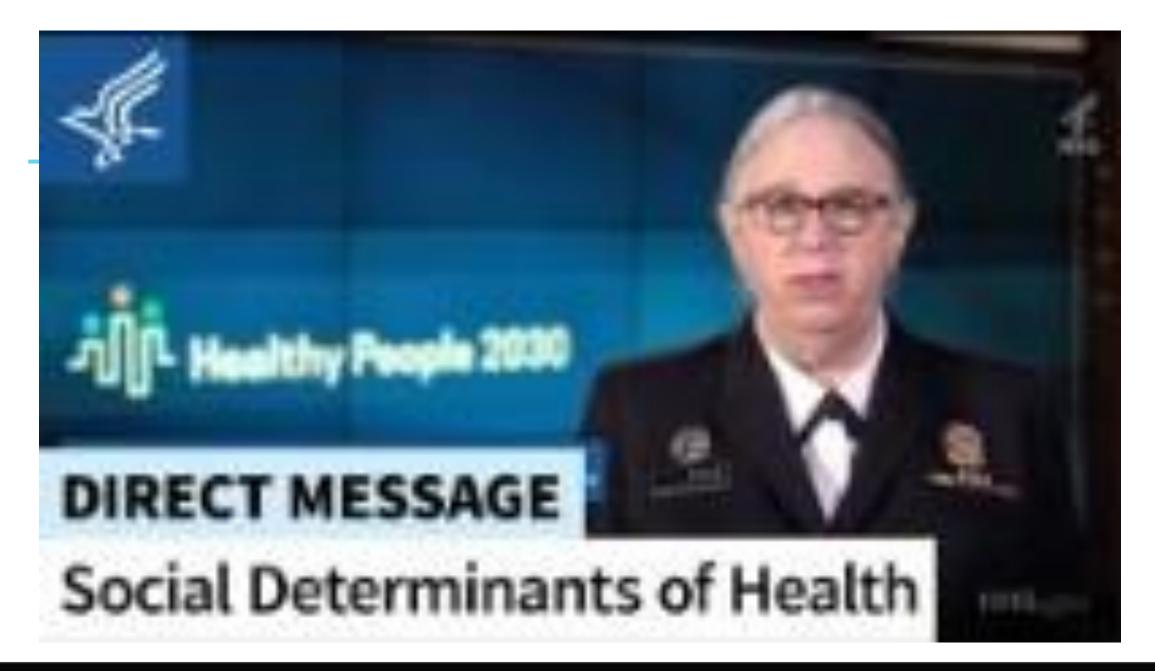
- Brief overview of social determinants of health.
- Review how legislation impacts healthcare access and quality
- Look at current examples of healthcare and legislation like the Ryan White program, Ending the Epidemic (EHE), Medicaid, Medicare, and Affordable Care Act (ACA).
- Identify successes and review current data for healthcare access and quality legislation.
- Complete PrEP care access case studies and group discussion.
- Time for questions, comments, and discussion.

### What is Social Determinants of Health?

### Defining Social Determinants of Health

• The CDC defines social determinants of health(SDOH) as, "conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes."

Centers for Disease Control and Prevention



### Factors of Social Determinants of Health

#### **Social Determinants of Health**



- Socioeconomic status
- Education
- Neighborhood & Physical Environment
- Employment
- Social Support Networks
- Healthcare Access



Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, Office of the Secretary, U.S. Department of Health and Human Services.

### Legislation and Healthcare Access and Quality

# Examples of Legislation & Healthcare

Ryan White

Ending the Epidemic (EHE)

Medicaid and Medicare

The Patient Protection & Affordable Care Act (ACA)

The Inflation Reduction Act





### Who is Ryan White?

- Ryan White is a 13-year-old boy who has diagnosed with AIDS on December 17, 1984, after receiving a blood transfusion.
- He encountered HIV sigma and LGBT discrimination when returning to school in Indiana.
- He was given a prognosis of 6 months to live but he lived 5
  years later than expected and died in April 1990.
- The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act was passed by congress in August 1990.

Health Resources & Services Administration Ryan White HIV/AIDS Program



### Ryan White Programming

People who are low-income living with HIV get assistance through The Ryan White HIV/AIDS Program (RWHAP) which includes:

- Medications
- Help with diagnosis, treatment, and prevention in response to Ending the HIV epidemic (EHE) in the United States.
- Medical Care
- Essential support services for retention in care.

### How does Ryan White work?

Grants are provided to cities, states, counties, and community-based groups that help with:

- Providing care, medication, and essential support services to people living with HIV
- HIV-related health outcomes
- Reduce HIV Transmission

More than 50% of people diagnosed with HIV, receive services through RWHAP.

Health Resources & Services Administration Ryan White HIV/AIDS Program



## Ending the HIV Epidemic in the U.S Initiative (EHE)

- The U.S Department of Health and Human Services (HHS) launched the *Ending the HIV Epidemic(EHE) initiative* in 2019.
- CDC collaborates with national prevention partners to maximize the impact and effectiveness of Treatment as Prevention (TasP).
- In conjunction with the CDC, state and local governments, people with and at risk for HIV, and federal partners work together to expand the highest-impact HIV prevention strategies: Diagnose; Treat; Prevent; and Respond
- Along with providing priority areas with additional resources, technology, and expertise, they also are working to address racial, ethnic, and geographic disparities gaps that happen within HIV.



SOCIAL DETERMINANTS OF HEALTH SERIES

### Community Development Highlights

### New NASTAD Resource

This resource features EHE Phase 1 Jurisdictions interviews on engaging new and nontraditional partners, providing community support, and program successes. We designed this resource to help public health professionals to learn from each other's program successes, strengths, and opportunities.

Community Development Highlights

Please contact Rodderick Sheppard or Kristina Santana for more information.

### Medicaid

• The center for Medicaid and Children's Health Insurance Program (CHIP) oversees all national program policies and operations related to three programs:

- Medicaid
- Children's Health Insurance Program (CHIP)
- Basic Health Program

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U.S Centers for Medicare & Medicaid Services



### Medicaid

#### Medicaid

- Signed into law in 1965.
- All states(including DC and US territories) have Medicaid programs to provide health insurance to people with low-income.

#### Children's Health Insurance Program

- Signed into law 1997.
- Provides coverage to children with families who don't qualify for Medicaid but can't afford private insurance.

#### Basic Health Program

• Through the ACA, states have the option to create a basic health plan for those who do not qualify for Medicaid, C.H.I.P, or have income between 133 percent and 200 percent of the federal poverty line (FPL).

### Medicare

- The federal agency that oversees the Medicare Program is the Centers for Medicare and Medicaid Services (CMS). CMS is a branch of the Department of Health and Human Services (HHS).
- Medicare is health insurance for people 65 or older, people with disabilities, End-Stage Renal Disease, or ALS.

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U.S Centers for Medicare & Medicaid Services



### Medicare



# The Patient Protection & Affordable Care Act (ACA)

#### The Patient Protection and Affordable Care Act (ACA)

- The patient protection and affordable care act (ACA) was enacted under the Obama Administration on March 23, 2010.
- It was previously referred to as Obamacare or PPACA.

#### Primary goals are to achieve:

- Affordable Health Insurance
- Expand Medicaid programs (not all states have expanded their Medicaid programming)
- Support innovative medical care delivery methods to lower healthcare cost

- Expands Medicare benefits
- Free Vaccines
- \$35 monthly insulin
- Caps Out of Pocket (\$4,000 or less 2024; settling at \$2,000 2025)
- Now allows Medicare to negotiate
- Requires Pharmaceutical companies to rebate back prices increases higher than inflation
- Lowers Healthcare Cost
  - Average enrollee on marketplace saves \$800 a year.

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### How does legislation impact healthcare access and quality?

### Impacts of Legislation and Healthcare

- Access to high-quality medical care, provide drug coverage, increase access to healthcare, and affordable insurance for adults and children.
- Create programming to help address social determinants of health for better health outcomes.
- Identify strategies to address gaps and barriers in healthcare for equity.
- Reduce out-of-pocket expenses for patients.
- Provides protections for both medical professionals and patients.
- Access to services that diagnose, treat, and prevent for disease control.
- Provides regulations for healthcare professionals, drug companies, and insurance providers.

# Current data on healthcare legislation

- RWHAP reported servicing more than 561,000 people in 2020.
- 89.4% of RWHAP in HIV care reached viral suppression.
- The CDC reported on three recent studies, PARTNER, Opposites Attract, and PARTNER 2 that all showed no new HIV infections for mixed-status couples who engaged in condomless sex and partner was virally suppressed.
- HHS released a report in 2021 that showed a record number of 31 million Americans have health coverage through the ACA and a reduction in the uninsured rate in every state.

### PrEP Healthcare Access Case Studies



### **Case Studies**

#### Miguel (he/him)

Miguel is a 34-year-old cisgender bisexual Latino man who started the process of getting on PrEP. However, he has not started his medication because he has a co-pay he cannot afford. Also, he called to inform his provider that he received a \$300.00 lab bill. He reported he cannot afford to pay that amount every 3 months for labs.

### Questions to consider

- Who would be the best person to help address the patient's concerns about lab fees?
- What options does the patient have to cover the co-pay of medication?
- What internal programs are available that could help alleviate PrEP access barriers?



### Solutions For Patient Navigation

- Contact the billing department to see if billing codes are correct or can be adjusted to eliminate labs fees.
- Identify if patient qualifies for any drug co-pay assistance programs.
- Contact insurance provider to advocate that patient should not have cost-sharing expenses due to the requirement that all qualified health plans cover PrEP.
- Identify if sliding fee scale or self-pay for lab work is a more affordable option.



### **Case Studies**

### Tami (she/her)

Tami is a 30-year-old African American woman on PrEP. She reported she will be transitioning to a new employer soon, but her new health insurance plan won't be effective until after her 90-day probationary period. She wants to remain on PrEP while waiting for her new insurance coverage to be effective. She reported that her partner is HIV positive, and they engage in condomless sex.



### Questions to consider

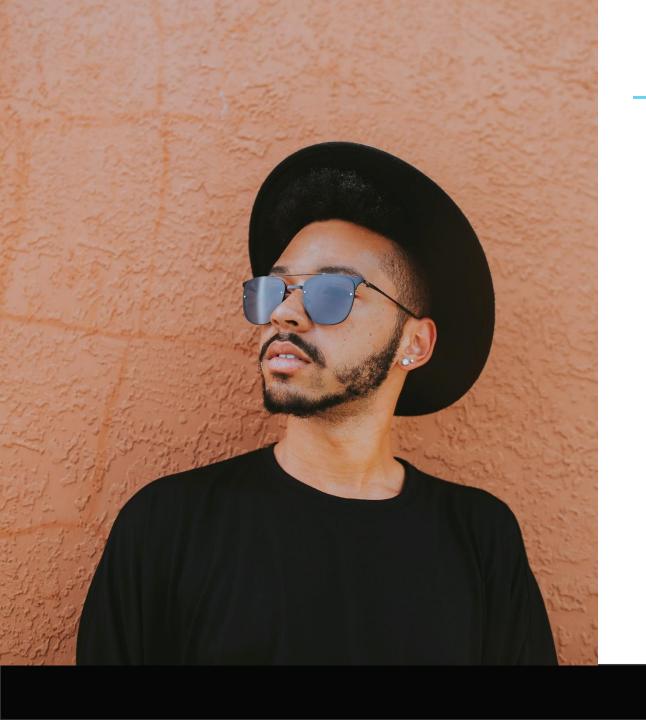
- What stands out to you about Tami's situation?
- How can you stop Tami from having a gap in her PrEP adherence?



### Solutions For Patient Navigation

- Before her insurance expires, the patient should complete quarterly PrEP labs to be cleared to receive a 90-day prescription.
- No action is required if the patient is eligible to receive a 90-day prescription all at once.
  - If not, the patient should contact their insurance provider to request a vacation override that will permit them to receive a 90-day prescription.
- Identify if the patient qualifies for drug assistance programs like Ready, Set, PrEP.
- As a last resort, identify if the patient can afford to pay for COBRA insurance to maintain health insurance throughout the employment transition.





### **Case Studies**

### Anthony (he/him)

Anthony is a 20-year-old cisgender black gay man who's a college student. He wants to start PrEP but is worried about his parents finding out since he's still on their insurance.

### Questions to consider

- Are there any ways to pay for Anthony's PrEP outside of using his parent's insurance?
- What are some other factors to consider to help Anthony protect his private health information from his parents?



### Solutions For Patient Navigation

- Identify if any PrEP drug assistance programs can cover the cost of medication.
  - This is an option if the patient is comfortable billing lab work through the insurance company. Parents can see the patient is accessing sexual health services as a policyholder.
- Set up the patient electric medical records to receive electric communications so no mail correspondence will be sent to their home.
- They could identify if the patient could get insurance outside of their parent's insurance (school insurance plan, marketplace plan)



### Additional Information

- Program Parts & Initiatives in Ryan White HIV/AIDS Program
- Ryan White HIV/AIDS Program Services Report
- CDC's Progress in Ending the HIV Epidemic Initiative
- Let's Stop HIV Together Campaign
- CDC Effective Interventions
- Parts of Medicare
- CDC training resources
- CDC Public Health Law Academy
- Whitman-Walker Health Tik Tok

#### NASTAD Resources

- EHE Website
- Billing Coding Guide for HIV Prevention
- Strategies to Leverage Funding across the PrEP Care Continuum
- NASTAD PrEP Coverage Brief: PrEP Services Covered with No Cost-Sharing
- SDOH Community Development Highlights
- Long-Acting Injectable Cabotegravir Dosing
- Minor Consent and Confidentiality Laws for PrEP and HIV Treatment | NASTAD

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Question?
Comments.
Let's Chit Chat.





Date: HIV/STI Criminalization -October 26<sup>th</sup> at 3:00 PM

Date: Housing -November 16<sup>th</sup> at 2:00 PM Date: Youth and Adolescence – Date January 2023

