Colorado HIV/STD/VH Care, Surveillance and Prevention Integration

- Combined Ryan White, Rebate, CDC, and state funding mix in nearly all contracts and 60% of personnel
- Contract monitors do both care & prevention work at each agency
- Capacity Building Unit re-oriented efforts toward biological interventions. Evaluation unit invested much of their efforts in the area of PrEP and NPEP analysis
- CO received PrEP demonstration project funding from CDC
Impact of Changes in the Healthcare landscape

- Expanded Medicaid (including AwDC) to 133% of Federal Poverty Level – MAGI
- Created an effective state-based insurance marketplace w/ improved Medicaid interaction
- Supportive environment for enrollment outreach
- Governor supported expansion
- Majorities in both State House and Senate supported expansion
Colorado ADAP / Insurance Status 2017

**UNINSURED USING CICP AND HMAP IN 2013**

- 2,039 individuals uninsured in 2013
- 756 employer based insurance
- 441 individuals – marketplace, 67 over 400% FPL, 146 category ineligible – off marketplace

**INSURED AFTER HCR IMPLEMENTATION**

- 1,065 Medicare/Bridging the Gap members
- 1,390 Medicaid transitions, 1115 SWAP members
- 1,410 insured patients
- 756 employer based insurance
- 176 Categorically ineligible-undocumented, CHURN patients
- 30 marketplace eligible / 38 Medicaid eligible
- 441 individuals – marketplace, 67 over 400% FPL, 146 category ineligible – off marketplace

**UNINSURED AFTER ACA IMPLEMENTATION – RYAN WHITE**

- 1,390 Medicaid transitions, 1115 SWAP members
- 176 Categorically ineligible-undocumented, CHURN patients
- 30 marketplace eligible / 38 Medicaid eligible
- 441 individuals – marketplace, 67 over 400% FPL, 146 category ineligible – off marketplace
Viral Hepatitis

- Also added Hep A and B vaccines to formulary, along with all of the available HCV treatments
- Prior authorization form for anyone denied coverage from their primary insurer (or uninsured) with very liberal policy regarding substance use – treatment champions at clinic and statewide level
- Medicaid recently relaxed strict tx policies
Sources of State Funding – Colorado Tobacco Master Settlement Fund

**Colorado HIV/AIDS Prevention Program (CHAPP)**
- 2006 - 2% of MSA –up to $2 million- for competitive grants program to fund medically accurate prevention and education programs statewide – often at variance with CDC policy shifts

**State Drug Assistance Program Fund**
- 2003 2.5% of MSA for ADAP to eliminate waitlist and expand formulary (in addition to $1.4 million in General Funds)
- With cost savings to ADAP due to the ACA, legislature persuaded to allow program to invest in “biological interventions”
- Includes PrEP, STD test and treat, and future NPEP program, Drug User Health / Needle exchange.
Healthcare Access Unit

- Added CDC prevention funding to ADAP enrollment staff internally and externally
- Developed State Drug Assistance Program for prevention projects
- Developed online application for ADAP and for new PrEP Program
- Utilized ADAP PBM as eligibility/enrollment system, distinguishing HIV – patients carefully
- Established Network of PrEP providers (including some fee for service (for underinsured - uninsured)
Protect your health... 

...and your cash

State Drug Assistance Program
4300 Cherry Creek South Drive
Denver, CO 80246
(303) 692-2716

Colorado Public Health Intervention Program (PHIP)
Public Health Intervention Program (PHIP)

**PHIP for insured with adequate coverage**
- **Medication coverage:** First use Gilead copay card and PAN foundation coverage, then program pays
- **Primary Insurance billed, and PHIP pays for PrEP-related copays and deductibles through contractor**

**PHIP for uninsured or underinsured**
- **Medication coverage:** If insured: first use Gilead copay card and PAN foundation coverage, then program pays. Uninsured: Use Gilead copay card only
- **Primary insurance (if any) is not billed...specific clinics that accept PHIP rates can bill for services through electronic funds transfer.**
- **CDPHE determines who is placed in which group**

**PHIP for Medicare beneficiaries**
- **Medication coverage:** If on Part D: Program pays for Truvada only all year
- **Primary Insurance billed, and PHIP pays for PrEP-related copays and deductibles through CHN**

**Currently no benefit for individuals with Medicaid coverage**
- **CDPHE pays for medical staff (usually nurse practitioners) a FTE% at several clinics for uninsured patients, and a Fee For service for labs, STI/HIV testing**

CDPHE
Department of Public Health & Environment
PrEP DAP (PHIP) info

Members to date:

- Uninsured/Underinsured – 131
- Insured (credible insurance) -222
- Medicare - 11
- Eligibility: Proof of under 500% of FPL, Colorado residency (attestation), annual recertification
- Groups assigned in Ramsell PBM, Card also has medical billing information
- Contractor reviews insurance medical claims for appropriate billing CPT codes
Use of One Card for proof of eligibility

Medication and Medical Copay Assistance Identification Card

<table>
<thead>
<tr>
<th>Name: Prance E Ponies</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOB: 11/20/1983</td>
</tr>
<tr>
<td>Eligibility Expiration: 11/30/2015</td>
</tr>
<tr>
<td>Coverage Type: CO PHIP</td>
</tr>
<tr>
<td>Identification Number: 9824008140</td>
</tr>
</tbody>
</table>

Pharmacy Claims
- BIN: 004519
- PCN: COPHIP
- Group: 38031

Medical Claims
- ID: 2400814
- Bill: Emdeon ID
- Group: 38009

Ramsell Public Health Rx
200 Webster Street, Suite 200
Oakland CA 94607 (888) 311-7632

CNIC Health Solutions
40 Wooten Rd # 104, Colorado Springs, CO 80915 (719) 622-3300
Integrated Plan

The Colorado HIV/AIDS Strategy
2017 - 2021

A Statewide Collaborative Plan for HIV Prevention and Care Developed by the
Colorado Alliance for HIV Prevention, Treatment & Care (CDC & Part B Planning Group)
Colorado Department of Public Health & Environment (CDC & Part B Grantee)
Denver Office of HIV Resources (Part A Grantee)
Denver TGA HIV Resources Planning Council (Part A Planning Group)
The Colorado Model for HIV Prevention and Care
Revision of existing contracts with external providers, and new RFP with PrEP emphasis

- Developed Universal Standard of Care
- Established PrEP Advisory Committees
- Expanded the advisory role of the ADAP Advisory Committee
- Hired Limited Term Public Health Detailing Nurse
Efforts undertaken by internal staff & external contractors

- Marketing
- Outreach
- Education
- Screening & Navigation
- Retention

Intensity of client need and intensity of service
PrEP Intervention Training Model

Core Courses

- Outreach
- Basics & Education
- Counseling
- Navigation

Support Courses

- Marketing
- Outreach
- Education
- Screening & Navigation
- Retention

Intensity of client need and intensity of service

Cultural Competence

- PrEP Basics/Education Services
- Statutes and Ethics for HIV Prevention
- Working with MSM & Transgender populations
- Concepts of Interpersonal Safety
- Identifying & Screening for Mental Health Issues
- Communication Skills
PrEP Navigation: posted on e-learning platform for use by other health departments and accompanied by audio recording to assist them in contextualizing materials/content for their use.
Marketing ( [www.proudToBePrepped.com](http://www.proudToBePrepped.com) )
Disease Intervention Specialists - 8 Denver Metro & 2 regional consultants

PrEP Coordinator and 1 PrEP specialist

MSW Counselors (3)
Integrated DIS PrEP Navigation Services

- All Level 3 DIS trained in PrEP Navigation (Partial FTE)

- Existing DIS Workload:
  - STI/HIV Disease Investigation (HIV+/-)
  - Field Work/Testing
  - SA/MH Screening
  - Linkage to Care
  - Critical Events Referrals
  - PrEP Screening & Navigation

TO DO LIST
1. SO
2. MANY
3. THINGS
Bilingual PrEP Specialist

- Hired March 1, 2017, FTE Shift from DIS

- Provides comprehensive PrEP Navigation Services
  - Education
  - Medicaid/Financial Assistance Enrollment
  - Provider Selection
  - SA & MH Screening
  - First Appointment Support Services
  - Retention & Re-linkage *(limited)*
PrEP Screening & Navigation Process Map

1. PrEP Website
   www.proudtobeprepped.com
2. PrEP Phoneline
   1-844-367-7075
   3 Options
   - Option 1: PreP Info
   - Option 2: PreP Financial Assistance
   - Option 3: PreP Providers
3. DIS/Prevention Services
   High risk for HIV & interested in PrEP
4. LSU
   Positive gonorrhea & interested in PrEP
5. PreP Specialist
   X2765
6. SDAP Phoneline
   X2716
7. Academic Detailer
   X2767
8. 960 PRISM record created & sent to PrEP specialist.
9. PRISM Data System
10. RAMSELL Data System
11. REDCap Data System
12. Contractor Provider
    Non-Clinical
    HIV testing
    Interested in PrEP

Legend:
- Blue Rectangles represent an initial point of entry for the PrEP Navigation and Referral.
- Pink Hexagons represent the 3 options through the PrEP Phoneline.
- Yellow Squares represent financial assistance services for PrEP.
- Purple Squares represent the data systems that collect data for PrEP Navigation and Referral. All data will be pushed into REDCap, and will serve as the PrEP data central repository.
Data & Evaluation activities
PrEP Screening, Referral & Navigation FR

- Custom built, then implemented October 1, 2016

- Information collection & case management
  - Demographics & Risk Table
  - Referral Source
  - Knowledge & Awareness
  - Acute HIV Symptoms (prompts VL)
  - Financial Information
  - Case Activities & Outcomes
# PrEP Screening & Navigation: 960 Field Record Disposition Guide

<table>
<thead>
<tr>
<th>Code</th>
<th>Disposition Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AI</td>
<td>Declined Nav Services Referral, Accepted Info Only</td>
</tr>
<tr>
<td>AS</td>
<td>Received Nav Services, Did Not Attend Intake</td>
</tr>
<tr>
<td>AZ</td>
<td>Accepted Nav Services Referral, Did Not Respond</td>
</tr>
<tr>
<td>CM</td>
<td>Currently on Medication</td>
</tr>
<tr>
<td>HL</td>
<td>Unable to Locate</td>
</tr>
<tr>
<td>IC</td>
<td>Attended Intake, Medication Contraindicated</td>
</tr>
<tr>
<td>ID</td>
<td>Attended Intake, Declined Medication</td>
</tr>
<tr>
<td>IP</td>
<td>Attended Intake, Tested Seropositive</td>
</tr>
<tr>
<td>IS</td>
<td>Attended Intake, Started Medication</td>
</tr>
<tr>
<td>JB</td>
<td>Declined Nav Services Referral &amp; Info, Plans to Use Other Risk Reduction</td>
</tr>
<tr>
<td>JC</td>
<td>Declined Nav Services Referral &amp; Info, Medication Contraindicated Per Client</td>
</tr>
<tr>
<td>JD</td>
<td>Declined Nav Services Referral &amp; Info, General Refusal</td>
</tr>
<tr>
<td>JL</td>
<td>Declined Nav Services Referral &amp; Info, Other</td>
</tr>
<tr>
<td>JM</td>
<td>Declined Nav Services Referral &amp; Info, Side Effect/Medical Concerns</td>
</tr>
<tr>
<td>JP</td>
<td>Declined Nav Services Referral &amp; Info, Navigation in Process Per Client</td>
</tr>
<tr>
<td>JR</td>
<td>Declined Nav Services Referral &amp; Info, Low Risk Per Client</td>
</tr>
<tr>
<td>JZ</td>
<td>Located, Did Not Respond</td>
</tr>
<tr>
<td>KL</td>
<td>Out of Jurisdiction</td>
</tr>
<tr>
<td>LI</td>
<td>Client Currently Incarcerated, Ineligible for Services</td>
</tr>
<tr>
<td>LO</td>
<td>Other</td>
</tr>
<tr>
<td>NC</td>
<td>No Client Contact Per Investigation</td>
</tr>
<tr>
<td>SP</td>
<td>Client Seropositive During Investigation</td>
</tr>
</tbody>
</table>

**Note:**
- CDPHE: Colorado Department of Public Health & Environment
Utilizing PRISM for Case Referral and Follow Up

• All syphilis cases referred to DIS for follow up - DIS will refer to PrEP coordinator as appropriate
• Gonorrhea cases
  • DIS will not work these cases unless they are co-infected
  • LSU staff could refer all rectal gonorrhea cases to PrEP coordinator
  • LSU staff could refer other high risk gonorrhea cases
    • Through referral form or through 960 field record in PRISM
HIV PrEP Navigation Field Record

Attended Intake, Started Medication

# of Cases

Year 1

Year 2

R² = 0.6683

PrEP PRISM Field Record

DIS PrEP Navigation Training

DIS Intensive Program

DIS Interviews & Analysis

PrEP Specialist
### Selected Success Indicator Trends

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>Year 1</th>
<th>Year 2 *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clients Didn’t Attend Intake</td>
<td>37</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>3.4%</td>
<td>2.7%</td>
</tr>
<tr>
<td>PrEP Navigation Services Refusal Rate</td>
<td>738</td>
<td>333</td>
</tr>
<tr>
<td></td>
<td>67.1%</td>
<td>64.5%</td>
</tr>
<tr>
<td>PrEP Information Provided (Passive Referral)</td>
<td>286</td>
<td>116</td>
</tr>
<tr>
<td></td>
<td>26.1%</td>
<td>21.1%</td>
</tr>
<tr>
<td>Clients Linked to PrEP</td>
<td>28</td>
<td>56</td>
</tr>
<tr>
<td></td>
<td>2.6%</td>
<td>10.2%</td>
</tr>
</tbody>
</table>

91 clients linked to date!
What’s Next?

- PRISM FR Trending & Data Mining
  - STI Correlation
  - Risk Compensation Breakdown
  - New HIV(+) PrEP History “Lookback”
  - Process Timing Analysis
Ryan White Services Reporting

Results
Click Export to download an XML file of the report. Click Report to recalculate the data.

RSR Export

Summary
Exports the Ryan White HIV/AIDS Services to an XML file (for 2015)

Provider Name: Colorado Department of Public Health
Report Period: 1/1/2015 - 12/31/2015
Number of clients: 482
Number of HIV-Positive clients with Outpatient/Ambulatory Medical Care Service: 0
Community Based Organization / Local Public Health

CDPHE Data Systems – Ramsell, ARIES

Client / Health Care Provider

SQL Tables housed on CDPHE mySQL DB Server
## Event Grid

The grid below displays the form-by-form progress of data entered into the project for one particular Record ID for all defined events. You may click on the colored buttons to access that form for that event. If you wish, you may modify the events below by navigating to the Define My Events page.

### Legend for status icons:
- **Incomplete**
- **Incomplete (no data saved)**
- **Unverified**
- **Partial Survey Response**
- **Complete**
- **Completed Survey Response**

#### Record ID Gos1970m

<table>
<thead>
<tr>
<th>Data Collection Instrument</th>
<th>Client Intake (1)</th>
<th>Prep client follow up 1 (2)</th>
<th>Prep client follow up 2 (3)</th>
<th>Prep client follow up 3 (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demographics</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>Screening</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>Referral</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>HIV Testing</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>HCV Testing</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>HIV Behavioral Intervention</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>Prep Client Follow up</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
<tr>
<td>Client Satisfaction Survey (survey)</td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
<td><img src="#" alt="Incomplete icon" /></td>
</tr>
</tbody>
</table>
INTEGRATED CLIENT SURVEY
# Scheduling and Follow Up

## Scheduling

The Schedule Generator will allow you to generate a new schedule based upon the details you have defined on the Define My Events page. You may generate a schedule for a new Start Date, which will be used as the starting point for projecting schedule dates using the Default Schedule template. You may then view it on the Calendar, after which, if desired, you may also perform data entry in a new project record here while performing scheduling or you may choose a current schedule.

### Add new Record ID:

- **ID**: Lsfa1980m

### Start Date:

- **04/05/2016**

### Generate Schedule

### Projected Schedule for "Lsfa1980m"

The projected schedule below was automatically generated for Record ID "Lsfa1980m". You may configure the value of any dates generated below simply by clicking inside the cell to change the generated dates. All dates will be listed in red. Click the Create Schedule button to add events to the calendar.

<table>
<thead>
<tr>
<th>Time (optional)</th>
<th>Date / Day of Week</th>
<th>Event Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:19</td>
<td>04/05/2016</td>
<td>Client intake</td>
</tr>
<tr>
<td>08:19</td>
<td>07/04/2016</td>
<td>Prep client follow up 1</td>
</tr>
<tr>
<td>13:10</td>
<td>10/03/2016</td>
<td>Prep client follow up 2</td>
</tr>
<tr>
<td>11:19</td>
<td>12/30/2016</td>
<td>Prep client follow up 3</td>
</tr>
</tbody>
</table>

### VIDEO: How to use the scheduling tool

### Print Calendar

### Calendar for July 2016

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>+ New 3</td>
<td>+ New 4</td>
<td>+ New 5</td>
<td>+ New 6</td>
<td>+ New 7</td>
<td>+ New 8</td>
<td>+ New 9</td>
</tr>
<tr>
<td>8:19am Lsfa1980m (Prep client follow up 1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>+ New 10</td>
<td>+ New 11</td>
<td>+ New 12</td>
<td>+ New 13</td>
<td>+ New 14</td>
<td>+ New 15</td>
<td>+ New 16</td>
</tr>
<tr>
<td>11:00am Lsfa1980m (Prep client follow up 2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>+ New 17</td>
<td>+ New 18</td>
<td>+ New 19</td>
<td>+ New 20</td>
<td>+ New 21</td>
<td>+ New 22</td>
<td>+ New 23</td>
</tr>
</tbody>
</table>
Successes

- Data System went live December 1\textsuperscript{st}, 2016
- Legacy Data from Evaluation Web was uploaded March, 2017
- As of today, 4,282 Client records have been either entered or uploaded across all HIV Prevention Programs
- 108 User accounts created
- 6 REDCap trainings – 76 people from 15 Agencies
Successes Continued…

- Data from REDCap has been successfully uploaded to the CDC instance of EvaluationWEB
- Projects in the Works:
  - Implement Syringe Service Program Data Capture (Summer 2017)
  - Data Dashboards for State, CBO and Program Data and Evaluation (Summer 2017)
Challenges

- Mobile App implementation has been slow
- REDCap reports are raw data, very difficult for Non “Data People” to read and understand
  ✓ Realized the need for dashboards and tables through Tableau
- Longitudinal data is difficult to upload – process was time consuming for both CDPHE Staff and Denver Health Staff
Data Discovery – Using Medicaid and All Payer Claims Database to monitor adherence, PrEP usage

- Analysis of Truvada claims, excluding HIV diagnostic & Opportunistic Disease indicators to isolate probable PrEP patients, using Gilead algorithm
  - Use similar documented methods to examine Medicaid data specifically
  - Work with CDPHE efforts to obtain the full (de-identified) APCD set (Expected July 2017)
  - Conduct analyses to examine adherence to PrEP and length of use over time (by Provider, by Demographic Groups) –
  - Continue to monitor trend in PrEP up take State wide
Questions?

Todd Grove todd.grove@state.co.us (303) 692-2783
Public Health Intervention Program for Preexposure Prophylaxis (PHIP-PrEP)
Introduction

Background
In 2015, the governments of the State of Colorado and the City and County of Denver joined a campaign to end the AIDS epidemic by 2030 through the UN Fast Track Cities / Paris Declaration. In order to do so, they directed that an effort be undertaken to achieve the following by 2020:

- **90%** of people living with HIV (PLWH) will know their HIV status
- **90%** of people who are HIV positive will be on treatment
- **90%** of people on treatment will have suppressed viral loads

Biological Interventions
The Colorado PHIP for PrEP is intended to support efforts to prevent infection with HIV by individuals assessed to be at higher risk of exposure to the virus. Multiple studies have verified that individuals who are prescribed the antiretroviral medication Truvada, and have a high adherence to that medication, have a decreased risk of HIV that exceeds 95% as opposed to individuals who have unprotected sex.

PrEP is the use of antiviral medication as a biological intervention proved to be efficacious at preventing HIV negative people from acquiring the virus, if taken as directed. The medication interferes with HIV’s ability to copy itself in the body should the person taking PrEP be exposed to the virus. This prevents it from establishing an infection and seroconversion in the vast majority of cases. The Colorado PHIP intends to support individuals whose medical providers deem their risk of acquiring HIV sufficient to be willing to write them a prescription for PrEP, which is one TRUVADA® (emtricitabine and tenofovir disoproxil fumarate) tablet daily.
Components

**Primary Components**
- PHIP – PrEP PHIP (Pre Exposure Prophylaxis) for the prevention of HIV infection
- PHIP nPEP (Post-exposure Prophylaxis non-occupational) for the prevention of HIV infection
- PHIP – STD Test and Treat for the treatment of STDs and testing of partners who may have contracted STDs
- PHIP – HV (Viral Hepatitis) for the treatment of (non-HIV infected) Hepatitis B and C for individuals deemed to be of higher public health significance who are otherwise unable to access medication treatment through Medicaid or other insurance

**Linkage To Care**
- Internal Disease Intervention Services (DIS) Linkage to Care Staff
- PrEP Screening and immediate referral for high risk
- Identification of provider with PrEP appointment capacity
- Enrollment in PHIP
- Work with internal CDPHE ADAP staff for potential insurance enrollment (in open enrollment or using special election period if available)

**Resources**
- Primary Coverage / Drugs
- Patient Access Network Foundation (PAN) for co-pays, deductibles and co-insurance
- Gilead Advancing Access Copay Cards: $3,600/year max, no income restrictions, covers co-pays, deductible and co-insurance, 12 month enrollment (*Not to be used with state/federal plans, such as Medicare or Medicaid*)
- PHIP Wrap-around payments

**Administrators**
- Colorado Department of Public Health and Environment (CDPHE), Colorado Health Network (CHN) and CNIC Health Solutions
- Applicant reviews and linkage to care with participating providers
- PrEP Education and Support through HIV testing and prevention
- Trained in depth on Basic Insurance, marketplace enrollment benefits access, SEP, referral information and healthcare literacy documents
- Provider claims submitted too CNIC for reimbursement of medical costs if applicable
Patient Participation

PrEP is for people who are at higher risk of HIV exposure

People who use PrEP must be able to take the drug every day and to return to their health care provider every 3 months for a repeat HIV test, prescription refills, and follow-up. CDC recommends PrEP is considered primarily for people who are HIV-negative and at substantial risk for HIV infection. This includes anyone who:

• In an ongoing relationship with an HIV-positive partner
• Is not in a mutually monogamous relationship with a partner who recently tested HIV-negative
• A gay or bisexual man who has had sex without a condom or been diagnosed with a sexually transmitted infection within the past six months
• Provides sex in exchange for something of value (male or female)
• Is transgendered
• Is a heterosexual man or woman who does not regularly use condoms when having sex with partners known to be at risk for HIV (e.g., people who inject drugs or bisexual male partners of unknown HIV status)
• Has, within the past six months, injected illicit drugs and shared equipment or been in a treatment program for injection drug use
• Heterosexual couples where one partner is HIV-positive and the other is not, PrEP is one of several options to protect the uninfected partner during conception and pregnancy

PrEP is a powerful HIV prevention tool

However, for sexually active people, no prevention strategy is 100% effective. Therefore, individuals who use PrEP should use it along with other effective HIV prevention strategies. These include:

• Using condoms consistently and correctly
• Getting HIV testing with your partners
• Getting STD testing with your partners
• Choosing less risky sexual behaviors, such as oral sex
• If you are a person who injects drugs, participating in a drug treatment program or using sterile drug injection equipment
Patient Coverage

Insurance Coverage Categories

A large number of individuals who seek out PrEP will have access to insurance through Medicaid, Medicare or private/employer based insurance. Based on the type of insurance which they carry, the out of pocket costs associated with taking PrEP can range from less than $50 for a Medicaid beneficiary, to several thousand dollars for an individual on a private insurance plan. The manufacturer of Truvada has developed very comprehensive assistance programs for individuals earning less than 500% of the Federal Poverty Level (or $59,400 a year for an individual, or $80,100 for a couple) to access that medication at little to no cost. The Colorado PHIP program has developed additional support that would pay for remaining medication costs.

Medical, lab, and testing costs will be covered for enrollees of the PHIP-PrEP. After analysis of these costs, CDPHE has determined that to provide this assistance, there will need to be a multi-tiered approach. Individuals who apply for the PHIP program will be assessed for their level of coverage under insurance. They will be categorized into the following categories:

1. Private insurance with predictable and reasonable deductible, co-insurance and co-pay amounts - Individuals with a standard insurance benefit that would normally pay a reasonable office visit and/or lab/testing cost for seeking services will be able to submit the invoice that they receive for those services related to PrEP to CDPHE’s insurance administration contractor to be paid to the provider on their behalf.

2. Private insurance chosen by individuals that have a high deductible or “catastrophic” benefit (“underinsured”) - Many individuals or employers purchase insurance that only meet the minimal coverage required under the Affordable Care Act. For individuals, this is primarily due to premium costs or a self-assessment that their health is sufficiently sound that they do not require a more comprehensive benefit. For employers, this choice is largely made based on cost alone.

3. Uninsured - These individuals are either categorically ineligible to insurance, or individuals who opted to not purchase insurance despite ACA requirement to do so.

4. Medicare beneficiaries - Individuals who have either aged into Medicare, or because of a disability lasting longer than 24 months have received Medicare benefits. These individuals generally have either a 20% co-pay for PrEP services under Part B, or a set fee under a Medicare Advantage plans. Like the insurance beneficiaries described in the first sub-set, PHIP enrollees in this category can submit invoices for their patient responsibility to the CDPHE’s insurance administration contractor to be paid to the provider on their behalf.

5. Medicaid beneficiaries - (no coverage will be offered by PHIP for Medicaid beneficiaries at this time)
Patient Enrollment

Eligibility
In order to be eligible for any Colorado PHIP subprogram, applicants must demonstrate “core eligibility” which involves:

• Provide attestation of Colorado residency. Applicants do not have to document U.S. citizenship or immigration status in order to be eligible for services. However, eligible clients must attest that they live in the state of Colorado.
• Having been determined by a medical provider as meeting the criteria for beginning PrEP, or needing treatment of HIV, STD or Viral Hepatitis
• Having a documented gross monthly income that is 500% ($59,400 a year for an individual, or $80,100 for a couple) of the Federal Poverty Level (FPL) or below or documentation to support income declaration

Application
Patient applications will be completed by either providers, CDPHE or CHN and submitted to CDPHE for review. Detailed instructions are available to help in completion of PHIP applications. Any application questions can be directed to CDPHE.

• Applications must be submitted to CDPHE for review, expect one week for review and outcome
• Providers may identify a patient that qualifies for PHIP and submit an application to CDPHE
• CDPHE will complete applications and once approved, send a referral to a participating provider
• CHN will complete applications, submit to CDPHE for review and once approved, refer client to a participating provider
• Application and financial assistance information: https://www.colorado.gov/pacific/cdphe/services-people-risk-hiv

Referral
Potential PHIP participants, once reviewed and approved by CDPHE, will then be referred for care to a participating PHIP provider. Providers may identify patients as possible PHIP participants but, an application is required to be submitted to CDPHE for review and approval before any PrEP care is administered by a provider. Referrals should be expected from the following sources:

• Colorado Department of Public Health and Environment (CDPHE)
• Colorado Health Network (CHN)
• CDPHE funded HIV prevention organizations

Questions
• Colorado ADAP/PHIP Helpdesk: (303) 692-2739 for eligibility and enrollment questions regarding PHIP
• Colorado HIV & STD Information Line: (303) 692-2739 for linkage to PrEP services by CDPHE staff
• Call Mon. thru Fri. 9am - 5pm or leave a message after hours
Identification Cards

The Colorado Public Health Intervention Program (PHIP) identification cards are different for Private Insurance, Medicare/Medicare Advantage and Non-insured / Under-Insured. Examples of each card are shown below noting the Coverage Type areas defining the separate coverages.

Private Insurance

Name: TODD B TEST
DOB: 06/19/1956
Eligibility Expiration: 06/30/2017
Coverage Type: CO PHIP - INS

- Pharmacy Claims: ID: 38330771244
  Group: 38102
  BIN: 016424
  PCN: COPHIP

- Limited Benefits Secondary Medical Claims: ID: 330771244
  Group: 38192
  ID: 38910778022

- Private Insurance
  - Denver, CO 80220
  - Ramsell Corporation (Rx Claims Only)
  - 6260 E. Colfax
  - 303-856-8422
  - Telephone: 1-888-311-7632
  - Fax: 1-800-848-4241

- ADAP Helpdesk (Patient Eligibility Questions): 303-692-2716

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Medicare / Medicare Advantage

Name: TODD B TEST
DOB: 03/14/1988
Eligibility Expiration: 06/30/2017
Coverage Type: CO PHIP - MEDICARE

- Pharmacy Claims: ID: 38910778022
  Group: 38192
  ID: 910771233
  BIN: 016424
  PCN: MCCOPHIP

- Limited Benefits Medical Claims: ID: 610771233
  Group: 88802200

- Medicare Advantage
  - Denver, CO 80220
  - Ramsell Corporation (Limited Benefits Covered)
  - Eagan, MN 55121
  - P.O. Box 21184
  - Telephone: 1-888-311-7632
  - Fax: 1-800-848-4241

- EDI Claims: CHN - PHIP
  - ENS: CHCNT Emdeon (37227)

- ADAP Helpdesk (Patient Eligibility Questions): 303-692-2716

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Non-insured / Under-Insured*

Name: TODD B TEST
DOB: 01/13/1985
Eligibility Expiration: 01/13/2017
Coverage Type: CO PHIP - UNINSUR

- Pharmacy Claims: ID: 38610771233
  Group: 38105
  ID: 88802200
  BIN: TBD
  PCN: TBD

- Limited Benefits Medical Claims: ID: 88610771233
  Group: 88802200

- Non-insured / Under-Insured
  - Denver, CO 80220
  - Ramsell Corporation (Rx Claims Only)
  - Eagan, MN 55121
  - P.O. Box 21184
  - Telephone: 1-888-311-7632
  - Fax: 1-800-848-4241

- EDI Claims: ENS (CHCNT) Emdeon (37227)
  - Paper Claims: CNIC - CDPHE
  - Telephone: 1-888-311-7632

- ADAP Helpdesk (Patient Eligibility Questions): 1-800-426-7453

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* As determined by CDPHE

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Provider Participation

Ideal Clinic Provider

- Providers that are currently prescribing PrEP for their patients
- Providers interested in prescribing PrEP to current and/or referral patients through the PHIP program
- Providers currently working with patient referrals from CDPHE / CHN
- Providers with locations in Colorado

Services Administered

- Initial preventive medicine evaluation of new patient including counseling, guidance, and/or risk factor reduction interventions; laboratory and/or diagnostic procedures
- HIV testing & Metabolic labs, STD screening up to quarterly
- Preventive medicine counseling and risk factor reduction intervention for individual – up to quarterly
- Individuals prescribed PrEP are tested regularly for HIV, viral hepatitis and other STDs, receive laboratory blood testing to monitor the medication’s effect on liver and other vital functions, and meet with a medical practitioner (in person or via telephone/telemedicine) on a scheduled basis.

Billing

Providers have a few options regarding funding/billing for the PHIP-PrEP program. Some clinics may choose to start with one option then move to another during their participation in the program. Funding/billing options are explained in detail on the Billing Options page and include:

- Fee For Service (FFS) money for medical visits
- Full Time Equivalent (FTE) grant money
- One Time Seed Money to configure IT systems, etc.
- Reimbursement amounts are listed in the attached document entitled PHIP FFS + Bundled Payment Fee Schedule

PrEP Education

Deborah Monaghan, CDPHE Public Health Detailer/Health Consultant, is available for PrEP learning sessions for providers participating or that are interested in the PHIP-PrEP program. Contact Deborah at (303) 692-2767 or deborah.monaghan@state.co.us
Billing Options

Provider Billing Options for PHIP-PrEP

1. **Full-Time Equivalent (FTE)**: Providers who are receiving FTE grant money cannot also receive Fee For Service (FFS) money for medical visits. FTE grant money covers the entire cost of the medical visit.

2. **Fee For Service (FFS)**: Providers who are receiving FFS money for medical visits may also receive one-time “seed” money to configure their IT systems, etc. “Seed” money is not the same thing as FTE money.

3. Providers can start out as FFS until they get FTE grant money. Once they are approved for FTE grant money, however, they can no longer bill FFS for medical visits. All claims for doctor visits that happen after that date will be denied. Providers can still receive payment for patients who had medical visits before that date, even if the provider hadn’t yet submitted the claim. (CNIC’s system looks at the date of the doctor visit, not the date the claim was submitted.)

4. FTE grant money does NOT cover the cost of the labs. Providers who are receiving FTE grant money can either bill for labs themselves, or can have Quest, LabCorp, etc bill CNIC.

Fee Schedule

Reimbursement amounts are listed in the attached document entitled PHIP FFS + Bundled Payment Fee Schedule (excel workbook). Clinics that opt to accept these reimbursement amounts would be allowed to decide whether they wish to invoice for testing, labs and screening on an individual fee for service based on CPT codes, or via a bundled payment for a series of tests. The decision between the two models can be made during contract negotiation.
Next Steps

Interested in Participating
Join the statewide provider network that is committed to reducing Colorado’s HIV infection rate. A large network of providers will help reach the goal of 90%-90%-90% by 2020 and dramatically change the landscape of HIV across our state. No other state has a comprehensive PrEP program that addresses the financial challenges that may prevent many individuals from taking ownership of exposure to HIV, HCV and STIs. Eliminating barriers to care, the PHIP-PrEP program includes:

- Individuals who seek out PrEP will have access to insurance through Medicaid, Medicare or private / employer based insurance
- Ongoing monitoring, testing and treatment
- The manufacturer of Truvada has a comprehensive assistance program for individuals earning less than 500% of the Federal Poverty Level (or $59,400 a year for an individual, or $80,100 for a couple) to access that medication at little to no cost
- PHIP-PrEP program has developed additional support that would pay for remaining medication costs

Fee for Service (FFS) / Full-time Equivalent (FTE) / IT Seed Money
Providers have the option of choosing the billing model that works best for them. FFS allows billing for each service provided under the PHIP fee schedule. FTE covers a provider’s overall time to provide PrEP services to an estimated number of PHIP-PrEP participants. Seed Money is available for assisting providers with IT challenges that may prevent their participation.

Billing
Providers currently submitting claims through CNIC / COst Assist, already have the elements necessary to participate in the PHIP-PrEP program. Our goal is for providers to be compensated efficiently and accurately and CNIC provides exceptional direct customer service to reach that goal. If a provider is not currently submitting claims through CNIC, there is a simple process that can have a provider up and running quickly with CNIC’s claims submission service.

Referrals
Applications for potential PHIP participants are submitted to CDPHE for review and approval before any PrEP care is administered by a provider. In some cases a provider may identify a client that could benefit from the PHIP-PrEP program and submit an application to CDPHE. Most referrals would come from the following sources:

- Colorado Department of Public Health and Environment (CDPHE)
- Colorado Health Network (CHN)
- CDPHE funded HIV prevention organizations
Contacts

**Alisia Blankenship**
Provider Relations
CNIC Health Solutions, Inc.
8051 East Maplewood Ave. Suite 300
Greenwood Village, CO 80111
303.749.1152 ofc
ablankenship@cnichs.com
www.cnichs.com

**Joseph McCormack**
Emerging Programs
Colorado Health Network
6260 East Colfax Avenue
Denver, CO 80220
763.806.0686 mbl
joseph.mccormack@coloradohealthnetwork.org
www.coloradohealthnetwork.org

**Todd Grove**
Healthcare Access Unit Supervisor
Colorado Department of Public Health & Environment
DCEED-STD-A3
4300 Cherry Creek Drive South
Denver, CO 80246
303.692.2783 ofc
303.691.7736 fax
todd.grove@state.co.us
www.colorado.gov/cdphe
Re: Colorado Public Health Intervention Program (PHIP) for Pre-exposure Prophylaxis (PrEP) – Uninsured/Underinsured

Dear Provider:

The Colorado Department of Public Health & Environment (CDPHE) has contracted with Colorado Health Network (CHN) to provide designated services related to programs for individuals who have contracted or may be at risk of contracting Human Immunodeficiency Virus or Acquired Immune Deficiency Syndrome. CHN has further subcontracted with CNIC Health Solutions, Inc. (CNIC) to provide certain administrative services for these programs including participating in program development.

This Letter Agreement relates to coverage provided to eligible participants enrolled in the Colorado Public Health Intervention Program (PHIP) who are considered in the discretion of CDPHE to be uninsured or underinsured. These enrolled participants are designated in this Letter Agreement as the Uninsured/Underinsured PHIP Participants.

By signing this Letter Agreement below, Provider agrees to provide medical services covered under PHIP as designated on Exhibit A (Covered Services) to Uninsured/Underinsured PHIP Participants under the Terms and Conditions described below. PHIP does not provide coverage to any Uninsured/Underinsured PHIP Participant for any services not listed on Exhibit A unless approved in writing by CDPHE. Please return a signed copy of this Letter Agreement to CNIC at the following address:

CNIC Health Solutions, Inc.
Attn: Alisia Blankenship
8051 East Maplewood Avenue, Suite 300
Greenwood Village, Colorado 80111

Note that CDPHE may also provide secondary coverage for other eligible PHIP participants who have Medicare or commercial insurance coverage and are not designated by CDPHE to be uninsured or underinsured. Such coverage is provided under arrangements that are different than those described in this Letter Agreement. Contact CNIC at 303-749-1152 for information regarding secondary coverage through the PHIP program.
TERMS AND CONDITIONS FOR PRIMARY COVERAGE THROUGH PHIP

Claim Submittal Procedures. Provider shall submit claims to CNIC for reimbursement for Covered Services provided to Uninsured/Underinsured PHIP Participants. Provider shall verify eligibility of Uninsured/Underinsured PHIP Participants by reviewing eligibility dates on participant’s PHIP ID card. (See sample ID card attached.) Provider questions regarding the eligibility status of an individual can also be directed to the ADAP Help Desk at 303-692-2716.

Claims may be submitted to CNIC electronically or via hard copy. Provider’s current claim clearinghouse shall forward electronic claims on Provider’s behalf to CNIC at:

Payer ID 37227 (Emdeon) or
Payer ID CHCNT (ENS/Optum)

Hard copy claims shall be submitted to CNIC at the following address:
CNIC – CDPHE
P.O. Box 21184
Eagan, MN  55121

If approved in advance by CNIC, one or more claims can be submitted on a single report in a “roster bill” format. The “roster bill” format must contain all information required by CNIC to process the claim(s). Contact CNIC at 303-749-1152 for further information on the “roster” billing process.

Payment. CDPHE is responsible for funding payment of Covered Services. CNIC shall have no responsibility, risk, liability, or obligation for funding such payments or for the payment of the debts, liabilities, or obligations of PHIP. Provider will receive payment on at least a monthly basis either electronically (via EFT) or via check. Provider agrees to accept the payment from CDPHE as described in this Letter Agreement as payment in full for the Covered Services provided and that this Letter Agreement supersedes any other agreement to which Provider may be a party regarding providing or receiving payment for such Covered Services. Provider may not collect any additional amounts from the Uninsured/Underinsured PHIP Participant for the Covered Services provided. CDPHE shall be a third party beneficiary of this Letter Agreement.

CNIC Health Solutions, Inc.

SAMPLE DRAFT DOCUMENT ONLY – NOT FOR EXECUTION
Signature

Print Name and Title
Effective Date (to be completed by CNIC): ____________________________

AGREED TO BY PROVIDER NAME

SAMPLE DRAFT DOCUMENT ONLY – NOT FOR EXECUTION

Signature ____________________________ Date ____________________________

Print Name and Title ____________________________ Email address ____________________________

Phone Number ____________________________ Tax I.D. Number ____________________________

(Please provide a Form W-9 with signed Letter Agreement)

Group NPI Number ____________________________

Provider’s PHYSICAL Address ____________________________

Provider’s BILLING Address ____________________________

Please list all associate providers who will be billing under Provider’s Tax I.D. Number (attach separate sheet if necessary).

<table>
<thead>
<tr>
<th>Associate Provider Name</th>
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EXHIBIT A
TO LETTER AGREEMENT
COVERED MEDICAL SERVICES AND PAYMENT

For Covered Services provided to Uninsured/Underinsured PHIP Participants, payment will be based on the Fee Amounts in the following table. Fee Amounts may be adjusted in the discretion of CDPHE by providing 60 (sixty) days advance written notice to Provider. Additional screening related services may be Covered Services if the scope of the services and payment terms are approved in writing by CDPHE. Contact the ADAP Help Desk at 303-692-2716 to request coverage of additional screening services.

No fee for service Fee Amounts will be payable for medical visits if Provider receives FTE grant funds for providing medical services. Contact CNIC at 303-749-1152 if Provider wishes to request to move from the fee for service model to the grant FTE funding model.

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Description of Service</th>
<th>Fee Amount</th>
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<td><strong>Medical Visits</strong></td>
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<td>99203 Office or other outpatient visit for the evaluation and management of a <strong>new</strong> patient, which requires these three key components: a detailed history; a detailed examination; and medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family. <strong>(code to be used for initial PrEP medical visit)</strong></td>
<td>$125.00</td>
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<tr>
<td></td>
<td>99213 Office or other outpatient visit for the evaluation and management of an <strong>established</strong> patient, which requires these three key components: a detailed history; a detailed examination; and medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. <strong>(code to be used for all follow up PrEP medical visits)</strong></td>
<td>$75.00</td>
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<td><strong>Covered Labs, Tests and Screenings</strong></td>
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<td></td>
<td>800CA All labs, tests and screenings, initial PrEP visit</td>
<td>$255.00</td>
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<tr>
<td></td>
<td>800CB All labs, tests and screenings, follow up PrEP visits</td>
<td>$170.00</td>
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SAMPLE ID CARD
Sample ID Cards for PrEP/PHIP Program
(Contact CNIC at 303-749-1152 for sample ID cards for the COst Assist Program)

Look for these words. The terms of the letter agreement relate solely to claims for patients enrolled in this plan.

IF THE CARD HAS AN EXPIRED ELIGIBILITY DATE, CALL CDPHE AT 303-692-2716 TO VERIFY ELIGIBILITY BEFORE SERVICES ARE RENDERED

Secondary coverage is available under arrangements different than those described in the letter agreement.

Contact CNIC at 303-749-1152 for additional information.

Secondary coverage is available under arrangements different than those described in the letter agreement.

Contact CNIC at 303-749-1152 for additional information.