Increasing PrEP Awareness and Supporting PrEP within Your Jurisdiction

PRESENTED BY:

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Overview

• Educating high-risk populations and communities about PrEP
• Educating healthcare providers about PrEP
• Describing potential PrEP delivery models
• Supporting PrEP in your jurisdiction, even if you are not delivering it directly
The Challenge: Knowledge and Program Gaps exist

- **Community/Patient:** Only 26% of gay men had heard of PrEP in a nationally-representative, internet-based study of 431 men (Kaiser Family Foundation, 2014)

- **Provider:** Though 43% of HIV clinicians had received a request for PrEP, only 19% had prescribed (Maznavi, IDSA 2011)
The Challenge

• **Health department:** Only 8 of 55 reported a PrEP program; 43/55 report inadequate funding to support PrEP program (NASTAD, 2014)

• Even within health departments, support for PrEP may not be universal
  - Concerns remain regarding adherence, behavioral disinhibition, cost, and PrEP’s place within the HIV prevention matrix

• Don’t forget the need for ongoing internal education and discussions to build awareness, knowledge, and support within your health department
PrEP Delivery Cascade

Community/Patient

1. At risk for HIV infection
2. Identified as PrEP candidate
3. Interested in PrEP

Provider

1. Providing health care to high risk populations
2. Educated about PrEP
3. Willing to provide PrEP

4. Linked to PrEP program
5. Initiated PrEP
6. Retained in PrEP program
7. Achieve and maintain medication adherence
Key Messages to Community

• What PrEP is – a pill a day to help prevent HIV
• Efficacy and potential side effects – what does this really mean for someone on PrEP
• Who might benefit from PrEP – indicators that may resonate with the target population(s)
• Where to find PrEP – who to talk to about PrEP and where to get it
• Paying for PrEP – how much does it cost and what if you can’t afford it or don’t have insurance
Educating Populations, Communities, and Individuals

- Direct marketing (e.g., PrEP awareness-raising campaigns, banner ads – including on mobile applications like Grindr and Scruff)
- Social media and other online communities (e.g. Facebook, Instagram, Twitter, blogs)
- Earned media, especially in LGBT-focused outlets
- Editorials or letters to the editor
- HIV prevention planning groups/Ryan White councils
- Medicaid advisory boards
- Community forums
- Pride and other community events
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1. Providing health care to high risk populations
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Educating and Identifying Providers

- Systems for PrEP delivery must be created; provider education is an essential component of system development.
- Providers who have never prescribed Truvada may need time to become comfortable doing so, as well as providing the accompanying supportive services.
- Changing prescribing patterns and HIV prevention messaging is a behavioral intervention at the provider level.
- Identify local champions; not all providers will end up prescribing PrEP; start with the interested few.
Identifying Potential PrEP Providers

• Providers already familiar with HIV and/or HIV risk behaviors
• Sexual health service providers
• Primary care providers to communities that could benefit from PrEP
  o Practices with a high percentage of LGBT patients
  o Practices in underserved areas
• Referrals from the community
  o Ask local planning groups
  o Ask local LGBT organizations
Key Messages to Providers and Prevention Practitioners

- PrEP science – namely efficacy and side effects (Module 1.2)
- Who might benefit from PrEP – populations and individuals at high-risk for HIV (Modules 2.1 and 2.2)
- How to prescribe PrEP (Module 1.3)
- Resources available for clinical consultation and education
- Insurance coverage, patient assistance programs, and billing
Educating Providers and Engaging Potential Champions

- Provide educational opportunities; helpful to offer CMEs
- Feature PrEP-experienced/knowledgeable providers at educational events/trainings
- Develop locally-focused educational webcasts/webinars
- Hold PrEP sessions during local or regional meetings and conferences
- Meet with healthcare leaders (e.g., HMO medical directors, Medicaid directors, FQHC/CHC directors)
- Meet with provider organizations (e.g., medical associations, subspecialty groups, regional community health center organization)
- Meet with potential provider groups (e.g., HIV care groups, LGBT clinic practices, sexual health providers)
- Public health detailing
Resources for Providers

• U.S. Public Health Service Clinical Practice Guidelines for PrEP and Clinical Provider’s Supplement
• CDC-funded HIV Prevention Capacity Building Assistance Providers and STD/HIV Prevention Training Centers
• HRSA-funded AIDS Education and Training Centers
• CDC Online PrEP Resources
• PrEPLine @ UCSF Clinical Consultation Center
• NACCHO’s PrEP for Local Health Departments Educational Series
PrEPLine
855-448-7737
11:00 AM – 6:00 PM EST

Introducing the CCC PrEPLine!
Posted on September 29, 2014

PrEPLine, 855-448-7737
The CCC Pre-Exposure Prophylaxis Service
11 a.m. – 6 p.m. EST

PrEPLine to Provide Clinicians with Advice on New HIV Prevention Tool

We’re excited to announce our brand new service, the CCC Pre-Exposure Prophylaxis consultation telephone service, or PrEPLine. This service will provide free, expert advice to clinicians across the country on PrEP, an important new HIV prevention tool. PrEP involves providing antiretroviral drug treatment to HIV uninfected persons to prevent HIV infection.

The PrEPLine is staffed with an expert team of HIV clinicians who advise healthcare professionals on the indications for and proper implementation of pre-exposure prophylaxis (PrEP). The PrEPLine rounds out the spectrum of HIV treatment and prevention consultation services for clinicians at the CCC. Joining the Warmline for consultation advice on HIV/AIDS management, the PEPLine for bloodborne pathogen exposure advice, and the Pain/Asi Hotline for advice on HIV in pregnancy and infancy, the CCC has continually evolved to address the clinical needs arising from the HIV epidemic, whose next phase includes the quest for an HIV-free generation. The addition of the PrEPLine serves the National HIV/AIDS strategy’s first goal of reducing new HIV infections by making state-of-the-art information and consultation on prevention available to providers across the country.
PrEP Delivery/Implementation Models

- **Internal referral**: clinic housed within or operated by the health department

- **External referral**: private/community providers prescribing PrEP

- **Blended implementation model**: health department (or CBO) staff provide some or all of the HIV and STI screening and counseling services; private/community providers prescribe PrEP
Supporting PrEP Implementation in Your Jurisdiction

- Identify at-risk populations (Module 2)
- Provide community and provider education (Module 3.1)
- Create and disseminate resource inventories
- Serve as a resource/local experts for providers, community members, and partners
- Identify individuals who might benefit from PrEP and make referrals to PrEP providers
- Monitor and evaluate the implementation and impact of PrEP in your jurisdiction
- Providing funding to community organizations and agencies to support PrEP implementation
Resource Inventories for the Community

- Patient-focused educational information
- Providers willing to prescribe PrEP
- LGBT (MSM) friendly providers
- Pharmacies familiar with antiretroviral medication
- Locations for STI and/or HIV screening
- Local champions/experts – Are there local PrEP champions that would be willing to be identified as such? Or champions among your health department staff that could serve as local experts or resources?
Resource Inventory Example: New York City
Resource Inventory Example: New York City
<table>
<thead>
<tr>
<th>Clinic</th>
<th>Phone Number(s)</th>
<th>Evening and Saturday Hours</th>
<th>PrEP</th>
<th>PEP (free for the uninsured)</th>
<th>Free PEP starter packs</th>
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<tbody>
<tr>
<td>Comprehensive Health Care Center- Montefiore Medical Center</td>
<td>718-644-2937</td>
<td>Mon. to Thurs. until 9 p.m.; Sat. 8:30 a.m. - 5 p.m.</td>
<td>X</td>
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<tr>
<td>HELP/PSI CHIWide Primary Care</td>
<td>855-681-8700</td>
<td></td>
<td>X*</td>
<td>*</td>
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<tr>
<td>West Farms Family Practice-Montefiore Medical Group</td>
<td>718-644-2937</td>
<td>Mon. to Thurs. until 7 p.m.; Sat. 8 a.m. - 11:45 a.m.</td>
<td>X</td>
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<tr>
<td>ACS Clinic- Jacobi Medical Center</td>
<td>718-918-4333</td>
<td></td>
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<tr>
<td>Castle Hill Family Practice</td>
<td>718-644-2937</td>
<td>Mon. to Thurs. until 7 p.m.</td>
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<td>Marble Hill Family Practice-Montefiore Medical Group</td>
<td>718-644-2937</td>
<td>Mon. and Thurs. until 7 p.m.; Sat. 9 a.m. - 1 p.m.</td>
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<tr>
<td>North Central Bronx Hospital</td>
<td>718-519-4804</td>
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<tr>
<td>The Oval Center at Montefiore</td>
<td>718-882-5482</td>
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<td>X</td>
<td>X</td>
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<tr>
<td>Morrisania STD Clinic</td>
<td>347-396-7959</td>
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<td>X**</td>
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</tr>
<tr>
<td>South Bronx Health Center</td>
<td>718-644-2937</td>
<td>Mon. to Thurs. until 7:30 p.m.; Fri. until 5:30 p.m.; Sat. by appointment only</td>
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Resource Inventory Example: Seattle & King County

Pre-Exposure Prophylaxis (PrEP)
Pre-exposure prophylaxis is a new HIV prevention method for people who do not have HIV. It involves taking a daily pill to reduce the risk of becoming infected with the virus.

- **PrEP Q&A: Using HIV Drugs to Prevent HIV Infection** | Also available in Spanish.
  This fact sheet answers common questions about PrEP.

- **PrEP provider list**
  A list of local medical providers who will screen for, prescribe, and monitor PrEP for people at high risk of HIV infection.

- **Washington State PrEP Drug Assistance Program** (PrEPDAP)
  This program provides assistance in paying for PrEP.

For health care providers:

- **PrEP provider list**
  Includes information for providers about the PrEP provider list.

- **2014 CDC PrEP clinical practice guidelines**
  Comprehensive clinical information for the use of daily oral antiretroviral PrEP.
### PrEP Providers List – Public Health – Seattle & King County

The following is a list of medical providers who have expressed a willingness to screen for, prescribe, and monitor pre-exposure prophylaxis (PrEP) for people at high risk of HIV infection.

#### Medical Providers:

<table>
<thead>
<tr>
<th>Provider(s)</th>
<th>Clinic</th>
<th>Phone</th>
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<tbody>
<tr>
<td>Dave Holt, ARNP</td>
<td>Capitol Hill Medical</td>
<td>206 720 9999</td>
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<tr>
<td>Jessica Rongitsch, MD</td>
<td></td>
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<tr>
<td>Vy Chu, MD</td>
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<tr>
<td>Karen Johnson, ARNP</td>
<td>Country Doctor Community Clinic</td>
<td>206 299 1600</td>
</tr>
<tr>
<td>Katie Hester ARNP</td>
<td></td>
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<tr>
<td>Kathy Brown, MD</td>
<td>Group Health Cooperative Burien, Capitol Hill, Downtown, &amp; Northgate</td>
<td>206 326 3609</td>
</tr>
<tr>
<td>Byron Doepker, MD</td>
<td>Group Health Cooperative Capitol Hill</td>
<td>206 326 3530</td>
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<tr>
<td>Greg Allen, MD</td>
<td></td>
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<tr>
<td>Kim Waarvick, MD</td>
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<tr>
<td>Alison Roxby, MD</td>
<td>Madison Clinic at Harborview</td>
<td>206 744 5100</td>
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<tr>
<td>Bob (Robert) Harrington, MD</td>
<td></td>
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<tr>
<td>Connie Celum, MD, MPH</td>
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<td>H. Nina Kim, MD, MSc</td>
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<tr>
<td>Jared Baeten, MD, PhD</td>
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<tr>
<td>Jeanne Marrazzo, MD, MPH</td>
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<tr>
<td>Mary Campbell, MD</td>
<td></td>
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<tr>
<td>Ruanne Barnabas, MD</td>
<td></td>
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<tr>
<td>Shireesha Dhanireddy, MD</td>
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Resource Inventories for Providers

• Provider-focused educational information
• Billing codes for PrEP
• Payer (i.e., large private health care plans, Medicaid) contact information
• Pharmacies familiar with antiretroviral medication
• Locations for STI and/or HIV screening
• Local PrEP champions/experts willing to be consulted by other providers
HD staff Identify and Refer to PrEP

• Disease intervention/partner services staff – ideally situated to identify persons who might benefit from PrEP
  o Direct assessment of PrEP need/benefit at time of partner services
  o Review registry lists of persons treated for STIs (e.g., MSM with rectal bacterial infections or early syphilis) – see Module 2

• Other outreach staff based in the community, such as patient navigators, health educators, youth educators

• Potential locations for identification and referral:
  o Publically-funded STI and/or HIV settings
  o Outreach to emergency rooms and urgent care settings providing PEP
Monitoring and Evaluating the Impact of PrEP: What to assess?

- PrEP uptake/utilization
  - Provider report, pharmacy report, community self report
- Satisfaction with PrEP as an HIV prevention strategy
- PrEP adherence and discontinuation
- STD cases/rates in persons or populations utilizing PrEP
  - Is there evidence of behavioral disinhibition?
  - Is there evidence that self-reported risk perception has changed?
- Reduction in HIV incidence
Monitoring and Evaluating the Impact of PrEP: How to assess?

- Direct measurement through health department clinics or health department-funded clinics
- Community-based surveys (e.g., National HIV Behavioral Surveillance)
- Patient surveys at PrEP delivery sites
- Patient surveys at STI/HIV screening sites, or other publically funded clinical settings
- Convenience samples (e.g., clinic-based, online, LGBT media)
- HIV surveillance data
Disseminating Assessment Data and Engaging Providers

• Positive reinforcement is helpful for providers. Providers interested in:
  o Patient satisfaction
  o Patient risk perception and use of PrEP – Are patients using PrEP in concert with other prevention methods?

• STD rates among those using PrEP – Is STI screening occurring? Is there evidence of behavioral disinhibition locally?

• May also be helpful to assess provider satisfaction with PrEP and their ongoing needs related to PrEP
Assessment of the PrEP Delivery Cascade

**Community/Patient**
1. At risk for HIV infection
2. Identified as PrEP candidate
3. Interested in PrEP

**Provider**
1. Providing health care to high risk populations
2. Educated about PrEP
3. Willing to provide PrEP

**Steps**
4. Linked to PrEP program
5. Initiated PrEP
6. Retained in PrEP program
7. Achieve and maintain medication adherence
What can local health departments do?

- Develop community profiles for HIV prevention planning
- Educate at-risk community members, healthcare providers, and other HIV prevention partners
- Create resource inventories and serve as local experts
- Conduct risk assessments and make referrals to PrEP providers
- Support PrEP delivery (e.g., HIV and STI screening, adherence and behavioral risk counseling support)
- Deliver PrEP via health department clinic
- Provide funding to community organizations and agencies to support PrEP implementation
- Monitor and evaluate PrEP implementation and impact
NACCHO’s Educational Series on PrEP and Local Health Departments

Module 1
- PrEP for HIV Prevention: An Introduction
- Beyond the Basics: The Science of PrEP
- US Public Health Service Clinical Practice Guidelines for PrEP

Module 2
- Who Might Benefit from PrEP: Individual-level Assessments

Module 3
- Increasing PrEP Awareness and Knowledge in Your Jurisdiction
- Incorporating PrEP into Comprehensive HIV Prevention Programs

NACCHO’s educational series about PrEP was supported by funding from Gilead Sciences, Inc.