

PrEP ACCESS IS A RIGHT!



Health plans should cover it at no cost to patients



POPULATION

Persons at high risk of HIV acquisition



RECOMMENDATION

The US Preventive Services Taskforce (USPSTF) recommends that clinicians offer pre-exposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of HIV acquisition

GRADE

A



Starting in January 2021 most private insurance plans must provide \$0 cost-sharing for at least one PrEP product.

With this recommendation, ACA patient protections will require Medicaid expansion programs and commercial health plans to cover PrEP, without cost-sharing, starting with the 2021 plan year. Traditional Medicaid programs are not required to cover PrEP without cost-sharing but receive an increased federal match for covering USPSTF Grade A and B services without cost-sharing. The USPSTF recommendation means that most private insurance plans could eliminate patient out-of-pocket costs for PrEP, including deductibles, copayments, or coinsurance.

How to verify PrEP is covered as a preventive service?

Here are the four steps to verify whether a health plan covers PrEP medications as a preventive service. Having a preventive service designation means that the drug will be covered at no cost to the client/patient.

1

Visit www.healthcare.gov/see-plans and enter your zip code.

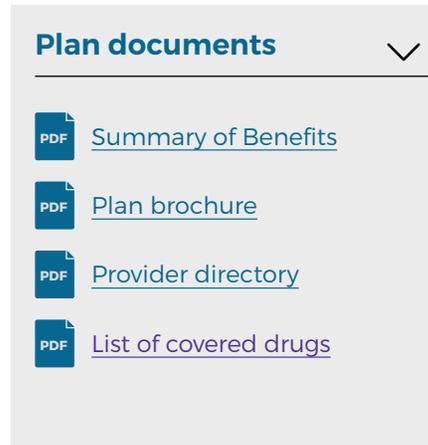


Use a health plan finder to understand a plan's coverage. You will be asked to enter your zip code and there might be a few additional questions, but you can skip them if you are only looking at how the medication for PrEP is covered. If your client already has a plan, skip the finder and visit that insurance carrier's website to view the plan documents instead.

Most **state-based marketplaces** also offer a search tool. Look for links about "comparing plans." You can find your state-based marketplace site on [NASTAD's PrEP resources page](#).

2

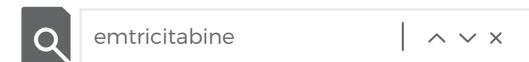
After choosing a health plan to look up, go to "list of covered drugs" under "plan documents."



3

Search "Truvada" or "emtricitabine-tenofovir disoproxil fumarate" (or Descovy if indicated)

The list of covered drugs, also called a drug formulary, may be presented as a long document or through a search box. In either case, look up the drug's name using your browser's search function (Ctrl + F) or on the search box itself.



If you search "emtricitabine" or "tenofovir" only, instead of the full name, the results may include additional medications also used for HIV treatment. There should be nothing extra and nothing missing. The dosage for PrEP is the 200-300mg combination.

Drug Name Search

Enter a drug name to begin

emtricitabine-tenofovir disoproxil fumarate

This is how you verify whether a plan covers PrEP as a preventive service!

4 The drug should be listed as “Health Care Reform” or “ACA Preventive,” but some only indicate “\$0 copay.” There is no uniform format to list preventive drugs and the preventive drug tier number varies by the insurance carrier.

Some plans add a label indicating “ACA” next to the drug, while also including a tier number. The ACA label is meant to clarify that the \$0 cost-share only applies to preventive use but not treatment.

TRUVADA TABLET 100-150 MG ORAL	2	
TRUVADA TABLET 133-200 MG ORAL	2	
TRUVADA TABLET 167-250 MG ORAL	2	
TRUVADA TABLET 200-300 MG ORAL	2	ACA NCDL, limitations may apply

TRUVADA 200-300 MG TAB
emtricitabine-tenofovir disoproxil fumarate 4

5
HCR Health Care Reform
PR Preventive Medication

Some plans list the drug by its brand name only. Others list brand and generics separately.

→ 30 [emtricitabine-tenofovir df oral tablet 200-300 mg](#)

→ [Truvada Oral Tablet 100-150 MG](#)

→ [Truvada Oral Tablet 133-200 MG](#)

→ [Truvada Oral Tablet 167-250 MG](#)

→ 30 [Truvada Oral Tablet 200-300 MG](#)

If you see TDF/FTC or Truvada listed multiple times, the dosage for PrEP is 200-300 mg.

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	ACA
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg	3				*
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	3				*
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	3				*
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	3				* •

Some plans describe ACA coverage benefits and some don't.

ACA Preventive (ACA): Medicines marked in the ACA column are under the Affordable Care Act coverage of preventive services. These products have limited or \$0 member cost-sharing (copay or co-insurance) when meeting the conditions as outlined under the regulation. These are also indicated with an “A” in the drug tier column.

Preferred drug lists divide drugs into several buckets, called drug tiers. These are the numbers you see listed next to each drug. Here you see that some examples list TDF/FTC in tiers 2, 3, or 4. A lower drug tier usually means that the plan offers more generous coverage, the payments are lower, and no prior authorization is required. Regardless of the tier listed for TDF/FTC, it will always have \$0 cost-sharing when used for HIV prevention.

Please contact the NASTAD PrEP team at PrEP@NASTAD.org with any questions.

Some plans place preventive drugs as the lowest drug tier

- **Tier 0** No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age or gender limits apply.
- **Tier 1** Preventative drugs with no member cost share under the Affordable Care Act
- Tier 2** Generic Drugs
- Tier 3** Preferred Brand Drugs
- Tier 4** Non-Preferred Brand Drugs
- Tier 5** Specialty Drugs

Others use the highest drug tier

- **Tier 7** (Zero Cost Share Preventive Drug)-The Patient Protection and Affordable Care Act of 2010 allows members to receive some preventive, evidence-based items and services at no cost to the member with certain stipulations.

Plans may also list preventive services on a separate list. If TDF/FTC is not labeled as preventive, take a step back to the plan documents (step 2). Look for a separate document titled “preventive services” or “ACA covered services.”

HUMAN IMMUNODEFICIENCY VIRUS (HIV) PREVENTION
→ Medication for preexposure prevention of HIV in those at an increased risk.

Truvada 200 mg/300 mg tablet

\$0 copay if utilizing for HIV prevention