

2023 ANNUAL MEETING

ACCESS

engage

& **ACTIVATE**

RECENTERING
KEY POPULATIONS



Data to Care Rx

Katrease Hale

Overview

What is Data to Care Rx?

- Data to Care Rx is based off a program called data to care (D2C)
- D2C programs use information like HIV lab reports to determine if an individual is out of HIV medical care
- Rx takes this one step further and introduces an opportunity to engage with pharmacists to use prescription refill data and information to reach people before they fall out of care

Program Goals of Data to Care Rx

1. Increase the level of involvement of pharmacists in the current care model for PLWH

Why are we
leaving
pharmacists out?

- Currently the care model mainly focuses on RW agencies, clinicians, and the county
- D2C Rx aims to maximize the potential for pharmacist integration

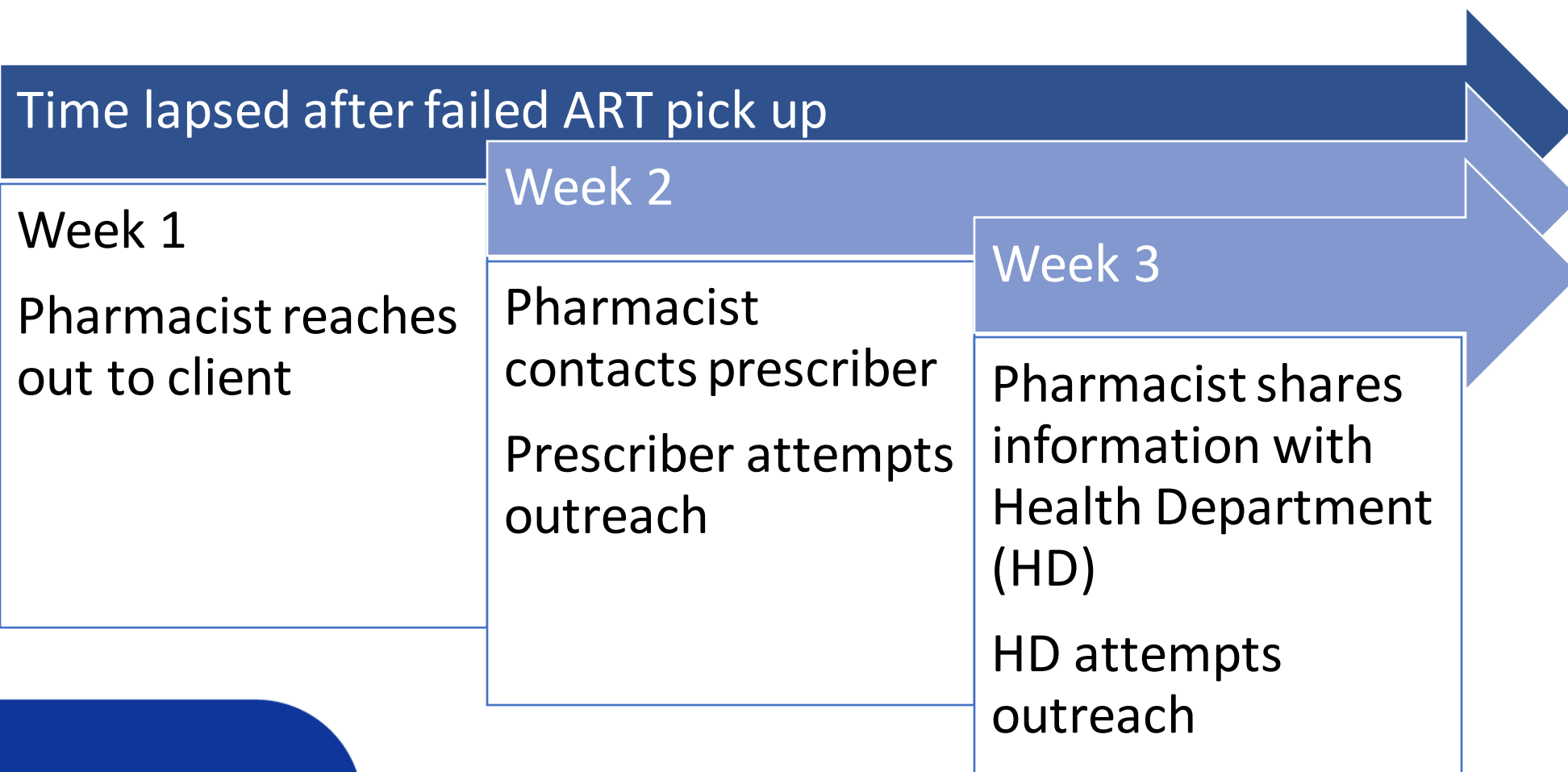
Program Goals of Data to Care Rx

2. Increase viral suppression amongst PLWH

Viral Suppression
is one way we can
End the Epidemic

- Through increased involvement of pharmacists, clinicians, and County/State Health Departments
- D2C Rx will also offer PLWH referrals for RW agencies that can support individuals' non-medical needs
- D2C Rx allows Health Departments to intervene as barriers to care and adherence are occurring instead of a year later

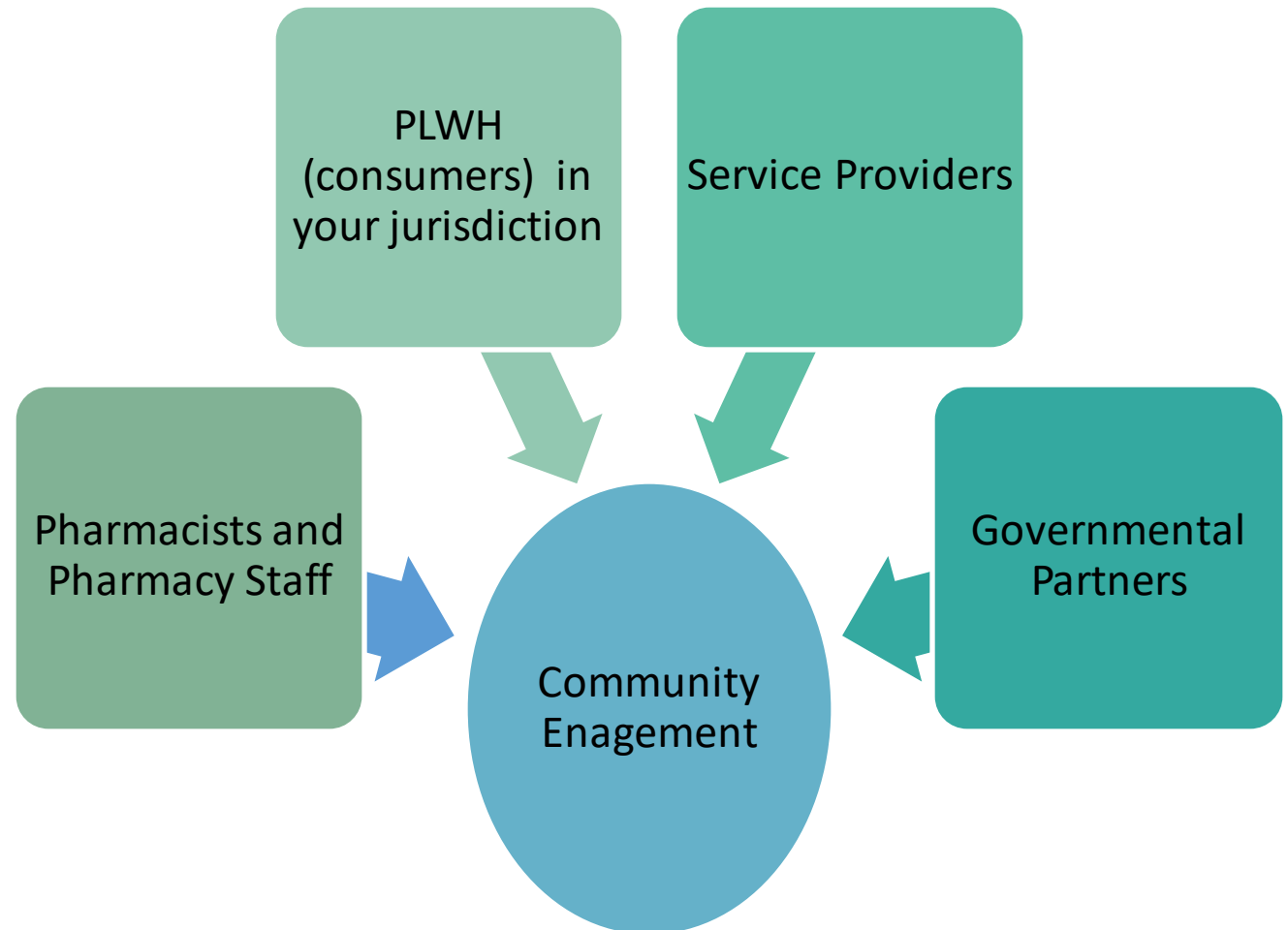
What does this intervention look like?



Identifying Partnerships and Obtaining Buy-in

Partners & Tips

In preparation for engagement, think about who your stakeholders and champions will be. This includes an internal planning group (core group) and external stakeholders (pharmacists, etc.).





Governmental Partners

Group Description: Includes State Department of Health, ADAP, and the other county health departments that make up your area.

Engagement Tips: Start by sharing NASTAD's overview of Link-Up Rx to prompt a conversation about the feasibility of this program in your area.

<https://ciehealth.org/intervention/link-up-rx/>

Service Providers

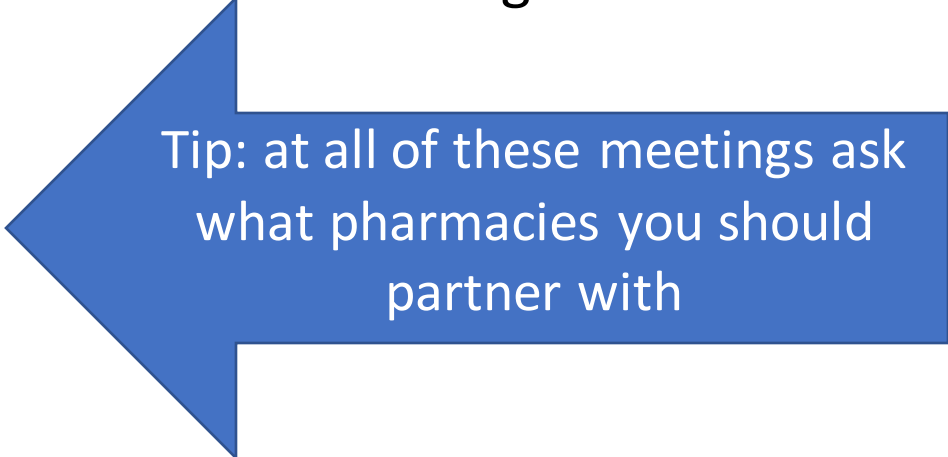
Group Description: This group is made up of funded agencies in your jurisdiction that deliver Ryan White services (EIS, MCM, etc). This is an important group to bounce protocols and other programmatic decisions off of because they are the group that engages with PLWH the most and are attuned to what will and will not work.

Engagement Tips: There are often already established provider and network meetings that these individuals attend, try to get on some of the agendas and stay in regular communication with these groups.

People Living with HIV (PLWH)

Group Description: People living with HIV in your jurisdiction and this could be people receiving services or not.

Engagement tips: Go to your planning council, quality committees at Ryan White agencies you fund as many have regularly scheduled and consistent meetings with consumers.



Tip: at all of these meetings ask what pharmacies you should partner with

Pharmacies and Pharmacy Staff

Group Description: This will include a variety of positions, including but not limited to: pharmacists, case management staff at the pharmacy, pharmacy benefit managers and pharmacy techs.



The next slides
are going to
focus on
engaging this
group

Step 1: Identify Pharmacists and Pharmacy Staff

Purpose: The purpose of meeting with pharmacists/pharmacy staff is to gauge interest in the Link-Up Rx partnership and to gain valuable information for designing and rolling out this intervention.

Tips for Selecting and Engaging Pharmacists

- Request a list of pharmacies from ADAP or PBM (Pharmacy Benefit Manager) that serve a high volume of PLWH in your county/jurisdiction
- Use this list to identify 10-15 pharmacies to invite to your series of conversations
- Make sure to include pharmacy staff as well as pharmacists as they are incredibly helpful in designing and implementing a consumer focused intervention
- This list should not contain any client-level data, it should just include the number of clients served by pharmacies in your county/jurisdiction so no data use agreement should be needed

Step 2: Plan a community conversation for pharmacists and staff

Potential Questions for Pharmacy Focused Community Conversation

- What steps do pharmacists take to connect with people who do not pick up their medication?
- What is the ideal timeframe for pharmacists to conduct outreach with clients that do not pick up their medications?
- How long do pharmacists hold medications before putting them back into stock?
- Do you have access to your patients' HIV labs (viral load, CD4)?
 - If no, would you like to receive this information to assist with adherence counseling?
- Would pharmacists share client information for those that don't pick-up ART scripts with the health department so the health department could reach out to these clients and offer supportive services?
- How do you think your clients would feel about receiving outreach from health department staff on your behalf?

Potential Questions for Pharmacy Focused Community Conversation

- The program we might model this after used a 3-week timeframe for outreach:
 - Week 1 after a client does not pick up meds, the pharmacy would reach out.
 - Week 2 the prescribing doctor would reach out.
 - Week 3 the health department would reach out.
- How do you think this model would work in our area?
- How will D2C Rx work at a large-scale pharmacy (i.e. hospital system) vs. a smaller pharmacy? Could the process be standardized?
- How could we support pharmacies to implement Link-Up Rx?
- Is there anything else you think we should know or be thinking about when it comes to assisting people living with HIV getting their medications?

NASTAD Currently Supports Jurisdictions Interested in Data to Care Rx

Broward County

NASTAD is partnering with Broward County to assist in the development and implementation of Data to Care Rx.

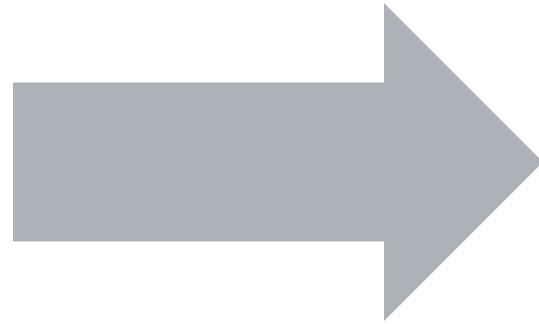
Link-Up Rx

NASTAD partnered with the Detroit Health Department and State of Michigan Department of Health to do an evaluation and Implementation Guide.

Tentative Timeline: Broward County

Fall 2022

Broward County started discussions with NASTAD about Link-Up Rx



Early 2023

Engagement strategy developed for Broward County to talk to pharmacists, PLWH, and RW providers

May-June 2023

Meetings with partners to gather feedback on Link-Up Rx



July-August 2023

Incorporate feedback from partners, select pharmacy(s) to partner with

September - October 2023

Hire & train staff, share final program design with partners, work through DUA with selected pharmacies



November 2023:

Program begins!

Lessons Learned from Detroit's Link-Up Rx

- Pharmacists are great partners
- Investigation is much quicker than D2C
 - Average: 15 minutes to find client
- Link-Up Rx clients have fewer barriers than D2C clients thus are easier to re-engage
- Insurance, insurance, insurance – there were a surprisingly high number of insurance problems encountered by PLWH and anyone considering implementing this intervention should have a good working knowledge of the insurance landscape in your area

Successes from Detroit's Link-up RX

- ❑ Compared to traditional Data to Care, Rx has Higher rates of re-engagement
 - ❑ Link-Up Rx clients have fewer barriers than D2C clients
 - ❑ 50% linked back to care for Link-Up Rx from Jul – Dec 2018 versus 21% for D2C during Jan – Dec 2018
- ❑ Client response – Very receptive, especially when MedCart is mentioned in conversation
- ❑ Developed Insurance Task Force – Workgroup to develop solutions started Feb 2019 including: DHD, consumers, MDHHS, Ryan White case managers, pharmacists, Medicaid, MIDAP