

Treatment Access Expansion Project



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Background

The Treatment Access Expansion Project (TAEP) was established in 1998 to secure support for the development of Medicaid expansion programs improving access to early and comprehensive health care for non-disabled persons living with HIV. Currently, individuals living with HIV who have not been diagnosed with an AIDS diagnosis are generally ineligible for Medicaid because they do not meet Medicaid's disability standards. These standards reinforce a system where access to care and treatment lags far behind established standards of care for treating HIV.

Relatively new treatments have greatly improved both the health and quality of life for many people living with HIV. However, without access to early intervention health care and treatment, these advances remain out of reach for thousands who are non-disabled and low-income. TAEP seeks to eliminate disparities in access to care suffered by many traditionally underserved populations.

The mission of the TAEP project is to ensure that pre-disabled individuals living with HIV get the medical care they need to stay healthy for as long as possible. TAEP addresses HIV care and treatment access needs in several ways. TAEP seeks to secure increased health care coverage through the passage of the Early Treatment for HIV Act (ETHA), which would allow states to readily provide Medicaid access to pre-disabled persons living with HIV. TAEP supports state-based efforts, including 1115 Medicaid pre-disability waivers, expanded financial eligibility rules, and private insurance buy-in programs. Finally, TAEP works to ensure that Medicaid programs do not implement policies that cause financial hardship for Medicaid beneficiaries nor create significant barriers to getting necessary prescription drugs.

TAEP is currently a collaborative project of the HIV/AIDS community, health care providers and the pharmaceutical industry, including the National Association of People with AIDS, the National Association of State and Territorial AIDS Directors, the Title II Community AIDS National Network, the HIV Medicine Association, Project Inform, Bristol-Myers Squibb, Hoffmann-La Roche, Abbott Laboratories and Glaxo Smith Kline.

For more information on TAEP please call Robert Greenwald at (617) 390-2584 or email at rgreenwa@law.harvard.edu

Past Efforts

To date, with TAEP assistance, several states and the District of Columbia have submitted HIV waiver applications to the Centers for Medicare and Medicaid Services. Massachusetts, Maine and Washington DC have submitted successful applications. The Massachusetts program has enrolled over 750 pre-disabled people living with HIV in the first year of operation. The Maine program began operation in July 2002. The Washington D.C. program is scheduled to begin operation in the winter of 2002. Georgia has submitted an application that is awaiting final approval.

TAEP has provided technical assistance on the development of HIV Waivers for pre-disabled people living with HIV in Massachusetts, Maine, Georgia, North Carolina, Kansas, Illinois and Washington D.C. The TAEP pharmoeconomic model, that estimates the costs/savings of providing early intervention care and treatment, has been used in several states and provided the sole fiscal basis for the Georgia HIV waiver application.

TAEP has played a leadership role in challenging efforts to contain or reduce Medicaid spending that would result in insufficient benefit packages or harmful restrictions to the care and treatment available to those living with HIV. TAEP consultants have developed fact sheets, sign-on letters and legislative alerts, resulting in grassroots advocacy addressing proposed Medicaid cuts.

TAEP has led the nationwide effort to secure passage of the Early Treatment for HIV Act. This year, we conducted a Capitol Hill briefing (attended by over 200 people and including representatives from over 20 Congressional offices) and a White House briefing (attended by staff of the Domestic Policy Office, Office of National AIDS Policy, HHS, CMS and OMB). TAEP members are currently in the process of meeting with all congressional offices in an effort to secure increased and bi-partisan support of the bill. In this period of relative inactivity on all issues other than defense

- **To work with states developing Medicaid expansion proposals.** Currently, TAEP is working with individuals in Illinois on designing an HIV Waiver expansion proposal. Individuals in North Carolina and Washington have expressed an interest in working with TAEP to develop a waiver proposal.
- **To ensure that state Medicaid programs offer comprehensive benefits packages, including unrestricted access to HIV medications.** Given the important role that prescription drugs play in the lives of those living with HIV, ensuring open access to this benefit will become an increasingly visible and essential component of TAEP's work. TAEP will work to build coalitions to address Medicaid-based prescription drug access issues for people living with HIV and to ensure the inclusion of our concerns in the agenda of national organizations working to address Medicaid-based prescription drug issues. TAEP will develop written materials, including a proposed advocacy agenda for the National Organizations Responding to AIDS, highlighting the important role that prescription drugs play in the lives of Medicaid beneficiaries living with HIV. TAEP activities will include presentations at national and state conferences, trainings, and community organizing, to highlight how measures such as prior authorization, restricted formularies, cost-sharing/co-payments and limits on the number of prescriptions, compromise the health of beneficiaries and undermine the effectiveness of HIV care and treatment programs. TAEP will provide state-based support/technical assistance to jurisdictions facing Medicaid prescription drug benefit reductions and those working to expand drug coverage.
- **To update and provide new tools for the use of our pharmoeconomic model, demonstrating the cost-effectiveness of earlier intervention HIV therapy.** The TAEP model will be updated to address the savings and benefits of Medicaid expansion beyond the Medicaid program. These benefits include, among others, the improved treatment of co-infections, decreased rates of new HIV and hepatitis cases, savings to SSI and other public benefits programs, and increased tax revenues. The TAEP model will be used to work with the Congressional Budget Office in determining the costs/savings of ETHA and to provide the fiscal basis for state-based 1115 Waivers before the Centers for Medicare and Medicaid Services.
- **To work with states that are implementing approved Medicaid expansion programs to ensure the successful implementation of the programs.** TAEP will work to ensure that states' outreach and marketing efforts maximize the participation of people living with HIV. In particular, we will support efforts that encourage testing and bringing individuals who are not presently diagnosed or integrated in any care or service system into Medicaid. TAEP will develop marketing/outreach materials and serve as a clearinghouse for the dissemination of state-designed materials. The primary outreach message will be *"Get Tested. Get Care. If you are **HIV+** you can now get **free** health care coverage through Medicaid."*