



DAMIEN CENTER
ONE HOME FOR HIV WELLNESS

Apretude Updates

Apretude
10/17/2024

Damien Apretude Program



Angela Mattingly, PharmD,
AAHIVP (She/Her)
Clinical Pharmacist



Nick Sanders, BA (He/Him)
Senior Program Manager of
Prevention Services

Damien Center Clinic

- Clinic staff include physician, nurse practitioners, registered nurses, medical assistants, clinical pharmacists
- Damien Pharmacy on-site
- Laboratory on-site
- Primary care, HIV care, HIV prevention, STI treatment and prevention, Hepatitis C treatment

Program Initiation

- After FDA Approval in December 2021
 - Started with injectable HIV treatment in 2020 and used much of the same process for injectable PrEP
- First injection in February 2023 for CAB-LA
 - Uptake was slow, but quickly increased as interest grew
- CAB-LA program growth as of July 2024
 - 150 active
 - 38 discontinued
 - Reasons include insurance changes, moving, lack of attendance to visits, change in relationship status, side effects
 - Patients stopping due to side effects primarily report injection site reactions

LAI Promotion & Client Education

- Word of mouth
 - Largely community knowledge and referral from within Damien patient/client spaces
- Discussion with provider or pharmacist (if established patient)
- PrEP Navigator
- Recommended by outside care site
 - Local access to Cab-LA is limited

Clinic & Administrative Workflows

- 1. Patient expresses interest in injectable PrEP**
- 2. Provider or Clinical Pharmacist reviews chart and provides education to patient**
 - HIV status, visit attendance, hepatitis B serologies (esp. if switching from oral PrEP), gluteal implants/injections, document clinical reason if applicable
 - Cab-LA patient agreement
- 3. Internal referral made to Clinical Pharmacist to track benefits investigation**
 - Referral is used to track prior authorizations numbers, dates and other details
 - Order for Cab-LA is sent to on-site pharmacy
- 4. Clinical Pharmacist forwards referral to on-site pharmacy to begin benefits investigation**
 - On-site pharmacy attempts to bill the claim and completes pharmacy prior authorization if needed
 - If pharmacy billing, enroll in manufacturer/foundation assistance
- 5. If medical billing required, on-site pharmacy forwards referral to Medical Billing Team**
 - Medical prior authorization is initiated
 - If medical billing, enroll in manufacturer/foundation assistance
 - Approval/denial is documented, and referral is forwarded back to Clinical Pharmacist
- 6. Clinical Pharmacist notifies patient of approval/denial**
 - If approved, Clinical Pharmacist schedules first injection visit

Clinic & Administrative Workflows, cont.

- 1st Injection visit with Clinical Pharmacist (CP)
 - Rapid 4th generation HIV Ag/Ab prior to administration
 - Serum HIV Ag/Ab w/ reflex, Qualitative HIV 1/2 RNA, Bacterial STI testing
 - Cab-LA patient agreement (if not previously signed)
 - Next injection scheduled +/- 7 days of 4 weeks
- Follow up visits (alternating between CP and nursing staff)
 - Serum HIV Ag/Ab w/ reflex, Qualitative HIV 1/2 RNA
 - Next Injection scheduled +/- 7 days of 8 weeks
- Missed injections rescheduled ASAP, ideally within window
 - If outside injection window, recommend bridging with oral PrEP
 - If missed by more than 1 month, will resume schedule as directed in prescribing information

Laboratory Schedule

- Prior to initiation
 - Hepatitis B serologies (esp. if switching from oral PrEP)
 - Rapid 4th generation HIV Ag/Ab test
- Combined HIV Ag/Ab + Qualitative RNA at every injection visit

Table 7 Timing of CAB PrEP-associated Laboratory Tests

Test	Initiation Visit	1 month visit	Q2 months	Q4 months	Q6 months	Q12 months	When Stopping CAB
HIV*	X	X	X	X	X	X	X
Syphilis	X			MSM [^] /TGW [~] only	Heterosexually active women and men only	X	MSM/TGW only
Gonorrhea	X			MSM/TGW only	Heterosexually active women and men only	X	MSM/TGW only
Chlamydia	X			MSM/TGW only	MSM/TGW only	Heterosexually active women and men only	MSM/TGW only

* HIV-1 RNA assay

X all PrEP patients

[^] men who have sex with men

[~] persons assigned male sex at birth whose gender identification is female

Billing Information

Medical Billing

- Administration CPT: 96372 (x1 unit)
- Medication HCPCS: J0739 (x600 units)
 - Modifier 33
- ICD-10: Z20.6, Z79.899

Pharmacy Benefit

- Administration CPT: 96372 (x1 unit)
- Medication HCPCS: EC105 (x1 unit)
- ICD-10: Z20.6, Z79.899

Lessons Learned

- People want injectable PrEP, and it is important to consider growth of the program
 - Consider realistic capacity–limitations and resources needed to accommodate additional growth
 - Don't overlook administration burden
- The whole team is needed
 - Initially leaned into “PrEP Champions” but later needed buy-in from multiple clinical and non-clinical disciplines to ensure success of the program
 - Initially underestimated the time required for scheduling and rescheduling

Looking Ahead

- Dedicated staff for injection schedule
 - Will allow more flexibility for visits and hopefully improve patient retention in program
 - Decrease burden on staff during clinic hours
- Responding to shifting insurance requirements
 - Insurance requirements for patient to fill at mail order pharmacies, even for medical billing
 - Increased responsibility for patients to schedule delivery on time
- More injectable medications on the horizon
 - Plan to largely follow the current model



DAMIEN CENTER
ONE HOME FOR HIV WELLNESS

Questions?

Thank you!