PrEP for Adolescents

Report from the Adolescent AIDS Program
Children’s Hospital at Montefiore
Bronx, NY

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**PrEP Program at AAP**


<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screened for PrEP – see pie chart</td>
<td>31</td>
</tr>
<tr>
<td>Clinically Assessed for PrEP</td>
<td>14</td>
</tr>
<tr>
<td>Prescribed PrEP</td>
<td>7</td>
</tr>
<tr>
<td>Waiting for PrEP</td>
<td>3</td>
</tr>
</tbody>
</table>

**Age n=31**

- ≤ 17: 26%
- ≥ 18: 74%

**Race n=31**

- Black: 32%
- Latino: 58%
- White: 10%

**Gender n=31**

- Male: 52%
- Female: 29%
- Trans MtF: 6%
- Trans FtM: 13%

**Sexual Orientation n=31**

- Gay: 26%
- Bisexual: 35%
- Pansexual / Queer: 13%
- Other: 13%
- Straight: 13%
## PrEP Utilization (n=7)

<table>
<thead>
<tr>
<th>Client #</th>
<th>Age</th>
<th>Race</th>
<th>Gender Identity</th>
<th>Sexual Orientation</th>
<th>Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client #1</td>
<td>20</td>
<td>Latino</td>
<td>Male</td>
<td>Bisexual</td>
<td>Private insurance w/ $110 monthly copay – Gilead</td>
</tr>
<tr>
<td>Client #2</td>
<td>20</td>
<td>Latino</td>
<td>Male</td>
<td>Gay</td>
<td>Private insurance w/ mail order only</td>
</tr>
<tr>
<td>Client #3</td>
<td>19</td>
<td>Latina</td>
<td>Female</td>
<td>Straight (HIV+ partner)</td>
<td>Medicaid</td>
</tr>
<tr>
<td>Client #4</td>
<td>25</td>
<td>White</td>
<td>Male</td>
<td>Gay (HIV+ partner)</td>
<td>Private insurance w/ mail order only</td>
</tr>
<tr>
<td>Client #5</td>
<td>19</td>
<td>Latina</td>
<td>Transwoman</td>
<td>Queer</td>
<td>Private insurance w/ mail order only</td>
</tr>
<tr>
<td>Client #6</td>
<td>16</td>
<td>Latino</td>
<td>Male</td>
<td>Straight (HIV+ partner)</td>
<td>Medicaid</td>
</tr>
<tr>
<td>Client #7</td>
<td>19</td>
<td>White</td>
<td>Male</td>
<td>Gay</td>
<td>Private insurance w/ $150 monthly copay – Gilead</td>
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</tbody>
</table>
Cases

• 16 yo; father consented to PrEP; father is living with HIV; understood the importance of keeping his son HIV negative

• 15 yo group-home resident; engaging in risky sexual behavior; very limited knowledge of HIV and prevention; did not think he could remember to take a pill but will try to use condoms consistently
### Barriers to Adolescent PrEP Uptake

<table>
<thead>
<tr>
<th>Primary Issue for Youth Not Prescribed PrEP (n=21)</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Perception of Risk</td>
<td>6</td>
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<tr>
<td>Adherence Challenges</td>
<td>4</td>
</tr>
<tr>
<td>Parental Disclosure</td>
<td>4</td>
</tr>
<tr>
<td>Low Risk at this Time</td>
<td>3</td>
</tr>
<tr>
<td>Other Medical Priorities</td>
<td>2</td>
</tr>
<tr>
<td>Not Ready</td>
<td>2</td>
</tr>
</tbody>
</table>
AAP’s Protocol
- Sept. 2015 finalized PrEP Policy and Procedure (based on CDC and NYS DOH)
- Minors assessed on a case-by-case basis

Staff
- Attending physician, NPs, PrEP specialists (social worker and LPN)
- All staff received CME training

Recruitment
- Clinical referrals from medical providers; linkage agreements with CBOs
- Word of mouth, partner referrals, packaged with clinical services (hormones & STI screening)
Paying for PrEP

- Private insurance
- Medicaid
- Gilead Patient Assistance & Co-payment Program
- NYS PrEP-AP

- Private fund for minors or uninsured patients

- So far, no denials from private insurance
  -prior-authorization sometimes required
Program Metrics

- % screened, assessed & prescribed
- Retention in care
- Adherence, self report
- Seroconversions
- Patient satisfaction
- Qualitative assessment of facilitators and barriers
Program Challenges

- **Private insurance**
  - Prior authorizations, high copayments ($100+/month), requirement for mail-order pharmacies and EOBs threaten confidentiality

- **Parental consent**
  - At least 2 youth MIA from all medical/mental health care after told they needed parental involvement

- **Multiple follow up visits**
Program Successes

- Dedicated PrEP specialist
- Primary care as gateway to PrEP: HIV/STI testing, hormone care
- Continued engagement of patients not initially interested
- Flexibility with follow-up/in-person visits
- Improved psychosexual health
Priorities for Change

1. Insurance coverage for minors
2. Parental consent waiver
3. Increased access in primary care settings
4. Scaling up routine HIV testing
5. Understand and communicate current youth facilitators to PrEP
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