Dear Ryan White HIV/AIDS Program Part B AIDS Drug Assistance Program Colleagues:

The U.S. Food and Drug Administration (FDA) is expected to soon approve a long-acting antiretroviral (ARV) medication. Long-acting ARV medications have the potential to address challenges related to treatment adherence. However, long-acting ARVs will likely involve supply and payment chains different than those most often used by RWHAP ADAPs. These medications may require increased medical office visits for medication administration and RWHAP providers may experience increased costs for office visits as a result. The Health Resources and Services Administration’s (HRSA) HIV/AIDS Bureau determined the cost of administering an antiretroviral medication on the RWHAP ADAP formulary, including the cost of an office visit exclusively for medication administration, is an allowable cost under the ADAP service category (see § 2616(c)(4) of the Public Health Service Act). For clients with health care coverage, ADAPs can cover the client’s cost-sharing related to that visit.

In addition to addressing suboptimal adherence, the potential benefits of long-acting ARVs include allowing for less-frequent dosing, avoidance of pill fatigue, amelioration of challenges associated with oral medications, and protecting health privacy. RWHAP ADAPs play a key role in providing access to medications for people with HIV and in meeting the goals of the Ending the HIV Epidemic: A Plan for America. Once long-acting ARV medications are available, HRSA recommends RWHAP ADAPs consider adding long-acting ARVs to their formularies.

Please contact your RWHAP Part B project officer in the Division of State HIV/AIDS Programs if you have any questions and to share any challenges you are facing, or anticipate facing, concerning this issue.

Sincerely,

/Laura W. Cheever/

Laura W. Cheever, MD, ScM
Associate Administrator