

HIV PRE-EXPOSURE PROPHYLAXIS (PREP) AT A GLANCE: MARCH 2022

INTRODUCTION

The HIV PrEP At a Glance tool provides an overview of the coverage of key PrEP services in Massachusetts as of February 23, 2022 in order to give health care providers quick access to basic coverage information to help inform discussions with patients about treatment. The tool provides a series of tables that outline coverage (and related costs and restrictions) for three categories of health insurance plans: (1) silver-level Qualified Health Plans (QHPs), (2) ConnectorCare plans, and (3) Medicaid (MassHealth) plans. The information in these tables is based upon publicly available information on the Massachusetts Health Connector website and individual insurer websites. **Please note that health insurance plans occasionally alter coverage, associated costs, or restrictions over the course of a plan year. Health care providers and plan members should therefore always confirm coverage by contacting the individual plan.** To confirm the current coverage status of any service, providers and members can use the contact numbers provided under each table.

Important facts about PrEP coverage in Massachusetts:

- As of the 2021 plan year, QHPs, ConnectorCare plans, and Medicaid plans must provide PrEP without cost-sharing.¹
- These plans must also cover certain ancillary services at no additional cost, including HIV testing, hepatitis B and C testing, creatinine testing and calculated estimated creatine clearance or glomerular filtration rate, pregnancy testing, sexually transmitted infection screening and counseling, and adherence counseling.²
- Plans are permitted to use “reasonable medical management techniques” (e.g., a plan may cover generic emtricitabine/tenofovir but not the equivalent brand medication, Truvada) subject to certain restrictions.³
- For individuals that face ongoing barriers related to the cost of PrEP, the **Massachusetts Pre-Exposure Prophylaxis Drug Assistance Program (PrEPDAP) helps Massachusetts residents pay for approved medications.** More information about PrEPDAP is available at <https://crine.org/prepdap>.
- Many plans do not cover new brand name medications during a six-month clinical review period. As a result, **it is possible that more plans will cover Apretude later in the year.**

Did you know? Patients who are on another person’s health insurance plan (such as that of their parent, spouse, or partner) may be able to request that they receive an insurance company’s summary of payment (SOP) or explanation of benefits (EOB) form directly, rather than having it sent to the insurance policy holder. In addition, health insurance plans may not identify or describe PrEP-related and other “sensitive health care services” in an SOP or EOB. More information is available at <https://www.hcfama.org/confidentiality>.

¹ This requirement comes from the United States Preventive Services Task Force (USPSTF) recommendation regarding PrEP issued in June 2019. In the final recommendation, USPSTF recommends offering PrEP to persons who are at high risk of HIV infection, concludes there is a substantial net benefit from the use of PrEP in persons at high risk for HIV infection, and provides an “A” rating for this recommendation. U.S. Preventive Servs. Task Force, *Preexposure Prophylaxis for the Prevention of HIV Infection: US Preventive Services Task Force Recommendation Statement*, 321 JAMA 2203 (2019).

² In July 2021, the Departments of Labor, Health and Human Services, and Treasury issued guidance clarifying requirements for PrEP-related services that applies to many insurers, including most private insurance plans. DEPTS. OF LABOR, HEALTH AND HUMAN SERVICES, & THE TREASURY, *FAQ about Affordable Care Act Implementation Part 47*, <https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/FAQs-Part-47.pdf> (July 19, 2021).

³ DEPTS. OF LABOR, HEALTH AND HUMAN SERVICES, & THE TREASURY, *FAQ about Affordable Care Act Implementation Part 47*, <https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/FAQs-Part-47.pdf> (July 19, 2021).

MASSACHUSETTS SILVER-LEVEL QUALIFIED HEALTH PLANS

The table below summarizes coverage of PrEP and related services in the silver-level Qualified Health Plans (QHPs) available to individuals via the Massachusetts health insurance marketplace (Massachusetts Health Connector). The silver-level QHPs were chosen for inclusion in this resource because they are generally representative of coverage and are often the most cost-effective choice for low-income consumers. More information on these plans is available on the Massachusetts Health Connector website: <https://mahealthconnector.optum.com/individual/>.

Plan	Medications Covered, No Copayment	Medications Covered, With Copayment	Not Covered
AllWays Health Partners – Complete HMO 2000 25/50/ER300	emtricitabine/tenofovir; Descovy*		Apretude
Blue Cross Blue Shield of Massachusetts – HMO Blue Basic	emtricitabine/tenofovir	Descovy; Apretude	--
BMC HealthNet Plan – Standard Silver A II	emtricitabine/tenofovir; Descovy*	--	Apretude
Fallon Health – Community Care Silver Connector II	emtricitabine/tenofovir; Descovy*		Apretude
Harvard Pilgrim Health Care – Standard Silver	emtricitabine/tenofovir; Descovy*	--	Apretude
Health New England – Silver A II	emtricitabine/tenofovir	Descovy	Apretude**
Tufts Health Plan – Tufts Health Direct Silver 2000	emtricitabine/tenofovir; Descovy*	--	Apretude
Tufts Health Plan – Premier Silver 2000	emtricitabine/tenofovir; Descovy*	--	Apretude
UnitedHealthcare – Navigate Silver 2000	emtricitabine/tenofovir	--	Apretude; Descovy

* Available at no additional cost through an exceptions or prior authorization process.

** Regarding Apretude, Health New England’s formulary states that plans do not cover new to market brand name medications during the 6-month Clinical Review Period; however, providers may request an exception if they feel the medication is medically necessary.

Contact Numbers for Providers: AllWays Health Partners: 1-855-444-4647; BCBS of MA: 1-800-882-2060; BMC HealthNet: 1-888-566-0008; Fallon Health: 1-866-275-3247; Harvard Pilgrim Health Care: 1-800-708-4414; Health New England: 1-800-842-4464; Tufts Health Plan: 1-888-884-2404 or 1-888-257-1985; UnitedHealthcare: 1-877-842-3210

Contact Numbers for Members: AllWays Health Partners: 1-866-414-5533; BCBS of MA: 1-800-262-2583; BMC HealthNet: 1-855-833-8120; Fallon Health: 1-800-868-5200; Harvard Pilgrim Health Care: 1-888-333-4742; Health New England: 1-800-310-2835; Tufts Health Plan: 1-800-462-0224 or 1-888-257-1985; UnitedHealthcare: 1-877-856-2429

CONNECTORCARE PLANS

The table below summarizes coverage of PrEP and related services in the Massachusetts ConnectorCare plans. ConnectorCare plans are low-cost plans available to individuals with household incomes up to 300% of the federal poverty level. In general, there are three levels of ConnectorCare plans, with standardized cost-sharing on each level. More information on these plans is available on the Massachusetts Health Connector website: <https://mahealthconnector.optum.com/individual/>.

Plan	Medications Covered, No Copayment	Medications Covered, With Copayment	Not Covered
AllWays Health Partners – ConnectorCare 0/0	emtricitabine/tenofovir; Descovy*	--	Apretude
AllWays Health Partners – ConnectorCare 10/18	emtricitabine/tenofovir; Descovy*	--	Apretude
AllWays Health Partners – ConnectorCare 15/22	emtricitabine/tenofovir; Descovy*	--	Apretude
BMC Health Net Plan – ConnectorCare Plan Type I	emtricitabine/tenofovir; Descovy*	--	Apretude
BMC Health Net Plan – ConnectorCare Plan Type II	emtricitabine/tenofovir; Descovy*	--	Apretude
BMC Health Net Plan – ConnectorCare Plan Type III	emtricitabine/tenofovir; Descovy*	--	Apretude
Fallon Health – Community Care ConnectorCare I	emtricitabine/tenofovir; Descovy*	--	Apretude
Fallon Health – Community Care ConnectorCare II	emtricitabine/tenofovir; Descovy*	--	Apretude
Fallon Health – Community Care ConnectorCare III	emtricitabine/tenofovir; Descovy*	--	Apretude
Health New England – HMO ConnectorCare 1	emtricitabine/tenofovir	Descovy	Apretude**
Health New England – HMO ConnectorCare 2	emtricitabine/tenofovir	Descovy	Apretude**
Health New England – HMO ConnectorCare 3	emtricitabine/tenofovir	Descovy	Apretude**
Tufts Health Plan – Direct ConnectorCare Plan Type I	emtricitabine/tenofovir; Descovy*	--	Apretude
Tufts Health Plan – Direct ConnectorCare Plan Type II	emtricitabine/tenofovir; Descovy*	--	Apretude
Tufts Health Plan – Direct ConnectorCare Plan Type III	emtricitabine/tenofovir; Descovy*	--	Apretude

* Available at no additional cost through an exceptions or prior authorization process.

** Regarding Apretude, Health New England’s formulary states that plans do not cover new to market brand name medications during the 6-month Clinical Review Period; however, providers may request an exception if they feel the medication is medically necessary.

Contact Numbers for Providers: AllWays Health Partners: 1-855-444-4647; BMC HealthNet: 1-888-566-0008; Fallon Health: 1-866-275-3247; Health New England: 1-800-842-4464; Tufts Health Plan: 1-888-257-1985

Contact Numbers for Members: AllWays Health Partners: 1-866-414-5533; BMC HealthNet: 1-855-833-8120; Fallon Health: 1-800-868-5200; Health New England: 1-800-310-2835; Tufts Health Plan: 1-800-462-0224 or 1-888-257-1985

MASSHEALTH PLANS

The table below summarizes coverage of PrEP services in MassHealth, Massachusetts’s Medicaid program. MassHealth offers a variety of coverage options, depending upon applicant eligibility. Coverage may be provided directly by MassHealth, through the MassHealth Primary Care Clinician Plan (PCCP), or by an Accountable Care Organization (ACO) or a Managed Care Organization (MCO) contracting with MassHealth.

Insurer⁴	Medications Covered, No Copayment	Medications Covered, With Copayment	Not Covered
MassHealth*	emtricitabine/tenofovir; Descovy	--	Apretude
AllWays Health Partners – My Care Family	emtricitabine/tenofovir; Descovy	--	Apretude
BMC HealthNet**	emtricitabine/tenofovir; Descovy	--	Apretude
Fallon Health***	emtricitabine/tenofovir; Descovy	--	Apretude
Health New England – BeHealthy Partnership	emtricitabine/tenofovir; Descovy	--	Apretude
Tufts Health Plan****	emtricitabine/tenofovir; Descovy	--	Apretude

*Describes coverage for MassHealth fee-for-service, PCCP, and Primary Care ACOs

** Describes coverage for BMC HealthNet MCO coverage and BMC HealthNet-associated ACOs (BMC HealthNet Plan Community Alliance, BMC HealthNet Plan Mercy Alliance, BMC HealthNet Plan Signature Alliance, and BMC HealthNet Plan Southcoast Alliance)

*** Describes coverage for Fallon Health ACOs (Berkshire Fallon Health Collaborative, Fallon 365 Care, Wellforce Care Plan)

****Describes coverage for Tufts Health Together MCO coverage and Tufts Health Together-associated ACOs (Tufts Health Together with Atrius Health, Tufts Health Together with Beth Israel Deaconess Care Organization (BIDCO), Tufts Health Together with Boston Children’s ACO, and Tufts Health Together with Cambridge Health Alliance (CHA))

Contact Numbers for Providers: MassHealth: 1-800-841-2900; AllWays Health Partners: 1-855-444-4647; BMC HealthNet: 1-888-566-0008; Fallon Health: 1-866-275-3247; Health New England: 1-800-842-4464; Tufts Health Plan: 1-888-257-1985

Contact Numbers for Members: MassHealth: 1-800-841-2900; AllWays Health Partners: 1-800-462-5449; BMC HealthNet: 1-888-566-0010; Fallon Health: 1-800-868-5200; Health New England: 1-800-786-9999; Tufts Health Plan: 1-888-257-1985

⁴ For members of the Lahey Clinical Performance Network ACO, claims are submitted to the appropriate MCO (Tufts Health Together or BMC HealthNet Plan).