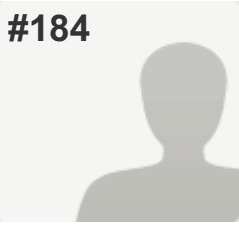


Ending the Epidemic Task Force Recommendation Form

#184



COMPLETE

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Marc
Last Name	Meachem
Affiliation	ViiV Healthcare
Email Address	Marc.s.meachem@viivhealthcare.com

Q2: Title of your recommendation HIV adherence services and engaging those lost to follow-up should be required of all Medicaid Managed Care plans

Q3: Please provide a description of your proposed recommendation

With the majority of HIV positive Medicaid beneficiaries receiving care through non-HIV Special Needs Plans (SNPs), all Medicaid Managed Care plans should be required to provide more HIV-related support services. Section 10.34 of Model contract on the website has "Additional Requirements for the HIV SNP Program Only." These services include Care and Benefits Coordination, Prevention and Risk Reduction, and Treatment Adherence. Section 10.34 should be assessed to determine if any of these services should be included in the contract with all the Medicaid Managed Care plans, not just the SNPs. Our recommendation is to include HIV treatment adherence services and engagement efforts for HIV+ enrollees lost to follow-up in all contracts that the state enters into to provide services to Medicaid beneficiaries, including Medicaid Managed Care plans, Accountable Care Organizations, Medical Homes and other service delivery models. In the alternative, this recommendation could apply to the Medicaid contracted partners that have a certain number of HIV lives, for example 3,000 HIV+ enrollees.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply) Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

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Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Permitted under current law

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

Q9: What are the perceived benefits of implementing this recommendation?

With the majority of HIV positive Medicaid beneficiaries receiving care through non-HIV SNPs, this recommendation will ensure that all Medicaid Managed Care plans are 1) providing HIV adherence services; and 2) trying to re-engage HIV+ enrollees who are lost to follow-up. These are important services for plans that have the majority of the Medicaid lives and will help further the goals of the Governor's plan.

Q10: Are there any concerns with implementing this recommendation that should be considered?

Non-SNP Managed Care plans will have to develop procedures to implement the recommendations.

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Respondent skipped this question

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Respondent skipped this question

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

All Medicaid beneficiaries, with greater benefit being felt by those enrolled in non-SNP Managed Medicaid plans.

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Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Whatever measures are being used now to assess whether and how the SNPs are providing these services could be applied to the non-SNP plans.

Q15: This recommendation was submitted by one of the following

Other (please specify)
Specialist HIV pharmaceutical company