

# The AIDS Drug Assistance Program: Findings from the National ADAP Monitoring Project Annual Survey

Presented at a National Policy Forum on:  
*Getting Medications to People with HIV/AIDS  
in the United States: The AIDS Drug Assistance Program*  
March 30, 2006 ■ Washington, DC

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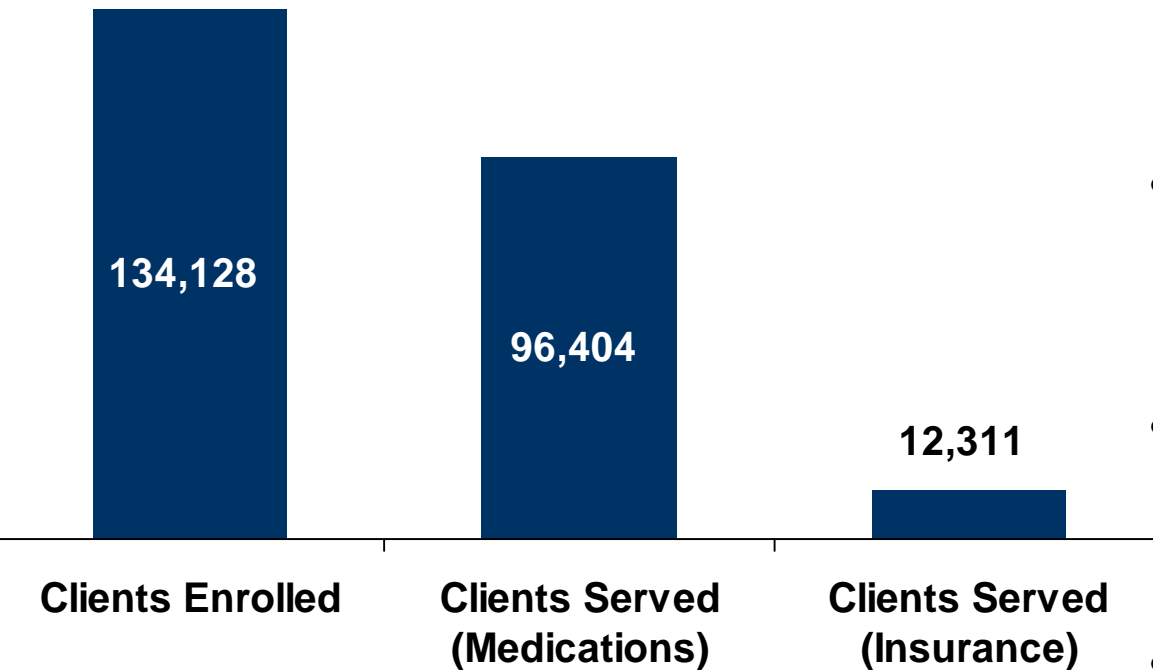


# The National ADAP Monitoring Project and Survey

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- Partnership between Kaiser and NASTAD since 1996
- All ADAPS receiving federal earmark surveyed
  - 57 in FY 2005; 53 responded
  - non-responders represent <1% of estimated living AIDS cases
- Data from June 2005 and FY 2005
- Supplemental data collection for:
  - Income eligibility & formularies as of September 2005
  - Part D policies as of November 2005
  - Waiting lists and other cost containment as of February 2006
- Full report on [www.kff.org](http://www.kff.org) and [www.NASTAD.org](http://www.NASTAD.org)
- State-level data on [www.statehealthfacts.org/hiv](http://www.statehealthfacts.org/hiv)

# ADAP Clients, June 2005

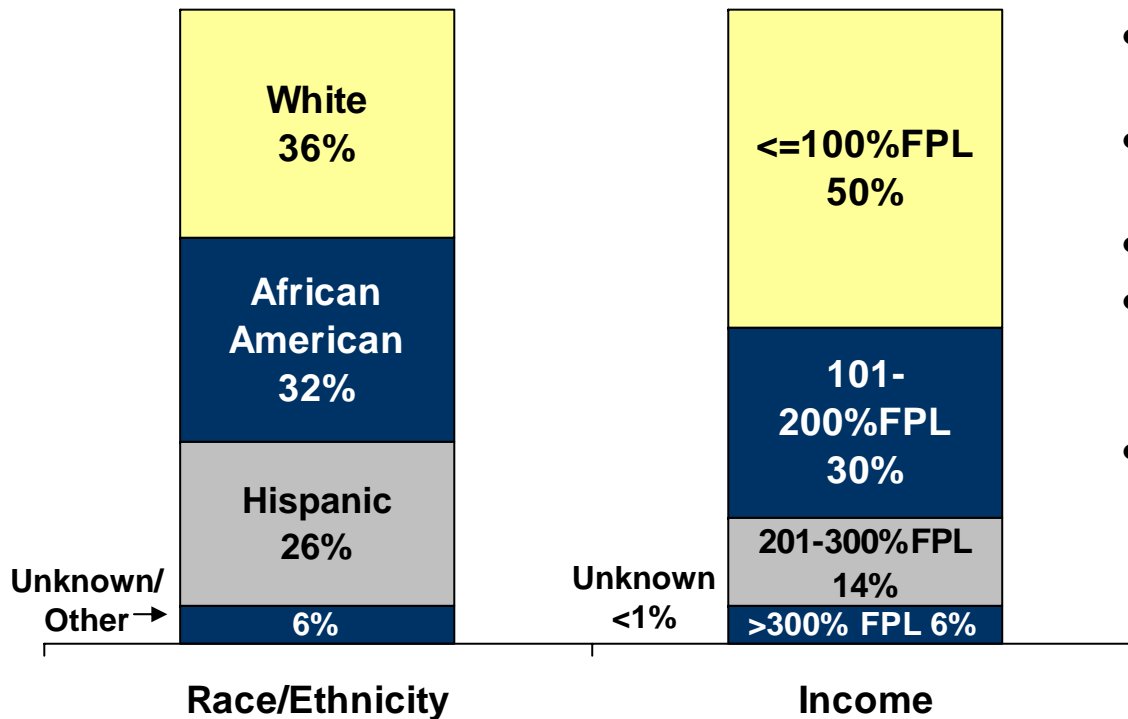


- More than 134,000 enrollees; about one quarter of people with HIV/AIDS in care
- 72% of those enrolled received medications in June 2005
  - others received insurance coverage
- Ten states accounted for most clients (72%)
  - Number of clients served by state ranged from 5 to more than 18,000
- Client utilization increased by 3% over June 2004
  - 33 states with increases, 15 with decreases

Notes: Some clients receiving insurance coverage through ADAP may also be receiving medications. 53 ADAPs reported data on enrolled clients and clients served (medications)—American Samoa, the Marshall Islands, New Mexico, and Rhode Island are not included in clients enrolled and clients served (medications). 29 ADAPs reported data on clients served (insurance).

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

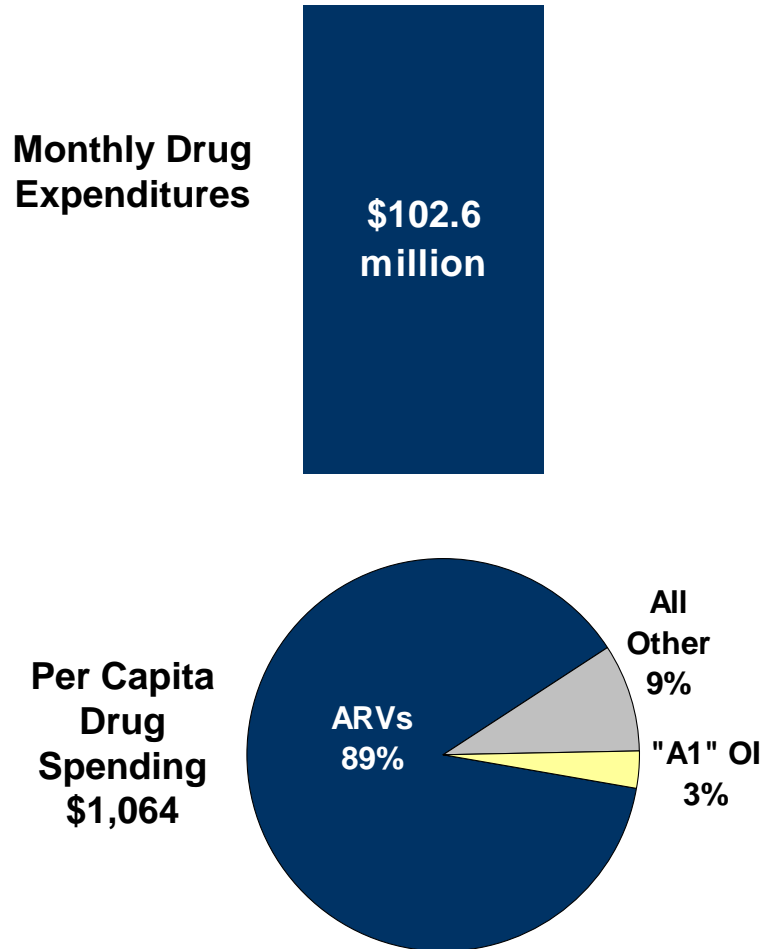
# Profile of ADAP Clients, June 2005



- Almost two-thirds of clients were people of color (62%)
- Most low-income (80% at or below 200% FPL)
- Most uninsured (73%)
- Most were men (79%) and between the ages of 25-44 (54%)
- Half with indications of advanced HIV disease (CD4 count <350)

Notes: 53 ADAPs reported race/ethnicity data—American Samoa, the Marshall Islands, New Mexico, and Rhode Island are not included. 48 ADAPs reported income data—American Samoa, the District of Columbia, Idaho, Louisiana, the Marshall Islands, New Mexico, N. Mariana Islands, Puerto Rico, and Rhode Island are not included. Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# ADAP Drug Expenditures & Per Capita Drug Spending, June 2005



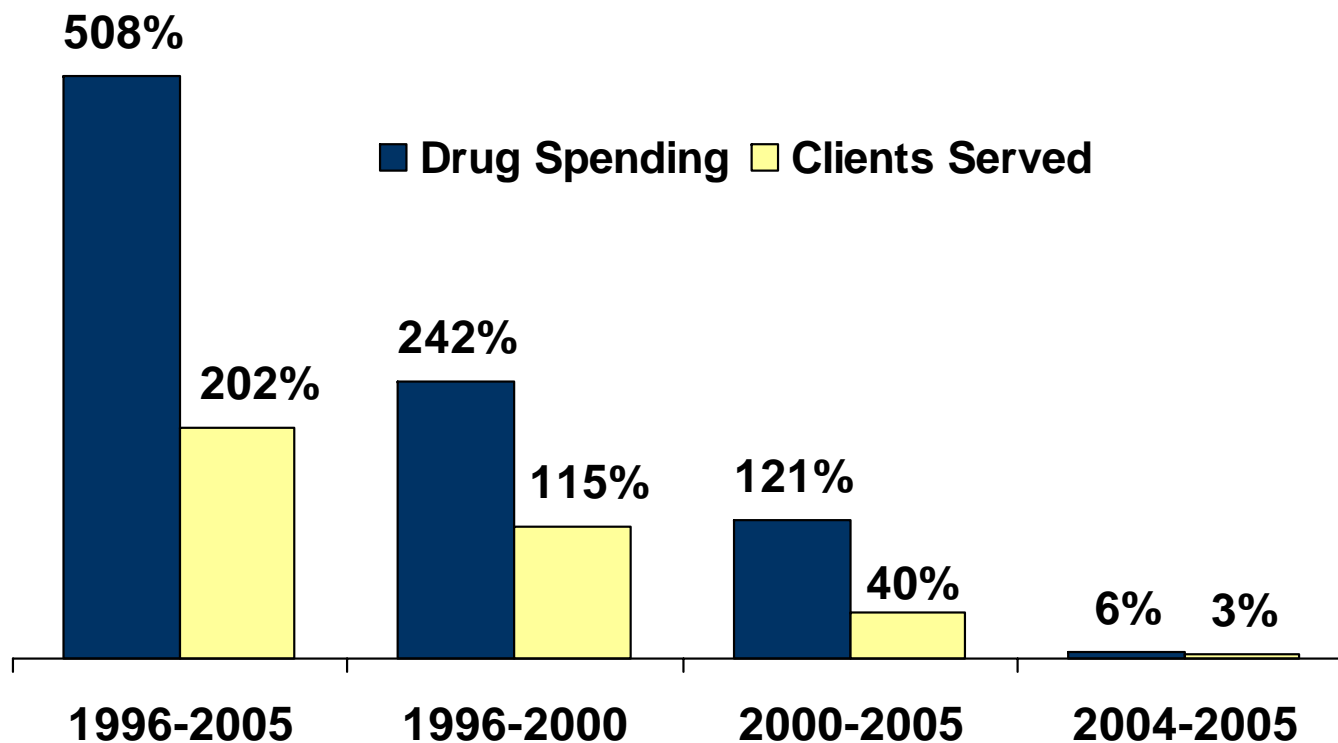
- Drug spending reached highest level to date at \$102.6 million
  - Per capita drug spending is more than \$12,000 per client per year
  - ADAPs also spent \$75.4 million on insurance coverage in 2005
- 10 states accounted for most drug spending (78%)
  - Spending by state ranged from \$3,031 to \$21.7 million
- Drug spending increased by 6% over June 2004
  - 32 states with increases, 17 with decreases

Note: 53 ADAPs reported drug expenditure data and data to determine per capita spending—American Samoa, the Marshall Islands, New Mexico, and Rhode Island are not included.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# Trends in ADAP Clients & Drug Expenditures, 1996-2005

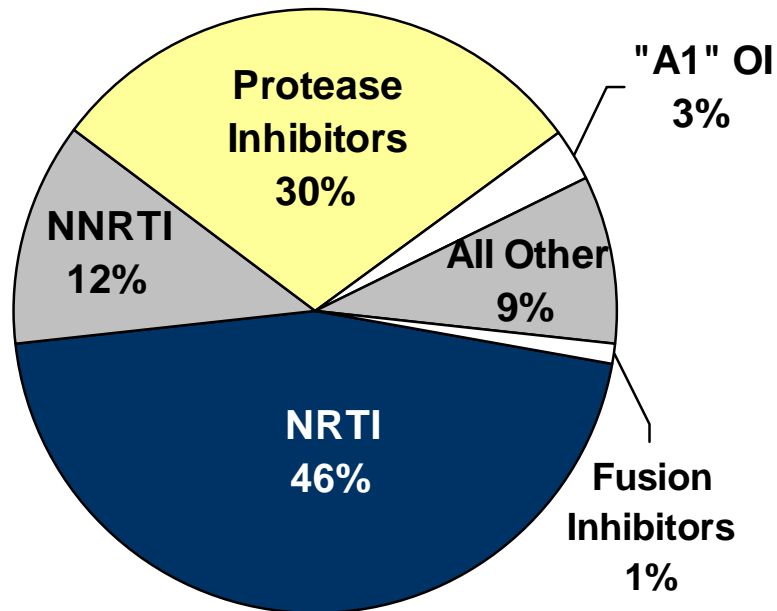
(Percent Change)



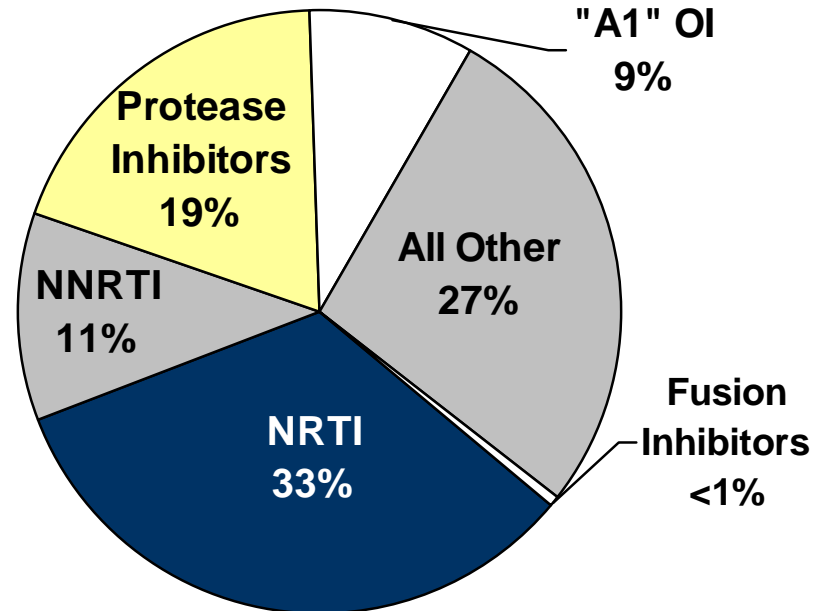
Note: 1996-2005 percent changes based on 47 ADAPs reporting in both periods; 1996-2000 and 2000-2005 percent changes based on 49 ADAPs reporting in both periods; 2004-2005 percent changes based on 50 ADAPs reporting in both periods.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# ADAP Drug Expenditures & Prescriptions Filled, by Drug Class, June 2005



**Total = \$102.6 million  
Drug spending**

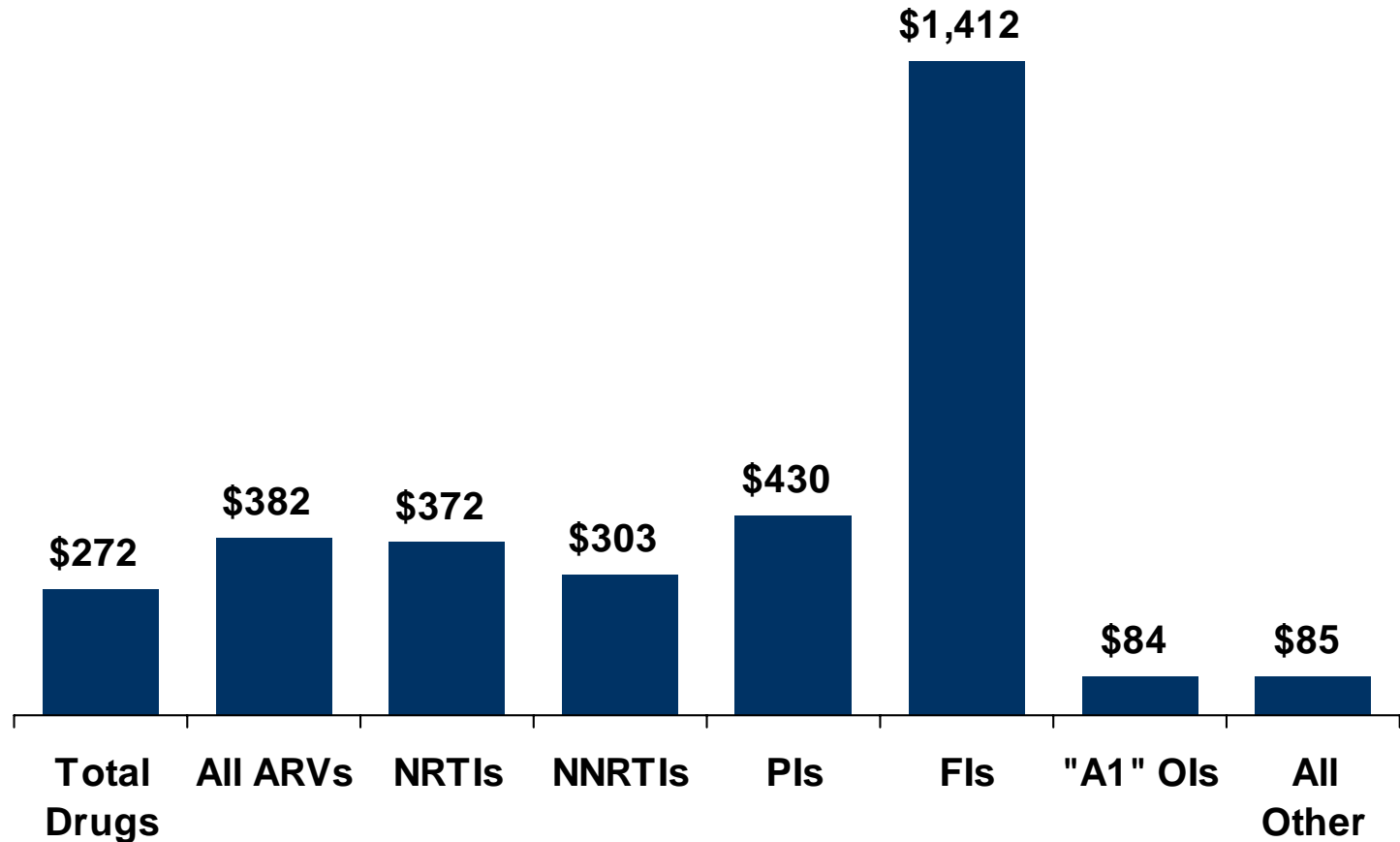


**Total = 376,511  
Prescriptions Filled**

Notes: 53 ADAPs reported data on drug expenditures—American Samoa, the Marshall Islands, New Mexico, and Rhode Island are not included. 52 ADAPs reported data on prescriptions filled—American Samoa, the Marshall Islands, New Mexico, Rhode Island, and Tennessee are not included.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# ADAP Expenditures Per Prescription, by Drug Class, June 2005

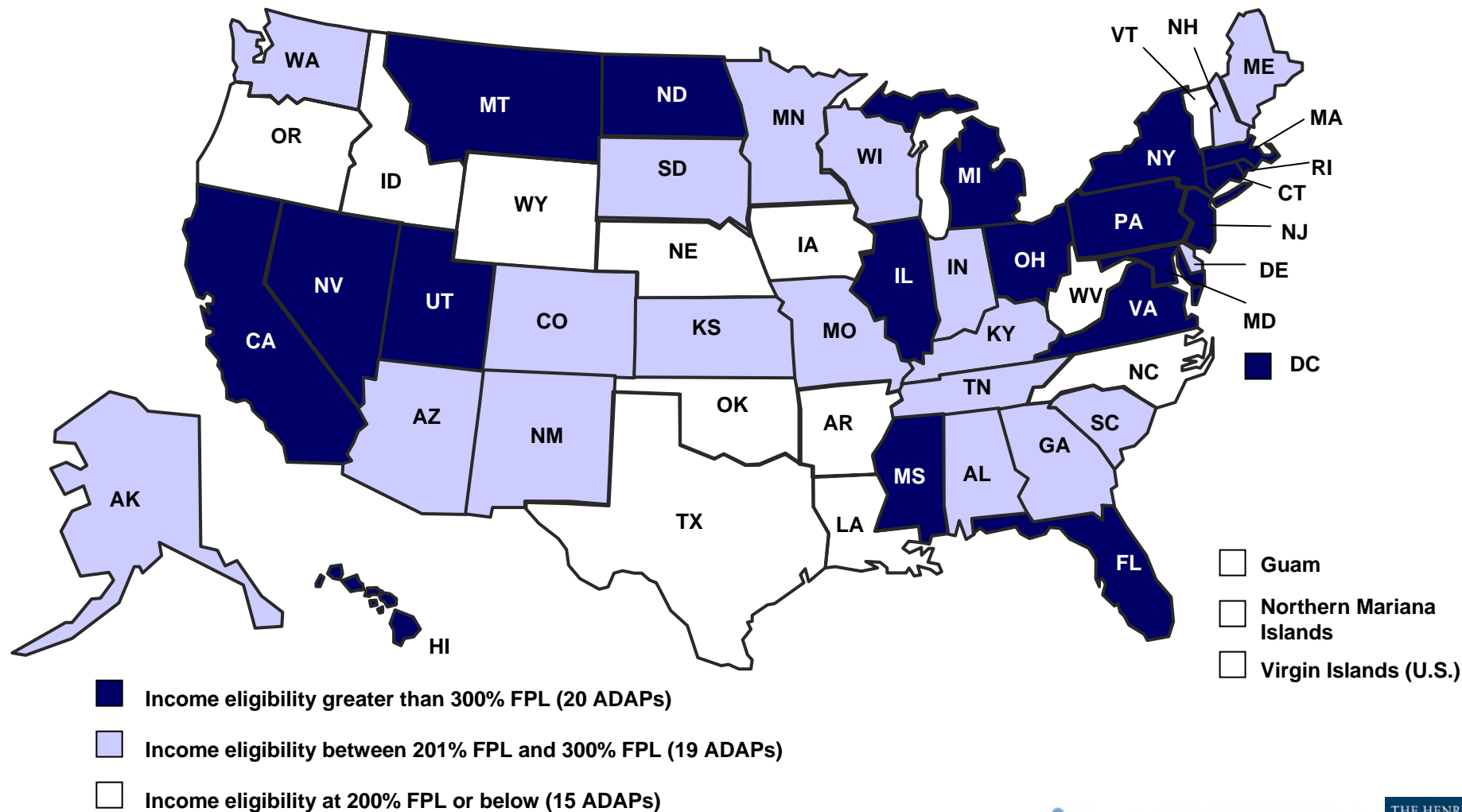


Note: 52 ADAPs reported data to determine ADAP expenditures per prescription—American Samoa, the Marshall Islands, New Mexico, Rhode Island, and Tennessee are not included.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

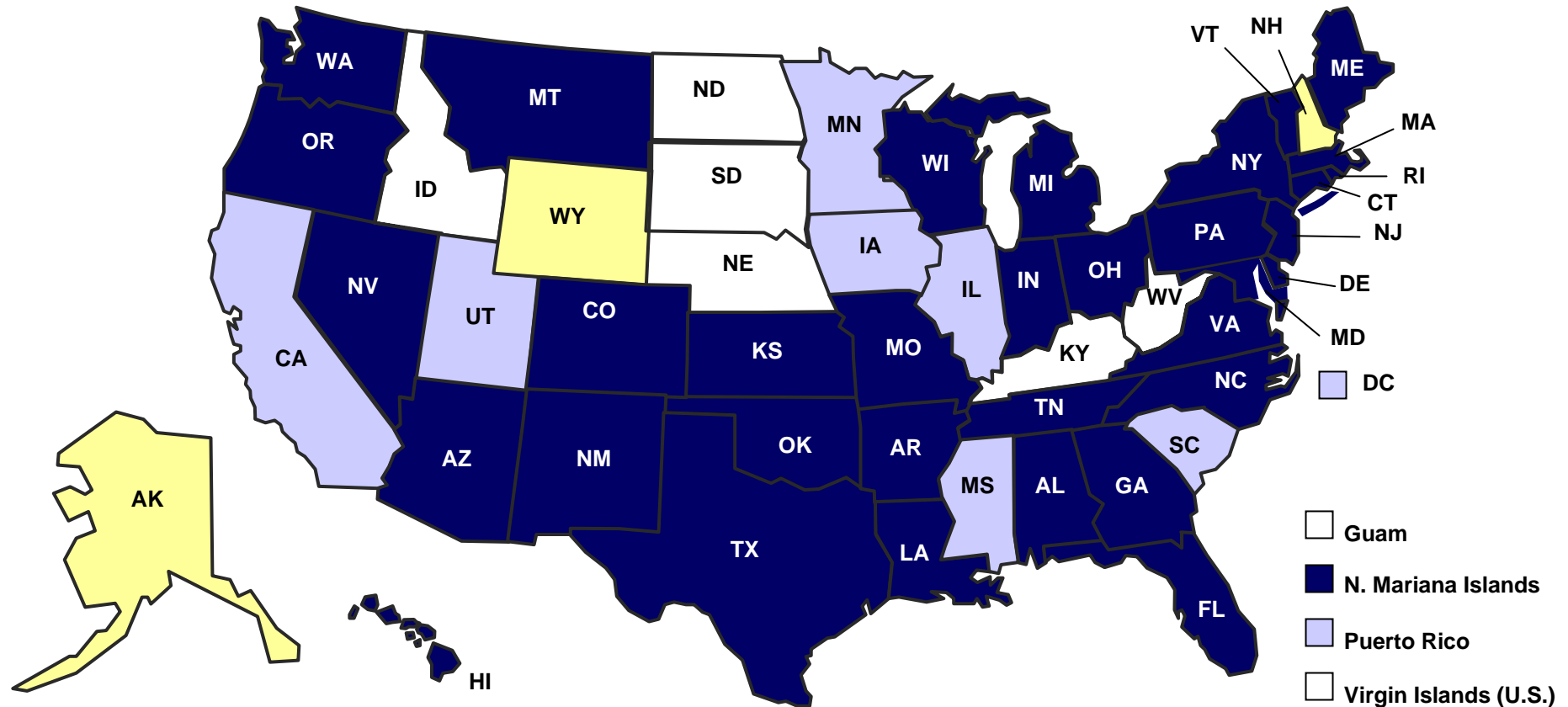


# ADAP Income Eligibility, as of September 2005



Notes: The 2005 Federal Poverty Level (FPL) was \$9,570 (slightly higher in Alaska and Hawaii) for a household of one. 54 ADAPs reported income eligibility criteria—American Samoa, the Marshall Islands, and Puerto Rico are not included. Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# ADAP Formulary Coverage of Approved Antiretroviral Drugs, as of September 2005



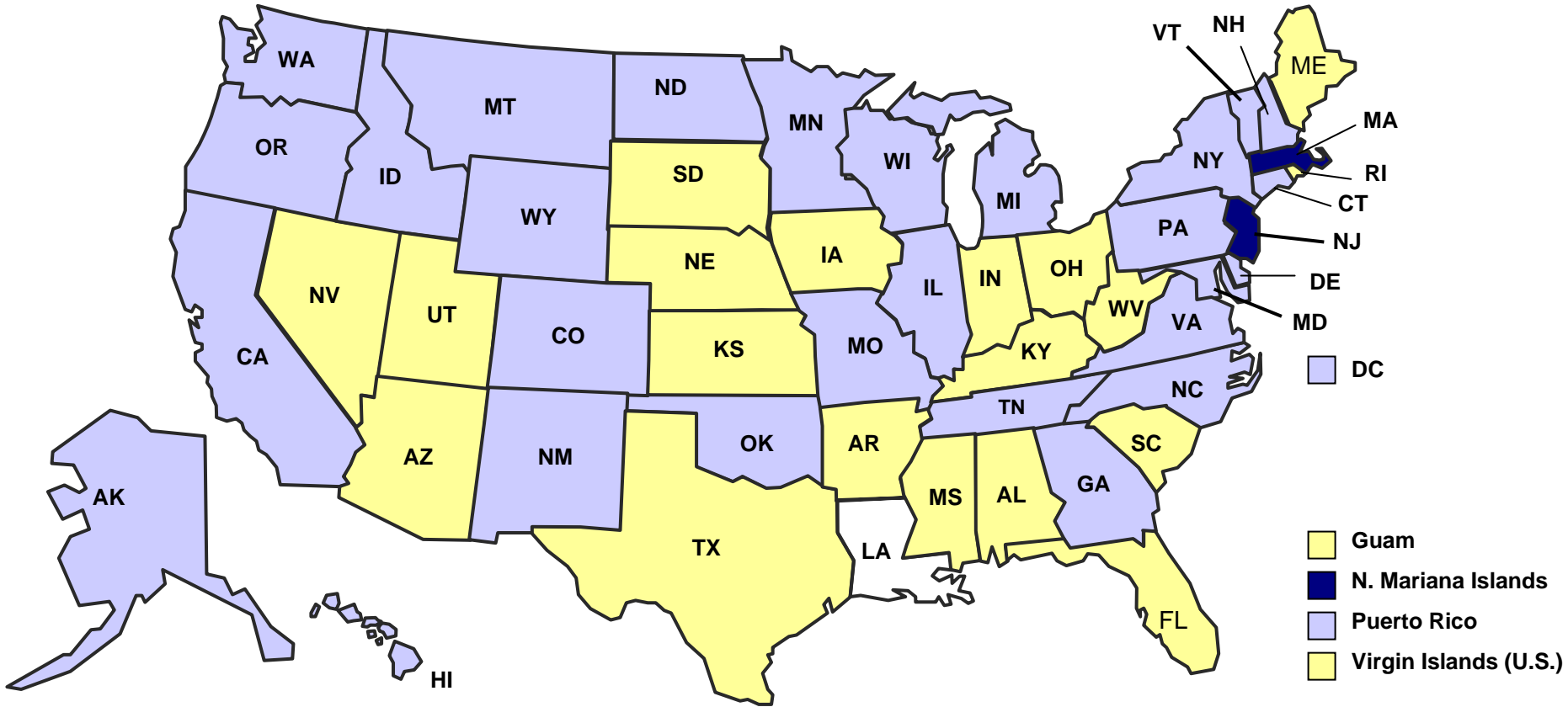
- Covers all approved ARVs in all four drug classes, NRTIs, NNRTIs, PIs, and Fusion Inhibitor (35 ADAPs)
- Covers all approved NRTIs, NNRTIs, PIs, but not approved Fusion Inhibitor (3 ADAPs)
- Covers approved Fusion Inhibitor but not all approved NRTIs, NNRTIs, and PIs (9 ADAPs)
- Does not cover approved Fusion Inhibitor or all approved drugs in other classes (8 ADAPs)

- Guam
- N. Mariana Islands
- Puerto Rico
- Virgin Islands (U.S.)

Note: 55 ADAPs reported formulary data for ARV drugs—American Samoa and the Marshall Islands are not included.  
 Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.



# ADAP Formulary Coverage of “A1” Drugs for OIs, as of September 2005

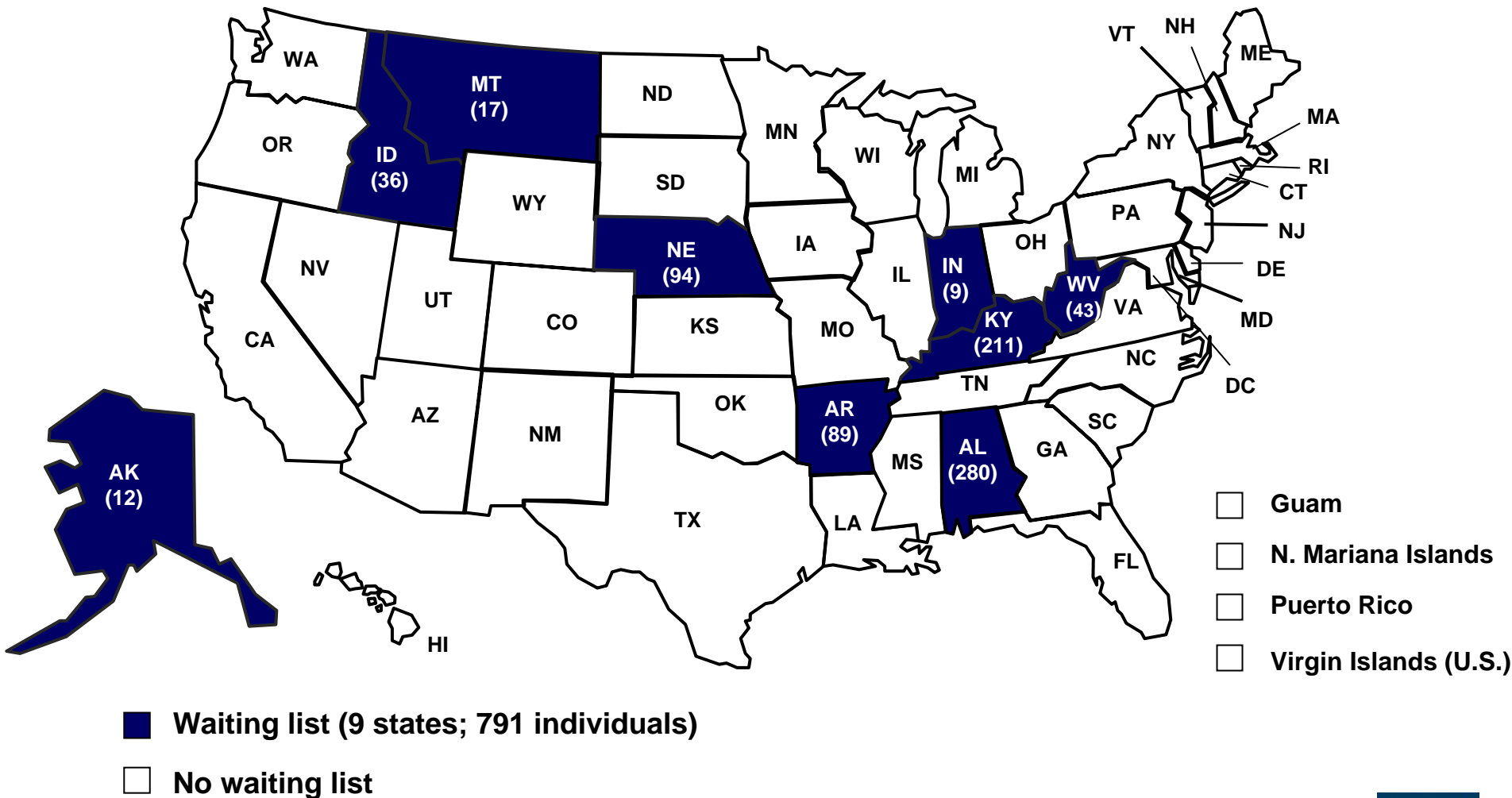


- Covers all 29 “A1” OI drugs (3 ADAPs)
- Covers 16-28 “A1” OI drugs (30 ADAPs)
- Covers 15 or fewer “A1” OI drugs (21 ADAPs)
- Does not cover any “A1” OI drugs (1 ADAP)

- Guam
- N. Mariana Islands
- Puerto Rico
- Virgin Islands (U.S.)

Note: 55 ADAPs reported formulary data for “A1” OI drugs—American Samoa and the Marshall Islands are not included.  
 Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

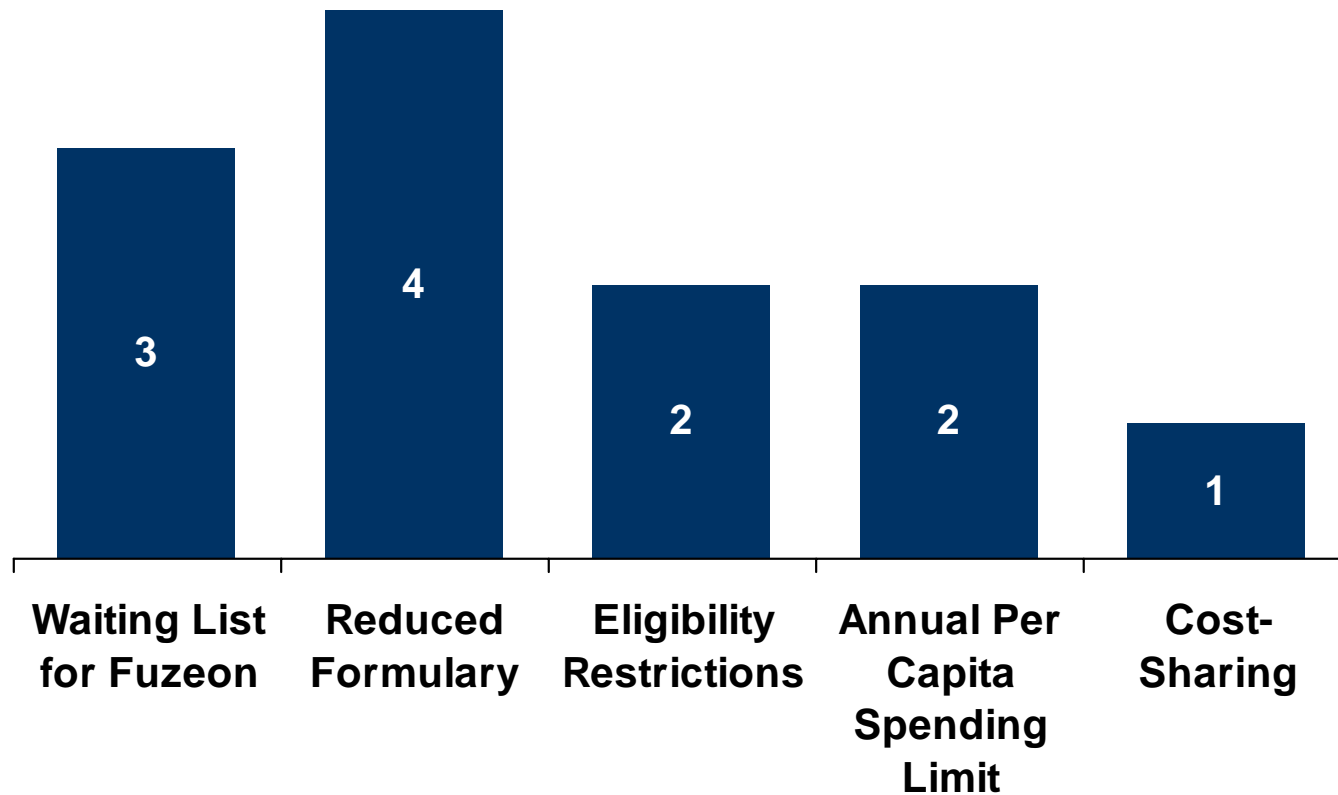
# ADAPs With Waiting Lists, as of February 2006



Note: 55 ADAPs reported waiting list data—American Samoa and the Marshall Islands are not included.  
 Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# Number of ADAPs with Cost-Containment Measures, as of February 2006

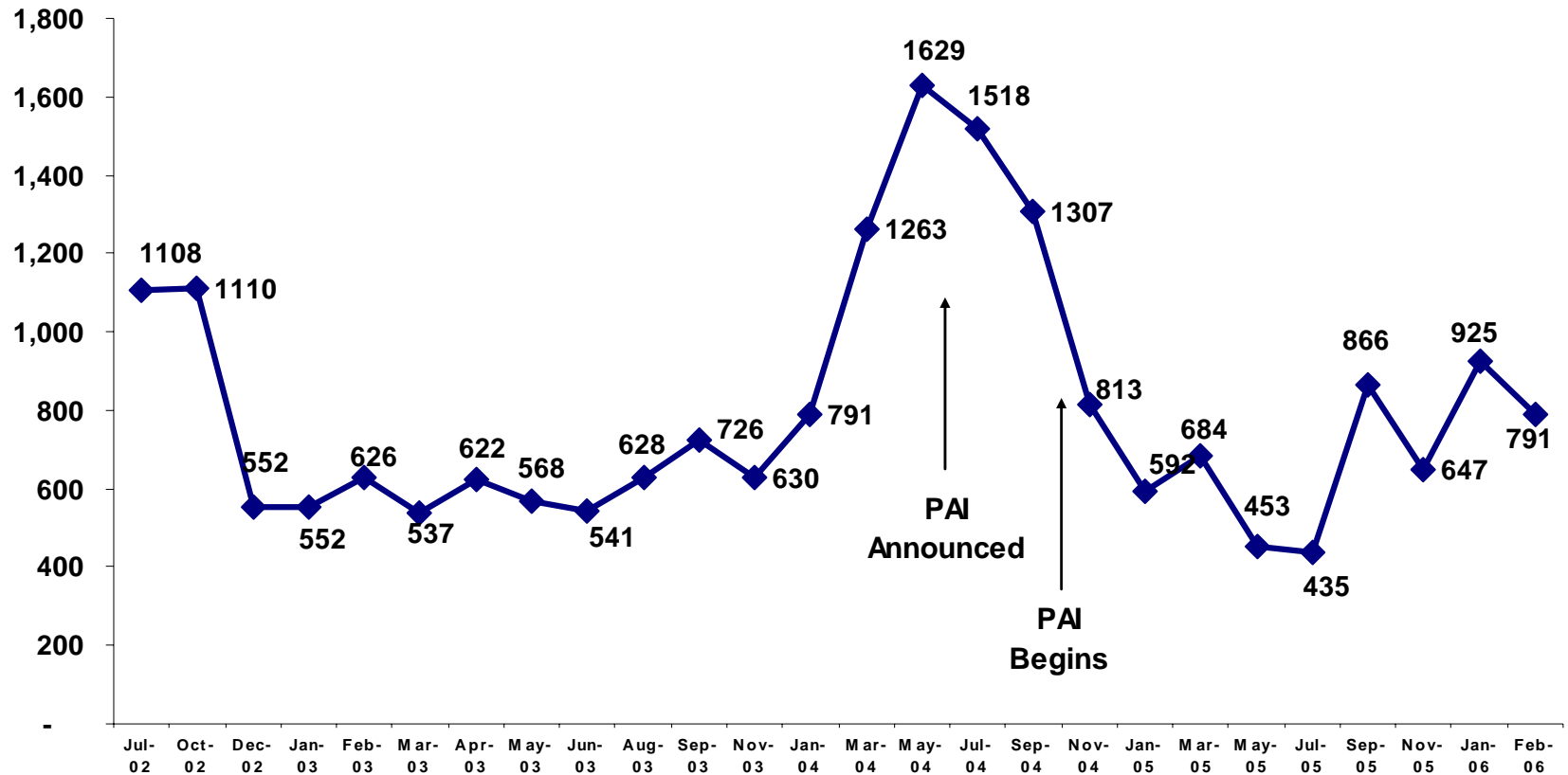
(Other than waiting lists)



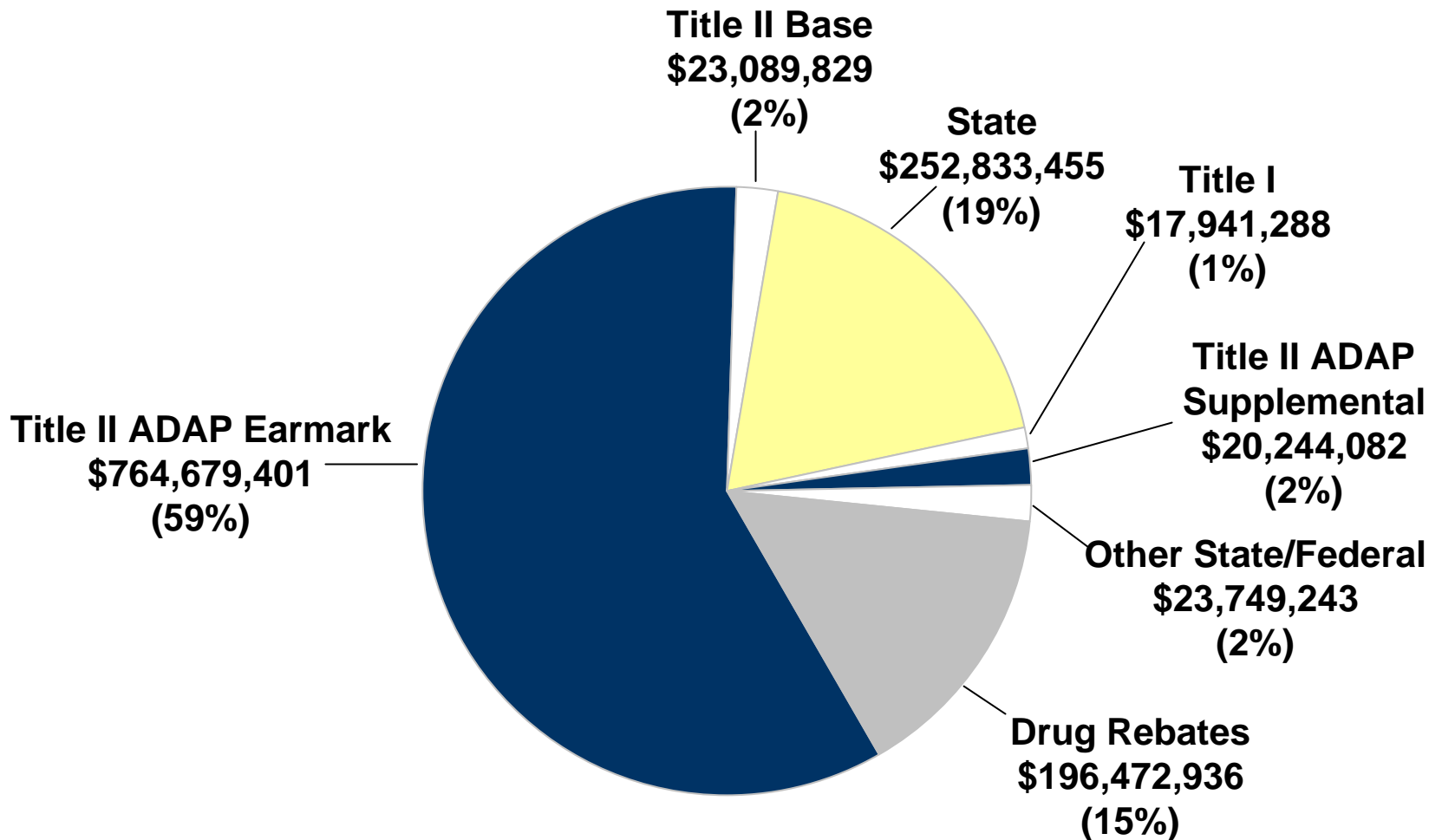
Note: 55 ADAPs reported data on cost-containment measures—American Samoa and the Marshall Islands are not included.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# Number of People on Waiting Lists by Survey Period and State, July 2002-February 2006



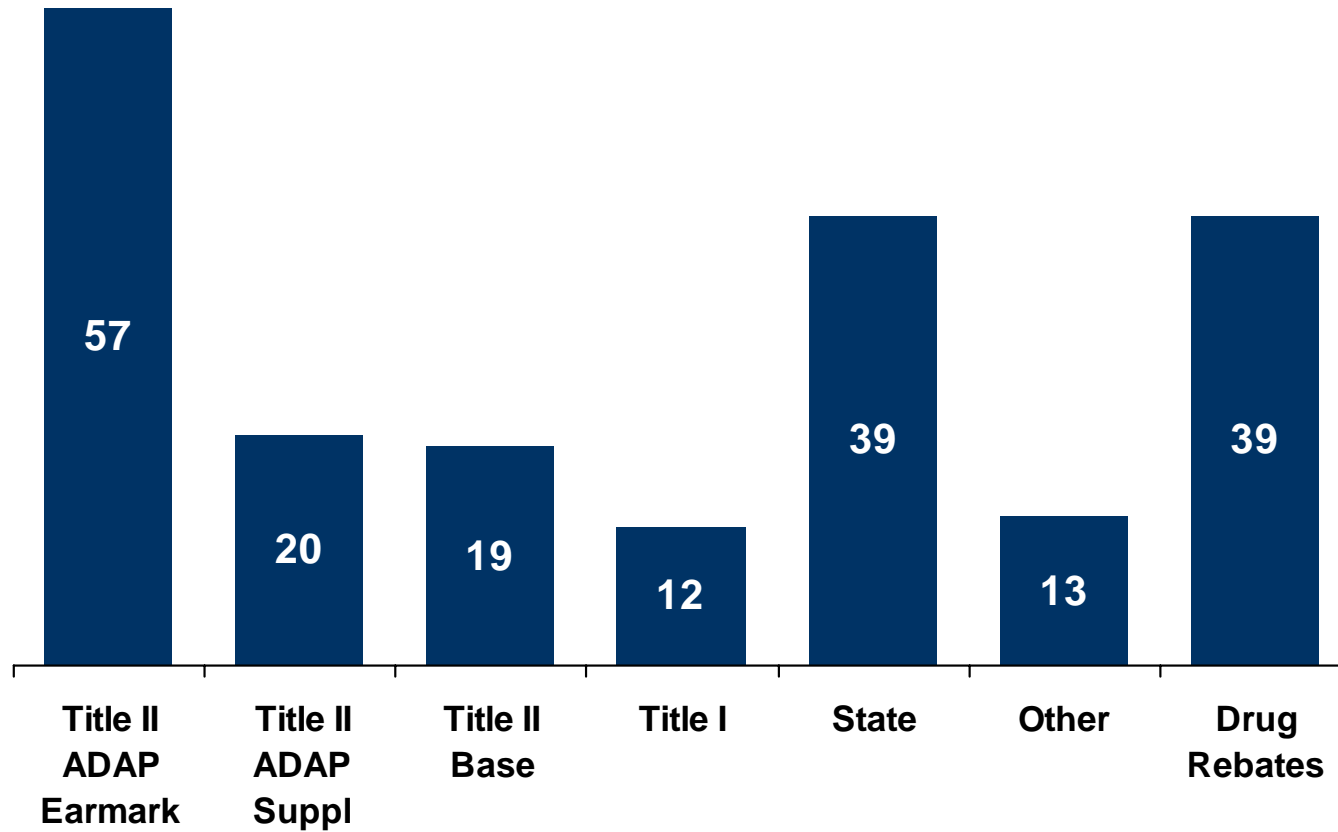
# National ADAP Budget By Source, FY 2005



**Total = \$1.3 billion**

Note: 53 ADAPs reported all National ADAP Budget data. National ADAP Budget includes FY 2005 federal Title II ADAP earmark and Title II ADAP supplemental only for American Samoa, the Marshall Islands, New Mexico, and Rhode Island. Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# Number of ADAPs by Budget Source, FY 2005

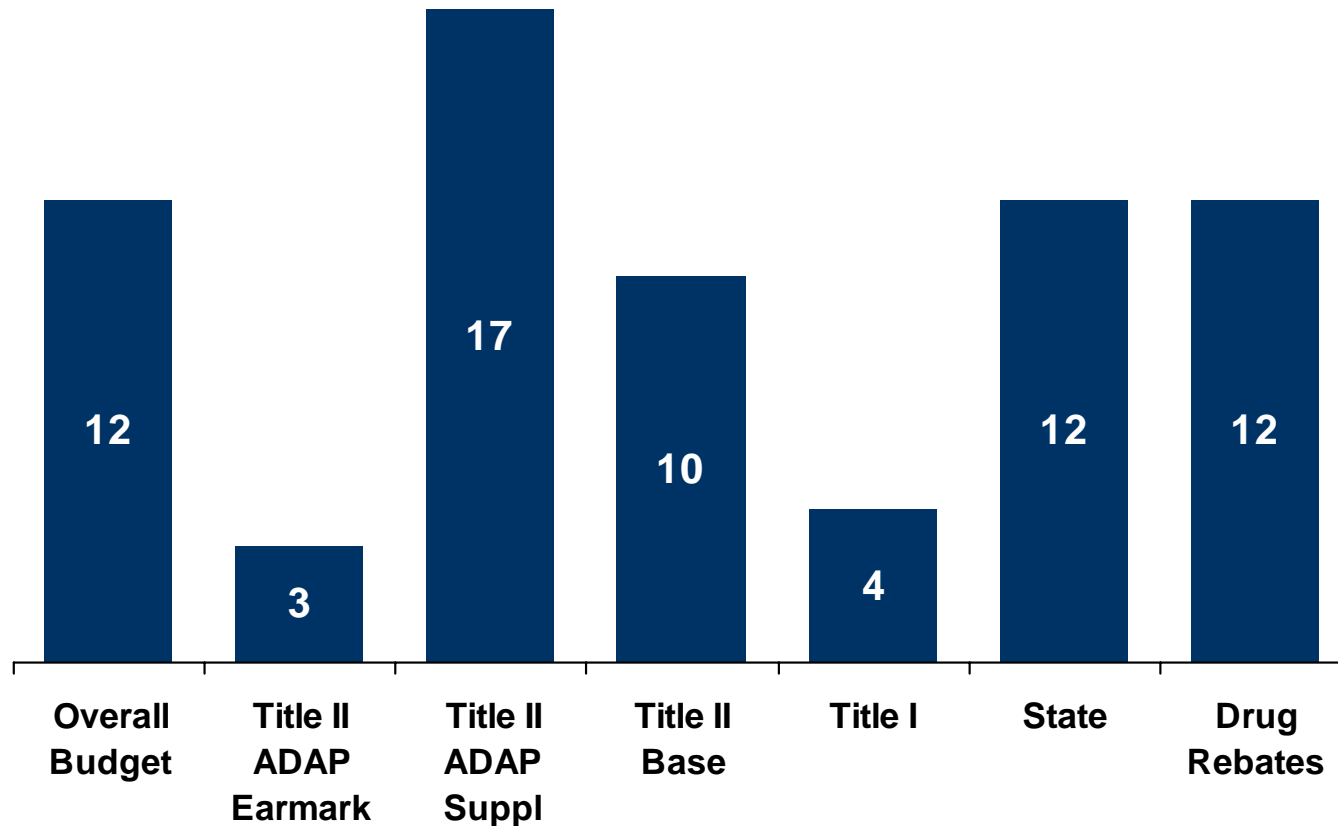


Note: 53 ADAPs reported all National ADAP Budget data—American Samoa, the Marshall Islands, New Mexico, and Rhode Island only included in Title II earmark and Title II supplemental.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.



# Number of ADAPs with Funding Decreases by Budget Source, FY 2004-2005

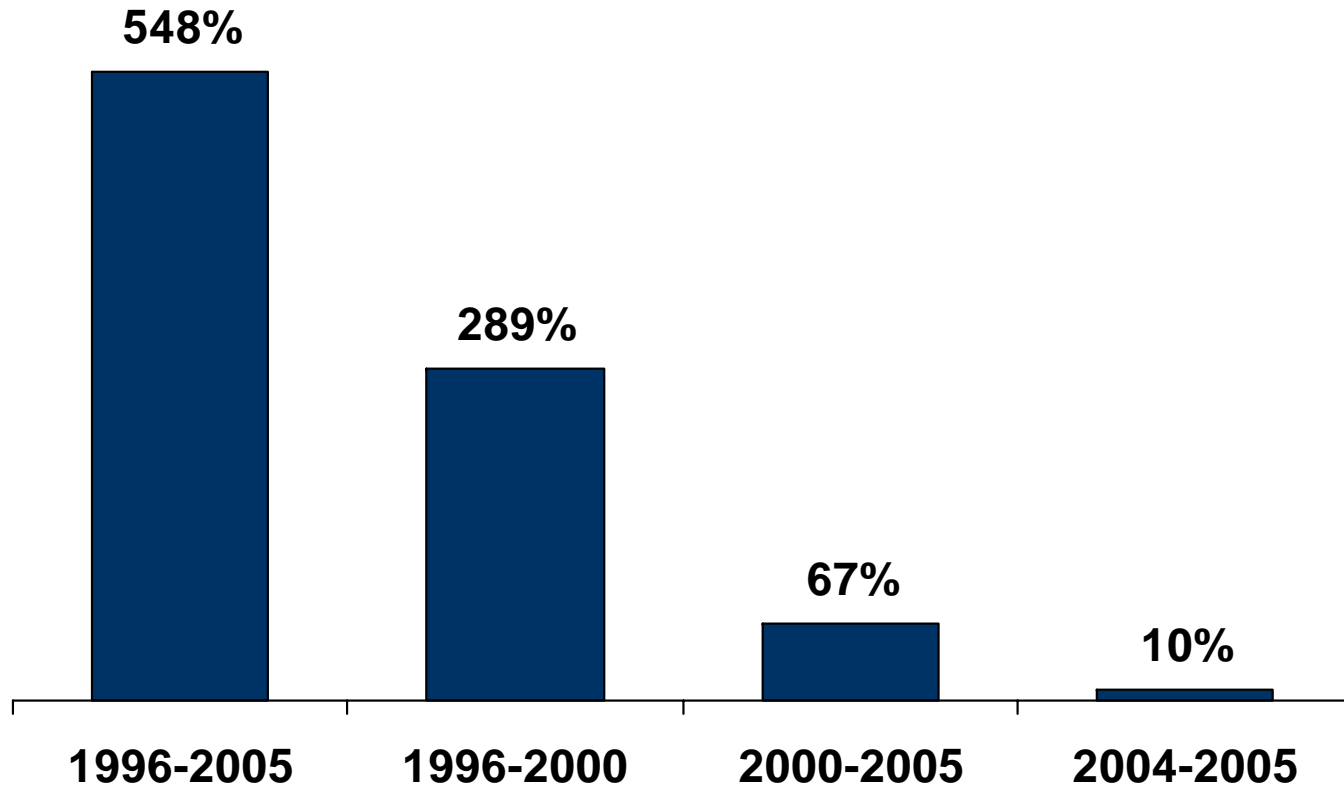


Note: 53 ADAPs reported all National ADAP Budget data—American Samoa, the Marshall Islands, New Mexico, and Rhode Island only included in Title II earmark and Title II supplemental.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

# Trends in the National ADAP Budget, FY 1996-2005

(Percent Change)



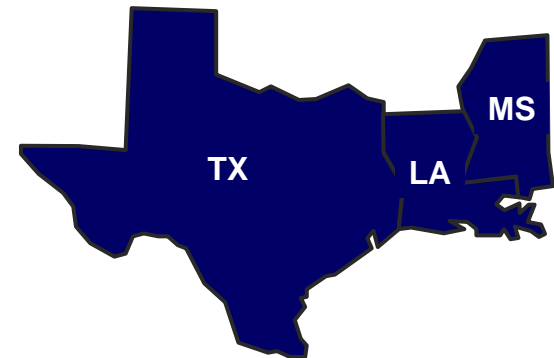
Note: 53 ADAPs reported National ADAP Budget data—American Samoa, the Marshall Islands, New Mexico, and Rhode Island only included in Title II earmark and Title II supplemental.

Source: Kaiser Family Foundation & NASTAD, *National ADAP Monitoring Project Annual Report*, March 2006.

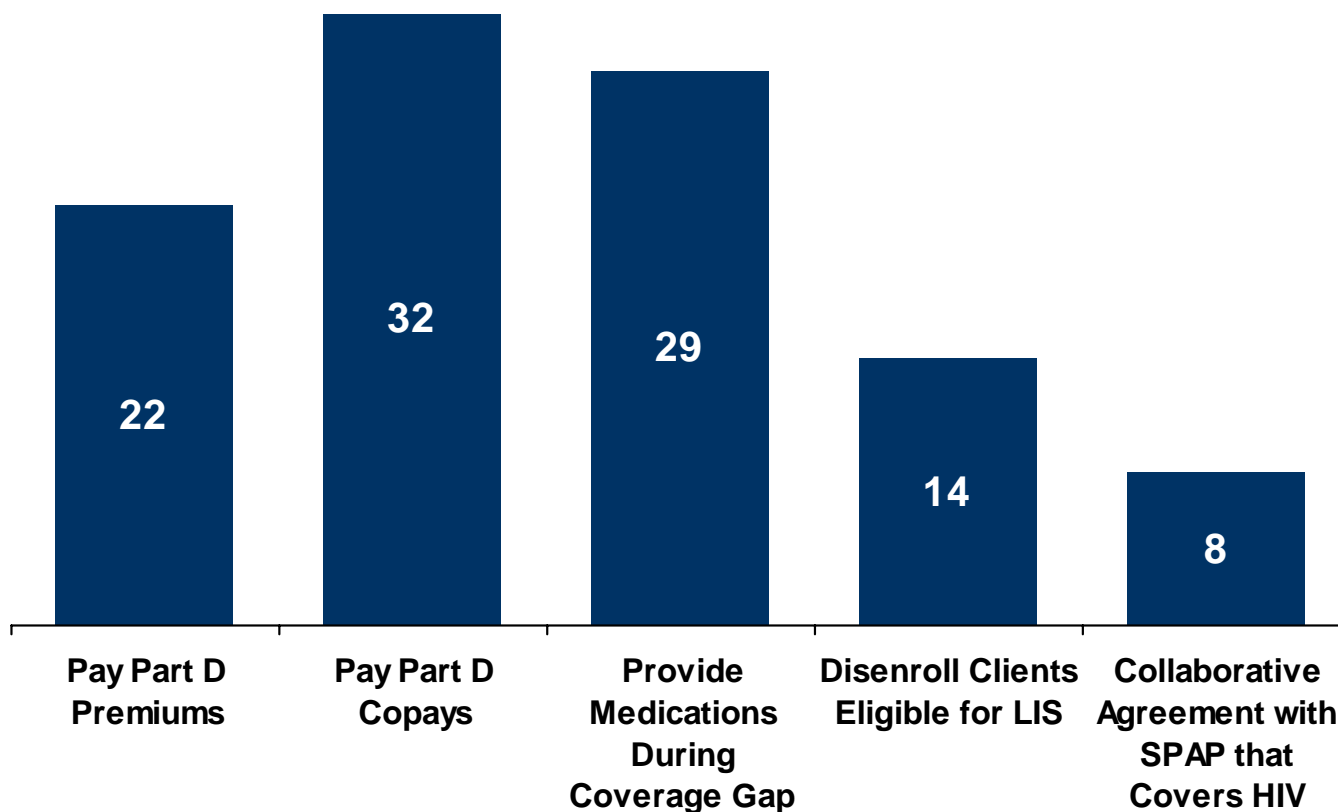
# Spotlight on Hurricane Katrina

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- **21,000 people with HIV/AIDS estimated to be living in the disaster-affected counties of Alabama, Louisiana and Mississippi prior to Hurricane Katrina.**
- **As of the end of September 2005, ADAP and other CARE Act grantees in 27 States and the District of Columbia reported treating more than 1,500 evacuees with HIV/AIDS.**
- **NASTAD estimates that more than 420 Louisiana ADAP clients sought assistance in other states, primarily Texas, due to evacuation.**
- **Issues:**
  - finding people in need
  - expediting eligibility and access to services
  - portability of funding to follow people across state lines
  - comparability of benefits across states
  - federal and/or state responsibility
  - industry response



# Spotlight on Medicare Part D: ADAP Policies as of November 2005



# Summary & Key Issues

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- **ADAPs are the nation's prescription drug safety net for low-income, uninsured, people with HIV/AIDS**
  - reach about one quarter of people with HIV/AIDS in care
- **ADAPs spend almost all of budget on direct client services**
  - medications and insurance coverage
- **Key challenges and questions**
  - what you get depends on where you live
  - need for medications continues to outstrip their availability
  - trade-off: serve more people with less or serve less people with more
  - waiting lists and other cost containment measures in place over entire course of project – are they “permanent” features?
  - role of drug rebates?
  - lessons from Hurricane Katrina and Part D?
  - lessons for Reauthorization?