

HIV treatment and care for people who are not eligible for Medicare

Queensland Health Guideline

QH-GDL-972:2023

1. Statement

Queensland Health is committed to the equitable provision of HIV treatment and medical care for people ineligible for Medicare, consistent with the Federation Funding Agreement – Health (FFA) for *Access to HIV treatment for people who are not eligible for Medicare*. Queensland signed this Agreement on 21 June 2023 and the Program will commence on 1 July 2023, replacing compassionate access schemes for HIV medications previously operated by pharmaceutical companies.

Under the Program, people living with HIV who are not eligible for Medicare will be able to access subsidised HIV antiretroviral medications listed on the Pharmaceutical Benefits Scheme (PBS) and available through the Queensland Health (QH) List of Approved Medicines (LAM) from public hospital pharmacies in Queensland. Free HIV-related medical care will be available through public health facilities, such as sexual health clinics.

The cost of care or treatment related to diagnosing HIV, comorbidities, or any other health condition arising from taking HIV antiretroviral medications is out of scope.

Medicare-ineligible people presenting as an *inpatient* for care related to HIV are not covered under this agreement and hospitals should continue to treat these patients according to existing local policies and protocols.

2. Purpose

- Support the delivery of outpatient HIV medical care and treatment to people living with HIV in Australia who are not eligible for Medicare.
- Support high quality, affordable and efficient patient care.
- Enable consistency in the scope of services for Medicare ineligible people living with HIV that are publicly funded and supported within Queensland's public health facilities.
- Support Queensland Health in meeting international and national goals for the virtual elimination of HIV transmission in Australia.

3. Scope

This policy applies to all employees, contractors and consultants within the Department of Health divisions and business units, Hospital and Health Services (HHSs) and commercialised business units involved directly or indirectly in the provision of HIV treatment and care to people who are not eligible for Medicare.

4. Requirements

This Program is a joint initiative of the Commonwealth, States and Territories to be delivered through jurisdictional public health infrastructure and excludes care or treatment through private health services. The Federation Funding Agreement – Health (FFA) for *Access to HIV treatment for people who are not eligible for Medicare* specifies eligibility for the program, roles and responsibilities of the Commonwealth, States and Territories and reporting requirements.

4.1. Patient eligibility

To be eligible under this Program, a person must be:

- 4.1.1. Ineligible for Medicare. Once a person transitions to Medicare, they are no longer eligible to access their outpatient-delivered HIV treatment and care under this Program.
- 4.1.2. Currently residing in Australia beyond a short-term stay. Short-stay visitors and tourists are excluded under this Program.
- 4.1.3. Receiving appropriate specialist medical care as an *outpatient* in a public health service, such as a sexual health clinic or public hospital.

Patients who are visiting from interstate or who have recently moved interstate are eligible to receive HIV antiretroviral medications under the Program in Queensland if they meet the above criteria.

4.2. Prescriber responsibilities

- 4.2.1. Prescribers should advise eligible patients that they can initiate or continue HIV antiretroviral medication for the duration of their stay in Australia or until they transition to another program, such as Medicare. At each six-monthly medical review, prescribers should ask patients about their Medicare status.
- 4.2.2. Prescribers should advise prospective patients that medications made available under the Program are to be used only for the purpose of HIV treatment of the specified individual.
- 4.2.3. Prescribers should advise prospective patients that medication under the Program can only be dispensed from a public hospital pharmacy, and that the patient will be charged a co-payment equal to the PBS general patient co-payment.
- 4.2.4. Prospective patients should be advised that they can only access this Program through public health facilities, such as sexual health clinics. Free HIV-related medical care and subsidised treatment under this Program is only available through public health facilities. The cost of medical care and treatment through a private s100 general practitioner is not covered under this Program and may incur a fee.

- 4.2.5. When consulting with prospective patients under this Program, prescribers must advise of the risks associated with HIV treatment and explain that only the cost of HIV medication and care directly related to antiretroviral treatment will be subsidised.
- 4.2.6. Prescribers should advise eligible patients that any costs incurred for services involving comorbidities or any health condition arising from taking HIV medications will not be subsidised under this Program and are to be funded through alternative arrangements such as self-funded or private health insurance.
- 4.2.7. Prescribers should ensure that patients with English as a second language understand the information provided and are able to engage in treatment under this Program with informed consent.

4.3. Eligible medicines

HIV antiretroviral medication dispensed under this Program is restricted to PBS-listed medications available through the QH LAM. If the patient is currently on a non-PBS listed medication, the clinician can support them to transition to a suitable medication to access this Program.

Under this Program, HIV antiretroviral medications can only be prescribed up to the PBS authorised maximum quantity and number of repeats to reflect the recommended review cycle for people with HIV (i.e., two months of medication with two repeats to enable follow-up medical review and pathology every six months). If a patient is leaving Queensland to travel/live elsewhere in Australia or returning overseas, the clinician can provide a bridging supply of two months medication to ensure the patient has sufficient time to engage with local healthcare services.

5. Clinical flow

Prospective patients may present at any public health service or sexual health clinic that provides HIV-related treatment and care (see Figure 1. Clinical flowchart). The clinician will determine if the prospective patient meets the eligibility criteria listed in **4.1** based on self-reporting by the patient. If deemed eligible, the clinician will advise the patient of the parameters of the Program as detailed under **4.2**. If the patient gives informed consent to participate in the Program, the clinician may prescribe medication as specified in **4.3**.

The prescriber must annotate the script with '**HIV Medicare Ineligible OUTP**' and the patient must then present the script at a public hospital pharmacy to receive the medication at a subsidised cost. The patient will be charged a co-payment equal to the PBS general patient co-payment.

If the patient is experiencing financial hardship, they can be referred to the [HIV Emergency Treatment Fund](#) for assistance with the co-payment. The HIV Emergency Treatment Fund is available to all people with HIV in Queensland and is administered by Queensland Positive People on behalf of Queensland Health.

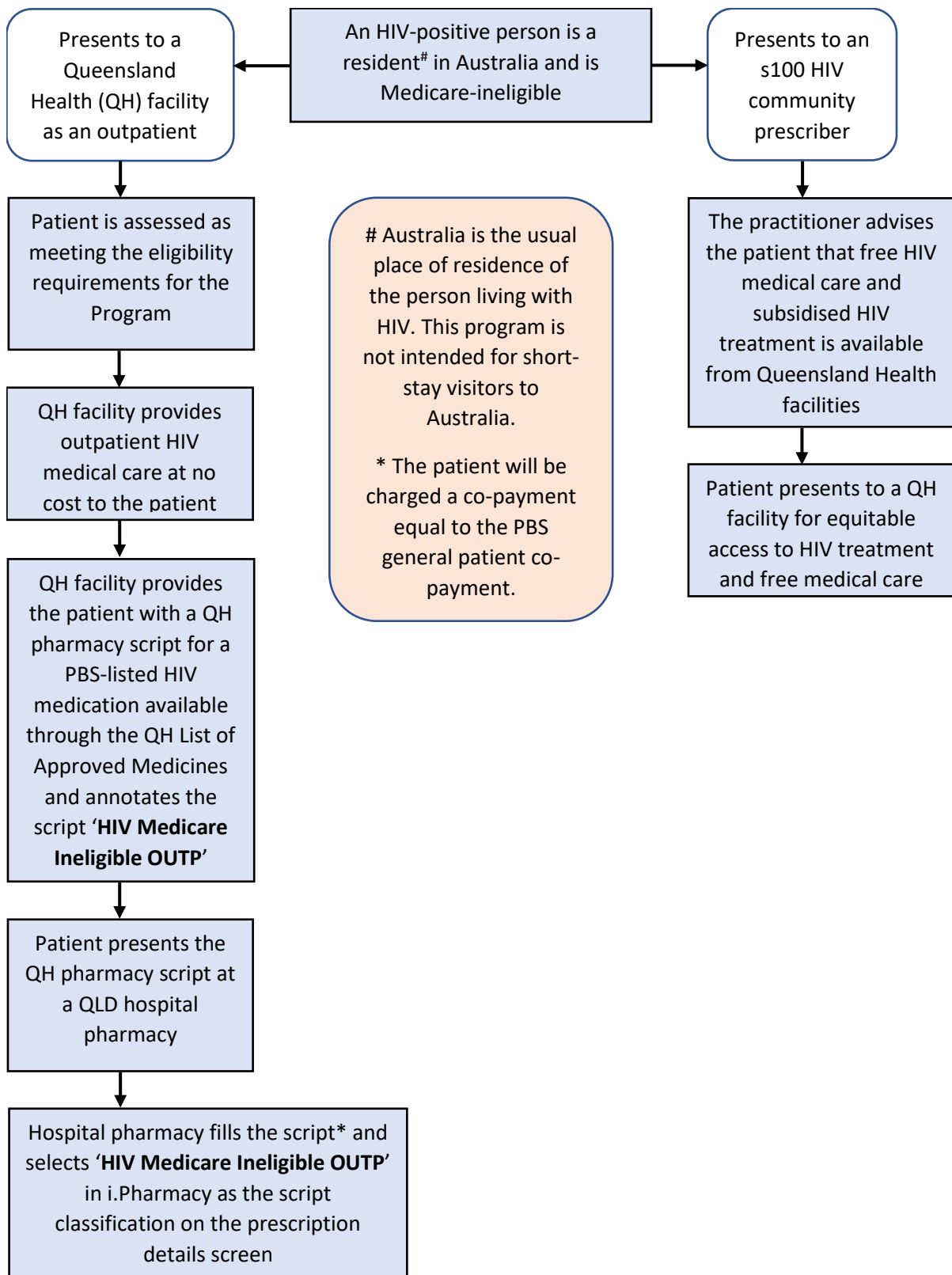


Figure 1. Clinical flowchart

6. Public hospital pharmacies

The Department of Health will reimburse HHSs for the commercial cost of HIV antiretroviral medications dispensed under this Program as per the QH LAM. Reimbursement will occur biannually, with one payment made during the financial year in which the funds are expended, and the second payment made in arrears in the following financial year.

6.1. Dispensing at public hospital pharmacies

Scripts that have been annotated with '**HIV Medicare Ineligible OUTP**' by the prescriber are endorsed for inclusion in this Program. From 1 July 2023, pharmacists should dispense under the classification '**HIV Medicare Ineligible OUTP**' for all patients accessing medication as a part of this scheme (see Figure 2. i.Pharmacy screenshot).

The screenshot displays the i.Pharmacy software interface for a medication script. The patient information section includes Patient MRN: 1999999, Patient Name: Mr Test Rbwhtesttwentyeight, Sex: F, DOB: 01/01/1950 (73 years), and Patient Address: 17 Mystery Address . . 0003 9399. The script details section shows the medication name: Bictegravir - Emtricitabine - Tenofovir Alafenamide (Biktarvy (bottle)) 50mg-200mg-25mg Tablet, Code Type: Ad Hoc, Dir. Code: Take 1 tablet d, and Qty: 30.0. The classification is set to HIV Medicare Ineligible OUTP, which is highlighted with a red circle. Other fields include Ref. Site: RBWH Royal Brisbane and Wc, Clinic: Infectious Diseases Outpatients, Team: Infectious Diseases, Episode: 1999999-1 A:09/09/2022 D:, Pharmacy: Level 1 Pharmacy (NHB), Label Format: qh_disp_no_chrgsB, Route of Admin: As Prescribed, and Reversal Type: .

Figure 2. i.Pharmacy screenshot

6.2. Reporting and reimbursement

Public hospital pharmacies will be reimbursed for the cost of PBS-listed HIV medications dispensed under this Program. Public hospital pharmacies will submit reports for reimbursement from their HHS via their local business processes. Pharmacies will be able to generate these reports in i.Pharmacy using the report called "**dispensing by store and script**".

classification” which will identify the dispensing completed under this arrangement for the required time period. This report contains all of the information required for the annual activity report including drug cost and can be used to determine the number of patients accessing this service and range of medicines dispensed.

The Department, via QPHaSS will submit an annual activity report to the Commonwealth Department of Health. Each HHS will be required to send their annual activity report to BBVCDU@health.qld.gov.au by **10 July each year** (see Table 1. Annual activity report template).

Table 1. Annual activity report template

	Data requested	Input
1	Total number of people ¹ who received antiretroviral therapy (ART) medications for the treatment of HIV under this program from execution to 30 June	<Total number of people>
2	Total cost ² of ART medications for the treatment of HIV under this program for the financial year as at 30 June	<Total expenditure – no rounding>
3	Types of ART medications dispensed under this program for the financial year; and if possible, number of scripts dispensed per medication type	<Provide a list as an attachment – see Appendix 1 for example>
4	Total number of scripts dispensed under this program for the financial year	<Total number of scripts dispensed>
5	Total number of sites dispensing HIV treatment to people who are not eligible for Medicare at execution	<Total number of clinics/sites>
6	Total number of sites dispensing HIV treatment to people who are not eligible for Medicare at end of reporting period (30 June)	<Total number of clinics/sites>
7	Comments on any issues encountered or suggested improvements	<Free text – provide attachment if required>
8	Comments on any promotional activities you have engaged on concerning this program	<Free text – provide attachment if required>
9	Any other comments	<Free text – provide attachment if required>

7. Human rights

This Program is a public health program intended to support the national and international objective of the virtual elimination of HIV in Australia. It will enable people living with HIV to meaningfully reduce their viral load and risk of ongoing HIV transmission for the duration of their stay in Australia or until they transition to another program such as Medicare.

¹ A person is counted if at least one script has been issued and medications dispensed. We accept there might be some over counting due to movement of clients between jurisdictions. For example, a client might reside in Tasmania for 2 months of the year and have at least 1 script issued, and medications dispensed but reside in Victoria for remaining 10 months of the reporting period. The client will be counted in Victoria’s total and Tasmania’s total.

² Figure to be provided by extracting total cost of ART medications dispensed under the Program for the financial year. Total cost is to exclude any patient co-payment received.

8. Supporting documents

- Federal Funding Schedule: Communicable diseases of public health concern – *Access to HIV treatment for people who are not eligible for Medicare.*

9. Definitions

Term	Definition/Explanation/Details	Source
Care	Care is defined as 'outpatient clinical HIV-related care in public facilities' provided by medical professionals trained in HIV management. Care includes the provision of Services . Care related to the management of side effects from antiretroviral treatment will not be subsidised under this program. HIV-related care provided to eligible people as an inpatient of Queensland Health is not covered under this program.	Federation Funding Agreement – Health for <i>Access to HIV treatment for people who are not eligible for Medicare</i>
Living with HIV in Australia	'Living with HIV in Australia' means Australia is the usual place of residence of the person living with HIV. This program is not intended for short-stay visitors to Australia.	Federation Funding Agreement – Health for <i>Access to HIV treatment for people who are not eligible for Medicare</i>
Services	Services are defined as consultations provided by medical professionals appropriately trained and credentialed to provide HIV-related care and/or diagnostic services such as pathology.	Federation Funding Agreement – Health for <i>Access to HIV treatment for people who are not eligible for Medicare</i>
Treatment	Treatment is defined as the provision of ART medications for the management of HIV. ART medications must be prescribed by an authorised s100 prescriber. This program applies to ART medications listed on the Pharmaceutical Benefits Scheme. Jurisdictional legislation/regulation may also apply.	Federation Funding Agreement – Health for <i>Access to HIV treatment for people who are not eligible for Medicare</i>

10. Document approval details

Policy Custodian	Policy Contact Details	Approval Date	Approver
Advanced Public Health Officer – HIV.	bbvcdu@health.qld.gov.au	27/06/2023	Alison Thompson, Manager Blood Borne Viruses and Sexually Transmissible Infections Unit.

Version control

Version	Date	Comments
1.0	27/06/2023	New Guideline