

# Ending the HIV Epidemic: PEP Centers of Excellence

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## EHE Pillar 3: Prevent

Goal 3: By 2025, 50% of people with a PrEP indication will be prescribed PrEP, and **100% of people seeking nPEP will be prescribed treatment.**

Activity 3.1.6: Increase awareness and establish a centralized mechanism to distribute PEP through pharmacy partnerships, **PEP centers of excellence, and PEP hotline.**

# Overview

## Program Components

- A jurisdiction-wide PEP 24/7 call center
- Brick-and-mortar clinical sites

## Program Goals

- Streamlined, patient-centered workflows
- Medical and navigation staff with awareness of and capacity to prescribe PEP
- Navigation and adherence support services

## Barriers to nPEP Access in Philadelphia

- PEP is time sensitive: Post-exposure prophylaxis (PEP) is an emergency medication that prevents HIV if taken within 72 hours of exposure
- Emergency departments are not ideal for nPEP delivery, with challenges including:
  - Long wait times
  - Lack of familiarity among providers
  - Lack of privacy
  - High out-of-pocket costs
- *What are some other barriers to nPEP access in Philadelphia?*

## PEP Call Center: Primary Goals

- Serve as citywide PEP Hotline
- Provide initial PEP triage/assessment and emergency prescription services without in-person contact
- Link clients to brick-and-mortar sites for remaining PEP regimen and in-person PEP care/services

# PEP Call Center Flow

During Business Hours



Refer to and make next available appt. at brick-and-mortar site



Patient prescribed full 28-day regimen

After Business Hours



Refer to 24-hour pharmacy for PEP starter pack



Refer to and make next available appt. at brick-and-mortar site



Patient prescribed full 28-day regimen

## PEP Centers for Excellence Goals

- Provide PEP regardless of insurance status
- Provide urgent care clinical model for PEP
- Receive referrals from PEP Call Center and community-based organizations for PEP
- Convert all appropriate and eligible participants to PrEP
- Provide linkage to HIV prevention services

## Lessons Learned from the NYC PEP Centers for Excellence

- The NYC PEP Centers for Excellence were successful in reaching disproportionately impacted communities
- Internet Searches and Social Media were the listed referral source for 68% of the completed assessments, indicating the social media online presence is essential. Flyers and ads were noted as the referral source for 2% of completed assessments.
- There was a drop-off seen from assessment to linkage that reinforces the need for low barriers to appointment availability/ steps in accessing the clinical site.

## Lessons Learned from the NYC PEP Centers for Excellence

- NYC's population and HIV incidence in 2018/2019 was approximately 5 times more than Philadelphia's, so it might be reasonable to expect/ project about 20% of NYC's year 1 outcomes, or approximately 300 Call Center eligibility assessments and 120 in-person PEP Center for Excellence visits, and 185 PEP starter packs delivered.
- A relatively high 14% of Center for Excellence referrals (in person) were due to sexual assault. This should be noted in TA/ training for provider awareness/ importance of a trauma-informed approach to all program participants.
- About half of participants who received PEP did not return for a 30-day follow-up visit.

## Discussion Questions

- What are some barriers to nPEP access in Philadelphia?
- In NYC, most program participants found the PEP Centers for Excellence via social media and internet searches. Does this ring true for Philadelphia? Are there other ways that people might find PEP?
- What are some ways to ensure that people who need nPEP most are connected to the program?

# Additional questions or comments?

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