Truvada for HIV PrEP: The pathway to market & public cost coverage in Ontario, as an example

Prepared as background for: PrEP in the Context of Sex W

PrEP in the Context of Sex Work: Possibilities and limitations

May 2016

Glenn Betteridge, Policy researcher

Terry Santoni, Program assistant



Canadian Treatment Action Council

 CTAC is Canada's national civil society organization addressing access to treatment for people living with HIV and hepatitis C.

 CTAC meaningfully engages community members, service providers, policymakers and researchers to identify and implement policy and program solutions.



Objectives

- 1. Increase our knowledge of Truvada for PrEP in the Canadian context
- 2. Map out the "pathway" to increased access to PrEP for people in Ontario
 - ► Focus on public drug plan coverage
- 3. Highlight treatment access issues
- Highlight national and Ontario awareness, action and advocacy
- 5. Build CTAC's awareness and knowledge of your issues and concerns



Truvada for PrEP approved

- Health Canada approved Truvada for HIV PrEP on 26 February 2016
 - Gilead can legally market Truvada for PrEP
 - ► First step to greater access
 - More prescribing
 - More cost-coverage under private and public drug insurance plans
- Market access process unfolding faster than anyone expected
 - Are we PrEPared?



Cost, access & cost-coverage

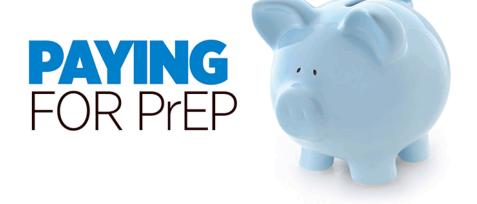
- Cost-coverage: Who pays currently?
 - Quebec's universal public drug program and Non-Insured Health Benefits cover Truvada for PrEP
 - Private insurers in Quebec must cover the cost too
 - Some people in Ontario have had it covered under Trillium Drug Program (shhhhh!)
 - ▶ Other people currently taking PrEP
 - Pay out-of-pocket and/or "import" generic
 - Covered under private insurance
 - Not all insurance plans have covered PrEP
 - Enrolled in a study or clinical trial



Cost in Ontario, an example

• In Ontario, if you bought Truvada for PrEP at a pharmacy, approximately how much would you have to pay each month?

- a) \$600 per month
- b) \$800 per month
- c) \$1000 per month
- d) \$1200 per month



(\$32.60 per pill x 365 days / 12 months = \$991.58 + \$12 dispensing fee = \$1,003.58)



The Pathway to Public Listing

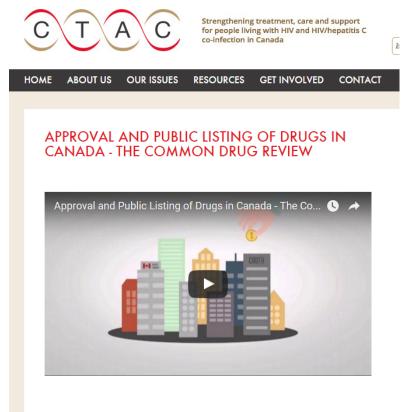


The "pathway"

- "Pathway" to public drug plan cost-coverage is long and complex
 - "Pathway" = Process for the approval, marketing, and cost-coverage of prescription drugs
 - ► Step-by-step, many months, 1000s pages of submissions and evidence, many decision-makers along the way to public drug coverage
 - Process is driven by Gilead (Truvada patent-holder)
 - ► Involves federal, provincial and territorial authorities, drug experts, and "patient groups"



Approval & public listing



This short yet detailed account of how drugs become available in the Canadian Market place is a helpful crash course in understanding Canada's very complex drug approvals mechanisms.

http://www.ctac.ca/resources/videos/approval-and-public-listing-of-drugs-in-canada---the-common-drug-review



- Steps along the pathway determine private and public drug plan access
 - who gets Truvada as PrEP
 - under what government program
 - according to which rules and procedure
 - who pays, when, and how much







Health Canada review & approval (safety, efficacy & quality) = NOC, PM, clinical indication







Patient Input



Health Technology Assessment (HTA) #1: CADTH/CDR (comparative clinical and cost-effectiveness) = recommendation on public listing









Executive Officer, Ontario Public Drug Programs

CONSULT.



- ODSP/OW
- Seniors
- Trillium Drug Plan



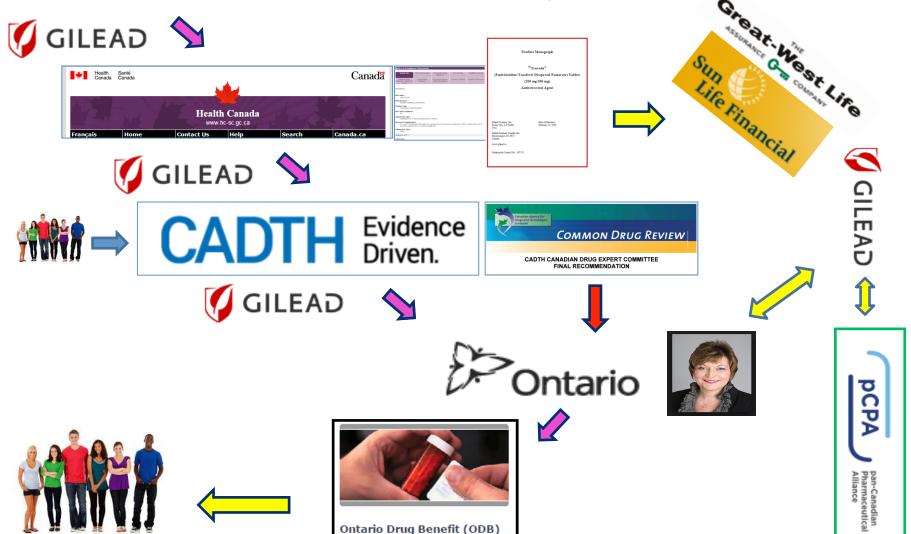
ENGAGE.

Ontario Drug Benefit (ODB)

Formulary GB, Formulary LU, Exceptional Access Program, EAP FA



FIND SOLUTIONS. **ACT COLLECTIVELY.**





2015

Truvada for PrEP Timeline

Open Letter to Gilead (April) **Gilead Applies 2016** For NOC (August) Gilead Applies to CADTH/CDR (January) **Health Canada Issues NOC** (February) **CADTH/CDR Application Accepted** (March) **CADTH/CDR Patient Group Submissions (March) CDR/CDEC Recommendation** (?August?) pCPA—Gilead Negotiations? (August to December 2016?) **F/P/T Public Drug Plan Listing? 2017** (starting December to 2017+????) Gilead's Truvada Patent Expires (July)



Health Canada Review & Approval



Health Canada Review









Health Canada Review

- Health Canada reviews
 - Drug safety and efficacy (human clinical trial data)
 - Specific medical condition, with a particular drug, in a specific population, in specific circumstances
 - Manufacturing quality
 - Essential info in scientific and marketing materials
 - And decides whether to approve drug for sale in Canada

Notice of Compliance (NOC)

Notice of Compliance (NOC) issued by Health

Canada if drug "approved"

 Approved for a specific clinical indication



- Clinical trial data reviewed determines the clinical indication
 - medical/scientific basis for prescribing
 - Drug prove safe and effective in whom, for what medical condition, at what dose, and under which circumstances



Truvada Product Monograph

UPDATED 23 February 2016, to include new indication for HIV PrEP Product Monograph



Truvada's HIV PrEP indication



- Product monograph (PM) reviewed and approved as part of HC review leading to NOC
 - factual, scientific document on the drug
 - devoid of promotional material
 - describes the properties, claims, indications for clinical use, and conditions of use for the drug
 - any other information that may be required for optimal, safe, and effective use of the drug
- Indication(s) for clinical use
 - ▶ indication aka "label"
 - on-label versus off-label prescribing
 - public and private drug insurance plans normally cover only onlabel prescribing (i.e., for the indication)



Daily Truvada for PrEP: According to Health Canada



- Pre-Exposure Prophylaxis (PrEP) of HIV-1
 Infection (see PM, page 3-4)
 - daily
 - in combination with safer sex practices
 - ▶ to reduce risk of sexually acquired HIV-1 infection
 - ▶ in adults at "high risk" (i.e., risk assessment required)
 - Risk factors set out in Product Monograph



Daily Truvada for PrEP: According to Health Canada



- Following factors may help to identify a person at high risk of HIV infection:
 - partner(s) known to be HIV-1 infected, Or
 - engages in sexual activity within a high prevalence area **Or** social network, **and** one or more of the following:
 - inconsistent or no condom use
 - diagnosis of sexually transmitted infections
 - exchange of sex for commodities (e.g., money, food, shelter, drugs)
 - use of illicit drugs or alcohol dependence
 - incarceration
 - partner(s) of unknown HIV-1 status with any of the factors listed above



Daily Truvada for PrEP: According to Health Canada



- When prescribing Truvada for HIV PrEP, healthcare providers must:
 - Prescribe as part of comprehensive HIV prevention, because Truvada not always effective
 - Counsel about need for strict adherence
 - Confirm HIV 1-negative status through diagnostic testing prior to prescribing
 - Screen for HIV-1 every 3 months



Clinical indications

- Clinical indication shape next steps along the pathway
 - Health Technology Assessment / Pharmaco-economic review
 - Comparative clinical benefit of drug versus other approved drugs for medical condition
 - Cost-effectiveness and public plan budget impact



- ▶ Price negotiations & public drug plan listing decisions
 - Will drug company reduce the price? How much?
 - Can plan afford drug for all the people who need it (i.e., for whom it can safely be prescribed and will be effective)?



Private Insurance Coverage

















Private insurance plans

- Coverage for Truvada for PrEP depends on person's insurance plan (not the insurance company)
 - ► An insurance plan is a contract
 - Group plan: Contract between insurance company and a specific employer (for example), for the benefit of group members (i.e., employees)

Health Technology Assessment: Common Drug Review (CDR)























CADTH Common Drug Review

- Common Drug Review (CDR)
 - ► Canadian Drug Expert Committee (CDEC) reviews and recommends brand name prescription drugs for public drug plan cost-coverage
 - CDEC reviews clinical, economic, and patient and health care provider evidence
- Will CADTH "speed up" process for Truvada for PrEP?
 - ► First drug to prevent HIV.... Important breakthrough for individual and public health

















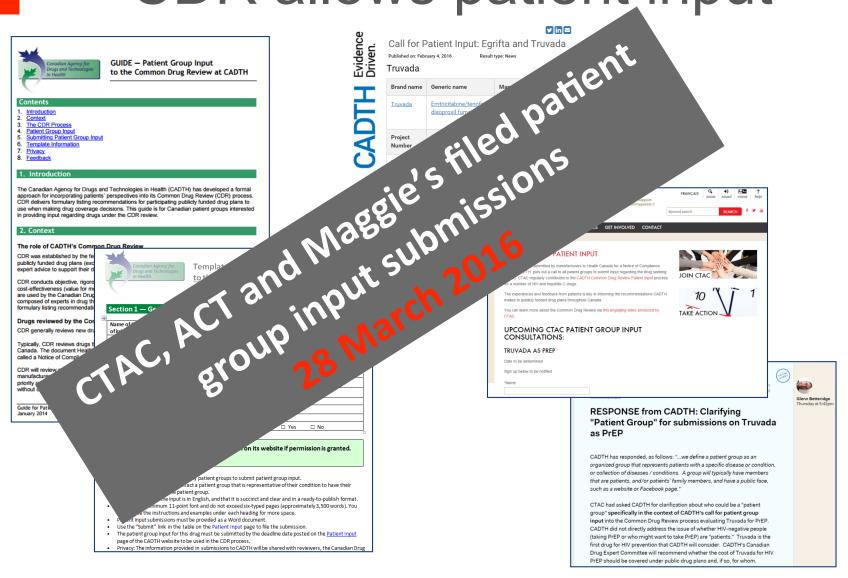








CDR allows patient input





CDEC recommendation



CEDAC FINAL RECOMMENDATION and REASONS for RECOMMENDATION

TENOFOVIR/EMTRICITABINE (Truvada™ - Gilead Sciences Canada, Inc.)

This recommendation is superseded by the CEDAC recommendation for this drug and indication dated December 17, 2008.

Description

Truvada** is a fixed dose combination of two nucleoside/nucleotide reverse transcriptase inhibitors that is approved for the treatment of HIV-1 infection in combination with other antiretroviral agents in patients 18 years of age and older.

Dosage Forms:

Tablet containing emtricitabine 200 mg and tenofovir disoproxil fumarate 300 mg

Recommendation

The Canadian Expert Drug Advisory Committee (CEDAC) recommends that Truvada be listed as an alternative for the initial phase of treatment of adult patients with HIV infection who have experienced intolerance or adverse events with other nucleoside combinations including lamivudine in combination with zidovadine, abacavit, stavudine or didanosine and, who have not developed virologic failure or clinical progression on initial antiretroviral therapy.

Reasons for the Recommendation:

- 1. The Committee considered the data from one open label randomized controlled trial (RCT) of 48 weeks duration in treatment naive patients that compared a regimen of zidovadine, lamivudue and efavieruz, against a combination of tenofovir, entricitabine and eflavieruz. The latter was associated with statistically significant improvements in virologic response (HIV-1 RNA levels 400 or 50 epics/mL). In part, this benefit may have resulted from the open-label design of the trial and the fact that more patients in the zidovadine/famivudine am discontinued therapy and were classified as treatment failures. There were no statistically significant differences between the two treatments in the occurrence of virologic failure or viral resistance.
- There were fewer withdrawals due to adverse effects in the tenofovir/emtricitabine arm and this was primarily due to a lower incidence of anemia.
- Truvada^{to} costs \$25.05 per day, which is more costly than other nucleoside combinations and combination products (eg. lamivudine/zidovudine costs \$19.51 per day). A

Common Drug Review

CEDAC Meeting – September 20; 2006 Notice of CEDAC Final Recommendation – October 25, 2006 Page 1 of 2

Canadian Drug Expert Committee (CDEC)

- reimbursement recommendations and advice
 - do not bind participating public drug plans
- CDEC/CADTH sends its "file" on the drug to each participating public drug plan
 - ► e.g., Ontario, CSC, NIHB, etc...



CDEC Timetable for Truvada

CADTH		emtricitabine/Teno Gilead Sciences C	us Report ofovir Disoproxil Fu		2016-Feb-26 Schedule B
Key Milestone ³		Target Date	Actual Date	Comments	
Application accepted for review		2016-Mar-17	2016-Mar-17	- Review has been initiated 2016-Mar-18	
Patient group input received ⁴		2016-Mar-28		- Call for patient input posted on 2016-Feb-04 - Patient group input deadline: 2016-Mar-28	
Patient group comments on input summary received					
Draft CDR review report(s) sent to applicant		2016-Jun-02			
Comments from applicant on draft CDR review report(s) received by CADTH		2016-Jun-13			
Redaction requests from applicant on draft CDR review report(s) received by CADTH		2016-Jun-20			
CDR review team's comments on draft CDR review report(s) sent to applicant		2016-Jul-08			
Canadian Drug Expert Committee (CDEC) meeting		2016-Jul-20			
CDEC recommendation & redacted CDR review report(s) sent to drug plans and applicant		2016-Jul-27 to 2016-Jul-29			

CDEC meeting: 20 July 2016

CDEC recommendation and review (to Gilead): 27-29 July 2016

Estimated time of public release (based on CADTH/CDR timeline):

+ 19 to 25 weeks

Executive Officer Role: Listing Drugs in Ontario







Program

Ontario Drug Benefit (ODB)

Listing Truvada in Ontario?

- Ontario Public Drug Program Executive Officer has a number of options for *listing* Truvada for public cost-coverage
 - 1. General Formulary
 - General Formulary (Limited Use)
 - Exceptional Access Program
 - 4. Exceptional Access Program (Facilitated Access)
 - 5. ?????
 - Based on the existing categories and procedures under publicly funded drug system in Ontario



Ontario clicks

- Ontario Public Drug Programs
 http://www.health.gov.on.ca/en/public/programs/drugs/
- How are drugs approved in Ontario
 http://www.health.gov.on.ca/en/public/programs/drugs/approval/approval.aspx
- General Formulary
 http://www.health.gov.on.ca/en/pro/programs/drugs/odbf_mn.aspx
- Limited Use http://www.health.gov.on.ca/en/public/programs/drugs/programs/odb/opdp-limited-use.aspx
- Exceptional Access Program: http://www.health.gov.on.ca/en/public/programs/drugs/programs/odb/opdp eap.aspx



Listing Truvada in Ontario?

- Ontario Public Drug Program Executive Officer has a number of options for listing Trustal a for Each option has implications for access? What who eligible? "costs"? cost-coverage



The Ontario Drug Benefit (ODB)

 ODB covers more than 4,300 prescription drug products

- Covers residents ... who are eligible
 - ▶ social assistance recipients (Ontario Works, ODSP)
 - seniors
 - people with high drug costs relative to their income (Trillium Drug Program)
 - residents of LTC facilities



ODB Formulary Listings

General Benefit

- Listed in the "formulary"
- Cost-covered for ODB-eligible recipients, without specific conditions, at pharmacy
- ► Different admin procedures for different people (e.g., drug card, Trillium)

Limited Use

- Reimbursed for ODB recipients only when prescribed according to criteria/conditions outlined for product in formulary
- ► Limited Use drug products demonstrate efficacy, safety, and cost-effectiveness for certain specific indications



Exceptional Access Program

- EAP Facilitated Access
 - Prescription by physician registered under the Facilitated Access mechanism
 - Specific lists of drugs that approved physicians can prescribe w/out going through EAP for specific medical conditions
 - ► Includes HIV/AIDS

Exceptional Access Program

- Exceptional Access Program (EAP)
 - Drugs recommended by Ontario CED, placed on EAP by OPDP executive officer
 - Drugs not included on the ODB formulary
 - Where no listed alternative is available
 - ▶ Today, often functions as a cost-containment mechanism
 - New Hepatitis C drugs covered under EAP

Other public programs in Ontario

- A number of federal public drug programs apply to specific groups of eligible people in Ontario
 - Canadian Forces
 - Correctional Service Canada (federal prisoners)
 - Interim Federal Health (refugee claimants)
 - Non-Insured Health Benefits (FNIHB—First Nations and Inuit)
 - Veterans Affairs Canada
- Each federal program has its own drug listing process.
 - Currently available under NIHB



Negotiating the Public Drug Plan Price



Truvada "pathway" for Ontario





Ontario Drug Benefit (ODB)

Price negotiations & PLAs

- Pan-Canadian Pharmaceutical Alliance (pCPA)
 - ► Political "block" of public drug plans, negotiates with name-brand pharma for lower prices

- Drug plans and pharma company enter into Price Listing Agreement for each drug
 - ▶ May happen after pCPA negotiations or before

Truvada public pricing change?

- A new market for an "old drug"
 - PrEP is new indication, distinct population, different "medical condition"
 - ▶ Gilead patent on Truvada expires in July 2017
- Gilead has said it expects to lower price of Truvada!
 - Gilead will participate in new pCPA negotiations
 - ► Then re-negotiation of existing Truvada PLAs with public plans



No drug coverage, no PrEP?



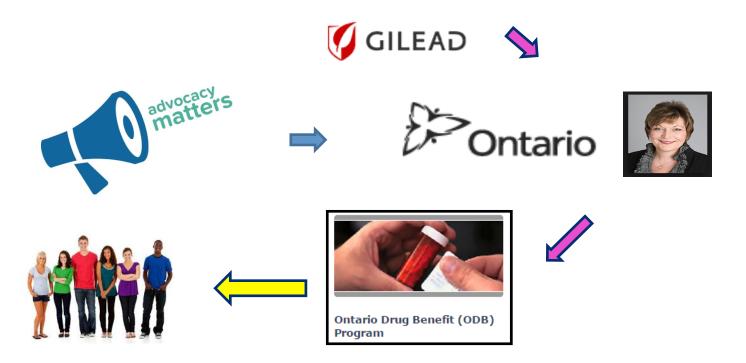
- Gilead USA offers patient access programs that provide Truvada for free, or cover the cost of copayments/deductibles
 - http://www.gilead.com/responsibility/us-patient-access/truvada for prep medication assistance program
- Coming to Canada?
 - We won't know until we ask.
 - www.truvada.ca coming soon



Advocacy for Access

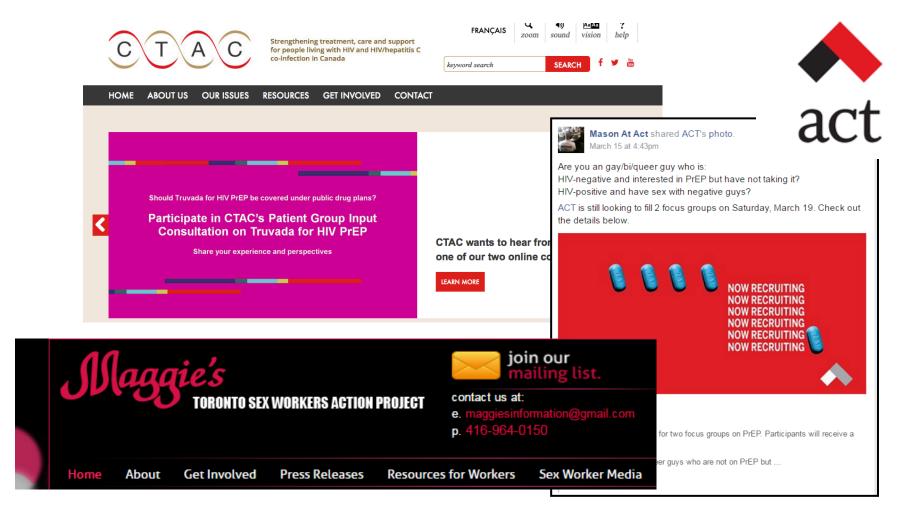


Truvada "pathway" for Ontario





Patient Group Input





CTAC Letter to OACHA



for people living with HIV and HIV/hepatitis C

Rehausser les traitements, les soins et le souti pour les personnes vivant avec le VIH et la co-infection VIH/hépatite C au Canada

VIA EMAIL [a.rachlis@utoronto.ca; rick@kennedycoachingconsulting.com]

25 January 2016

Dr. Anita Rachlis and Mr. Rick Kennedy, Co-chairs Ontario Advisory Committee on HIV/AIDS

Dear Dr. Rachlis and Mr. Kennedy:

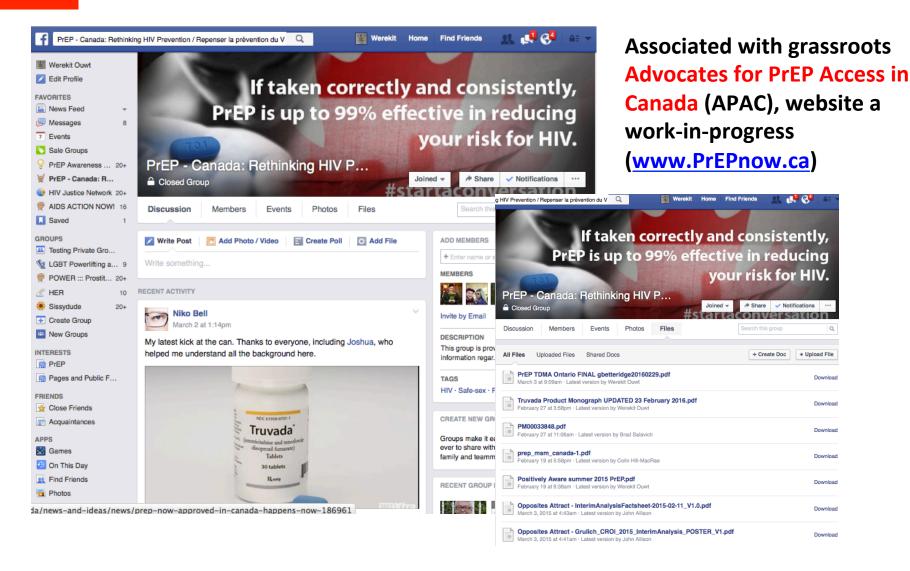
RE: Access to HIV Pre-exposure Prophylaxis in Ontario

I am writing to you regarding the Ontario Advisory Committee on HIV/AIDS's (OACHA) advice to the Minister of Health and Long-Term Care in relation to HIV pre-exposure prophylaxis (PrEP). While OACHA has likely considered the range of health and social policy issues related to PrEP, I wanted to take the opportunity to bring to your attention CTAC's perspective on the potentially significant regulatory and other barriers to PrEP access people in Ontario in need of this proven HIV prevention technology may experience. I would also like to offer for your consideration a number of potential approaches or strategies to address the protracted duration of the regulatory approval process, which might help inform your advice to the Minister of Health and impress upon him the urgency of working with the full range of stakeholders to ensure timely and equitable access to HIV PrEP.

Sent on 26 January 2016... CTAC is awaiting an acknowledgement and/or response.

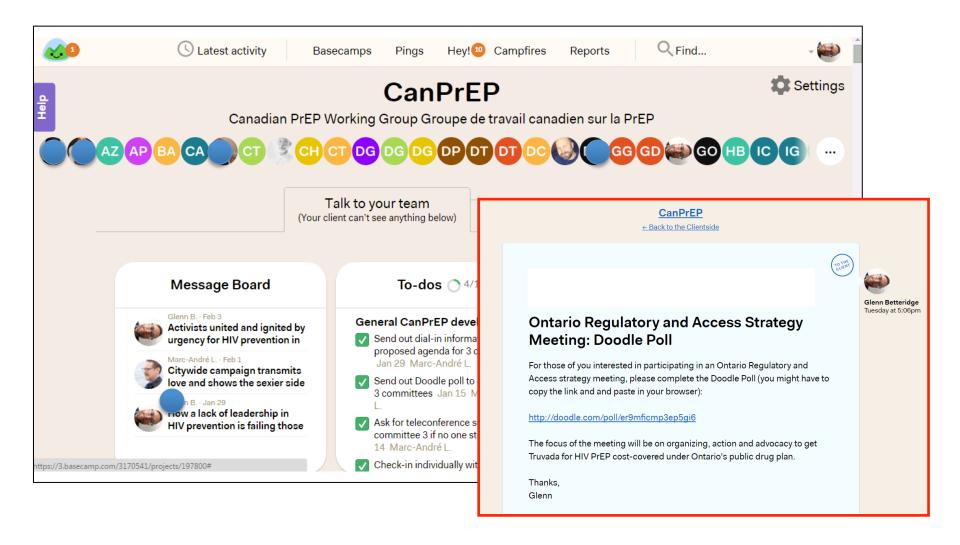
"CTAC advocates for equitable, affordable and timely access to HIV medications, and medications used to treat chronic hepatitis C infection. This includes medications to prevent HIV, such as Truvada for PrEP. We wish to raise a number of issues related to PrEP access ... flowing out of these key principles..."

Communities of interest





CanPrEP advocates working group

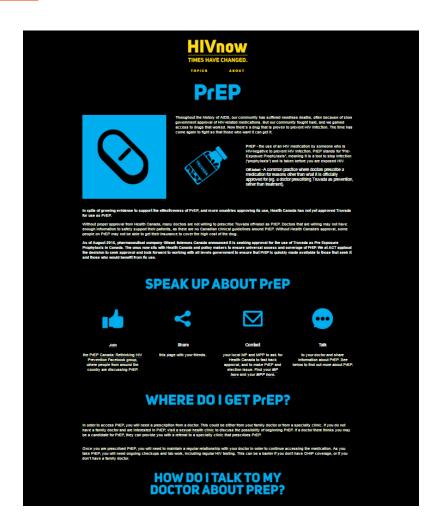




CanPrEP advocates working on...

- Initial in-person meeting in October 2015
 - Agreement to work together on project-by-project basis; focus on work,
 NOT building an organization or institution
 - Adopted Basecamp communication platform in January 2016
 - Cross Canada representation, community, HCPs, PHAs, local
- Activities in progress (May 2016)
 - PrEP prescriber referral list (local list, possibility of national?)
 - Request for meeting with Gilead to discuss pricing, access, patent expiry and product support for Truvada (by end of May 2016)
 - Regional/provincial support and co-ordination
 - Ontario kicking off postcard and sticker campaign to coincide with LGBTQ2S Prides and other summer festivals in Ontario; request for meeting with Ontario Public Drug Program; campaign launch and physician support in Fall 2016
 - NS investigating lay of land
 - Alberta discussions and organizing involving community and HCPs
 - BC community education, awareness, web-site development, social media work, and early stages of communicating with BCCfE, BCCDC, MoHealth, community, PAN

Toronto activity





Pressure points & potential allies for access

- CADTH patient input
- Ontario Minister of Health
- OACHA
- Public Health Ontario
- Medical Officer(s) of Health
- Gilead Canada
- Physician & nurse allies
- Rainbow Health Ontario
- GMSH
- Sherbourne Health Centre
- Ontario HIV Treatment Network



Awareness, Action and Advocacy in Ontario

• What is going on in Ontario, your community, your organization, on-line ... ?



Get social with us! Joignez-vous à nous!

- **●** @CTAC_CAN
 - f /CTAC.CAN
- /CTACTALKS
- in CTAC CANADA



Contact us. Nous joindre

Glenn Betteridge, Policy researcher glenn@ctac.ca
437-222-2822 x232

Terry Santoni, Program assistant terry2@ctac.ca
437-222-2822 x231

