# PrEP Decision-Making:

# **Client and Provider Communication**

JSI Research & Training Institute (JSI)Suffolk County Sheriff's DepartmentEast Boston Neighborhood Health Center

2023 PrEP Webinar Series: Oral and Injectable PrEP Session 3: Monday, June 5, 2023 | 3PM - 4:30PM ET



# **Learning Objectives**



A Start of the second s

$\bigwedge$		
(=		
$\mathbf{r}$	$\checkmark$	

Describe the client-level, program-level, and populationlevel factors that affect PrEP access and uptake. Recall key messages about oral and injectable PrEP to be conveyed when providing client education on PrEP. Apply client-centered messaging strategies to support clients in identifying a PrEP option that's right for them.

#### **Presenters & Facilitators**





Christine Luong, MPH (she/her) TA4SI Project Manager and Training & Technical Assistance Specialist, *Consultant, JSI*  Molly Rafferty (she/her) TA4SI Training & Technical Assistance Specialist and Resource Development Lead *Analyst, JSI* 



Arman Lorz (he/him) TA4SI Training & Technical Assistance Specialist Senior Consultant, JSI

# **Today's Agenda**



Recap of Sessions 1 & 2 Presentation: Talking with clients about oral PrEP *Panel*: Provider Strategies for PrEP Decision-Making Q&A







# Recap

Session 1 (4/17): Understanding Injectable and Oral PrEP

- → Currently available options for PrEP include oral TDF/FTC, oral TAF/FTC, and injectable CAB.
- → All forms of PrEP are highly effective when taken as prescribed, and generally well-tolerated.
- → On-demand PrEP with TDF/FTC is an alternative dosing strategy studied among MSM.
- → Same-day PrEP initiation may improve access and uptake and is most feasible with oral PrEP.
- → Consider preferences, comorbidities, the nature of an individual's HIV exposure, and logistics when working with a patient/client to select a PrEP option.

Session 2 (5/8): PrEP Financing and Payment

- → PrEP is covered by all insurers in MA, including
  Qualified Health Plans on MA Health Connector,
  MassHealth, and private health insurers.
- → PrEP prescriptions may require prior authorization.
- → Use Modifier 33 to waive cost-sharing for PrEP rx and ancillary services (follow-ups, labs, etc.)
- → MA PrEP Drug Assistance Program (PrEPDAP) can help any insured or uninsured MA resident who is HIV negative to access PrEP without cost-sharing.
- → Get in touch with AccessHealth MA to learn more about PrEPDAP and nPEP.



# Poll





Talking with clients about oral PrEP

#### **TA4SI Resource**

This resource shares plain language messaging and considerations that can help SSP staff have conversations with people who use drugs about oral pre-exposure prophylaxis (PrEP).

You can download the resource on the <u>TA4SI</u> <u>website</u>.

Thank you to the <u>Justice Resource Institute</u> for their contributions in the development of this resource!

#### Key Messages: Talking with Syringe Service Program clients about pre-exposure prophylaxis

Syringe service programs (SSPs) help people reduce their chances of getting HIV from sexualand injection-related exposures. People are often assessed for pre-exposure prophylaxis (PFEP) eligibility when they visit primary care or infectious disease clinics. SSP clients often feel more comfortable talking about HIV risk and learning about PFEP with trusted SSP staff, who help them mayigate challenges in obtaining medical care and make them comfortable asking questions about prevention and treatment options. If your SSP does not offer PrEP services onsite, tell interested clients that you can link or refer them to a provider that does.

Note: This resource is centered around oral PrEP because studies on the use of Injectable PrEP by people who inject drugs are unfortunately not yet completed.

The following practices will help SSP staff talk about PrEP with clients.

#### Key messages about PrEP

The goal of your initial conversations about PrEP with SSP clients is to convey basic information and address any concerns that the client may have. Your messages should be clear and unambiguous.

Note: The messages outlined in this document are intended as a guide. When talking about HIV risk with SSP clients, use language that they will understand and relate to, rather than using the suggestions here word for word. For messages that have alternate wording, you and your team can decide which approach makes the most sense in the context of your organization and each client.

For the daily pill regimen:

 Awareness: "There is a pill that you can take once a day to reduce your chances of getting HIV."

Alternate: PrEP is a way for people who don't have HIV but are at risk (through sex or injecting drugs) to avoid getting HIV by taking a pill every day. Studies have shown that PrEP, if taken as prescribed, is very effective in reducing chances of HIV infection.

- Effectiveness/Safety: "PrEP is a safe and effective way to reduce your chances of getting HIV."
  - O Address concerns about interactions with medications or other substances.
  - O Discuss perceived and actual side effects.

Note: You can refer to the AIDS Education & Training Center (AETC) Prescribing PrEP provider pocket guide for information on side effects and drug interactions.



# **Key Messages about Oral PrEP**

**Awareness**: "There is a pill that you can take once a day to reduce your chances of getting HIV."

**Effectiveness/Safety**: "PrEP is a safe and effective way to reduce your chances of getting HIV."

- → Address concerns about interactions with medications or other substances.
- → Discuss perceived and actual side effects.



# **Key Messages about Oral PrEP**

**Cost**: "Most people can get their PrEP medication costs covered by insurance and financial assistance."

Adherence: "PrEP works best when you take it every day at the same time."

**Retention in care**: "People who take PrEP need to see a medical provider every three months. If I helped link you to a medical provider, could you regularly attend appointments?"



#### **Sample Messaging**

# Ask permission to begin the conversation

"I have some information about practicing safer sex that might be useful. Can I tell you about it?"

"What do you know about PrEP? Do you want to learn more?"



"If you have questions or worries about sex, I'm open to any topic you want to bring up."



# Ask about behaviors without judgment

"When was your most recent sex without a condom?"

"When was the last time you used a needle that someone else used before you?"

# Explain

"The reason I ask these questions is because this information will help me know what to offer to help keep you safe and decrease your chances of getting HIV and other infections."

# Ask open-ended questions

"What do you think your risk is like for getting HIV?"

"What questions or concerns do you have when it comes to HIV?"

"What is your understanding of the way HIV is transmitted?"

#### Take cues

"What I heard from you is that you don't always have access to new works and sometimes end up sharing with your friends."

"When we were talking about condoms, I noticed you hesitated to answer my question. Can you tell me what you're thinking?"

#### Normalize

"We ask these questions to get a better understanding of people's risks, and we want everyone to get a chance to get on PrEP because we want everyone to have the chance to avoid HIV." Use language that involves the client in their own care "What does your day-to-day look like?" "Do you already take medication every day?"

"Does this feel like something that you could do every day?"

 $\bigcirc$ 

# Maintain a client-centered approach

"What is important to you?"

"What motivates you to be healthy?"

"What goals do you have related to your health?"



# Meet clients where they are at

"Whenever you're ready, I'm here Monday through Friday. I'm here for you and what you need."





Panel: Provider Strategies for PrEP Decision-Making

### **Panelists**



Kennedy Salonen (she/her) Infectious Disease Coordinator, Suffolk County Sheriff's Department



Elena Usui (she/her) PrEP Navigator, Project SHINE, East Boston Neighborhood Health Center







# **PrEP Workflows**

What is your agency's current PrEP service model, and (how) can it be adapted to incorporate injectable PrEP?

What is your agency's staff capacity to prescribe PrEP?

How does your agency review and revise workflows to ensure successful implementation?

Session 4: Integrating PrEP Into Clinical, Non-Clinical, and Inter-agency Workflows Monday, June 26 from 3PM - 4PM ET





Please take a moment to complete the brief feedback form!

# **Contact Us:**

TA4SI@jsi.com

KSalonen@scsdma.org

usuie@ebnhc.org

Website:

ta4si.jsi.com

