## Provincial/Territorial Coverage of ARV drugs for HIV prevention across Canada: Post-exposure prophylaxis (PEP) and Pre-exposure prophylaxis (PrEP)

The state of the s														
	Alberta	British Columbia	Manitoba	New Brunswick	Newfoundland & Labrador	Northwest Territories	Nova Scotia	Nunavut	Ontario	Prince Edward Island	Quebec	Saskatchewan	Yukon	NIHB
For Post-exposure prophylaxis	•					•	•	•						
For <u>consensual</u> non-occupational exposure (eg. sexual exposures, needle-sharing)	See note	See note	See note	See note	no	yes	no	yes	See note	See note	yes	yes	no	yes
For <u>non-consensual</u> non-occupational exposure (eg. sexual assault)	yes	See note	See note	See Note	no	yes	yes	yes	yes	yes	yes	yes	yes	yes
For occupational exposures in individuals <u>without</u> private drug insurance (eg. dental hygienist without drug insurance)	yes	See note	See note	See note	no	yes	no	yes	See note	WCB	yes	WCB	yes	yes
For Pre-exposure prophylaxis														
Emtricitabine-tenofovir disoproxil fumarate (Truvada)	yes	yes	no	yes	yes	yes	yes	yes	yes	yes	yes	yes	no	yes

PEP: Emergency care providers consult with regional Medical Officer of Health (MOH) on-call. Details of exposure are reviewed and MOH may authorize coverage of medications according to protocol, no cost to patient. If
exposure is occupational and WCB is available, that route is pursued; if no WCB or other insurance then MOH may authorize provincial Public Health fund to cover, no cost to patient. Coverage for consensual exposures is
not generally offered except in extenuating circumstances, at discretion of MOH.
PrEP: provincial coverage is available if clients have valid Alberta Health Care coverage and receive a prescription for the medication from a registered designated prescriber. Clients may choose to use private insurance
coverage or pay full cost if they do not get PrEP care through a designated prescriber.
Occupational and non-occupational exposures require authorization from CFE physician for continuation of prophylaxis after starter kit (5 day kit in all EDs, RN stations, some clinics). Province covers 100% of PEP cost, if
authorized by CFE physician. PrEP coverage based on CFE specified clinical criteria – province covers 100% of cost
PEP: Covered by the provincial program (Part 2 EDS) if meets criteria as determined by prescriber or dispensing pharmacist. Coverage follows the rules of the plan eg. no cost for those with social assistance, deductible
required for those with Pharmacacare.
PrEP: No coverage
PEP: Uninsured individuals can enroll into plan D to access PEP; however, enrolment is not timely. If already enrolled in plan D, PEP can be obtained, however, there is a co-pay based on income.
PrEP: Coverage is available for seniors, uninsured individuals, and social assistance recipients but require co-payments that vary depending on the plan.
PEP: provided by the regional health authorities through the hospital rather than the community
PrEP: coverage is available through the provincial drug program and follows the co-payments of the plan
ARVs are fully covered if they are eligible benefits and do not require a prior approval; access to medication is not by indication
If needing ARVs that require prior approval then it should be approved immediately after call to the prior approval line stating that it's for the indication of PEP
PEP: In the setting of sexual assault, the entire 28 day course is universally covered (100%) and provided free of charge to the patient.
In all other situations where PEP is deemed necessary, a 5 day PEP starter kit of Truvada and raltegravir is supplied to the patient at no cost from EDs across the province and/or the QEII Infectious Diseases clinic. A
prescription for the remainder of therapy is the financial responsibility of the patient.
PrEP: Exception status coverage is available through the Nova Scotia Family Pharmacare Program. Patient must be enrolled to in the Nova Scotia Family Pharmacare Program. The annual family copayment and deductible
maximums are set depending on a family's size and annual income: https://novascotia.ca/dhw/pharmacare/family-pharmacare.asp
ARVs are fully covered if they are eligible benefits and do not require a prior approval; access to medication is not by indication
If needing ARVs that require prior approval then it should be approved immediately after call to the prior approval line stating that it's for the indication of PEP
PEP: No out-of-pocket expenses for sexual assault victims, youth (age ≤ 24) without drug insurance, low-income seniors and social assistance recipients. Individuals can enroll into Trillium for coverage assistance but
activation is not timely. Deductibles are required from those enrolled in Trillium or high-income seniors. The city of Ottawa, through the sexual health clinic, has a limited budget to help those high-risk individuals in need
who cannot afford PEP.
PrEP: There are no out-of-pocket expenses for youth (age ≤ 24) without drug insurance, low-income seniors, and social assistance recipients. Deductibles are required from those enrolled in Trillium or high-income seniors
PEP and PrEP: Requires approval from the chief public health office; if approved, PEP or PrEP is provided at no cost to the patient
Out of pocket expenses for patients covered under the provincial plan as per any other drug:
There is an annual premium between \$0 and \$636 depending on the net family income.
- For children < 18 years old, full time students < 25 years old without a spouse and living with parents, people with a recognized functional impairment, and people on social assistance (claim slip)the medications are free;
- For people 65 or over, the out of pocket contribution can be \$0, \$54.08 or \$93.08/month depending on their guaranteed income supplement
-For others, there is a maximum payment of \$93.08/month (maximum \$1117/year)
ARVs are universally covered 100%; however, ARVs for occupational exposures should be billed through Workman's Compensation Board.
Truvada for PrEP is available as open benefit under NIHB and Saskatchewan Provincial Drug Plan
Clients who meet the HIV PEP criteria as outlined in the Yukon blood & body fluid exposure management guidelines receive 100% publically funded ARV therapy; no coverage for PrEP
As of April 1st, 2016, regular drug benefit list is determined by province or territory. Limited use, exceptional status, special authorization or restricted use medications require pre-authorization by IFHP. IFHP will use the

Alberta: Jeff Kapler, British Columbia: Linda Akagi, Manitoba: Shanna Chan, New Brunswick: Jodi Symes, Newfoundland and Labrador: Deborah Kelly, Nova Scotia: Tasha Ramsey, Ontario: Deborah Yoong, Prince Edward Island: Bonnie Cornish, Quebec: Nancy Sheehan, Saskatchewan: Mike Stuber, Yukon: Josianne Gauthier, First Nations: Shanna Chan