

Facts, Issues, Conundrums

Shared by all:

1. Access to HIV medications for people living with HIV and who participate of Medicaid is very important and should be made as easy as possible.
2. The decision about what type of medication a patient uses should be made by the physician-patient team, not by the government or pharmaceuticals.
3. There should be easy processes to access HIV medication through Medicaid.
4. The patients' health is the priority.
5. The different stakeholders were part of several meetings and processes to develop the current HIV drug formulary.
6. At some point, towards the end of working on developing the current drug formularies for these HIV medications, the parties didn't quite get to the same conclusions on what was most important.
7. Trust has been affected (in all directions.)

Shared by some:

1. There is confusion on how the current formulary works and who benefits from the current processes.
2. The prior authorization requirements feel like the voices of people living with HIV have not been heard.
3. There are questions about the role of pharmaceuticals in these conversations.
4. The voices of people of color living with HIV have not been always present, and sometimes they have been suppressed.
5. There are still other vulnerable communities whose needs have not been always present at the table during the conversations: rural, sex workers, people with disabilities, the elderly, transgender community, immigrants, etc.
6. Information has not always been presented to stakeholders or has been presented in a way that has not felt transparent.
7. The challenges of balancing fiscal responsibility and universal accessibility has not always been understood.
8. The challenges of balancing fiscal responsibility and universal accessibility has been presented in a way that seems to pit one community against another to fight for limited resources.