



GUIDE FOR MEDICATION STORAGE AND ACCESS

ABOUT HIV MEDICATIONS

There are a variety of medications, also known as antiretroviral drugs, on the market today to treat HIV. If taken daily, HIV antibodies can be reduced, thus greatly mitigating the spread of HIV. Another term used to discuss HIV treatment is antiretroviral therapy or ART.

There are also medications that can greatly reduce the acquisition of HIV if taken properly, called pre-exposure prophylaxis (PrEP). When taken as required, PrEP has been shown to reduce the risk of HIV infection by 92 percent.ⁱ

The cost of these medications is staggering – around \$2000 to \$4000 *per month*. Due to the prohibitive cost of these medicines, many people living with HIV have chosen to not take them or take them only sporadically.

There are programs available to people living with HIV to assist with medication costs. Patient Assistance Programs are run by drug companies and foundations and offer free or reduced-cost medication to those who qualify. The Ryan White AIDS Drug Assistance Program (ADAP) grants money to all states and territories in the United States for the treatment of HIV. However, the wait list for this program can be long and medications included differ from state to state. Eligibility for the program can vary by state or territory but all require documentation of HIV.ⁱⁱ

The Affordable Care Act has made significant improvements for people living with HIV. Insurers can no longer deny coverage due to a “pre-existing condition” or impose annual limits on coverage. Eventually, the Affordable Care Act also closes the Medicare Part D prescription drug benefit “donut hole,” giving Medicare participants living with HIV/AIDS better ability to afford important medications. For more information, go to www.hiv.gov.

WORKING WITH SURVIVORS ON MEDICATION

Do not ask survivors what medications they are taking. You might ask if they need to be referred to a doctor. A best practice is to provide each survivor with a lockbox and small refrigerator with a lock to privately store any medications and other valuables. This will prevent liability for the program and allow the survivor to control when they take their medicines. Unless your program is licensed to dispense medications, your program should not control or disseminate medicines to program participants.



PROMISING PRACTICES

1. Do not ask what medications someone is taking.
2. When discussing medical history, make sure they are aware that they do not need to disclose any information. Discussion of medical history should always be voluntary.
3. Do not collect medications from anyone.
4. Provide lockboxes and lockable refrigerators to everyone in your program.

ADDITIONAL RESOURCES

- For more information on discussing HIV/AIDS with victims of domestic violence, please review the **HIV/AIDS Conversation Guide** in the *Positively Safe Toolkit*.
- Review the **Risk Reduction** handout in the *Positively Safe Toolkit* for more information on reducing risk for HIV acquisition.
- For more information on care for persons living with HIV/AIDS, please review the **Linkage to & Retention in Care** Resource in the *Positively Safe Toolkit*.
- Review the **Safety Planning Guide** in the *Positively Safe Toolkit* for more information around safety planning with medications.

ⁱ <http://www.cdc.gov/hiv/prevention/research/prep/>

ⁱⁱ <http://hab.hrsa.gov/abouthab/partbdrug.html>