

2023

# POLICY PRIORITIES

Since opening our doors in 1986, Prism Health North Texas (PHNTX) has played a critical role in connecting people living with HIV to care and services in North Texas. Whether it's in the halls of our nation's Capitol, or in the streets of Dallas outreaching to the homeless or housing insecure, PHNTX staff are actively advocating to ensure quality healthcare is accessible to all.

Policies created at the local, state, and federal levels are a critical piece of the overall puzzle that safeguards our ability to provide access to care for North Texans who are historically underserved. Thoughtful, community-informed guidelines shaped by subject matter experts create policies that best serve Texans. At PHNTX, we strive to address issues that impact not only health outcomes but also the overall quality of life.

## LGBTQIA+

Almost 40 years ago, PHNTX, then AIDS Arms Network, recognized an urgent healthcare need. Acquired Immune Deficiency Syndrome (AIDS) spread through the LGBTQIA+ community, and gay men were particularly at risk. Fear and a lack of education kept many from experiencing compassionate care, so local advocates banded together to provide everything from Human Immunodeficiency Virus (HIV) testing to hospice care.

PHNTX continues to center the LGBTQIA+ community in our work. We believe:

- Transgender and non-binary individuals and their families have a right to a private patient-provider relationship free from outside interference.
- Medical, mental, and behavioral health specialists have an ethical responsibility to provide care regardless of sexuality, gender identity, and/or expression.
- Non-discrimination ordinances that protect LGBTQIA+ Texans from discrimination in employment, housing, and public accommodations support whole health by eliminating barriers to basic needs.

In 2021, 123,117 Texans were living with HIV, with over 4,000 new diagnoses<sup>1</sup>. 19,412 people were living with HIV in Dallas, with 688 new diagnoses. 962 of every 100,000 people in Dallas County were living with HIV. 81.4% were male, 44.8% were between the age of 25-44, and 69.9% were Black or Hispanic<sup>2</sup>. People living with HIV continue to encounter stigma and a lack of education, along with funding and systems that are ill-equipped to reach the federal goal of ending the epidemic in the United States by the year 2030.

Prism Health North Texas has long been at the forefront of HIV care and will continue to advocate for affected individuals and communities. We believe:

- **HIV is not a crime.** Scientific advancements, effective medical care, and access to medications decrease the likelihood of transmitting the virus to almost zero. Yet people living with HIV continue to be stigmatized and viewed as criminals because of their status.
- **We need a stronger AIDS Drug Assistance Program (ADAP) or Texas HIV Medication Program (THMP).** Texas has some of the strictest eligibility requirements in the nation, only serving those at 125% of the Federal Poverty Level (FPL) or below. Medications covered under the program are limited, which fails to accommodate an aging population. In a state where Medicaid has failed to be expanded, people living with HIV are falling through the gaps.
- **Funding for HIV services must be protected.** The federal Ryan White program, which provides allocations for everything from medical care to wrap-around services like transportation solutions, has remained largely flat-funded for the past 15 years and feeds into our local systems. Over the past two years, we have fought to maintain our state funds, battled with private pharmaceutical programs who dramatically altered Patient Assistance Programs (PAPs), and educated stakeholders about the importance of the 340B Drug Pricing Program. **We need partnerships with legislative advocates and community leaders to ensure we can continue to provide care to the most vulnerable.**
- **The National HIV/AIDS Strategy and local Ending the HIV Epidemic plans are achievable if we all work together.** Hours and hours of thoughtful planning have gone into creating solutions that are custom-tailored to the needs of specific communities. We must stop creating additional barriers and commit to implementing the plans.

<sup>1</sup> AIDSvu - <https://aidsvu.org/local-data/united-states/south/texas/>

<sup>2</sup> AIDSvu - <https://aidsvu.org/local-data/united-states/south/texas/dallas/SVu>

## Anti-Discriminatory Reimbursement

Pharmacy Benefit Managers (PBMs) are a group of companies that serve as middlemen between insurance companies, pharmacies, and drug manufacturers. PBMs negotiate lower drug costs with pharmacies and drug manufacturers, and discounts are passed on to insurance companies. PBMs up-charge the drugs or retain a portion of the rebates for profit. PBMs give 340B covered entities lower reimbursement rates than non-covered entities, which is a discriminatory practice. In 2020, PBMs saw \$449 billion in global revenue, with that amount expected to hit \$735 billion by 2027<sup>4</sup>.

PBMs are a serious threat and often prioritize profits over patient care<sup>5</sup>. We believe:

- PBMs ultimately undermine and are contrary to the purpose of the 340B program, which is to allow covered entities to stretch resources to reach eligible vulnerable populations.
- When covered entities are not able to offset the costs of some treatments, patients are the ones who pay the price both monetarily and through lower positive health outcomes.
- PBMs lack transparency and are an unnecessary and costly barrier between patients and providers.

**Greater transparency of PBM profits and practices are necessary at the state and federal level.**

## Voter Registration, Education, & Mobilization

At PHNTX, we believe the right to vote is a cornerstone of our democracy. Everyone who is eligible to vote should be able to do so without barriers and confusion.

We are committed to:

- Collaborating with community partners to identify and register eligible voters throughout the year.
- Providing fact-based, non-partisan, healthcare policy education in the form of trainings, community town halls, and research into issues of concern.
- Following up with registered voters to help develop a plan for voting.

## Additional Priorities

Availability and access to care are best achieved when we consider everything that impacts the individual. PHNTX supports:

- Increased access to both medical and mental telehealth services, including reimbursement parity
- Increased access to broadband in underserved communities
- Criminal justice reform
- The individual right to make personal healthcare decisions
- Thoughtful, compassionate immigration reform
- The teaching of accurate history that considers an array of perspectives and experiences
- Black Lives Matter

Please contact **Januari Fox**, Director of Policy, Advocacy, and Community Engagement at **januari.fox@prismntx.org** with any questions.

<sup>3</sup> America's Health Rankings - [https://www.americashealthrankings.org/explore/annual/measure/Health\\_Status/state/TX](https://www.americashealthrankings.org/explore/annual/measure/Health_Status/state/TX) Health Status in Texas | 2021 Annual Report | AHR ([americashealthrankings.org](https://www.americashealthrankings.org))

<sup>4</sup> 360 Research Reports - <https://www.360researchreports.com/global-pharmacy-benefit-management-pbm-market-17667480>

<sup>5</sup> Ana Mulero, Proposed Aetna-Humana merger under Antitrust Regulatory Fire, HealthcareDIVE (March 21, 2016)

Leg. Ad. Januari Fox, Policy Dir. Prism Health North TX – [3900 Junius St, Ste 300, Dallas, TX 75246](#)