



April 17, 2018

Submitted via email to: [healthy@la.gov](mailto:healthy@la.gov)

Secretary Rebekah Gee  
Louisiana Department of Health  
Bureau of Health Services Financing  
Louisiana Medicaid  
628 N. 4th Street  
Baton Rouge, LA 70802  
Phone: (225) 342-9500  
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**Re: Paving the Way to a Healthier Louisiana: Advancing Medicaid Managed Care**

Dear Secretary Gee,

ViiV Healthcare appreciates the opportunity to submit comments to the Louisiana Department of Health (LDH) and its Bureau of Health Services Financing regarding the recently released “Paving the Way to a Healthier Louisiana: Advancing Medicaid Managed Care *Future Vision and Policy Considerations for Public Engagement*,” (the proposal). We applaud the improvements in health metrics the state achieved as a result of expansion enrollment in the managed care program, especially the increase in patient engagement in care and preventative care screenings (p.2).

ViiV Healthcare is the only pharmaceutical manufacturer devoted exclusively to supporting the needs of people living with or affected by HIV. From ViiV Healthcare’s inception in 2009, we have had a singular focus to improve the health and quality of life of people affected by this disease, and have worked to address significant gaps and unmet needs in HIV care. In collaboration with the HIV community, ViiV Healthcare remains committed to developing meaningful treatment advances, improving access to our HIV medicines, and supporting the HIV community to facilitate enhanced care and treatment.

We welcome the opportunity to provide suggestions and offer input that will help improve the health outcomes of people living with HIV (PLWH) through quality measures, in this third procurement cycle for the state’s Medicaid managed care program. ViiV Healthcare respectfully submits the following comments for consideration:

LDH’s “Triple Aim” guiding principle to pursue better care, better health, and lower costs, must account for the substantial population of PLWH in the state to achieve its goals. Because of this, we encourage the LDH to prioritize a focus on HIV within this procurement cycle plan.

Several states have prioritized HIV quality measures and currently collect HIV-related measures, including Delaware, New York, Florida, and Louisiana.

We applaud the state for its efforts to measure HIV viral load suppression in Louisiana. Starting in 2016, Medicaid managed care plans became responsible for helping individuals with HIV reach VLS. The state Medicaid managed care program, Bayou Health, includes HIV VLS as an incentive-based performance measure in its contracts. Managed Care Organizations (MCOs) have incorporated resources from the Office of Public Health’s (OPH) STD/HIV Program into disease management after the state added measures to their contracts. Due to innovative HIV care programs, viral suppression in Louisiana is at 50% of all people living with HIV. <sup>i</sup>

We hope that the state will expand upon this effort in this new procurement cycle by expanding the VLS measure to all MCOs, and including it in the contracts for all Accountable Care Organizations (ACO). Innovative advances in the treatment and prevention of the HIV virus have played a significant role in transforming HIV from what was once considered to be a terminal illness to, in many cases, a manageable, chronic disease.<sup>ii</sup> HIV performance measures are critical to the care and treatment of patients living with HIV and for reducing the incidence of new HIV infections. HIV measures, such as viral load suppression (VLS) and the use of HIV antiretroviral therapy, have been linked with improved overall health, quality of life, and survival, as well as decreased risk of HIV transmission.<sup>iii, iv</sup>

HIV quality measures are widely used evidence-based quality measures assessing HIV care derived from variety of health programs, including Pharmacy Quality Alliance (PQA), the National Quality Forum (NQF), Centers for Medicare and Medicaid Services (CMS) and HRSA HIV/AIDS Bureau, and several are used in federal programs, such as the Merit-based Incentive Payment System (MIPS), Medicaid Adult Core Set<sup>v</sup> and the Ryan White HIV/AIDS Program.<sup>vi,vii</sup>

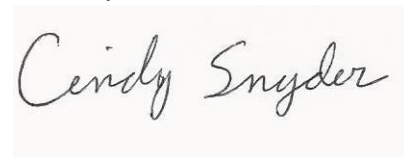
The Health Resources & Services Administration (HRSA)-owned VLS measure has been nationally vetted and reported. It is currently available for physician-level reporting in the Center for Medicare & Medicaid Services' (CMS) MIPS.<sup>viii</sup> Similarly, CMS and America's Health Insurance Plans (AHIP) included the VLS measure, along with other HIV measures, in their core measure set as a part of their broad Core Quality Measures Collaborative of health care system participants.<sup>ix</sup> The Core Quality Measures Collaborative (the Collaborative), led by AHIP and its member plans' Chief Medical Officers, leaders from CMS and the National Quality Forum, as well as national physician organizations, employers, consumers, and patient groups have consensus on these core measure sets as being meaningful to patients, consumers, and physicians, while reducing variability in measure selection, collection burden, and cost. This measures has proven to be valid for system and physician-level reporting at the federal and state levels.

Due to the importance of performance measures in improving population health at the national and state levels, we encourage LDH to prioritize a focus on HIV within its proposed "Advance Value-based Payment (VBP) and Delivery System Reform" requirements (p.9). Specifically, we highly recommend the Department continue to require MCOs to submit HIV-related data to LDH, and to incentivize them to meet VLS targets. We also recommend that ACOs have these same requirements. We believe this continued focus on HIV care in Medicaid will help to promote the state's efforts on population health as well.

We appreciate the state's consideration of these comments and applaud the state for its commitment to improving health outcomes for our most vulnerable patients. ViiV Healthcare looks forward to working with the LDH, and other stakeholders to ensure that Louisiana's public programs continue to ensure PLWH have access to quality care and to improve health outcomes.

Please feel free to contact me at (919) 323-9084 or [Cindy.C.Snyder@viivhealthcare.com](mailto:Cindy.C.Snyder@viivhealthcare.com) with any questions.

Sincerely,

A handwritten signature in cursive script that reads "Cindy Snyder". The signature is written in black ink on a light-colored background.

Cindy Snyder  
Community Government Relations Director  
ViiV Healthcare

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<sup>i</sup> Financing HIV Prevention Services. NASTAD. February 2016.

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<sup>ii</sup> Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV. Department of Health and Human Services.

<sup>iii</sup> Donnell D, et al., Heterosexual HIV-1 Transmission After Initiation of Antiretroviral Therapy: A Prospective Cohort Analysis, *Lancet* 2010;375:2092-98.

<sup>iv</sup> Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the use of antiretroviral agents in HIV-1-infected adults and adolescents. Department of Health and Human Services. Available at: <http://www.aidsinfo.nih.gov/ContentFiles/AdultandAdolescentGL.pdf>. Accessed March 20, 2017.

<sup>v</sup> Medicaid “[Adult Core Set](#)”

<sup>vi</sup> See: [Quality Measures](#), Quality Payment Program.

<sup>vii</sup> [Performance Measure Portfolio | HIV/AIDS Bureau](#). Assessed March 22, 2018

<sup>viii</sup> CMS, MIPS, Quality Measures <https://qpp.cms.gov/mips/quality-measures>

<sup>ix</sup> AHIP Consensus Core Set: HIV / Hep C Core Measures [https://www.ahip.org/wp-content/uploads/2016/02/Public\\_Consensus-HIV-Hep-C-Measure-List\\_FINAL.pdf](https://www.ahip.org/wp-content/uploads/2016/02/Public_Consensus-HIV-Hep-C-Measure-List_FINAL.pdf)