RECENTS ESTIMATES OF THE NUMBER OF MEDICARE INELIGIBLE PLHIV IN AUSTRALIA

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PLHIV in Australia are provided fully subsidised ARV treatment through the pharmaceutical benefits scheme highly specialised drugs (S100) program. Eligibility under this scheme requires people to be entitled to Medicare card, ie, Australian citizens and permanent residents. Temporary residents on various visa arrangements are not eligible for this scheme. Although living in Australia legally, they are not entitled to the same level of care as HIV positive permanent residents. Antiretroviral (ARV) access arrangements for Medicare ineligible (MI) PLHIV prior to Australian HIV Observational Database Temporary Residents Access Study (ATRAS), the first study to collect standardised information on this population, was primarily purchased online-overseas (and mostly generic ARVs). Since ATRAS, access to ARV for MI PLHIV has been through various funding arrangements by the states and territories and/or pharmaceutical company's compassionate programs. This variability generally means there is no equity of ARV access across Australia. Current access programs are also unsustainable. Should access to ARV unexpectedly change, there would be significant challenges to maintaining continuity of care, ultimately representing a risk to Australia's response. Since ATRAS there has been no ongoing standardised data collection on this population. The number of MI PLHIV in Australia broadly remains unknown. The aim of this paper is to present the best and most recent estimate of the number of MI PLHIV in Australia. It will also highlight the problems with the current access programs and will make recommendations for sustainable solutions to ARV access and care for MI PLHIV in

Australia.