Helping Insured Patients Estimate PrEP Costs

Nearly all insurance plans cover PrEP, but out-of-pocket costs vary. Your insurance plan can give you the most accurate estimate of your out-of-pocket costs. Call your plan and ask about your PrEP coverage.

Ask the following questions to get an accurate estimate:

✔ Ask for an estimate of the out-of-pocket costs for PrEP.

✔ Is Prior Authorization needed to see a specialist, such as an infectious disease physician? If so, how can I obtain Prior Authorization?

✔ Is my PrEP provider contracted with my insurance plan? Is my PrEP provider considered “in” or “out” of network? In-network providers will have lower out-of-pocket costs.

✔ What is the difference in copayment (copay) between a specialist visit and a primary care physician visit?

✔ What is my deductible for medical care and medications? How much of the deductible(s) have I met to date?

✔ Does my plan have an out-of-pocket maximum amount I have to pay in one year for medical care and medications? If so, what is this amount? How much have I spent to date?

✔ Will I have to pay any out-of-pocket costs for lab work?

✔ What is the monthly copay for Truvada?

There are patient assistance options that can greatly reduce or eliminate this out-of-pocket cost. Please see Getting Prepped by Project Inform for more information on these options.

If you have trouble with insurance coverage, contact local HIV advocates. Some national organizations can also provide assistance such as Lambda Legal (www.lambdalegal.org/help) and My PREP Experience (www.MyPrEPexperience.org).