



AID FOR AIDS

HIV is now a preventable and manageable chronic disease

Disease management of infectious diseases is complex and specialised. None more so than HIV. As a disease with far-reaching social, occupational and financial impacts it affects the member, employer and funder. A tailored service is typically required to manage HIV/AIDS. The solution should manage the inherent financial risk to funders and employers, while improving clinical and wellbeing

outcomes for members and employees. The majority of treatment-adherent patients who start anti-retroviral treatment (ART) at the appropriate time and receive optimal care can look forward to a near-normal lifespan.

AfA is the revolutionary integrated approach to HIV management that has been delivering excellence since 1998.

- **Average cost is high, about 2,6 times than non-HIV lives.**
- **Treatment costs can exceed contributions by over two fold.**
- **HIV+ individuals can account for up to 20% of total fund expenditure depending on prevalence.**

KEY BENEFITS

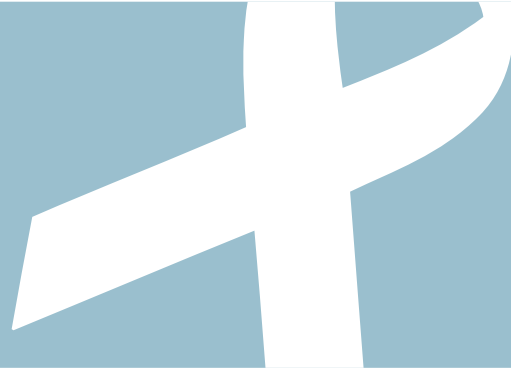
- We act as a care-coordinator between the funder, doctors, pathology labs, pharmacies and patients.
- Supported by a team of world respected clinicians in the field, we enable the optimal care of patients with an end to end solution.
- Backed by a custom IT system that has become the gold standard in HIV disease management.
- We empower funders to guard against the financial risk posed by unmanaged HIV in their employee or member populations.
- Shaped over years of clinical research and expertise, our methods are considered as the industry standard by healthcare professionals globally.
- Our programmes understand the needs of patients and equip them with the treatment and tools to lead normal, fulfilled lives.



World leading HIV care coordination, expert support and unrivalled disease management.

SAVING LIVES

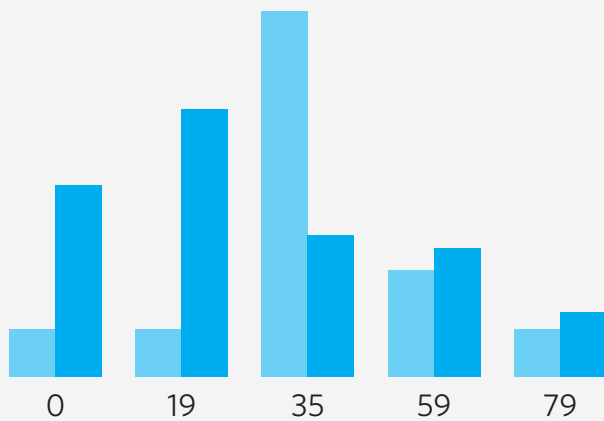
HIV is now a preventable and manageable chronic infection where individuals who receive ART at the appropriate time and who receive optimal care can look forward to a near normal lifespan.



THE PICTURE

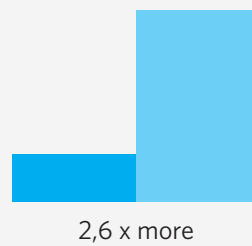
HIV positive

The young and working age percentage

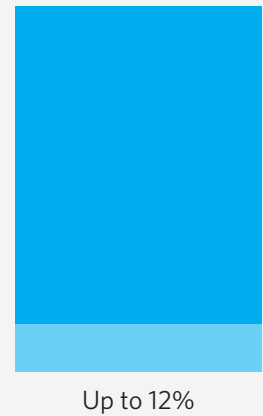


HIV negative

Average cost

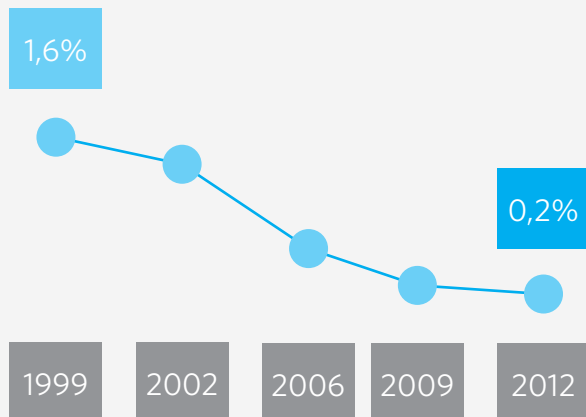


Specific HIV/Aids expenditure

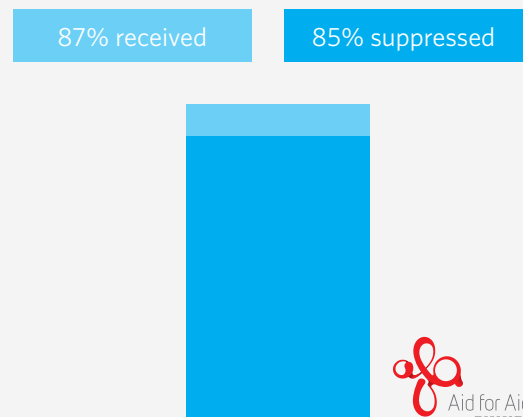


THE ACHIEVEMENTS

Improved prevention of mother to child HIV transmission



Viral load results recieved and % viral load suppressed after 10 years





01 Setup and consulting:

Prevalence assessment

Assess current HIV prevalence and project future trends in HIV prevalence within the group and estimate the current proportion of HIV infected employees or members who are likely to develop AIDS.

Design of HIV strategy

We engage with your whole organization to design a solution that fits your requirements and needs.

Workplace policies and procedures

We assist in designing and implementing appropriate policies that support your company ethos and promote the best interests of your employees and your business. Working collaboratively we draw from our database of templates to tailor a solution for you.

Fund management

You are assigned a designated fund manager to manage all aspects of your relationship with AfA and respond to all client queries.

Education and awareness programme:

- HIV/AIDS Awareness Programme
- HIV/AIDS Peer Education Programme
- HIV/AIDS Management, Supervisor and Union training (Line Manager Training)
- Wellness Champion Training
- HIV/AIDS Awareness presentation
- ARV Treatment Literacy Programme

KAP surveys (Knowledge, Attitudes and Practices)

The surveys are conducted anonymously to protect your employees' confidentiality. The results are then analysed and a report is generated which:

- Identifies trends among the group
- Highlights issues that need intervention
- Identifies areas that have been adequately addressed
- Provides solutions, recommendations and strategies to address the above issues and trends



02 HIV counseling and testing (HCT)

HCT is a critical entry point for HIV/AIDS prevention and interventions. Testing is no longer viewed merely as a diagnosis strategy, but is based on the individual's need to know their HIV status for the purpose of changing their behaviour. For HIV-negative individuals, HCT alleviates anxiety and increases awareness of their vulnerability to infection and hence the need for behavioural change. For HIV positive individuals, HCT is the start of a journey towards optimal holistic management of their disease.



03 Disease management technology platform

We offer a leading HIV disease management module (DMS), with clinical protocols based on international guidelines. This module ensures prompt payment of eligible pathology, medicine and consultation claims. The system allows for service providers to have strictly controlled online access.

In addition, it has the following features:

- PEP (post exposure prophylaxis) and mother to child transmission prevention;
- Automated receipt and capture of pathology results from accredited laboratories;
- Automated screening of results and risk stratification;
- Automated correspondence to the relevant parties, including sms/email/post.



04 Enrolment and case management

AfA provider network

AfA has extensive experience in setting up a network of providers who treat HIV and then enabling their further development through training and education. This means that patients are seen by experienced doctors with a good understanding of the disease.

Enrolment into disease management programme

AfA's aim is to enrol patients on the programme as soon as possible after diagnosis.

To facilitate enrolment AfA developed a 'pre-registration' process at the point of diagnosis where the individual's contact details are captured electronically to allow for systematic follow-up by experienced treatment support staff.

Healthcare provider support

We build strong relationships with our providers and offer them a process that provides day-to-day support in the care and management of their patients living with HIV/AIDS.

AfA clinical guidelines

Clear, evidence-based and comprehensive clinical guidelines while maintaining a degree of clinical flexibility. The AfA clinical guidelines are now in their ninth edition and are widely regarded as the benchmark by healthcare providers and academic institutions.

Electronic records

AfA maintains confidential electronic records for all registered patients. This includes a full history of interactions with healthcare providers, the patient and family members, pathology results and drug treatment regimens. This means that AfA can ensure continuity of care by being able to provide clinical history to new doctors where patients have either relocated or decided to change their doctor.

Pathology monitoring

AfA has a number of services which support the submission, storage and efficient review of patients' results. A high throughput electronic screening system identifies patients who are due for particular pathology tests and sends out appropriate reminders. The system is also able to identify tests which have been done, but results not submitted via assessment of claims data.



05 Compliance management

Stratification

AfA stratifies all members on a daily basis to assess the degree of viral load suppression in those on antiretroviral treatment. Members profiled in this way and shown not to have

a suppressed viral load are then flagged for attempted contact on a monthly basis. During this telephonic contact they receive intensive adherence counselling from treatment support staff. Monthly contact continues until the beneficiary's viral load is decreasing steadily and their claims history demonstrates adherence to treatment.

Trend reporting

AfA is able to integrate data concerning hospital admissions with claims data trends and chronic medication usage in order to further refine the risk stratification process. This allows for timely and appropriate focus on the individuals who need it the most.



06 Expert committee

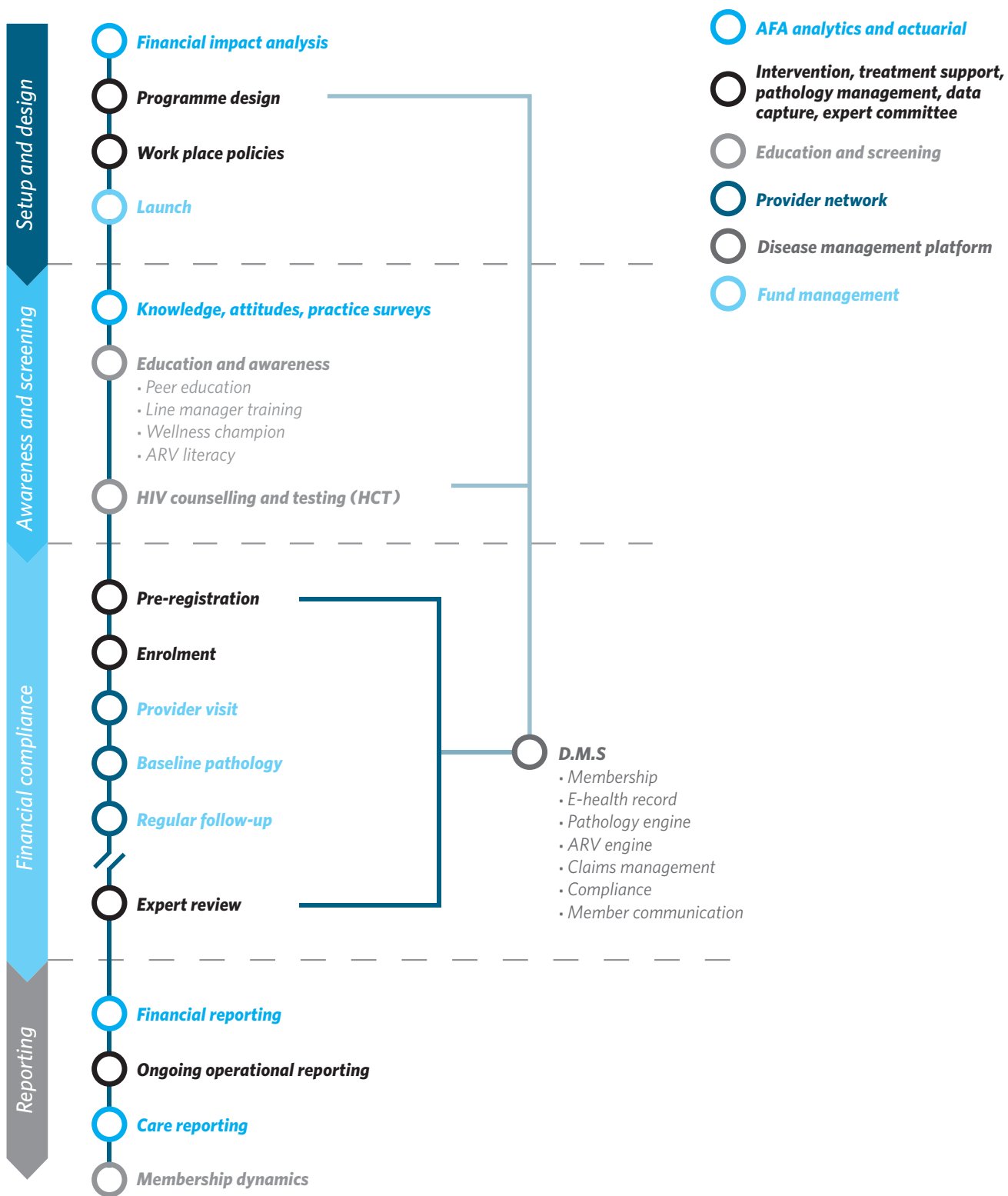
HIV management can become highly technical or controversial, requiring the input of an impartial, independent and respected peer review committee. AfA has a long established "hands-on" Clinical Advisory Committee comprising experienced and internationally acclaimed experts in the treatment of HIV and infectious diseases who meet weekly to review complex clinical cases and quarterly to review clinical policy.



07 Reporting

Clients must be able to determine the success of the programme as well as the financial impact on their organisation. This is vital in determining the feasibility of the programme in the long run and whether or not the care coordinator providing the management programme is successful. The data available on the DMS database enables the reporting of the following outcomes:

- Enrolment and demographics
- Prescription patterns
- Treatment costs based on authorisations and price file
- Treatment costs from claims data compared to authorised treatment costs
- Disease outcomes



Sustainable health care through cost risk management and outcomes improvement

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