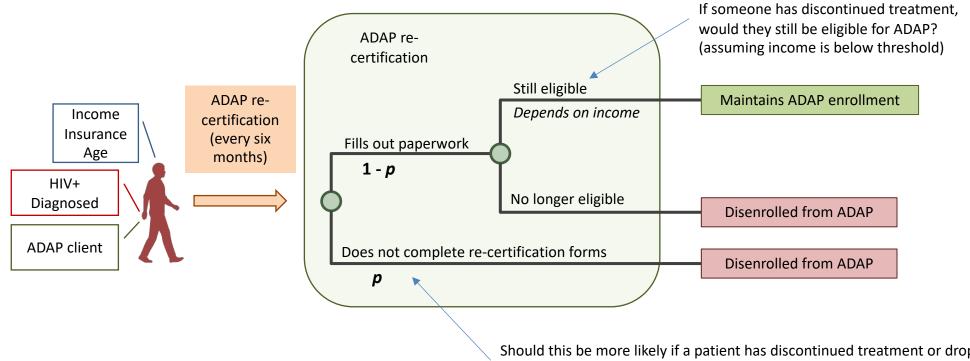


Insurance premium

ART out of pocket costs coverage

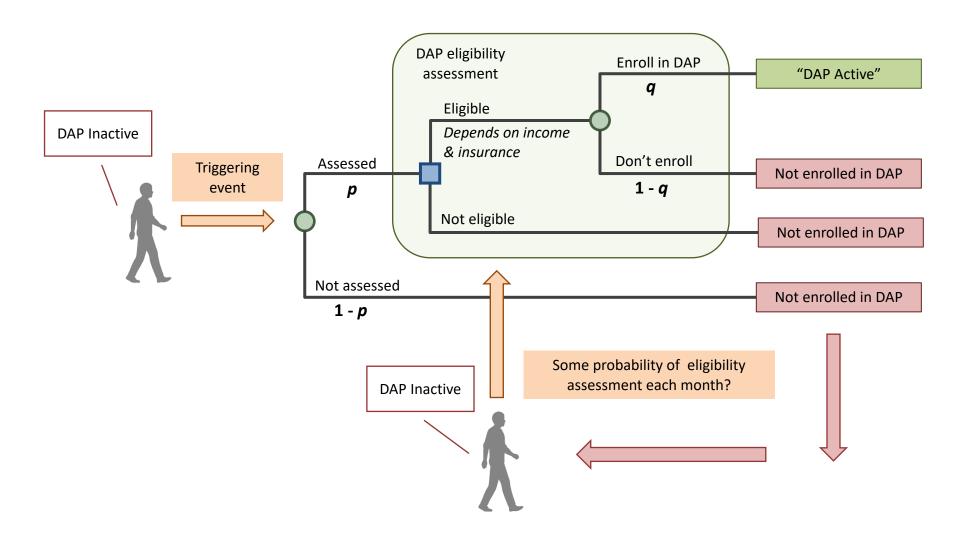
Healthcare out of pocket cost coverage (select services)

ADAP re-certification / disenrollment

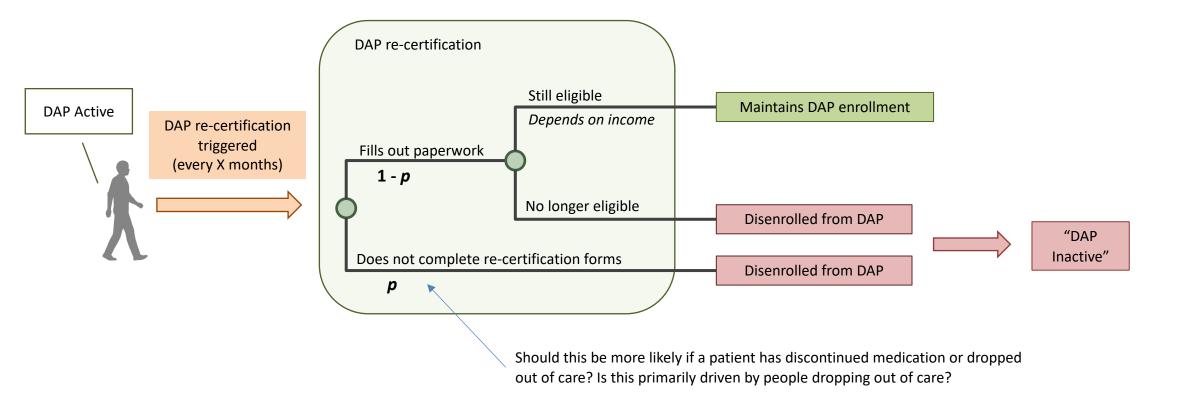


Should this be more likely if a patient has discontinued treatment or dropped out of care? Is this primarily driven by people dropping out of care?

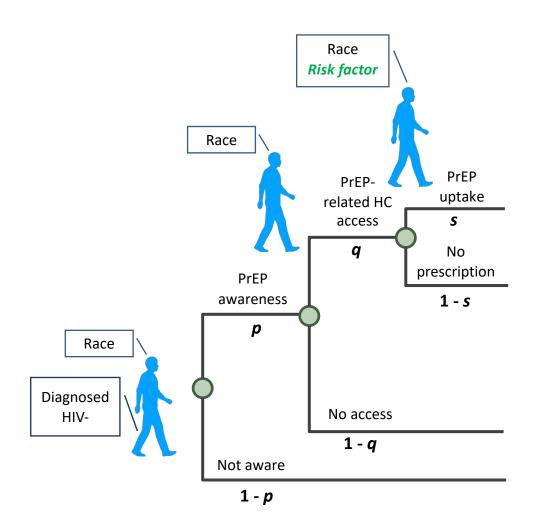
Generic enrollment



Generic disenrollment



Current care continuum



Without PrEP-DAP

With PrEP-DAP

