Unanticipated Impact of Financial Incentives on HIV Patients and Providers: Findings from a Qualitative Sub-study (HPTN 065)

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BACKGROUND

The HPTN 065 (TLC-Plus) study assessed the feasibility and effectiveness of providing quarterly $70 financial incentives (FI) in the form of gift cards to HIV-infected patients on antiretroviral therapy (ART) who were able to achieve or maintain viral suppression (VS). VS was defined as HIV RNA<400 copies/mL.

Nineteen participating sites in the Bronx, NY (BNY) and Washington, DC (DC) were randomized to the FI intervention and 20 sites were randomized to standard of care (SOC). A total of 38,393 FI gift cards were dispensed to patients with VS over 2 years at 2 FI intervention sites. This qualitative sub-study was conducted for the purpose of exploring individual patient, provider and staff attitudes and experiences with the FI intervention. This sub-study complements the parent study, which will analyze the efficacy of the FI intervention using aggregate site-level data.

METHODS

The following qualitative data were collected by trained interviewers from diverse demographic backgrounds:

- Semi-structured in-depth interviews with 75 patients (aged 14-72) from 14 sites randomized to the FI intervention (all patients received at least 1 FI)
- Key informant interviews with 12 site investigators (SIs) (6 BNY, 6 DC) from 15 sites randomized to the FI intervention
- Three focus group discussions (FGDs) (2 BNY, 1 DC) with 12 site staff members representing 10 sites randomized to the FI intervention

Interviews were conducted in English, audio-recorded and transcribed. Transcripts were edited for themes and analyzed using NVivo 12.0. Sub-themes were extracted and examined to determine the effect of the FI on attitudes other than adherence.

RESULTS

TABLE 1 outlines the characteristics of the patients interviewed. Demographic data were not collected for SIs and staff.

<table>
<thead>
<tr>
<th>Patient Characteristics</th>
<th>Total (n)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td>Total (n)</td>
<td>Percentage</td>
</tr>
<tr>
<td>Bronx</td>
<td>31</td>
<td>41%</td>
</tr>
<tr>
<td>DC</td>
<td>44</td>
<td>59%</td>
</tr>
<tr>
<td>Female</td>
<td>26</td>
<td>33%</td>
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<tr>
<td>Male</td>
<td>47</td>
<td>63%</td>
</tr>
<tr>
<td>Age</td>
<td>2-22</td>
<td>3%</td>
</tr>
<tr>
<td>&gt;22</td>
<td>57</td>
<td>75%</td>
</tr>
<tr>
<td>Education</td>
<td>High School (HS)</td>
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<tr>
<td>&lt;HS/General Education</td>
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<td>37%</td>
</tr>
<tr>
<td>Never Formal School</td>
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<td>22%</td>
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<tr>
<td>White</td>
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<td>63%</td>
</tr>
<tr>
<td>Black</td>
<td>31</td>
<td>31%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>17</td>
<td>13%</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>58</td>
<td>58%</td>
</tr>
</tbody>
</table>

ENGAGEMENT IN CARE

The FI intervention was designed to be integrated into standard HIV clinical care schedules, which often include quarterly blood draws to monitor CD4 and viral load (VL). Patients could qualify to receive an FI as frequently as every 3 months. While the FI was intended to incentivize a return to viral suppression through medication adherence, the ability to receive the FI on a quarterly basis served to incentivize engagement in HIV care. During the FI intervention, patients, site investigators (SIs) and staff reported improved visit attendance, better patient-provider relationships, and increased opportunities for general preventive care.


USES OF FINANCIAL INCENTIVE

Many patients reported that the $70 FI was a real financial need, or provided a supplement to an otherwise limited income. Some SIs and staff also recognized that the FI was financially beneficial to many of their patients.

- It helped me pay for my medicine. Then I got a few personal things that females should have. Not to go into detial… It [helped] also buy little groceries… buy some eggs and stuff like that. — Patient, non-Hispanic black female, 50 years old, DC
- About 80 percent of my patients live below the federal poverty line and [the gift cards] meant a lot to them. I saw it over and over again about how the money helped them meet real needs that they had and that they looked forward to this incentive. — Site Investigator-01, BNY

While the financial aspect of the intervention also contributed to motivations for staff who distributed the FI. These staff reported frustrations with patients who thought they entitled to the gift card (i.e., they felt they deserved it rather than earned, the gift card), and reported that some patients even became aggressive.

EMOTIONAL EFFECTS

During the intervention, many patients reported feeling cared for by staff and proud of themselves for earning the FI. SIs and staff found it difficult doing something as simple and positive for their patients, especially when patients notoriously appreciated it. These feelings were often as closely related to the act of giving and receiving the FI, as it was unknown whether the FI was effective in encouraging viral suppression.

- Yes, it made me feel important with myself instead of being depressed with HIV. I bought a present for myself…. Yes, [the FI helped me] feel cheerful. You're happy. — Patient, non-Hispanic female, 50 years old, NY

While most patients and SIs described the increased patient engagement in care as a benefit, a few SIs and many staff who maintained day-to-day operations for the FI intervention also noted that it posed logistical challenges. Especially at the beginning of the intervention, some clinics changed in clinic flow and had difficulty managing the influx of patients.

In terms of operations, there was already bottleneck[ at the reception desk] and the [intervention] probably contributed to it. — Patient Investigator-01, BNY

- It probably the biggest challenge, what I heard everyone talk about, was the number of patients we had to keep track of. Like making sure everyone had the gift card, if they were eligible for a gift card. — Site Investigator-01, BNY

CONCLUSION

While the efficacy of a $70 FI to increase viral suppression in HPTN 065 remains to be evaluated, the findings of this qualitative analysis indicate that the use of FI in clinical settings can affect both patients and providers in ways beyond what the FI intervention intended.

- While some effects were, at least transiently, negative (challenging logistics of managing client flow and handing out the gift cards), most of the additional findings were positive, with the potential to improve HIV care and overall patient health.
- In general, patients were more engaged in care, and many reported a real financial benefit from the $70 gift card.
- A positive emotional impact was also reported by the patients, SIs, and staff who indicated that it felt good to either give or receive the gift card, with some noting that the provider-patient bond was strengthened.
- An evaluation of the value and effectiveness of FI interventions should take into consideration these broader effects.

Additional findings from this sub-study are presented in the following three publications:


ACKNOWLEDGEMENTS

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For more information, or to view HPTN 065 (TLC-Plus) presentations, visit www.HPTN.org

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