

California State Office of AIDS

**Report to San Francisco EMA HIV Health Services Planning Council
June 2015**

Office of AIDS (OA) Division/Cross Branch Issues

- The Governor's Revised Budget was released on May 14, 2015. There are two new major AIDS Drug Assistance Program (ADAP) policy changes included in the revised budget.
 - The ADAP May Estimate proposes expanding access to hepatitis C virus (HCV) medications to include all HCV co-infected ADAP clients, regardless of liver disease stage. This policy is in alignment with the federal Health and Human Services guidelines for treating HCV co-infection among HIV-infected persons and the revised Department of Veteran Affairs' HCV clinical guidelines, which recommend that all HIV/HCV co-infected patients be treated. The Governor's Budget also proposes expanding access to HCV medications to include all HCV/HIV co-infected Medi-Cal beneficiaries.

OA, in collaboration with the ADAP Medical Advisory Committee (MAC), has updated the previously approved medical access criteria for HCV treatment (for simeprevir and sofosbuvir) to prioritize the use of ombitasvir/paritaprevir/ritonavir tablets with dasabuvir tablets (marketed as Viekira Pak™), due to the lower cost, among eligible patients when the regimen is equally effective and no medical contraindications to its use exist. Transition to providing treatment for all co-infected ADAP clients is projected to occur in FY 2015-16. OA will continue to work with the ADAP MAC to assure appropriate medical access.

- The ADAP May Estimate proposes that in FY 2015-16 OA reallocate \$1.5 million in Ryan White (RW) base funding currently allocated in ADAP to local health jurisdictions and/or community-based organizations to support targeted efforts to re-engage HIV-positive minority clients in medical care and treatment. This funding shift is consistent with the President's HIV Care Continuum Initiative and the National HIV/AIDS Strategy goals to improve linkage to and retention in HIV care and treatment services and to improve HIV related health disparities.

The Senate and Assembly budget committees voted to approve the ADAP May Revision, including the policy changes noted above. They also voted to approve the funding for expanding HCV treatment in Medi-Cal. In addition, they voted to approve funding augmentation for a number of proposals which were not

included in the Governor's budget proposal but were proposals put forth to the legislature by HIV and/or HCV advocates:

- ADAP Eligibility Modernization: Changing ADAP's income eligibility threshold from \$50,000 adjusted gross income to 500% Federal Poverty Level based on Modified Adjusted Gross Income.
- \$3 million in federal & rebate funds to support ADAP/OA-HIPP enrollment workers at the local and state level.
- \$3 million in General Fund to establish a State Syringe Exchange Clearinghouse.

Additional votes on budget augmentations originating from advocate proposals to the legislature:

- The Assembly Budget Subcommittee voted to approve \$3 million General Fund for PrEP activities.
- The Senate Budget Subcommittee voted to approve \$2.2 million General Fund for PrEP activities, \$600,000 in General Fund for HCV Rapid Test Kits, and \$2.2 million in General Fund for HCV linkage and retention in care demonstration projects.

Once the budget is finalized by the legislature and signed by the Governor, OA will provide an update on the Enacted Budget.

- The *Clinical Quality Management Plan for the HIV Care Program and AIDS Drug Assistance Program* has been approved and posted on the OA website. The plan is a "living" document, designed to be modified and updated as part of OA's continuous quality improvement process. It is effective April 2015, and will be reviewed and revised annually thereafter. The plan is located on the OA website at www.cdph.ca.gov/programs/aids/Pages/OAHCP.aspx.

RW Part B: ADAP

- ADAP Management Memo 2015-08, dated April 16, 2015, was distributed to the Local ADAP Coordinators and ADAP Enrollment Workers (EW) to provide them with the new 2015 Medi-Cal Expansion qualifying federal poverty levels.
- ADAP Management Memo 2015-09, dated May 6, 2015, was distributed to the EWs to provide guidance for disclosure of confidential ADAP client information. EWs cannot share/release any ADAP client information, except as authorized by law. EWs may share only the minimum necessary as authorized by law. OA created tables and flowcharts that outline the purposes for which EWs at an ADAP Enrollment Site that is a Health Care Provider, Public Health Department,

and/or a Community Based Organization (non-medical provider) can share ADAP client information. These confidentiality tables and charts are located on OA's website at www.cdph.ca.gov/programs/aids/Pages/tOAADAP.aspx, under Quick Links and also attached with the management memo which is linked below.

- ADAP Management Memo 2015-10, dated May 14, 2015, was distributed to the Local ADAP Coordinators and EWs to inform them of the addition of two hepatitis C drugs [(ledipasvir/sofosbuvir (Harvoni®) and ombitasvir, paritaprevir, and ritonavir tablets; dasabuvir tablets (Viekira Pak™)] that were added to the ADAP Formulary.

ADAP Management Memos are located on the OA website at www.cdph.ca.gov/programs/aids/Pages/OAADAPMM.aspx.

HIV Prevention

Contracts were finalized for the three grantees (Los Angeles LGBT Center, San Diego County, and San Francisco AIDS Foundation) awarded funding for HIV Prevention Demonstration Projects established by Senate Bill 870. The Demonstration Projects focus on innovative, evidence-based approaches to provide outreach, HIV and hepatitis C screenings, and linkage and retention in care for underserved persons at high risk for HIV. On June 9, 2015, OA will host a kickoff meeting in Sacramento for grantees and OA staff involved in project implementation and evaluation.

If you have additional questions, please contact: liz.hall@cdph.ca.gov.