California Department of Public Health, Office of AIDS
Monthly Report
August 2017

Ryan White (RW) Part B: AIDS Drug Assistance Program (ADAP)

- **ADAP Client Eligibility**
  The California Department of Public Health (CDPH), Office of AIDS (OA) extended eligibility to July 31 for clients whose birthday or half-birthday is in July. Enrollment workers have been reminded to reach out to their clients whose birthday or half-birthday is in July to re-enroll and recertify them in a timely manner, so their eligibility is extended to their next recertification or re-enrollment date.

- **Emergency Medication Access**
  - Enrollment workers have been reminded that ADAP clients who do not have access to ADAP medications and are at risk for an interruption in treatment should contact the ADAP Call Center at (844) 421-7050, 8:00 a.m. - 5:00 p.m., Monday through Friday (excluding state holidays). They may also contact the Magellan Call Center at (800) 424-5906, 24 hours a day, seven days a week.

  - Effective July 19, ADAP staff and Magellan Call Center staff are able to change clients' eligibility dates via an Emergency Access Process. Clients whose eligibility has lapsed (in the last 30 days) due to not re-enrolling or re-certifying will be granted a one-time Emergency Access approval.

    Clients whose eligibility has been expired for more than 30 days, who were dis-enrolled from ADAP due to not meeting ADAP eligibility requirements (i.e. exceeded the income criteria, moved out of state, etc.), or who have an expired Temporary Access Period (TAP) will not be granted emergency access.

- **ADAP Enrollment System**
  The ADAP Enrollment System is being developed in stages, with releases of features and improvements every four weeks to support eligibility management, system navigation, data exchange, reporting, quality assurance, and data security. ADAP continues to coordinate each release with training and outreach to ensure enrollment workers and other users are aware of changes and can correctly use any new features.

- **ADAP Enrollment Worker System Onboarding**
  As of August 8, 99 percent of ADAP enrollment workers have completed the required WebEx system training, 96 percent have completed the eLearning course, and 87 percent have logged in to the system.

RW Part B: HIV Care Program

- The OA, HIV Care Branch will conduct the *Building the Care Continuum: Comprehensive Approaches to HIV Care in California* statewide meeting on August 28-30, 2017, in Los Angeles. This meeting is for OA's HIV Care Program (HCP), Minority AIDS Initiative (MAI), and Housing Opportunities for People Living With AIDS (HOPWA) program contractors and subcontractors, by invite only. At this meeting, contractors will learn about (and prepare for) the changing federal landscape with respect to the Affordable Care Act, future of HIV programs, share best practices that can realistically be replicated, determine how to implement California's *Laying a Foundation for Getting to Zero* Plan, and learn HCP basics.

- OA is planning to update the HCP, MAI, and HOPWA allocation formulas, which will be completed by July 2018 and implemented in fiscal year 2019-2020. To assist in this process, OA will convene a Stakeholder Engagement Group (SEG) that will provide valuable input to OA as the formulas are updated. The SEG will consist of approximately 10 members that represent the California Planning Group, the California Sexually Transmitted Disease/HIV Controllers Association, and HCP, MAI, and HOPWA contractors. An email invitation was sent out to these stakeholders on July 31st, with a deadline of August 18th to respond with an expression of interest in participating. Questions about the SEG can be sent to Liz Hall at liz.hall@cdph.ca.gov.

AIDS Medi-Cal Waiver Program (MCWP)

The Budget Act of 2017 (Assembly Bill 120 Section 3, Provision 3) included an allocation increase of up to $4,000,000 General Fund ($8,000,000 Total Fund) for MCWP provider payments. The full text of Assembly Bill 120 can be found on the California Legislative Information website at
http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201720180AB120

The OA and the Department of Health Care Services (DHCS), Long Term Care Division held a conference call on Friday, July 28, 2017, at 10:00 a.m. to discuss MCWP provider payments pursuant to Assembly Bill 120 that appropriates Proposition 56 funds for specified DHCS expenditures for supplemental payments.

DHCS has proposed to increase payments for select HIV/AIDS Waiver services. The increased payments, subject to Federal approval, would work as follows:

Providers who are eligible to provide and bill for the following Current Procedural Terminology (CPT) codes under the HIV/AIDS Waiver will receive an increased payment, in order to bring their payment total to the amount identified.

Procedure Code	Service	Total Payment Amount
G0299	Skilled Nursing (RN)	$19.27
G0300	Skilled Nursing (LVN)	$13.97
90837	Psychotherapy (Hr)	$98.02
G0156	Attendant Care	$9.52
S5130	Homemaker	$7.07
T2003	Non-Emergency Medical Transportation (Month)	$100.00
S9470	Nutritional Counseling (Hr)	$63.61
T2022	Case Management	$363.23
T2025	Admin	$246.91
Payment for codes G0299, G0300, S5130 and G0156 are reflected, as billed, in 15 min. time increments.		

DHCS is seeking federal approval of a Waiver Amendment. DHCS estimates that the total increased payments made for services in Fiscal Year 2017-18 under this proposal will total approximately $8M total funds ($4M proposition 56). These payments will occur once the systems necessary to implement these payments are in place, with proposed effective date of July 1, 2017 (subject to federal approval).

HIV Prevention

In June, the Centers for Disease Control and Prevention (CDC) announced the availability of fiscal year 2018 funds for a cooperative agreement for health departments to implement an integrated HIV surveillance and prevention program. The purpose of this funding opportunity announcement (FOA) is to implement a comprehensive HIV surveillance and prevention program to prevent new HIV infections and achieve viral suppression among persons living with HIV. OA will be applying for PS18-1802 Component A and B funding. The FOA can be found on the CDC website at www.cdc.gov/hiv/funding/announcements/ps18-1802/index.html.

Surveillance, Research, and Evaluation

- Enhanced HIV surveillance data sets are now available to all local health jurisdictions who have a current data use agreement on file. These new data sets have been modified to include ALL of the cases currently living in the local health jurisdiction (LHJ), and will enable the more effective use of surveillance data for accomplishing our Getting to Zero goals. Previously only cases for which the LHJ had "ownership" [as defined by the Enhanced HIV/AIDS Reporting System (eHARS) database] were available. Besides more complete case inclusion, these data sets have been enhanced with more accurate and complete address information gleaned from all available eHARS documentation. These data sets will be uploaded to each LHJ's Secure File Transfer (SFT) quarterly, replacing the previous Data Use Agreement (DUA) data sets. The Q2 data which was uploaded in early July included these enhancements.

- In early August, LHJ-level continuums containing final 2015 information were released to all LHJs via SFT. These continuums are identical to the 2014 continuums released for the first time last year, and contain detailed information about newly diagnosed and living cases by multiple factors, including race/ethnicity, age, risk, and other factors. Because of the multiple crosstabs included, they should be treated as confidential, potentially identifiable data. Continuums containing *preliminary* 2016 data were also released to Ryan White Part A primary grantees via SFT. Note that these contain preliminary data and are only intended to be used for Ryan White applications. Finally, OA will soon release a streamlined continuum document containing continuum information for all LHJs using a letter masking scheme. LHJs will be informed of which letter identifies their information, and will be able to compare it to information of other, similarly-sized LHJs.

California Planning Group (CPG)

The CPG will have an in-person meeting on October 17-19, 2017, in Anaheim. The meeting is open to the public and there will be an opportunity for public comment. Information about the meeting and the public comment opportunity will be available on the OA website at www.cdph.ca.gov/Programs/CID/DOA/Pages/OAmain.aspx#.

For questions regarding this report, please contact: michael.foster@cdph.ca.gov.