Laying a Foundation for Getting to Zero: California’s Integrated HIV Surveillance, Prevention and Care Plan

On January 11, 2017, the California Needs Assessment and Integrated Plan Workgroup met to resume work on the needs assessment. Discussion centered on the Partner Services Brief, which was circulated for feedback to California Planning Group and the Coauthors for sharing with their local planning councils. The California Department of Public Health (CDPH), Office of AIDS (OA) plans to gather all the feedback by February 1, 2017, and enter the next phase of revisions. The Workgroup welcomed a new member--Vicky Ramirez--from the San Jose Transitional Grant Area, reviewed the status of the remaining briefs and reaffirmed state and local roles in supporting the data-driven elements of the briefs.

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

- Contractor Update
  - The highest priority activity now at the OA and within CDPH is supporting ADAP enrollment workers and clients to insure that eligible clients have uninterrupted access to medications and health insurance assistance while at the same time addressing systems issues with the ADAP enrollment portal. Many OA and CDPH Information Technology managers and staff, as well as CDPH Executive Staff, are regularly working over 10 hours a day and on weekends to address these issues, and have been for months. We are committed to ensuring that our clients have the services that they need.
  - The ADAP enrollment portal is available to a few enrollment workers who are testing the system with access via a secure Citrix connection set up by OA. OA will contact enrollment workers with more information and instructions on how to access the portal once it becomes available. The portal is available to ADAP Advisors, A.J. Boggs Customer Support Team (CST), and Magellan call center staff.
  - The Magellan call center is able to provide real-time, 24/7 access to a 30-day supply of medications for existing ADAP clients who experience access issues at the pharmacy. The A.J. Boggs CST also has access to the Magellan system and is able to make real-time eligibility updates.
• **Eligibility Extensions**
  
  o Since the portal became unavailable, OA has taken proactive measures to ensure that clients have access to ADAP prescriptions. As of early February, no active clients should have eligibility that expires before July 1, 2017.

  o Even though clients’ eligibility has been extended, enrollment workers must continue to meet with clients to conduct the re-enrollment or recertification process to ensure that clients are still eligible for ADAP. This is a requirement of ADAP’s federal funder, written in federal Ryan White legislation. The application and supplemental documentation must be stored in the client’s physical file at the enrollment site for audit purposes.

• **A.J. Boggs Customer Support Team (CST)**

ADAP will continue to monitor the call center to ensure wait times for clients and enrollment workers are kept to a minimum. On a daily basis, OA continues to test A.J. Boggs fax capacity to ensure information is successfully transmitted. Enrollment workers are encouraged to contact their ADAP Advisor if they have difficulties reaching the A.J. Boggs CST or submitting faxes. An ADAP Advisor list is available on the OA website at [www.cdph.ca.gov/programs/aids/Documents/ADAPStaffLHJAssignments.pdf](http://www.cdph.ca.gov/programs/aids/Documents/ADAPStaffLHJAssignments.pdf).

• **AIDS Medi-Cal Waiver Program (MCWP)**

  MCWP and Department of Health Care Services staff continue to respond to Centers for Medicare and Medicaid Services (CMS) questions regarding the 2017 – 2021 AIDS Waiver Renewal Application. An extension of the 2012 – 2016 Waiver has been granted by CMS through March 1, 2017. Until the new application is approved, the policies and procedures of the 2012 – 2016 Waiver will remain in effect.

  The release of All Project Director’s Letter 16-03 on December 30, 2016, has prompted several AIDS Waiver agencies to request additional guidance on the new service hierarchy format in ARIES. The MCWP in collaboration with the OA Surveillance, Research, and Evaluation Branch is developing a training module to present at the next Project Director Teleconference scheduled for February 8, 2017.

  MCWP Program Advisors have finalized the 2017 Program Compliance Review (PCR) site visit schedule. All Waiver Agencies scheduled for a PCR in 2017 have been notified, and Project Directors will be contacted a month prior to their site visit with further instructions.
HIV Prevention

- OA posted on its website the results of a data analysis OA presented at the National Harm Reduction Conference in San Diego in November. The poster presents information from a demonstration project established to develop innovative HIV/HCV prevention programs, including purchasing syringe exchange supplies for California Syringe Exchange Programs (SEPs). The poster is available on the OA website (under the “Data” heading) at [www.cdph.ca.gov/programs/aids/Pages/AccessToSterileSyringes.aspx](http://www.cdph.ca.gov/programs/aids/Pages/AccessToSterileSyringes.aspx). SEP directors completed an application with questions about their legal authority to operate, annual budget and number of clients served, among other questions. Data were compared to previously published studies. Among the notable findings: the number of SEPs statewide has remained relatively stable since 2002. However, there has been a substantial increase in the percentage of SEPs that have explicit local government authorization to operate (2002: 40%; 2015: 97%). Volume of syringes exchanged has increased since 2002, while average annual SEP budget decreased by three percent (2002: $186,065; 2015: $179,745). However, the change in average annual SEP budget, in inflation-adjusted dollars, represents a 25 percent decrease.

Neither 2002 nor 2015 data represented the full census of SEPs in California and some programs indicated they did not routinely collect all of the data points in the survey. However, the results provide an overview of trends within the SEP network - including greater local control over decreasing budgets within the context of increased client need. Program data on participating SEPs will continue to be collected over the span of the project.

- The Kings County Public Health Department has applied to CDPH/OA to authorize a new syringe exchange program. The proposed Kings County Needle Exchange will have fixed site locations in Hanford, Lemoore, Corcoran, and Avenal health clinics. The Kings County Board of Supervisors voted to endorse the application.

The 90-day public comment period for the Kings County SEP certification application closed on January 29. CDPH has 30 business days to review the public comment and application and issue a decision by March 13, 2017.

California Planning Group (CPG)

- Applications for the CPG are currently being reviewed. Final decisions are expected by the end of February, in which all applicants will be notified. Questions about CPG can be sent to [cpg@cdph.ca.gov](mailto:cpg@cdph.ca.gov).
• An in-person CPG meeting is scheduled for April 4-6, 2017, in Sacramento. This will be the first meeting of the new CPG membership. 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 posted on the OA website at www.cdph.ca.gov/programs/aids/Pages/OACPG.aspx, at least 30 days prior to the meeting.

For questions regarding this report, please contact: liz.hall@cdph.ca.gov.