

***California Department of Public Health, Office of AIDS
Report to San Francisco HIV Community Planning Council
September 2016***

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

- California’s Integrated HIV Surveillance, Prevention, and Care Plan and the California Needs Assessment for HIV are due to the Health Resources and Services Administration (HRSA) and the Centers for Disease Control and Prevention (CDC) on September 30, 2016. August included a lot of work by many staff, planning group members, and stakeholders on both documents as input received from stakeholders was incorporated. Another All Part A tele-meeting was held in August to share progress from each of the Part A planning groups submitting plans. OA plans to release updated drafts of both documents in September.
- Letters of concurrence or support are being requested from each of the Part A Planning Councils as well as their AIDS Directors or Public Health Officers.

Office of AIDS Division/Cross Branch Issues

- On September 6, 2016, OA received notification from CDC that OA’s request for a “Determination of Need” to use federal funds to support syringe services programs was approved. CDC agreed with OA’s conclusion that California is at risk for increases in HIV and/or HCV among people who inject drugs, and noted that the evidence OA presented makes “a compelling case.”

The response to the Determination of Need affects not just OA and OA-funded jurisdictions, but all of California and all California agencies funded by Substance Abuse and Mental Health Services Administration (SAMHSA), HRSA or CDC. For the first time since the congressional ban on funding Syringe Exchange Programs (SEPs) was instituted more than 20 years ago, federally-funded agencies that serve injection drug users in California will have the option to include syringe services. These services have been repeatedly demonstrated to prevent HIV, link people to drug treatment and medical care and, as one program participant said, “this is the only place I’ve ever been treated with dignity.”

There are additional steps involved for community based organization (CBOs), clinics and health departments who are interested in funding SEPs or adding

syringe services to their existing services for people who inject drugs. The following resources are available:

1. Background information is provided on the CDC website at www.cdc.gov/hiv/risk/ssps.html.
2. Information that outlines how a jurisdiction can work with their CDC, HRSA, or SAMSHA project officers to use federal funds from each agency funds for SSPs (each agency has different rules) is available at www.aids.gov/federal-resources/policies/syringe-services-programs/.
3. CDPH point of contact on this topic: Alessandra Ross, Injection Drug Use Specialist at alessandra.ross@cdph.ca.gov.

Additional updates will be included in the next OA Update Report, and information specific to OA-funded Prevention and Care providers will be forthcoming from OA. The original request for Determination of Need as well as the response letter from CDC are available on OA's website at www.cdph.ca.gov/programs/aids/Pages/AccessstoSterileSyringes.aspx, under "Quick Links."

- In August, several OA staff attended the 2016 National Ryan White Conference on HIV Care and Treatment in Washington D.C. Two OA staff presented along with local partners, to share some of the work California is doing around HIV care and prevention to meet the goals of the National HIV/AIDS Strategy. Presentations included the following:
 - Kama Brockmann, PhD., LCSW, from OA's HIV Prevention Branch and Lauren Brookshire, MSW, MPH, Assistant Medical Services Administrator – County of San Diego, presented a session titled "Using Early Intervention Services to Maximize Coordination Between HIV Surveillance and HIV Care".
 - Liz Hall, Health Program Specialist, HIV Care Branch, Tamarra Jones, PhD., Program Manager, Orange County Health Care Agency, HIV Planning and Coordination, and Juan Garcia, Program Director, Clinica Sierra Vista, Kern Lifeline Project, presented on a panel in a session titled "Housing as Health Care: Improving Health Outcomes Through Mobile Care and Housing Support Services".

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

- ADAP has been working diligently with the new Enrollment Benefits Manager (EBM) contractor to develop a work plan to resolve issues in a timely manner, while working with enrollment workers and stakeholders to address transition issues and challenges as they arise. As a result of stakeholder feedback, OA has

significantly increased communications with ADAP enrollment workers and other stakeholders and increased training opportunities for enrollment workers.

Additionally, ADAP has been working closely with the EBM contractor to identify, prioritize, and fix functionality issues within the new enrollment portal. The following enrollment portal functionality was implemented on August 7, 2016:

- Data from the most recent approved application is now pulled forward when a new application is created.
- Modified Adjusted Gross Income (MAGI) and Federal Poverty Level are automatically calculated based on entered income information in the Income tab.
- Printing PDF versions of applications is faster and now only shows filled data.
- System performance improvements such as search speed and application navigation have been updated.

The enrollment portal functionality implemented on September 2, 2016, includes:

- An application update form.
- A Self-Verification Form (SVF) with no client changes and SVF with client changes form.
- An application that can be created and submitted the by Enrollment Worker on behalf of the client.
- User Administrative improvements such as:
 - Adding the social security number and date of birth search features to the User Admin System (UAS) screen.
 - Replacing the User ID with Client ID in the UAS screen.
- The availability for statewide client lookup.
- Combining records for duplicate client accounts.

Enrollment Worker training was provided to preview the new portal functionality on:

- Thursday August 25, 2106, from 2 – 4 p.m.
- Friday August 26, 2016, from 10 a.m. – noon.
- Tuesday August 30, 2016, from 9 – 11 a.m.

An ADAP calendar with training dates is available on the OA website at www.cdph.ca.gov/programs/aids/Documents/ADAPCalendar2016.pdf.

- ADAP Management Memo 2016-16 was released that announced effective August 16, 2016, elbasvir 50 mg/grazoprevir 100 mg (Zepatier™), has been added to the ADAP formulary. This new fix-dose combination drug received

federal Food and Drug Administration approval on January 28, 2016, for treatment of hepatitis C (HCV) infected patients with genotypes 1 or 4.

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

RW Part B: HIV Care Program

- On August 18 and 19, 2016, the Care Program Section hosted a webinar with the HIV Care Program (HCP) and Minority AIDS Initiative (MAI) contractors to discuss the Ryan White Supplement Grant and other mid-year re-allocations. OA has been awarded \$18.7 million in Ryan White Supplemental Grant funds: \$10 million for ADAP and \$8.7 million for HCP. The program year runs from September 30, 2016, to September 29, 2017. The webinar discussed the process for requesting funds and how the funds can be utilized.
- Beginning in late August, Care Advisors will be conducting site visits of all 42 HCP contractors. The visits will occur between August and February. They will be monitoring for the period April 1, 2015 through March 31, 2016.

Housing Opportunities for Persons with AIDS (HOPWA)

- On July 22, 2016, OA was notified that the U.S. Department of Housing and Urban Development approved State of California's Annual Action Plan and awarded \$2,599,853 to OA's HOPWA Program for FY 2016.
- On August 12, 2016, the Care Housing Unit submitted the preliminary Consolidated Annual Performance and Evaluation Report (CAPER) to the California Housing and Community Development (HCD) Department. HOPWA formula grantees, such as OA, submit the CAPER which provides annual information on program accomplishments that supports program evaluation and the ability to measure program beneficiary outcomes as related to: maintain housing stability; prevent homelessness; and improve access to care and support. The CAPER will be available for public comment September 1st through 15th on the HCD website at www.hcd.ca.gov/housing-policy-development/housing-resource-center/reports/fed/.

AIDS Medi-Cal Waiver Program (MCWP)

- The 2017 – 2021 AIDS Waiver Renewal Application (Application) is currently under review at the Department of Health Care Services (DHCS). Once approved, the DHCS Long Term Care Division will submit the Application by September 30th to the federal Centers for Medicare and Medicaid Services.

(CMS) for review and approval. The current 2012 – 2016 Waiver is set to expire December 31st of this year.

- MCWP staff are currently processing amendments to the 22 MCWP agency contracts. The amendments will extend the agency contracts by one year and will be executed by December 31, 2016.

Surveillance, Research, and Evaluation

The Care Research and Evaluation Section deployed a new version of AIDS Regional Information and Evaluation System (ARIES) (R33) in early August. This release includes improvements to the Outreach Services Module, a new report to identify duplicate clients, and more. More details are available in the August 2016 edition of *The ARIES Advisor* available on the OA website at www.cdph.ca.gov/programs/aids/Pages/OAARIESNewsletters.aspx.

California Planning Group (CPG)

- OA is currently accepting applications for its next CPG membership term that will begin in March 2017. OA is reaching out to recruit members that represent the diversity of HIV-positive populations, providers and stakeholders in HIV prevention and care, and representatives of services and organizations engaged with identifying the social and structural determinants of HIV-related health. Applicants can either apply as a Nominated Member or At-Large (Community/Stakeholder) Member and have the option of applying for a 3-year or 5-year membership term. The application deadline is close of business on September 30, 2016. Additional information is available on the OA website at www.cdph.ca.gov/programs/aids/Pages/OACPGNewMember.aspx.
- The CPG will have an in-person meeting on October 11-13, 2016, in Los Angeles. 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/aids/Pages/OACPG.aspx.

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