Strategy A: Improve Pre-Exposure Prophylaxis (PrEP) Utilization

Pre-Exposure Prophylaxis Assistance Program (PrEP-AP)

- On June 27, 10 enrollment sites received their go-live date of July 2, to begin enrolling uninsured and insured clients into the PrEP-AP.

- As of July 17, there are 144 PrEP-AP enrollment sites.

- As of July 17, OA has executed 22 contracts covering a total of 35 clinics who currently make up the PrEP-AP Provider Network:

<table>
<thead>
<tr>
<th>Clinical Provider Name</th>
<th>County</th>
<th># of clinics on contract</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care at Home, Inc.</td>
<td>Alameda</td>
<td>1</td>
</tr>
<tr>
<td>East Bay AIDS Center (EBAC)</td>
<td>Alameda</td>
<td>1</td>
</tr>
<tr>
<td>AIDS Healthcare Foundation</td>
<td>Alameda and San Francisco</td>
<td>2</td>
</tr>
<tr>
<td>Clinicas de Salud del Pueblo</td>
<td>Imperial</td>
<td>4</td>
</tr>
<tr>
<td>Kern County Department of Public Health</td>
<td>Kern</td>
<td>1</td>
</tr>
<tr>
<td>Los Angeles LGBT Center</td>
<td>Los Angeles</td>
<td>1</td>
</tr>
<tr>
<td>Dignity Health - St. Mary's Medical Center</td>
<td>Los Angeles</td>
<td>1</td>
</tr>
<tr>
<td>APLA Health &amp; Wellness - Baldwin Hills</td>
<td>Los Angeles</td>
<td>2</td>
</tr>
<tr>
<td>Watts Healthcare Corporation</td>
<td>Los Angeles</td>
<td>1</td>
</tr>
<tr>
<td>St. John Well Child and Family Center</td>
<td>Los Angeles</td>
<td>1</td>
</tr>
<tr>
<td>East Valley Community Health Center</td>
<td>Los Angeles</td>
<td>2</td>
</tr>
<tr>
<td>JWHC Institute, Inc. - East Hollywood</td>
<td>Los Angeles</td>
<td>1</td>
</tr>
<tr>
<td>Vista Community Clinic</td>
<td>Oceanside</td>
<td>1</td>
</tr>
<tr>
<td>Desert AIDS Project, Inc.</td>
<td>Riverside</td>
<td>1</td>
</tr>
<tr>
<td>One Community Health</td>
<td>Sacramento</td>
<td>1</td>
</tr>
<tr>
<td>San Ysidro Health</td>
<td>San Diego</td>
<td>2</td>
</tr>
</tbody>
</table>
**Strategy E: Improve Retention in Care**

Access, Adherence, and Navigation Program

- As of July 11, Access and Adherence Navigators have reached out to 678 ADAP clients to enroll them into comprehensive health coverage, ADAP’s insurance assistance programs and/or provide resources to help ADAP clients achieve and maintain viral suppression.

- On June 22 and July 16, eight Navigators received the Access, Adherence, and Navigation Program policy and ADAP Enrollment System (AES) training.

**Strategy F: Improve Overall Quality of HIV-Related Care**

- OA continues to collaborate with the Department of Healthcare Services (DHCS) on an analysis of viral suppression by managed care plan. Once the analysis is completed by OA in consultation with DHCS medical informatics staff, OA will work with the DHCS Chief Medical Officer, Dr. Karen Mark, to develop a process for quality improvement activities. OA is also exploring conducting further analyses of these data by age group, risk category, and jurisdiction to further identify health inequities. OA and DHCS will collaborate on a developing a distribution plan for future analyses. (Also aligns with Strategies M and N)

- The HIV Care Program (HCP) has launched a quality improvement initiative focused on viral suppression in young adults 18-24 years old. HCP is in the process of identifying contractors that will participate in the initiative. Selected contractors will have access to individualized Quality Improvement (QI) coaching through calls with QI experts and an in-person workshop.

- In May 2018, the federal Food and Drug Administration (FDA) released a drug safety communication about the risk of neural tube defects in pregnant women taking dolutegravir. OA has initiated a process to identify female ADAP clients of childbearing age who are currently taking dolutegravir, and will follow-up with medical providers and patients to ensure that they are aware of this risk. The FDA statement is available on the FDA website at [www.fda.gov/Drugs/DrugSafety/ucm608112.htm](http://www.fda.gov/Drugs/DrugSafety/ucm608112.htm).
Strategy J: Increase Rates of Insurance/Benefits Coverage for PLWH or on PrEP

ADAP’s Insurance Assistance Programs
To increase the rates of insurance coverage for people living with HIV (PLWH), ADAP offers several insurance assistance programs that assist in paying insurance premiums and outpatient medical out-of-pocket costs for eligible ADAP clients:

- Employer Based Health Insurance Premium Payment (EB-HIPP) Program
  - New and existing ADAP clients who are currently enrolled in an employer-based health insurance premium plan may receive premium assistance for the client’s (employee’s) portion of their employer-based insurance premiums, if eligible.

- Medicare Part D Premium Payment (MDPP) Program
  - The MDPP Program pays monthly Medicare Part D premiums or Medigap premiums for eligible ADAP clients.

- Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program
  - The OA-HIPP Program pays monthly health insurance premiums for eligible ADAP clients.

- Clients enrolled in an ADAP insurance assistance program are eligible for the medical out-of-pocket benefit, which pays a client’s out-of-pocket costs for outpatient visits up to a client’s annual out-of-pocket maximum.

PrEP-AP
- For uninsured and insured clients, the PrEP-AP will pay for approved PrEP-related medical out-of-pocket costs.

- Uninsured clients are required to see a contracted provider in the PrEP-AP Provider Network to receive assistance with PrEP-related medical out-of-pocket costs.

Strategy K: Increase and Improve HIV Prevention and Support Services for People Who Use Drugs
- Upcoming Conference: Tools and Strategies for Rural Opioid Work
  On August 28-29, 2018, the Plumas County Public Health Agency will host a regional conference addressing a range of issues related to opioid use in rural northern California counties. In particular, the conference will focus on building regional capacity for harm reduction strategies for people who use drugs in order to prevent infectious disease transmission, link marginalized people to
healthcare, and reduce stigma and discrimination. Registration is free and a limited number of scholarships are available to support travel and local accommodation. Additional information and registration is available at www.eventbrite.com/e/tools-and-strategies-for-rural-opioid-work-tickets-46727701814.

• Expanding Syringe Access Services
Two new syringe exchange programs were authorized by CDPH, OA in July.
   o The Orange County Needle Exchange Program (OCNEP) was authorized to provide mobile syringe services in four cities in Orange County effective August 6, 2018 through August 6, 2020. OCNEP was previously authorized to operate in Santa Ana but had to shut down in January 2018 after the City of Santa Ana passed an ordinance requiring an operating permit, which was denied to OCNEP. They re-applied for authorization in March as a mobile syringe exchange, and are now re-authorized.

   o The Community Outreach Harm Reduction Team (COHRT) was authorized to provide syringe services in Alameda County effective August 8, 2018 through August 8, 2020. COHRT is part of Punks with Lunch, a “guerilla not-for-profit harm reduction outreach organization” that has been providing free healthy lunches, hygiene kits, and harm reduction materials since 2015 to people experiencing homelessness in West Oakland.

With these new authorizations and the recent authorization of programs in Merced and Plumas counties, California now has 45 authorized syringe exchange programs, the most of any state. In addition, CDPH, OA is currently reviewing proposals for new or expanded syringe services programs in Humboldt and Sacramento counties, and CDPH, OA staff are providing technical assistance on the subject to local health departments and community-based organizations in more than 15 other jurisdictions around the state. The proposals under review and open for public comment are available on the OA website at www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_secpapp.aspx.

More information about the harm reduction programs supported by OA is available on the OA website, including:
   − Syringe exchange
     www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_sep.aspx
   − Non-prescription pharmacy syringe sales
     www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_prev_npss.aspx
For those who would like support for developing syringe services or other harm reduction programs, please contact OA’s Matt Curtis at matt.curtis@cdph.ca.gov or 510-545-9033.

**Strategy M: Improve Usability of Collected Data**

Internal trainings on the Integrated Plan Baseline report are being conducted with each branch within OA. A webinar for local health jurisdictions Surveillance, Prevention, and Care Coordinators will be presented multiple times, as well as be recorded for access on demand, in September.

**Strategy N: Enhance Collaborations and Community Involvement**

OA has joined the Center for Quality Improvement and Innovation Project ECHO, a collaborative to focus on quality improvement among groups of PLWH with substantial health disparities. OA is part of the California Regional Group and is working with Ryan White Part A and C recipients to build a improve cross-agency collaborations around quality improvement for PLWH. (Also aligns with Strategy F)

**General OA Updates**

- The HIV Care Branch conducted a two-day training for HCP contractors on July 31 – August 1, in Northern California, and will conduct another two-day training on August 14 – 15, in Southern California. The training will discuss changes coming to the HCP, including the Standards of Care and a financial eligibility requirement. OA will provide an overview of these changes, discuss implementation, and answer questions during the training.

- On August 28, the ADAP Branch in collaboration with the HIV Care Branch will conduct an informational webinar for HCP, Minority AIDS Initiative (MAI), Housing Opportunities for Persons With AIDS (HOPWA), and Medi-Cal Waiver Program (MCWP) contractors. The webinar will provide an overview of ADAP services available and allow for questions. For questions or more information, please contact Liz Hall at liz.hall@cdph.ca.gov.

- Effective July 16, Dr. Marisa Ramos was appointed Interim Chief of the Office of AIDS. Dr. Ramos has 25 years of extensive experience in public health program management, administration, epidemiology, surveillance, and the protection of vulnerable populations. Dr. Ramos joined CDPH 11 years ago as Chief of the Office of Refugee Health. Most recently, Dr. Ramos has been serving as the Acting Chief of the Surveillance, Research & Evaluation Branch in OA. Prior to coming to CDPH, Dr. Ramos was an Adjunct Professor of Biology at the University of California (UC), Davis, where she currently serves as a volunteer Professor of Public Health. Dr. Ramos completed both Masters and Doctoral
programs at the University of California, Davis. In addition, Juliana Grant, M.D. and Heidi Bauer, M.D. have kindly agreed to work side by side with Dr. Ramos providing clinical and technical support. Mr. Brian Lew will continue to serve as Assistant Chief of OA providing overall administrative and management support.

- Effective July 17, Dr. Deanna Sykes was appointed Acting Chief of the Surveillance and Prevention Evaluation and Reporting (SPER) Branch. Dr. Sykes received her Ph.D. and M.S. in Psychology from UC Davis in 1997. In 1998, Deanna was hired by OA as a Research Scientist I in the Prevention Research and Evaluation Section. In the intervening 20 years, Deanna has led several key projects, including operations research related to the field implementation of rapid HIV testing, the development of the Local Evaluation Online System (LEO), and the original Comprehensive Plan for prevention, which was one of the first to operationalize key objectives for local health jurisdictions using metrics from LEO. Deanna is currently the Chief of the Surveillance Section.

- Effective July 17, Ann Nakamura was appointed Acting Chief of the ADAP and Care Evaluation and Informatics (ACEI) Branch. Ann has 20 years of experience in public health, serving in lead roles in research, evaluation, surveillance, and informatics with many of those years spent in leadership roles in OA. Most recently, Ann has served as a Research Scientist Supervisor for ACEI’s new ADAP Fiscal Forecasting, Evaluation, and Monitoring (AFFEM) Section. Prior to taking a position with CDPH, Ann worked for the AIDS Health Foundation, coordinated multidisciplinary child and fetal death review for Sacramento County, and served as an adjunct professor of mathematics for Vincennes University. Ann holds a Master’s degree in Public Health from Emory University with a focus in epidemiology.

- Effective July 18, Brian Lew was appointed Acting Chief of the HIV Prevention Branch. Since 2006, Brian Lew has worked at OA where he is the Assistant Division Chief. Brian has also served as the Chief of the HIV Prevention Branch (2009-2012), Counseling Testing & Training and HIV Prevention Policy & Program Development Sections (2006-2009) at OA. Brian currently oversees the day-to-day operations of the Division with oversight over fiscal, policy/legislation and operational activities. Before coming to OA, Brian spent 19 years at the Victim’s Compensation Board focusing on mental health related projects. Brian has a Master’s degree in Clinical Psychology

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