

This newsletter is organized to align the updates with Strategies from the *Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan* (Integrated Plan). The [Integrated Plan](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final.pdf) is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final.pdf.

General Office Updates:

2019 begins the third year of the five-year California Integrated HIV Surveillance, Prevention and Care Plan. During this year, progress on each of the twelve objectives will be reviewed for years one and two, and the plan will be reviewed and revised to ensure it remains aligned and coordinated with the National HIV/AIDS Strategy for the United States: Updated to 2020, the proposed Department of Health and Human Services "Ending the HIV Epidemic: A Plan for America" and the California Ending the Epidemics Consensus Document. The process of reviewing and revising the plan will include a workgroup comprised of CDPH staff and external stakeholders, and community input will be sought through a variety of methods to ensure providing input is accessible to all. For questions regarding this process, please contact Kevin.Sitter@cdph.ca.gov.

Staff Highlight:



OA is pleased to announce that Prevention Program Advisor, Keshia Lynch has been selected to be a recipient for NASTAD's Minority Leadership Program, 2019 cohort. She has spent the last 5 years educating, advocating, and caring for people living with, or at risk of HIV at both the state and local level. Her experience in HIV care began at Madera County Public Health Department, where she provided direct patient care and led the AIDS program for Madera County. In her current role, she is a Program Advisor with Office of AIDS, Prevention Branch, where she monitors numerous state and federally funded contracts. Keshia's background in direct patient care and passion for serving the community, has led her to a number of volunteer opportunities and mentoring roles for children and adults living with HIV.

Keshia's ultimate goal is to eliminate health disparities and promote racial and health equity, especially for those from minority groups. We are confident that the skills Keshia will obtain through her experience with NASTAD will not just aid in her personal career trajectories, but will make her a strong leader and asset to our OA team as we move forward with Getting to Zero.

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

HIV Prevention Branch:

The February Monthly Prevention Branch & Prevention Evaluation and Monitoring Section Stakeholder Call included an OA presentation and discussion by OA's HIV Prevention Branch Transgender Health Specialist, Tiffany Woods, on transwoman and PrEP. She presented new data on substantial gaps in the PrEP continuum among transwomen compared with MSM in San Francisco, as recently presented in Madrid, October 2018 at the HIVR4P HIV Research for Prevention conference. The study conducted in San Francisco with 368 transwomen engaged in the PrEP continuum addresses several

guidance strategies and activities that LHJ's may also be experiencing with transwomen and the need to include in PrEP strategies such as PrEP awareness, PrEP navigation, PrEP adherence, use of data to identify and re-engage transwoman in PrEP in care, and adherence counseling. OA hopes that the presentation, study and their findings will inform LHJ's PrEP expansion efforts for transwoman. For a copy, e-mail: angelique.skinner@cdph.ca.gov.

PrEP Assistance Program (PrEP-AP):

As of February 15, there are 151 PrEP-AP enrollment sites covering 63 clinics that currently make up the PrEP-AP Provider Network. As of February 26, there are 1,303 clients enrolled in the PrEP-AP.

Clinical Provider Name	County	Number of Clinics on Contract
AIDS Healthcare Foundation	Alameda and San Francisco	2
Lifelong Medical Care	Alameda	2
Alameda Health System - Highland Hospital	Alameda	1
Asian Health Services	Alameda	1
East Bay AIDS Center (EBAC)	Alameda	1
Primary Care at Home, Inc.	Alameda	1
Clinicas de Salud del Pueblo	Imperial	4
Kern County Department of Public Health	Kern	1
Banj Health Center, Inc.	Los Angeles	4
Children Hospital Los Angeles	Los Angeles	1
Saban Community Clinic	Los Angeles	1
Planned Parenthood	Los Angeles	4
El Proyecto del Barrio, Inc. - Esperanza Clinic	Los Angeles	1
City of Long Beach	Los Angeles	1
Men's Health Foundation	Los Angeles	1
Tarzana Treatment Centers, Inc.	Los Angeles	1
Bartz-Altadonna Community Health Center	Los Angeles	1
Northeast Valley Health Corporation	Los Angeles	1
JWHC Institute, Inc.	Los Angeles	1
East Valley Community Health Center	Los Angeles	2
St. John Well Child and Family Center	Los Angeles	1
Los Angeles LGBT Center	Los Angeles	1

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Clinical Provider Name	County	Number of Clinics on Contract
Watts Healthcare Corporation	Los Angeles	1
APLA Health & Wellness	Los Angeles	3
Dignity Health - St. Mary's Medical Center	Los Angeles	1
Vista Community Clinic	Los Angeles and Orange	2
Desert AIDS Project, Inc.	Riverside	1
One Community Health	Sacramento	1
Regents UC San Diego Medical Center	San Diego	1
Vista Community Clinic	San Diego	1
San Ysidro Health	San Diego	2
Asian & Pacific Islander Wellness	San Francisco	1
HealthRIGHT360	San Francisco	4
UCSF 360 Positive Care	San Francisco	1
San Francisco AIDS Foundation	San Francisco	1
Community Action Partners	San Luis Obispo	2
County of San Luis Obispo Public Health Department	San Luis Obispo	2
Santa Rosa Community Health	Sonoma	1
West County Health Centers	Sonoma	4

As of March 4, 2019, there were 1,335 individuals with active PrEP-AP enrollment.

Clients with Active Enrollment in PrEP-AP - March 4, 2019																		
Current Age	Latinx		White		Black/ African American		Asian		American Indian/ Alaska Native		Native Hawaiian/ Pacific Islander		More than one race reported		Unknown/ Unreported		Grand Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
18-24	*	*	32	2%	9	1%	20	1%	*	*	*	*	*	*	*	*	100	7%
25-34	291	22%	234	18%	50	4%	75	6%	*	*	*	*	*	*	16	1%	672	50%
35-44	202	15%	119	9%	17	1%	30	2%	*	*	*	*	*	*	*	*	381	29%
45-64	72	5%	63	5%	*	*	*	*	*	*	*	*	*	*	*	*	150	11%
65+	*	*	28	2%	*	*	*	*	*	*	*	*	*	*	*	*	32	2%
Total	604	45%	476	36%	83	6%	131	10%	3	0%	6	0%	7	1%	25	2%	1,335	100%

Source: ADAP Enrollment System
 * Censoring applied to protect cells containing fewer than 10 enrollments.

Strategy G: Improve Availability of HIV Care

OA submitted the Housing Opportunities for Persons with AIDS Program (HOPWA) Annual Plan to the State Department of Housing and Community Development (HCD) on January 28, 2019. The annual plan is HCD’s application for Housing and Urban Development’s (HUD) Community Planning and Development funds and describes the intended use of federal funds administered by the State for various housing programs, including HOPWA. HCD will solicit public comment from March 22 through April 21, 2019. For [information on public comment](#), go to www.hcd.ca.gov and look under What’s New. HCD will submit the final annual plan to HUD on May 13, 2019.

Strategy H: Improve Integration of HIV Services with Sexually Transmitted Disease (STD), Tuberculosis, Dental, and Other Services

In February, a “Dear Colleague” letter recommending extragenital (three-site) testing for STD screenings was issued jointly by Dr. Philip Peters, Medical Officer for the Office of AIDS and Dr. Eric Tang, Medical Officer for the STD Control Branch. When urine-only STD screening is conducted, up to 90% of rectal gonorrhea and 77% of rectal chlamydia infections are missed. Three-site testing can be incorporated easily into clinic flow, including

the use of patient self-collected samples and development of standing orders for screening. The [letter](#) is posted at: www.cdph.ca.gov/Programs/CID/DCDC/Pages/STDs-ClinicalGuidelines.aspx.

Strategy J: Increase Rates of Insurance/Benefits Coverage for PLWH or on PrEP

AIDS Drug Assistance Program (ADAP) Insurance Assistance Programs:

As of February 26, the number of ADAP clients enrolled in each respective ADAP Insurance Assistance Program are shown in the chart below.

Strategy K: Increase and Improve HIV Prevention and Support Services for People Who Use Drugs

In addition to addressing HIV and HCV prevention, the Office of AIDS also collaborates within CDPH and with other state agencies to address opioid and other health issues for people who use drugs. Much of the work of the Harm Reduction Unit focuses on expansion of syringe services programs (SSPs), which not only provide sterile injection equipment to reduce infectious disease transmission, but serve as drug user health hubs providing a range of other services. These include overdose prevention education and naloxone access, linkage or direct

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from January
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	432	+15%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	4,591	+5%
Medicare Part D Premium Payment (MDPP) Program	1,637	+3%
Total	6,660	+5%

provision of physical and mental health care and substance use disorder treatment, and a variety of social services. CDPH/OA regularly collaborates in this work with CDPH/Office of Viral Hepatitis Prevention, Safe and Active Communities Branch, Sexually Transmitted Disease (STD) Control Branch, and the Department of Health Care Services (DHCS).

Harm Reduction Unit activities have included:

- Authorized existing SSPs in Eureka and Sacramento to expand services to a total of eight additional communities in Humboldt and Sacramento counties through mobile outreach programs.
- Provided technical assistance to Siskiyou County Public Health Department in preparing their application for authorization of mobile syringe services. CDPH will issue a final decision regarding authorization in March 2019. Another SSP application, from ALM Mission of Clearlake (Lake County) proposes an outreach-based program serving homeless individuals and is currently under review.
- CDPH/OA is currently providing technical assistance to 12 local health jurisdictions where local providers are developing new SSPs for authorization by CDPH.
- A new analysis of the California Syringe Exchange Supplies Clearinghouse, which provides material support to more than 40 SSPs, found that in its first two years following its launch in 2015, it contributed to several changes. There was an almost 50% increase

in the number of people served by each program and a 147% increase in naloxone distributed. There was a 77% increase in the availability of on-site HIV testing and a 233% increase in HCV testing. SSPs continued to report that a lack of funding for staffing and infrastructure was a major barrier to program operations and stability.

- Provided technical assistance to SSPs to access the DHCS Naloxone Distribution Project, which launched on October 1, 2018. In the first month of the program, 37 SSPs applied for more than 54,000 doses, representing roughly one-quarter of the volume distributed by California SSPs in 2017.
- Provided assistance to medical and pharmacy staff at California Correctional Health Care Services as they explore avenues to expand naloxone access to inmates in correctional facilities.
- Provided assistance to several state and local health departments around the country that were seeking to replicate CDPH/OA's support for access to fentanyl test strips, which allow people at risk of fentanyl exposure to test drug samples before ingestion and take safety precautions as a result. Several other state health departments have begun funding purchase and distribution of the test strips, including those in New Jersey, North Carolina, Washington, Denver, New York City, and Philadelphia.

For questions regarding this newsletter, please contact: angelique.skinner@cdph.ca.gov.