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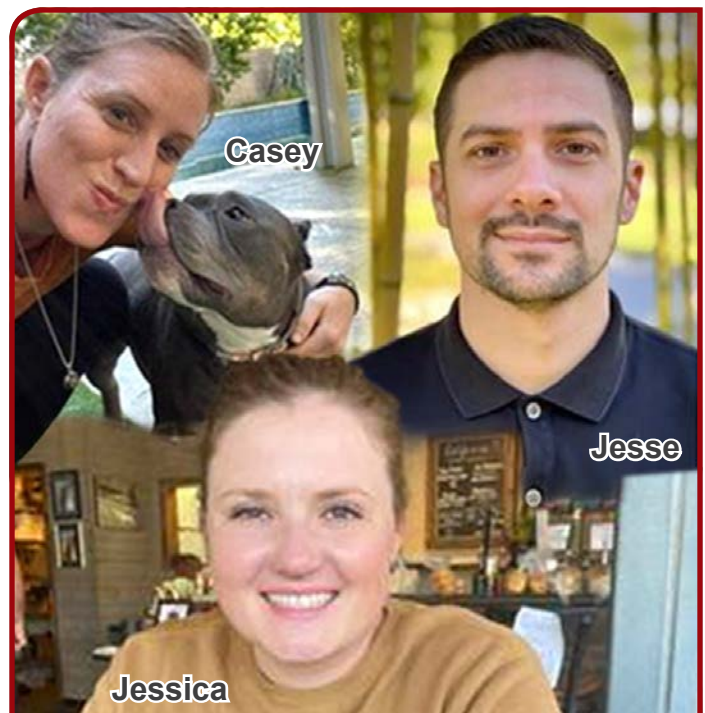
This newsletter is organized to align the updates with Strategies from the ***Laying a Foundation for Getting to Zero: California's Integrated HIV Surveillance, Prevention, and Care Plan*** (Integrated Plan). The [Integrated Plan](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf) is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf.

Staff Highlight:

Jessica Snow, Jesse Vigil, and Casey Triggs joined the OA Care Branch Operations Unit as an Associate Governmental Program Analysts. In their roles as Program Advisors, they will work with local health jurisdictions and community-based organizations that receive Ryan White Part B funding. They will be responsible for overseeing contractual and programmatic compliance of the RWPB grant and provide technical assistance to improve programmatic strategies for subrecipients to provide HIV Care services to people living with HIV/AIDS.

Jessica Snow comes to OA from the Department of Food and Agriculture. In that position she managed federal agreements between the USDA and multiple counties within California to reduce and eliminate the introduction of harmful plants and plant pests into California. Jessica earned her bachelor's degree in Kinesiology from the University of Jamestown and has recently completed her MPH in Health Policy Leadership from the University of San Francisco. Outside of work Jessica loves all outdoor activities including mountain biking, camping, and hiking. She also enjoys coffee, traveling, listening to live music, playing with her pup, and spending time with friends and family.

Jesse Vigil has been working with the State since August 2020 and comes from the



California Workforce Development Board, where he served as a Program Analyst. Jesse provided project/grant management services for grantees who assisted underrepresented populations with various workforce development projects. Prior to his employment with the state, Jesse worked at Sacramento City College, where he assisted military veterans and their dependents with educational benefit enrollment. Jesse is very passionate about the veteran community, as he is a veteran of the military as well. Jesse has a bachelor's degree in Psychology and an MS in Counseling, Career Specialization from

California State University, Sacramento. In his free time, he enjoys Yoga, trying new places to eat, and walking his dog, Leo.

Casey Triggs comes to OA from the Department of Consumer Affairs (DCA), where she worked for both the Speech Pathology/Audiology and Medical Boards in the licensing divisions. Some of the programs that Casey oversaw at DCA included legislative and regulation reviews, accreditation of physician owned surgical settings, the implementation of the Mexico Physician Pilot Program, and the approval of specialty surgical boards. When CDPH began the COVID19 Contact Tracing program in June of 2020, Casey joined the Imperial County team as a Case Investigator, which renewed her interests in public health and social services.

Casey was born and raised on South Lake Tahoe, and moved overseas as an ambassador with the International Rotary Club before graduating from UC Davis with Bachelor's degrees in Spanish and International Relations. After college she joined Americorps where she worked as bilingual case manager for the Child Abuse Prevention Center with at risk families, providing crisis intervention and referrals to interdisciplinary team specialists.

In her down time, Casey enjoys outdoor activities, visiting her family in Tahoe, and spending time with her friends. She has a long history of fostering shelter and rescue dogs until they can find their forever home. Casey is rarely without her sidekick, Georgia, a short pit-bull that most people say resembles a velvet hippopotamus.

HIV Awareness:

World AIDS Day was observed on December 1st and is continuing to be acknowledged with activities throughout December. World AIDS Day raises awareness of HIV, supports those living



with HIV, and offers a time to reflect and honor the lives lost to HIV.

Forty years since the beginning of the HIV/AIDS epidemic and nearly two years into the COVID-19 pandemic, we are reminded of the continued struggle with the inequities and access to health care. The theme for World AIDS Day 2021, given by the U.S. Department of Health & Human Services (HHS) is ***Ending the HIV Epidemic: Equitable Access, Everyone's Voice***. In his World AIDS Day Proclamation, President Biden stated, "My Administration remains steadfast in our efforts to end the HIV epidemic, confront systems and policies that perpetuate entrenched health inequities, and build a healthier world for all people."

Here at OA, we are increasingly addressing social determinants of health and working to eliminate health disparities. We join you in continuing to work toward no new HIV infections, and ensuring all people living with HIV have access to health care and sustained viral suppression, and those vulnerable to HIV infection have access to Pre-Exposure Prophylaxis to prevent HIV infection. We remember those who died of AIDS and remain partners with you in ending the HIV epidemic.

The [Presidential Proclamation](https://www.whitehouse.gov/briefing-room/presidential-actions/2021/11/30/a-proclamation-on-world-aids-day-2021/) can be found at www.whitehouse.gov/briefing-room/presidential-actions/2021/11/30/a-proclamation-on-world-aids-day-2021/.

General Office Updates:

COVID-19:

OA is committed to providing updated information related to COVID-19. We have disseminated a number of documents in an effort to keep our clients and stakeholders informed.

Please refer to our [OA website](http://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx) at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

Racial Justice and Health Equity:

The Racial & Health Equity (RHE) workgroup aims to gain insight and understanding of racial and health equity efforts throughout CDPH and take next steps towards advancing RHE in our work. The workgroup has formed subcommittees to address community stakeholder engagement challenges, improve OA policy and practices to support RHE and increasing OA knowledge and attitude on RHE among leadership and staff.

The OA RHE Workgroup will convene on Wednesday, December 8, 2021.

HIV/STD/HCV Integration:

As the lead state department in the COVID-19 response, CDPH has re-directed hundreds of staff to this effort. Because of this, the integration efforts of the OA, STD Control Branch, and Office of Viral Hepatitis Prevention are postponed indefinitely. Please refer to our [OA website](http://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx) at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

CDPH Ending the Epidemics Strategic Plan:

The Core Team has completed development of the Phase I draft, which includes the Vision, Mission, Values, Social Determinants of Health most affecting the syndemic, and strategies. It will be submitted for internal review and intended to be distributed by early 2022. In Phase II,

specific “blue prints” on objectives that will address the social determinants of health and help achieve the goal of no new HIV and HCV infections or death by overdose, and reduce the rates of sexually transmitted infections. The Ending the Epidemics Strategic Plan will fulfill the CDC and HRSA requirement for a new Integrated HIV Prevention and Care Plan but goes beyond that requirement by addressing the syndemic of HIV, STIs, and HCV.

Ending the HIV Epidemic:

Resources are being developed to provide the six counties additional support to develop and implement social media and marketing within their jurisdictions, and training to effectively and respectfully provide services to individuals experiencing homelessness and those who need healthcare but who have avoided seeking healthcare because of negative experiences in the past.

HRSA Policy Update:

On October 19, 2021, the Health Resources and Services Administration’s (HRSA) HIV/AIDS Bureau (HAB) released the HAB Policy Clarification Notice (PCN) 21-02, [*Determining Client Eligibility and Payor of Last Resort in the Ryan White HIV/AIDS Program \(RWHAP\).*](#)

For the AIDS Drug Assistance Program (ADAP) the major policy change was the removal of the six-month recertification requirement for ADAP clients. Clients will now enroll and/or re-enroll one time per year.

On November 18, 2021, clients with current eligibility who were due for their next ADAP recertification between October 19, 2021 and January 31, 2022 were extended to their next reenroll date, which is their date of birth. A second round of eligibility extensions occurred the week of November 29, 2021 for clients who have recertification due later in the year 2022. Their eligibility will be extended to their next reenroll date.

OA is working on an implementation plan of this revised policy which requires changes to the ADAP Enrollment System (AES) to remove the recertification functionality. OA will continue to provide implementation status updates.

For the HIV Care Program (RWHAP Part B), OA is revising the Common Standards to eliminate the six-month recertification and streamline the eligibility determination process. We anticipate releasing the updated Common Standards by January. In the meantime, HIV Care Program subrecipients should reach out to their assigned program advisor if they have questions.

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

National Clinician Consultation Center:



The National Clinician Consultation Center (NCCC) provides clinicians of all experience levels prompt, expert responses to questions about managing HIV/AIDS, perinatal HIV, pre-exposure prophylaxis, and bloodborne pathogen exposures. They provide online and phone-based consultation in service areas including testing and prevention, treatment, and post-exposure prophylaxis (PEP). The NCCC mission is to improve patient health outcomes by building the capacity of healthcare providers through expert clinical consultation and education.

Person-centered, accessible pre-exposure prophylaxis (PrEP) services are a vital component of HIV prevention efforts. New PrEP medication options (e.g., long-acting formulations) are on the horizon and multiple models of PrEP care are now available including

tele-PrEP and pharmacy-based PrEP. Health care providers with any questions regarding PrEP are welcome to call the national PrEPline, which is staffed by a multi-professional team of experienced clinical consultants. Consultants provide on-demand support and guidance to address a wide variety of topics including PrEP initiation, laboratory testing, medication options and side effects, dosing strategies and adherence considerations, and PrEP in pregnancy. To reach a consultant, call the PrEPline's toll-free number at 855-HIV-PrEP (855-448-7737) Monday-Friday, 6am-5pm PST. Non-health care providers interested in finding HIV prevention services in their area can visit the [CDC's PrEP information page](#) to find a PrEP provider.

NASTAD is excited to announce the release of the new resource [PrEP Coverage Check](#)—a PrEP Verification Tool. This tool aims to assist PrEP navigators and enrollment assisters in quickly verifying whether PrEP medications are covered in select health plans throughout the [2022 Open Enrollment Period](#).

PrEP-Assistance Program (AP):

As of November 30, 2021, there are 192 PrEP-AP enrollment sites covering 156 clinics that currently make up the PrEP-AP Provider network.

A [comprehensive list of the PrEP-AP Provider Network](https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878cd5b2) can be found at <https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfea96878cd5b2>.

[Data on active PrEP-AP clients](#) can be found in the three tables displayed on page 5 of this newsletter.

Strategy B: Increase and Improve HIV Testing

OA's HIV home-testing distribution demonstration project continues through Building Healthy

Active PrEP-AP Clients by Age and Insurance Coverage:

Current Age	PrEP-AP Only		PrEP-AP With Medi-Cal		PrEP-AP With Medicare		PrEP-AP With Private Insurance		TOTAL	
	N	%	N	%	N	%	N	%	N	%
18 - 24	358	8%	---	---	---	---	79	2%	437	9%
25 - 34	1,305	28%	1	0%	---	---	463	10%	1,769	38%
35 - 44	1,028	22%	---	---	1	0%	279	6%	1,308	28%
45 - 64	692	15%	2	0%	21	0%	183	4%	898	19%
65+	36	1%	---	---	159	3%	8	0%	203	4%
TOTAL	3,419	74%	3	0%	181	4%	1,012	22%	4,615	100%

Active PrEP-AP Clients by Age and Race/Ethnicity:

Current Age	Latinx		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian/ Pacific Islander		White		More Than One Race Reported		Decline to Provide		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
18 - 24	212	5%	---	---	40	1%	31	1%	---	---	130	3%	4	0%	20	0%	437	9%
25 - 34	954	21%	5	0%	177	4%	103	2%	4	0%	430	9%	16	0%	80	2%	1,769	38%
35 - 44	849	18%	3	0%	88	2%	67	1%	---	---	254	6%	5	0%	42	1%	1,308	28%
45 - 64	620	13%	2	0%	39	1%	23	0%	3	0%	197	4%	---	---	14	0%	898	19%
65+	43	1%	1	0%	2	0%	3	0%	---	---	154	3%	---	---	---	---	203	4%
TOTAL	2,678	58%	11	0%	346	7%	227	5%	7	0%	1,165	25%	25	1%	156	3%	4,615	100%

Active PrEP-AP Clients by Gender and Race/Ethnicity:

Gender	Latinx		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian/ Pacific Islander		White		More Than One Race Reported		Decline to Provide		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Female	492	11%	---	---	3	0%	13	0%	---	---	16	0%	---	---	3	0%	527	11%
Male	2,039	44%	11	0%	325	7%	210	5%	7	0%	1,128	24%	22	0%	145	3%	3,887	84%
Transgender	137	3%	---	---	14	0%	3	0%	---	---	8	0%	3	0%	1	0%	166	4%
Unknown	10	0%	---	---	4	0%	1	0%	---	---	13	0%	---	---	7	0%	35	1%
TOTAL	2,678	58%	11	0%	346	7%	227	5%	7	0%	1,165	25%	25	1%	156	3%	4,615	100%

All PrEP-AP charts prepared by: ADAP Fiscal Forecasting Evaluation and Monitoring (AFFEM) Section, ADAP and Care Evaluation and Informatics Branch, Office of AIDS. Client was eligible for PrEP-AP as of run date: 11/30/2021 at 12:03:45 AM
Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

Online Communities (BHOC) in the six California Consortium Phase I Ending the HIV Epidemic in America counties. The program, [TakeMeHome®](https://takemehome.org/), (<https://takemehome.org/>) is advertised on gay dating apps, where users see an ad for home testing and are offered a free HIV-home test kit. In the first 14 months, between September 1, 2020 and October 31, 2021, 2194 tests were distributed, including 88 tests distributed in October. Of those ordering a test in October, 39.8% reported never before receiving an HIV test, and 51.1% were 18 to 29 years of age. Among individuals reporting ethnicity, 35.2% were Hispanic/Latinx, and of those reporting sexual history, 36.4% indicated 3 or more partners in the past 12 months. To date, 315 recipients have filled out an anonymous follow up survey, with 94.3% indicating they would recommend TakeMeHome HIV test kits to a friend. The most common behavioral risks of HIV exposure reported in the follow up survey were being a man who has sex with men (74.6%) or having had more than one sex partner in the past 12 months (60.3%).

Strategy F: Improve Overall Quality of HIV-Related Care

OA is finishing the development of the Request for Applications (RFA) for the funding allocated by the state legislature to establish demonstration projects to create innovative, evidence-informed approaches to improve the

health and well-being of older people living with HIV. It is expected to be released the first week of January, with a pre-application webinar to follow shortly after its release. Please monitor the [“Request for Application” section on the OA Website](http://www.cdph.ca.gov/Programs/CID/DOA/Pages/OAmain.aspx) at www.cdph.ca.gov/Programs/CID/DOA/Pages/OAmain.aspx, for further information.

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

ADAP’s Insurance Assistance Programs:

As of November 29, 2021, the number of ADAP clients enrolled in each respective ADAP Insurance Program are shown in the chart below.

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

Methadone Take-Home Flexibility Extended for One Year:

The Substance Abuse and Mental Health Services Administration (SAMHSA) is extending the methadone take-home flexibilities for one year. Through this flexibility, SAMHSA allows Opioid Treatment Programs to dispense 28 days of take-home methadone doses to stable patients for the treatment of opioid use disorder, and up to 14 doses of take-home methadone

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from October
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	578	+1.05%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	6,515	+1.15%
Medicare Part D Premium Payment (MDPP) Program	2,051	+0.78%
Total	9,144	+1.06%

for less stable patients. This exemption is a continuation of the take-home medication flexibilities that SAMHSA put in place in March 2020 and considering mechanisms to make this flexibility permanent.

Read the [full announcement](#) at www.samhsa.gov/newsroom/press-announcements/202111181000. [Review the Research](#) at pubmed.ncbi.nlm.nih.gov/34670453/.

Tribal/Urban Indian On Demand Course Addressing Stimulant Use:

The California Department of Health Care Services (DHCS) created an on-demand course that described the local and national scope of stimulant use, including current trends in use amongst Indigenous people in CA and nationally.

One and one-half (1.5) CME/CE credits are available at no cost for completing this course. [View the on-demand course](#) at psattcelearn.org/courses/tribal-urban-indian-provider-training-series-addressing-stimulant-use/.

Drugs 101 Training - Opioids and Stimulants:

The California HIV/STD Prevention Training Center held a Drugs 101 training featuring two 2-hour online trainings focused on basic knowledge about different kinds of opioids and stimulants, how they are used and ways to reduce the harms related to using each type of drug.

View the recordings and presentation slides for [Stimulants](#) at <https://youtu.be/XmxbTUaE5H8>, and [Opioids](#) at <https://youtu.be/GdL1upXGgGc>.

Newest Trends in California Harm Reduction:

The [California Bridge Project](#) recently held a Substance Use Navigator training that discussed recent harm reduction trends, including a profile of people who use syringe services programs in California, polysubstance use and stimulants. Please share this resource widely.

[View the recording](#) at www.youtube.com/watch?app=desktop&v=A3FOypAjOBg&feature=youtu.be.

Strategy M: Improve Usability of Collected Data

OA conducts the CDC, Medical Monitoring Project (MMP), a surveillance activity designed to produce nationally representative data about the health-related experiences and needs of persons living with HIV (PLWH) in the United States. A [fact sheet of MMP data from the 2015-2019 survey cycles in California](#) is now available on OA's webpage. This information can be used by medical providers and policy-makers to guide HIV prevention, care, and treatment programs. Note: Data from San Francisco and Los Angeles County is not included, as they are directly funded by CDC for MMP.

For [questions regarding this issue of *The OA Voice*](#), please send an e-mail to angelique.skinner@cdph.ca.gov.