

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](#) is available on the Office of AIDS' (OA) website at www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final.pdf.

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Staff Highlight:

Phil Peters is a Medical Officer in OA who works to improve HIV prevention programs and medical care for people living with HIV in California. Phil believes that public health works best when it partners with both community groups and medical providers. In OA, Phil has worked to help expand HIV pre-exposure prophylaxis options and has evaluated how molecular information can be used to help improve HIV prevention. He also chairs the medical advisory



committee for California's AIDS Drug Assistance Program (ADAP) and the clinical quality management committee for California's Ryan White Part B program. During the COVID-19 pandemic, he has been helping CDPH's clinical team investigate this new illness and options for prevention that can be applied in the community.

Prior to joining OA in November 2018, Phil worked for the Centers for Disease Control and Prevention (CDC) and in this position he led CDC's field investigation team during the largest US HIV outbreak in 20 years, which occurred among people who inject drugs in a rural community. This response interrupted further HIV transmission in the community and resulted in significant federal public health policy changes related to injection drug use.

Phil is board certified in infectious disease medicine and is a volunteer clinical faculty member at the University of California at Davis's department of infectious disease. Phil is also a member of the immunization panel for the US "Guidelines for the prevention and treatment of opportunistic infections in HIV-infected adults and adolescents".

In his free time, Phil enjoys trail running, drinking coffee, reading science fiction, and keeping his vaccinations up to date.

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.

HIV/STD/HCV Integration Update:

As the lead state department in the COVID-19 response, the California Department of Public Health (CDPH) has re-directed hundreds of staff to this effort. Because of this, there is a temporary pause on the integration efforts of the OA, STD Control Branch, and Office of Viral Hepatitis Prevention until the Department gets back to normal. We have made tremendous progress in the past few months, establishing numerous action teams to define a future integrated organization. We do not want to lose this momentum, and we will not. We have the commitment of our contractor, who greatly understands the Department's predicament, to continue right where we are pausing, as soon as the COVID-19 related workload on our staff lets up.

Ending the Epidemics:

The CDC PS20-2010 grant application is being submitted. This grant will provide five years of funding to implement the federal Ending the HIV Epidemic prevention activities in the Phase I designated counties. The grant will start August 1, 2020.

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

PrEP Assistance Program (PrEP-AP):

As of March 24, 2020, there are 207 PrEP-AP enrollment sites covering 157 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 table below and at the top of page 3.

Strategy G: Improve Availability of HIV Care

OA submitted the Housing Opportunities for Persons with AIDS Program (HOPWA) 2020-24 Consolidated Plan to the State Department

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 | 107 | 4% | --- | --- | --- | --- | 115 | 4% | 222 | 8% |
| 25 - 34 | 769 | 28% | 1 | 0% | --- | --- | 601 | 22% | 1,371 | 50% |
| 35 - 44 | 451 | 16% | --- | --- | 3 | 0% | 244 | 9% | 697 | 25% |
| 45 - 64 | 186 | 7% | --- | --- | 18 | 1% | 159 | 6% | 363 | 13% |
| 65+ | 4 | 0% | --- | --- | 72 | 3% | 10 | 0% | 86 | 3% |
| TOTAL | 1,517 | 55% | 1 | 0% | 93 | 3% | 1,129 | 41% | 2,739 | 100% |

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

| Current Age | Latinx | | White | | Black or African American | | Asian | | American Indian or Alaskan Native | | Native Hawaiian/Pacific Islander | | More Than One Race Reported | | Decline to Provide | | TOTAL | |
|--------------|--------------|------------|------------|------------|---------------------------|-----------|------------|-----------|-----------------------------------|-----------|----------------------------------|-----------|-----------------------------|-----------|--------------------|-----------|--------------|-------------|
| | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % |
| 18 - 24 | 87 | 3% | 67 | 2% | 16 | 1% | 32 | 1% | --- | --- | 1 | 0% | 8 | 0% | 11 | 0% | 222 | 8% |
| 25 - 34 | 617 | 23% | 422 | 15% | 104 | 4% | 144 | 5% | 1 | 0% | 4 | 0% | 25 | 1% | 54 | 2% | 1,371 | 50% |
| 35 - 44 | 350 | 13% | 218 | 8% | 41 | 1% | 54 | 2% | 3 | 0% | 1 | 0% | 5 | 0% | 25 | 1% | 697 | 25% |
| 45 - 64 | 152 | 6% | 153 | 6% | 20 | 1% | 25 | 1% | 2 | 0% | 1 | 0% | 2 | 0% | 8 | 0% | 363 | 13% |
| 65+ | 8 | 0% | 73 | 3% | 1 | 0% | 1 | 0% | 1 | 0% | --- | --- | 1 | 0% | 1 | 0% | 86 | 3% |
| TOTAL | 1,214 | 44% | 933 | 34% | 182 | 7% | 256 | 9% | 7 | 0% | 7 | 0% | 41 | 1% | 99 | 4% | 2,739 | 100% |

Both 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: 03/31/2020 at 11:08:07 PM
Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

of Housing and Community Development (HCD) on January 31, 2020. HCD will include HOPWA's plan in their 2020-24 Consolidated Plan that they submit to the Housing and Urban Development (HUD). Every five years HCD is required to submit a Consolidated Plan to HUD that describes its priorities and multi-year goals based on an assessment of housing and community development needs, an analysis of housing and economic market conditions, and available resources. The Annual Action Plan for FY 20-21 is contained in the Consolidated Plan. HCD will solicit public comment from April 14 through May 31, 2020. Information

about the public comment opportunity and the draft [Consolidated Plan](#) will be posted on the HCD website at <https://www.hcd.ca.gov/policy-research/plans-reports/index.shtml>. HCD will submit the final plan to HUD by June 30, 2020.

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

ADAP's Insurance Assistance Programs:

As of March 27, 2020, the number of ADAP clients enrolled in each respective ADAP Insurance Program are shown in the chart below.

| ADAP Insurance Assistance Program | Number of Clients Enrolled | Percentage Change from February |
|---|----------------------------|---------------------------------|
| Employer Based Health Insurance Premium Payment (EB-HIPP) Program | 686 | +3.62% |
| Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program | 5,728 | +3.84% |
| Medicare Part D Premium Payment (MDPP) Program | 1,863 | +1.97% |
| Total | 8,277 | +3.39% |

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

On March 10, 2020, the San Diego County Board of Supervisors [voted to develop a plan to support syringe services](http://www.cbs8.com/article/news/health/san-diego-county-board-of-supervisors-votes-to-move-forward-with-syringe-service-program/509-535c95eb-704c-481e-8790-e09814bc50e6) in the county (www.cbs8.com/article/news/health/san-diego-county-board-of-supervisors-votes-to-move-forward-with-syringe-service-program/509-535c95eb-704c-481e-8790-e09814bc50e6). If successful, this would allow the county-funded HIV and HCV services to integrate syringe services into their ongoing efforts to eliminate HIV and HCV.

[COVID-19 Guidance for People Who Use Drugs and Harm Reduction Programs](http://harmreduction.org/miscellaneous/covid-19-guidance-for-people-who-use-drugs-and-harm-reduction-programs) can be found at harmreduction.org/miscellaneous/covid-19-guidance-for-people-who-use-drugs-and-harm-reduction-programs. Two new guides for people who use drugs and providers who work with them have been issued and are available on several harm reduction websites. These guides were developed by [Higher Ground Harm Reduction](http://hghr.wedid.it) (hghr.wedid.it), Reynolds Health Strategies, Harm Reduction Coalition, and [Vital Strategies](http://www.vitalstrategies.org) (www.vitalstrategies.org), and recognize the unique vulnerabilities faced by unhoused people in the midst of a public health emergency.

OA contracted [NEXT Harm Reduction](http://nextdistro.org) (nextdistro.org) to pilot an innovative internet and mail-based harm reduction program throughout the state. The program seeks to identify and serve people in need of safer injection supplies, the opioid overdose antidote naloxone, counseling and linkage to care, particularly in the roughly 50% of California counties without a local syringe services program. The three-year project is funded through the CDC's Overdose Data to Action cooperative agreement as part of a collaboration between OA's Harm Reduction Unit and the CDPH Injury and Violence Prevention Branch.

SSP Applications - Due to the current public health threat posed by COVID-19, decisions on pending SSP applications are currently taking longer than usual. Pending applicants have been notified. Interested entities should feel free to contact OA's Harm Reduction Unit to initiate the process. Please email SSPinfo@cdph.ca.gov for [more information](#).

Strategy N: Enhance Collaborations and Community Involvement

California Planning Group (CPG):

OA is in the process of selecting new CPG at-large members. CPG members are chosen for their ability to advocate for and represent the voices and perspectives of a wide range of key stakeholders, and people representative of, or impacted by, the HIV epidemic in California. Approximately 50 people submitted applications to serve on the CPG. We are committed to getting the new membership cohort selected before the end of April.

We are excited to announce the following new CPG members who were appointed by a local planning body:

- **Danielle Campbell**, Los Angeles County HIV Commission
- **Jena Adams**, Fresno County Planning Council
- **Richard Benavidez**, Sacramento Planning Council
- **Claire Nartker**, Santa Clara County
- **Keith Sellons**, Inland Empire

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