

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](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IP_2016_Final_ADA.pdf).

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## Staff Highlight:

OA would like to introduce a few new AIDS Drug Assistance Program (ADAP) Advisors: **Adriana Fernandez, Erika Torrez, and Nick Garrett.**

**Adriana** has worked in OA for over three years as a Bilingual Technician in the ADAP Client Services Unit and was recently promoted within ADAP. She worked directly with clients and enrollment workers to resolve issues, ensured clients continued eligibility, provided technical assistance, and translated program policies and forms from English to Spanish. In her new role, her additional duties include working closely with clients and enrollment workers to resolve escalated eligibility issues, processing applications for new and existing clients, reviewing employer based health insurance premium payment program applications, and supporting team members to ensure clients always maintain access to their lifesaving medications. Prior to coming to OA, Adriana worked at Covered California and Health Net. In both of those roles, she worked directly with clients and providers. She educated clients on health plans, benefits, and resolved claims and disputes.

Outside of work, Adriana enjoys spending time with her son and boyfriend. She also enjoys being outdoors, hiking, taking day trips, trying new restaurants, attempting to cook, and online shopping.



**Erika** has been with OA for nearly three years as a Bilingual Eligibility Analyst and was recently promoted within ADAP. She works closely with clients and enrollment workers to resolve escalated eligibility issues, supports team members to ensure clients always maintained access to their lifesaving medications, assists with policy development, and translates program policies and forms. Prior to working in OA, Erika guided community members through insurance enrollments and provided community outreach in Solano County as a Health Access Specialist. In addition to her roles in the health field, she also has experience working in the fast-paced

environment of a newsroom for Fox40 and KDTV Univision 14. She earned a bachelor's degrees in Social Work and Journalism with a minor in Spanish from Sacramento State University. In her free time, Erika likes to surround herself with family and friends, enjoy the outdoors, bike, and go for hikes. Lastly, she's a fan of the Warriors, Giants, and 49ers.

**Nick** is new to OA and state service. He spent the last ten years as a retail and district manager for multiple stores in Northern California. During this time, he served as a subject matter expert of company policies to develop guidelines that have been adopted district-wide. Nick brings a wealth of experience in customer service, policy writing, training and staff development.

In his free time, Nick enjoys cooking, playing games, investing, and visiting Disneyland as often as possible. He is also a big fan of Star Wars, Marvel, the Sacramento Kings, Denver Broncos, and New York Yankees.

## **HIV Awareness:**

### **July 25 – African American Hepatitis C Action Day:**

National African American Hepatitis C Action day was designated in 2013 to draw attention to the disproportionately high rates of Hepatitis C among African Americans. Observing this day is aimed at reducing the number of Hepatitis C infections in African American communities by promoting prevention through education, testing and treatment. CDC's Division of Viral Hepatitis has provided a [Resource Center](https://www.cdc.gov/hepatitis/resources/index.htm) at <https://www.cdc.gov/hepatitis/resources/index.htm> for various tools and information on the prevention and treatment of hepatitis C.

### **July 28 – World Hepatitis Day:**

World Hepatitis Day is recognized to raise awareness of the different forms of viral hepatitis and how they are transmitted. Viral hepatitis is a group of infectious diseases known as hepatitis

A, B, C, D, and E. Hepatitis affects millions of people worldwide, causing both acute and chronic liver disease. This day is observed to provide the opportunity to encourage prevention, screening, and treatment.

## **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](http://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx), to stay informed.

### **Racial Justice and Health Equity:**

The Racial & Health Equity (RHE) workgroup launched an e-mail series featuring national observance days and holidays to better highlight their history, significance and intersection with racial and health equity. June features included, Pride, Juneteenth and International Day for the Elimination of Sexual Violence.

### **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](http://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx), to stay informed.

### **New CDPH Ending the Epidemics Strategic Plan:**

CDPH has partnered with Facente Consulting to develop a plan for a statewide collaborative, harm reduction approach to preventing and treating HIV, hepatitis C virus (HCV), and sexually transmitted diseases (STDs) in California. We know that how and where we

live, work, and access care plays a huge role in our health, and we cannot end the HIV, STD, and HCV epidemics without addressing racial equity. (CDPH defines racial equity as “the condition achieved when race can no longer be used to predict life outcomes and conditions for all groups are improved.”) We are framing this plan around racial equity and other social determinants of health.

Our 18-month strategic planning process includes:

- Reaching out to a wide range of people across the state to ask for ideas on how California should be responding to the overlapping HIV, HCV, and STD epidemics;
- Using those ideas to decide what we can do to make it easier for people to avoid getting HIV, HCV, and STDs, and what activities are most important to support the health of people in California when they have HIV, hepatitis C or STDs; and
- Summarizing these ideas in a big picture plan by the end of 2021, so we can work with people throughout the state in 2022 to develop a more detailed plan for locally and successfully implementing these activities.

**Ideas and suggestions from a wide-variety of stakeholders is critical!** We have developed a [short \(7 question\) survey](#) that will help to ensure that a diverse set of voices are meaningfully included from the very start of the planning process. The survey is available in both English and Spanish, and will be open through August 30, 2021 at <https://www.surveymonkey.com/r/CDPHStratPlan>. **Please share widely!**

### **Ending the HIV Epidemic:**

The six Phase 1 counties of the CDC PS20-2010 Ending the HIV Epidemics in America initiative are wrapping up Year One and creating a plan for implementing their activities in Year Two. The counties include Alameda, Orange,

Riverside, Sacramento, San Bernardino, and San Diego. A virtual site visit with each county is being conducted by the OA team and Facente Consultants, which give the counties an opportunity to provide updates and discuss planned implementations for Year Two. Capacity building assistance and technical assistance needs are being identified, and areas where OA and the Facente Consulting Team can assist the counties reviewed. Like all areas of Public Health, COVID diverted significant resources from day to day operations and slowed administrative processes significantly. This resulted in less progress in implementing the Ending the HIV Epidemic plans, however as a reprieve from COVID restore operations, Year Two will see considerably more progress than Year One.

The Center for HIV Identification, Prevention, and Treatment Services (CHIPTS) at UCLA coordinates an [Ending the HIV Epidemic \(EHE\) Regional Learning Collaborative](#) with monthly sessions to facilitate knowledge sharing and support collective action to end the HIV epidemic across California’s [EHE Phase 1 jurisdictions](#). Their next session entitled ***EHE Phase 1 Updates: State and County Perspectives*** is coming up on Tuesday, July 20, 2021 from 10:00 -11:30 AM (PST). This special session will feature EHE activity and progress updates from the OA and California’s eight county health departments serving our EHE Phase 1 jurisdictions. [REGISTER HERE](#).

If you have any questions, please contact CHIPTS EHE Coordinator Elena Rosenberg-Carlson at [rosenberg-carlson@mednet.ucla.edu](mailto:rosenberg-carlson@mednet.ucla.edu).

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

#### **PrEP-Assistance Program (AP):**

As of June 29, 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 tables below.

## Strategy B: Increase and Improve HIV Testing

OA's HIV home-testing distribution demonstration project continues through Building Healthy Online Communities (BHOC) in the six California Consortium Phase I Ending the HIV

Epidemic in America counties. The program, TakeMeHome, 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 9 months, between September 1, 2020 and May 31, 2021, 1513 tests were distributed, including 123 tests distributed in May. Of those ordering a test in May, 49.6% reported never before receiving an HIV test, 63.4% were 18 to 29 years of age. Of that reporting ethnicity, 43.1% were Hispanic/Latinx, and 50.0% of those reporting sexual history indicated 3 or more partners in the past 12 months. To date, 215 recipients have filled out an anonymous follow up survey, with 94.0% indicating that they would recommend TakeMeHome HIV test kits to a friend.

### 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	305	7%	---	---	---	---	88	2%	393	9%
25 - 34	1,296	29%	1	0%	---	---	584	13%	1,881	42%
35 - 44	953	21%	---	---	4	0%	321	7%	1,278	28%
45 - 64	565	12%	2	0%	22	0%	208	5%	797	18%
65+	32	1%	---	---	133	3%	9	0%	174	4%
<b>TOTAL</b>	<b>3,151</b>	<b>70%</b>	<b>3</b>	<b>0%</b>	<b>159</b>	<b>4%</b>	<b>1,210</b>	<b>27%</b>	<b>4,523</b>	<b>100%</b>

### 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	179	4%	123	3%	32	1%	39	1%	---	---	1	0%	5	0%	14	0%	393	9%
25 - 34	941	21%	523	12%	120	3%	193	4%	5	0%	5	0%	18	0%	76	2%	1,881	42%
35 - 44	788	17%	282	6%	67	1%	84	2%	2	0%	1	0%	6	0%	48	1%	1,278	28%
45 - 64	496	11%	218	5%	30	1%	35	1%	2	0%	3	0%	---	---	13	0%	797	18%
65+	39	1%	130	3%	2	0%	2	0%	---	---	---	---	1	0%	---	---	174	4%
<b>TOTAL</b>	<b>2,443</b>	<b>54%</b>	<b>1,276</b>	<b>28%</b>	<b>251</b>	<b>6%</b>	<b>353</b>	<b>8%</b>	<b>9</b>	<b>0%</b>	<b>10</b>	<b>0%</b>	<b>30</b>	<b>1%</b>	<b>151</b>	<b>3%</b>	<b>4,523</b>	<b>100%</b>

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: 6/30/2021 at 12:01:30 AM Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

## Rapid HIV Test Kit Availability for PS18-1802-funded Local Health Jurisdictions (LHJs):

The effects of COVID-19 have caused OA to reevaluate existing HIV testing efforts in the Prevention-funded California Project Area (CPA). We have reassessed the need for certain types of test kits based on their versatility and flexibility in the types of samples that they can collect. There has been significant benefit in test kit technologies that allow for both finger stick whole blood and oral fluid samples. We have also seen a large increase in need for home testing methods as outreach testing saw a decrease due to the pandemic. As a result, the current rapid testing technologies available include:

- **Building Healthy Online Communities (BHOC)** - OA's home testing distribution project is available to Ending the Epidemic counties which include Alameda, Orange, Riverside, Sacramento, San Bernardino and San Diego;
- **OraQuick In-Home test kits** - For 2021, OA will allow for 18-1802 funded LHJs to budget for and purchase OraQuick In-Home test kits. Test kits are currently priced at \$28 per kit; and
- **OraQuick Advance test kits** - Prevention-funded LHJs may also continue to order OraQuick Advance HIV test kits through the Prevention Branch at no cost.

As of June 30, 2021, OA no longer provides

Alere Determine test kits to funded LHJs. However, LHJs may budget for and purchase kits directly from the manufacturer if their test counselors have been certified by OA and our training partners to operate the Alere Determine rapid test. Licensed medical personnel may continue to operate FDA-approved, CLIA-waived rapid test kits without certification from OA and/or our training partners.

Please reach out to your assigned Business Analyst if you would like to amend your budget to include the purchase of OraQuick In-Home test kits. For any questions regarding this update, please contact Matt Willis at [Matthew.Willis@cdph.ca.gov](mailto:Matthew.Willis@cdph.ca.gov).

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

### ADAP's Insurance Assistance Programs:

As of June 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

**Update:** The targeted condom distribution program is currently unable to fill orders for

ADAP Insurance Assistance Program	Number of Clients Enrolled	Percentage Change from May
Employer Based Health Insurance Premium Payment (EB-HIPP) Program	584	-1.51%
Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program	6,659	+0.01%
Medicare Part D Premium Payment (MDPP) Program	2,041	-0.48%
<b>Total</b>	<b>9,284</b>	<b>-0.19%</b>

regular, internal and large condoms, and there is a very limited supply of lubricant. We are working hard on replenishing our supplies and hope to have them available for you as soon as possible. We will keep you updated as more information becomes available. In the meantime, you may continue to submit to us your completed order sheets for lubricant, and please direct all questions to [CACorders@cdph.ca.gov](mailto:CACorders@cdph.ca.gov).

The Department of Health Care Services (DHCS) issued an alert in May of the closure of 29 Lags Medical Centers, which operates high-volume pain management clinics in California. The affected counties are Los Angeles, Ventura, Santa Barbara, San Luis Obispo, Kern, Tulare, Kings, Monterey, Santa Cruz, Fresno, Madera, Merced, Alameda, Stanislaus, San Joaquin, and Sacramento. The alert encourages primary care providers and MOUD providers to consider prescribing or dispensing naloxone as a safety measure, and includes a [resource list](#) that can be adapted and used by local organizations.

Emerging data continue to show that the COVID pandemic made the nation's drug overdose epidemic worse. The American Medical Association (AMA) has updated three issue briefs that provide [state-level reports of the worsening epidemic](#), [select research](#), and [examples of efforts to help](#) increase access to evidence-based care and save lives from overdose in each state. These issue briefs underscore the need to remove barriers to evidence-based treatment for those with substance use disorders and for patients with pain, as well as benefits from harm reduction services.

The Los Angeles Department of Health Services has launched a program, Overdose Education and Naloxone Distribution (OEND) to help people save lives from opioid overdose. They have compiled resources on [where to find naloxone](#), [where to find the closest syringe services program](#) and [find medication for opioid use disorder](#). A series of [overdose prevention training videos](#), in both English and Spanish features trainers from LA Community Health

Project and participants discussing their experiences with strategies to prevent overdose, recognize overdose and respond.

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

### **Seeking ADAP Medical Advisory Committee Members:**

Are you a health care professional or avid community member/representative who works with people impacted by HIV and want to expand your influence and reach? If so, then please consider joining the AIDS Drug Assistance Program's (ADAP) Medical Advisory Committee (MAC).

The primary role of the MAC is to review the program formulary, evaluate available HIV/AIDS related drugs, in addition to medications used in the treatment of opportunistic infections, and make recommendations for changes to the program formulary. The ADAP MAC consists of HIV-specialized physicians, pharmacists, psychiatrists, treatment advocacy representatives, and affected community members.

The established vision for the MAC is: *"ADAP will make available, in an effective and timely manner to people living with HIV, pharmaceutical and other treatments which are reliably expected to increase survival, reduce mortality, and improve quality of life."*

For more information, please see our webpage at [www.cdph.ca.gov/Programs/CID/DOA/Pages/OA\\_ADAP\\_MAC\\_Medical\\_Advisory\\_Committee.aspx](http://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_ADAP_MAC_Medical_Advisory_Committee.aspx).

If you wish to apply to serve as a member of the MAC, send an email regarding your interest to the ADAP MAC mailbox at [CDPHADAPMedicalAdvisoryCommittee@cdph.ca.gov](mailto:CDPHADAPMedicalAdvisoryCommittee@cdph.ca.gov).

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