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_ADA.pdf.

**In This Issue:**
- Strategy A
- Strategy B
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- Strategy M
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**Staff Highlight:**

Our new **OA Care Business Unit** is responsible for making sure our subrecipients are paid while ensuring we meet state and federal fiscal and budgetary requirements. You’ve met Sean Abucay in a previous edition of the *OA Voice*, now let’s meet his team!

**Christina White** (HPSI) is the lead on managing and reporting for the Ryan White HIV/AIDS Program (Part B) grants. She is responsible for writing grant applications, conducting program planning and compliance, preparing grant budgets, and compiling progress and data reports. She also tracks and analyzes expenditures, ensures billing complies with state and federal fiscal requirements, and reviews and responds to audits. Christina has been with California Department of Public Health (CDPH) for about 5 years working in various capacities, including as a Staff Services Analyst in the AIDS Drug Assistance Program and an Associate Governmental Program Analyst (AGPA) in OA’s Support Branch. Christina graduated from California State University, Sacramento (CSUS) with a bachelor’s degree in Criminal Justice. In her free time, she likes to travel, spend time with friends and family, and relax at home with her two cats, Billie and The Dude.

**Moiz Rydhan, Ryan Takeoka, and Matthew Brown** (APGAs) serve as fiscal advisors and assist in the administration, planning, and
The Fiscal Team conducts desk audits and on-site monitoring of HCP subrecipients to determine compliance with fiscal regulatory and programmatic requirements and provide a high degree of technical assistance and guidance to local health departments, community-based organizations, and state staff regarding fiscal policies and procedures. They analyze and prepare invoices for payment, track expenditures, and ensure that billing complies with state and federal fiscal requirements.

- **Moiz Rydhan** graduated from CSUS with a BS in Health Care Administration. He came to OA after working as a contract analyst with Covered CA, and a contract administrator with the Department of Rehabilitation. Moiz loves to build Legos, work on his cars, watch the Sacramento Kings play some good basketball, video games, board games, and enjoys some really good food. He has a cat named Akira.

- **Matthew Brown** graduated from Delaware State University with a BS in Management. He worked in the private sector, where he excelled in multiple roles with Bank of America. In his free time Matthew enjoys anything Marvel or DC and is an avid video gamer and loves playing story driven games. He also started listening to several audio books and is currently working his way through the storm light archive by Brandon Sanderson which is one of his new favorite authors.

- **Ryan Takeoka** came over from his previous role as a Staff Services Analyst with the Department of General Services. He was also co-owner of Big Brother Comics that wasn’t too far from OA’s headquarters! He currently coaches’ girls’ basketball and tennis at Kennedy high school where he recently had one of his young tennis stars make Metro Championships! When Ryan isn’t coaching youth sports, he loves playing basketball, board/card games, eating, or hanging out with family and friends. He has a dog and a cat.

**OA Promotions:**

We are very excited to announce the newest member of ADAP/PrEP-AP family, Alej Contreras. In March, Alej started as the Eligibility Manager overseeing the PrEP-AP Unit 4. Alej has a master’s in social work from the University of Southern California and comes to the ADAP Branch with a wealth of knowledge in HIV and community experience. As many of you know, Alej comes to us from the OA Prevention Branch, where he was a HIV Program Capacity Building and Health Equity Coordinator. In the Prevention Branch, Alej provided technical assistance and capacity building to local health jurisdictions and community-based organizations. In addition, Alej has also made an impact on many OA staff as he has led and facilitated the 21-day challenge sessions, racial and health equity workgroups, and ADAP OA Transgender Cultural Humility Awareness & Responsiveness Training.

Alej was previously the Director of Healthcare Services at the Gender Health Center (GHC) in Sacramento. He oversaw and supported the planning, implementation, monitoring and
evaluation of multiple health programs, including a gender affirming services clinic for the trans community, HIV/STD counseling and testing, and a syringe services program. At the GHC, Alej also served as a PrEP-AP Enrollment Worker.

In his spare time, he likes to hang out with his cat, take care of their many house plants, binge watch TV and try and go to at least one concert a month. We are very excited Alej has joined the ADAP Branch.

Additionally, we are equally excited to congratulate Tiffany Woods on her promotion to Health Program Specialist II, State Transgender Health Manager. In this position Tiffany will be responsible for the development and coordination of departmental and statewide HIV/STD prevention programs, trainings, and marketing material focused on gender health and transgender health education and will focus on statewide coordination of HIV prevention services related to the health and well-being of transgender individuals in California. Tiffany will also continue her role as State Co-Chair of the HIV California Planning Group as community outreach and engagement will remain a critical function in her new role.

Tiffany has been with the OA Prevention Branch since 2019 serving as the Transgender Health and PrEP Local Capacity Building Specialist where she led the coordination and development of policies, procedures, and guidance related to PrEP uptake, retention, and PEP utilization among priority populations. She also provided perspective by leading branch initiatives and activities that promoted equity and assisted in eliminating HIV-related health disparities for transgender individuals. In 2020, Tiffany became the Transgender Sexual Health and Community Engagement Specialist providing expert level technical assistance to LHJs to address and identify solutions for eliminating transgender stigma and discrimination and implemented quality improvement interventions. Additionally, Tiffany developed implemented and facilitated the Transgender Cultural Humility and Responsiveness Training provided to all OA staff and most recently LHJs upon request.

Prior to OA, she worked for 16 years as the Transgender Programs Manager at Tri-City Health, in Fremont, where she provided oversight of leadership, administrative, and operational services related to all agency transgender services, programs, grant deliverables and activities. She provided agency-wide trainings, and provided direct supervision of staff, program development, implementation, monitoring and evaluation.

**HIV Awareness:**

**June is PRIDE Month!** During this month various events are held to recognize the influence Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex (LGBTQI+) people have made around the world. We celebrate diversity and reflect on the progress made in the fight for inclusion, justice, equity, and the freedom to be yourself. It's also an opportunity to raise awareness of current issues while reaffirming commitments to do more to support LGBTQI+ rights.
On June 5, we recognize HIV Long-Term Survivors Awareness Day, which celebrates and honors long-term survivors of the epidemic. It is a day of remembrance, reflection, and is also recognized to raise awareness of the needs, issues, and journeys long term survivors face.

June 8 is Caribbean American HIV/AIDS Awareness Day, an annual observance to educate Caribbean-Americans about HIV/AIDS and provide resources for HIV testing, treatment and care.

On June 27, we observe National HIV Testing Day, a day meant to encourage people to get tested for HIV and know their status. Knowing your status provides the opportunity to make decisions to prevent getting or transmitting HIV. There are many places to get an HIV test, find one near you at the HIV Testing Sites & Care Services Locator or see Strategy O in the Integrated Plan for more information.

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 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 the 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.

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 at www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx, to stay informed.

CDPH-OA/STD Control Branch are pleased to report that the roll-out of the California Strategic Plan to address the syndemic of HIV, HCV and STIs continues with our ongoing provider needs assessment and our planned regional listening sessions scheduled June through July 2022. We have worked hard to ensure that this plan reflects the diverse voices from CDPH, other state agencies, community-based organizations (CBOs) and people with lived experience. In this plan, we have a picture of what we hope the HIV, HCV and STI landscape will look like in five years and some ideas for how to create it through 30 innovative strategies organized over six social determinants of health.

We continue to engage communities across California through twenty-two regional focus groups and a provider needs assessment survey. We have had our first seven regional community listening sessions in Southern California including San Diego, San Bernardino/Inland Empire, El Centro/Imperial County, Kern County, Willits/Mendocino County, and Eureka. We are reaching a diversity of stakeholders including consumers, advocates, public health, and CBO staff. We have additional listening sessions planned for June and July. The COVID surge has necessitated rescheduling some in-person meetings. Four regional virtual listening sessions and community survey are also being
 implemented for those that cannot attend in-person meetings (see above flyer for dates through July 13th).

Partners can find links to the plan, the Statewide Town Hall recording, the provider survey and the schedule of regional meetings and up-to-date registration information at the following links:

- https://tinyurl.com/CDPHStratPlan
- https://tinyurl.com/CDPHNeedsAssessment

Ending the HIV Epidemic

A virtual symposium for all eight California Phase I Ending the Epidemic counties is being held on June 2nd and 3rd and June 9th and 10th. An opening address will be provided by Toni Newman, Interim President and CEO of the Black AIDS Institute. Panels of stakeholders, consumers, and subject matter experts represented young gay/MSM of color, transgender individuals, cis-gender Black/African American Women, and people with experience not having secure housing. There will also be presentations on monitoring ETE progress through the AHEAD Dashboard (https://ahead.hiv.gov/), Partner Services, and Street Medicine mobile interventions.

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

**PrEP-Assistance Program (AP)**

As of May 31, 2022, there are 199 PrEP-AP enrollment sites covering 173 clinics that currently make up the PrEP-AP Provider network.

A comprehensive list of the PrEP-AP Provider Network can be found at https://cdphdata.maps.arcgis.com/apps/webappviewer/index.html?id=6878d3a1c9724418aebfe96878cd5b2.

Data on active PrEP-AP clients can be found in the three tables displayed on page 6 of this newsletter.

**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®, (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 20 months, between September 1, 2020, and April 30, 2022, 2958 tests were distributed. This month, mail-in lab tests (including dried blood spot tests for HIV, syphilis, and Hepatitis C, as well as 3-site tests for...
### Active PrEP-AP Clients by Age and Insurance Coverage:

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>18 - 24</td>
<td>338</td>
<td>8%</td>
<td>---</td>
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</tr>
<tr>
<td>25 - 34</td>
<td>1,114</td>
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<td>1</td>
</tr>
<tr>
<td>35 - 44</td>
<td>927</td>
<td>23%</td>
<td>---</td>
<td>---</td>
<td>3</td>
</tr>
<tr>
<td>45 - 64</td>
<td>700</td>
<td>17%</td>
<td>1</td>
<td>0%</td>
<td>18</td>
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<td>65+</td>
<td>39</td>
<td>1%</td>
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<td>160</td>
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<tr>
<td>TOTAL</td>
<td>3,118</td>
<td>77%</td>
<td>3</td>
<td>0%</td>
<td>182</td>
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### Active PrEP-AP Clients by Age and Race/Ethnicity:

<table>
<thead>
<tr>
<th>Current Age</th>
<th>Latinx</th>
<th>American Indian or Alaskan Native</th>
<th>Asian</th>
<th>Black or African American</th>
<th>Native Hawaiian/ Pacific Islander</th>
<th>White</th>
<th>More Than One Race Reported</th>
<th>Decline to Provide</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
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<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>18 - 24</td>
<td>180</td>
<td>4%</td>
<td>---</td>
<td>---</td>
<td>38</td>
<td>1%</td>
<td>31</td>
<td>1%</td>
<td>111</td>
</tr>
<tr>
<td>25 - 34</td>
<td>795</td>
<td>20%</td>
<td>1</td>
<td>0%</td>
<td>146</td>
<td>4%</td>
<td>87</td>
<td>2%</td>
<td>337</td>
</tr>
<tr>
<td>35 - 44</td>
<td>726</td>
<td>18%</td>
<td>4</td>
<td>0%</td>
<td>102</td>
<td>3%</td>
<td>59</td>
<td>1%</td>
<td>226</td>
</tr>
<tr>
<td>45 - 64</td>
<td>618</td>
<td>15%</td>
<td>2</td>
<td>0%</td>
<td>39</td>
<td>1%</td>
<td>25</td>
<td>1%</td>
<td>167</td>
</tr>
<tr>
<td>65+</td>
<td>33</td>
<td>1%</td>
<td>1</td>
<td>0%</td>
<td>4</td>
<td>0%</td>
<td>3</td>
<td>0%</td>
<td>163</td>
</tr>
<tr>
<td>TOTAL</td>
<td>2,352</td>
<td>58%</td>
<td>8</td>
<td>0%</td>
<td>329</td>
<td>8%</td>
<td>205</td>
<td>5%</td>
<td>1,004</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Gender</th>
<th>Latinx</th>
<th>American Indian or Alaskan Native</th>
<th>Asian</th>
<th>Black or African American</th>
<th>Native Hawaiian/ Pacific Islander</th>
<th>White</th>
<th>More Than One Race Reported</th>
<th>Decline to Provide</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>Female</td>
<td>428</td>
<td>11%</td>
<td>1</td>
<td>0%</td>
<td>6</td>
<td>0%</td>
<td>13</td>
<td>0%</td>
<td>---</td>
</tr>
<tr>
<td>Male</td>
<td>1,785</td>
<td>44%</td>
<td>7</td>
<td>0%</td>
<td>304</td>
<td>7%</td>
<td>188</td>
<td>5%</td>
<td>4</td>
</tr>
<tr>
<td>Trans</td>
<td>132</td>
<td>3%</td>
<td>---</td>
<td>---</td>
<td>15</td>
<td>0%</td>
<td>3</td>
<td>0%</td>
<td>---</td>
</tr>
<tr>
<td>Unknown</td>
<td>7</td>
<td>0%</td>
<td>---</td>
<td>---</td>
<td>4</td>
<td>0%</td>
<td>1</td>
<td>0%</td>
<td>---</td>
</tr>
<tr>
<td>TOTAL</td>
<td>2,352</td>
<td>58%</td>
<td>8</td>
<td>0%</td>
<td>329</td>
<td>8%</td>
<td>205</td>
<td>5%</td>
<td>1,004</td>
</tr>
</tbody>
</table>

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: 05/31/2022 at 12:01:52 AM

Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.
gonorrhea and chlamydia) accounted for 78 (56.9%) of the 137 total tests distributed.

Of individuals ordering a test in April, 32.9% reported never before receiving an HIV test, and 57.7% were 18 to 29 years of age. Among individuals reporting ethnicity, 35.1% were Hispanic/Latinx, and of those reporting sexual history, 65.7% indicated 3 or more partners in the past 12 months. To date, 375 recipients have completed an anonymous follow up survey, with 94.4% 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 (73.3%) or having had more than one sex partner in the past 12 months (62.7%).

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

As of May 31, 2022, the number of ADAP clients enrolled in each respective ADAP Insurance Program are shown below.

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

Test Counselor Trainings for Syringe Services Programs

<table>
<thead>
<tr>
<th>ADAP Insurance Assistance Program</th>
<th>Number of Clients Enrolled</th>
<th>Percentage Change from April</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer Based Health Insurance Premium Payment (EB-HIPP) Program</td>
<td>558</td>
<td>-18.66%</td>
</tr>
<tr>
<td>Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program</td>
<td>6,306</td>
<td>+10.10%</td>
</tr>
<tr>
<td>Medicare Part D Premium Payment (MDPP) Program</td>
<td>2,080</td>
<td>+11.65%</td>
</tr>
<tr>
<td>Total</td>
<td>8,944</td>
<td>+8.06%</td>
</tr>
</tbody>
</table>

In the last five years, the number of SSPs that offer HIV and viral hepatitis point-of-care testing hasn’t matched the increase in the number of programs. In 2017, CA had 38 SSPs; 82% of them offered HIV testing and a similar number offered screening for HCV. Data from 2021 found only 36 of 56 programs currently offer onsite testing. OA has amended the contract with Alliance Health Project to add 56 test counselor training slots specifically for SSP staff. Trainings began in May and will significantly increase point-of-care testing throughout the state.

DHCS Increases Investment in California Emergency Departments to Address Overdose Deaths, Mental Health Crisis

Drug overdose deaths more than doubled in California from 2017 to 2021, Department of Health Care Services (DHCS) has announced $8.5 million in additional funding to the Bridge Navigator Program, which aims to expand the emergency department workforce to address the urgent need for behavioral health patient care. This will increase the number of behavioral health navigators in emergency departments that currently participate in the CA Bridge program and expand the program to new emergency departments across the state.

California Bridge Program
https://cabridge.org/
Behavioral Health Program Info
https://cabridge.org/general/behavioral-health-pilot-project-bhpp/

List of Behavioral Health Program Sites (excel) https://secureservercdn.net/166.62.108.229/1k4.8f5.myftpupload.com/wp-content/uploads/BHPP_Hospital_List.xlsx

Strategy M: Improve Usability of Collected Data

The Supplemental Tables to the California HIV Surveillance Report - 2020 are now available on the OA Case Surveillance Reports page. This report includes statewide summary tables and summary tables by local health jurisdiction of new diagnoses of HIV infection, persons living with HIV infection, and persons classified as Stage 3 (AIDS) by selected demographics and transmission category for 2016-2020. This report provides information supplemental to the California HIV Surveillance Report — 2020.

Strategy N: Enhance Collaborations and Community Involvement

Since 2011, the Kaiser Family Foundation (KFF), through its Greater Than AIDS public information initiative, and Walgreens, have teamed with health departments and HIV service organizations across the nation to provide free HIV testing and information in Walgreens stores in support of National HIV Testing Day (NHTD) on June 27. Over the years, OA has partnered with KFF to encourage our California-based testing organizations to sign up and participate in this event.

To date, more than 72,000+ free HIV tests have been provided through the Greater Than AIDS/Walgreens National HIV Community Partnership (NHCP), including 15,300 self-tests, and even more people have been reached with critical HIV resources.

The NHCP offers a unique public-private model to support communities in their Ending the HIV Epidemic responses. By extending the reach of testing and informational resources in non-traditional settings, the partnership helps normalize conversations about HIV and reach populations most affected by HIV about the latest advances in prevention and treatment.

In 2020 and 2021, the Partnership shifted from in-store testing to HIV self-testing because of COVID-19. Greater Than AIDS and Walgreens, together with OraSure Technologies Inc., donated 15,300+ OraQuick In-Home HIV Tests to nearly 300 HIV organizations and health departments across 39 states to support expanded testing options during COVID-19. A majority of organizations had previously never offered HIV self-testing.

We are happy to announce that the Partnership is returning to in-store HIV testing on June 27, 2022, for National HIV Testing Day. We also want to express our sincerest thanks and gratitude to the folks at KFF and our California-based testing organizations for their ongoing work and participation in this event year after year.

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