

**Office of AIDS
Care and Treatment Program Update
HIV Care Branch and ADAP Section
June 2008**

HIV Care Branch

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Ryan White HIV/AIDS Treatment Modernization Act, Part B Funding

On March 31, 2008, HRSA awarded the Part B Base and ADAP Earmark funds for 2008-2009. OA's award is \$34,867 less than the previous year. Although OA applied for Part B Supplemental funding, HRSA announced that Part B Supplemental funding will not be available for 2008.

Care Program Assessment

The HIV Care Branch is continuing the program assessment to determine how to better administer the programs in a more streamlined less manner. Plans are underway to meet with local service agencies, health departments and clients to discuss barriers and successes experienced locally in accessing adequate care and treatment.

Minority AIDS Initiative (MAI) Continuation Grant Application

On March 3, 2008, HRSA awarded the MAI funds for 2008-2009; OA's award increased by \$33,907 over the past year's award. The MAI funding will continue and expand the Bridge Project, a successful outreach-to-care intervention to increase the number of HIV-positive persons of color who successfully access HIV medical care and ADAP. The target population is minority HIV-positive persons who have never received care, have been lost to care, or are marginally engaged in care.

AIDS Regional Information and Evaluation System (ARIES)

ARIES is an internet-based HIV/AIDS client case management system that assists providers in coordinating the care of their HIV clients while producing state and federal mandated HIV care reports. The statewide installation of ARIES was successfully launched on July 17, 2006, and more providers are being migrated to ARIES each month. The Office has transitioned approximately 60 percent of our contracted HIV care providers over to ARIES. An OA Local Implementation Committee works directly with providers to prepare them for migration to ARIES and continues to offer technical assistance and quality assurance activities post-implementation of ARIES. This Committee is currently working closely with the San Francisco EMA as they prepare for a spring 2008 implementation of ARIES; implementation discussions are also underway with the Orange County and Santa Clara TGAs.

A new release of ARIES is currently being finalized and should be deployed in June. This release of ARIES contains numerous new data entry screens to meet the new

HUD reporting requirements for the Housing Opportunities for Persons with AIDS (HOPWA) program.

Staff is working with WebEx to develop a self-paced series of ARIES training modules which will be available on the Internet. These will not replace the initial one-on-one trainings that providers receive as they first adopt ARIES, but will be useful for refresher trainings and new provider staff.

As of May 28, 2008, the ARIES system contains more than 24,000 unduplicated clients associated with over 1,110,000 services. There are currently 133 providers with almost 800 staff certified to use ARIES.

HRSA Client Level Data Reporting

Starting January 2009, HRSA is requiring all Ryan White funded providers to collect demographic and service data for all clients on an individual-level basis. In the past, HRSA has collected demographic and service data from all providers on an aggregate level (collected via the CADR and new RDR). Client identifiers will not be included in the data submission. HRSA's stated goals for moving to client level data (CLD) reporting are as follows:

- To obtain accurate counts of those individuals served by Ryan White (RW);
- To define performance measures and evaluate progress; and
- To increase grantee capacity to collect system- and client-level data, in order to improve their accountability in reporting.

Over the past year OA staff has participated in two interviews with HRSA to assess our ability to collect and report CLD, including possible training and resource needs. Furthermore, on February 4, 2008, along with other California Ryan White Part A-D Grantees, staff participated in a meeting with HRSA contract staff and provided comments/concerns on the proposed CLD system to HRSA directly at the vetting meeting and followed up by entering comments in the online vetting tool.

As of the end of May, HRSA has not finalized the data collection forms. ARIES is a system that captures individual-level demographic and service data. Once the forms are approved by the federal Office of Management and Budget, ARIES will be modified to meet the new CLD reporting requirements.

In the meantime, in collaboration with two provider agencies in Santa Clara County, OA has agreed to work with HRSA this summer to pilot the CLD process. The pilot will focus on how to unduplicate client data from more than one agency and then, via an electronic process, securely and accurately submit the data to HRSA.

For further information, please contact the OA ARIES Project Lead, Susan Sabatier at Susan.Sabatier@cdph.ca.gov.

CARE Section

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HIV Care Consortia/Care Services Program (CSP)

CSP contracts for fiscal years 2007-2010 are fully executed. In addition to the original contracts for the next 3 year cycle, the CSP program processed and completed 16 additional amendments to those contracts to disburse an augmentation of HRSA and general fund dollars.

CSP notified grantees of their FY 08-09 award and mailed the application guidance for the 08-09 fiscal year for completion. The guidance provides specific assistance to contractors on transmission reduction efforts and prevention with positives activities. The completed application is due to the CSP Advisor by June 1, 2008.

CSP is reviewing and updating the Care Services Administrative Manual to reflect the changes outlined within the reauthorization of the Ryan White HIV/AIDS Treatment Modernization Act of 2006 and other programmatic changes. The anticipated release date is by July 2008 and is delayed from the original May 2008 date due to staffing shortages.

CSP Advisors are continuing to conduct on-site contract monitoring. They completed 23 monitoring visits this fiscal year. CSP Advisors are also working with the California Department of Health Care Services, Audits and Investigations Division to complete audits of selected fiscal agents.

The development of the CSP survey in conjunction with the HOPWA program has been placed on hold. The purpose of the survey is to give all fiscal agents and the service providers an opportunity to convey any technical assistance needs within the programs. The goal of the survey is to gather information to develop an outline for a conference that encompasses the needs expressed in the surveys.

The CSP has hired Myrtle Jones as a new CSP Advisor for the Care Section. Myrtle Jones has over 20 years of experience in state services including experience in contract monitoring, budgets, and other related experience. In addition to learning her new duties as a CSP Advisor, she is performing the critical duties of the vacated fiscal analyst position. We are glad to have Myrtle on board and are in the process of conducting interviews to fill the additional CSP Advisor and the Fiscal Analyst positions.

Housing Opportunities for Persons with AIDS Program (HOPWA)

The HOPWA Application and Guidelines for FY 2008-09 was released to its contractors on May 13, 2008, and is due back to OA by June 23, 2008. The HOPWA allocation for FY 08-09 is \$3,069,000 which is higher than FY 07-08 by \$143,000. In addition, The OA augmented the HOPWA allocation by \$600,000 using unspent and returned funds from prior years.

The draft HOPWA Consolidated Annual Plan for FY 08-09 was released for public comment on April 1, 2008, which outlines for the Department of Housing and Urban

Development (HUD) how HOPWA funds will be allocated during the FY 08-09. The document was finalized for submittal to HUD on May 15, 2008. OA signed a tri-party agreement with HUD and the City of Bakersfield to allow OA to assume the grantee responsibilities for the Bakersfield EMSA which includes the entire County of Kern.

Staff continue to monitor its HOPWA contracts and should have all sites monitored by late Fall 2008.

HUD published revised reporting forms at the end of January 2008 which must be transmitted to all HOPWA contractors. Staff attended report training on May 6-7, 2008, and will send out new reporting forms to its contractors in June 2008.

HUD is in the process of developing a HOPWA Resource Oversight Handbook. Staff postponed revisions to its Administrative Manual until the draft of the HOPWA handbook was released at the HUD training on May 6, 2008. Staff anticipates release of a HOPWA Administrative Manual in late Fall 2008.

Residential AIDS Licensed Facilities Program (RALF)

The RALF Program has completed the execution of all 17 RALF contracts for the contract period of July 1, 2007 to June 30, 2010, and has solicited intent letters from current contractors for the coming 08-09 fiscal year. Award amounts for FY 08-09 are still pending the finalization of the State general fund budget.

The RALF application is in progress and is expected to be completed by June 2008.

The RALF program is recruiting for a housing coordinator. Interviews are anticipated to be conducted by early July 2008. Clarissa Poole-Sims, Care Section Chief, is the interim primary contact for the RALF Program.

Community Based Care Section

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Lorraine Espittallier, who came to us from a non-profit Native American Advocacy organization in Oakland, was hired as a Health Program Advisor (HPA) in March; the section is now fully staffed.

Program Compliance Reviews continue to be conducted. A total of 20 reviews have been conducted to date this fiscal year. Two (2) Case Management Orientations have been conducted and one (1) Project Director Orientation was conducted.

AIDS Medi-Cal Waiver Program (MCWP)

The MCWP document has been amended to reflect the Interagency Agreement between the Department of Health Care Services (DHCS) and the Department of Public Health (CDPH). The DHCS Legal Department has just finalized their review. DHCS will review Legal's comments and CDPH will conduct its final review; the amendment will be submitted to the Center for Medicare and Medicaid Services (CMS) no later than June 30th 2008.

MCWP projects will be facing even more challenges in operating their programs with the 10% reimbursement reductions proposed in the Governor's Budget effective July 1, 2008. It will be more difficult to locate subcontractors for direct care services with the decreased reimbursement rates. The Checkwrite Schedule for the last two weeks in June is also being postponed until after July 1st which will result in cash-flow difficulties for some of the MCWP projects.

AIDS Case Management Program (CMP) Funding Augmentation

The \$3.5 million funding augmentation has been fully allocated to the 44 CMP providers. Amended budgets are currently being processed and all amended contracts have been initiated. Seventy percent of the contracts have been fully executed to date. Once contracts are fully executed, supplemental invoices can be submitted retroactively to July 1, 2007.

Strategies are also being worked on to address the proposed \$400,000 cut in general funds for the CMP in 2008-2009.

CMP/MCWP Annual Conference

Due to budget restrictions, there will not be a statewide conference in 2008. Planning is underway for a Fall Project Directors meeting where guidance will be given on managing reduced budgets and other issues facing the CMP/MCWP projects.

Early Intervention Section (EIS)

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Early Intervention Program (EIP)

The 20th Anniversary EIP Conference was held on April 14th through the 16th in Long Beach. Approximately 275 participants attended the conference, the theme of which was "EIP: Strengthened by Yesterday, Shaping Tomorrow." The conference evaluations were extremely positive, emphasizing that the conference was well organized and that all of the breakout sessions were informative. Eighty (80) participants received continuing education units (CEUs).

Fiscal Year 2008-09 Award Letters (2nd Amended) were mailed out to all EIP projects on May 29th. These letters reflect reductions required due to the shortfall in state General Funds and/or adjustments made due to changes in federal funding.

Positive Changes and Pathways

All newly hired Pathways Counselors and Positive Changes Risk Reduction Specialists attended a three-day training session on Spiritual Self-Schema conducted by Paul Simons of the Yale University Department of Psychiatry. Participants had the option of attending the training in Sacramento from March 19th through the 21st, or in Anaheim from March 26th through the 28th.

On April 1st, Dr. Neva Chauppette provided consultation to EIS staff on mental health and substance abuse issues that will be addressed through the Pathways program.

Therapeutic Monitoring Program (TMP)

Applications for FY 2008-09 vouchers were mailed out in April to OA-funded EIP sites and local health jurisdictions. As is typical, the requests for vouchers well exceeded the available funding of \$3,700,000; the requests totaled \$7,746,000.

An assessment was made of the use of viral load and resistance test vouchers during the Fiscal Year (FY) 2007-08 period. As a result of this review, 1,681 unused TMP vouchers were returned to OA and approximately 50 percent (854) were successfully redistributed to sites.

AIDS Drug Assistance Program (ADAP) Section

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AIDS Drug Assistance Program Unit

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Medications Added to ADAP Formulary

Etravirine

Etravirine, a new ARV in the existing class of medications known as Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTI), has been added to the ADAP formulary effective February 22, 2008. This medication has a unique resistance profile which may offer potential benefits to clients with resistance to the currently available NNRTIs. This medication will be used in combination with other ARV agents.

Tibotec recently received FDA approval for a 600mg tablet formulation of darunavir (Prezista™). ADAP is currently in the process of adding this formulation to the formulary.

ADAP continues to provide assistance to eligible clients with certain out-of-pocket costs associated with Medicare Part D for the 2008 plan year. ADAP recognizes that Medicare Part D can be confusing to clients since it is a complicated benefit and plans can change significantly each year requiring clients to review the materials carefully to ensure their prescription needs will be met.

CARE/HIPP UNIT

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Medicare Part D

The second year of the ADAP/Medicare Premium Payment Program is well underway. As of May 31, 2008, close to 800 ADAP clients have been approved, and approximately \$277,000 has been expended for calendar year 2008.

CARE/HIPP

Since the beginning of the new fiscal year, April 1, 2008, CARE/HIPP has paid \$275,000 in premiums for approximately 365 clients. Staff are currently developing a training module to use for training local Benefits Counselors. Training will begin in June 2008 for enrollment sites with large client populations and will be rolled out to the remaining enrollment sites later this year.