

**HIV Care Branch and ADAP Section
September, 2006**

HIV Care Branch

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Title II Guidance

The guidance for development of the Title II application for HRSA RWCA funding was received. OA staff is currently working on development of the Title II application, which helps to fund ADAP, CARE/HIPP, Case Management Program, Care Services/HIV Care Consortia Program and a variety of other HIV care/treatment-related activities.

Ryan White CARE Act Reauthorization

Before the Senate adjourned on September 30, 2006 at 2:30 am, the leadership was unable to pass HR 6143, the "Ryan White HIV/AIDS Treatment Modernization Act of 2006." Congress will return in November for a lame duck session at which time the bill will most likely be brought to the Senate floor again.

AIDS Regional Information and Evaluation System (ARIES)

The statewide installation of ARIES was successfully launched on July 17, 2006. As part of the initial launching, the data in San Bernardino's ARIES installation was transferred to the state system, and San Bernardino's installation was shut down. Similarly, the transfer of data from San Diego's ARIES installation to the state system occurred August 14, 2006. Selected staff from twelve pilot providers--including OA's CARE/HIPP program--were trained on ARIES in July and August 2006. Data from two other legacy systems (COMPIS for EIP and Carebase for CMP) have been successfully converted into ARIES, with those providers now using ARIES. OA staff just completed developing the CAREWare conversion program, and the first conversion will occur by the end of September. The OA ARIES working group is currently evaluating the pilot phase, and creating a matrix to prioritize the rollout of ARIES to our remaining providers.

As of September 8, 2006, the ARIES system contains over 5,200 unduplicated clients associated with almost 110,000 services. There are currently 28 providers with 352 users registered to use ARIES.

The four ARIES partners (California Title II, Texas Title II, San Bernardino Title I, and San Diego Title I) gave a well-attended ARIES Panel Presentation at the All Titles Meeting on August 31, 2006. Additionally, they staffed a booth at the exhibit hall, and provided a demonstration CD to others interested in adopting a system to collect and manage client level data.

For further information, please contact your program representative or Denise Absher at dabsher@dhs.ca.gov, Elizabeth Brannon-Patel at ebrannon@dhs.ca.gov, or Susan Sabatier at ssabatie@dhs.ca.gov.

Care Section

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HIV Care Consortia/Care Services Program (CSP)

As of October 2, 2006, Teresa Lauchaire, the CSP fiscal analyst will transition to the role of CSP advisor. Davonna McClendon will replace Teresa as the fiscal analyst. Contracts will be reassigned now that CSP is fully staffed.

All CSP budgets for Fiscal Year 2006-07 were approved in late June. As of September 25, 2006, most (76%) of the contract amendments for FY 2006-07 have been fully executed.

CSP issued guidance to fiscal agents for developing their Service Delivery Plans for FYs 2007-10. The guidance is available on the Office of AIDS (OA) website. CSP advisors have attended some advisory group meetings to discuss planning and are available to provide technical assistance as needed. The plans are due January 29, 2007.

CSP has been participating on the OA ARIES (AIDS Regional Information and Evaluation System) Implementation Workgroup. CSP advisors have been contacting fiscal agents to assess their interest in using ARIES and to remind services providers to collect clients' middle initial and mother's maiden names (see Management Memo 06-04 for more details). Four CSP counties (San Bernardino/Riverside, Santa Clara, Solano, and Santa Cruz) participated in the ARIES pilot phase that started in July.

CSP advisors are continuing to conduct on-site contract monitoring and working with the California Department of Health Services, Audits and Investigations Division, to complete routine audits of selected fiscal agents.

Housing Opportunities for Persons with AIDS Program (HOPWA)

The HOPWA program is in the process of submitting the Consolidated Annual Performance and Evaluation Report (CAPER) to Housing and Urban Development (HUD). The final document is being prepared for submittal to HUD no later than September 30, 2006. HUD issued new reporting elements which must be implemented beginning July 1, 2006. OA staff has developed the reporting tools and provided training to all HOPWA sponsors/contractors. Staff will begin monitoring of the highest need contracts beginning October 2006. Staff is working with the ARIES team to develop the HOPWA component of the data system.

Residential AIDS Licensed Facilities Program (RALF)

The RALF program is working with the Contracts Management Unit to execute the amendments for the FY 2006-2007 allocations. Year end reports are due to the Office of AIDS and notification will be sent to those facilities funded by the RALF program.

Community Based Care Section

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New Staff

CBC Section is in the final stages of filling an Associate Governmental Program Analyst (AGPA), and Nurse Consultant II position within the Program Support Unit. Both positions will be assigned to monitor and support activities for CMP and MCWP contractors.

Medi-Cal AIDS Waiver (MCWP) Program

Waiver Renewal: The process of applying for the five-year renewal of the Medi-Cal AIDS Waiver for case management is continuing. The current Waiver expires at the end of calendar year 2006. Medi-Cal Operations staff, federal Region IX staff, and CMS staff in Baltimore have been working on the Waiver renewal draft and the document will be submitted by September 29, 2006. This submission will begin the 90 day clock for federal review

Evidentiary Report: This report to CMS is an assessment of the Waiver for the current five-year authorized period and examines six basic "assurances" or important principles of the MCWP. It was submitted to CMS in September 2005 and they responded with three pages of questions. OA sent a draft of our responses back to MCPD and also discussed these responses with CMS. The final report was sent to CMS on April 17, 2006, and to date, CMS has not provided a written response to the state.

Medi-Cal Billing Codes: Program staff has reviewed the alternative codes provided by Office of HIPAA Compliance (OHC). Program made decisions on best choice of codes and forwarded the selections to OHC on April 18, 2006. OHC is working with the Payment Systems Division to identify if any of the selected codes are currently being used by Medi-Cal. Once the results have been retrieved and analyzed, OHC will send the result and final proposed strategy for initiation of the policy. Fiscal, and system/operational impact assessments have been completed. OHC will convene a final code conversion strategy meeting in the near future.

Disease Management (DM) Pilot for HIV

Medi-Cal Policy Division within the Department of Health Services continues to work on the Disease Management I pilot specifically for HIV. This program would test the efficacy of a managed care program for fee-for-service HIV/AIDS clients. The CBC Section and other OA staff continue to meet with representatives from the Medi-Cal Benefits Branch (MBB) to discuss questions and concerns regarding such a pilot. The services offered under this proposed pilot are not beyond what is currently offered under the MCWP and if a person is in a case management program, such as MCWP, they will not be eligible for this new DM program. Department attorneys are examining issues relating to confidentiality. An RFP will be going out soon, with a stakeholders meeting planned by Medi-Cal to gather input regarding the best model to use, geographic focus, etc. OA sent a mailing list of HIV program contacts to MBB.

Fall Project Directors Meeting

Planning for the fall Project Directors (PD) Meeting is underway. This meeting will be held immediately prior to the CMP/MCWP Annual Conference. PD's will be given the opportunity to discuss issues in relation to their regional physical location in the state: Northern California, Central California, and Southern California.

CMP/MCWP Annual Conference

Final planning continues on the 2006 Statewide Conference which will be held in Concord, CA in October. This year's theme is, "*Looking Back, Moving Forward*". Attendees include Project Directors, Nurse and Social Work Case Managers, Case Aides, and other CMP/MCWP staff. The conference steering committee, made up of various CMP/MCWP staff from projects around the state and CBC staff, continues to work with program sponsors and coordinators. Nineteen speakers, including Jeanne White-Ginder, the mother of Ryan White, have been secured for presentations and breakout sessions. Various conference activities have been scheduled. The steering committee will be meeting and holding conference calls several more times prior to the actual conference.

Program Operations Manual (POM) and Joint AIDS Case Management Protocols (JACMP)

The POM is a manual that describes and explains the overall program operations of the CMP/MCWP. This manual is utilized mostly by Project Directors. The JACMP is a manual that describes the day-to-day case management standards for the CMP/MCWP, and is utilized mostly by nurse and social work case managers, case aides, and other CMP/MCWP staff. The two manuals are now officially available to providers and contractors on the OA Website.

Early Intervention Section (EIS)

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Early Intervention Program (EIP)

A statewide meeting for EIP Project Directors was held in Sacramento on August 15, 2006. The meeting was focused on the transition from the current data collection system (COMPIS) to ARIES, including programmatic as well as technical implications. New client assessment forms were distributed, and other programmatic issues were discussed.

Positive Changes

Positive Changes has received continued OA funding for the three-year contract cycle beginning in FY 07-08.

Risk Reduction Specialists (Positive Changes site staff) are assisting in the development of a risk assessment hierarchy to assist case managers and other service providers in determining likelihood of HIV transmission risk. In addition, some Positive Changes sites will be involved in an upcoming study examining the incidence of serious mental health disorders and barriers to mental health care for HIV-positive persons.

Bridge Project and Bridge 'Understanding Barriers to Care' Study

The Bridge Project has received continued OA funding for the three-year contract cycle beginning in FY 07-08.

A new article about the Bridge Project, "Locating and Linking to Medical Care HIV-positive Persons without a History of Care," was published in the July, 2006 edition of the journal, AIDS Care.

The protocol and data collection instruments for the Bridge Project's "Understanding Barriers to Care" study have been finalized, and on-site trainings are currently being conducted for each EIP/Bridge Project site taking part in the study. The project is a collaboration between the Office of AIDS and the University of California San Diego Division of International Health and Cross-Cultural Medicine, and it is designed to assess reasons why some individuals living with HIV do not access medical care.

Early Intervention Program Evaluation

Study protocols and questionnaires for the evaluation of the Early Intervention Program have been completed and reviewed by both OA and EIP site staff. Final procedures and a start-up date for the pilot evaluation, involving EIP sites in Long Beach, Orange, Los Angeles, San Bernardino, and Santa Clara, will be determined in October.

Statewide Treatment Education Training Request for Applications (RFA)

An RFA for the Statewide Treatment Education Training Program, for Fiscal Years 2006-2009, was distributed to all interested parties on March 21, 2006. Three applications were reviewed, and on May 31, 2006, the contract was awarded to Asian Pacific Islander Wellness Center in San Francisco. This organization will provide Treatment Educator Certification training in English and Spanish throughout the state as part of their California Statewide Treatment Education Program (CSTEP). A description of classes and services can be found at www.cstep.org.

Therapeutic Monitoring Program

For FY 2006-07, statewide requests for viral load and resistance test vouchers were 51,229 and 3,592 respectively. The program released an initial supply of vouchers to state-funded Early Intervention Project (EIP) sites and to Local Health Jurisdictions (LHJ) as follows:

- 24,912 viral load test vouchers

 - 1,274 genotypic vouchers

 - 406 phenotypic vouchers

Some EIPs and LHJs have reported that they have already exhausted, or are close to exhausting, their initial supply of vouchers (which should have lasted approximately 8 months) in the first quarter of the fiscal year. OA will conduct the mid-year assessment process earlier than the planned date of February 2007. The process requires LHJs and EIPs to identify any unused vouchers to be returned to OA for redistribution to other LHJs and EIPs that identified a need for additional vouchers through the same mid-year assessment process.

AIDS Drug Assistance Program (ADAP) Section

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AIDS Drug Assistance Program Unit

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ADAP and Medicare Part D

Currently, ADAP assists eligible clients who are also Medicare Part D beneficiaries by paying deductibles, prescription co-pays, and co-insurance. Effective January 2007, ADAP will also begin paying Part D premiums for ADAP clients. In conjunction with the insurance continuation program, CARE/HIPP, we are in the design stages of setting up a system to begin accepting applications for 2007 premium payment assistance by the next open enrollment period.

New Drugs Added to Formulary

In July, ADAP added two new drugs to its formulary. Prezista or TMC-114, is the latest protease inhibitor approved by the Food and Drug Administration (FDA) and was added to the ADAP formulary effective July 1, 2006. Prezista offers an important alternative for treating individuals who have developed resistance to other drugs in this class. Prezista must be taken twice a day with a low dose of ritonavir and in combination with other antiretroviral (ARV) agents. Prezista is not approved for people who are starting ARV treatments for the first time.

Effective July 17, 2006, Atripla, the first ever once-daily single tablet regimen, was also added to the ADAP formulary. The addition of these two drugs brings the total number of drugs on the formulary to 156.

CARE/HIPP UNIT

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CARE/HIPP Staff and Medicare Part D

The Budget Act of Fiscal Year 2006-07 included authority for three new positions in the CARE/HIPP program. These staff will work on expanding the CARE/HIPP program to include payments for health insurance premium for ADAP clients who are eligible for Medicare Part D. The expansion of the program will enable ADAP clients to continue to receive their HIV medications without out-of-pocket costs and without interruption of life saving therapies. An internal workgroup consisting of ADAP and CARE/HIPP staff has been established and it is anticipated that the Medicare Part D premium payment system will be implemented by January 1, 2007.