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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.

Staff Highlight:

OA is pleased to welcome **Melissa Gutierrez**, a Bilingual Client Services Technician/Program Technician (PT) II with the AIDS Drug Assistance Program (ADAP) Client Services Unit (CSU). Melissa comes to OA from Health Now Administrative Services, where she worked for more than five years as a Bilingual Customer Service Representative. There she handled a high volume of incoming calls from clients and healthcare providers regarding healthcare claims, as well as medical, dental and vision care benefits. Additionally, she assisted with training and escalated calls. Prior to that, Melissa spent three years as an Administrative Assistance, taking and routing incoming calls, coordinating calendars and events, and processing incoming invoices. She will be a great asset to our team! Melissa will be working with the rest of the CSU Team to assist ADAP and PrEP-AP clients, Enrollment Workers, providers, and pharmacies, and to help resolve eligibility issues for our programs.

On a personal note, Melissa is married and mom to son, Noah, who is 2 years old, and has another baby boy, Jonathan, on the way (CONGRATULATIONS!). She loves plants, especially succulents and cactuses, and she loves to dance... But most of all she loves spending time with her family.

OA would also like to introduce **Juanita Moses**



and **Rem Melton** to the ADAP Branch within the Eligibility and Operations Section. They are our two newest ADAP Advisors!

Juanita Moses has worked in OA for over three years as a Supervising Program Technician II in the ADAP Client Services Unit and was recently promoted within ADAP. She was responsible for a team of Program Technicians and worked directly with clients to resolve escalated issues. Prior to working in ADAP, Juanita worked at the California Health Benefits Exchange and the Department of Social Services (DSS). In her position at the California Health Benefits

Exchange, she processed enrollments, terminations, and appeal claims in a high call volume setting. During her employment at the DSS, she was responsible for responding to inquiries from providers regarding In-Home Support Service payroll issues, subpoenas, liens, and garnishments. Juanita earned a Bachelor's degree in Psychology from Benedict College and she completed a Senior Thesis on The Rise of HIV/AIDS in the African American Communities, and the article was published! Outside of work, Juanita enjoys spending time with her 12-year-old son and loves wine.

Rem Melton is new to OA and comes to us from the California Public Employees Retirement System (CalPERS). In his position at CalPERS, he assisted members with questions regarding their retirement and health coverage. Prior to CalPERS, Rem worked at the Department of Rehabilitation where he assisted persons with disabilities find and retain employment. He also worked at the Department of Transportation as a Fiscal Analyst and at the Water Resources Control Board as a Programmer. Additionally, Rem volunteered for over three years at Magnet, an HIV and STD testing site, working closely with clients by answering questions regarding HIV testing. Rem earned his Master's degree in History from San Francisco State University and his Bachelor's degree in Business Administration with an emphasis on Information Systems from California State University, Fullerton. On a personal note, Rem has an interest in history, including the history of epidemics. He also enjoys biological anthropology, gin rummy, and all Harry Potter movies.

HIV Awareness:

October 15 National Latino AIDS Awareness Day:

National Latino AIDS Awareness Day (NLAAD) recognizes and addresses the disproportionate impact of HIV in the Hispanic and Latinx communities. On the last day of Hispanic Heritage Month, NLAAD aims to raise awareness

of HIV/AIDS and encourage the use of prevention and treatment options in the Hispanic and Latinx communities. NLAAD encourages everyone to learn the facts about HIV, get tested for HIV, and if diagnosed get into and remain in care.

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.

Racial Justice and Health Equity:

OA convened their Racial and Health Equity (RHE) workgroup in September that featured a presentation from our newly appointed Health Equity Liaison who will assist OA with continuing our RHE goals to normalize conversations about race and racism, organize information sharing tools to embed health equity and operationalize equity best practices and strategies in policies, programs and services.

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, to stay informed.

Ending the HIV Epidemic:

The first data submission for PS20-2010 Ending the Epidemics was completed for the time period of January 1, 2021 – June 30, 2021.

OA submitted data on behalf of the 6 California Consortium counties to CDC, sharing the number of tests ordered through the Building Healthy Online Communities (BHOC) Take Me Home self-test program (n = 807), as well as demographics of participants. Additionally, information on Syringe Service Programs (SSPs) operating in the counties during this time period were reported. This data submission, due September 15, 2021, covered the first half of the calendar year; the next data submission will be due March 15, 2022, and will cover the entire 2021 calendar year. We anticipate being able to report additional data in 2022 as the counties of the California Consortium will be initiating more of their activities during the second half of 2021.

Help Make Us Better!

You can help make OA better by sharing your ideas for improving stakeholder experiences, reporting any issues, or simply asking questions of our Branch teams. Use one of the three options below to share your question, suggestion, or concern.

ask it

By clicking on the “ask it” button above, you’ll have the ability to ask a question of any of our Branch teams in OA - and you’ll get a response within five to seven business days. Note: If your question is not directed to a specific Branch, your question will be triaged to the most appropriate Branch team to be answered.

fix it

By clicking on the “fix it” button above, you’ll be able to report any items on this webpage or in OA that need to be fixed or corrected. While the resolution time will depend on the issue, in general, this channel is suitable for small problems that require prompt attention.

suggest it

By clicking on the “suggest it” button above, you’ll have the ability to provide feedback or ideas to help improve OA to positively affect the way we work together with stakeholders in providing services to Californians. Please note that every idea - no matter how big or small - will be reviewed. Individuals are encouraged to contribute suggestions often, and while every idea will be considered, it is important to know that it may not be possible to implement every suggestion.

You can access the “suggestion box” at the bottom of [our webpage](https://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx) at <https://www.cdph.ca.gov/programs/cid/doa/pages/oamain.aspx>.

Go ahead and try it out!

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

PrEP-Assistance Program (AP):

As of September 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 three tables displayed on page 4.

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 | 350 | 8% | --- | --- | --- | --- | 85 | 2% | 435 | 10% |
| 25 - 34 | 1,310 | 29% | 2 | 0% | --- | --- | 466 | 10% | 1,778 | 39% |
| 35 - 44 | 1,005 | 22% | --- | --- | 3 | 0% | 303 | 7% | 1,311 | 29% |
| 45 - 64 | 638 | 14% | 2 | 0% | 20 | 0% | 184 | 4% | 844 | 19% |
| 65+ | 35 | 1% | --- | --- | 148 | 3% | 8 | 0% | 191 | 4% |
| TOTAL | 3,338 | 73% | 4 | 0% | 171 | 4% | 1,046 | 23% | 4,559 | 100% |

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

| Current Age | Latinx | | American Indian or Alaskan Native | | Asian | | Black or African American | | Native Hawaiian/ Pacific Islander | | White | | More Than One Race Reported | | Decline to Provide | | TOTAL | |
|--------------|--------------|------------|-----------------------------------|-----------|------------|-----------|---------------------------|-----------|-----------------------------------|-----------|--------------|------------|-----------------------------|-----------|--------------------|-----------|--------------|-------------|
| | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % |
| 18 - 24 | 202 | 4% | --- | --- | 40 | 1% | 32 | 1% | 1 | 0% | 133 | 3% | 7 | 0% | 20 | 0% | 435 | 10% |
| 25 - 34 | 938 | 21% | 4 | 0% | 192 | 4% | 101 | 2% | 4 | 0% | 446 | 10% | 16 | 0% | 77 | 2% | 1,778 | 39% |
| 35 - 44 | 842 | 18% | 2 | 0% | 87 | 2% | 66 | 1% | 1 | 0% | 262 | 6% | 3 | 0% | 48 | 1% | 1,311 | 29% |
| 45 - 64 | 567 | 12% | 2 | 0% | 38 | 1% | 27 | 1% | 3 | 0% | 191 | 4% | --- | --- | 16 | 0% | 844 | 19% |
| 65+ | 41 | 1% | 1 | 0% | 3 | 0% | 2 | 0% | --- | --- | 144 | 3% | --- | --- | --- | --- | 191 | 4% |
| TOTAL | 2,590 | 57% | 9 | 0% | 360 | 8% | 228 | 5% | 9 | 0% | 1,176 | 26% | 26 | 1% | 161 | 4% | 4,559 | 100% |

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

| Gender | Latinx | | American Indian or Alaskan Native | | Asian | | Black or African American | | Native Hawaiian/ Pacific Islander | | White | | More Than One Race Reported | | Decline to Provide | | TOTAL | |
|--------------|--------------|------------|-----------------------------------|-----------|------------|-----------|---------------------------|-----------|-----------------------------------|-----------|--------------|------------|-----------------------------|-----------|--------------------|-----------|--------------|-------------|
| | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % | N | % |
| Female | 427 | 9% | --- | --- | 5 | 0% | 13 | 0% | --- | --- | 16 | 0% | --- | --- | 3 | 0% | 464 | 10% |
| Male | 2,026 | 44% | 9 | 0% | 336 | 7% | 212 | 5% | 9 | 0% | 1,137 | 25% | 23 | 1% | 149 | 3% | 3,901 | 86% |
| Transgender | 130 | 3% | --- | --- | 14 | 0% | 3 | 0% | --- | --- | 10 | 0% | 3 | 0% | 2 | 0% | 162 | 4% |
| Unknown | 7 | 0% | --- | --- | 5 | 0% | --- | --- | --- | --- | 13 | 0% | --- | --- | 7 | 0% | 32 | 1% |
| TOTAL | 2,590 | 57% | 9 | 0% | 360 | 8% | 228 | 5% | 9 | 0% | 1,176 | 26% | 26 | 1% | 161 | 4% | 4,559 | 100% |

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: 9/30/2021 at 12:01:23 AM Data source: ADAP Enrollment System. Site assignments are based on the site that submitted the most recent application.

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) (<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 12 months, between September 1, 2020 and August 31, 2021, 1993 tests were distributed, including 177 tests distributed in August. Of those ordering a test in August, 40.1% reported never before receiving an HIV test, and 51.4% were 18 to 29 years of age. For individuals reporting ethnicity, 32.7% were Hispanic/Latinx, and of those reporting sexual history, 61.3% indicated 3 or more partners in the past 12 months. To date, 285 recipients have filled out 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 (75.4%) or having had more than one sex partner in the past 12 months (59.0%).

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

ADAP's Insurance Assistance Programs:

As of September 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

Naloxone - What You Need to Know:

California Bridge created a [flyer about naloxone](#) and details how to administer naloxone in the case of an opioid overdose. **Distribute this flyer to clients and patients along with naloxone kits!**

California's Syringe Services Programs Receive Increased Clearinghouse Awards:

The 2021-2022 state budget included a \$3 million-dollar annual increase in the OA Harm Reduction Supply Clearinghouse. As a result, OA will significantly increase supplies funding for every SSP. OA also plans to offer to pay for

| ADAP Insurance Assistance Program | Number of Clients Enrolled | Percentage Change from August |
|---|-----------------------------------|--------------------------------------|
| Employer Based Health Insurance Premium Payment (EB-HIPP) Program | 576 | -0.17% |
| Office of AIDS Health Insurance Premium Payment (OA-HIPP) Program | 6,484 | -0.64% |
| Medicare Part D Premium Payment (MDPP) Program | 2,034 | -0.29% |
| Total | 9,094 | -0.53% |

disposal services for local health departments that operate SSPs, which we have not been able to do to date, and to expand the Clearinghouse catalog to include additional wound care and other high priority items. Each program participating in the Clearinghouse received an award letter with the enhanced amount on September 2nd.

Translated Patient Materials for Substance Use Disorders:

California Bridge created [patient-facing resources](#) in some of California's most spoken languages. Materials include harm reduction discharge information and medicines for treating opioid use disorder.

NEXT Distro Resource Page:

NEXT Distro provides mail-based harm reduction supplies and services for Californians living in communities with minimal to no access to services. Their new [educational resources library](#) includes topics specific to safer drug use and covers a wide range of topics from gender identity and parenting to drug user organizing. Share this resource with service providers in your jurisdiction.

Stigma & Drug Use Impacting Pregnant People Seeking Care:

California congenital syphilis rates continue to increase during the pandemic. Many women who give birth to babies with syphilis have had no prenatal care, often use drugs and are often homeless.

In L.A. County, up to two-thirds of mothers of babies born with congenital syphilis said they had been using drugs while pregnant, according to the Department of Public Health. Between 10% and 20% were unhoused and almost 30% had a history of arrest or incarceration. Forty percent never got prenatal care, which

can prevent transmission of syphilis during pregnancy.

Many syphilis cases reported in women of reproductive age have affected Latina and Black/African American women. The fears that women express that prevent them from seeking prenatal care include the removal of children by the Department of Children and Family Services and of being criminally charged for lost pregnancies due to the presence of drugs.

Read more at the following resources:

- <https://www.latimes.com/california/story/2021-09-20/massive-surge-babies-born-with-syphilis-la-county>
- <https://www.cdc.gov/mmwr/volumes/68/wr/mm6806a4.htm?emci=747dee41-671d-ec11-981f-0050f271a1a2&emdi=688979c1-a71f-ec11-981f-0050f271a1a2&ceid=9301331>

Strategy M: Improve Usability of Collected Data

The Federal Ending the Epidemic counties are developing their evaluation and monitoring plans based on CDC requirements. Similar data will be collected for CDC PS20-2010 as is collected for CDC PS18-1802. Major milestones are tracked by the CDC and can be viewed on the [AHEAD Dashboard](#) at <https://ahead.hiv.gov/>.

OA, in conjunction with the Women's Subcommittee of the California Planning Group (CPG), developed an infographic entitled, ***HIV and Women*** in both [English](#) and [Spanish](#). The infographic includes 2019 data on new HIV diagnoses among cisgender and transgender women, as well as information on PrEP and U=U. There are QR-Codes and links to HIV Care and Treatment, Housing, and Domestic Violence resources. It is intended for distribution by local health departments and community service providers to clients/patients.

Strategy N: Enhance Collaborations and Community Involvement

California Planning Group - HIV, STD, Hepatitis C, and Harm Reduction:

OA and the CPG will host a four-day virtual CPG meeting on October 6, 8, 13, and 15. This virtual format will be comprised of four separate Zoom meetings scheduled from 1:00PM to 4:00PM. On October 6, we will host our fourth CPG Leadership Academy, which will focus on skills and capacity building for CPG members. All subsequent meetings will be open to the public, and will provide a 10-minute opportunity for

public comment each day. Members of the public are encouraged to attend to learn what the CPG is currently working on and find out how they may join our HIV & Aging, Youth, and Women's Committees.

[Additional meeting information, zoom links, and agenda](https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_CPG.aspx) are posted on the OA website at https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_CPG.aspx.

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