

**NVH Consortium Meeting
December 3, 2015
Summary Minutes**

Wade Menear, Vice-Chair, opened the meeting in the NVRC main conference room.

ANNOUNCEMENTS:

Gerald Padmore, Outreach Program Administrator at Inova Juniper, announced that the Gay Men's Health Collaborative will host a reception and documentary viewing of "It Takes A Village - A Crew Story". This film showcases the work of the Gay Men's Health Collaborative to empower young gay, bisexual, and same-gender-loving men of color ages 18-34 in Northern Virginia. It will take place Thursday, December 10, 2015 from 7-9 p.m. at the Angelika Film Center and Cafe.

Nechelle Terrell, the Chair of the Consortium, will be on sick leave and out of the office from late December through early January.

PLWH/A OPEN MIKE

Mike Hughes reported on the actions of the Metropolitan Washington EMA Ryan White Planning Council in disbanding the subregional PLWH/A committees and substituting a regional committee that will rotate between DC, suburban Maryland and suburban Virginia each month.

Motion to Reinstitute Northern Virginia PLWH/A Meetings

Mike Hughes moved that the Consortium reinstitute monthly PLWH/A meetings with reimbursement for transportation expenses. The motion was seconded and adopted unanimously.

MINUTES OF NOVEMBER 16, 2015

The minutes of November 16, 2015 were approved as submitted.

PRESENTATION OF A RECENT STUDY ON NEEDLE EXCHANGE

Monica S. Ruiz, PhD, MPH, Dept. of Prevention and Community Health at the George Washington University Milken Institute School of Public Health discussed her recent study of impact of rescinding the ban on needle exchange programs in the District of Columbia. They found 176 new HIV infections in the District associated with IDU (intravenous drug use) between September 1996 and March 2010. They estimated that if historical trends had continued, there would have been 296 new IDU-associated HIV infections in the District during that same time. One of their surprising findings was that many of the injecting drug users were using illegally-obtained prescription medications. The study concluded that changing public policy and funding aggressive needle exchange programs in combination were very effective in reducing the rate of new infections and saving approximately \$45.6 million in HIV treatment costs.

SMALL GROUP BRAINSTORMING RE: 2016 GOALS OF THE SUBURBAN VIRGINIA HIV/AIDS SERVICE DELIVERY PLAN

Four experienced members of the Consortium each led a small group of fellow members in reconsidering the goals of the 2012-2013 regional HIV/AIDS Service Delivery Plan. They factored in the new 2020 National HIV/AIDS Strategy call for even better integration of all HIV/AIDS services funded through the Ryan White CARE Act Parts A, B, C, D, and MIA; HUD's (federal Department of Housing and Urban Development) HOPWA (Housing Opportunities for Persons with AIDS) program; and US Centers for Disease Control for

prevention activities; and public health epidemiology. The impact of the Affordable Care Act and accomplishments since 2012 were also factored in.

The reports of the four groups to the meeting were consolidated by Tim Agar into a single report that will be used as the basis for compiling the goals of a final draft of the *2016 Suburban Virginia HIV/AIDS Service Delivery Plan*. This draft will be presented to the Consortium at its meeting January 7, 2016.

VIRGINIA DEPARTMENT OF HEALTH UPDATES

Logan Dickens, HIV Services Coordinator, reported that, as of December 1, 2015 there are 1,657 Northern EMA clients enrolled in Virginia ADAP (AIDS Drug Assistance Program):

- 497 Direct (traditional) ADAP;
- 109 MPAP (Medicare Part D);
- 200 ICAP (Insurance Continuation); and
- 851 HIMAP (Health Insurance Marketplace Assistance Program aka ACA-- Affordable Care Act insurance paid for ADAP clients by VDH).

VDH has a goal of enrolling 800-1000 new clients in ACA plans but the 851 above is primarily re-enrollments. VDH requests that all provider agencies participate in their weekly calls to provide timely feedback on ACA enrollment and needs for additional assistance.

Eligibility criteria for the Virginia AIDS Drug Assistance Program (ADAP) Hepatitis C/HIV Co-Infected Treatment Assistance Program has been updated. The criteria of “2 Detectable HCV Viral loads at least 6 months apart”, now reads as “By provider report, client has chronic Hepatitis C infection with at least one detectable HCV RNA quantitative assay within the last 6 months.” VDH is also finalizing a HCV/ HIV Co-infected flyer that will be distributed in client medication bags. For more details regarding the Hepatitis C/HIV Treatment Assistance Program and the application process, please contact Daniela Isayev, ADAP Operations Specialist, at (804) 864-7646 or daniela.isayev@vdh.virginia.gov.

ACA ENROLLMENT

Jan Reitman of Virginia Health Options reported that because there are more options available under ACA, enrollment interviews are longer, averaging 2 hours this year. All clients should be reminded of the list of required documents to bring to enrollment interviews. The Marketplace ID and password from 2015 are particularly important.

UPCOMING MEETINGS

Consortium January 7, 2016 at NVRC from 10:00 a.m. – 12 noon.

Minutes Approved as Written With Corrections

Tylee S. Smith 1/7/16
Tylee Smith Date