

Ending the Epidemic in New York State

**Federal AIDS Policy Partnership
March 4, 2015**

The momentum already exists

New York

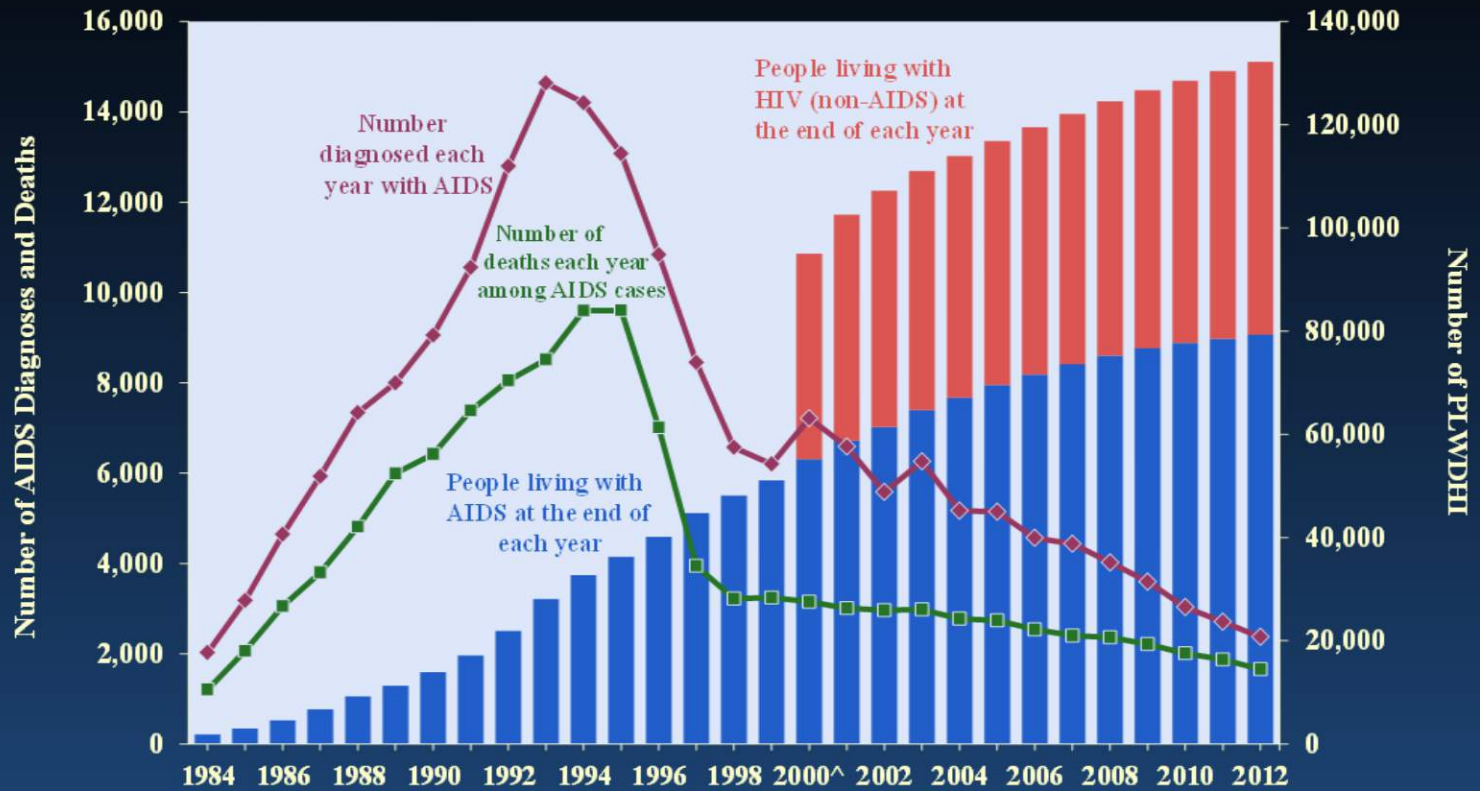


NYS is a center of HIV activism, community/government collaboration and innovation. While the nation as a whole has seen no decrease in the number of HIV diagnoses,

- 🚫 Over the last decade New York State has achieved a 40 percent reduction in new HIV cases and significant decreases in HIV incidence across all categories of race, ethnicity, gender, age and risk.
- 🚫 79% reduction in newly diagnosed AIDS cases between 1993 and 2010.
- 🚫 Elimination of HIV transmission via blood products.
- 🚫 Elimination of mother to child HIV transmission (per CDC's definition).
- 🚫 Decreased new HIV diagnoses due to injection drug use by 96% since the mid '90s.

Trends in HIV and AIDS Cases*

New York State, 1984 - 2012

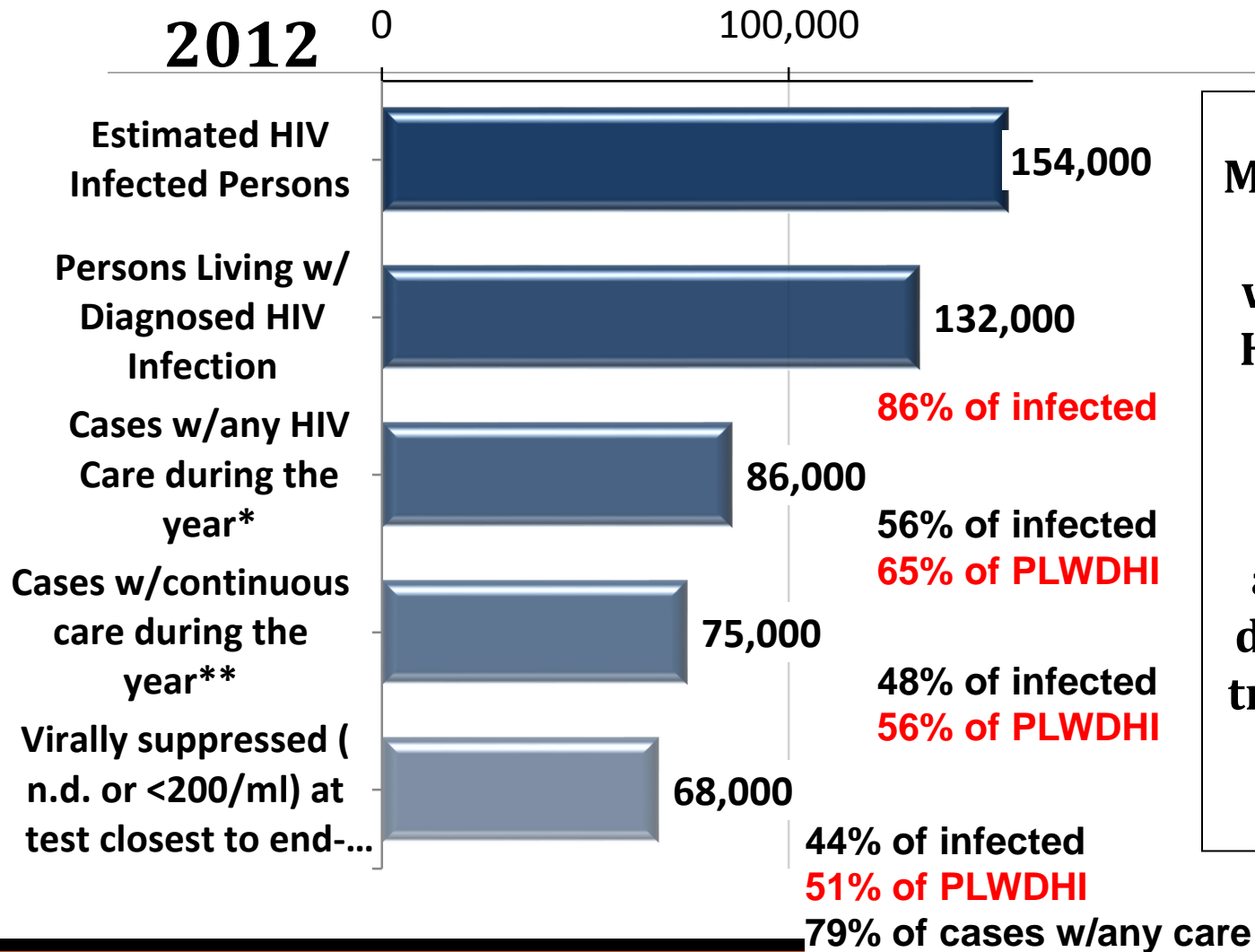


*Data as of April 2014

^HIV named reporting began in NYS in 2000

NYSDOH/AI/BHAE

What is the status of HIV treatment in New York State?



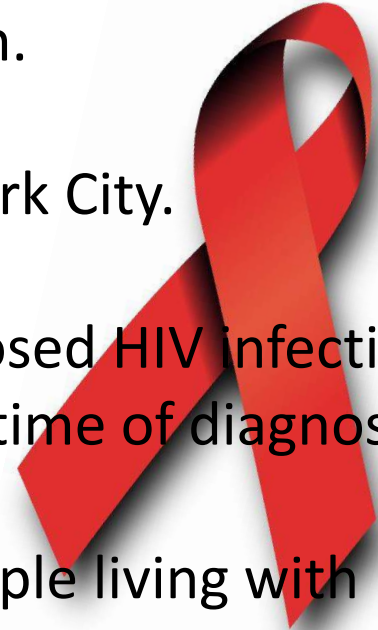
More than half of New Yorkers with diagnosed HIV are already virally suppressed, meaning they are unlikely to develop AIDS or transmit the HIV virus to anyone else

* Any VL or CD4 test during the year

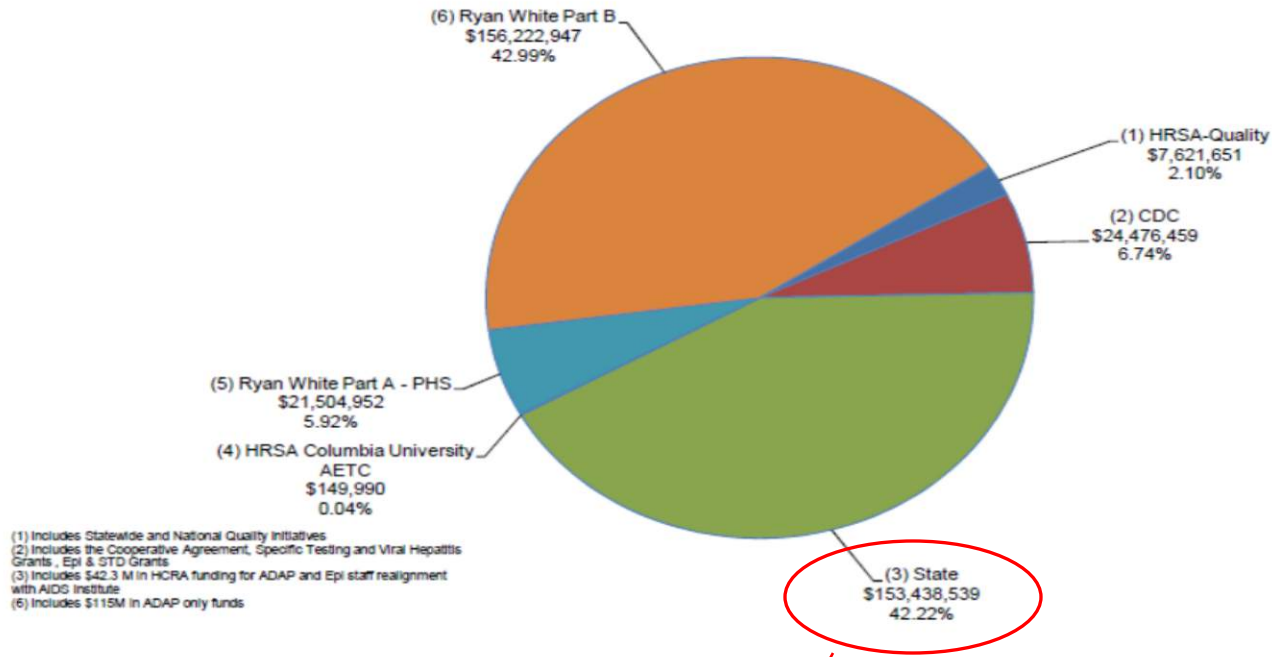
** At least 2 tests, at least 3 months apart

Persons with diagnosed HIV infection

- As of December 2012 an estimated 132,000 New Yorkers were living with diagnosed HIV infection.
- The burden of HIV is heaviest in New York City.
- 21 percent of persons living with diagnosed HIV infection reside outside the five boroughs at the time of diagnosis.
- NYS has about the same number of people living with HIV as AL, AR, GA, LA, MS, NC and SC combined.



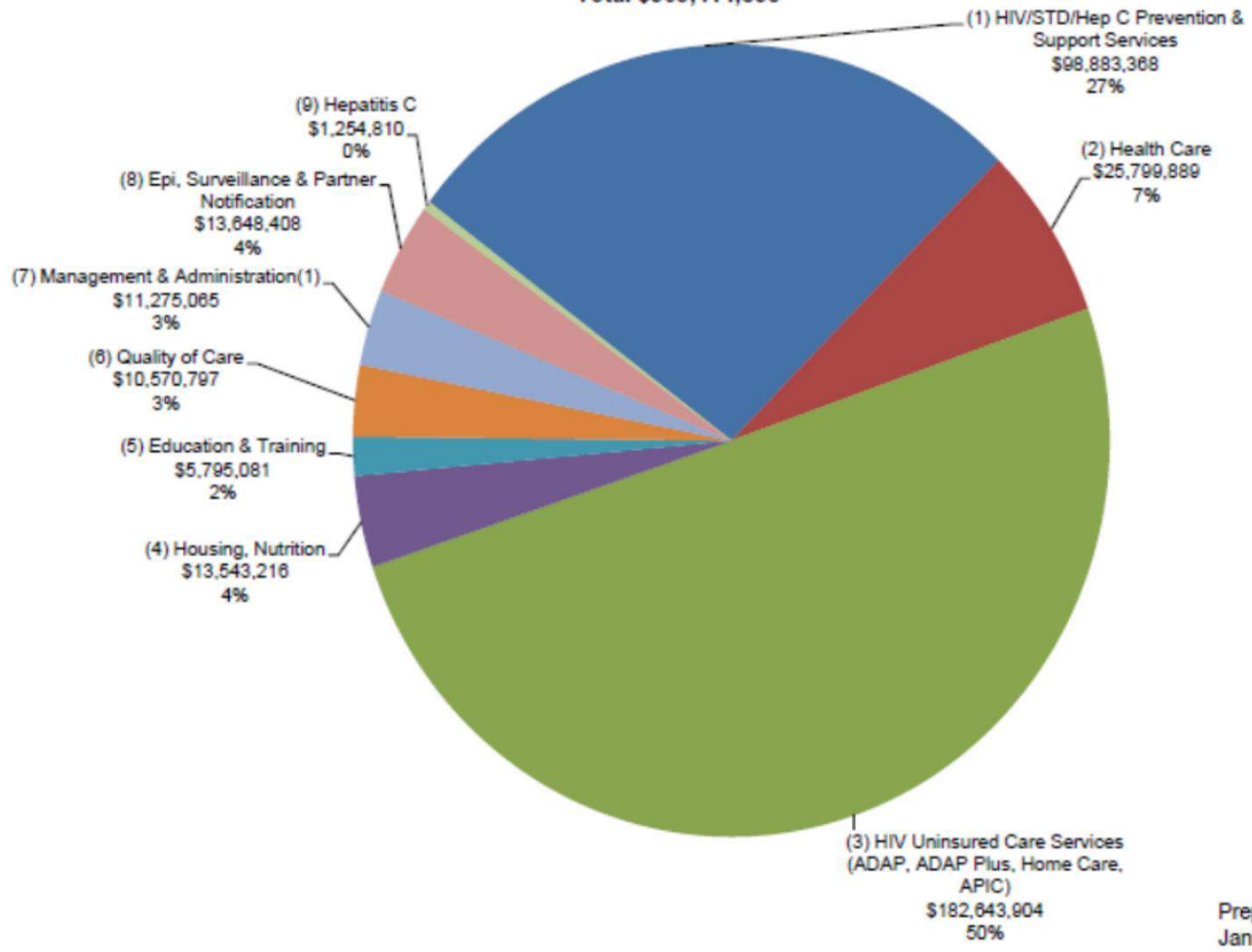
NYS Department of Health
AIDS Institute State & Federal Funding (Excluding Medicaid)
Distribution by Source of Funding
Funding Awarded in 2013
Total: \$363,414,538



Prepared by: OACM
January 2014

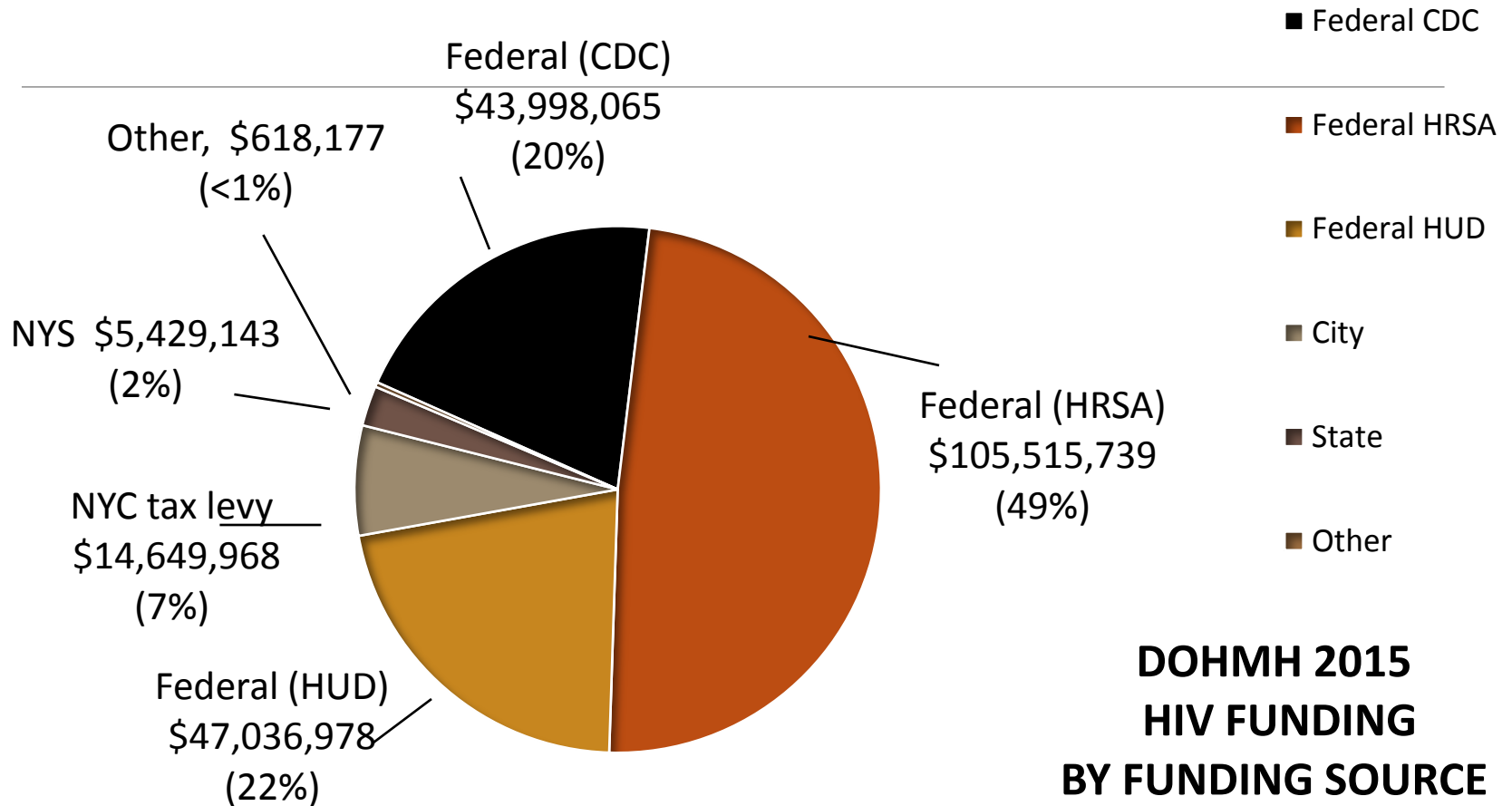
NYS investments have established a firm foundation for ending the epidemic. NYS Medicaid HIV annual expenditure of \$2.6 billion on a par with the entire national Ryan White program.

**NYS Department of Health
 AIDS Institute State & Federal Funding (Excluding Medicaid)
 Distribution by Service Category
 Funding Awarded in 2013
 Total \$363,414,538**

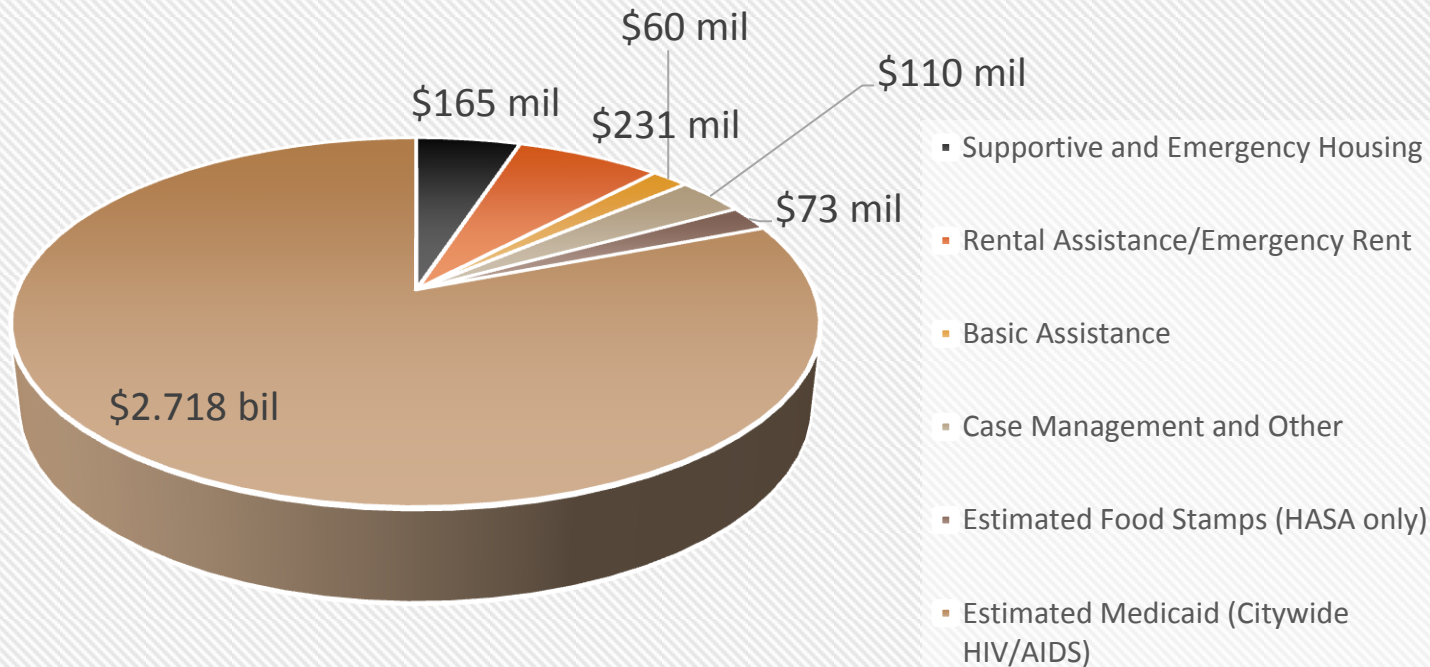


Prepared by: OACM
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NYCDOHMH 2015 Funding by Source



Funded HASA Services in New York City



NOTE:
 Medicaid estimates are based on adjusted 2012 expenditures ; City share pro-rated for MA spending cap.

TOTAL (w/o Medicaid) = \$639 mil City tax levy = \$290 mil

*Includes ~\$30M in HOPWA funds

Challenges

- 🚫 9 new HIV diagnoses each day.
- 🚫 In 2012, 79% of all New Yorkers living with HIV/AIDS in NYS were people of color.
- 🚫 3,316 new diagnoses of which 54% of those were among men with MSM* or MSM/IDU** risk (2012).
- 🚫 Just under 30% of newly diagnosed cases in 2012 were diagnosed with AIDS concurrently or within 12 months of diagnosis.

Exciting opportunities

- 🚫 Affordable Care Act implementation
- 🚫 NYS Medicaid expansion
- 🚫 NYS Health Exchange
- 🚫 Innovative Medicaid redesign and reinvestment of savings in new health delivery strategies
- 🚫 Delivery System Reform Incentive Payments
- 🚫 *Governor's support of achieving the end of AIDS in NYS*

The 3-Point Plan

JUNE 29, 2014 | Albany, NY

Governor Cuomo Announces Plan to End the AIDS Epidemic in New York State

Identify HIV undiagnosed

- Identify all persons with HIV who remain undiagnosed and link them to health care

Link, retain, viral suppression

- Link and retain those with HIV in health care, to treat them with anti-HIV therapy to maximize virus suppression so they remain healthy and prevent further transmission

Provide PrEP for high risk

- Provide pre-exposure prophylaxis for high risk persons to keep them HIV negative

Reduction in new HIV infections

- Reduce from 3,000 to 750 new HIV infections per year by 2020.
- Decrease the number of New Yorkers living with HIV for the first time.

Reduce by 50% the rate at which persons diagnosed with HIV progress to AIDS within two years.

Establishment of the Ending the Epidemic Task Force

Aggressive Action

October 14, 2014

Governor Cuomo announced the **appointment of an Ending the Epidemic Task Force** made up of key stakeholders representing public and private industry and community leaders expert in the field of HIV/AIDS.

The Task Force is responsible for **developing and issuing a Blueprint** for New York State to achieve the Governor's three stated goals.



- ✓ Members **met** on five occasions between October 2014 and January 2015.
- ✓ Each Committee **reviewed recommendations** as they were received from the public. Task Force meetings provided an opportunity for Committees to review, prioritize and discuss the recommendations.
- ✓ Committees were **charged with providing key recommendations** that build on New York State's existing HIV prevention, care and supportive service efforts.

Blueprint to End the Epidemic



On January 13, 2015 the NYS Ending the Epidemic Task Force completed its charge and finalized 44 committee recommendations that address HIV related prevention, care and supportive services.

Committee Recommendations were informed by 294 community recommendations and 17 statewide stakeholder meetings.

The final Blueprint contains 30 Blue Print Recommendations and 7 Getting to Zero Recommendations.

http://www.health.ny.gov/diseases/aids/ending_the_epidemic/

Funding and priority policies



\$10,000,000



30% rent cap

Elimination of written consent for HIV testing

Expanded data sharing

Promote condom access

Expanded syringe access

Elimination of written consent for HIV testing in correctional facilities

MORE THAN A HOME
How Affordable Housing for New Yorkers Living With HIV/AIDS Will Prevent Homelessness, Improve Health and Reduce Costs



Say **yes** to the HIV test.



We're asking everyone.
It's the law.



**GOVERNOR CUOMO
ANNOUNCES ACTION TO
HELP ENSURE TRANSGENDER
NEW YORKERS RECEIVE
EQUAL ACCESS TO HEALTH
INSURANCE COVERAGE**

*Department of Financial
Services Notifies Insurance
Industry that Medically
Necessary Treatment for
Gender Dysphoria Cannot be
Denied*

Key elements from the Community

THE PROCESS TO DEVELOP A NEW YORK STATE
PLAN TO END AIDS BY 2020

A community proposal: Five pillars for a plan to end AIDS in NYS

- ① Use **21st century surveillance strategies** to “know the epidemic” and guide responses
- ② Ramp up **evidence-based combination prevention** (biometrical, behavioral & structural) for both HIV+ and HIV- persons
- ③ Fill **gaps in the continuum of care** to maximize the number of people able to rapidly suppress viral load after HIV diagnosis
- ④ Ensure **access to housing and supportive services** needed to support health, prevention and retention in care for all
- ⑤ Garner the **commitment of political leaders and all communities** to leadership and ownership of the plan to end AIDS

Supported with smart, strategic & sustained public investments

Highlights from Community Recommendations

Statewide HIV Services Administration

- Single point of entry and expanded eligibility for housing and other supports.

State-Funded Drug Assistance Program

- Enhance public programs to pay for PrEP and related care.

Access to Care

Linkage of all who test HIV-positive *and* negative to health coverage, high-quality care and treatments, and the comprehensive services and supports necessary to achieve and sustain viral suppression or to remain negative.








Expand HIV quality measures to all State-regulated insurers

- HIV testing
- % of patients on treatment
- % of patients virally suppressed
- Uninterrupted drug supply

Progressive Policy

- Access to condoms
- Syringe decriminalization
- Gender Expression Non Discrimination Act
- Medicaid coverage of gender confirmation surgery
- HIV testing in pharmacies

Key Metrics

-  Rate of viral replication
-  Unknown HIV status
-  Progression from HIV to AIDS
-  Rate of viral suppression
-  AIDS mortality
-  Stigma and Discrimination
-  Living well (housing, food security, employment opportunity)

Thank you.

 Daniel Tietz

NYC Human Resources Administration

 Kimberleigh Smith

Harlem United

 Johanne Morne

NYSDOH AIDS Institute