Ending the HIV Epidemic: An Overview & Update of the National Plan

Jen Kates and Lindsey Dawson
September 18, 2019
Outline

• What is the Ending the Epidemic Initiative?
• Where are we today? (National, State, Local)
• What are the opportunities?
• What are the challenges facing Texas?
• What key questions remain unanswered?
### HIV Viral Suppression Rate in U.S. Lowest Among Comparable High-Income Countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Viral Suppression Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Kingdom</td>
<td>84%</td>
</tr>
<tr>
<td>Switzerland</td>
<td>84%</td>
</tr>
<tr>
<td>Sweden</td>
<td>83%</td>
</tr>
<tr>
<td>The Netherlands</td>
<td>77%</td>
</tr>
<tr>
<td>Germany</td>
<td>76%</td>
</tr>
<tr>
<td>France</td>
<td>74%</td>
</tr>
<tr>
<td>Australia</td>
<td>74%</td>
</tr>
<tr>
<td>Austria</td>
<td>74%</td>
</tr>
<tr>
<td>Japan</td>
<td>70%</td>
</tr>
<tr>
<td>Belgium</td>
<td>68%</td>
</tr>
<tr>
<td>Canada</td>
<td>63%</td>
</tr>
<tr>
<td>United States</td>
<td>54%</td>
</tr>
<tr>
<td>Texas</td>
<td>59%</td>
</tr>
</tbody>
</table>

NOTES: All data are for 2018 except for Canada (2016) and Japan (2015). U.S. estimate based on Bradley et al. “Data-Driven Goals for Curbing the U.S. HIV Epidemic by 2030,” AIDS and Behavior, 2019. All countries defined viral suppression as having a viral load test result of < 200 copies/mL.

National HIV Incidence is no Longer Falling; Epidemic is Concentrated

Among all people with HIV:

- 50% live in 5 states
- 42% are Black/African American
- 45% live in the South
- 62% are MSM

NOTES: (1) Includes those with diagnosed and undiagnosed HIV. (2) Includes MSM/IDU.

Federal Funding for Domestic Discretionary HIV Programs Has Been Relatively Flat for Several Years

SOURCES: Kaiser Family Foundation Notes: Funding includes both domestic and global HIV analysis of data from OMB, CBJs, Congressional Appropriations Bills, and personal communication with agency staff. The decrease in 2006 reflects methodological changes at CMS. For additional information about recent budget trends see KFF fact sheet, U.S. Federal Funding for HIV/AIDS: Trends Over Time. https://www.kff.org/global-health-policy/fact-sheet/u-s-federal-funding-for-hiv-aids-trends-over-time/
The Federal Ending the Epidemic Initiative (EtHE)

- Announced in the February 2019 SOTU by President Trump
- Goals: Reduce HIV incidence in the U.S. by 75% in 5 years & 90% in 10 years
- Phase 1 focus:
  - 48 counties (incl. Harris, Bexar, Dallas, Tarrant, & Travis)
  - DC and San Juan, PR
  - 7 States

# Texas in Context

<table>
<thead>
<tr>
<th>Indicator</th>
<th>National</th>
<th>Texas (Share of national)</th>
<th>5 TX Jurisdictions (Share of national)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Prevalence (Diagnosed), 2016</td>
<td>989,222</td>
<td>84,802 (9%)</td>
<td>56,767 (6%)</td>
</tr>
<tr>
<td>HIV Diagnoses, 2017</td>
<td>38,182</td>
<td>4,358 (11%)</td>
<td>2,499 (7%)</td>
</tr>
<tr>
<td>Rate of PrEP Users per 100,000</td>
<td>48</td>
<td>41</td>
<td>---</td>
</tr>
<tr>
<td>Number of Ryan White Grants</td>
<td>799</td>
<td>36</td>
<td>27</td>
</tr>
<tr>
<td>Number of Health Center Grants</td>
<td>1,369</td>
<td>73</td>
<td>22</td>
</tr>
<tr>
<td>Poverty Rate, 2017</td>
<td>15%</td>
<td>16%</td>
<td>16%</td>
</tr>
<tr>
<td>Uninsured Rate, 2017</td>
<td>11%</td>
<td>19%</td>
<td>20%</td>
</tr>
</tbody>
</table>

**Sources:**
- CDC Atlas: [https://www.cdc.gov/nchhstp/atlas/index.htm](https://www.cdc.gov/nchhstp/atlas/index.htm)
- AIDSVu: [https://aidsvu.org/local-data/united-states/south/texas/bexar-county/](https://aidsvu.org/local-data/united-states/south/texas/bexar-county/)
- U.S. Census Bureau. American Community Survey Data, available using the American Fact Finder: [https://factfinder.census.gov](https://factfinder.census.gov)
# EtHE Key Pillars and Federal Agencies

<table>
<thead>
<tr>
<th>4 Pillars</th>
<th>Federal Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnose</td>
<td>CDC</td>
</tr>
<tr>
<td>Treat</td>
<td>HRSA (Ryan White + Health Center Programs)</td>
</tr>
<tr>
<td>Prevent</td>
<td>NIH</td>
</tr>
<tr>
<td>Respond</td>
<td>IHS</td>
</tr>
<tr>
<td></td>
<td>SAMHSA</td>
</tr>
<tr>
<td></td>
<td>OASH</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Agency</th>
<th>Funding Purpose</th>
<th>Budget Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>HRSA</td>
<td>HIV Care &amp; Support Services PrEP</td>
<td>$70 $50</td>
</tr>
<tr>
<td>Ryan White Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Health Centers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CDC</td>
<td>HIV Prevention</td>
<td>$140</td>
</tr>
<tr>
<td>Indian Health Service</td>
<td>(HIV Screening; HCV Prevention &amp; Treatment)</td>
<td>$25</td>
</tr>
<tr>
<td>NIH</td>
<td>Centers for AIDS Research (CFARs)/ AIDS Research Centers (ARCs)</td>
<td>$6</td>
</tr>
<tr>
<td>TOTAL</td>
<td>---</td>
<td>$291</td>
</tr>
</tbody>
</table>
FY 2020 Budget Request Would Mark First Significant Increase for Ryan White & CDC in Years

Ryan White Funding, FY1991- FY2020 Budget Request (BR)

- Funding in Millions
- $257 to $2,319
- 3% over FY19 funding

CDC HIV Prevention Funding, FY1981- FY2020 Budget Request (BR)

- Funding in Millions
- $6 to $929
- 18% over FY19 funding

SOURCE: Kaiser Family Foundation analysis of data from OMB, budget request, CBJs, Congressional Appropriations Bills.
Awarded & Announced EtHE Funding for FY 2019 + FY2020

• Awarded
  • FY19 MAI Fund ($29m)
    • HHS - Pilot Sites (3 counties & Cherokee Nation in OK)
    • CDC - Strategic Partnerships & Planning to Support EtHE (32 jurisdictions; grantees not named)
    • NIH - CFAR/ARC EtHE Supplemental Awards (17 CFARs & 6 ARCs, none in Texas)
  • FY19 HRSA/HAB ($981,763)
    • 10 RW Part A jurisdictions rec’d TA funding to enhance EtHE efforts (8 in EtHE jurisdictions, incl. Bexar)

• Announced
  • FY2020 HRSA/HAB NOFO Out ($60.125m)
    • New Part A & B funding opportunity to support EtHE activities due Oct. 15 w/ 3/20 start date
    • Separate NOFOs for a TA grantee and a coordinator

Opportunities for Texas

• **Policy Priority from the White House**
  - Opening to start conversations about HIV care and prevention within communities and with local/state/federal officials

• **Local Focus**
  - Allows for community engagement – listening sessions/plan development
  - Plans responsive to local context
  - Encourages jurisdictions to refine/develop plans, engage with stakeholders

• **Providers/workforce**
  - 9 PHS Corp Officers deployed to 3 EtHE sites - 3 each in Atlanta, Dallas and LA
  - Workforce development through the RWP Part F AETCs

• **Planning funding for EtHE**
  - HAB NOFO (Due Oct 15th)
  - Possible HRSA Health Center NOFO in the works
Opportunities, continued

• Ryan White
  ➢ Rapid initiation of HIV care & treatment
  ➢ Expand re-engagement & retention for those out of care
  ➢ Leverage data/data sharing
  ➢ Take advantage of TA/dissemination of best practice from HAB

• Health Centers
  ➢ Implement/increase routine and risk based HIV testing and linkage to care
  ➢ Community outreach & engagement
  ➢ Receive referrals from community outreach activities
  ➢ Expand prevention education & PrEP services/leverage 340B
Challenges

- No Medicaid Expansion (> % uninsured)
- No State SOGI Protections for Health Insurance
- Border State/ Stigma facing immigrant populations
- Funding Opportunities Narrow (e.g. how to address housing?)
- Stigma + Discrimination (race, SOGI, HIV status)
- 5 TX Counties have moderate to high SVI scores
- Workforce Capacity
- State Law Prohibits Syringe Exchange

Outstanding Questions/Issues

• FY2020 Budget Process (delays/CR? Anomalies?)
• Funding for the future (Level? Approach?)
• Updated NHAS
• Intersection of EtHE with other Trump Administration policies:
  ❖ 1557, conscience rule, public charge proposal, legal threats to ACA, Medicaid work requirements, non-compliant plans etc.
• How can national & local EtHE plans address stigma, discrimination, and SDOH
• Shifting healthcare access landscape
• Evolving Rx landscape (e.g. generics, injectable, potential policy change)
• Impact of 2020 election
Thank you.