Session Outline

- **EHE Plan Overview and the HRSA Contribution**
  - Laura W. Cheever, MD, Assoc. Administrator, HIV/AIDS Bureau, HRSA
- **CDC’s Part of the EHE Plan**
  - Eugene McCray, MD, Director, Division of HIV Prevention, CDC
- **Getting to Zero*: A View from Baltimore**
  - Victoria Cargill, MD, Assistant Commissioner, HIV Services, Baltimore City Health Department
- **Telehealth: Lessons from COVID with Implications for EHE**
  - Magda Houlberg, MD, Chief Clinical Officer, Howard Brown Health

Four Pillars of Ending the HIV Epidemic

- **Diagnose**: All people with HIV as early as possible.
- **Treat**: People with HIV rapidly and effectively to reach sustained viral suppression.
- **Prevent**: New HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs).
- **Respond**: Quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.
Geographic Locations of Ending the HIV Epidemic Initiative

Efforts focused in 48 counties, Washington, DC, and San Juan, PR, where more than 50% of HIV diagnoses occurred in 2016 and 2017, and seven states with substantial rural HIV burden.

Identifying the Challenges Ahead

People with HIV in care
- Improve viral suppression rates
- Decrease disparities

People newly diagnosed with HIV
- Enhance linkage to care
- Enhance engagement in care

People with HIV out of care
- Expand re-engagement in care
- Improve retention in care

HRSA HAB Ending the HIV Epidemic (EHE) Resources

- FY 2020 $70 million
- Ryan White HIV/AIDS Program Parts A and B
- Technical Assistance Provider
- Systems Coordination Provider
- AIDS Education and Training Center (AETC) Program for workforce capacity development
HRSA's Health Center Program Funding Overview

- Primary Care HIV Prevention (PCHP) Supplemental Funding
  - $54 million awarded to 195 HRSA-funded health centers with service delivery sites in the geographic locations identified by the EHE.
  - Recipients: dually-funded (HRSA’s Bureau of Primary Health Care and RWJHAP) health centers or health centers with MOUs with RWJHAP sites.

OBJECTIVES

- Engage new and existing patients to identify those at risk for HIV
- Increase patients tested for HIV
- Increase patients who receive prevention education and clinically indicated PrEP
- Increase linkage to HIV treatment
- Enhance/Establish partnerships to support HIV prevention activities

COVID-19 Lessons to Accelerate EHE Response

- Adoption of telemedicine
  - Reaching those out of care
  - Improving retention rates
  - Concerns about the “digital divide”
- Extension of medication refills
  - 90 day fills
  - Increased home delivery
- Self Testing
  - HIV, STIs
- Reassessing processes
  - Eligibility and recertification

HRSA EHE Listening Sessions – Locations

- April
  - Baltimore, MD
  - Jackson, MS
  - Houston, TX
  - Austin, TX
  - Phoenix, AZ
  - Los Angeles, CA
  - Oakland, CA
  - Sacramento, CA
  - San Francisco, CA
  - Columbia, SC
  - Atlanta, GA
- May
  - Cincinnati, OH
  - Indianapolis, IN
  - Kansas City, MO
  - Birmingham, AL
  - Miami, FL
- September
  - Philadelphia, PA
  - Louisville, KY
  - Frankfort, KY
- October
  - Oklahoma City, OK
- November
  - Little Rock, AR
  - Memphis, TN
HRSA EHE Listening Sessions – Key Themes

- Addressing mental health, substance use, incarceration, transportation, and homelessness is critical to reach people not in care
- Planning for EHE needs to include community-based organizations, community health centers, people with HIV, and new partners
- Supporting training for clinic staff to ensure that culturally responsive and supportive experiences happen for clients (for testing, care, and PrEP)
- Addressing stigma, health education, and criminalization laws

HRSA EHE Listening Sessions – Key Themes (cont.)

- Addressing workforce shortages for medical providers, and mental health and substance use providers
- Leveraging community strengths by hiring community health workers, peer navigators, peer specialists, etc.
- Assessing eligibility and intake processes and forms for testing and care
- Allowing jurisdictions to be innovative and to adapt and adjust as they learn

Contact Information

Laura Cheever, MD, ScM
Associate Administrator
HIV/AIDS Bureau (HAB)
Health Resources and Services Administration (HRSA)
Email: Lcheever@hrsa.gov
Phone: 301-443-1993
Web: hab.hrsa.gov

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