

## HIV Community Planning Council

### FULL COUNCIL MEETING

July 24<sup>th</sup>, 2023

25 Van Ness Ave Room 610

4:00-6:30 pm

**HIV Community Planning Council Members Present:** Chuck Adams, Ed Chitty, Zachary Davenport, Pedro Felix, Elaine Flores, Matt Geltmaker, Paul Harkin, Ron Hernandez, Lee Jewell, Juba Kalamka, Chris Kent, Thomas Knoble, Nga Le, Irma Parada, Gwen Smith, John Paul Soto, Guilherme Sttellet, Richard Sullivan, Manuel Vasquez.

**HIV Community Planning Council Members Absent:** Cesar Cadabes[E], Ms. Billie Cooper [LOA], T.J. Lee-Miyaki[E], Helen Lin[A], Derrick Mapp[E], Laura Thomas [E].

**Others Present:** Nikki Gracey, Bill Hirsh, Stephen Spano, Charles Siron, Sue Walberg-Smith.

**DPH Staff Present:** Bill Blum, Maria Lacayo, Beth Neary.

**Support Staff Present:** David Crown, Mark Molnar, Kira Perez.

### *Minutes*

#### **1. Call Meeting to Order and Roll Call. Introduction of Public. Co-Chair Welcome.**

The meeting was called to order at 4:05 pm by CM Sullivan. Roll Call was called, everyone introduced themselves and quorum was established.

#### **2. Review and Approve July 24<sup>th</sup> 2023 DRAFT Agenda – VOTE**

The July 24<sup>th</sup> 2023 DRAFT Agenda was reviewed and approved by consensus.

#### **3. Review and Approve June 26<sup>th</sup> 2023 DRAFT Minutes – VOTE**

The June 26<sup>th</sup> 2023 DRAFT Minutes were reviewed and approved by consensus.

#### **4. Announcements**

- None.

#### **5. Staff Announcements**

- CS Perez reminds the group about filling out the meeting evaluation at the end of the meeting.

#### **6. Public Comment**

- Bill Hirsh states that HAPN was able to secure only 500k for cost of doing business for Ryan White contracts for FY 23-24. HAPN was able to secure 1.25 million in new housing subsidies for senior and person with disabilities in FY 23-24, but only 500k in FY 24-25. 3.8 million was secured in new funding for back rent assistance. Hirsh emphasizes how tough next will be with the City continuing to face a decline in revenue.

#### **7. General Updates**

- CAEAR Coalition – CM Jewell.
  - CM Jewell updates the council on the markup of the “Labor, Health and Human Services, Education and Related Agencies Appropriations Act, 2024” held by the Senate Appropriations Committee.
  - CM Jewell states the Senates proposed appropriations and are as follows:
    - Senate: \$224.2 billion—7% less than 2023
    - House: \$147 billion – 30% decrease from 2023
  - The proposed bill would cut 18% of CDC’s budget and 12% of HHS’s budget, eliminate 61 programs, and include cuts in HIV/AIDS programming. CM Jewell details the cuts:

- \$238 million cut from the Ryan White HIV/AIDS program.
  - \$220 million cut from the CDC National Center for HIV, Hepatitis, STD, and TB.
  - \$32 million cut from the Minority HIV Fund
  - Elimination of EHE funding at CDC
  - \$3.8 billion cut from the National Institutes of Health.
- Hirsch notes how bad this news of funding is and how this will negatively impact RW funds. Encourages the council to advocate to keep this funding going.
- HHS – Bill Blum
  - Blum updates the group of the HRSA/HAB site visit happening tomorrow.
  - Blum updates the group on the Needs Assessment for long-term survivors.
  - Blum announces that HHS is finalizing the Carry Forward Funding recommendations for RWPA/MAI to be approved at the August HCPC meeting.
    - Carry Forward funding amounts are as follows RWPA: \$834,390 & RWPA/MAI: \$227,429. Blum breaks down service categories to be funded, which will be reviewed in each of the HCPC subcommittees.
  - Blum gives staffing updates.
- CHEP & CPG – CM Knoble
  - CM Knoble updates group on the progress of updating the CHEP website.
  - CHEP has been participating in free STI testing and trainings.
  - CDC site visits will be happening at CHEP shortly.
  - CM Knoble reminds the group of the services at City clinic.
- Hirsh comments on the past carry forward funds and states that contractors could use one-time payments. Hirsh emphasizes the importance of this group to spend this money for future funding services.
- SOA – CM Kent
  - None.
- ETE Update—CM Sullivan
  - CM Sullivan notes the success of the cohorts and trainings happening with springboard health workforce development in both FOG and CHLI.
  - CM Knoble reminds the council of HAPs, Health Access Points, and how they provide wrap around services. CM Knoble notes that folks can receive the same care at any HAP location.
  - CM Sullivan updates the group on CAPs (Community Advisory Programs).
  - Long-term injectables were also discussed in the ETE steering meeting.
- ADAP Update—Nikki Gracey
  - Nikki Gracey updates the group on strategy A & J.
    - A: To improve PrEP utilization. At the end of June there are more than 204 PrEP-AP enrollment sites covering 189 clinics that make up the PrEP-EP provider network.
    - J: To increase the rates of insurance benefits coverage for PLWH or on PrEP. By the end of June 6,790 clients have been enrolled, about 4% decrease from May.

## 8. PrEP Trends and Initiatives —Albert Liu UCSF

- Albert Liu reviews PrEP options available based on gendered demographics.
- CM Jewell asks about the data that is in parenthesis.
  - Liu answers that some of the guidelines for trans women using the 2-1-1 method have to do with some gender affirming hormones medication that may interact with 2-1-1. The guidelines for PWID taking CAB-LA are in place to ensure HIV protection from a population that may have difficulty with consistency taking oral forms of PrEP.

- Liu reviews the trend of PrEP users increased by 4400% nationally. The trend of PrEP use over time notes the disparity of PrEP use by race/ethnicity has increased.
- Liu Displays differences of coverage by race and ethnicity, age, and gender. Emphasizing the need for more equitable availability, but Liu notes an increase of PrEP being prescribed has increased overall.
- Liu reviews the trend of PrEP knowledge, use, and adherence and notes the drastic disparity for PWID and trans women.
  - CM Jewell notes the loss of folks staying in connective care could be due to COVID.
- Liu lists the efforts from the PrEP Committee:
  - Promotion of equitable uptake and persistence on LA-PrEP
  - Collaboration with GTZ PEH/Overdose Committee.
  - Collaboration with GTZ AYA to address the drop of PrEP use during COVID-19.
  - Committee meetings dedicated to strategize increase use of PrEP among cis/trans women.
- Liu reviews the findings and recommendations from current ongoing data collection of BAYLAP interviews.
- CM Sullivan notes how great it is to see the trend of PrEP use over the last 10 years, and recognizes the areas on the map that are not using PrEP.
  - Liu responds that there are “care deserts” nationally.
- Bill Blum asks if there are less unmet needs in other large EMA’s.
  - Liu answers that the further away you are from major metropolitan centers, there are greater unmet needs.
- CM Jewell asks what is being done to address rural communities unmet needs.
  - Liu answers that robust partnerships are happening to help provide greater access to these rural areas.

## 9. Break

## 10. PrEP Updates on Biomdeical Prevention-- Montica Levy—City Clinic

- Montica Levy summarizes City Clinic’s sexual health services and other integrated services, detailing clinic structure, and eligibility. She highlights same-day PrEP start at clients first visit.
- Levy reviews City Clinics PrEP Program successes.
- Levy reviews Injectable PrEP implementation in SF covering the locations it is implemented, how many people, barriers, and how city clinic processes insurance.
  - At city clinic, 39 patients have had 1<sup>st</sup> injection and 33% of those patients hadn’t gotten oral PrEEP prior to CAB.
    - CM Lee asks if the eligibility requirements may expand.
    - Levy answers only folks that are on Medi-Cal or uninsured are covered. At this moment folks eligible to be given injectable PrEP are patients with clinical need, challenges with taking the pill and renal insufficiency. Challenges to taking the pill include challenges with housing instability.
- Levy breaks down PrEP use and injectable PrEP by race and gender.
- Levy details the implementation of Doxy-PEP in the US as well SFDPH’s Interim Guidelines of implementation.
- Blum notes that upcoming LA-PrEP will be available at many other clinics shortly.
- CM Vasquez asks if City Clinic is utilizing tele health.
  - Levy notes that city clinic used it in early lockdown.



