PART II

Florida’s Ending the HIV Epidemic Plan

HIV/AIDS Section Invites Community Input for a Unified Approach

August 27-28, 2020
Florida’s Ending the HIV Epidemic (EHE) Plan

SESSION II AGENDA

Day 1 — Thursday, August 27, 2020

<table>
<thead>
<tr>
<th>AGENDA TOPICS</th>
<th>TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Welcome &amp; Ending the HIV Epidemic: A Plan for America’s Initiative &amp; Florida’s Ending the HIV Epidemic Plan (Recap)</td>
<td>10:00 AM– 10:05 AM</td>
</tr>
<tr>
<td>2. Session 1. Discussion &amp; Work Plan Development— Pillar 1, Diagnose</td>
<td>10:05 AM– 12:00 PM</td>
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<tr>
<td><strong>BREAK</strong></td>
<td></td>
</tr>
<tr>
<td>3. Session 2. Discussion &amp; Work Plan Development— Pillar 2, Treat</td>
<td>2:00 PM– 4:00 PM</td>
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</tbody>
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Meeting Objectives

- Continue to review the Florida Ending the HIV Epidemic (EHE) Plan;
- Collectively discuss and outline activities from the Department Statewide perspective that align with Florida EHE Plan strategies for a ‘Unified Approach’ in accordance with the EHE Initiative pillars.
Florida’s Ending the HIV Epidemic (EHE) Plan

**Year 1 Budget Allocation Breakdown**

<table>
<thead>
<tr>
<th></th>
<th>PS20-2010 Allocation</th>
<th>CBO/Grassroots Allocation</th>
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</thead>
<tbody>
<tr>
<td>Broward</td>
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<td>Duval</td>
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<td>HQ</td>
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<td><strong>TOTAL</strong></td>
<td><strong>$10,610,410</strong></td>
<td><strong>$5,104,214</strong></td>
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</tbody>
</table>
Ending the HIV Epidemic, A Plan for America

**GOAL**

- 75% reduction in new HIV infections in 5 years and at least 90% reduction in 10 years.

**ACHIEVING THE GOALS**

- **Diagnose**
  - All people with HIV as early as possible after infection

- **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

- **Respond**
  - Quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them
Florida’s Plan to Eliminate HIV Transmission

**DIAGNOSE**
Implement routine HIV and sexually transmitted infection screening in health care settings and priority testing in non-health care settings.

**TREAT**
Provide rapid access to treatment and ensure retention in care.

**PREVENT**
Improve and promote access to evidence-based prevention strategies, such as antiretroviral pre-exposure prophylaxis (PrEP), non-occupational post-exposure prophylaxis (nPEP) and syringe services.

**RESPOND**
Increase HIV awareness and community response to outbreaks through outreach, engagement, and messaging.

Four Key Components
Pillar 1 : DIAGNOSE

Projected Goal (5-Year): Increase the percentage of persons with HIV who know their serostatus from 87.1% (2018) to at least 95% (2025).

Revised Strategy 1a:

Expand routine HIV, HCV, and STI screening to healthcare settings and particularly in non-health care settings as a standard protocol.
Pillar 1: Diagnose, Proposed Activities

1a.1 ACTIVITY: Identify at least one emergency departments and/or one urgent care centers located in a Phase 1 EHE county to implement a routine screening project.

1a.2 ACTIVITY: Support local establishment of non-traditional HIV testing sites (e.g., mobile units, pharmacies, retail venues)

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Pillar 1: Diagnose, **Proposed Activities**

1a.3 **ACTIVITY:** Leverage partnerships with industry partners to have them assist with provider detailing and messaging around routine HIV testing.

1a.4 **ACTIVITY:** Assess the impact of existing jail testing and linkage programs.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Pillar 1 : Diagnose, Proposed Activities

1a.5 **ACTIVITY**: Explore collaboration with the Agency for Health Care Administration (AHCA) to address the cost of lab rates and billing processes related to routine screening.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Projected Goal (5-Year): Increase the percentage of persons with HIV who know their serostatus from 87.1% (2018) to at least 95% (2025).

Revised Strategy 1b:
Enhance the capacity of the peers and field workforce to support at-risk persons in need of intervention.
Pillar 1: Diagnose, Proposed Activities

1b.1 ACTIVITY: Strengthen mechanisms to increase capacity of HIV field workforce (i.e. DIS and Statewide Peers).

1b.2 ACTIVITY: Explore collaboration with AETC entities to institute a Statewide Peer Certification training program.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Florida’s EHE Plan Meeting

SESSION BREAK
SESSION WILL RECONVENE AT 2:00 PM

THANK YOU FOR YOUR PARTICIPATION!
Florida’s Ending the HIV Epidemic Plan
HIV/AIDS Section Invites Community Input for a Unified Approach

August 27-28, 2020
STATEWIDE PERSPECTIVE

Pillar 2 : TREAT

Projected Goal (5-Year): Increase the percentage of persons with HIV who are in care from 75% (2018) to at least 85% (2025); and increase the percentage of persons with HIV with a suppressed viral load from 64% (2018) to at least 75% (2025).

Revised Strategy 2a:
Assess and improve the rapid access to treatment model among County Health Departments (CHD) and health care providers.
Pillar 2: Treat, **Proposed Activities**

2a.1 **ACTIVITY:** Assess CHD Test & Treat sites to determine current volume and VL suppression of individuals.

2a.2 **ACTIVITY:** Educate hospitals and primary care providers to begin treatment at initial diagnosis.

**Should we develop these activities further? or remove them completely? What would make these activities more achievable?**
Pillar 2: TREAT

Projected Goal (5-Year): Increase the percentage of persons with HIV who are in care from 75% (2018) to at least 85% (2025); and increase the percentage of persons with HIV with a suppressed viral load from 64% (2018) to at least 75% (2025).

Revised Strategy 2b:

Assess and scale up Data-to-Care program to identify patients not in care and develop re-engagement strategies.
Pillar 2 : Treat, Proposed Activities

2b.1 **ACTIVITY:** Enhance the re-engagement and retention infrastructure in HIV medical care and treatment adherence.

2b.2 **ACTIVITY:** Support the practice of individual comprehensive care for persons with HIV.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Projected Goal (5-Year): Increase the percentage of persons with HIV who are in care from 75% (2018) to at least 85% (2025); and increase the percentage of persons with HIV with a suppressed viral load from 64% (2018) to at least 75% (2025).

Revised Strategy 2c:
Partner with entities to increase access to care and unmet ancillary needs for persons with HIV (PWH) in Florida.
Pillar 2 : Treat, Proposed Activities

2c.1 **ACTIVITY:** Support the use of mobile units to provide access to care and address transportation issues for clients.

2c.2 **ACTIVITY:** Improve coordination with all Ryan White HIV/AIDS Program Parts.

2c.3 **ACTIVITY:** Expand available ancillary services for persons with HIV and their family unit.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Florida’s EHE Plan Meeting

END OF DAY 1

Session will reconvene tomorrow, August 28, 2020 at 10:00 AM

THANK YOU FOR YOUR PARTICIPATION!
PART II
Florida’s Ending the HIV Epidemic Plan
HIV/AIDS Section Invites Community Input for a Unified Approach
August 27-28, 2020
# Florida’s Ending the HIV Epidemic (EHE) Plan

## SESSION II AGENDA

**Day 2 — Friday, August 28, 2020**

1. **Welcome**  
   - 10:00 AM – 10:05 AM
2. **Session 3. Discussion & Work Plan Development— Pillar 3, Prevent**  
   - 10:05 AM – 12:00 PM
3. **BREAK**  
4. **Session 4. Discussion & Work Plan Development— Pillar 4, Respond**  
   - 1:30 PM – 1:30 PM
5. **Next Steps**
Florida’s Plan to Eliminate HIV Transmission

Four Key Components

**DIAGNOSE**
Implement routine HIV and sexually transmitted infection screening in health care settings and priority testing in non-health care settings.

**TREAT**
Provide rapid access to treatment and ensure retention in care.

**PREVENT**
Improve and promote access to evidence-based prevention strategies, such as antiretroviral pre-exposure prophylaxis (PrEP), non-occupational post-exposure prophylaxis (nPEP) and syringe services.

**RESPOND**
Increase HIV awareness and community response to outbreaks through outreach, engagement, and messaging.
Pillar 3 : PREVENT

Projected Goal (5-Year): Prevent new HIV transmission by using proven interventions, including PrEP and syringe services programs.

Revised Strategy 3a:
Support the availability, use, and access to and quality of comprehensive syringe exchange/services programs (SEPs/SSPs) in the state.
Pillar 3: Prevent, **Proposed Activities**

3a.1 **ACTIVITY:** Support the infrastructure of current and new comprehensive Syringe Exchange/Services Programs (SEP/SSP).

3a.2 **ACTIVITY:** Educate communities on the purpose and intent of Syringe Exchange/Services Program (SEP/SSP).

**Should we develop these activities further? Or remove them completely?**

**What would make these activities more achievable?**
Pillar 3: PREVENT

Projected Goal (5-Year): Prevent new HIV transmission by using proven interventions, including PrEP and syringe services programs.

Revised Strategy 3b:

Address HIV-related stigma and misconceptions about HIV.
Pillar 3 : Prevent, **Proposed Activities**

3b.1 **ACTIVITY:** Promote collaborative efforts with the SHARC Stigma Working Group to identify sources of HIV-related stigma and reduce stigma in Florida.

3b.2 **ACTIVITY:** Develop and implement community-driven stigma reduction approaches.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Pillar 3: PREVENT

Projected Goal (5-Year): Prevent new HIV transmission by using proven interventions, including PrEP and syringe services programs.

Revised Strategy 3c:

Accelerate efforts to increase PrEP awareness and adoption particularly for populations with the highest rates of new HIV diagnoses and low PrEP use among those with indications for PrEP.
Pillar 3: Prevent, **Proposed Activities**

3c.1 **ACTIVITY:** Expand the availability and use of PrEP among those with indications.

3c.2 **ACTIVITY:** Provide culturally competent education on PrEP to three priority populations.

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Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Pillar 3: Prevent, **Proposed Activities**

3c.3 **ACTIVITY:** Improve PrEP delivery in clinical and non-clinical settings.

3c.4 **ACTIVITY:** Leverage partnerships with industry partners to have them assist with provider detailing and messaging around PrEP.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Florida’s EHE Plan Meeting

SESSION BREAK
Session will reconvene at 1:30 PM

THANK YOU FOR YOUR PARTICIPATION!
PART II
Florida’s Ending the HIV Epidemic Plan
HIV/AIDS Section Invites Community Input for a Unified Approach
August 27-28, 2020
STATEWIDE PERSPECTIVE

Pillar 4: RESPOND

Projected Goal (5-Year): Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

Revised Strategy 4a:
Pillar 4 : Respond, **Proposed Activities**

4a.1 **ACTIVITY:** Development of a community-level response for HIV transmission networks and communities.

4a.2 **ACTIVITY:** Conduct supplemental data collection among priority populations who are under-represented by the MMP survey.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Pillar 4: Respond, Proposed Activities

4a.3 **ACTIVITY:** Restructure partner services activities for member identified within rapidly growing transmission networks and communities.

4a.4 **ACTIVITY:** Collaborate with academic partners to provide capacity building assistance for implementation of social networking strategies.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Pillar 4: RESPOND

Projected Goal (5-Year): Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

Revised Strategy 4b: Enhance physician capacity to order genotype testing for those newly diagnosed or those not on antiretroviral therapy returning to care.
Pillar 4: Respond, **Proposed Activities**

4b.1 **ACTIVITY:** Develop a protocol for data dissemination and appropriate use of data obtained through routine HIV surveillance activities.

4b.2 **ACTIVITY:** Increase community engagement around biomedical interventions for HIV medical care and prevention.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
4b.3 **ACTIVITY:** Engage and educate providers on current HRSA recommendations to order baseline genotypes for newly diagnosed.

4b.4 **ACTIVITY:** Leverage local level provider partnerships to implement a community-level response to transmission networks in areas of high burden.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Projected Goal (5-Year): Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.

Revised Strategy 4c:
Improve use of aggregated routinely collected HIV laboratory data to improve precision prevention.
4c.1 **ACTIVITY:** Engage laboratories to improve the timeliness of electronic reporting of genotype consensus sequences used in transmission network analysis.

Should we develop these activities further? or remove them completely? What would make these activities more achievable?
Next Steps:

- Florida EHE Plan discussion; Local Perspective with HAPCs (by 10/30/20)
- Internal FDOH Review (by 11/30/20)
- Obtain concurrence (by 12/15/20)
- September - October 2020
- November 2020
- December 2020
- Final Unified EHE Plan submitted to CDC (by 12/30/20)
Florida’s Ending the HIV Epidemic Plan

END OF DAY 2

*The evaluation link is located in the chat box for you to complete*

THANK YOU FOR YOUR INPUT!!
Contact Information

HIV/AIDS Section
Bureau of Communicable Diseases
Florida Department of Health

HIVSectionEHE@flhealth.gov