Positive Living Conference
Ft. Walton Beach, Florida

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Chief, Bureau of HIV/AIDS
Florida Department of Health

March 11, 2011
Tallahassee, Florida
The Epidemic in Florida, 2010

Population: 18.8 million → (4th in nation)
Cumulative AIDS cases: 121,161 → (3rd in nation)
Cumulative pediatric AIDS cases: 1,542 → (2nd in nation)
Cumulative HIV (not AIDS) cases: 46,795 → (since July 1997)
Persons living with HIV/AIDS: 97,978 → (reported cases)
HIV prevalence estimate: 135,000
HIV incidence estimate: 5,550 (2006 est.)

60% White
16% Black
21% Hispanic
3% Other*

30% White
49% Black
19% Hispanic
2% Other*

*Other = Asian/Pacific Islanders; American Indians/Alaskan Natives; multi-racial.
2010 Florida Population Estimates* and Adult AIDS and HIV Cases by Race/Ethnicity Reported in 2010, Florida

AIDS (N=3,459)
- White: 54%
- Black: 25%
- Hispanic: 19%
- Other: 2%

2010 Florida Population Estimates* (N=15,837,972)
- White: 62%
- Black: 15%
- Hispanic: 21%
- Other: 2%

HIV (N=5,187)
- White: 48%
- Black: 29%
- Hispanic: 22%
- Other: 1%
Comment: The proportion of black HIV cases has decreased by 15% from 2001 to 2010. In contrast, increases were observed among both white (16%) and Hispanic (29%) HIV cases over this same time period.
Resident HIV/AIDS Deaths
By Year, Florida, 1994 – 2009

Rates are expressed as deaths per 100,000 population based on annual Population Estimates, DOH, Office of Planning, Evaluation and Data Analysis.

Comment: HIV/AIDS deaths decreased markedly from 1996-1998, associated with the advent of HAART in 1996. A leveling of the trend during 2000-2006 may reflect factors such as viral resistance, late diagnosis of HIV, adherence problems, and lack of access to or acceptance of care. Yearly declines of 13% in 2007, 7% in 2008 and another 13% in 2009 appear to be promising. Racial/ethnic disparities are evident in the death rate data.

Counseling & Testing, Florida

Number of HIV Tests in Publicly Funded Sites

<table>
<thead>
<tr>
<th>Year</th>
<th>Whites</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
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<tbody>
<tr>
<td></td>
<td>110,562</td>
<td>122,558</td>
<td>118,520</td>
<td>114,103</td>
<td>105,316</td>
<td>103,490</td>
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<tr>
<td>2001</td>
<td>101,492</td>
<td>107,668</td>
<td>110,509</td>
<td>105,072</td>
<td>106,083</td>
<td>106,042</td>
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<tr>
<td></td>
<td>46,023</td>
<td>51,562</td>
<td>58,543</td>
<td>64,472</td>
<td>73,830</td>
<td>75,329</td>
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<tr>
<td>2001</td>
<td>258,077</td>
<td>281,788</td>
<td>287,572</td>
<td>283,647</td>
<td>285,229</td>
<td>284,861</td>
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</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>% Change</th>
</tr>
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<tbody>
<tr>
<td>2007</td>
<td>107,566</td>
</tr>
<tr>
<td>2008</td>
<td>126,884</td>
</tr>
<tr>
<td>2009</td>
<td>79,997</td>
</tr>
<tr>
<td>2010</td>
<td>314,447</td>
</tr>
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</table>
Florida’s AIDS Insurance Continuation Program (AICP) has assisted approximately 8,184 persons through December 2010 in maintaining their healthcare coverage.

Current enrollment is approximately 2,283 clients.

AICP pays premiums up to $750.00, and over the past twelve years, the program obtained nearly $5 in private medical care and services for every dollar spent.

Past AICP 2009-10 funding was $13,957,968: $6,794,685 in General Revenue and $7,163,283 in Ryan White.

Current AICP 2010-11 funding is $13,804,903: $6,454,951 General Revenue and $7,349,952 in Ryan White.

A wait list has been created with 358 applicants as of February 1, 2011.

Demographics

- 84% of clients are male
- 16% of clients are female
- 65% of clients are white
- 19% of clients are Hispanic
- 16% of clients are black
- 40% of clients are diagnosed as AIDS
- 54% of clients are diagnosed as HIV or HIV symptomatic
- Average age of an AICP client is 45
- Average monthly premium paid is $463.83

Due to current budget and attrition, since September 2010, approximately 290 applicants have been removed from the waitlist and enrolled in AICP.
AIDS INSURANCE CONTINUATION PROGRAM

Cumulative Wait-List
Contributing Factors

- Ongoing Recession
- Federal Funding Remaining Flat
- GR Reduction: $1 Million
- AICP Waiting List
- Expansion Of Counseling And Testing
- NIH Guideline Changes: Early Treatment
- Increase In Drug Costs
- Oil Spill...
- Layoffs at Kennedy Space Center (1,100)
- Increase In Demand For Services
Reported on April 15, 2010.

* For the total number of clients, we considered active clients who picked up at least once during the given timeframe.
Reported on April 15, 2010.

* For the total number of clients, we considered active clients who picked up at least once during the given timeframe.
*ADAP Waiting list implemented June 1, 2010. FY10/11 “Client Enrollments” does not include waiting list numbers.
**FY10/11 “Federal Funding” does not include $6.9 million in Emergency Relief funds and $2.3 million in Supplemental funds.
Source: ADAP database reported 12/3/2010. Figures shown reflect clients in open status anytime during the given year.
Funding Gap

GAP $20-$25 mil

GAP
$14.5 mil (13%)

SHORTFALL RELIEF
$6.9 mil (6%)

SUPPLEMENTAL
$2.2 mil (2%)

PART B SWEEPS
$1.7 mil (1.5%)

STATE FUNDING
$9.5 mil (9%)

RW PART B
$75.6 mil (68.5%)

MIAMI CONTRACTS
$3.5 MIL

GAP
$14.5 mil (13%)

Florida ADAP

Closing the Gap

- Emergency Relief Funds from HRSA
  - $6.9 million
  - $3 million waiting list requirement

- Redirect Ryan White Grant Dollars

- General Revenue Dollars
Exploring Other Resources

- Borrowing from State GR
- Accessing RW Fund Early
- Ordering Now, Pay Later
- Request Assistance of:
  - Part A’s
  - Part B’s / Consortia
- Request of HRSA
  - Incur costs using 2011/2012 monies
- Welvista
Resolution (Short-Term)  

**Partnership**  
- NASTAD  
- Fair Pricing Coalition  
- Pharmaceutical Industry  
- **Welvista**  
  - Non Profit Organization  
  - Located in South Carolina  
  - Specialty Pharmacy: 17 yrs experience  
  - Single Point of Access for WL clients  
  - **Short-Term Fix (limited time only)**
Proposed ADAP Clients
Transitioned to Welvista: 5912

Source: ADAP Database. Reported on January 24, 2011.
The Transition

WELVISTA

- Projected date for transition
  February 1, 2011

- 60 day supply of medications

- Re-transition: April 1, 2011

- Objective: Clients continue to receive medications from CHD--seamlessly
Future FY 2011/2012

- Ensuring continuity of service
- Realignment of budget
- Medicare Part D TrOOP
- Drug rebates
- Additional funds from Congress
- Part B supplemental fund
- ADAP Supplemental
- Partnership Planning Collaboration
# Ryan White Flat Funding

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<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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<tbody>
<tr>
<td>Part A</td>
<td>69,791,744</td>
<td>70,817,429</td>
<td>67,503,982</td>
<td>72,984,428</td>
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<tr>
<td>Part B</td>
<td>116,325,376</td>
<td>116,146,263</td>
<td>116,269,183</td>
<td>118,435,571**</td>
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<tr>
<td>Part C</td>
<td>10,009,713</td>
<td>9,713,246</td>
<td>7,526,095</td>
<td>7,335,918*</td>
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<tr>
<td>Part D</td>
<td>7,019,701</td>
<td>7,093,539</td>
<td>7,522,963</td>
<td>6,629,567*</td>
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<tr>
<td>Part F</td>
<td>2,854,951</td>
<td>2,854,951</td>
<td>8,006,179*</td>
<td>7,448,947*</td>
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<tr>
<td>Total</td>
<td>206,001,485</td>
<td>206,625,428</td>
<td>206,828,402</td>
<td>212,804,431</td>
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** Part B includes MAI and Supplemental funds.

* Assuming level-funding
Major Issues in 2011-2012

1. Ongoing state budget challenges
2. Impact of health reform on public health programs
3. Development of a national HIV/AIDS strategy
4. Testing – Counseling – Linkage – and Treatment
5. Use of new media and Internet-based strategies
6. Increased push towards integrated and/or holistic programs
7. More state and local HIV/AIDS workforce challenges
8. Prevention fatigue vs. PrEP