

Houston Area HIV Services Ryan White Planning Council

FY2017 EIIHA Workgroup

2:00 p.m., Monday, September 12, 2016

Meeting Location: 2223 W. Loop South, Room 416

Houston, Texas 77027

AGENDA

- I. Call to Order Nancy Miertschin and
Cristan Williams, Co-chairs
 - A. Moment of Reflection
 - B. Adoption of the Agenda
 - C. Adoption of the Minutes

- II. Public Comment

(NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up on the clipboard at the front of the room. No one is required to give his or her name or HIV/AIDS status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV/AIDS status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person with HIV/AIDS", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization. If you work for an organization, but are representing yourself, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting. All information from the public must be provided in this portion of the meeting.)

- III. HRSA Guidance on the FY17 EIIHA Plan Amber Harbolt, Health Planner,
Office of Support
 - A. EIIHA Planning Process and Requirements

- IV. Adopt Criteria for Selecting FY17 EIIHA
Target Populations

- V. Review Target Populations Selection Matrix Data

- VI. Select Target Populations for FY17 EIIHA Plan

- VII. Next Steps

- A. Selected target populations sent to Council members for review and commentary
- B. Comprehensive HIV Planning Committee meeting:
11:00 a.m., Thursday, September 15, 2016
2223 W. Loop South, Room 416
Houston, Texas 77027

- VIII. Announcements Nancy Miertschin and
Cristan Williams, Co-chairs

- IX. Adjourn

Houston Area HIV Services Ryan White Planning Council

EIIHA Strategy Workgroup

3:00 p.m., Wednesday, September 16, 2015

Meeting Location: 2223 W. Loop South, Room 416; Houston, Texas 77027

MINUTES

| MEMBERS PRESENT | MEMBERS ABSENT | STAFF PRESENT |
|------------------------------------|--------------------|----------------------------------|
| Nancy Miertschin, Co-Chair | Amana Turner | Sha'Terra Johnson-Fairley, TRG |
| Cristan Williams, Co-Chair (phone) | Amy Leonard | Ka'cha Tousant, TRG |
| Allen Murray | C. Bruce Turner | Tori Williams, Office of Support |
| Annette Johnson | Herman Finley | Amber Alvarez, Office of Support |
| Ardry Boyle | J. Hoxi Jones | Diane Beck, Office of Support |
| Brenda Booker | Kris Sveska | |
| Cecilia Ross | Osaro Mgbere | |
| Curtis Bellard | Paul Grunenwald | |
| David Benson | Peta-gay Ledbetter | |
| Ella Collins-Nelson | Roy Delesbore | |
| Evelio Escamilla | Shital Patel | |
| John Lazo | Steven Vargas | |
| Michael Kennedy | | |
| Morénike Giwa (phone) | | |
| Tracy Gorden | | |

Call to Order: Nancy Miertschin, Co-Chair, called the meeting to order at 3:10 p.m. and asked for a moment of reflection. She welcomed everyone and called for introductions.

Adoption of the Agenda: **Motion #1:** *it was moved and seconded (Bellard, Boyle) to adopt the agenda. Motion carried.*

Approval of the Minutes: **Motion #2:** *it was moved and seconded (Ross, Johnson) to approve the May 21, 2015 meeting minutes. Motion carried.* Abstentions: Bellard, Benson, Booker, Boyle, Collins-Nelson, Escamilla, Giwa, Lazo, Murray.

Public Comment: None.

HRSA Guidance on FY16 EIIHA Plan: Alvarez reviewed the EIIHA Planning Process and Requirements and the Planning Process Timeline, see attached. Williams asked where transgender individuals fit into the matrix. Alvarez thanked her for bringing this up – we always include a statement that local, state and national data is not collected in a way that that reflects the transgender population. Williams said that she spoke to some people from DSHS at the US Conference on AIDS last week and they said that they must be able to collect data on the Transgender population so they are working on it. **Motion #3:** *it was moved and seconded (Williams, Bellard) for the Office of Support to include a statement in the EIIHA section of the*

*HRSA application recognizing that currently available epidemiologic data do not portray the need for testing, referral, and linkage in at-risk populations such as among those who are transgender, intersex, homeless, or post-release from incarceration. **Motion carried unanimously.***

Criteria for Selecting EIIHA Target Populations: The workgroup reviewed the criteria used for Fiscal Year 2015, see attached. **Motion #4:** *it was moved and seconded (Kennedy, Boyle) to adopt the same criteria for FY16 that was used for FY15. **Motion carried unanimously.***

Select Target Populations for FY16 EIIHA Plan:

Motion #4: *it was moved and seconded (Escamilla, Boyle) to keep the same populations for FY16 that were selected for FY15: 1. African Americans; 2. Hispanics/Latinos age 35 and over; and 3. Men who have Sex with Men (MSM) and also address HIV and aging within each population. **Motion carried unanimously.***

Announcements: Alvarez invited all workgroup members to attend the Comprehensive HIV Planning Committee meeting next Thursday, September 24, 2015 at 2:00 p.m..

Adjournment: The meeting was adjourned at 4:45 p.m.

Submitted by:

Approved by:

Amber Alvarez, Office of Support Date

Committee Chair Date

Early Identification of Individuals with HIV/AIDS (EIIHA) Planning Process and Requirements

Purpose of the EIIHA Strategy:

The purpose of this section is to describe the strategy, plan, and data associated with ensuring that individuals who are unaware of their HIV status are identified, informed of their status, referred to supportive services, and linked to medical care if HIV positive. The overarching goal of this initiative is to reduce the number of undiagnosed and late diagnosed individuals and to ensure they are accessing HIV care and treatment by:

- 1) increase the number of individuals who are aware of their HIV status;*
- 2) increase the number of HIV positive individuals who are in medical care; and*
- 3) increase the number of HIV negative individuals referred to services that contribute to keeping them HIV negative. (HRSA-17-030)*

Role of EIIHA Workgroup:

To review existing epidemiologic data and suggest three (3) distinct populations for inclusion in the EIIHA section of the HRSA grant application.

Considerations:

- **Additional populations may be selected, but three (3) distinct populations must be selected for inclusion in the EIIHA section of the HRSA grant application.**
- Selection of target populations must be data-driven and pertinent to the goals of the strategy. Sufficient data must exist for each selected population to allow staff to discuss why each target population was chosen and how data support that decision.
- Comprehensive HIV Planning Committee has final approval of the three (3) populations to be included in the EIIHA section of the HRSA grant application, pending distribution to Planning Council members for review and input.

Timeline for the EIIHA Planning Process:

September 2016

| Sun | Mon | Tue | Wed | Thur | Fri | Sat |
|-----|---|-----|-----|---|-----|-----|
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 2 p.m. – EIIHA Workgroup identifies selection criteria and selects FY 2017 EIIHA target populations Office of Support distributes FY 2017 EIIHA target populations to Planning Council members for input | 13 | 14 | 15 9 a.m. – All Council input due to Office of Support 11 a.m. – Comprehensive HIV Planning Committee reviews Planning Council input and approves FY 2017 EIIHA target populations. | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | |

Fiscal Year 2017
Early Identification of Individuals with HIV/AIDS (EIIHA)
Target Populations Criteria Worksheet

| Type of Data | Possible Criterion | Definition | Suggested Thresholds | Selected |
|-----------------|--|--|---|----------|
| Epidemiological | 1. HIV diagnosis rate* | Number of new diagnoses of HIV disease within the population after accounting for population size (per 100,000) | Rate > EMA rate | |
| | 2. HIV prevalence rate | Number of HIV diagnosed people within the population after accounting for population size (per 100,000) | Rate > EMA rate | |
| | 3. Unaware estimates* | Number of people in each population group estimated to be HIV+ and unaware of their status using the CDC estimate (17.3%) | Comprises largest # of status-unaware within demographic category | |
| Care Continuum | 4. Linked proportion | Percent of population that was linked to HIV medical care within 3 months** of diagnosis | % < EMA % | |
| | 5. Unmet need/out of care proportion* | Percent of diagnosed persons in the population with <u>no</u> evidence of HIV medical care in the previous 12 months per HRSA definition | % > EMA % | |
| Planning | 6. Special populations | Population is designated as a “special population” in the Comprehensive HIV Plan | Yes/No | |
| | 7. FY16 EIIHA Target Group* | Population was included in the FY15 EIIHA Matrix as a Target Group | Yes/No | |
| Other | 8. Late diagnosis* | Percent of persons within each group who are diagnosed with HIV stage 3 within 3 months of initial HIV diagnosis | % > EMA % | |

*Criteria used in selection of FY 2016 EIIHA target populations

**Linkage within 1 month not available by population

**Fiscal Year 2017
Early Identification of Individuals with HIV/AIDS (EIIHA)
Target Populations Selection Matrix**

DRAFT

■ = meets criteria

| | 1. HIV Diagnosis Rate | 2. HIV Prevalence Rate | 3. Unaware Estimates | 4. Linked Proportion | 5. Unmet Need / Out of Care Proportion | 6. Special Populations | 7. FY16 EIIHA Target Group | 8. Late Diagnosis | Total # Criteria |
|--------------------------|-----------------------|------------------------|----------------------|----------------------|--|------------------------|----------------------------|-------------------|------------------|
| Houston EMA | 22.6 | 437.0 | 5,448 | 81% | 24% | -- | -- | 20% | 8 |
| Sex | | | | | | | | | |
| Male | 35.2 | 658.3 | 4,075 | 80% | 25% | Y | Y | 20% | 7 |
| Female | 10.1 | 218.7 | 1,373 | 85% | 22% | Y | Y | 21% | 3 |
| Race/Ethnicity | | | | | | | | | |
| White | 9.3 | 247.1 | 1,117 | 88% | 21% | N | N | 15% | 0 |
| Black / African American | 61.2 | 1211.1 | 2,661 | 77% | 25% | Y | Y | 18% | 7 |
| Hispanic | 20.3 | 312.3 | 1,465 | 84% | 26% | Y | Y | 25% | 4 |
| Other | 5.3 | 68.5 | 72 | 85% | 30% | N | N | 26% | 2 |
| Unknown | -- | -- | 132 | 89% | 13% | N | N | 26% | 1 |
| Age | | | | | | | | | |
| 0 - 1 | 1.7 | 1.7 | -- | 100% | -- | N | N | -- | 0 |
| 2 - 12 | 0.4 | 6.5 | 14 | 100% | 12% | N | N | 25% | 1 |
| 13 - 24 | 32.2 | 134.9 | 284 | 79% | 21% | Y | N | 8% | 3 |
| 25 - 34 | 51.3 | 559.9 | 1070 | 78% | 25% | N | N | 15% | 4 |
| 35 - 44 | 31.1 | 742.0 | 1,324 | 86% | 25% | N | Y | 31% | 5 |
| 45 - 54 | 22.2 | 967.9 | 1,561 | 85% | 23% | Y | Y | 32% | 5 |
| 55+ | 8.8 | 459.2 | 1,195 | 84% | 25% | Y | Y | 36% | 5 |
| Risk Category | | | | | | | | | |
| MSM | d | d | 3,033 | 79% | 24% | Y | Y | 18% | 4 |
| IDU | d | d | 492 | 79% | 26% | Y | N | 24% | 4 |
| MSM/IDU | d | d | 222 | 85% | 23% | Y | N | 20% | 1 |
| Heterosexual contact | d | d | 1,627 | 85% | 24% | Y | N | 25% | 3 |
| Perinatal. transmission | d | d | 69 | 100% | 26% | N | N | 14% | 0 |
| Adult other risk | d | d | 4 | -- | 29% | N | N | -- | 1 |

| Notes | 1. HIV Diagnosis Rate | 2. HIV Prevalence Rate | 3. Unaware Estimates | 4. Linked Proportion | 5. Unmet Need / Out of Care Proportion | 6. Special Populations | 7. FY16 EIIHA Target Group | 8. Late Diagnosis |
|--|--|--|--|--|---|--|--|--|
| Definition of selection criterion | Number of new diagnoses of HIV disease within a population while accounting for population size (rate is the number of new HIV cases per 100,000 population) | Number of HIV diagnosed people within the population after accounting for population size (rate is the number of HIV + HIV stage 3 cases per 100,000 population) | Number of people in each population group estimated to be HIV+ and unaware of their status using the CDC estimate (17.3%) | Percent of population that was linked to HIV medical care within 3 months of diagnosis | Percent of diagnosed persons in the population with <u>no</u> evidence of HIV medical care in the previous 12 months per HRSA definition | Population is designated as a "special population" in the Comprehensive HIV Plan | Population was included in the FY16 EIIHA Matrix | Percent of persons within each group who are diagnosed with HIV stage 3 within 3 months of HIV diagnosis |
| Threshold for prioritization | Rate > EMA rate | Rate > EMA rate | Comprises largest # of status-unaware within demographic category | % < EMA % | % > EMA % | Yes/No | Yes/No | % > EMA % |
| Data source | DSHS, New diagnoses 2015. Released 8/24/16 | DSHS, Prevalence 2015. Released 8/24/16 | DSHS, Undiagnosed infection 2015. Released 8/24/16 | DSHS, Linkage to care 2015. Released 8/25/16 | DSHS, Unmet need 2015. Released 8/25/16 | 2017 Comprehensive Plan Special Populations | FY16 Houston EMA EIIHA Target Populations, approved by the Comprehensive HIV Planning Committee on 9/24/15 | DSHS, Late Diagnosis by population 2015. Released 8/25/16 |
| Explanations and additional background | Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk | HIV+HIV stage 3 (total HIV disease prevalence) Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk | Estimates have been extrapolated using a national approximation of status unaware. No local estimates are available. Unaware estimate not available for age range 0-1 | Linked proportion not available for risk category Adult Other | Unmet need proportion not available for age range 0-1 Additional categories: First Diag Date Not in Texas = 22% Before 2005 = 26% 2006-2010 = 27% 2011-2014 = 22% 2015 = 14% No HIV/STD coinfection = 25% HIV/STD coinfection = 10% | -- | Target Groups for FY16 EIIHA Plan were: • African Americans • Hispanics/Latinos age 35 and over • Men who have Sex with Men (MSM) | Late diagnosis proportion not available for age range 0-1; risk category Adult Other Numerator for age range 2 – 12 is 1 case |