

Ending the Epidemic Blueprint 2015

On June 29, 2014, Governor Andrew M. Cuomo detailed a three-point plan to move us closer to the end of the AIDS epidemic in New York State. The goal is to reduce the number of new HIV infections to just 750 [from an estimated 3,000] by the end of 2020 and achieve the first ever decrease in HIV prevalence in New York State.

The three-point plan:

1. Identifies persons with HIV who remain undiagnosed and link them to health care.
2. Links and retains persons diagnosed with HIV in health care to maximize virus suppression so they remain healthy and prevent further transmission.
3. Facilitates access to Pre-Exposure Prophylaxis (PrEP) for high-risk persons to keep them HIV negative.

Using a recently published estimate of \$357,498 as the lifetime HIV-related medical care costsⁱ (expressed in 2013 US dollars), achieving the goal of reducing new HIV infections from 3,000 to 750 per year by the end of 2020 would result in medical cost savings of \$804.4 million from averting 2,250 HIV infections.



Ending the Epidemic (ETE) in New York State will maximize the availability of life-saving, transmission-interrupting treatment for HIV, saving lives and improving the health of New Yorkers. It will move New York from a history of having the worst HIV epidemic in the country to a future where new infections are rare and those living with the disease have normal lifespans with few complications.

On October 14, 2014, Governor Andrew M. Cuomo announced members of the Ending the Epidemic Task Force (Task Force). The Task Force was established to support Governor Cuomo's three-point plan. The Task Force developed and synthesized recommendations, presented in New York's Blueprint to end the epidemic.

The four committees of the Task Force (Care, Prevention, Housing and Supportive Services and Data) reviewed nearly 300 recommendations submitted online and received during regional Listening Forums held across New York State. Committees used this information to develop 44 committee recommendations (CRs) – including recommendations that move beyond the goal of 750 to zero infections.

Prioritizing the needs of key populations significantly impacted by HIV and AIDS became a central component of the final ETE Blueprint. To change the trajectory of new HIV infections, an effective plan of action must continuously identify key populations most affected, at risk for new infection and most disadvantaged by systemic health, economic and racial disparities that act as catalysts for new infections.

Recommendations and strategies included in the ETE Blueprint are intended to evolve with new technologies and policy advances so the document can remain useful and relevant through the end of 2020. The ETE Blueprint is structured first to include the three points of the Governor's Plan, but also includes other recommendations to minimize new infections and inhibit disease progression.

Blueprint (BP) Recommendations

- Identify persons with HIV who remain undiagnosed and link them to health care.
- Link and retain persons diagnosed with HIV in care to maximize virus suppression so they remain healthy and prevent further transmission.
- Provide access to PrEP for high-risk persons to keep them HIV-negative.
- Recommendations in support of decreasing new infections and disease progression.

New York State's goals as outlined in the ETE Blueprint are extremely ambitious and continue New York's leadership in the effort to end the epidemic. The Task Force recommends a vision of zero new infections, zero AIDS related deaths and HIV discrimination as a thing of the past. In short, with "zero", the only thing left to attain is a cure for HIV to help those currently living with the virus. To "get to zero", the Task Force has identified key social, legislative and structural barriers and included these in the ETE Blueprint document.

The Task Force process was transparent and promoted public access through all stages of the work. The implementation and monitoring of the ETE Blueprint will encompass a 6-year timeframe that will also reflect public input and support.

New York State has reached an important milestone in the HIV epidemic where by, building on 30 years of success, new infections can be further dramatically reduced so, for the first time, New York will see a decrease in the number of persons living with HIV. The ETE Blueprint document developed by the Task Force provides New York State with concrete next steps that will decrease new infections and improve the lives of all New Yorkers living with HIV/AIDS.

ⁱ Farnham PG, Holtgrave DR, Gopalappa C, et al. Lifetime costs and quality-adjusted life years saved from HIV prevention in the test and treat era. *J Acquir Immune Defic Syndr*. 2013; 64 (2): e-15-e18.