

**Ending the Epidemic Task Force
Committee Recommendation
CR19**

**Recommendation Title: Encourage all Performing Provider Systems (PPSs) to Adopt
DSRIP Domain 4 HIV/AIDS Projects**

- a. **Add HIV Special Needs Programs (SNPs) in the first quarter of 2015 to the State Marketplace as a health plan option/choice for individuals living with HIV/AIDS.**
 - b. **HIV SNPs should broaden their scope to include comprehensive HIV prevention services.**
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1. **For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? 1, 2 and 3**

 2. **Proposed Recommendation:** Encourage all Performing Provider Systems (PPS') to adopt DSRIP domain 4 HIV/AIDS projects. The New York State Department of Health (NYSDOH) Delivery System Reform Incentive Payment (DSRIP) program is an important source of funding to support the Task Force's recommendations. It can provide funding for projects that use recent advances in science and data, to end AIDS, even without a cure, by reducing annual new HIV infections in New York State – from 3,000 to 750 by 2020 – and by bringing those living with HIV/AIDS to optimal health. The majority of PPS' in New York City are planning to include an HIV/AIDS project in their DSRIP applications. A New York City PPS planning group is regularly being convened to advance HIV/AIDS efforts across PPS' to achieve the greatest impact. It is building out activities under 4.c.ii Increase early access to, and retention in, HIV care. It is expected that an HIV/AIDS project will be included by PPSs covering all boroughs. The state should ensure that similar efforts are implemented statewide and should require that an HIV/AIDS project is included by at least one PPS in each jurisdiction.
 - a. Add HIV Special Needs Programs (SNPs) in the first quarter of 2015 to the state Marketplace as a health plan option/choice for individuals living with HIV/AIDS. SNPs need to be listed on the NYS Health Exchange Marketplace. HIV SNPs are not yet listed on the NYS Health Insurance Exchange. Therefore, new Medicaid recipients and those requesting transfers from mainstream Medicaid plans do not have this option. Inadequate access to appropriate healthcare leads to poorer health outcomes, increased risk of spreading HIV to others and greater costs overall. A workaround option has been created, but it is cumbersome and inefficient. Ending AIDS by 2020 requires sufficient access to health care through SNPs. Having access to appropriate healthcare, including the option to enroll in a SNP, should be an integral part of the Plan. The SNP model was developed by the state, and is the cornerstone for providing effective care management, including rigorous testing, comprehensive prevention and advancing initiatives to enable consumers to become



undetectable and prevent new HIV infections. Encourage SNPs to explore expansion to other parts of the state.

- b. HIV SNPs should broaden their scope to include comprehensive HIV prevention services including antiretroviral-based prevention (nPEP and PrEP) and related services.

List of key individuals, stakeholders, or populations who would benefit from this recommendation

- People at risk for HIV
- Individuals with HIV
- Providers

3. **Would implementation of this recommendation be permitted under current laws or would a statutory change be required?** Permitted under current law.
4. **Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?** Immediate and throughout plan.
5. **Please list the TF numbers of the original recommendations that contributed to this current version:** TF74.

