Q2: Title of your recommendation

Improved Linkage and Retention in Care for Clients of OASAS-licensed Programs

Q3: Please provide a description of your proposed recommendation

Require the Office of Alcoholism and Substance Abuse Services (OASAS) licensed programs to make a good faith effort to ensure that all HIV-positive clients are engaged in HIV primary care, and support adherence to antiretroviral treatment, documenting such efforts in the patient chart.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing program

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Permitted under current law

Q8: 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)?

Within the next year
### Q9: What are the perceived benefits of implementing this recommendation?

Improved linkage/retention in care and viral suppression for people living with HIV who receive services from OASAS-licensed programs.

### Q10: Are there any concerns with implementing this recommendation that should be considered?

Protecting confidentiality of people who receive services from OASAS-licensed programs. Ensure that outreach and linkage training for staff of OASAS-licensed programs is culturally competent and adheres to best practices in HIV care and prevention services.

### Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Cost associated with training may be borne by OASAS-licensed programs.

### Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?  

*Respondent skipped this question*

### Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

OASAS staff and licensed programs and consumers of OASAS services.

### Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Measure of HIV care referrals and retention/linkage follow-up notifications among OASAS-licensed programs.

### Q15: This recommendation was submitted by one of the following

**Advocate,**

Other (please specify)  
Ad Hoc End of AIDS Community Group: ACRIA, Amida Care, Correctional Association of New York, Jim Eigo (ACT UP/Prevention of HIV Action Group), GMHC, Harlem United, HIV Law Project, Housing Works, Latino Commission on AIDS, Legal Action Center, Peter Staley (activist), Terri L. Wilder (Spencer Cox Center for Health), Treatment Action Group, VOCAL New York