

Ending the Epidemic Task Force Recommendation Form

#97



COMPLETE

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Mark
Last Name	Harrington
Affiliation	Treatment Action Group (TAG)
Email Address	mark.harrington@treatmentactiongroup.org

Q2: Title of your recommendation Measure Time-to-ART Start and CD4 at ART Start

Q3: Please provide a description of your proposed recommendation

Measure time from HIV diagnosis to initiation of antiretroviral therapy (ART) as well as CD4 count at initiation of ART to demonstrate improvements in early diagnosis, linkage, retention, and treatment success, by showing over time a shorter time-to-ART-start as well as a higher CD4 count at ART start.

Currently fewer than 37% of HIV+ New Yorkers are on ART and the median CD4 at HIV diagnosis is 372 CD4 cells/mm³, meaning that over half of HIV+ New Yorkers who are diagnosed have the full benefit of Treatment as Prevention (TasP).

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)

Identifying persons with HIV who remain undiagnosed and linking them to health care

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

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

Data Committee: Develop recommendations for metrics and identify data sources to assess the comprehensive statewide HIV strategy. The Committee will determine metrics that will measure effective community engagement/ownership, political leadership, and supportive services. It will also determine metrics that will measure quality of care, impact of interventions and outcomes across all populations, particularly identified sub populations such as transgender men and women, women of color, men who have sex with men and youth. In addition, the Committee will evaluate to determine optimal strategies for using data to identify infected persons who have not achieved viral suppression and address their support service, behavioral health, and adherence needs.

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?

Quick ART start at high CD4 levels will be essential to reducing transmission, incidence, and to reducing HIV progression to AIDS and death.

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

None.

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

These data are already collected.

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

Respondent skipped this question

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

HIV-positive New Yorkers.
HIV-negative New Yorkers (through reduced transmission).
Providers.
Insurers.
Manufacturers.
Government leaders + officials.
Affected communities + service providers.

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

Time between HIV diagnosis and ART start. CD4 at diagnosis and at ART start.

Q15: This recommendation was submitted by one of the following

Ending the Epidemic Task Force member,

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