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RYAN WHITE  
CONFERENCE ON  
HIV CARE & TREATMENT

# RWHAP Part B and ADAP Coverage of Treatment & Services for Justice-Involved People with HIV

August 12, 2020

Presenters:

**Meredith Heckmann**, ADAP Coordinator, Iowa Department of Public Health Bureau of HIV, STD, and Hepatitis

**Zenora Sanders, M.Ed.**, Statewide Linkage and Retention Coordinator, Georgia Department of Public Health Office of HIV/AIDS

Facilitator:

**Dori Molozanov, JD**, Manager, Health Systems Integration, NASTAD

# Presentation Overview



## Facilitator

- **Dori Molozanov, JD**, Manager, Health Systems Integration, NASTAD

## Speakers

- **Meredith Heckmann**, ADAP Coordinator. Iowa Department of Public Health, Bureau of HIV, STD, and Hepatitis
  - “Expanding Medication Access: Iowa's Jail Assistance Program”
- **Zenora Sanders, M.Ed.**, Statewide Linkage and Retention Coordinator, Georgia Department of Public Health, Office of HIV/AIDS
  - “HIV Linkage to Medical Care Navigation After Incarceration”

## Ryan White HIV/AIDS Program Part B and ADAP Coverage of Treatment & Services for Justice-Involved People Living with HIV

<https://www.nastad.org/resource/ryan-white-hivaids-program-part-b-and-adap-coverage-treatment-services-justice-involved>



### Ryan White HIV/AIDS Program Part B and ADAP Coverage of Treatment & Services for Justice-Involved People with HIV

May 2020

This fact sheet outlines key considerations for Ryan White HIV/AIDS Program (RWHAP) Part B Programs and AIDS Drug Assistance Programs (ADAPs) as they support the HIV-related healthcare needs of justice-involved individuals (e.g., currently incarcerated, formerly incarcerated, under community supervision). It also provides a summary of Health Resources and Services Administration HIV/AIDS Bureau (HRSA HAB) guidance related to the provision of services for justice-involved communities.

#### Key Considerations for the Provision of RWHAP Part B and ADAP Services to Justice-Involved Populations

HIV disproportionately impacts justice-involved populations and justice-involvement disproportionately impacts people with HIV

HIV prevalence is five- to seven-times [higher](#) among individuals incarcerated in jails and prisons than in the national population and an estimated one in seven people with HIV are incarcerated at some point in their lives. As 95% of people currently in state prisons [will be released into their communities](#) and experiences of incarceration and homelessness [impede viral load suppression](#), it is acutely important for HIV programs, including RWHAP Part B programs and ADAPs, to evaluate the services that could be delivered and/or tailored to address the needs of justice-involved people with HIV.

[Justice-involved populations have unique care and service needs](#)

Justice-involved individuals, including those living with HIV, are highly impacted by [behavioral health conditions](#) (e.g., mental health, substance use) and other chronic infectious diseases (e.g., hepatitis C (HCV)). Justice-involved people with HIV often have [multiple risk factors](#) associated with initial incarceration and recidivism, including

# NASTAD Contact Information



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# Expanding Medication Access: Iowa's Jail Assistance Program

Meredith Heckmann  
Iowa ADAP Coordinator



# Contact Information



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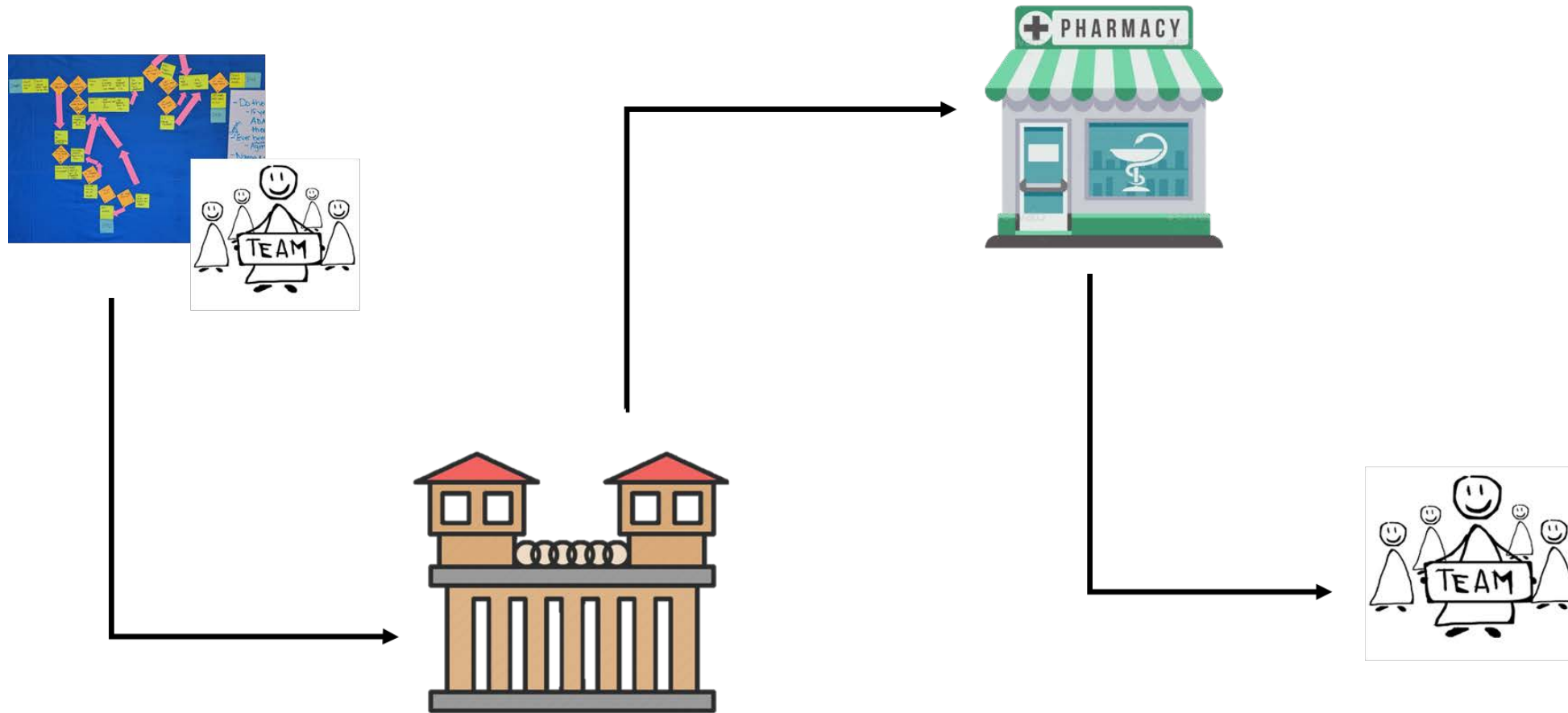


# Jail Assistance Goals



- Keep it simple
- Re/engage out of care clients
- Hopefully open opportunities for testing

# Program Development



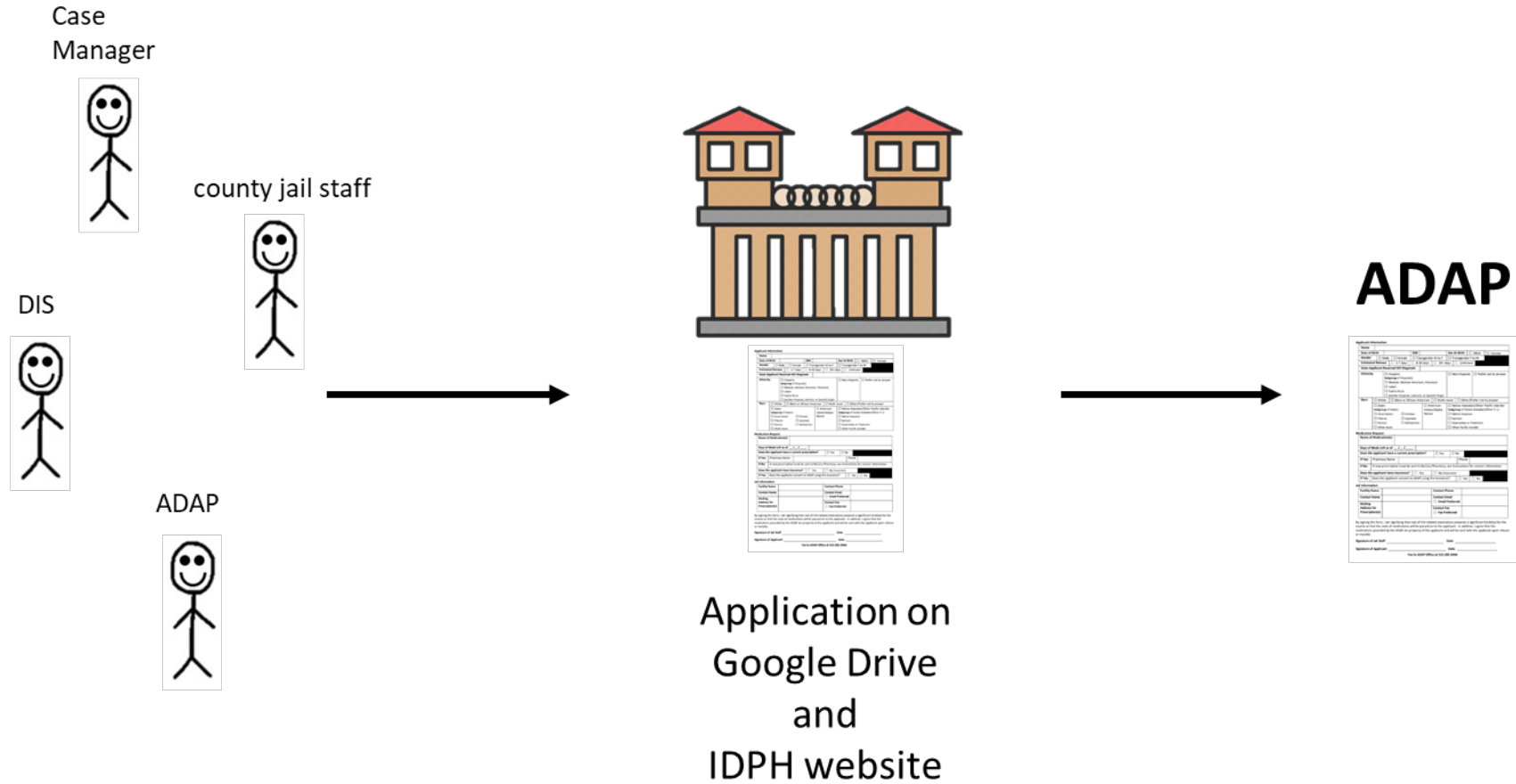


# Jail Assistance Program Overview

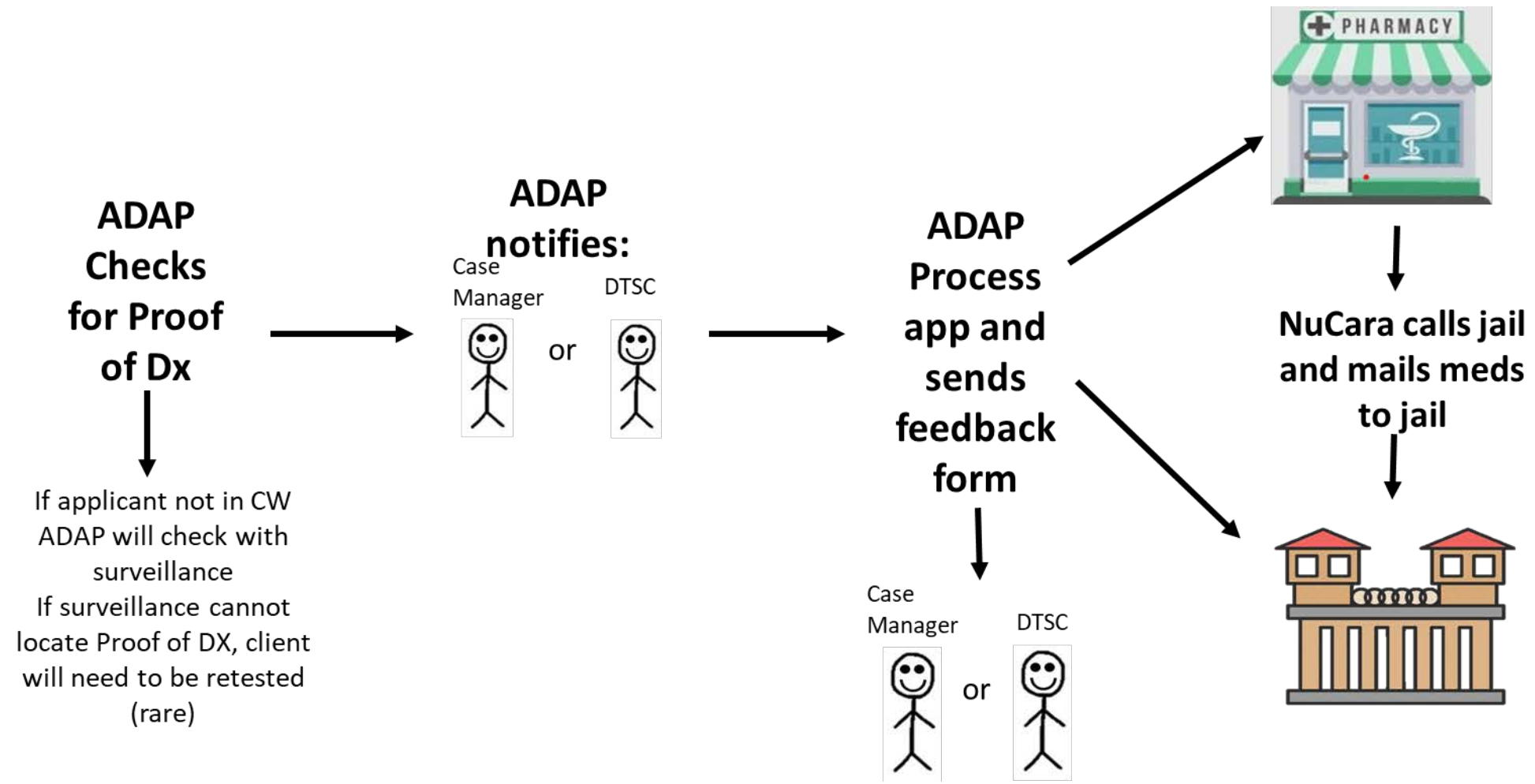


- Applicant must be HIV+
- Jails will be responsible for submitting applications
- Each application provides one 30-day supply of Medications
- Medications sent to jails are property of the client
- ADAP will notify case managers if applicant is case managed
- ADAP will notify Data to Services Coordinator (DTSC) if applicant is not case managed
- Active insurance will be used with applicant's consent
  - Medicaid stays active for first 30-days of incarceration
- “Applicant” refers to the person experiencing incarceration (may or may not be a client)
- ADAP will utilize Iowa Victim Information & Notification Everyday (IowaVINE) to track when clients leave jail

# Jail Assistance Program Process



# Jail Assistance Program Process cont.



# Jail Assistance Application



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Protecting and Improving  
the Health of Iowans

Gerd W. Chabough, Director      Kim Reynolds, Governor      Adam Gregg, Lt. Governor

## ADAP Jail Assistance Application Instructions

The accompanying application should be used to request medications through the Jail Assistance Program administered by the AIDS Drug Assistance Program (ADAP) at the Iowa Department of Public Health (IDPH). Applicants must have a documented HIV diagnosis to qualify. All medications dispensed through the ADAP Jail Assistance Program are considered property of the applicant and must be sent home with the applicant upon their release from the jail.

The applicant is only required to sign the first application of their incarceration period to consent to have their information submitted to the ADAP Jail Assistance Program. Any remaining applications until the applicant is discharged will only require the jail staff's signature. If an applicant is discharged from jail and returns at a later date they will need to sign the first application of the new incarceration period.

Each approved application will authorize one 30-day supply of the medication(s) requested on the application. The jail should submit one application for each 30-day supply as needed. The ADAP formulary listing all excluded medications can be found on the Ryan White section of IDPH's website at <http://idph.iowa.gov/hivstdhep/hiv/support>.

All medications administered through the Jail Assistance Program will be dispensed and mailed to the jail by the ADAP contract pharmacy, NuCara Specialty Pharmacy. If an applicant leaves the jail before the requested medications arrive in the mail, the jail should contact the ADAP office via the ADAP administrative email: [adap\\_administrator@idph.iowa.gov](mailto:adap_administrator@idph.iowa.gov). Emails including applicant names or other identifying information must be sent securely.

The ADAP must verify an applicant's HIV diagnosis before an application can be approved. The ADAP office will reach out to the jail if the ADAP is unable to obtain a verification of diagnosis from the IDPH HIV Surveillance office. In rare cases, the jail may need to coordinate with the ADAP for diagnostic testing to be completed.

If the applicant has an active prescription, NuCara Specialty Pharmacy will request the prescription from the pharmacy listed on the application. If the applicant does not have an active prescription, it is the jail's responsibility to coordinate new prescriptions. New prescriptions should be sent to:

NuCara Specialty Pharmacy  
5042 Maple Dr.  
Pleasant Hill, IA 50327  
Phone: 515-266-4167 Fax: 515-265-5431 Email: [nsp@nucara.com](mailto:nsp@nucara.com)

Completed applications should be faxed to the ADAP office at (515) 281-0466. Once received, a confirmation email or fax will be sent via the preferred method indicated on the application. Jail Assistance applications will be prioritized to reduce gaps in medication. Once approved, the ADAP will send notification to the contact person listed on the application. NuCara Specialty Pharmacy will call the contact person for required medication consultation and confirm the mailing address for the meds.

Questions can be directed to [adap\\_administrator@idph.iowa.gov](mailto:adap_administrator@idph.iowa.gov), or to the ADAP Coordinator, Meredith Heckmann, at 515-725-2011.

Fax to ADAP Office at 515-281-0466

### Applicant Information

Name			
Date of Birth	SSN	Sex At Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Transgender M to F	<input type="checkbox"/> Transgender F to M
Estimated Release	<input type="checkbox"/> 1-7 days <input type="checkbox"/> 8-30 days <input type="checkbox"/> 30+ days <input type="checkbox"/> Unknown		
State Applicant Received HIV Diagnosis			
Ethnicity	<input type="checkbox"/> Hispanic Subgroup (if Hispanic): <input type="checkbox"/> Mexican, Mexican American, Chicano/a <input type="checkbox"/> Cuban <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Another Hispanic, Latino/a, or Spanish Origin		<input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Prefer not to answer
	Race <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Multi-racial <input type="checkbox"/> Other/Prefer not to answer		
Race	<input type="checkbox"/> Asian Subgroup (if Asian): <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian		<input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander Subgroup (if Native Hawaiian/Other P.I.): <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Other Pacific Islander

### Medication Request

Name of Medication(s)			
Days of Meds Left as of ___ / ___ / ___			
Does the applicant have a current prescription?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes:	Pharmacy Name	Phone	
If No:	A new prescription must be sent to NuCara Pharmacy, see Instructions for contact information.		
Does the applicant have insurance?		<input type="checkbox"/> Yes	<input type="checkbox"/> No Insurance
If Yes:	Does the applicant consent to ADAP using the insurance?		<input type="checkbox"/> Yes <input type="checkbox"/> No

### Jail Information

Facility Name	Contact Phone
Contact Name	Contact Email
Mailing Address for Prescription(s)	<input type="checkbox"/> Email Preferred
	Contact Fax
	<input type="checkbox"/> Fax Preferred

By signing this form, the jail staff signifies that the cost of HIV-related medications presents a significant hardship for the county or that the costs of medications will be passed on to the applicant. Additionally, jail staff agree that the medications provided by the ADAP are property of the applicant and will be sent with the applicant upon release or transfer.

Signature of Jail Staff \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant to authorize HIV related information to be released to IDPH (only required for first application):  
\_\_\_\_\_ Date \_\_\_\_\_

Fax to ADAP Office at 515-281-0466

# Program Stats



- \$25,000 expended in 6 months
- 34 applications submitted in first 6 months
  - 15 unduplicated clients
  - 6 county jails
- Have only dispensed HIV meds despite open formulary
- No applicants have had active insurance

# Contact Information



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*Georgia Department of Public Health  
Office of HIV/AIDS*

*HIV Linkage to Medical Care Navigation after Incarceration*

*Zenora Sanders, M.Ed.*

*Statewide Linkage and Retention Coordinator*

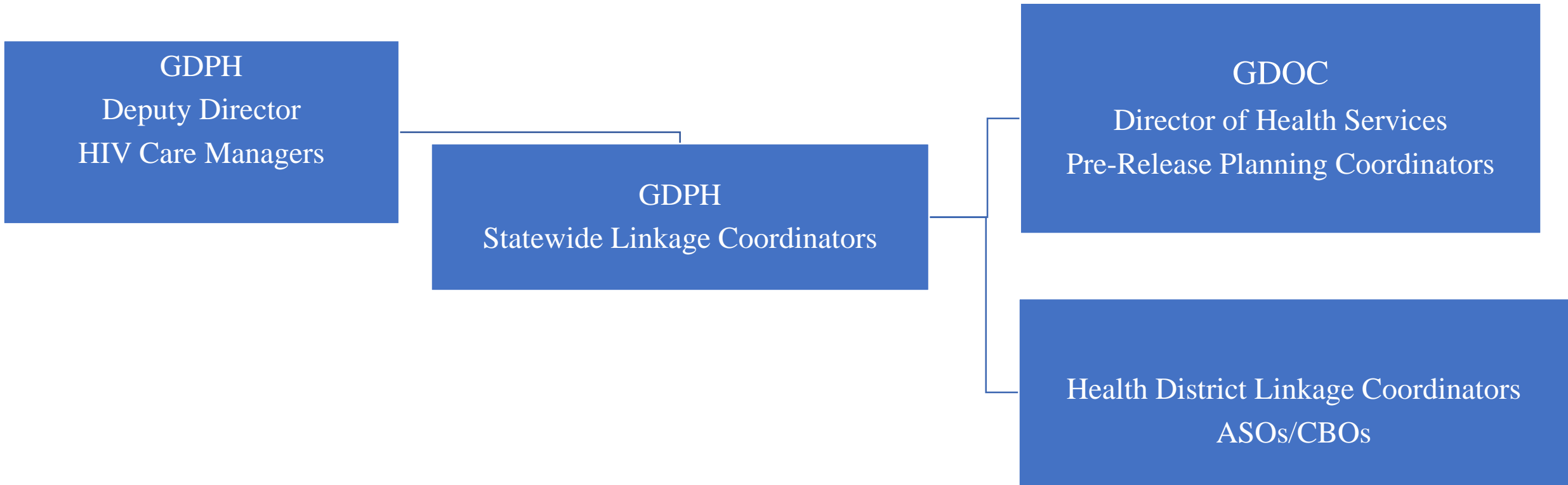
*August 12, 2020*



# *Overview*

- Linkage Program Structure
- Linkage to Care Goals
- Pre-Release Planning Program
  - i. Overview
  - ii. Scope of Work
  - iii. Support Team Structure
- Moving Forward
- Acknowledgements

# Linkage Program Structure



# *Linkage to Care Goals*



- Maintain continuity of care for HIV+ inmates and provide opportunities to ensure individuals incarcerated in prison are linked to care and other support services upon release.
- Linkage Coordinators utilize systematic networking among HIV care providers, HIV testing providers, and health departments.
- Create more efficient and effective systems to improve:
  - i. Linkage to and Retention in Care
  - ii. ART Adherence

# *Pre-Release Planning Program*



- The **Pre-Release Planning Program (PRPP)** formed in partnership with the Georgia Department of Corrections and the Georgia Department of Public Health to assist HIV+ inmates within the prison system get connected to reentry and community services to provide for a better transition.
- Assist in the process of identifying offenders who are HIV (+) throughout Georgia Department of Corrections' facilities who are approaching release, and who are in need of help identifying resources.
- Assist with connecting offenders to community services such as medical care, housing, case management, and other various social services.
- Utilize health care inter-organizational collaborations to coordinate HIV testing, HIV primary care and supportive services. Collaborating with Linkage Coordinators/Staffers supported by HIV Programmatic funding.

# *PRPP Overview*



- **Program Goals:** To assess and assist inmates living with HIV/AIDS with their transitional needs prior to release.
- **Selection Criteria for Program:** This program is voluntary and all eligible inmates are given an opportunity to decide if they wish to participate or decline participation.
- **Targeted Offenders:** HIV+ inmates with a tentative parole or max-out date with in six (6) to eighteen (18) months.



# *Pre-Release Planning Defined*

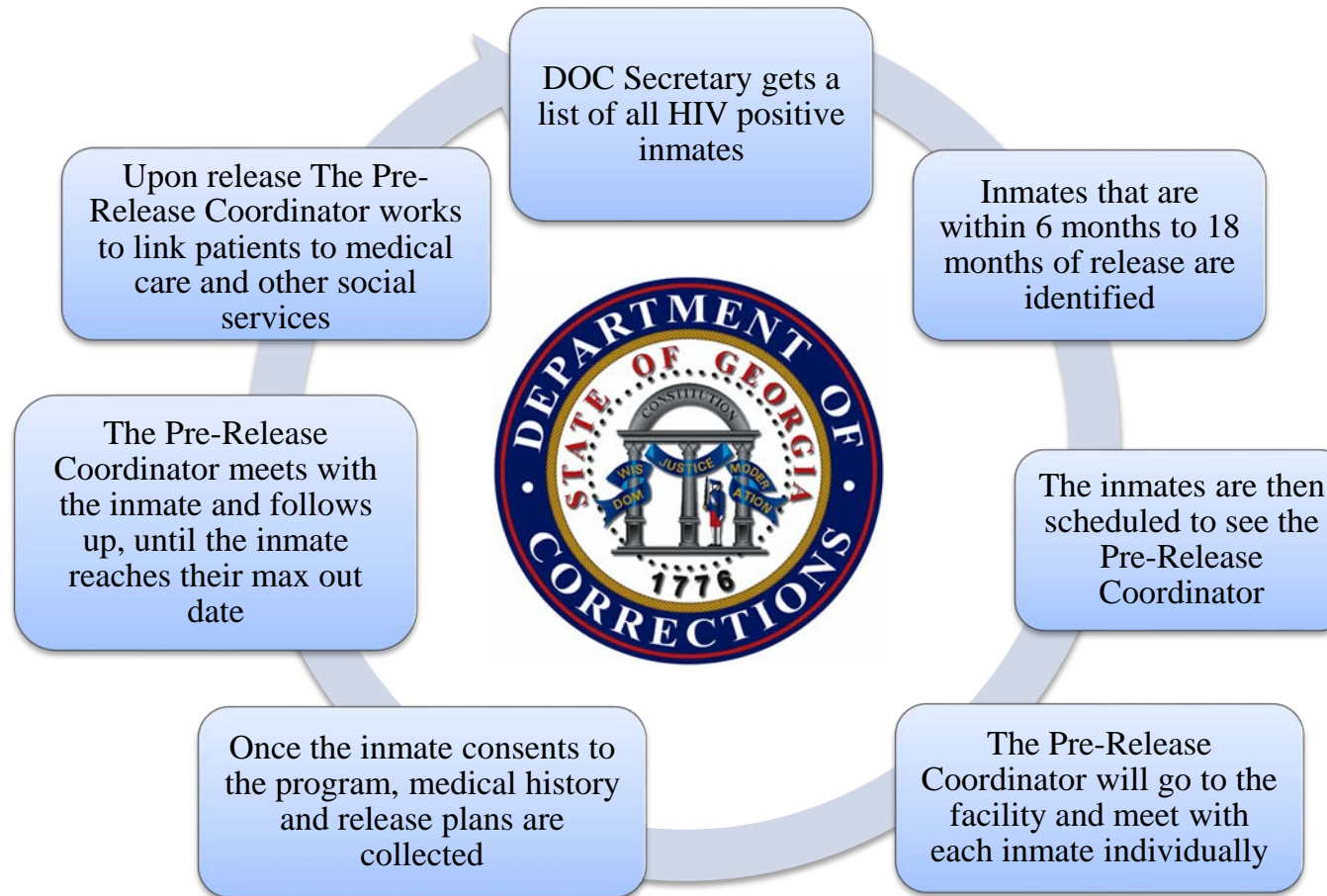


The Department of Corrections develops and implement individualized service plans for each inmate designed to address post-release needs and provide linkages with identified services within one (1) month of release, when applicable, including follow-up and/or monitoring. Ryan White eligibility is determined at the respective Ryan White supported Public Health agencies.

*Imminent:* Offender is within 6 (six) to 18 (eighteen) months of maximum release date or tentative parole month.

- Under 6 (six) months of release, referrals to community resources.
- Over 18 (eighteen) months of release, not eligible for enrollment into the PRPP.
- Offenders receiving medical benefits through VA, Medicaid/Medicare, or have any other medical care coverage for care and medications, not eligible for PRPP.

# Pre-Release Planning in Action



# *PRPP Scope of Work*



- Ryan White Part B and ADAP services eligibility is determined at the respective Health Districts' local Ryan White Part B supported agencies.
  
- Pre-Release Coordinators' Role:
  - One (1) to three (3) face to face case management sessions per inmate.
  - Follow-up and monitoring for twelve (12) months post release.
  
- Assessment of post-release needs include at minimum:
  - i. Medical/primary care
  - ii. Psychological/mental health
  - iii. Substance abuse
  - iv. Behavioral risk/prevention education
  - v. ADAP

# *Linkage Support System*



- Augusta University 340b Clinical Program
- District Linkage Coordinators
- Pre-Release Planning Coordinators
- Public/Private HIV Medical Providers
- Ryan White Case Managers

# *Moving Forward....*



- Expand PRPP existing partnerships with the Board of Pardons and Paroles and the Probation Division to track released participants under their supervision to monitor medical compliance, violations, re-arrests, etc.
- Maintain continuity of care and retention into HIV medical care.
- Resources for programmatic expansion.

# Acknowledgements



## Georgia Department of Corrections

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# Questions and Answers



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