

The CPG Quarterly



The Newsletter of the
New Hampshire HIV
Community Planning Group

VOLUME 2:ISSUE 1, SPRING 2005



The NH HIV CPG presents an update of the Division of Public Health Services Ryan White Care funding issues.

RYAN WHITE CARE

Submitted by: Heather Hauck, Section Chief

Every state receives funding from the Federal DHHS Health Resources and Services Administration (HRSA) through the Ryan White Care Act to provide services to PLWH who are uninsured or underinsured.

These services are determined by a participatory planning process in which PLWH, providers, and the State determine which services are priorities for the amount of funding received. The main service, which is earmarked by HRSA for specific and dedicated funding, is the AIDS Drug Assistance Program (ADAP).

Over the past five years, the NH DPHS STD/HIV Section Care Program with the participation of the NH HIV Community Planning Group Care Committee, has provided:

- access to medications for PLWH thru the ADAP,
- insurance continuation support in order to PLWH to continue to have full insurance coverage,
- access to outpatient primary care in order to maintain health care monitoring to slow disease progression,
- access to case management to assist with other supportive issues such as housing that allow PLWH to focus on their disease management
- access to home and community based care to assist with skilled nursing and hospice support when appropriate.

The Title I Boston EMA funding to the community based agencies and the NH DPHS STD/HIV Section

What's New with the CPG?

Care Program has been reduced this year and is anticipated to be further and significantly reduced in the next grant fiscal year due to cuts in the overall Title I Boston EMA funding from HRSA and due to potential reallocations within the EMA itself.

The potential magnitude of these reductions in funding in the EMA along would be:

- NH CARE Program could lose about \$1 million in 2006. The funding currently serves about 100 uninsured and underinsured clients and provides them with access to life-prolonging HIV related medications, insurance, primary outpatient care and diagnostic testing, case management, and home and community based care.
- Two of the three community based agencies that received direct funding from the Title I Boston EMA would no longer have the infrastructure funding to provide services to clients -this would impact roughly 235 clients.

Most importantly, these funding cuts and the resulting destabilization of the service delivery system potentially would cause loss of life in some cases due to clients' inability to access medications or primary care services or other supportive services that assist them with maintaining their medical adherence/management.

MAJOR ACCOMPLISHMENTS OF THE CPG

CPG Members rallied at the State House to advocate to Support the Smith-Bingaman Amendment to stop Medicaid cuts. Medicaid is the single largest source of funding for HIV/AIDS care in America, and hundreds of thousands of people living with AIDS and HIV depend on it. Members, AIDS Service Organizations and Consumers in NH as well as individuals across the US made numerous phone calls to State Representatives to accomplish a very significant victory in that the US Senate

2 SPRING NH HIV CPG NEWSLETTER

occurred with a 52-48 vote to adopt the Smith-Bingaman Amendment to the Senate Budget Resolution.

The Steering Committee is working on the eleventh annual CPG retreat which will be held in Attatash, NH during the weekend of May 20, 2005.

The Care Sub-committee is looking closely at Funding Streams for Ryan White Care and will present at the CPG Retreat.

The Prevention Sub-committee has been providing the membership with technical assistance on the Injecting Drug Using priority population.

The Membership, Charter and Mission Committee continues work on revising the current CPG Charter.

The Data, Needs Assessment and Evaluation Work Group Continues to work with consultants on the Needs Assessment Project.

The Public Policy and Reveiw Work Group hosted an Advocacy training with a great turnout.

OUR MEMBERSHIP

Currently, the CPG group has twenty-six voting members and 12 advisors. The membership reflects diversity in the skills, expertise and experience of our consumers and providers living in NH communities. This diversity is also reflected in the gender, race and ethnicity representation of the group. Forty-eight percent of the membership represents consumers.

MISSION OF THE CPG

The NH HIV Community Planning Group (CPG) seeks to promote effective HIV care and prevention programs in the State of New Hampshire. Through an ongoing informed participatory process, we seek to improve the quality of life for individuals living with HIV/AIDS and to reduce the further spread of HIV infection.

Members Write:

CONGRATULATIONS!

The Smith-Bingaman amendment to the Senate Budget Resolution to strike all Medicaid cuts passed at 2:11 PM (EST) by a vote of 52-48. Republican Senators voting for passage were Chafee, Coleman, Collins, DeWine, Smith, Snowe, and Specter. All Democratic Senators and Senator Jeffords (Independent) voted for the amendment.

HIV Minority Information

Submitted by: Annie Ball

"AIDS Threat to Minority Women Grows"
Miami Herald (03.06.05):Fred Tasker

A Global Coalition on Women and AIDS delegation recently began a five-city US tour to discuss women's experiences and to learn new prevention strategies for women. "The purpose of our Global Coalition is to shine a bright light on the very specific problems women and girls face, and to learn what works to fight them," said Dr. Kathleen Cravero, deputy executive director of UNAIDS, who led the visit.

On Saturday, the women toured AIDS facilities at University of Miami/Jackson Medical Center and held a roundtable discussion with about 100 students from UM, Miami Dade College, and Florida International University.

"Latin America has a tradition of machismo," said Gracia Violeta Ross Quiroga, 27, of Bolivia. "In some places, if a woman tried to get her husband to use a condom, he might kill her. He'd say 'You must have a lover.'"

Princess Kasune Zulu was 15 and had to support five brothers and sisters after losing

both parents to AIDS. "I had to get married to survive, to a man twice my age," said Zulu. "And he got me infected. It's the story of thousands of girls around the world."

"A decade ago, less than one-third of the world's HIV/AIDS patients were women; now it's more than half," said Cravero. "In parts of Africa and the Caribbean, 75 percent of the new HIV cases in the 15 to 30 age group are in young women. It makes young women an endangered species in these areas."

The delegates are also visiting media executives, lawmakers, religious leaders, and AIDS advocates in New York City, Nashville, Chicago, and Washington.

The Concord Monitor featured several CPG members in their April 24, 2005 *Living with AIDS* article by Meg Heckman. The article addressed the issue of federal funding and the lack of state funding that is available to support the many services that are needed by those living with this chronic illness. Several CPG Members and other living with HIV had the opportunity to tell their stories about the struggles, advocacy and hopes they have while living with HIV in New Hampshire. Check out the article at www.concordmonitor.com/apps/pbcs.dll/article?AID=/20050424/REPOSITORY/50240308/1037/NEWS04.

CPG, Sub-committee and Work Group meeting schedules for the months of June, July & August

All meetings are open to the Public

CPG Retreat
May 20 & 21, 2005
Attatash, NH

Data & Assessment Work Group
June 2, 2005

Public Policy Work Group
June 17, 2005

Membership, Charter & Mission
June 23, 2005

Prevention Committee
June 27, 2005

Care Committee
July 5, 2005

Public Policy Work Group
July 15, 2005

Membership, Charter & Mission
July 21, 2005

CPG Meeting
July 22, 2005

Data & Assessment
August 4, 2005

Prevention Meeting
August 22, 2005

The CPG, Prevention and Care Meetings are held at the Common Man Restaurant in Concord, NH.

A dial-in option is available for Sub-committee and Work Group Meetings. The dial-in number is 1-866-285-7780 (Access code: 9663264).