

MAINE STATE LEGISLATURE

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MAINE HIV ADVISORY COMMITTEE

2013 Annual Report to the State Legislature

March 1, 2014

Background, Mission, and Function

The statewide Maine HIV Advisory Committee (HIVAC) was created in 1987, in Maine statute Title 5, §09202 to advise the legislature, state agencies and departments on issues related to HIV care, treatment, prevention, education, and public policy. As part of the statutorily mandated requirements, we provide the Joint Standing Committee on Health and Human Services with this annual report.

Throughout the 1990's, the committee focused on social impacts: fear, stigma, and hopelessness, because effective treatments were not yet available. Now, with effective treatment widely available but costly, the HIVAC focusses on funding for access to primary and secondary prevention, and treatment.

2013 Key Accomplishments

- Successfully achieved comprehensive restructuring via LD 88, *An Act to Update the Maine HIV Advisory Committee*, with important revision of By-laws, Policies, and Procedures including new member application packet to effectively move forward allowing improved focus on HIV/AIDS-related issues

Federal Legislative and Policy Initiatives

- Monitoring and Supporting the Medicaid HIV Waiver

State Legislative and Policy Initiatives

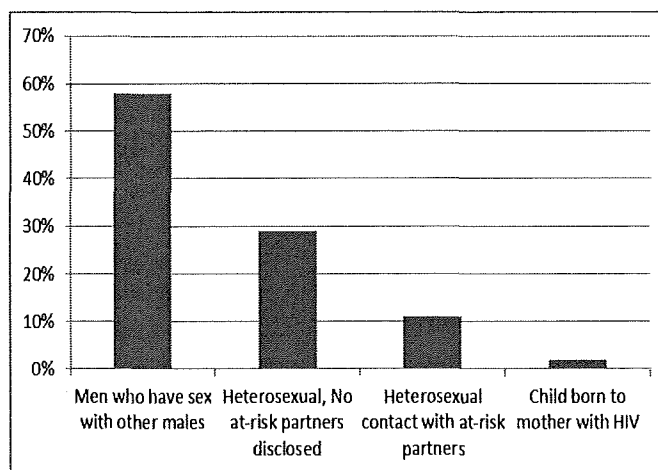
- Unanimously passed LD 1699, *An Act to Fund the Maine HIV Education and Prevention Program Within the Department of Education* to re-build HIV education capacity within school systems throughout the State of Maine supporting youth in peer-to-peer education programs assisted by health educators and teachers in 44 schools.
- Created substantive 2014 agenda of initiatives regarding implementation of the Affordable Care Act, raising awareness about continued relevance of HIV, STDs and Viral Hepatitis including recommendations to align Maine

policy with national models while continuing to monitor, inform and react to HIV, STD and Viral Hepatitis legislation.

Current HIV/AIDS Statistics & Trends

HIV/AIDS continues to spread in Maine through a variety of ways, with men who have sex with men being the most common mode (58%). Below are some of the most current statistics regarding HIV/AIDS in Maine.

Modes of HIV Transmission



People Living with HIV/AIDS in 2012

1,654 Total persons living with HIV/AIDS
1,375 Males
279 Females
320 Estimated people undiagnosed with HIV
12 Children born to HIV+ mothers

People Diagnosed with HIV/AIDS in 2012

48 Total new diagnoses
35 Males
13 Females
3 Under age 19
14 Over age 49

2014 HIVAC Priorities

- Introduce and champion LD 1699: *An Act to Fund the Maine HIV Education and Prevention Program through the Department of Education* to restore funding for this critical adolescent sexual health program.
- Develop and implement a campaign to raise awareness around continued relevance of HIV, STDs and Viral Hepatitis, including a legislative lobby day and testing event, and other awareness building activities.
- Monitor and provide input to the legislature and public and private organizations concerning the implementation of the Affordable Care Act.
- Promote the benefits of Medicaid expansion as it relates to HIV issues including the MaineCare waiver for people living with HIV, the receipt of preventative services and other aspects of HIV services.
- Evaluate current policies and practices around the delivery of HIV, STD and Viral Hepatitis services as compared to recommendations made by the U.S. Preventative Services Task Force, the Centers for Disease Control and the National HIV/AIDS Strategy. Make recommendations to align Maine policy and practice with nationally recognized frameworks.
- Continue to build the capacity of the HIV Advisory Committee to introduce and react to legislation, make recommendations and guide the implementation of policy related to HIV, STDs and Viral Hepatitis.

HIV Prevention

HIV diagnoses in Maine have remained relatively steady for the past decade, with 40 new diagnoses in 2013. The Epidemiologic Profile identifies the most frequent modes for HIV transmission as: male to male sexual contact, heterosexual contact, and injection drug use. Additionally, HIVAC focuses its interest on immigrants, high-risk newborns, and

other high-risk populations, in order to reduce HIV transmission.

Funding for HIV prevention through the Maine CDC is being sharply reduced as a result of the federal CDC spending more funds in higher HIV incidence states and cities. As a result, HIV prevention and testing services are fewer, and will become much smaller in the next years. HIVAC is concerned that decreased funding is hampering efforts to detect new HIV cases, and as such to prevent its spread. HIVAC is committed to increasing resources for HIV prevention in Maine.

HIV Treatment and Care

In 2013, the MaineCare HIV waiver program served 498 people living with HIV and AIDS. The waiver was reauthorized at the end of 2013, but for only one year, versus the usual three years. HIVAC understands that the Affordable Care Act is a good start for ensuring all people have access to health insurance, we also know that it will not cover everyone in the short term; therefore, we are very concerned about the future of the HIV waiver. The limited MaineCare services allows people living with HIV to access appropriate medication, avoid unnecessary visits to the emergency department, and, importantly, to access targeted case management, which helps clients afford safe housing, transportation, and job skills, in addition to medical needs.

The AIDS Drug Assistance Program (ADAP) provides service to almost half of Maine residents living with HIV who do not have health insurance by providing coverage for life-saving medications and premiums for health insurance, both within and outside of the Maine Healthcare Marketplace. HIV medication adherence reduces an individual's likelihood of transmitting HIV by suppressing the virus. ADAP is growing, primarily due to the increase in uninsured foreign born individuals not eligible for MaineCare.