

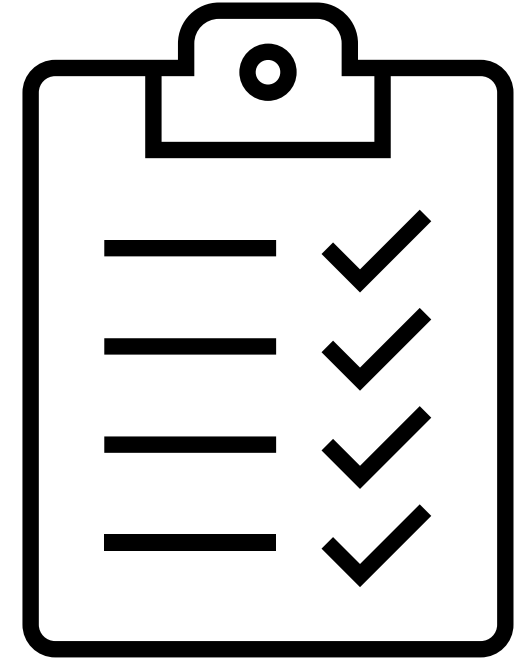
Achievements in EHE

Promising Procurement Practices for HIV Prevention and Care Programs

May 14, 2024

Agenda

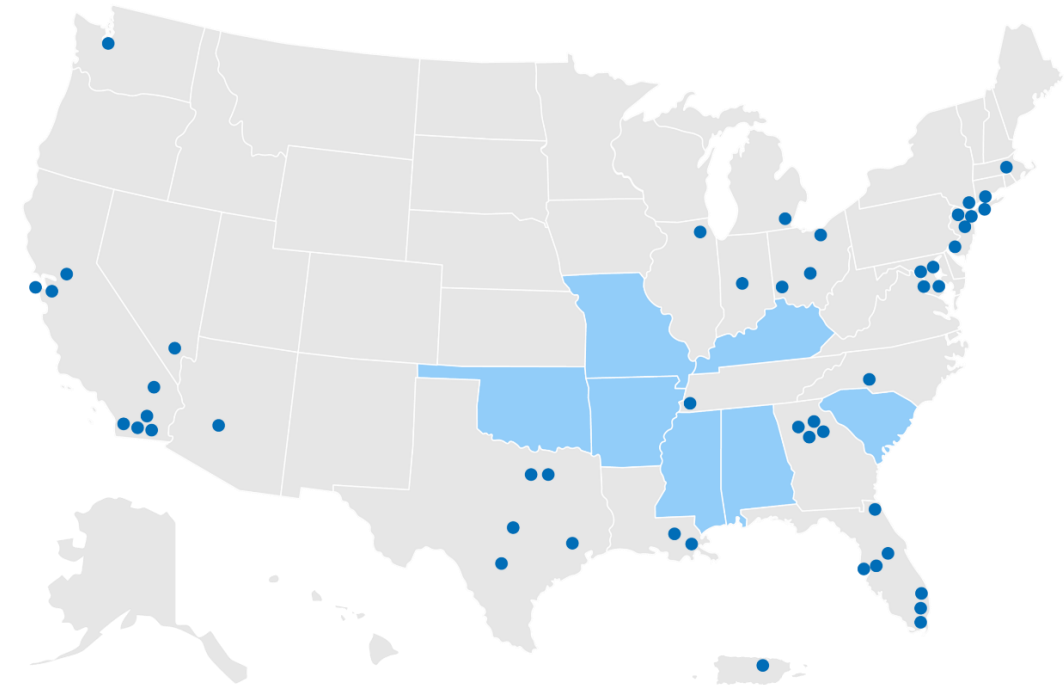
- Welcome & Overview
- Current Procurement Practices of EHE Jurisdictions
- Health Department Spotlight:
 - Los Angeles County
 - Houston
- Presentation: Promising Practices
- Breakout Group Discussion
- Wrap Up



NASTAD EHE PROGRAM

NASTAD is a **Technical Assistance (TA) provider** funded through *CDC PS19-1906 Component A: National Level Strategic Partnerships, Communication, Policy Analysis, and Interpretation*

- National partner to enhance state and local health departments' capacity to end the epidemic through **technical assistance and capacity building**.
 - Technical assistance for PS20-2010, Component A Phase 1 Jurisdictions implementing EHE activities.
- **Systems Coordination Provider**
 - Technical assistance for HRSA-20-078 funded health departments



nastad.org/ehe

Save the Date

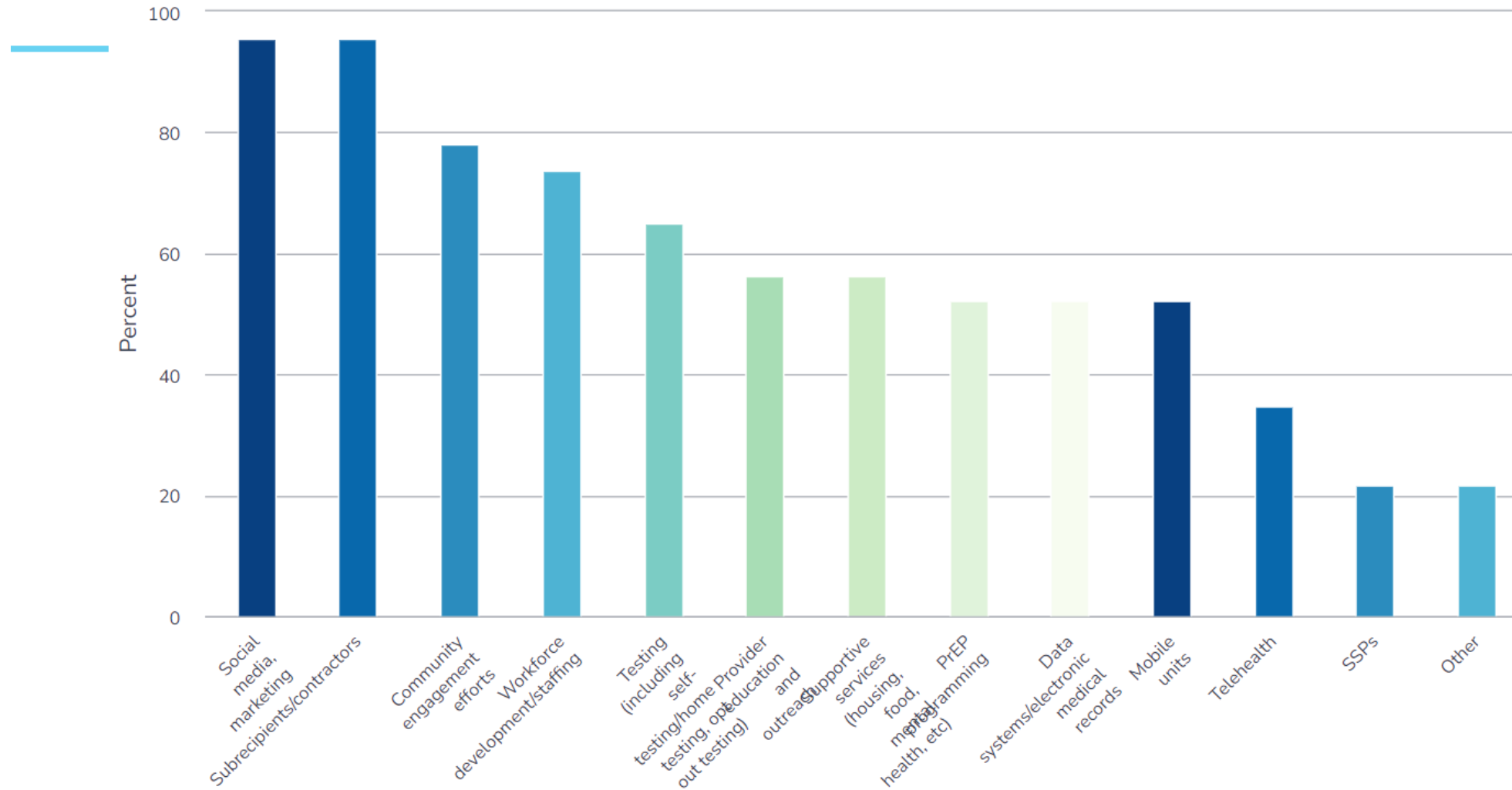
Building HIV Program Sustainability
through Blended Funding

Wednesday, May 29
2:00 PM ET/11:00 AM PT



EHE Questionnaire Results

What areas does your health department currently support through EHE funding? Check all that apply.



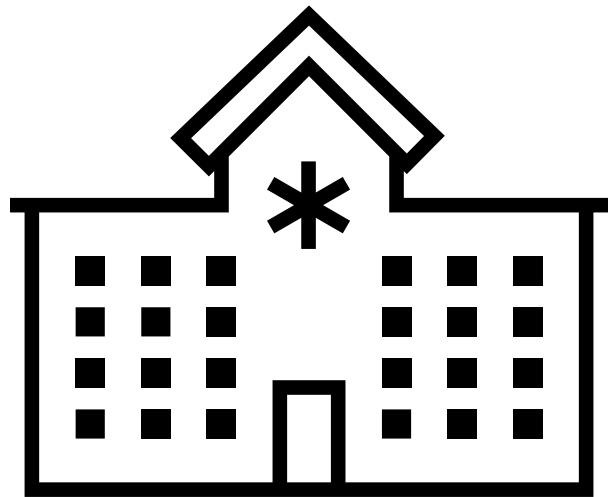
EHE Questionnaire Results

Low effort/quicker activities

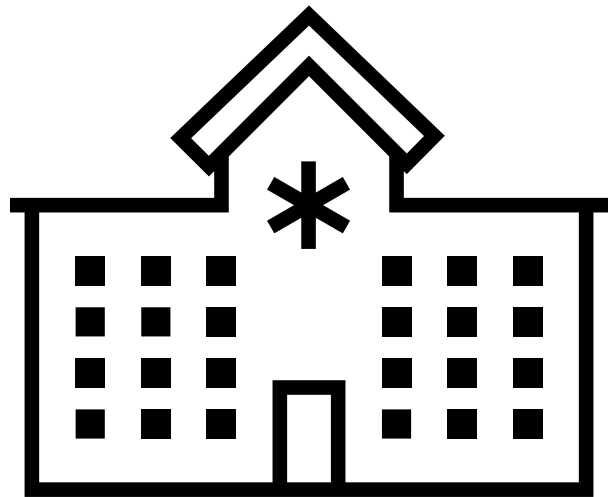
- Social media and marketing
- Supplies (safer sex supplies, tests, printed educational and promotional materials, etc)
- Adding funds to existing contracts

High effort/long-term activities

- New contracts/services
- Mobile units
- Rapid start
- Workforce development
- Provider education and engagement
- Early Intervention Services



Health Department Spotlight: Los Angeles County Department of Public Health



Health Department Spotlight: Houston Health Department

Promising Procurement Practices

- Utilizing data-driven and cost-effective approaches to deliver **specific interventions** through microplanning could be possible to expand services **without incurring large costs**.
- Review State allocation of funds to determine **more efficient ways** to expand maximum capacity of the **most-cost effective** prevention interventions.
- Highlight **substantial differences** between State transmission categories and the national average to **adjust budget** to disproportionately represented groups.
- **Leverage Funding Strategically** to Support Syringe Service Programs (SSPs)

Utilizing data-driven and cost-effective approaches to deliver specific interventions through microplanning could be possible to expand services without incurring large costs.

EXAMPLE:

A study conducted in 2018 found that in New Jersey, their data showed higher-than-average representation of persons who inject drugs among persons diagnosed with HIV while the ranking of the cost-effectiveness of testing in non-clinical settings of PWID fell too low to receive funding.

POSSIBLE SOLUTIONS

- The HD Program Manager implements new ways to conduct testing in non-clinical settings through efficiently expanding partner services for PWID.
- The HD could introduce or expand existing cost-effective microplanning tools to target high-risk populations that do not engage in traditional or clinical settings.

Reach Maximum Capacity of the Most Cost Effective Prevention Interventions

Review State allocation of funds to determine more efficient ways to expand maximum capacity of the most-cost effective prevention interventions.

Cost-Effectiveness Analysis: Evaluate the cost-effectiveness of each intervention. This involves assessing the cost per person reached, cost per HIV infection averted, and cost per quality-adjusted life-year (QALY) gained. Interventions that deliver the greatest impact for the lowest cost should be prioritized.

Stakeholder Engagement: Involve stakeholders such as policymakers, healthcare providers, community leaders, and people living with HIV/AIDS in the review process. Their input can help ensure that interventions are tailored to meet the needs of the community and address underlying social determinants of health.

Scenario Planning: Develop different scenarios for reallocating funds based on the findings of the review. Consider factors such as population demographics, prevalence rates, geographic distribution of HIV cases, and emerging trends in transmission.

Cost-Benefit Analysis: Conduct a cost-benefit analysis for each scenario to estimate the potential impact on HIV transmission rates, healthcare costs, and overall public health outcomes.

Compare State Data
against Federal Data to
Identify Substantial
Differences in
Transmission Categories

Identify Disproportionately
Represented Groups

Assessment of Resource
Allocation

Gap Analysis

Targeted Interventions

Leveraging
Funding
Strategically to
Support Syringe
Service
Programs (SSPs)

Integrate HIV
Services

Expand Harm
Reduction
Services

Enhance
Outreach and
Engagement

Invest in
Technology and
Innovation

Support
Capacity
Building

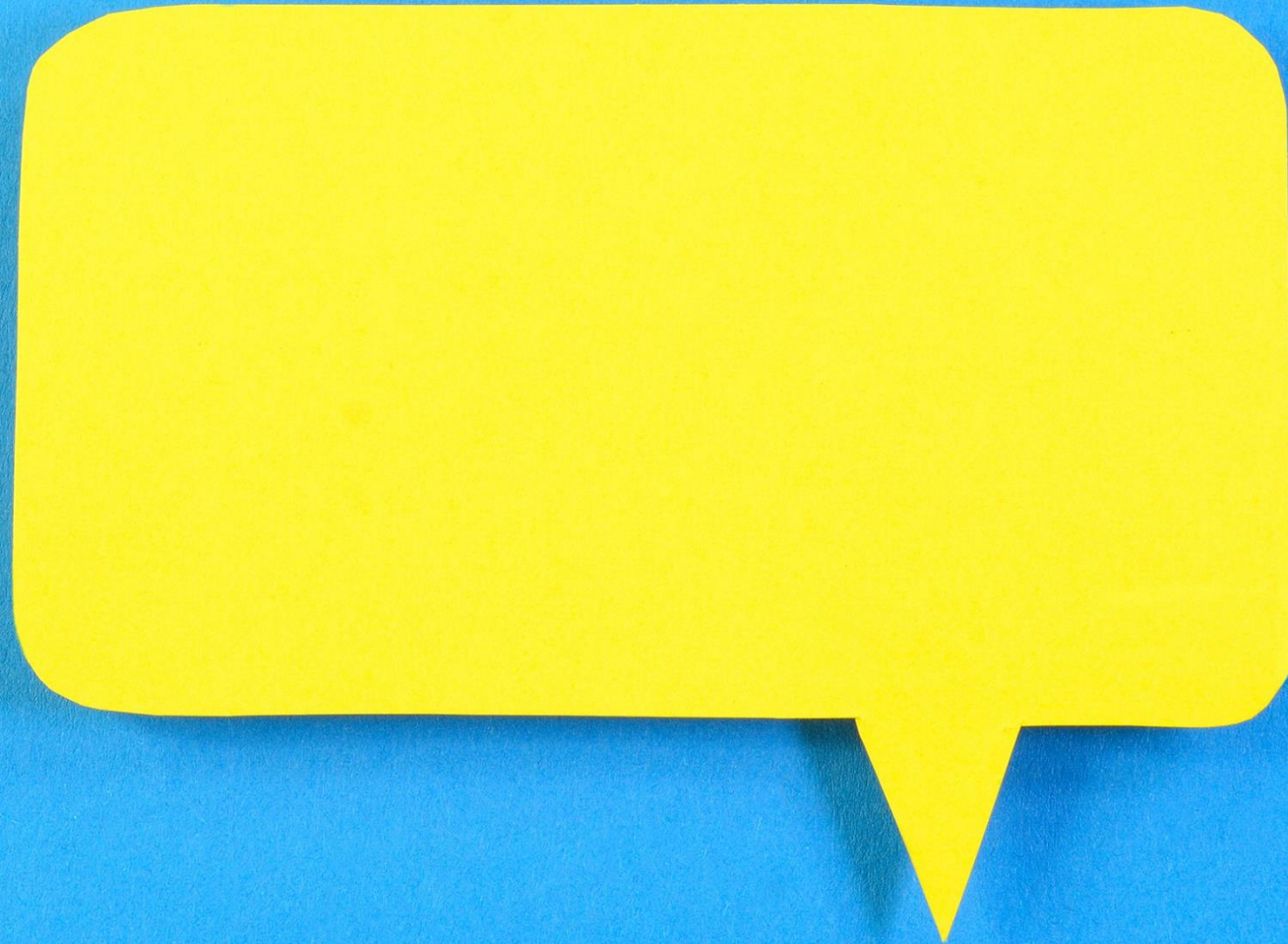
Leverage
Partnerships

Data-Driven
Decision
Making

Revenue
Generation

Strategic
Planning and
Collaboration

Group Discussion



Group Discussion

- What activities has your jurisdiction successfully funded through EHE?
- What challenges has your jurisdiction faced with utilizing EHE funds?
- How do you plan to increase the administrative and workforce capacity of your jurisdiction going forward to continue activities and implement new strategies?
- How do you plan to increase engagement and contribution of internal and external stakeholders going forward?
- How do you plan to bridge care and prevention programs going forward?

Contact

Request technical assistance (TA):

- www.cdc.gov/hiv/programresources/capacitybuilding/
- www.nastad.org/technical-assistance

NASTAD's EHE TA

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