

# OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH



## HHS PUBLIC HEALTH POLICY PRIORITIES

PRESENTED TO THE

APHA POLICY ACTION INSTITUTE

February 6, 2019

**ADMIRAL BRETT P. GIROIR, M.D.**

Assistant Secretary for Health and Senior Advisor for Opioid Policy





## OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH

*Leading America to Healthier Lives*

- **Providing trusted data and information** to serve HHS, the federal government, states and localities, and the public in general
- **Convening partners** federal agencies, state and local, professional societies, non-profits, academia, patient advocates
- **Developing novel initiatives** Gaining situational awareness, identifying gaps, building teams, setting a common agenda, and supporting infrastructure



# HIV HAS COST AMERICA TOO MUCH FOR TOO LONG

**700,000**

American lives lost to HIV since 1981

**\$20 billion**

Annual direct health expenditures by U.S. government for HIV prevention and care

Without intervention and despite substantial progress another

**400,000**

Americans will be newly diagnosed over 10 years despite the available tools to prevent infection

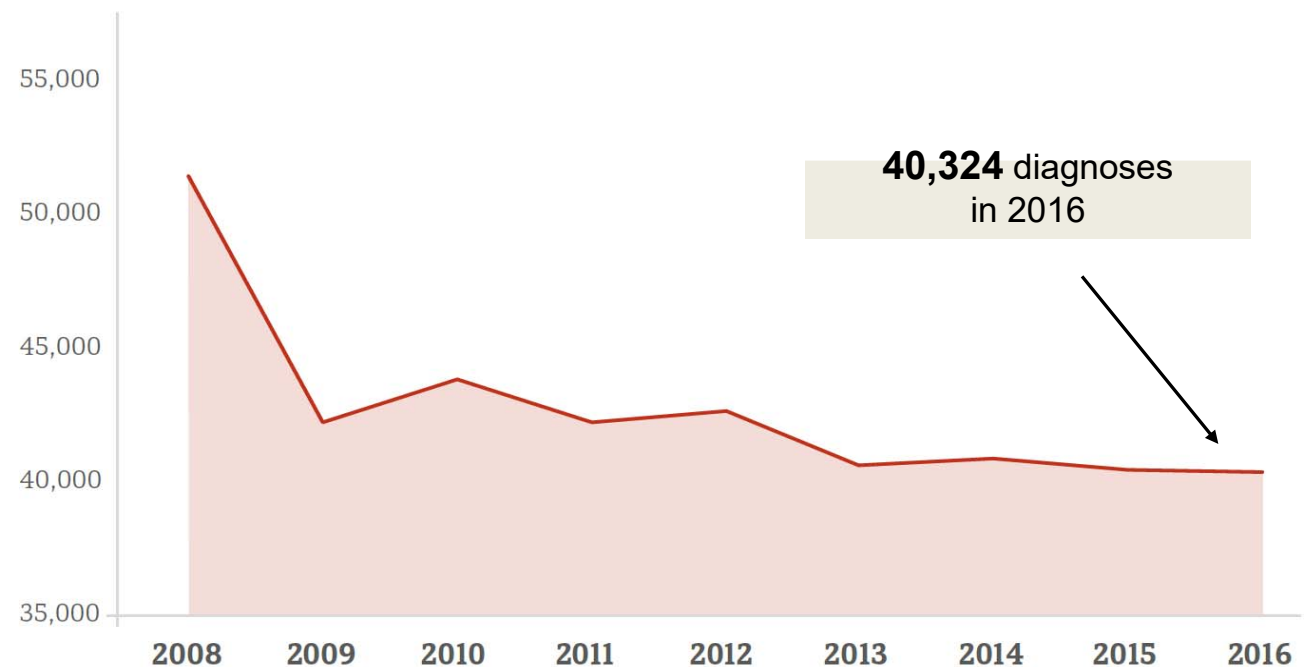
Ending  
the  
HIV  
Epidemic

[www.hiv.gov](http://www.hiv.gov)

# NEW HIV DIAGNOSES HAVE DECLINED SUBSTANTIALLY BUT PROGRESS IS STALLED

## MAJOR PROGRESS

- **1980s**  
peak incidence near 130,000 annually
- **1985 - 2012**  
interventions have driven infections down to <50,000 annually



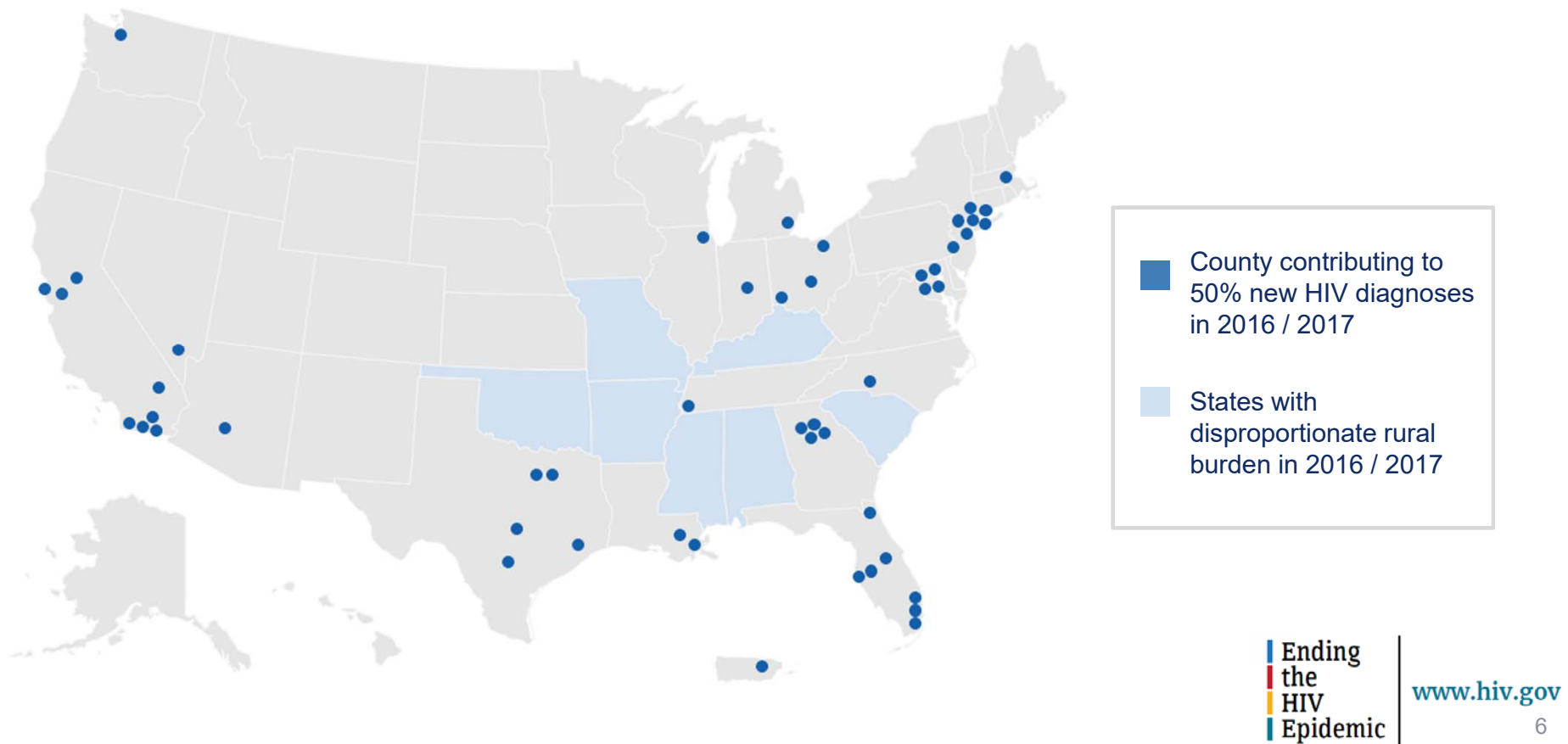
# THE TIME IS NOW: RIGHT DATA, RIGHT TOOLS, RIGHT LEADERSHIP

- **Epidemiology**
  - Most new HIV infections are clustered in a limited number of counties
- **Detect and Respond Strategy**
  - Extensive surveillance infrastructure in place, rapid detection and response capacity increasing
- **Antiretroviral Therapy**
  - Highly effective, saves lives, prevents sexual transmission; increasingly simple and safe
- **Proven Models of Effective of Care and Prevention**
  - 25 years' experience engaging and retaining patients in effective care
- **Pre-exposure Prophylaxis (PrEP)**
  - FDA-approved and highly effective drug to prevent HIV infection

**There is a real  
risk of HIV  
exploding again  
in the U.S.**

*due to several factors  
including injection drug  
use and diagnostic  
complacency among  
healthcare providers*

## 48 COUNTIES, 7 STATES WITH SUBSTANTIAL RURAL BURDEN, DC AND SAN JUAN ACCOUNT FOR 50% OF NEW DIAGNOSES



# EARLY DIAGNOSIS IS ESSENTIAL TO END THE HIV EPIDEMIC

- **1 in 2** people with HIV have the virus at least 3 years before diagnosis
- **1 in 4** people with HIV have the virus at least 7 years before diagnosis
- **1 in 5** people with HIV are diagnosed with advanced disease (AIDS)
- **7 in 10** people with HIV saw a healthcare provider in the 12 months prior to diagnosis and failed to be diagnosed

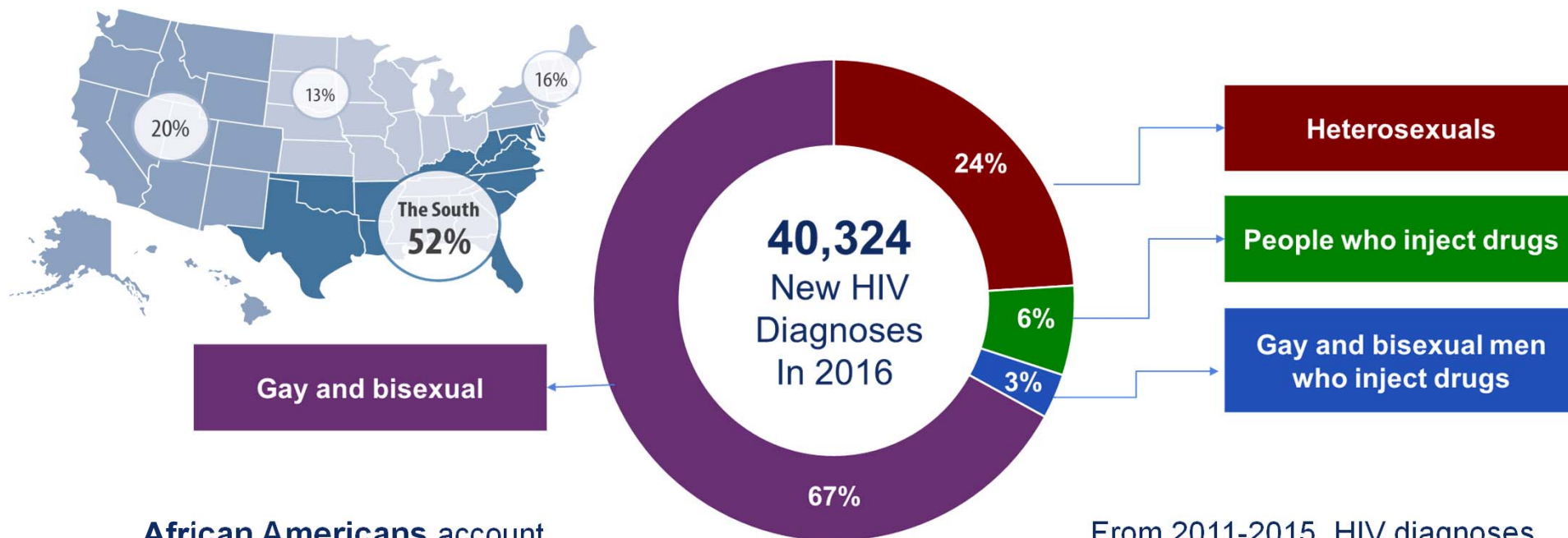
**87% of new HIV infections are transmitted from people who don't know they have HIV or are not retained in treatment**

Daily et al., [MMWR Weekly Report](#), 2017; Skarbinski et al., [JAMA](#), 2015; Gopalappa et al., [Med Decision Making](#), 2017

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# HIV DIAGNOSES ACROSS SPECIFIC GROUPS



**African Americans** account for 44% of HIV diagnoses, but comprise only 12% of U.S. population

From 2011-2015, HIV diagnoses among **American Indians/ Alaska Natives** increased 38%

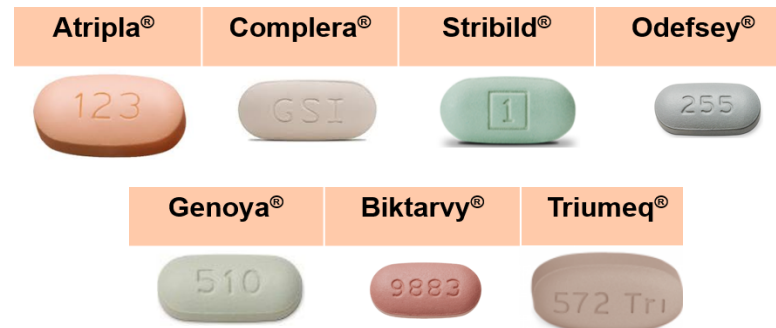


# HIV MEDICAL THERAPY IS SIMPLE AND EFFECTIVE



- Complex
- Limited potency
- High toxicity

## TODAY



- Simplified (one pill per day), many options
- Very potent
- Few side effects

# HIV TREATMENT PREVENTS NEW INFECTIONS

## HIV TREATMENT as PREVENTION

A HIGHLY EFFECTIVE STRATEGY TO PREVENT THE SEXUAL TRANSMISSION OF HIV



People living with HIV who take  
**HIV medication daily  
as prescribed**



and get and keep an  
**undetectable viral load**



**have effectively no risk of  
sexually transmitting HIV**  
to their HIV-negative partners



JANUARY 2019

LEARN MORE AT [HIV.GOV/TASP](http://HIV.GOV/TASP)

**JAMA**® January 10, 2019

VIEWPOINT

## HIV Viral Load and Transmissibility of HIV Infection Undetectable Equals Untransmittable

*Robert Eisinger, Carl Dieffenbach, Anthony Fauci*

The U=U concept bridges the best of biomedical science with current concepts in behavioral and social science by removing the sense of fear and guilt that a person may be harming someone else, as well as the feeling of self-imposed and external stigma that many people with HIV experience.

— RW Eisinger, CW Dieffenbach and AS Fauci



Credit: NIAID

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# PRE-EXPOSURE PROPHYLAXIS (PrEP)

## PrEP

### WHAT IS PrEP?

- **Single tablet**, Truvada® is currently the only FDA-approved drug for PrEP in the U.S.
- At-risk people can reduce their chance of HIV infection by up to **97%**

**OF THE 1.2 MILLION AT HIGH RISK FOR HIV, 10% ARE ON PrEP**

### BARRIERS TO PrEP

- Attitudes and stigma that prevent testing and initiation of PrEP
- Lack of awareness among individuals at risk and among providers
- Lack of perceived risk among those at risk and among providers
- Barriers to linkage to PrEP care and prescribing PrEP

# ACHIEVING THE GOALS

## **DIAGNOSE**

All people  
with HIV as early  
as possible after  
infection

## **TREAT**

The infection  
rapidly and  
effectively to  
achieve sustained  
viral suppression

## **PROTECT**

People at highest  
risk of HIV with  
potent evidence-  
based  
interventions

## **RESPOND**

Rapidly and  
effectively to  
clusters and  
outbreaks of new  
HIV infections

## **HIV HEALTHFORCE**

A boots-on-the-ground team that ensures implementation of HIV elimination plans

## PHASES OF THE HIV INITIATIVE

PHASE 1: Focused effort to reduce new diagnoses by 75% in 5 years

PHASE 2: Widely disseminated effort to reduce new diagnoses by 90% in the following 5 years

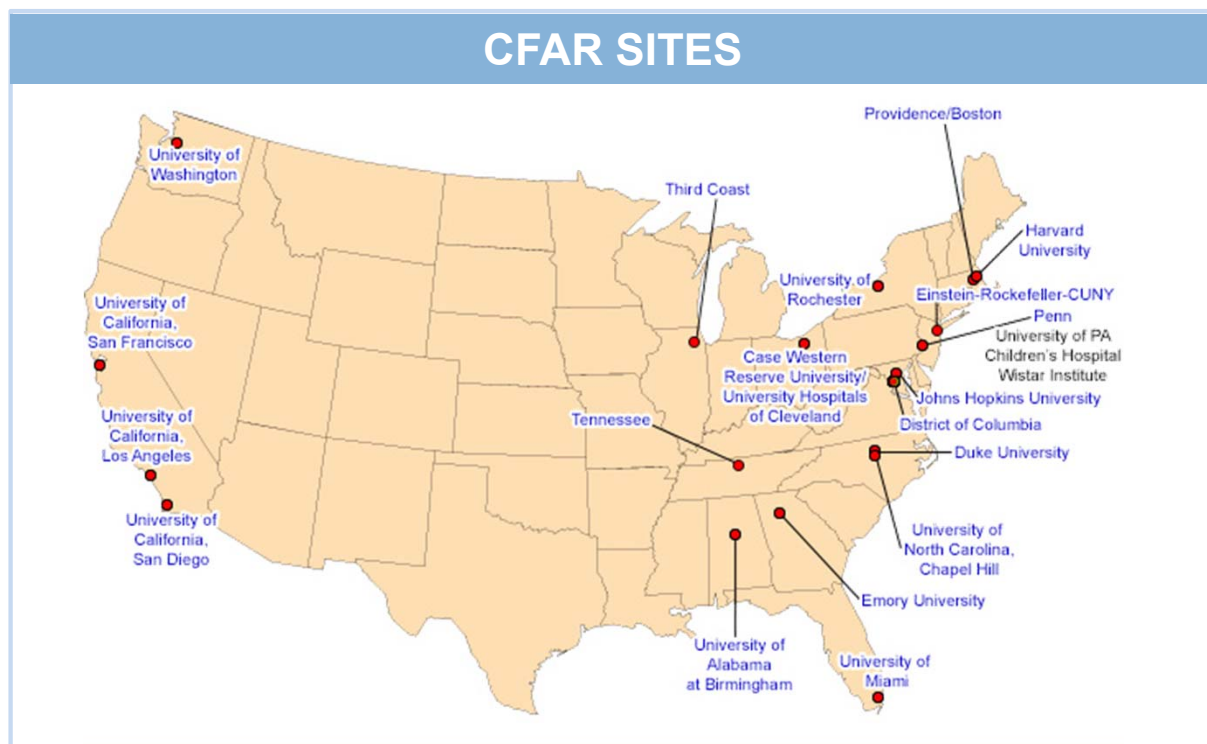
PHASE 3: Intense case management to maintain the number of new diagnoses at < 3,000 per year

# IMPLEMENTATION PLAN

- **Target focus initially on high incidence geographies**
  - Target 48 counties, DC and San Juan that account for 50% of diagnoses
  - Target select states with high rural HIV burdens to establish effectiveness in rural environment
- **Emphasize early diagnosis, immediate treatment, engagement**
  - Treat diagnosed persons rapidly to achieve viral suppression and stop transmission
  - Increase viral suppression from 50% to 90%: **HRSA Ryan White has achieved 85%**
- **Expand pre-exposure prophylaxis (PrEP)**
  - Increase use by at-risk population from 10% to at least 50%
- **Rapid and overwhelming response to HIV outbreak clusters**
  - Monitor for early detection of clusters
  - Treat each new diagnosis as a “sentinel event”

# NIH/NIAID: CENTERS FOR AIDS RESEARCH (CFAR)

*Supporting multidisciplinary research aimed at reducing the burden of HIV in the U.S.*



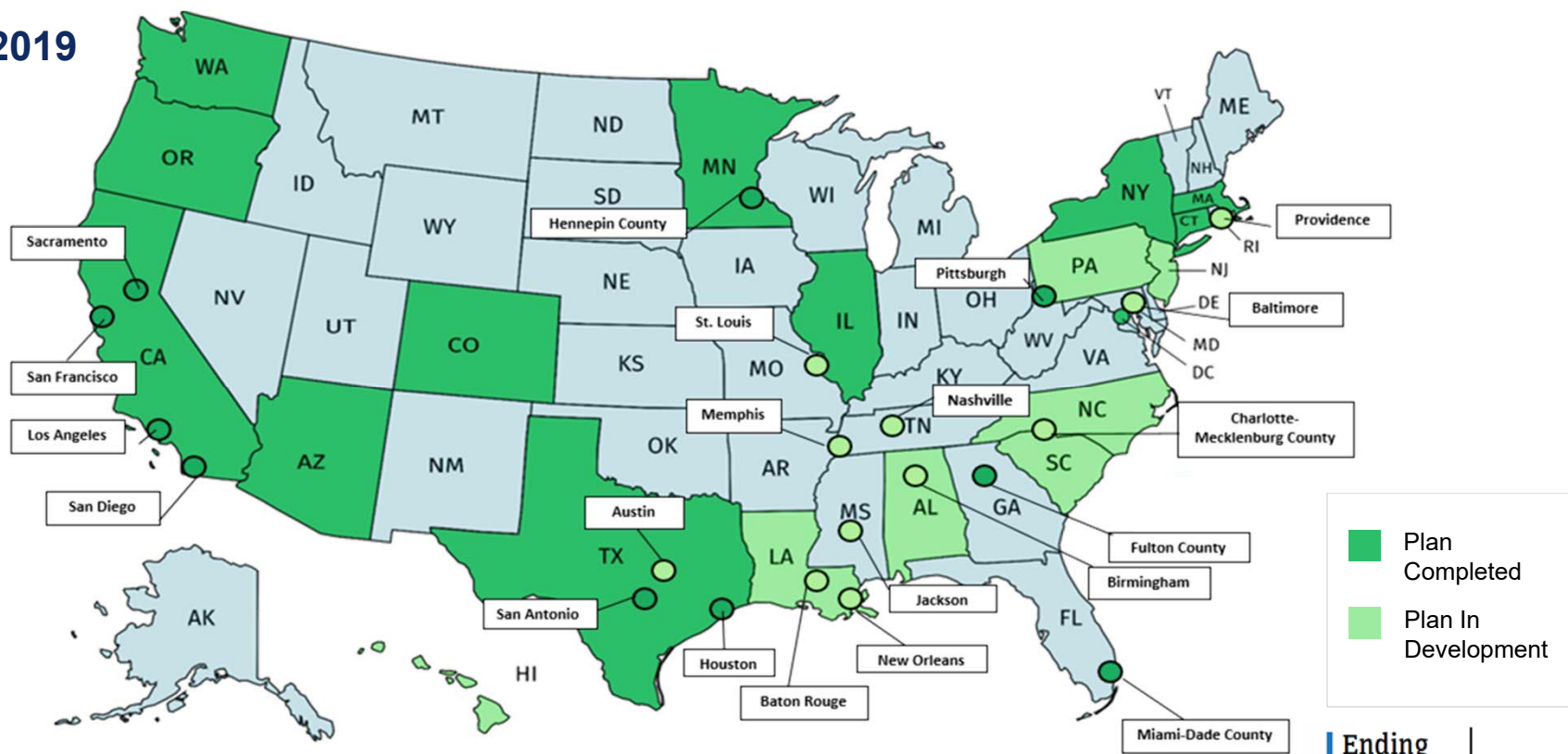
**Expands current activities to inform HHS and partners on**

- Evidence-based best practices
- Effectiveness of approaches including regional strategies

# FEDERAL INITIATIVE WILL LEVERAGE STATE AND LOCAL EFFORTS

## STATUS OF JURISDICTIONAL PLANS TO “END THE HIV EPIDEMIC”

January 2019



<https://www.nastad.org/resource/ending-hiv-epidemic-jurisdiction-plans>

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# PRESIDENTIAL ADVISORY COUNCIL ON HIV/AIDS (PACHA)

## **Carl Schmid, M.B.A., Co-Chair**

*Deputy Executive Director*

*The AIDS Institute*



- Convening Group member of the Federal AIDS Policy Partnership and co-chairs its AIDS Budget and Appropriations Coalition
- Expertise in health care financing systems, including Medicaid and Medicare
- PACHA member and chaired Domestic Subcommittee

## **John Wiesman, DrPH., M.P.H., Co-Chair**

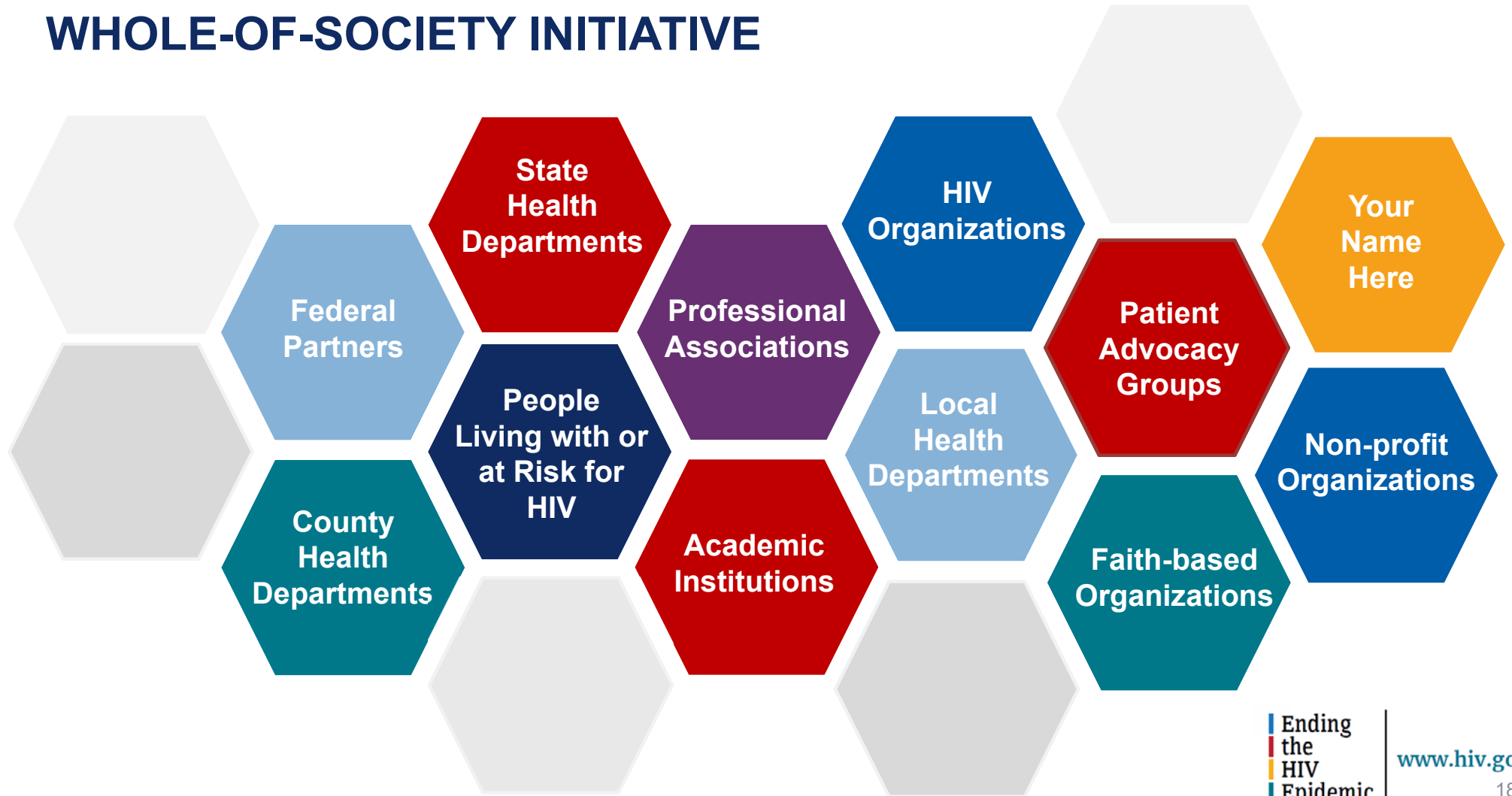
*Secretary of Health*

*Washington State Department of Health*



- More than 22 years of local public health experience focuses on whole systems approaches to improving health
- Immediate past president of the Association of State and Territorial Health Officials (ASTHO) and chairs the association's Government Relations Committee

# WHOLE-OF-SOCIETY INITIATIVE



**Now**  
is the time.



**BRETT P. GIROIR, M.D.**

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Assistant Secretary for Health,  
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