



## The ADAP Watch

### ADAPs with Waiting Lists (4,157 individuals in 9 states\*, as of October 28, 2010)

**Florida: 2,306 individuals**  
**Georgia: 676 individuals**  
**Iowa: 29 individuals**  
**Louisiana: 550 individuals\*\***  
**Montana: 10 individuals**  
**North Carolina: 59 individuals**  
**Ohio: 303 individuals**  
**Rhode Island: 7 individuals**  
**South Carolina: 217 individuals**

### ADAPs with Other Cost-containment Strategies (instituted since April 1, 2009, as of September 29, 2010)

**Arizona:** reduced formulary  
**Arkansas:** reduced formulary, lowered financial eligibility to 200% FPL  
**Colorado:** reduced formulary  
**Florida:** reduced formulary  
**Georgia:** reduced formulary, implemented medical criteria, continued participation in the Alternative Method Demonstration Project (AMDP)  
**Idaho:** capped enrollment  
**Illinois:** reduced formulary, instituted monthly expenditure cap  
**Iowa:** reduced formulary  
**Kentucky:** reduced formulary  
**Louisiana:** discontinued reimbursement of laboratory assays  
**Missouri:** reduced formulary  
**New Jersey:** reduced formulary  
**North Carolina:** reduced formulary  
**North Dakota:** capped enrollment, instituted annual expenditure cap, lowered financial eligibility to 300% FPL  
**Ohio:** reduced formulary, lowered financial eligibility to 300% FPL (disenrolled 257 clients)  
**South Carolina:** instituted annual expenditure cap, lowered financial eligibility to 300% FPL  
**Utah:** reduced formulary, lowered financial eligibility to 250% FPL (disenrolled 89 clients)  
**Washington:** instituted client cost sharing, reduced formulary (for uninsured clients only)  
**Wyoming:** capped enrollment, reduced formulary

### ADAPs Considering New/Additional Cost-containment Measures (before March 31, 2011\*\*\*)

**Arizona:** establish waiting list  
**Colorado:** establish waiting list  
**Idaho:** establish waiting list  
**Illinois:** reduce formulary, institute monthly expenditure cap, lower financial eligibility to 350% FPL  
**Mississippi:** reduce formulary, lower financial eligibility to 200% FPL, institute monthly expenditure cap  
**New Jersey:** institute policy that clients between 300% and 500% FPL will only receive antiretrovirals and opportunistic infection medications  
**Ohio:** disenroll approximately 861 clients based on new medical criteria  
**Oregon:** increase client cost sharing  
**Puerto Rico:** reduce formulary  
**South Carolina:** disenroll 200 clients  
**Texas:** reduce formulary, lower financial eligibility, establish enrollment cap, implement client cost sharing, institute annual and/or monthly expenditure cap  
**Virginia:** establish waiting list, reduce formulary  
**Washington:** disenroll clients who fail to participate in insurance requirement  
**Wyoming:** establish waiting list, reduce formulary

\*As a result of ADAP emergency funding, Hawaii, Idaho, Kentucky, South Dakota, and Utah eliminated their waiting lists.

\*\*Louisiana has a capped enrollment on their program. This number is a representation of their current unmet need.

\*\*\*March 31, 2011 is the end of ADAP FY2010. ADAP fiscal years begin April 1 and end March 31.