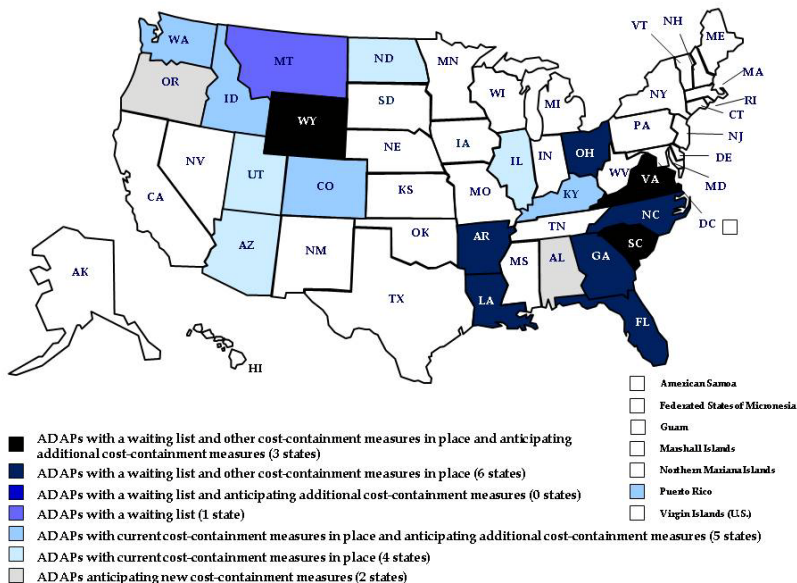




As of February 10, 2011, there were 6,235 individuals on AIDS Drug Assistance Program (ADAP) waiting lists in 10 states. This is a 32 percent increase from the 4,732 individuals on the December 2010 ADAP Watch. Eighteen ADAPs, nine with current waiting lists, have instituted additional cost-containment measures since April 1, 2009 (reported as of February 2, 2011). In addition, ten ADAPs, including two with current waiting lists, reported they are considering implementing new or additional cost-containment measures by the end of ADAP’s current fiscal year (March 31, 2011).

States that have instituted cost containment measures and those considering them, in addition to implementing waiting lists, are reducing program financial and medical eligibility, capping enrollment, reducing the number of drugs on the formulary and cutting other services, all of which impact access to life saving HIV medications for medically vulnerable individuals.

ADAPs with Current or Anticipated Cost-Containment Measures, Including Waiting Lists, February 2011



About ADAP: ADAPs provide life-saving HIV treatments to low income, uninsured, and underinsured individuals living with HIV/ AIDS in all 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands, the Federated States of Micronesia, American Samoa, and the Republic of the Marshall Islands. In addition, some ADAPs provide insurance continuation and Medicare Part B wrap-around services to eligible individuals. Ryan White Part B programs provide necessary medical and support services to low income, uninsured, and underinsured individuals living with HIV/ AIDS in all states, territories and associated jurisdictions.

About NASTAD: Founded in 1992, NASTAD is a nonprofit national association of state and territorial health department HIV/ AIDS program directors who have programmatic responsibility for administering HIV/ AIDS and viral hepatitis health care, prevention, education, and supportive services programs funded by state and federal governments. For more information, visit www.NASTAD.org.

ADAPs with Waiting Lists (6,235 individuals in 10 states*, as of February 10, 2011)

Arkansas: 27 individuals
Florida: 3,204 individuals
Georgia: 956 individuals
Louisiana: 673 individuals**
Montana: 19 individuals
North Carolina: 117 individuals
Ohio: 412 individuals
South Carolina: 397 individuals
Virginia: 427 individuals
Wyoming: 3 individuals

ADAPs with Other Cost-containment Strategies (instituted since April 1, 2009, as of February 2, 2011)

Arizona: reduced formulary
Arkansas: reduced formulary, lowered financial eligibility to 200% FPL, disenrolled 99 clients in September 2009
Colorado: reduced formulary
Florida: reduced formulary, lower financial eligibility to 300% FPL, transition clients to Welvista from 2/14-3/31/11
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
Kentucky: reduced formulary
Louisiana: discontinued reimbursement of laboratory assays
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 in July 2010)
Puerto Rico: reduced formulary
South Carolina: lowered financial eligibility to 300% FPL
Utah: reduced formulary, lowered financial eligibility to 250% FPL (disenrolled 89 clients in FY2010)
Virginia: reduced formulary, only distribute 30-day prescription refills
Washington: instituted client cost sharing, reduced formulary (for uninsured clients only), only pay insurance premium for clients currently on antiretrovirals
Wyoming: reduced formulary, instituted client cost sharing

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

Alabama: cap enrollment, establish waiting list (as of April 1, 2011), reduce formulary
Colorado: institute client cost sharing
Idaho: establish waiting list
Kentucky: reduce formulary
Oregon: reduce formulary
Puerto Rico: reduce formulary
South Carolina: disenroll 200 clients
Virginia: transition 760 clients onto waiting list
Washington: reduce formulary
Wyoming: reduce formulary

**As a result of ADAP emergency funding, Hawaii, Idaho, Iowa, 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.*