VIRGINIA DEPARTMENT OF HEALTH ADAP ADVISORY COMMITTEE MEETING - 9/28/2023

NAME	ORGANIZATION	IN-PERSON	ZOOM	ABSENT
Kathleen A. McManus, MD, MSCR	UVA Health System, ID Fellow Program		\boxtimes	
Robert Higginson, PA	VCU Medical Center Infectious Disease Clinic			\boxtimes
Daniel Nixon, DO, PhD	VCU HIV/AIDS Center			\boxtimes
Sarah West, MD	Infectious Disease Associates of Central Virginia			
Karen Council, OSS	Hampton Health Department			
Edward Oldfield, MD	Eastern Virginia Medical School			\boxtimes
Greg Townsend, MD	UVA, Div of Infectious Diseases & Internal Health			\boxtimes
Linda Eastham, MSN, RN, FNP	UVA School of Nursing			\boxtimes
Rebecca Dillingham, MD, MPH	Sentara Medical Center			\boxtimes
David Wheeler, MD	INOVA Juniper Program			
Dolorosa (Dolly) Sikipa, (SA-KEEP-A), ACRN	Inova Juniper Program, Prince William Offices			\boxtimes
Saritha R. Gomadam, DO	Richmond and Henrico Health Districts			
Juan Pierce	The Minority Health Consortium			
Mark Baker	Total Healthcare			
Stephanie Wheawill, PharmD	Virginia Department of Health/Pharmacy Services			\boxtimes
Michael Bane, PharmD	CVS Pharmacies			
Laurie Forlano, DO, MPH	VDH/Office of Epidemiology			
Elaine G. Martin	VDH/Division of Disease Prevention			
Kimberly Scott, M.S.P.H.	VDH/HIV Care Services			
Kimberly Eley, MPH, MBA	VDH/Medication Access, HIV Care Services			
Safere Diawara, MD, MPH	VDH/HIV Care Services		\boxtimes	
Jasmine Ford, LPN, BA	VDH/HIV Care Services			
Felencia McGee, DHA, CHES	VDH/ Division of Disease Prevention		\boxtimes	
Jenny Calhoun, RN	VDH/Division of Disease Prevention		\boxtimes	
Guest: Dianna Williams, MSM	VDH/HIV Care Services		\boxtimes	

Meeting start time: 3:33 pm

The Committee welcomed a new member, Dr. Saritha R. Gomadam, Medical Director at Richmond and Henrico Health Districts in the central region. The Committee acknowledged the retirement and resignation of Linda Eastham, a family nurse practitioner and educator who has served on the ADAP Advisory Committee (AAC) since 2005.

The DDP Director presented the new legislative requirements for state public meetings, which require one of the two bi-annual AAC meetings to be conducted in person with a hybrid Zoom option for members with qualifying medical conditions or who live over sixty miles from the VDH Central office. The Committee agreed on the following action steps.

- The HCS Clinical Coordinator will create an AAC Virtual Meeting Request Form.
- The HCS Clinical Coordinator will review and make determinations on submitted AAC Virtual Meeting Request Forms.
- The HCS Clinical Coordinator will update the scope of work, adding language to reflect the new legislative meeting requirements and the Virtual Meeting Request Form procedures.
- The Committee will review and adopt the updated scope of work before the March 2024 meeting.

The Committee agreed that a policy should be in place regarding having a co-chair if the chair cannot fulfill their obligations. The following action steps were discussed.

- The language in the Scope of Work relating to the chair-elect should be broadened to include the ability of the chair-elect to step into the role of the chair when the chair is unavailable to lead the AAC for a length of time but is not surrendering the position.
- An updated scope of work reflecting new language and procedures for the chair-elect will be reviewed and adopted by the Committee before the March 2024 meeting.
- The HCS Clinical Coordinator will complete the scope of work updates and email additional information to the Committee to solicit nominations for the chair-elect.

The Committee voted to add or approve the following drugs for treating Sexually Transmitted Infections (STIs) to the VA MAP formulary.

- Azithromycin (already on formulary; approved for STI treatment)
- Levofloxacin (already on formulary; approved for STI treatment)
- Acyclovir (already on formulary; approved for STI treatment)
- Famciclovir (already on formulary; approved for STI treatment)
- Valtrex
- Imiguimod
- Metronidazole
- Doxycycline
- Penicillin benzathine
- Ceftriaxone
- Permethrin
- Clindamycin

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- Ivermectin
- Gentamicin

The HCS Clinical Coordinator reviewed the Virginia Medication Assistance Program (VA MAP) drug utilization data.

- Committee members shared continued challenges with Cabenuva access and relayed that accessing this medication from VA MAP is less complicated than working with insurance carriers.
- A committee member inquired if VA MAP has a financial interest in promoting the drug Cabenuva. It was communicated that the HCS program does not promote Cabenuva or any other HIV treatment options for financial interests. The program is concerned with improving health outcomes for clients, and the choice of HIV treatment option(s) for a client is determined by the medical provider and the client.

The Manager of the Clinical and Data Administration team and one of VDH's Nurse Consultants provided an update about Monkeypox in the U.S. and the Commonwealth.

The Medication Access Program Manager provided updates on Medicaid unwinding and 2024 health insurance enrollment.

The HCS Clinical Coordinator will conduct outreach and survey committee members for availability for the March 2024 AAC meeting.

The committee chair adjourned the meeting at 5:00 p.m.