

AIDS drugs cut off for Va. ADAP patients

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The Virginia Department of Health announced in December that 760 uninsured people with HIV who were being dropped from the state's AIDS Drug Assistance Program due to a funding shortage could remain on the program until they found an alternative means of obtaining their medication.

But an undetermined number of Virginia ADAP clients who were dropped from the program during the past month have yet to be placed in an alternate program, and their supply of life-saving medications has run out, according to the directors of AIDS clinics in Fredericksburg and Fairfax County.

"Some of them are getting on other programs such as patient assistance programs from pharmaceutical companies and some of them are not," said Zachary Hatcher, executive director of the Fredericksburg Area HIV/AIDS Support Services, a non-profit, community-based clinic similar to D.C.'s Whitman-Walker Clinic.

"And some of them are getting caught in this balance of not having enough medication to last them until they can get onto another program and they're being taken off ADAP, which is very problematic," he said.

Hatcher said Karen Berube, director of the INOVA Juniper Program, a non-profit clinic providing medical care to HIV patients in Fairfax County, told him she was seeing a similar development where dropped ADAP patients were running out of their AIDS drugs before being placed on an alternate program.

Berube couldn't be immediately reached for comment. But sources familiar with the Metropolitan Washington Regional HIV Health Services Planning Council, which monitors ADAP issues in Virginia, D.C. and Maryland, among other areas, said they knew of dropped ADAP patients in Fairfax who had run out of drugs before being placed in another program.

Last week, Dr. Maureen Dempsey, the department's deputy chief for public health, said the cutback in the ADAP program was designed to ensure that no one would be dropped and lose access to their drugs until they were placed in an alternate program.

This week, when the Blade made a follow-up inquiry after information surfaced that people were being dropped from the program without being placed in alternate programs, Dempsey said in a written statement that the department "will not transition a client without making every effort to contact them and provide assistance."

She said in the statement that efforts to help clients "can be difficult" if the client initially provided inaccurate contact information. She said problems in transitioning to another program also arise if the client or their medical provider "encounter difficulties with signing and providing the necessary information within the timeline."

Hatcher said clients sometimes encounter difficulties providing detailed financial information required by drug companies that offer drugs to former ADAP patients through Patient Assistance Programs or "PAP." But he said clients in his and other clinics have case workers available to assist the patients and he did not believe this was the principal reason Virginia ADAP patients haven't been able to find alternate programs.

A gay male resident of Fauquier County, Va., who is a client of the Fredericksburg Area HIV/AIDS Support Services clinic, said he's been scrambling to find an alternate drug assistance program since December. At that time, a Virginia Department of Health employee informed him in a phone call that he had been dropped from ADAP, said the man, who spoke on condition that he not be identified.

"She wouldn't give me her name or a way to contact her," he said. "I kept calling and calling and calling," he said, in a desperate attempt to find out why he was being dropped and who he could turn to continue to obtain the medication that has kept him healthy for nearly 10 years.

"The only thing they said early on was that they deemed that I was too healthy because my numbers are fairly strong," the man said, referring to his T-cell counts, which measure the effectiveness of the body's immune system.

When he finally received a letter from the state health department, it said the funding cuts had forced the department to decline his application to become a new ADAP client.

"I tried to tell them I was already in the program and that you dropped me," he said. "So they're telling the public that they won't drop you until you're placed in another program. That's just a lie."

Hatcher said the health department's claim that it would smoothly transition everyone dropped from ADAP into another program is "an ideal concept to work toward" rather than a reality. The decision by the state to drop 760 people from the ADAP rolls created an enormous burden to transition so many people to other programs within just a few weeks time, he said.

"What we're seeing is that there are people who are being removed before they have another option in place," he said.

He said state health officials are now aware of this problem are working hard to correct it.

"They say I'm too healthy, but that won't be for long," the gay former ADAP patient said. And then I'll get sick and will there be any help for me?"

for me:

He said the Fredericksburg clinic was working hard to find an alternate program for him. He was hopeful that a pharmaceutical industry program known as the Patient Assistance Program (PAP) would accept him and enable him to resume his medications that ran out about two weeks ago.

In December, the Virginia Department of Health announced that a severe funding shortage brought about by an unprecedented increase in enrollment in the program and shortage of state funds forced the state to cut the scope of the program.

ADAP is part of the federal Ryan White CARE Act program, in which the federal government and states share the costs of ADAP.

Virginia Gov. Bob McDonnell has proposed an increase in the state's share of funding for ADAP for fiscal year 2012.

State health officials said that in addition to dropping as many as 760 ADAP clients, the state was closing its enrollment of new clients for the program except for pregnant women, children 18 years old or younger and people receiving treatment for an AIDS-related infection. Health department officials also said people with T-cell counts above a certain threshold level, at which they were not deemed to be at immediate risk for illness, would also be dropped from the program.

In her statement, Dempsey said the Virginia Department of Health has assembled "specialized teams" to help patients find alternate sources of obtaining their needed drugs. She said the department also created a toll-free helpline at 1-800-533-4148 to assist dropped ADAP patients.