



JUN 19 2015

Dear Ryan White HIV/AIDS Program and Centers for Disease Control and Prevention Colleagues:

The Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB) and the Centers for Disease Control and Prevention (CDC), Division of HIV/AIDS Prevention (DHAP) are pleased to provide the attached guidance for the Integrated HIV Prevention and Care Plan, including the Statewide Coordinated Statement of Need (SCSN), a legislative requirement for Ryan White HIV/AIDS Program (RWHAP) Part A and B Grantees. This guidance is set forth for health departments and HIV planning groups funded by DHAP and HAB for the development of an Integrated HIV Prevention and Care Plan. This new guidance format will allow jurisdictions to submit one Integrated HIV Prevention and Care Plan, including the Statewide Coordinated Statement of Need (SCSN), to CDC and HRSA by September 30, 2016, covering calendar years 2017 – 2021. Submission of the Integrated HIV Prevention and Care Plan not only meets the legislative and programmatic requirements of CDC and HRSA, but also serves as a jurisdictional HIV/AIDS Strategy or roadmap.

The context of HIV prevention and care in the United States has evolved due to changes in the health care delivery system, chiefly the implementation of the Affordable Care Act (ACA), and recent advances in biomedical, behavioral, and structural strategies to prevent and control HIV in the US. The National HIV/AIDS Strategy and the White House HIV/AIDS Care Continuum Initiative have bolstered further integration of HIV prevention and care efforts and fostered new approaches to addressing barriers to HIV testing and care and treatment. Federal agencies, state and local health departments, community-based organizations, health care providers, and people living with HIV (PLWH) continue to use the goals of the National HIV/AIDS Strategy and the HIV Care Continuum to measure progress toward the goals of preventing HIV, diagnosing people who do not know their HIV status, linking PLWH to care and treatment, retaining PLWH in care and treatment, prescribing HIV medication treatment to PLWH, and achieving viral suppression.

HRSA and CDC encourage RWHAP and HIV prevention programs at the local and state levels to integrate planning activities; such activities encompass joint comprehensive needs assessment, information and data sharing, cross representation on prevention and care planning bodies, coordinated/combined projects, combined meetings, and fully merged planning bodies. Overall, planning groups are encouraged to streamline their approaches to HIV planning.

Good planning is imperative for effective local and state decision making to develop systems of prevention and care that are responsive to the needs of persons at risk for HIV infection and PLWH. Activities to collaborate are supported by HRSA and CDC and are a necessity in the development of an integrated plan. Community engagement is an essential component for planning comprehensive, effective HIV prevention and care programs in the United States.

HRSA and CDC look forward to continued work with all their partners and stakeholders who are involved in HIV prevention and care planning to accomplish the goals of the National HIV/AIDS Strategy.

Sincerely,

/Laura W. Cheever/
Laura W. Cheever, MD, ScM
Associate Administrator
HIV/AIDS Bureau
Health Resources and Services
Administration

/Eugene McCray/
Eugene McCray, M.D.
Director, Division of HIV/AIDS Prevention
National Center for HIV/AIDS, Viral Hepatitis,
STD, and TB Prevention
Centers for Disease Control and Prevention