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Kristine Gebbie -
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Dr. Lawrence.
6/22

Department of Health and Human Services
HIV/AIDS Coordinating Committee
HIV Prevention Work Group

Tuesday, June 21, 1994

REVISED DRAFT AGENDA

3:00-3:10	Welcome Secretary of Health and Human Services Donna E. Shalala
3:10-3:30	The HIV Prevention Work Group Plan of Action Assistant Secretary for Health Philip R. Lee
3:30-4:15	Participant introductions
4:15-5:15	What are the tasks and timelines? What is the process behind the product?
5:15-5:45	Brainstorming about priority setting
5:45-6:00	What are the next steps for the Work Group? Future meetings

for filing

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Prevention Meeting
June 21, 1994
List of Participants

Federal

Donna E. Shalala, Ph.D.
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Not Present - Non- Federal

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Office of the Assistant Secretary
for Health
Washington DC 20201

JUN 20 1994

TO: ASSISTANT SECRETARY FOR HEALTH

FROM: ACTING DIRECTOR, NAPO

SUBJECT: HIV Prevention Meeting, Tuesday, June 21, 1994, 3:00 - 6:00 P.M., Secretary's Conference Room -- BRIEFING

Participants:

Outside the Department
Kristine Gebbie, National AIDS Policy Coordinator
Tim Westmoreland, Congressman Waxman's Office
Steve Morin, Congresswoman Pelosi's Office

HHS Officials
Jim Curran, M.D., Associate Director of HIV/AIDS, CDC
Elaine Johnson, M.D., Acting Administrator, SAMHSA
Stephen Bowen, M.D., Director, Bureau of Health Resources Development, HRSA
William Paul, M.D., Director, Office of AIDS Research, NIH
Attached at Tab A is a full list of participants.

Background

This meeting is intended to set the framework for the Prevention Group within the HHS Coordinating Committee. Attached at Tab B is the agenda for the meeting. The purpose of the prevention meetings is to look at the priority setting for HIV/AIDS prevention activities and funding within HHS/PHS and to determine whether new priorities must be set and what will be the criteria for setting these priorities. The prevention priority setting will be conducted by HHS and PHS agency representatives with the collaboration of community representatives. Attached at Tab C is the concept paper for the process drafted by Jeff Levi and Pat Franks.

The group would like you, as Assistant Secretary for Health, to share your vision of the process and what you expect the group to accomplish. The group will come together again in early July to continue the discussions and charge a group of five (5) working groups with their individual tasks. These five working groups will look specifically at: Primary Prevention, Secondary Prevention, Prevention Research, Behavioral Research and Health Services Research.

An internal HHS document will be produced that will describe the process used and the results of the priority setting. Three

outside consultants, Jeff Levi, Pat Franks and Sophia Chang, have the task of putting together the work product with the priorities. Dorothy Triplett of CDC and Carlos Vélez of ONAP will be working with the outside consultants.

Issues of Concern

* The prevention group work is an internal HHS and PHS process. The group of individuals coming together are working within the HHS structure to review current prevention activities and arrive at priorities that will impact funding for FY 1996. The current scope of work for the consultants indicates that a final work product detailing the priorities and the process conducted will be presented to HHS for final approval by September 15, 1994.

* The analysis to be conducted will look at primary prevention activities being conducted through PHS (CDC, SAMHSA), behavioral research (NIH, CDC) and secondary prevention/early intervention (HRSA). The analysis will also look at HCFA and SSA and how income support and Medicaid/Medicare impact on HIV prevention.

* This process is the result of discussions with advocacy community representatives in San Francisco and Washington, where the activists indicated their concern for the creation of a PHS coordinating group on prevention. The process developed here relates to the same goals of coordination and priority setting in prevention that the community activists have agreed to support.

* On June 15, a conference call between the consultants and Federal representatives was held to discuss issues related to the entire process and the meeting on June 21. There was consensus on the need for a process that will lead HHS in reviewing its prevention priorities and funding.

* The priority setting process will guide prevention activities and funding to follow the necessary program priorities and to impact on HIV transmission. All the participants in the process are being asked to review recommendations from the National Commission on AIDS, the Presidential Commission on AIDS, the CDC External Review Panel, the NIH, CDC and PHS Strategic Plans on AIDS and Healthy People 2000. A copy of these materials has been delivered under separate cover to your office.

* The analysis will consist of determining the program areas where prevention activities must be conducted, assessing current resource levels in those areas, looking at areas where funding can be redirected and assessing where additional resources will be necessary. Because the process

has to be concluded by September 15, the consultants must keep the process focused to existing funded areas (based on the FY 1995 budget request) and an analysis of whether current funding priorities follow HIV/AIDS prevention priorities.

* Consultants will determine the structure of the final work product which will provide priorities for the FY 1996 budget process. The planning group will work on targeting priority areas for funding, and coordinating prevention issues within HHS and PHS, concentrating on activities within CDC, NIH, SAMHSA, and HRSA.

* Where Congressional delineation of line items do not exist, the analysis will determine whether discretionary funding has been used in the most effective way possible, or whether some of it must be redirected. Regarding prevention funding for state/local levels, currently there is no analysis of whether prevention funding having an impact on spread of HIV by impacting behavior or reaching individuals at risk.

Discussion

The recommendations of the National Commission on AIDS and the CDC External Review Panel indicate that there is a need for increased funding for prevention activities. The CDC External Review Panel findings, released in November 1993, indicate that many prevention activities carried out by CDC do not have impact on HIV prevention, or do not have the impact that is expected of them. Primary among these was the recommendation of the group on "Knowledge of Serostatus," which addressed counseling and testing activities.

In part as a result of the findings of the External Review, CDC drafted the Community Planning Guidance, which is currently being implemented in the 65 state and local jurisdictions that receive federal prevention funding. An analysis similar to the CDC External Review Process is expected to produce a result which may be analogous to this process, where major program areas are restructured to allow for new priorities to be assessed and funded.

Activists are eager to see an increase in funding for HIV prevention to go directly to the community planning process. However, before this can be considered, the possibility of redirecting funds must also be considered. Part of the necessary analysis is the impact of current program operations, which due to lack of evaluation data, cannot be ascertained. By looking at all activities in a comprehensive fashion, this process will be able to answer some of the necessary questions.

If you have any questions on the meeting, please feel free to contact me at 690-6248.

for Arthur J. Lawrence, Ph.D.

Attachments:
Tab A - List of Participants, June 21, 1994 Meeting
Tab B - Agenda, June 21, 1994 Meeting
Tab C - Concept Paper on HHS HIV/AIDS Prevention

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Prevention Group Meeting
June 21, 1994
List of Participants

Federal

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Portland, Oregon 97232

Department of Health and Human Services
HIV/AIDS Coordinating Committee
HIV Prevention Work Group

Tuesday, June 21, 1994

DRAFT AGENDA

3:00-3:10	Welcome Secretary of Health and Human Services Donna E. Shalala
3:10-3:30	The HIV Prevention Work Group Plan of Action Asst. Secretary for Health Philip R. Lee
3:30-4:15	Participant introductions
4:15-4:45	What product will the Work Group develop? What is the process behind the product?
4:45-5:15	What are the key policy and program areas that must be addressed to set priorities for the FY 1996 budget?
5:15-5:45	Who should participate in the task forces to address these areas? Who should participate in the review of the recommendations of the task forces?
5:45-6:00	What are the next steps for the Work Group? Future meetings Charges for task forces

Department of Health & Human Services
HIV/AIDS Coordinating Committee
HIV Prevention Work Group

Introduction

In early 1994, at the Secretary's request, the Assistant Secretary for Health convened the HHS HIV/AIDS Coordinating Committee to assure that all aspects of the Department's HIV-related activities address the multiple challenges posed by the HIV epidemic in prevention, research, drug development and approval, health care services, and financing in a coordinated manner. Among the initiatives the Coordinating Committee has established to date are: development of a research plan, a care services strategy, and a prevention plan.

Creation of an HIV Prevention Work Group in June 1994 reflects the compelling need to ensure that the Department's prevention programs are addressing the prevention needs of those at risk for HIV. This new Work Group is designed to build on the prior effort of the agencies -- in particular, the recently completed external review of Centers for Disease Control and Prevention programs and the new plan developed by the Office of AIDS Research at the National Institutes of Health. The Work Group will also take into consideration earlier recommendations of such groups as the National Commission on AIDS and the National Academy of Sciences.

The HHS HIV/AIDS Coordinating Committee looks to the HIV Prevention Work Group to assist the Department in setting clear priorities for its prevention efforts. In an era of growing budgetary constraints, it is important to base decisions about the allocation of resources on explicit priority setting criteria. It will be critical to review what information is available -- and what information is needed -- to assist the Work Group and the Department in making informed decisions about investments in HIV prevention.

Charge to the HIV Prevention Work Group

The mission of the HIV Prevention Work Group is to help the Department establish priorities for investment in HIV/AIDS prevention for FY 1996. In addition, the Work Group will develop an agenda for working over the next year that would result in a more comprehensive plan for HIV/AIDS prevention

activities across Department of Health & Human Services agencies. These activities include: primary and secondary HIV prevention programs; program evaluation; research; technical assistance and other prevention capacity-building activities; and financing of prevention activities. The Work Group will recommend to the Assistant Secretary for Health and the Secretary of HHS in September 1994 priority areas for action and investment of federal dollars in FY 1996 that will support long-term efforts aimed at promoting and preserving health and reducing the number of HIV infections in the United States as close to zero as possible. The Work Group will also suggest an on-going process for developing a comprehensive HIV/AIDS prevention plan.

The purpose for convening the Work Group is to look critically at the current status of major governmental and non-governmental prevention efforts and to plan future efforts. The Work Group will be made up of senior HIV/AIDS agency staff from the Centers for Disease Control and Prevention, Health Resources and Services Administration, the National Institutes of Health, including the National Institute on Drug Abuse and National Institute of Mental Health, the Substance Abuse and Mental Health Services Administration, and the Health Care Financing Administration. Consultants to the Work group from outside government will include HIV-infected persons and persons from populations affected by HIV and at risk for infection with expertise in HIV prevention, persons representing community-based and national HIV prevention service and advocacy organizations, researchers, epidemiologists, health providers, substance abuse specialists, educators, and communications and social marketing specialists.

Goals of the Work Group

The goals of the Work Group are to:

1. Draft recommended priorities for investment in the Department's prevention efforts for FY 1996.

2. Develop a process for review and comment on the draft priorities by HHS and non-governmental experts.

3. Submit recommendations for priorities for FY 1996 to the Assistant Secretary for Health and the Secretary for review.

4. Develop recommendations for an on-going process to assess Department HIV prevention activities and to set priorities.

Structure of the Work Group

The Work Group will include three levels of activity to maximize the involvement of persons with different perspectives, disciplines, and professional and life experiences from both HHS and non-governmental agencies. In addition, the Coordinating Committee will regularly review the products of the Work Group.

Logistics

Logistics discussions will involve representatives from HHS agencies. In addition, the Department will invite consultants from state and local government, agencies who are contractors with federal prevention programs, members of federal agency advisory bodies, private sector philanthropy, academia, national and local community-based HIV prevention service and advocacy organizations, and persons with HIV infection and at-risk of infection.

Responsibilities are: (1) to identify key HIV prevention policy and program areas for the FY 1996 budget; (2) to identify questions to be addressed by the task forces and to assist in recommending task force members and consultants; (3) to identify options for a review process and to help identify reviewers; and (4) to review draft priorities for the FY 1996 budget for submission to the Coordinating Committee and, ultimately, the Assistant Secretary for Health and the Secretary.

Task Forces

One approach to developing priority recommendations would be the formation of sub groups, which would be convened as part of the HIV Prevention Work Group. Through appropriate selection of members from within HHS and consultants from outside HHS, the task forces would have overlapping expertise to assure consideration of cross-cutting concerns. These task forces, assisted by consultants, would draft priority recommendations by addressing key questions and making decisions that define priorities. Among the subject areas the task forces could address are primary prevention programs and services,

secondary prevention (including early intervention), program and services evaluation, research, and technical assistance and capacity building.

Reviewers

The recommended priorities will be reviewed by a wide variety of experts from HHS, affected communities, academia, etc.

Timeline

The following is a tentative timeline for the initial work of the HIV Prevention Work Group and its task forces and reviewers.

June 21	Meeting on logistics
July 1-August 12	Task Forces meet
August 12	Drafts due from task forces and sent to Coordinating Committee for review
August 12-23	Reviewers deliberate
August 29	Draft report considered by logistics participants
September 1-15	Draft report submitted for Coordinating Committee and internal PHS review
September 15	Draft report submitted to Secretary and Assistant Secretary for Health
October 1	Release of FY 1996 HIV Prevention Priorities Report

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Office of the Assistant Secretary
for Health
Washington DC 20201

MEMORANDUM

To: Participants in June 21, 1994 Meeting on HIV/AIDS Prevention

From: Philip R. Lee, M.D., Assistant Secretary for Health
Patsy Fleming, Special Assistant to the Secretary, HHS

Date: June 15, 1994

Subject: Materials for the Meeting

Thank you for agreeing to participate in the June 21st meeting of the Department's HIV Prevention Work Group.

Enclosed for your review is a draft agenda for the meeting as well as more information on the work group and several background documents on HIV prevention.

We hope you will take time to review these materials before next week's meeting. We anticipate a very productive afternoon.

If you have any questions, please contact Alexandra Milonas at (202) 690-5400.

Enclosures:

Draft Memo on HIV Prevention Work Group
OAR Research Plan
CDC External Review Executive Summary
National Commission on AIDS prevention recommendations, 1991
Healthy People 2000 on HIV infection
CDC Strategic Plan, July 8, 1992
PHS Strategic Plan
Presidential Commission Report, 1988

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