

# ADAP Watch

April 13, 2012

ADAPs with Waiting Lists  
(3,097 individuals in 10 states\*, as of April 12, 2012)

State	Number of Individuals on ADAP Waiting List	Percent of the Total ADAP Waiting List	Increase/Decrease from Previous Reporting Period	Date Waiting List Began
Florida	503	16%	-7	June 2010
Georgia	957	31%	62	July 2010
Idaho	11	0.3%	2	February 2011
Louisiana**	368	12%	-26	June 2010
Montana	4	0.1%	-2	January 2008
Nebraska	220	7%	1	October 2011
North Carolina	124	4%	7	January 2010
South Carolina	0	0%	-144	March 2010
Utah	0	0%	0	May 2011
Virginia	910	29%	-36	November 2010

ADAPs with Other Cost-containment Strategies: Financial Eligibility  
(445 individuals in 6 states, as of February 1, 2012)

State	Lowered Financial Eligibility	Disenrolled Clients
Arkansas	500% to 200% FPL	99 clients (September 2009)
Illinois	500% to 300% FPL	Grandfathered in current clients from 301-500% FPL
North Dakota	400% to 300% FPL	Grandfathered in current clients from 301-400% FPL
Ohio	500% to 300% FPL	257 clients (July 2010)
South Carolina	550% to 300% FPL	Grandfathered in current clients from 301-550% FPL
Utah	400% to 250% FPL	89 clients (September 2009)

\*As a result of FY2011 ADAP emergency funding, Alabama, Florida, Georgia, Idaho, Louisiana, Montana, North Carolina, South Carolina, Utah and Virginia were able to reduce the overall number of individuals on their waiting lists.

\*\*Louisiana has a capped enrollment on their program. This number represents their current unmet need.

ADAPs with Other Cost-containment Strategies  
(instituted since April 1, 2009, as of April 12, 2012)

**Alabama:** capped enrollment, reduced formulary

**Arizona:** reduced formulary

**Arkansas:** reduced formulary

**Florida:** reduced formulary, transitioned 5,403 clients to Welvista from February 15 to March 31, 2011

**Georgia:** reduced formulary, implemented medical criteria, participating in the Alternative Method Demonstration Project

**Illinois:** reduced formulary, instituted monthly expenditure cap (\$2,000 per client per month), disenrolled clients not accessing ADAP for 90-days

**Kentucky:** reduced formulary

**Louisiana:** discontinued reimbursement of laboratory assays

**Nebraska:** reduced formulary

**North Carolina:** reduced formulary

**North Dakota:** capped enrollment, instituted annual expenditure cap

**Puerto Rico:** reduced formulary

**Utah:** reduced formulary

**Virginia:** reduced formulary, restricted eligibility criteria, transitioned 204 clients onto waiting list

**Washington:** instituted client cost sharing, reduced formulary, only paying insurance premiums for clients currently on antiretrovirals

**Wyoming:** capped enrollment, reduced formulary, instituted client cost sharing

ADAPs Considering New/Additional Cost-containment Measures (before March 31, 2012\*\*\*)

**Alaska:** reduce formulary

**Florida:** lower financial eligibility

**Kentucky:** reduce formulary

**Montana:** reduce formulary

**Nebraska:** disenroll clients based on medical criteria

**Oregon:** reduce formulary

**Puerto Rico:** reduce formulary

**Tennessee:** establish waiting list

**Washington:** lower financial eligibility

**Wyoming:** establish waiting list, lower financial eligibility, institute client cost sharing

\*\*\*March 31, 2012 is the end of ADAP FY2011. ADAP fiscal years begin April 1 and ends March 31.

**Access to Medications:** Case management services are being provided to ADAP waiting list clients through ADAP (2 ADAP), Part B (9 ADAPs), contracted agencies (6 ADAPs) and other agencies, including other Parts of Ryan White (5 ADAPs).

For clients on ADAP waiting lists who are currently on or in need of medications, 10 ADAP waiting list states confirm that ADAP waiting list clients are receiving medications through either pharmaceutical company patient assistance programs (PAPs) Welvista, or other mechanisms available within the state.

To receive or unsubscribe from *The ADAP Watch*, please e-mail Christopher Cannon at [ccannon@NASTAD.org](mailto:ccannon@NASTAD.org).