ADAPs with Waiting Lists (5,550 individuals in 10 states*, as of January 20, 2011)

Arkansas: 23 individuals
Florida: 2,879 individuals
Georgia: 873 individuals
Louisiana: 603 individuals**
Montana: 19 individuals
North Carolina: 103 individuals
Ohio: 445 individuals
South Carolina: 344 individuals
Virginia: 260 individuals
Wyoming: 1 individual

ADAPs with Other Cost-containment Strategies (instituted since April 1, 2009, as of December 8, 2010)

Arkansas: reduced formulary, lowered financial eligibility to 200% FPL, disenrolled 99 clients in September 2009
Colorado: reduced formulary
Florida: reduced formulary
Georgia: reduced formulary, implemented medical criteria, continued participation in the Alternative Method Demonstration Project (AMDP)
Idaho: capped enrollment
Illinois: reduced formulary, instituted monthly expenditure cap
Kentucky: reduced formulary
Louisiana: discontinued reimbursement of laboratory assays
New Jersey: reduced formulary
North Carolina: reduced formulary
North Dakota: capped enrollment, instituted annual expenditure cap, lowered financial eligibility to 300% FPL
Ohio: reduced formulary, lowered financial eligibility to 300% FPL (disenrolled 257 clients in July 2010)
Puerto Rico: reduced formulary
South Carolina: lowered financial eligibility to 300% FPL
Utah: reduced formulary, lowered financial eligibility to 250% FPL (disenrolled 89 clients in FY2010)
Virginia: reduced formulary
Washington: instituted client cost sharing, reduced formulary (for uninsured clients only)
Wyoming: reduced formulary

ADAPs Considering New/Additional Cost-containment Measures (before March 31, 2011***)

Arizona: establish waiting list
Colorado: institute client cost sharing
Florida: lower financial eligibility to 300% FPL
Illinois: institute monthly expenditure cap, lower financial eligibility to 300% FPL
Oregon: reduce formulary
Puerto Rico: reduce formulary
South Carolina: disenroll 200 clients
Virginia: reduce formulary, transition 760 clients onto waiting list
Washington: establish waiting list, reduce formulary, cap enrollment, disenroll 500 clients
Wyoming: reduce formulary

*As a result of ADAP emergency funding, Hawaii, Idaho, Iowa, Kentucky, South Dakota, and Utah eliminated their waiting lists.
**Louisiana has a capped enrollment on their program. This number is a representation of their current unmet need.
***March 31, 2011 is the end of ADAP FY2010. ADAP fiscal years begin April 1 and end March 31.

NASTAD (www.NASTAD.org) is a nonprofit national alliance of state health department HIV/AIDS program directors who have programmatic responsibility for administering HIV/AIDS and viral hepatitis health care, prevention, education, and supportive services programs funded by state and federal governments. To receive The ADAP Watch, please e-mail Britten Pund at bpund@NASTAD.org.