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FLORIDA MAKES STRIDES IN REDUCING ADAP WAITING LIST
-Progress has been made in reducing Florida's ADAP waiting list-

TALLAHASSEE – Today State Surgeon General Dr. Frank Farmer announces that Florida's AIDS Drug Assistance Program (ADAP) waiting list has been drastically reduced. Currently, there are 806 people on the ADAP waiting list, which is an 81 percent decrease in the waiting list since September 1, 2011, when the number was 4,184.

Florida's Ryan White Part B funding allocation was confirmed in September, 2011. The Florida Department of Health's (DOH) received an increase in Ryan White funds and redirected an additional 1 million in General Revenue to the program. After considering the new funds and current program needs, capacity to move a large number of persons off the waiting list and into the program was identified, which resulted in the large decrease in the waiting list number. DOH is using approximately 98 million dollars of federal and state funds for the ADAP program. This does not include ADAP earmark funds for insurance expenditures.

"Thanks to the progress of science, an HIV/AIDS diagnosis today is not the same as it was ten years ago and new advancements in medications are greatly changing the outcome for people infected with HIV/AIDS," said State Surgeon General Dr. Frank Farmer. "I am encouraged by the drastic decrease in the ADAP waiting list and that elected officials across the country are making this important issue a priority."

ADAP is a state-administered, federally/state-funded program that provides HIV/AIDS-related medications to low-income, uninsured and underinsured HIV-positive individuals living in Florida. ADAP is currently serving over 11,000 clients in Florida. On average, the drug treatment plan for individuals living with HIV/AIDS is a combination of 3-4 medications taken daily with the average cost ranging from \$8,500 - \$12,000 a year. Florida's ADAP program provides stable and accessible HIV treatment to extend life and improve health for qualified individuals living with HIV/AIDS.

DOH has reduced the number of medications on the ADAP formulary to focus our pharmacy dollars on core antiretroviral drugs and contracted for pharmacy benefit management of Medicare Part D ADAP patients. The Department has shifted funds to ADAP by reducing budgets for non-essential services, administrative allocations, and support service categories. In addition, ADAP created a cost containment manual for county health department staff, applicants, and case managers to help obtain necessary medications should immediate enrollment into ADAP not be available.

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