July 31, 2020

Dear Colleagues,

Today, CDC awarded a total of $3 million to seven communities to scale up quality HIV prevention services in STD clinics as part of the nation’s ambitious federal initiative *Ending the HIV Epidemic: A Plan for America* (EHE), which aims to reduce new HIV infections by 90 percent by 2030.

This work is one piece of a total $109 million award to 32 state and local health departments that represent the 57 jurisdictions across the United States prioritized in EHE. These jurisdictions include 48 counties, Washington, D.C., and San Juan, Puerto Rico, which account for more than half of new HIV diagnoses in the United States and nearly two-thirds of new diagnoses among African American and Hispanic/Latino communities, and seven states with a substantial rural burden of HIV. EHE is designed to build upon existing prevention efforts. Through the awards, the hardest hit communities will be encouraged to implement innovative local strategies that advance HIV prevention and care.

STD clinics play a vital role in EHE and provide a critical avenue to reach populations at high risk for HIV who are not engaged in HIV prevention programs or other healthcare services. STD clinics serve a high volume of racial/ethnic minorities, gay and bisexual men, and transgender people and have become a primary source of STD and HIV prevention services for people without regular access to care.

Awarded through component C of the *Notice of Funding Opportunity PS20-2010: Integrated HIV Programs for Health Departments to Support Ending the HIV Epidemic in the United States*, recipients will implement five strategies in order to scale up HIV prevention services to reach populations that receive and seek care in STD clinics:

1. Assess clinic infrastructure to document HIV prevention services, identify gaps, and assess service quality.
2. Implement evidence-based approaches to scale up HIV prevention capacity in STD clinics, including self-collected STD testing and express visits, and HIV testing and viral load assessment.
3. Expand the capacity of STD clinics to offer pre-exposure prophylaxis, or PrEP, post-exposure prophylaxis, or PEP, and strengthen clinic and laboratory capacity for recommended follow-up visits for people on PrEP.
4. Optimize linkage to, retention in, and re-engagement with HIV medical care.
5. Facilitate partnerships with other community HIV clinical providers, health departments, and community-based organizations providing HIV prevention services and collaborating in the implementation of the EHE.
CDC looks forward to working with the following partners in our service delivery efforts toward ending HIV:

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Funding Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco Department of Public Health</td>
<td>$450,000</td>
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<tr>
<td>Missouri Department of Health and Senior Services</td>
<td>$450,000</td>
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<tr>
<td>City of Philadelphia Department of Public Health</td>
<td>$450,000</td>
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<tr>
<td>Baltimore City Health Department</td>
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<tr>
<td>District of Columbia Department of Health</td>
<td>$400,000</td>
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<tr>
<td>Alabama Department of Public Health</td>
<td>$400,000</td>
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<tr>
<td>Arizona Department of Health Services</td>
<td>$400,000</td>
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</tbody>
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An additional $4 million investment from the HHS Minority HIV/AIDS Fund will allow us to leverage existing infrastructure and expertise to strengthen culturally competent HIV preventive health delivery systems of STD specialty clinics. These training, technical assistance, and capacity building efforts will begin later in August 2020.

More information on Integrated HIV Program for Health Departments to Support Ending the HIV Epidemic in the United States: Component C, including the list of awardees, is available on CDC’s website. Questions about the STD EHE work may be directed to EHESTD@cdc.gov.

As always, thank you for your continued dedication to STD and HIV prevention, and we look forward to updating you on this important work.

Sincerely,

Gail Bolan, MD  
Director  
Division of STD Prevention  
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention  
Centers for Disease Control and Prevention  
www.cdc.gov/std

Eugene McCray, MD  
Director  
Division of HIV/AIDS Prevention  
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention  
Centers for Disease Control and Prevention  
www.cdc.gov/hiv