

Texas HIV Medication Advisory Committee (HIV-MAC)

Meeting Minutes

January 16, 2026

1:30 p.m.

Hybrid Meeting:

Microsoft Teams Virtual Meeting and Physical Location: Moreton Building, Room M-100, 1100 West 49th Street, Austin, Texas 78756

Agenda Item 1: Call to Order, Welcome, Logistical Announcements, and Opening Remarks

Mr. Frank Rosas, Chair, opened the meeting by introducing himself and welcoming the HIV-MAC members, agency staff, and members of the public in attendance. Mr. Rosas called the meeting to order at 1:30 p.m.

Ms. Kaitlin Quinton, from the Advisory Committee Coordination Office (ACCO) of the Health and Human Services Commission (HHSC), proceeded with the logistical announcement, took attendance, asked members to introduce themselves, and certified no quorum with a count of five members at the time of roll call. Texas HIV-MAC Member Dr. Margaret Adjei joined later to make a quorum with a count of six members present for the meeting.

Table 1: Texas HIV-MAC members' attendance at the Friday, January 16, 2026, meeting.

Member Name	Attended
Adjei, Margaret, M.D.	Yes (Joined at 1:45 p.m.)
Heresi, Gloria, M.D.	No
Hillard, Lionel	Yes
Lazarte, Susana, M.D. (Vice Chair)	Yes
Perez, Rolando, M.D.	No
Rosas, Frank (Chair)	Yes
Stefanowicz, Michael, D.O.	Yes
Turner, Helen	No
Vargas, Steven	Yes

"Yes" indicates attended meeting.

"No" indicates did not attend the meeting.

Mr. Rosas acknowledged staff from the Texas Department of State Health Services (DSHS): Ms. Rachel Sanor, Director of the HIV Care and Medications Unit.

Ms. Sanor introduced the following DSHS staff in attendance: Ms. Imelda Garcia, Chief Deputy Commissioner for the Department of State Health Services; Ms. Aelia Khan Akhtar, Associate Deputy Commissioner for Infectious Disease Prevention Division (IDPD); Mr. David Ekrut, Business Operations Director, IDPD; Ms. Christine Salinas, Texas HIV Medication Program (THMP) Regional Manager; Ms. Tina Khuyen Nguyen, THMP Manager; Ms. Jerreta Hartfield, Communication and Policy Group (CPG) Manager; Ms. Priscilla Mackin, HIV-MAC Liaison and Communication Health Specialist with CPG; Dr. Aderonke Adefisayo, Infectious Disease Medical Officer under IDPD; Mr. Samuel Hebbe Goings, HIV/STD Section

Director; Ms. Dona Hulse, HIV/STD Operations Unit Director; and Elena Ofenstein, Health Information Specialist with CPG; and Mr. Lester Mattson, Interim DSHS Pharmacy Director.

Agenda Item 2: Consideration of October 17, 2025, Draft Meeting Minutes

Once the HIV-MAC met quorum, Mr. Rosas called for a review of the October 17, 2025, meeting minutes. Mr. Vargas motioned to approve the meeting minutes as presented. Dr. Stefanowicz seconded the motion. The motion was carried by a majority vote with five yeses (Adjei, Lazarte, Rosas, Stefanowicz, and Vargas), no nays, one abstention (Hillard), and three absences (Heresi, Perez, and Turner).

Agenda Item 3: Public Comment

Mr. Rosas asked Ms. Quinton to read the public comment announcement. Ms. Quinton shared that there were no written or onsite public comments.

Agenda Item 4: DSHS Updates

Mr. Rosas asked Ms. Imelda Garcia and Ms. Aelia Khan Akhtar to provide DSHS updates.

Highlights included:

- a. Agency
 - Organizational Chart

Ms. Akhtar provided an update on positions filled and vacant within the agency. She shared that Ms. Janina Vasquez, the HIV Care Services Manager, retired after 27 years of dedicated service to the state, and IDPD wished her the best in her retirement. IDPD welcomed Ms. Jessica Conly as the Interim HIV Care Services Manager.
 - TakeChargeTexas

Ms. Akhtar provided an update regarding the TakeChargeTexas (TCT) client portal accounts due to increased IT security concerns. During the initial rollout of TCT, the Department of State Health Services (DSHS) received a waiver that allowed client accounts to remain active without requiring a login every 90 days. However, this waiver has now expired. The agency has submitted an exemption request to the Texas Health and Human Services Chief Information Security Office, which is currently under review. If clients experience account inactivation, they should contact the TCT help desk to reactivate their accounts.

Ms. Akhtar yielded the floor to Ms. Imelda Garcia for additional agency updates.

Ms. Imelda Garcia, Chief Deputy Commissioner for DSHS, provided overall agency updates. The Texas Health and Human Services has a new Executive Commissioner, Stephanie Muth, who began in early January 2026.

Ms. Garcia acknowledged developments at the federal level, including the possibility of a government shutdown. DSHS is monitoring the situation but anticipates continuing to support all contractors as much as possible, as it did in October of last year. DSHS will continue to provide information, including any necessary next steps. Ms. Garcia also mentioned that there have been significant changes to the Affordable

Care Act (ACA) insurance subsidies and an ongoing conversation about additional potential changes. DSHS is assessing the full impact of these changes.

Ms. Garcia explained that DSHS rolled out the Texas Insurance Assistance Program-PLUS (TIAP-PLUS) in the fall of 2024 to stabilize the program and increase rebate income for THMP. The open enrollment period ended on January 15th and the THMP team began conducting financial analyses of enrolled participants, plan cost changes, and related factors. As a result, the requested projection information is not on today's agenda. At the next HIV-MAC meeting, THMP will present all projections to ensure everyone has the latest information. This delay will ensure the program provides as much accurate information as possible. Ms. Garcia reminded the committee that, under the Texas Administrative Code, THMP cannot make any changes to the program without 60 days' notice to stakeholders.

Discussion:

- **Mr. Vargas** congratulated Ms. Janina Vasquez on her retirement and welcomed the new addition to the team.
- **Dr. Lazarte** asked for clarification on the organizational chart.
- **Ms. Akhtar** provided an overview of the IDPD, the HIV/STD Section, and the HIV Care and Medications Unit organizational charts. IDPD added a few more staff within THMP to help with TIAP-PLUS. Additionally, employees were promoted to new roles within the agency, creating vacancies. IDPD and THMP will fill the vacancies as soon as possible.
- **Mr. Vargas** wondered what THMP has in place to ensure program resilience so people who need assistance won't be impacted in the event of a government shutdown.
- **Ms. Garcia** reassured Mr. Vargas that the program will continue the same way as the last shutdown, and there should not be any interruptions to client services if there is a shutdown.
- **Dr. Lazarte** thanked Ms. Garcia and mentioned that under her leadership, the team has worked outstandingly on TIAP-PLUS. She wondered whether the program's eligibility criteria would be affected by the public charge rule.
- **Ms. Garcia** responded that the program has not received any additional guidance from the Health Resources and Services Administration (HRSA) at this point. As such, THMP has made no changes to eligibility and doesn't anticipate doing so unless the program gets direction to do so. She also stressed that each individual needs to make the best decision for themselves. She encouraged anyone with concerns to talk with their case managers and to consider all options.

b. Budget Update

Mr. Samuel Hebbe Goings introduced himself and presented the financial report for THMP. Currently, in state fiscal year 2026, DSHS has budgeted \$119 million to support the medication program. This represents an increase from the \$117 expended in the previous fiscal year. THMP is currently on track in terms of operations, collaborating with the DSHS pharmacy and partner pharmacies throughout Texas to serve clients enrolled in these programs. As of December 22,

2025, THMP expended \$33 million. Additionally, there are funds in the process of being allocated for medication services, which will help ensure that THMP to be on track for the remainder of the year.

Discussion:

- **Mr. Vargas** asked about the amount of money THMP has expended, where the program needs to be for the remaining 2026 expenditures, and what the program should be for spending.
- **Mr. Hebbe Goings** responded that he does not have the specific trend information comparing this year to the previous one. However, there are variances in how THMP fills pharmacy orders depending on how quickly clients order or use medications. At different points in the year the trends can look different. This quarter included one of THMP's largest orders, and the program is currently working through that. The expenditure is not reflected in the current expenditure report, but THMP will address this expenditure next quarter.

Agenda Item 5: Texas HIV Medication Program Updates

Mr. Rosas yielded the floor to Ms. Sanor and Ms. Nguyen to provide an update on THMP.

Highlights included:

a. Texas Insurance Assistance Program-PLUS

Ms. Nguyen provided an update for the TIAP-PLUS enrollment for calendar year 2025, with the data as of December 5, 2025. THMP enrolled 1,320 clients in TIAP-PLUS through direct enrollment and transfers from agencies. There were 281 disenrollments, leaving approximately 1,000 active clients enrolled in TIAP-PLUS. Ms. Nguyen reminded the HIV-MAC that the data is not yet finalized. THMP is currently reviewing the information and the number may change. Ms. Nguyen shared some reasons clients cite for disenrolling from the program, such as dissatisfaction with their current insurance plan. THMP aims to use these insights to strengthen the program.

Ms. Nguyen reviewed the number of active enrollees and the use of TIAP-PLUS for medication copayment assistance. The overall use of TIAP-PLUS for copayment assistance was low in 2025. As Ms. Garcia mentioned earlier, TIAP-PLUS was created to help increase rebate revenue for THMP. THMP must see increased participation among TIAP-PLUS clients. Clients must use their primary insurance and the Ramsell copay cards together at a Ramsell participating pharmacy. This will ensure the client's medications are fully covered, and THMP can then generate needed rebates. Although the open enrollment period has ended, Ms. Nguyen stressed that clients with qualifying life events may be eligible for special enrollment. THMP continues to accept agency transfers for eligible clients who need help paying for their insurance through TIAP-PLUS.

Ms. Nguyen thanked the Communication and Policy Group for helping with creating an effective outreach campaign, including updating the THMP website with client-friendly information and educational videos. She also acknowledged the administrative

agencies that created excellent promotional items for the recent open enrollment period. She also provided data on THMP's outreach efforts to raise awareness of TIAP-PLUS.

As of January 2, 2026, 430 clients enrolled in TIAP-PLUS for the 2026 plan year. Ms. Nguyen shared that THMP had approximately 693 clients enrolled in a marketplace plan for TIAP-PLUS. The transition of clients from agencies to THMP has been highly successful, and THMP staff are working extended hours to enroll them directly into ACA plans. Ms. Nguyen also shared challenges clients and the TIAP-PLUS faced during this period.

b. Long-Acting Injectables (LAI) Treatment Pilot Update

Ms. Nguyen reviewed the HIV LAI treatment pilot and the participation criteria outlined in Rider 31. She explained that the following data was pulled on January 8, 2026. In December 2025, THMP approved 109 ADAP participants for the LAI treatment pilot. In December 2025, 58 participants had at least one LAI fill, and THMP approved and sent 64 LAI fill requests. Overall, the pilot is seeing steady growth. Ms. Nguyen also shared additional costs beyond the LAI drug acquisition cost — such as coolers and ice packs — which she estimated at about \$31.60 per LAI order.

Discussion:

- **Dr. Lazarte** did not understand the discrepancy between clients being enrolled in TIAP-PLUS and not using the Ramsell copay card for pharmacy benefits. She wondered how the clients would cover the medication, given that they would have to pay for the copays.
- **Ms. Nguyen** responded that, from what THMP understands, clients are using their primary insurance cards. They may be using other manufacturer drug discount cards to cover some medication copayment costs.
- **Mr. Vargas** thanked Ms. Nguyen for the presentation and requested a percentage breakdown of the 281 disenrollments, showing the percentage attributed to each reason.
- **Ms. Nguyen** stated THMP will work to share that information with the data and governance subcommittee.
- **Mr. Vargas** asked if THMP has texting or email capabilities for outreach.
- **Ms. Nguyen** confirmed that TCT has email outreach capabilities for TIAP-PLUS clients.
- **Ms. Sanor** added that there is an enhancement request for TCT that will specifically allow the program to send mass text messages to people who have said "yes" to receive text messages in the TCT system.
- **Dr. Stefanowicz** asked how many TIAP-PLUS clients are new enrollees to THMP versus transfers from other subprograms.
- **Ms. Nguyen** responded that the information is not available at this time; however, THMP will work on getting this data. She also shared that THMP developed an outreach plan that included calling clients to let them know the correct way to use

the Ramsell copay card and the primary insurance card at Ramsell participating pharmacy.

- **Mr. Hillard** asked how THMP addresses situations where clients upload documents in TCT, but THMP does not receive the notification that the information was uploaded to the portal. He was concerned for clients who do not see their case workers on a regular basis, those who are experiencing homelessness, or have limited literacy.
- **Ms. Nguyen** explained that due to the TCT limitations, THMP staff do not receive notifications when a client or agency enrollment worker (AEW) uploads a document to the client's profile after they complete their application. As a workaround, THMP has requested that the AEW or the client contact to notify the program when a missing document has been uploaded.
- **Ms. Garcia** added that a TCT enhancement is needed in order to address this limitation. She also emphasized the importance of administrative agencies and AEWs in facilitating outreach, especially to vulnerable populations. These clients rely on community partners to help them navigate. At the end of the day, the trust is at the local level, not at the program level.
- **Dr. Adjei** shared that her clients are currently receiving medication on time with no issues.
- **Mr. Rosas** asked whether the Ramsell copay cards are mailed out annually or whether the client can continue to use the co-pay card they have.
- **Ms. Nguyen** replied that once the Ramsell copay card is mailed to the client, they can continue to use it for however many years the client remains qualified for the program. Since TIAP-PLUS is a new subprogram, THMP mails the Ramsell co-pay card to all clients again. It is the same card, but a new card is sent to all clients in case they may have lost their card from the prior year.
- **Mr. Rosas** noted some community-based pharmacies want to participate in the ADAP pharmacy network but must go through a long process. He asked if THMP could also look at that going forward.
- **Ms. Garcia** requested that Mr. Rosas share the names of the specific pharmacies that have confirmed interest in participating in the program, if he has them.
- **Dr. Stefanowicz** asked for clarification on the monthly number of LAI prescriptions filled and the client utilization rate.
- **Ms. Sanor** clarified that fill counts are reported independently by month and confirmed that clients on the pilot are generally showing high utilization.

c. TakeChargeTexas (TCT) Updates

Ms. Rachel Sanor provided an update on TCT, THMP demographic information, and application processing.

- Quarterly TCT Applications submitted from September 1, 2025, to November 30, 2025:
 - ▶ Client Portal
 - ◇ TCT received 264 applications.
 - ◇ Of the 264 applications, 242 were for THMP.
 - ◇ The total number of applications for both Care Services and THMP was 154.
 - ▶ Agency Portal

- ◇ TCT received 16,998 applications.
 - ◇ Of the 16,998 applications, 12,029 were for THMP.
 - ◇ The total number of applications for both Care Services and THMP was 7,134.
 - ◇ The total number of pharmacy order batches was 4,974.
 - ◇ The total number of medication orders was 37,231.
 - ◇ THMP approved a total of 6,910 applications during this period.
- Quarterly TCT Helpdesk Support Issues from September 1, 2025, to November 30, 2025.
 - ▶ The majority of help desk issues were related to login issues.
- Annual TCT Applications submitted from December 1, 2024, to November 30, 2025.
 - ▶ Client Portal
 - ◇ TCT received 1,094 applications.
 - ◇ Of the 1,094 applications, 981 were for THMP.
 - ◇ The total number of applications for both Care Services and THMP was 601.
 - ▶ Agency Portal
 - ◇ TCT received 67,973 applications.
 - ◇ Of the 67,973 applications, 47,843 were for THMP.
 - ◇ The total number of applications for both Care Services and THMP was 26,068.
 - ◇ The total number of pharmacy order batches was 19,200.
 - ◇ The total number of medication orders was 133,343.
 - ◇ THMP approved 19,150 clients during this period.
- Annual TCT Helpdesk Support issues from December 1, 2024, to November 30, 2025.
 - ▶ Help desk issues have decreased across most categories, reflecting the system's overall stability.

d. Demographic Information

- ADAP Medications from September 1, 2025, to November 30, 2025:
 - ▶ The total number of medications ordered through ADAP was 37,231, with 47 percent for Biktarvy 30-day bottles.
 - ▶ THMP continues to see an increase in the Biktarvy 90-day fill. It remains at number four in the top 10 most ordered medications.
- The ADAP demographics are still consistent. 15,704 ADAP clients filled medications during this quarter.
- State Pharmacy Assistance Program (SPAP) demographics remained stable, serving 164 clients.
- Texas Insurance Assistance Program (TIAP) served 94 clients, with no significant changes in terms of demographics.
- TIAP-PLUS did not see a lot of changes in demographics compared to the last quarter. The program served 852 clients during this time. However, the total number of clients with medication filled is 257.

e. Application Processing

- As of January 13, 2026, THMP is processing new self-attestation and renewal applications on time. Overall, application processing is running smoothly.

Discussion

- **Dr. Lazarte** expressed disappointment that not a lot of people are prescribing the Biktarvy 90-day. She asked whether clients receiving a 30-day refill can send a notification to a provider to request a 90-day fill.
 - **Ms. Sanor** replied within the TCT pharmacy portal, when pharmacists enter the orders, they can enter if the client needs 30-day or 90-day fills. Once the medication order is placed in the TCT pharmacy portal, the order goes directly to the DSHS pharmacy warehouse for filling. There really isn't an opportunity for specific outreach at that time for the 90-day fills. THMP wants to ensure it is filling the medications as requested. There may be a reason that the client was not recommended for a 90-day fill. Those decisions should be made at that level with the providers and the individual on the medication. Ms. Sanor also mentioned that Biktarvy 90-day fills is number four currently and has been on the top 10 medication list for over a year. Before COVID, when 90-day fills were approved, no 90-day fills ever made it to the top 10. From a program perspective, THMP is seeing a significant uptick in 90-day fills.
 - **Mr. Hillard** reminded the group that there had previously been a discrepancy between the medication inventory recorded in the warehouse system and the medication physically on hand. He asked if the process was going well.
 - **Ms. Garcia** agreed this happened several years ago when the agency had an issue with an antiquated IT system. During COVID, the program received additional federal dollars to replace that system. The program now has a new system in place. The pharmacy worked extremely hard to change its internal processes, so they do monthly inventories and reviews. The program also routinely monitors and checks that things are still in place and working. They meet monthly to review inventory spend plans and ensure that the drug purchases each week are appropriate. It is a very active process now.
- Dr. Stefanowicz** noted that clients are the best advocates for requesting 90-day fills and asked what may have driven THMP's fill rate improvement from 68 to 79 percent over four of the last six months.
- **Ms. Sanor** explained that each month THMP receives a list of clients who have not ordered a fill for more than 45 days or 105 days without a fill if it's a 90-day fill. THMP staff then follow up with those clients to find out why they are not filling their prescriptions and help them navigate any barriers. While THMP is not positive about that being the main correlation, it seems like that is the result of that process.

Agenda Item 6: Sub-Committee Reports

- Eligibility: Mr. Frank Rosas**
 - The Eligibility Subcommittee met on November 18, 2025.

- Mr. Rosas expressed how useful and helpful the ADAP Liaisons have been to the program. They always bring good information to the subcommittee meetings and any problems or issues they may have in their areas.
- b. **Governance and Data: Mr. Steven Vargas**
- The Governance and Data Subcommittee met on December 2, 2025.
 - Mr. Vargas shared that the committee discussed TIAP-PLUS and improvements to the program. He shared that TIAP-PLUS helps with medication co-pays, not just those premiums. The committee discussed what is in place to help clients continue receiving their medications if they miss the January 1 start date for their insurance.
- c. **Formulary: Dr. Susana Lazarte**
- The Formulary Subcommittee met on November 4, 2025.
 - Dr. Lazarte shared that the subcommittee discussed the Pharmacy Portal Utilization report, noting an increase in the number of pharmacies ordering their medications directly through TCT. The subcommittee also discussed medication inventory, TIAP-PLUS acceptable plans, and HIV LAI Treatment pilot information.

Agenda Item 7: Review of Action Items and Agenda Topics for the Next Meeting

Agenda items for the next committee meeting included:

Action items:

- THMP projections.
- Percentage breakdown of TIAP-PLUS disenrollments.
- TIAP-PLUS client data: How many clients are ADAP clients transferred to TIAP-PLUS, and how many are new to THMP?
- Historical data of 90-day prescriptions

Agenda Item 8: Adjournment

Mr. Rosas thanked the committee members and the members of the public for their attendance and adjourned the meeting at 3:50 p.m.

Below is the link to the archived video recording of the January 16, 2026, Texas HIV Medication Advisory Committee meeting.

<https://texashhsc.v3.swagit.com/videos/372411> Individuals can view or listen to the meeting for approximately two years from the meeting date. DSHS posted the meeting in accordance with the HHSC records retention schedule.