New England HIV Implementation Science Network: Work Group Meetings and Workshop
Friday, February 27, 2015

Summary of Modeling and Cost Utility Analysis Work Group
Breakout Meeting

Chair: Scott Braithwaite (New York University)
CIRA staff facilitator: Jim Pettinelli

Participants:
Paola Barzelatto Jabbaz  Center for Interdisciplinary Research on AIDS, Yale University
Marianne Buchelli   Connecticut Dept. of Public Health
Paul Cleary   Center for Interdisciplinary Research on AIDS, Yale University
David Fiellin   Center for Interdisciplinary Research on AIDS, Yale University
Erin McBurney   Center for Interdisciplinary Research on AIDS, Yale University
Elaine O'Keefe   Center for Interdisciplinary Research on AIDS, Yale University
Ramon Rodriguez-Santana   Connecticut Dept. of Public Health
Alexei Zelenev   Center for Interdisciplinary Research on AIDS, Yale University

Meeting Goals:
1) Prioritize two to three potential modeling projects
2) Project time period: 6-12 months
3) Feasible (limited budget/resources)

Prioritized Research questions/ideas:
1) Estimating cost effectiveness of Naloxone within Syringe Exchange Programs
   a. Targeting HIV+ individuals
   b. Establishing threshold for effective cost:
      i. At what point to provide Naloxone - target those individuals who have accessed Naloxone in the past vs. all people accessing SEP
      ii. At what point in someone’s addiction is it more effective to intervene
2) Small vs. Large City – Are different prevention portfolios needed?
   a. Model to what extent the HIV interventions/needs are different i.e. Worcester, Hartford, Providence vs. New York, Boston

Second tier question/ideas:
1) PrEP – modeling and cost utility analysis focused on implementation, targeting, and estimating health impact

After the group landed on the Naloxone project, the group had a general discussion on the issues of what that project would focus. Estimating cost effectiveness of Naloxone within Syringe Exchange Program:
- Target population (individual, community, district): Men who have sex with men and their partners, disease intervention specialists, community health centers
- Identifiable outputs and outcomes: Increased HIV testing, better performance of DIS and department of health
- Use of existing data, if any (surveillance, programmatic, research data): HIV and STDs testing data from health care providers, HIV surveillance registry to verify HIV status
- Ethical/human subjects research challenges/considerations: Maintaining confidentiality or anonymity of participants
- Collaboration with other Network work groups: Technology and Social Media Work Group