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Understanding Health Insurance Coverage Under the New Law

BY JACQUES CHAMBERS

Enrollment started October 1, 2013, in the new health insurance plans created by the Affordable Care Act. Coverage under the plans will be effective January 1, 2014. Several recent columns have explored this major change in health insurance. People without coverage or who need to consider changing coverage should start the process at www.healthcare.gov. People living in California should start at www.coveredca.com.

People living with HIV in California and who qualify for the ADAP program will be able to have their portion of the health insurance premiums paid by the OA-HIPP program, so there will be no premiums to be paid by the insured person. See http://www.cdph.ca.gov/programs/aids/Pages/tOAHIPPindiv.aspx for more information on the OA-HIPP program.

It is recommended, however, that you wait a few weeks before signing up for a program as the website currently does not identify which doctors participate in which plans and the plans have not yet published their prescription formularies. It is important for PLWHA to find a plan their HIV doctor is part of and that the drug formulary of the plan covers their medications, especially the non-ADAP medications. Remember, however, the deadline for signing up for a January 1, 2014 effective date is December 15, 2013

Now that health insurance is becoming available to people who had been unable to purchase it due to their medical history, it would be a good time to review just what health insurance is, the types of coverage available, and some of the terms people getting health insurance should know.

In an effort to simplify comparison of various health insurance plans, the health exchanges through which the plans will be purchased have standardized plans as much as possible. Under the Affordable Care Act (ACA) health exchanges there are only three types of plans, all of which are considered "Managed Care Plans":

Health Maintenance Organizations (HMO)

Under an HMO plan, all medical services are provided by medical providers, doctors, hospitals, laboratories, etc. who are part of the HMO network. By joining the network, the providers have agreed to limit their medical costs and follow the medical protocols of the HMO.

Once enrolled, the insured member chooses a primary care physician (PCP) and that physician coordinates all of the care of the member, determining what tests and procedures are necessary and deciding when the member needs to be referred to a specialist. Under an HMO, the PCP must authorize all care; the member cannot see specialist without a referral by the PCP.

To further complicate this issue, most HMOs, rather than contracting with individual doctors and hospitals, contract with large medical practice organizations which in turn subcontract with hospitals and other providers. The result is that care under the HMO is provided by multiple groups of providers who operate separately from one another, while still under the HMO.

Upon signing up for a primary care physician, the member is also signing up for the medical $\frac{1}{2}$

CONTINUED ON PAGE 6

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CIRCULATION 12 000

LIBRARY OF CONGRESS NUMBER ISSN 1096-1364

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Possible 'Breakthrough' in Vaccine Research

Highlights from the 13th AIDS Vaccine Conference held in Barcelona

BY ROD McCULLOM

A possible "breakthrough" in the decades-long quest for a vaccine that could prevent people from acquiring HIV created the most buzz at the 13th AIDS Vaccine Conference, held October 7 to 10 in Barcelona.

This news—regarding a successful trial in monkeys and employing an engineered cytomegalovirus—along with announcements on new clinical trials created a cautious sense of optimism among the attendees, numbering about a thousand researchers, scientists, physicians, advocates, funders, policy makers and other stakeholders.

After more than 30 years into the HIV/AIDS pandemic, a vaccine remains elusive—and much needed. Globally, about 35 million people are living with HIV, according to the Joint United Nations Programme on HIV/AIDS (UNAIDS). Sub-Saharan Africa is home to two-thirds of them. New infections have stabilized at about 2.5 million per year across the globe. In the United States, about 1.1 million people are HIV positive, and nearly 50,000 people contract the virus each year—with African Americans and Latinos disproportionately affected. Men who have sex with men—especially those of color—have among the highest infection rates across the globe.

Even with more investments in prevention and treatment, "UNAIDS has modeled that new infections would plateau at about 1 million per year," said Mitchell Warren, the executive director of AVAC. "That's why we need a vaccine to bring it below 1 million."

AVAC is a member of the international consortium that sponsored AIDS Vaccine 2013 and has pooled resources to "speed the development of a safe and effective HIV vaccine." The Global HIV Vaccine Enterprise includes US, Thai and South African governments, the Bill & Melinda Gates Foundation, UNAIDS, the World Health Organization, the International AIDS Vaccine Initiative and Sanofi Pasteur, the largest company in the world devoted to vaccine development.

CMV and **SIV**

AIDS Vaccine 2013 was the first public presentation of the research by Oregon Health and Science University's Louis J. Picker, MD, origi-

nally published in the journal Nature. Picker's study demonstrated that vaccinated monkeys can clear simian immunodeficiency virus—SIV, the monkey equivalent of HIV—from their bodies. (Picker's research team used an aggressive strain of the simian virus, called SIVmac239 and described as "up to 100 times more deadly than HIV.") The vaccine was effective in nine of the 16 monkeys in the study.

Picker's research team fused SIV genes to the cytomegalovirus (CMV), which is from the herpes virus family. The immune system responded to the infection by doing what it normally does—releasing new white blood cells called CD8 "hunter-killer cells" that kill cells infected with SIV. These CD8s are normally primed to target the virus, but in this case, according to The New York Times, they operated in "an atypical state of mid-activation" and persisted in tissue while "eliminating their targets quietly without triggering inflammation or even a mild fever."

CMV is thought to be particularly useful because of its infectious power to sweep throughout the body. What's more, Picker said, there's a large safety margin because "more than half of the people in the United States already have this virus in their body, and up to 80% or 90% of people in the developing world already have it." In other words, that's more than five billion of the world's seven billion inhabitants.

"CMV could work because most of us have it in our systems and it is active all the time," added William Snow, director of the Global HIV Vaccine Enterprise. "Most of the vaccine that we have been testing?you get the vaccine and there is no vaccine left after the initial reaction."

This new vaccine strategy could be a "breakthrough" because HIV is "particularly Machiavellian," said Picker. The virus constantly mutates and hides from the body's immune system—which is why vaccine research has so far proved largely ineffective.

"The stars are aligned, and we feel we have a very good shot," Picker said. "This vector also seems to work for tuberculosis, and we need a larger study to prove this."

Picker is not sure why the vaccine worked in only about half of the animal subjects—perhaps that particular strain of SIV was "too deadly." Although no trials have included humans, Picker is confident the vaccine could work in humans.

Picker estimates it could take at least two years to secure funding and regulatory approval for Phase 1 clinical trials in humans.

Clinical Trials

More promising news: A coalition of funders, product developers and trial groups are moving forward in Thailand and South Africa with two large clinical trials based on the modest success of RV144. Although the world's largest and most promising vaccine candidate to date—results were announced September 2009—the RV144 trial reduced new infections by almost a third, which was not deemed effective enough to change the course of the epidemic. But that doesn't mean the game's over. The P5 Partnership hopes that Phase II clinical trials will begin by 2016.

Some of the Thai volunteers will be given a "booster vaccine to determine if this can extend or increase immunity to HIV," reports IRIN Global. Additional clinical trials involving men who have sex with men in Thailand and South Africa are scheduled. "But the vaccine will have to be modified to contain the strain of HIV most common in South Africa."

"Even if both of those trials succeed, we may have licensed vaccines that are only valid in Thailand and/or South Africa because of the different sub-types of HIV," cautioned AVAC's Mitchell Warren. "This is why we need a global vaccine."

Good-bye to Ad₅

Also making news was a suite of programming and research devoted to the failure of an adenovirus type 5 vaccine. Three studies have been cancelled in the past six years using this vector—and at least two studies demonstrated increased risk of acquiring HIV after vaccine increased.

"We do not recommend adenovirus 5 as a platform for an HIV vaccine," announced Glenda E. Gray, MD, executive director of the Perinatal HIV Research Unit of the University of the Witwatersrand, South Africa.

CONTINUED ON PAGE 7

Experts Debate: Is HIV Cure 'Hype or Hope'?

BY LIZ HIGHLEYMAN IN COLLABORATION WITH HIVANDHEPATITIS.COM

Is a functional cure for HIV feasible within the foreseeable future or is it a hopeless quest robbing resources from more practical approaches to improve the lives of people living with HIV? This question was the crux of a mock trial held on the opening day of the 14th European AIDS Conference in Brussels.

The debate was part of a satellite session sponsored by Bristol-Myers Squibb (BMS) to mark the launch of its new Partnering for Cure initiative, which will support education and research into novel treatment and cure strategies for chronic viral diseases including HIV and hepatitis B and C.

Christine Katlama of Pierre and Marie Curie University in Paris, playing the 'judge', noted the recent increase in attention to the possibility of an HIV cure at scientific meetings and in the popular media, spurred in part by 'proof-of-concept' cases like that of Timothy Ray Brown (the 'Berlin patient') and that of the Mississippi baby.

Speaking in defence of the proposition that an HIV cure is possible, Carlo Federico Perno of the University of Rome gave the example of hepatitis C as a virus that can be eradicated.

Whilst traditional interferon-based therapy relied on stimulating the immune response, new direct-acting agents work by interfering with various steps of the hepatitis C virus (HCV) lifecycle, much like combination antiretroviral therapy (ART) for HIV. Two highly effective and well-tolerated compounds—Janssen's simeprevir and Gilead Sciences' sofosbuvir—are scheduled for US approval by the end of the year (assuming the federal government shutdown does not disrupt the work of the Food and Drug Administration).

The inclusion of this argument was no doubt intended as an opportunity to educate about hepatitis C, which is increasingly making its way into HIV conferences. Many people with HIV have hepatitis C co-infection, and HIV clinicians are increasingly called upon to treat it. BMS has some promising hepatitis C direct-acting agents in the pipeline including the NS5A inhibitor daclatasvir, the HCV protease inhibitor asunaprevir and the non-nucleoside polymerase inhibitor BMS-791325.

But no one, including Perno, really thinks hepatitis is a good model for an HIV cure.

HCV remains confined to a cell's cytoplasm, where it must either "replicate or die", Perno explained. If it does not do so immediately, HCV RNA is rapidly degraded; drugs that fully halt replication can therefore offer a permanent cure. Perhaps the main scientific barrier to hepatitis C treatment is that the virus is highly variable—much more so than HIV—which means different drugs work best against different HCV genotypes and combination therapy is needed to prevent resistance.

HIV, in contrast, enters host cell chromosomes where it may remain latent for decades and perhaps even a lifetime. Speaking for the 'prosecution', José Alcamí of the European University of Madrid said that viral latency, existence of viral reservoirs and destruction of the immune system by the virus are the three main barriers to a cure.

HIV DNA in resting CD4 T-cells can awaken when these cells become activated as part of an immune response, leading to renewed viral replication, he explained. For this reason people with HIV must remain on ART—for life, as far as we know—to guard against viral rebound.

HIV cure researchers are testing several different strategies to reverse latency and flush the virus out of hiding. The so-called "shock and kill" approach involves using agents such as HDAC inhibitors to awaken latent virus coupled with immune-boosting therapies to kill infected cells. But current anti-latency drugs trigger only weak viral reactivation and target only a small proportion of the viral reservoir.

In addition to long-lived memory T-cells, the HIV reservoir also includes anatomical sites such as the lymph nodes, gut lymphoid tissue and central nervous system. HIV preferentially targets CD4 cells—the "brain of the immune system"—and persistent immune activation caused by the virus leads to immune senescence and eventual exhaustion of immune function, Alcamí said.

"I would like to give good news, but we face a virus we are not able to cure with drugs we have available or even drugs we may have in the future," he concluded. "The destruction of the immune system remains a barrier to a cure."

Returning to the "defence," Giuseppe Pantaleo of Centre Hospitalier Universitaire Vaudois in Lausanne countered that we should not feel too depressed as "there is a lot to be optimistic about."

Pantaleo outlined the important proof-of-concept cases, previously reported on aidsmap. com, that indicate that a cure is possible at least in principle. These include the Berlin patient who was cured after a bone marrow stem cell transplant for leukaemia, an American baby who shows no evidence of remaining virus after starting ART within a day after birth; two Boston stem cell transplant patients with sustained viral suppression after antiretroviral interruption; and the French VISCONTI cohort of individuals who appear HIV-free after ART initiation during acute infection.

Pantaleo argued that continuing residual viral replication despite ART is "probably responsible" for replenishment of latent reservoirs and better antiretroviral drugs that fully suppress replication may offer hope for a functional cure. Data on this point are mixed, however, and some researchers think that at least current classes of antiretrovirals already provide maximum suppression.

Summing up, Pantaleo noted that only 25% of people with HIV in the US have achieved undetectable viral load on ART and that even excellent current therapy remains "very hard to take" especially over the long term.

A combination of strategies will be the secret of an HIV cure, he concluded. "We're just at the beginning," he said. "A functional cure is possible if there is the right investment in these new approaches."

Perno added that there is "clear evidence that persistent virus is harmful." Even if 'undetectable', the virus is not absent in the body and even a few copies may be detrimental, for example by maintaining a state of persistent immune activation. "In the long term we will pay a price or this," he cautioned.

But the effectiveness of modern antiretroviral treatment was the gist of Georg Behrens argument against pursuing a cure. Behrens, of Hannover Medical School, explained that current ART is so good that attempts to cure HIV are not worth the risk. Donor stem cell transplants,

You Are What You Eat!

BY JOANNA LAFORCE, R.PH., CGP

The natural beauty that exudes from a person who is healthy in mind, body, and spirit cannot be duplicated with cosmetics, pills, or surgery.

Food plays a major role in our mood, memory, and cognitive function. While some foods are believed to contribute to brain health, others are more likely to increase brain decline. For example, saturated and hydrogenated/trans fats (in processed foods), especially in combination with simple, refined carbohydrates (i.e., sugar) increase the risk of heart disease and diabetes. In addition, they cause inflammation in the body and the brain.

So, what can we eat for optimum health?

The first thing we can do is decrease the amount of food that we intake. Calorie restriction has been shown to be the most effective means to retard aging, including brain aging. It wards off obesity, *and* it lowers the risk of Alzheimer's Disease.

Secondly, what are the foods that will keep us healthy in mind, body, and spirit?

Colorful Fruits and Vegetables and the Juices Made from Them

Sweet potatoes, corn, yams, carrots, lima/butter beans, peas and lentils have a low glycemic index (GI). This means that they are slow in raising blood glucose levels.

Broccoli. One medium stalk of broccoli contains more than 100% of your daily vitamin K requirement and almost 200% of your recommended daily dose of vitamin C: two essential

bone-building nutrients. The same serving also helps stave off numerous cancers.

Avocados are rich in healthy, satisfying fats proven in one study to lower cholesterol by about 22%. One has more than half the fiber and 40% of the folic acid you need daily, which may reduce your risk of heart disease.

Blueberries have one of the highest antiinflammatory/antioxidant capacities of all fruits and vegetables.

Other good fruits are strawberries and other berries, apples, mangos, citrus fruit.

Whole Grain and Fiber-Rich Foods Whole wheat breads and pasta, oats, barley, bulgar have a low glycemic index.

Low-Fat and Fat-Free Dairy Products

Yogurt, low fat cheese and milk are good options

Lean Meats, Poultry, Fish, Eggs, Beans, Nuts, and Seeds

Cold water fish like salmon, halibut, tuna, herring, trout are high in omega-3 fatty acids which have been linked to a reduced risk of depression, heart disease, and cancer. They have antioxidant properties and stimulate the immune system. They also "protect" the brain.

Walnuts and almonds are good antioxidants and may help reduce cholesterol.

Curcumin is found in the yellow curry spice. **Turmeric** is high in antioxidant and anti-inflammatory activity.

for example, can be fatal and are only appropriate for people with life-threatening conditions such as leukaemia or lymphoma.

Furthermore, better antiretrovirals are in the works including agents that target HIV attachment and maturation, the "very ends of the replication cycle." Treatment dramatically extends survival of people with HIV and the relatively small percentage who do not do well on current ART—due to co-morbidities or adherence problems, for example—are "not the best candidates" for risky cure approaches.

Behrens concluded that research should focus on improving ART for the broad population of people with HIV, not on curing a few exceptional patients. "We should ask not only is a cure possible, but what is the real benefit for patients," he said. "We may be able to fly to the moon, but that doesn't solve our problems with traffic here [on earth]."

After hearing the arguments on both sides the audience 'jury' rendered its verdict. Among the more than 100 participants, opinion was nearly evenly divided as to whether a cure for HIV is an achievable and worthwhile goal. Olives, canola oil, avocado and grapeseed oils are high in omega-9 fatty acids.

Flaxseeds, sesame seeds, and soybeans are phytochemicals that protect the brain and immune system

People in the Mediterranean and Japan eat the healthiest. In the Mediterranean "Diet", it is recommended that red meats and simple sweets should only be eaten occasionally.

In 1993 the "DASH Diet" was introduced by the National Institutes of Health to control and prevent hypertension. But now, it has now been shown to reduce the rate of cognitive decline in the elderly, improve the immune system, and provide for overall health and wellbeing. It is rich in fruits, vegetables, whole grains, and low-fat dairy foods; includes meat, fish, poultry, nuts and beans; and is limited in sugar-sweetened foods and beverages, red meat, and added fats. In addition to its effect on blood pressure, it is designed to be a well-balanced approach to eating for all Americans.

It is important to eat foods that are organically grown and from cage and range-free animals. These foods have been proven to have the highest nutrient content and are high in antioxidant and anti-inflammatory effects.

As we all know, *diets* do not work. It is an overall healthy eating plan that will support a long and healthy life filled with energy and spiritual growth.

According to Pedram Asadi, Ayurvedic Practitioner at the Westwood Wellness Center, "You don't have to completely eliminate something from your diet that you enjoy or crave. Just eat or drink it in small amounts, and supplement other healthy foods that will keep you in balance."

Research documents the fact that all of the millions of cells in our body "think". They are intelligent and pass information to our brain. So, that "gut feeling" that you have really is coming from your stomach! We need to listen to our body. It will tell you what you need for optimum health and wellness.

JoAnna LaForce, RPh, CGP is a Clinical Consultant Pharmacist and is Board Certified in Geriatric Pharmacy. She is currently Clinical Director of The Farmacy. JoAnna can be reached by phone at 323.540.0404, and by e-mail at AskYourFarmacist2013@gmail.com.

BEING ALIVE **Newsletter 2013 autumn**

INSURANCE COVERAGE, CONTINUED FROM PAGE 1

practice organization the PCP is a part of and can only refer the member to other providers within that one organization. Even though the HMO itself has contracted with many other organizations, the member's health care will only come from the organization of which the PCP is part.

The only exception to this type of HMO is called a staff model, where all providers are employees or contract directly with the HMO. Kaiser Permanente is the largest example of a staff model HMO.

The main features about HMOs are:

- The member must use a provider within his or her network in order to have the medical charges covered; and,
- All care must be provided, authorized, or referred by the primary care physician, frequently called The Gatekeeper for obvious reasons.

Exclusive Provider Organization (EPO)

An EPO is very similar to an HMO with one major exception. Although the member must use network providers, an EPO does not require all care to go through a primary care physician. A member can determine when a specialist is needed and make the appointment directly as long as the specialist is also in the network. Again, the choice is limited to those providers within the medical organization the member has chosen when enrolling.

However, like an HMO, no benefits are paid if the member uses a provider outside the plan's network.

Preferred Provider Organization (PPO)

A PPO will also have a network of providers like an HMO or an EPO. Like an EPO, It will not require using a primary care physician as gatekeeper.

Unlike both an HMO and EPO, some coverage will be provided if the member uses a provider that is totally outside the plan's network. Benefits paid by the plan will be much higher if provided by network providers, with out-of-network providers paid at a much lower rate. This encourages using providers in the network.

Because some coverage is provided outside the network to providers who do not contract with the plan, PPOs tend to have more expensive premiums than HMOs or EPOs.

Insurance Terms

There are certain terms used in all of the health plans noted above that members should be aware of and understand:

Emergency Medical Services. Despite the requirement to use network providers in the above plans, all plans will cover charges for emergency care whether performed in or out of the plan's network, the goal being to get the member to care as soon as possible. Coverage outside the network, however, is normally only for "life-threatening emergencies," so not all ER visits are covered, just the true emergencies. However, courts have generally agreed that life-threatening means "to the average layperson, the medical condition is reasonably perceived to be life-threatening." This means that a trip to the non-network ER could still be covered even if

the perceived heart attack turned out to be just a bad case of indigestion.

Premiums. This is the monthly amount that an insurance company charges for the insurance plan. It is not part of the out-of-pocket limit on payments described below. Remember that people on ADAP will be eligible to have their portion of the premiums paid by the OA-HIPP program in California.

Deductibles. This is a dollar amount that must be paid by the member for medical services before any benefits become payable by the plan. The deductible is normally calendar year and, once satisfied, there is no deductible for the remainder of that year. A deductible may apply before any benefits are paid by the plan or it may just apply to certain charges such as a Prescription Drug Deductible or in-patient hospitalization. Deductibles are more common in PPO plans, but also appear in other types as well.

Co-Pays. A co-pay is the dollar amount that is paid by the member directly to a medical provider at the time of service. Very common with HMOs and EPOs, this is the \$5 or \$20 a member pays when he or she sees the doctor or the \$2 or \$25 he or she pays to pick up a prescription. Co-Pays tend to be in plans that do not use a deductible or are used in lieu of a deductible for certain types of charges.

Co-Insurance. Co-insurance is the percentage of an eligible medical charge that a member is expected to pay. For example, the plan may pay 80% of a charge, leaving the member to pay a co-insurance percentage of 20% or 70–30%. The



use of co-Insurance is more common with PPOs, and tends to be used most often with Deductibles as well.

Out-of-pocket Limits. All plans under the new healthcare law must have a maximum amount of money that the member will spend in a calendar year. Once that limit has been reached, the insurance plan pays 100% of the eligible charges for the remainder of that calendar year. The out-of-pocket limit only counts amounts paid for the member's portion of medical bills and does not include premium payments.

Allowable Amount (or Eligible Charges).

No insurance plan promises to pay 70%, 80%, 90%, or 100% of *all* medical bills. Historically, they only agree to pay the "usual, reasonable and customary charges" for a treatment or procedure. Today, this is no longer a major issue as the contracts between medical providers and the insurance plans restrict the amount that providers can charge contractually. Under these managed care plans, as long as the treatment was in-network, the member is not obligated to pay more than the co-Pay or co-Insurance percentage of the contracted amount, regardless of what the provider tries to charge. The member is not liable for any charges in excess of the contracted benefit.

Appeal/Grievance. If a member disagrees with the decision of the insurance company, the plan must provide a method in which members

can question the decision and appeal to have the decision reversed. The Appeal or Grievance procedure will be spelled out in the insurance booklet.

Exclusions and Limitations. All plans will have a list of procedures and conditions for which they will provide no coverage. While the list may vary from plan to plan, they typically exclude things such as voluntary cosmetic surgery, medical conditions incurred while committing a felony, or while serving in the armed forces. In addition, plans may cover some items but strictly limit the number of procedures or the amount they will pay. Examples would be limiting the number of days in a convalescent care facility or the number of acupuncture visits they will cover.

There are, of course, other terms used in health insurance, however, plans may use them in slightly different ways. The insurance booklet/certificate will have a section that defines the terms used, and they typically capitalize or place in bold all words that are defined within the plan document.

Jacques Chambers, CLU, is a Benefits Counselor in private practice with over 35 years experience in health, life and disability insurance and Social Security disability benefits. He can be reached by phone at 323.665.2595, by e-mail at jacques@helpwithbenefits.com, or through his Web site at www.helpwithbenefits.com.

VACCINE RESEARCH, CONTINUED FROM PAGE 3 Funding

Three common themes emerged throughout the conference: The first was that vaccine research was at a crossroads. The second was that vaccine research needed to be more fully integrated with prevention and biomedical interventions. And on that note, this year marked the last conference focused only on AIDS vaccines—next year's conference in Cape Town, South Africa, is titled "HIV Research for Prevention 2014: AIDS Vaccine, Microbicide and ARV-based Prevention Science."

The third recurring theme was the lack of funding.

"We do not have enough money for vaccine research," said Scott M. Hammer, MD, chief of infectious diseases at Columbia University College of Physicians and Surgeons and protocol chair of the HVTN 505 study, which was cancelled in April 2013.

"We need more efficacy trials. The sequester and shutdown have harmed our work, and many of my colleagues could not attend this conference," he added, referring to the U.S. government shutdown in October. The funding impasse forced the National Institutes of Health to furlough many employees and cancel its delegation to Barcelona.

"The cost of these trials may seem large when we conduct them. But it will be a drop in the bucket compared to the long-term cost."

Rod McCullom has written and produced for ABC News, NBC, The Atlantic, Ebony, the Los Angeles Times and others. He is reporting from Barcelona as an AIDS Vaccine 2013 International Media Fellow.

THURSDAYS 7:00-9:00PM IN THE BEING ALIVE GREEN ROOM

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HIV/AIDS specialist. Accepts most PPO plans and
Medicare.

Ilya Rachman, MD 948 N Fairfax, Ste 201 West Hollywood, CA 90046 323.654.2020 fax 323.654.2828

Jorge E. Rodriguez, MD Orange Coast Medical Group 496 Old Newport Blvd, Ste 4 Newport Beach, CA 90263 949,646.1111

Accepts most indemnity and PPO health insurance plans, as well as Medical.

Peter Ruane, MD
5901 W Olympic Blvd, Ste 401
Los Angeles, CA 90036
323.954.1072
Openly straight © IM/ID board certified HIV specialist. Most insurance including Medicare.
Free-to-patient Clinical Treatment protocals in the privacy of a small practice available to both insured and non-insured.

Myles Spar, MD, MPH
Venice Family Clinic / West Side Partners
604 Rose Ave
Venice, CA 90291
310.664.7607
fax 310.664.7676
Free comprehensive medical facility servicing

Free comprehensive medical facility servicing the poor and uninsured populations of West Los Angeles.

MENTAL HEALTH SPECIALISTS

Barry Cardiner, MA, MBA, MFT 8430 Santa Monica Blvd, Ste 100 West Hollywood, CA 90069 Lic # MFT34301 323.874.1967

Erin T. Childs, MA, LMFT

11650 Riverside Dr, Ste 7

HIV+ physchotherapist. Accepts most PPO, POS insurance. Specialty areas: HIV issues, depression, abuse, addiction and recovery, relationships, grief.

Studio City, CA 91602 818.985.4200 etchilds@sbcglobal.net Accepts most insurance plans, indemnity and PPO. Individuals and couples therapy. Issues of illness/wellness, addiction and mood disorders. Solution-focused.

Terence Ford, MA, Registered Intern Located near Melrose and La Cienga 213.400.3474 Low-fee, individual psychotherapy. A calm,

Low-fee, individual psychotherapy. A calm, intelligent environment to work through your issues, whether HIV-related or not. Free initial consulation. Special low fee of \$40 if you mention Being Alive. Supervised by Dr. Steven Isaacman.

Payam Ghassemlou, MFT, PhD 9056 Santa Monica Blvd, #205 West Hollywood, CA 90069 310.801.2927

Gay male therapist, works with people with HIV and their significant others. Bilingual, accepts most insurance plans, no Medi/Medi.

Richard Gollance, LCSW, MSG 12402 Ventura Blvd, 2nd Fl Studio City, CA 91604 818.503.7300 Psychotherapy. Primary focus: gay men in mid-

life and beyond.

8430 Santa Monica Blvd, Ste 100
West Hollywood, CA 90069
310.726.HELP (4357)
www.gaypsychotherapyla.com
Openly gay and HIV+ counselor. Psychotherapist.
Life Coach. Helping gay men achieve their
goals in career and relationships. Sixteen years
experience working in HIV. Free, brief initial
phone consultation. Fees negotiated indivdually.
Insurance forms provided.

Ken Howard, LCSW

Matthew Silverstein, PhD, MFT
8235 Santa Monica Blvd, Ste 309
West Hollywood, CA 90046
310.842.6124
e-mail: MSilversteinMFT@aol.com
Specialty areas include gay identity, HIV/
AIDS issues, addiction recovery, dream work,
spirituality. Sliding fee scale and able to accept
most insurance (not Medi/Medi).

Fred Wilkey, EdD
Clinical Psychology
PSY8380
9056 Santa Monica Blvd, Ste 306A
West Hollywood, CA 90069
310.659.4455
Successful short-term therapy. Accepts Medicare and most insurance.

BENEFITS COUNSELOR

Jacques Chambers, CLU
Benefits Consultant and Counselor
Chambers Benefits Consulting
2658 Griffith Park Blvd, #290
Los Angeles, CA 90039-2520
323.665.2595 or 888.739.2595
www.HelpWithBenefits.com

UPCOMING ACTIVITIES AT BEING ALIVE

Call Being Alive at 323.874.4322. We're located at 7531 Santa Monica Boulevard, Suite 100, West Hollywood.

Being Alive Board Meetings

The Being Alive Board of Directors meetings for 2013 will be held monthly. If you would like to attend, call for more information.

Grupo Revelación

Miércoles • 7:00-9:00pm

Cada Miércoles durante 3 semanas te estaremos informando y educando acerca del VIH/SIDA, abuso de sustancias y otros temas de interés como educación sexual, pensamiento positivo (explorando nuestro yo interno), revelando nuestro estatus y técnicas de como improvisar positivamente nuestras vidas. Donde: Temple Kol Ami, West Hollywood Reform Synagogue, 1200 N. La Brea Avenue, West Hollywood, CA 90038. Para mayor información por favor comunícate con Patricio Soza o Jared Moreno al ext. 14

Get Real Group

Thursdays • 4:00-6:00pm

A 3-week discussion group between your peers and our Health Educator. The group meets on 3 consecutive Thursdays at Being Alive. Let's get real about sex, drugs and HIV. Positive thinking, exploring our higher selves', telling others you are positive, how do I want to live now that I'm HIV positive. Sign up available at the front desk. Please contact Patricio Soza or Jared Moreno with any questions at ext. 14

Transitions

Saturdays • 10:00am-noon

Transitions is a weekly Peer-led Support Group that will meet in a safe and supportive environment at Being Alive. You'll get the chance to vocalize your thoughts or concerns about any issues that are prevalent in your life and meet with other HIV+ transgender individuals with whom you can have an open exchange of ideas and strategies for coping with your diagnosis. Peers will provide support and share advice during this life changing period. Participants in the group will learn about risk reduction , harm reduction and Trans-Safety from various experts.

The Young and the Restless

Thursdays • 7:00-9:00pm

A new support group for the young and newly poz. All are welcome, but the focus are on the newly diagnosed and under 30. Topics include emotional and physical well-being, risk reduction and disclosure, HIV 101 and basic information, treat adherence, communication skills, and fellowship. Call Being Alive for more information.

Psychotherapy

by appointment

10:00am-9:00pm

Licensed psychotherapy intern provides one-on-one and couples therapy. Call Being Alive for appointment.

Positively New

Wednesdays • 7:30-10:00pm

For newly diagnosed or newly identified HIV+ within the past three years. Get emotional support, discuss medical issues, and topics relavant to a new diagnosis. Facilitated by Brian Risley, lead treatment educator for APLA. Call 213.201.1547.

Positive Outlook Support Group

Fridays • 7:00-9:00pm

All those interested in attending a Being Alive peer support group in the West Hollywood area please contact Being Alive.

Positive Reactions West

Wednesdays • 7:00-9:00pm

At Being Alive. A small drop-in group in a safe, honest place to discuss issues and meet others dealing with HIV. Call Being Alive

Ceramics and Pottery

Call Being Alive for location

Saturdays, Sundays, Mondays • 12:00 noon

Learn ceramics and wheel-throwing. Beginners to advanced are welcome.

Yoga and Meditation

Tuesdays • 4:30-6:00pm

This is a therapeutic yoga class designed for people with HIV. Practice gentle yoga, restorative meditation, and breath work to support the immune system. At Harper House, 1260 N. Harbor Ave., West Hollywood 90046.

Beginning Yoga

Mondays • 2:30pm

Thursdays • 3:00pm

At Being Alive in the Meditation Room. Call to make an appointment.

Saturdays • 10:30am

Call for location.

Healing Touch

by appointment

Fridays • 10:00am-2:00pm

Alternative healing by hands-on and energy-based techniques. Call Being Alive for appointment.

Hypnotherapy

Thursday

By Dean L. Williams, CHT. Call 877.667.5844.

Speaker's Bureau

Spread the word about prevention, treatment, living with HIV/AIDS. For more information, call Colin at 310.739.6504.

Acupuncture Services

by appointment

Mondays • 1:30-4:30pm

Every other Tuesday • 10:00am-1:00pm

Wednesdays • 10:30am-5:00pm

Treatment for a range of conditions including pain management, neuropathy and other side effects, addictions, stress, headaches, and allergies. Call Being Alive for appointment.

Chiropractic Services

Fridays • 1:00am-4:00pm

Back and body adjustments. No appointment necessary. New clients, or clients who have not contracted chiropractic services in more than a year, must come in at noon to fill out paperwork.

BEING ALIVE SUPPORT GROUPS

Our goal is to provide a safe and confidential space where everyone can express themselves in an atmosphere of mutual respect and encouragement.

WEDNESDAY

Grupo Revelación 7:00—9:00pm. Cada Miércoles durante 3 semanas te estaremos informando y educando acerca del VIH/SIDA, abuso de sustancias y otros temas de interés como educación sexual, pensamiento positivo (explorando nuestro yo interno), revelando nuestro estatus y técnicas de como improvisar positivamente nuestras vidas. Donde: Temple Kol Ami, West Hollywood Reform Synagogue, 1200 N. La Brea Avenue, West Hollywood, CA 90038. Para mayor información por favor comunícate con Patricio Soza o Jared Moreno al 323.874.4322 ext. 14

Wise Guys 7:00–9:00pm. Being Alive West Hollywood (Being Alive Green Room). Co-facilitated. A drop-in group for men over 35 in a safe, honest place to discuss issues and meet others dealing with HIV. Call Being Alive for more information.

Positively New 7:30—10:00pm. 1300 N Vermont Ave. (Doctor's Building 2nd floor Conference Room). Facilitated by Brian Risley, Lead Treatment Educator for APLA at 213.201.1547. A fairly large support group for those who are newly diagnosed or newly identify HIV+ within the past three years. Get emotional support, discuss medical issues and topics relevant to a new diagnosis.

THURSDAY

Get Real Group 4:00–6:00pm. A 3-week discussion group between your peers and our Health Educator. The group meets on 3 consecutive Thursdays at Being Alive. Let's get real about sex, drugs and HIV. Positive thinking, exploring our higher selves', telling others you are positive, how do I want to live now that I'm HIV positive. Sign up available at the front desk. Please contact Patricio Soza or Jared Moreno with any questions at 323.874.4322 ext. 14

The Young and the Restless 7:00–9:00pm. A new support group for the young and newly poz. All are welcome, but the focus are on the newly diagnosed and under 40. Topics include emotional and physical well-being, risk reduction and disclosure, HIV 101 and basic information, treat adherence, communication skills, and fellowship. Call Being Alive for more information.

FRIDAY

Positive Outlook Support Group 7:00–9:00pm. An emotional and social support group in West Hollywood for HIV+ men to discuss current issues and solutions to life with HIV. Contact Being Alive for more information.

SATURDAY

Transitions 10:00am—noon. Transitions is a weekly Peer-led Support Group that will meet in a safe and supportive environment at Being Alive. You'll get the chance to vocalize your thoughts or concerns about any issues that are prevalent in your life and meet with other HIV+ transgender individuals with whom you can have an open exchange of ideas and strategies for coping with your diagnosis. Peers will provide support and share advice during this life changing period. Participants in the group will learn about risk reduction , harm reduction and Trans-Safety from various experts.

LOCAL RESOURCES

ACLU Lesbian & Gay Rights: 213.977.9500 X237

Aid for AIDS: 323.656.1107

AIDS Healthcare Foundation: 888.AIDSCARE

AIDS/HIV Discrimination Unit, LA City Attorney's Office:

213.978.7758

APLA: 213.201.1600

AIDS Research Alliance: 310.358.2423

AIDS Service Center: 626.441.8495

AIDS Services Foundation/Orange County: 949.809.5700

Asian/Pacific AIDS Intervention Team: 213.553.1830

Being Alive San Diego: 619.291.1400 Beth Chayim Chadashim: 323.931.7023 Bienestar Hollywood: 323.660.9680

Clean Needles Now: 213.483.5366

Common Ground, the West Side HIV Community Center:

310.314.5480

Congregation Kol Ami: 310.248.6320

CVS Pharmacy: 310.659.9810

Deaf Women Outreach: 323.478.8000 (TTY or voice)
Discount Medical Pharmacy: 323.661.8366

East Valley Community Health Center:

West Covina: 626.919.5724;

Pomona: 909.620.8088

Foothill AIDS Project: 909.482.2066

Jeffrey Goodman Special Care Clinic (GLCSC):

323.993.7500

Jewish Family Services HIV/AIDS Program: 323.761.8800

LA Gay and Lesbian Center: 323.993.7400

The Life Group LA: 888.208.8081

Los Angeles Free Clinic: 323.653.1990

Los Angeles Patients & Caregivers Group: 323.882.6033

Minority AIDS Project: 323.936.4949 Narcotics Anonymous Hotline: 800-todayna

National AIDS Hotline: 800.227.8922;

800.344.7432 (en Español);

800.243.7889 (TTY)

The New Hope Learning Center: 213.251.8474

North East Valley Clinic: 818.988.6335

PAWS (Pets): 213.741.1950

Peer Education Program: 323.651.9888

Project Angel Food: 323.845.1800

Project Inform: 800.822.7422

South Bay Family Health Care Center: 310.318.2521 X236

Spanish Language AIDS Hotline: 800.400.7432

(SIDA) toll-free Southern California only

Tarzana Treatment Center HIV-Mental Health Project:

818.342.5897

THE Clinic: 323.295.6571

USC AIDS Clinical Trials Unit: 323.343.8288

Valley Community Clinic: 818.763.8836

Van Ness Recovery House: 323.463.4266

WeHoLife.org: 323.860.7323

Wellness Works Community Health Center: 818.247.2062

 $West\ Hollywood\ Community\ Housing\ Corporation:$

323.650.8771 X2

Whittier Rio Hondo AIDS Project: 562.698.3850

Women Alive Coalition: 323.965.1564
Zahn Emergency Shelter: 213.438.1619

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COMMUNITY BULLETIN BOARD

Notices for this Bulletin Board and the preceding Support Group sections should be submitted to Kevin Kurth via Community Bulletin Board, C/O Being Alive Newsletter, 7531 Santa Monica Boulevard, West Hollywood, California 90046; or send e-mail to Kevin@BeingAliveLA.org; or send fax to 323.969.8753. Please be concise and indicate if there is a fee. Please also renew notices every six months.

MORE SUPPORT GROUPS

BIENESTAR

Bienestar Human Services offers a variety of services and support groups for the Latino community, HIV+ client services, and HIV-negative prevention programs. Call Jorge Diaz at 523.660.9680. 5/2012

WHITTIER HIV+ GROUP

Whittier Rio Hondo AIDS Project (WRHAP) offers this group for all people with HIV. An open support group. Every other Saturday 10am–noon. For info, call Elizabeth Mendia at 562.698.3850. 6/2008

SPECTRUM / PASSPORT TO CARE

Various support groups. Yoga: Mondays 10:30am–noon, Building L. Relapse prevention workshop: Tuesdays 10:30am–noon, Building L. Heterosexual support group: Wednesdays 10:30am–noon, Building K. Food pantry: Thursdays 10:30am–1pm, Building L. Women's support group: Thursdays 11:30am–1pm, Building M. Soul food men's support group: Thursdays 4–5:30pm, Building N. Movie night: first and third Thursdays 6–8:30pm, Building L. Cocaine anonymous: Fridays 10:30am–noon, Building M. Grupo universal: Fridays 5–6:30pm, Building L. For more information call front desk at 323,563.4939, 11/2007

SOUTH BAY FAMILY HEALTHCARE CENTER

Comprehensive HIV/AIDS social service support—case management, mental health, prevention education, HOPWA, short-term rental assistance. Call Joanne Silva at 310.318.2521 x1422.11/2007

SHABBAT LUNCH AND JEWISH HIV SUPPORT GROUP AT CONGREGATION KOL AMI

Come and schmooze and eat with fellow Jewish HIVers at Congregation Kol Ami in West Hollywood. We provide a safe, nurturing Jewish environment to talk about life with HIV, Jewish life, and life in general. 1200 North La Brea Avenue, West Hollywood. Call for time and date of next meeting. Reply in confidence to Rabbi Denise Eger at rabbi@ kolami.org, or 323.606.0996, x100. 12/2006

APLA SUPPORT GROUPS

The following groups are ongoing and offered through APLA's Mental Health Services: HIV/AIDS Gay Male, HIV/AIDS Heterosexual, Substance Use and HIV, and Mono-lingual Spanish-speaking HIV/AIDS. For information in English and Spanish, call Walter Campos at 213.201.1621. 4/2006

METH AND GAY MEN

Feeling out-of-control? Having trouble finding intimacy? Promising to quit but using anyway? Worried that you need meth to have hot sex? On-going psychotherapy group meeting weekly for men concerned about crystal meth, sex, and intimacy. Conveniently located in Hollywood, this closed therapy group explores issues and feelings in a safe, confidential setting, Monday, 7–8:30pm. For more information, contact Glen at 323.993.7655, or Andre at 323.860.5804. Sponsored by the LA Gay & Lesbian Center. 2/2006

SPIRITUAL SUPPORT DROP-IN GROUP

For people living with HIV/AIDS or cancer, or dealing with grief or imprisonment. One-on-one spiritul support, primarily Catholic. Can make inter-faith referrals. For info, call 323,225,4461,5/2004

CHURCH OF THE VALLEY HIV+ SUPPORT GROUP

Thursdays, 6:30–8:30pm, Disciples of Christ Church, 6565 Vesper, Van Nuys. 818.786.4070.5/2004

COMMON GROUND

HIV/AIDS drop-in support group for women and men, Mondays, 12:30–2pm; free; lunch is served. Gestalt Therapy Group, Thursday nights, 5:30–7pm, actively recruiting members. Women's drop-in group, second and fourth Thursdays of the month, 12:30–1:30pm. Spanish-speaking drop-in group, Wednesdays, 10–11:30am. Call 310.314.5480. 5/2004

ALTAMED SUPPORT GROUP

For men and women living with HIV/AIDS. Meets Tuesdays from 2–3pm at AltaMed in Pico Rivera. For more information, call 562.949.8717. 12/2003

POSITIVES IN SOBRIETY

Open AA meeting for people affected by HIV. Meets every Sunday, 6pm. Great Hall in Plummer Park, Vista St., between Fountain and Lexington in West Hollywood. 323.656.0829. 12/2003

HIV BY THE BOOKS

Open AA meeting. Intimate book study for people dealing with HIV/AIDS issues. Meets every Friday, 7:15pm at Being Alive. 323.656.0829. 12/2003

FOUND SOBRIETY CRYSTAL METH ANONYMOUS

7pm. 11321 Camarillo St. (upstairs), North Hollywood, CA 91602. Go to www.crystalmeth.org for more information. 1/2003

NA HIV-

Thursdays at 8:30pm. HIV+ and gay narcotics anonymous meeting. Members share their experience, strength, and hope that they and others may recover from the disease of addiction. HIV+ focused. Many new-comers at this meeting. 1919 N. Beachwood Dr., Los Angeles. For more information, call 323.850.1624. 6/2002

MINORITY AIDS PROJECT

Minority AIDS Project sponsors a variety of support groups for people of color. Call 323,936.4949. 9/2000

GRUPOS Y NOTICIAS EN ESPAÑOL

BIENESTAR

Bienestar Human Services offers a variety of services and support groups for the Latino community, HIV+ client services, and HIV-negative prevention programs. Call Jorge Diaz at 523.660.9680. 5/2012

PROJECT ANGEL FOOD

Project Angel Food es una organización que provee comidas para las personas que viven con VIH/SIDA. Nuestros servicios están disponible para personas que viven en nuestras áreas de servicio y que están oficialmente diagnosticado con el SIDA o VIH sintomáticos. Para recibir servicios, llame el 323.845.1810. 8/2001

ALTAMED GRUPOS DE APOYO EN ESPAÑOL

Todos los miercoles de 6–8pm le ofrecemos un grupo para hombres y tambien otro grupo para mujeres. Para mayor information: Juan—323.869.5403. 2/2001

WOMEN'S SERVICES

T.H.E. CLINIC FOR WOMEN, INC.

Offers specialized services for women living with HIV. Early intervention program, HIV testing. Staff speaks ten languages. Call Nola Thomas for information or appointments: 323.295.3225. 5/2012

THE SERRA PROJECT/CASA DE LA MADONA Y EL

A home for women and children living with AIDS and HIV. RN and MSW case management, medical transportation, bilingual—English/Spanish, family preservation and reunification. Call Martha Aldreta at 323.342.0705. 4/2008

PROTOTYPES WOMENSCARE

Complete medical treatment, follow-up, and case management, education available at WomensCare Center, Queen of Angels/Hollywood Presbyterian. No fee, childcare available. 300 N. Vermont, Ste. 401. Call Andrea Jackson 323.662.7420. East LA location: 5427 E. Whittier Blvd., Los Angeles 90022. Call Yolanda Salinas 323.869.5467. 11/2007

ESCAJEDA WOMEN'S CLINIC

Comprehensive health services for women with HIV/AIDS regardless of ability to pay. General and specialized HIV

health care includes GYN services. Social Worker. Psychiatric services. English/Spanish speaking staff. For info, call 626,744.6140. Pasadena location. 12/2003

LEGAL SERVICES

HAISA

A collaborative effort of AIDS Service Center, the L.A. County Bar Barristers, AIDS Project, the L.A. Gay & Lesbian Center, and Public Counsel. HALSA provides legal assistance in a variety of areas including bankruptcy, benefits, employment, housing, wills, powers-of-attorney to low-income people living with HIV, as well as comprehensive pro bono referrals. For more info, call 213.2637.1022. 4/2006

INSURANCE

Supplemental health and life insurance, serving our community. Contact Glenn at 818.774.1556 x33, or Glenn_Zorn@us.aflac.com_9/2004

NOTARY PUBLIC

I live a few blocks from Being Alive in West Hollywood. Services are free if we can arrange a time to meet there. You can also come to my home on Palm Avenue and pay the regular \$10, or I can come to your place in West Hollywood for \$15. Call Michael at \$10.659.4299. 2/2002

MEDICAL SERVICES

HIV OCULAR SPECIALIST

Lee Dodge, OD. 14429½ Ventura Blvd, Sherman Oaks, CA 91423. 818.783.8750. Fax 818.783.8779. lee@drdodgeod.com. www.drdodgeod.com. Accepts most PPO plans and Medicare. 6/2008

NORTHEAST VALLEY HEALTH CORP

Confidential comprehensive medical services for HIV/AIDS provided in English and Spanish at low or no cost in the SF Valley. Call Stefen Ruiz at 818.988.6335. 6/2008

UCLA CARE CLINIC

The UCLA Care Center conducts clinical research in HIV disease management, new medications, metabolic complications, prevention and therapeutic vaccines, opportunistic infections, AIDS-related cancers and co-infections. Contact Deon Claiborne at 310.557.9062. Provides specialty HIV care to those with private insurance, Medicare, or Medicare and Medi-Cal combined. Contact Mike Marcial at 310.557.2273. 11/2007

JEFFREY GOODMAN SPECIAL CARE CLINIC

Provides HIV and STD testing, as well as treatment, case management, complementary therapies and AIDS Drug Assistance Program for HIV+ patients. 1625 N. Schrader, Third Floor, Los Angeles 90028. www.lagaycenter.org. Call 323.993.7500 for info. 11/2007

AIM HEALTHCARE FOUNDATION

Healthcare for adult-industry members. HIV/STD testing, referrals, counseling, GYN services. For clients diagnosed with HIV/AIDS at AIM Healthcare—free-for-life medication placement. Call 818.981.5681. Also in Woodland Hills: 19720 Venture Blvd.. 818.961.0291. 11/2007

COMPREHENSIVE AIDS RESOURCE EDUCATION PROGRAM (C.A.R.E.) Offers the following services: Out-patient, non-emer-

Offers the following services: Out-patient, non-emergency clinic (sliding scale)—562.624.4999 • Dental center (sliding scale)—562.624.4949 • Testing/outreach (no charge)—562.624.4900 • AIDS drug assistance program (no charge)—562.624.4944 • Mental health program and nutritional couseling (no charge)—562.624.4914 • Case management / social services (no charge)—562.624.4900 • Family services program—562.624.4918. Located at 411 E. 10th St., Suite 107, Long Beach, CA 90813 (inside St. Mary Medical Center campus). 11/2007

COMMUNITY BULLETIN BOARD

ALTAMED HEALTH SERVICES

Comprehensive medial treatment for people with HIV/AIDS. In addition to medical treatment, we provide case management, support groups, and HIV testing. To make an appointment to see a physician, please call 323.869.5548. 11/2007

LAGUNA BEACH COMMUNITY CLINIC

Treats qualified clients for a low fee. Two HIV specialists accepts Medical and Medicare. 362 3rd St., Laguna Beach, CA 92651. 949.494.0761. 11/2007

FREE RAPID HIV AND STD TESTING

At The SPOT, 745 N. San Vicente Blvd., West Hollywood, southwest corner of Santa Monica and San Vicente. Tuesday–Friday, 1–7pm, 323.993.7440. If you are experiencing STD symptoms, call 323.993.7575 between 11:30am–2:30pm to schedule an appointment. 11/2007

VALLEY COMMUNITY CLINIC, NORTH HOLLYWOOD

Offering free, anonymous HIV counseling service and testing Mondays 4–7:30pm, Tuesdays 2–7:30pm, Thursdays 12–3:40pm, and Saturdays 11am–4:30pm. Contact Walter Abb 818.763.8836. HIV case management everyday. Medical outpatient services for people with HIV. ADAP enrollment. For interview call 818.301.6334. www.valleycommunityclinic. org. 11/2007

AIDS HEALTHCARE FOUNDATION

AHF Clinics in Hollywood, Downtown, Sherman Oaks, the Westside, Upland, Lancaster, and West Adams provide care to people with HIV/AIDS regardless of ability to pay. No one ever turned away. Free HIV testings at our Out-of-the-Closet thrift stores. Call 800.AHF.2101. 10/2002

ANDREW ESCAJEDA CLINIC

Comprehensive health services for adults with HIV/AIDS, regardless of ability to pay. ADAP enrollment site and psychiatric services. Open to all HIV-infected, even if receiving medical care elsewhere. Pasadena location. Call 626.744.6140. 8/2002

TARZANA TREATMENT CENTER

Provides residential rehabilitation and medical detoxification programs for people with HIV/AIDS. Call 818.996.1051 x40. HIV outpatient clinic, Monday, Wednesday, Friday, 10am–6pm. Call 818.342.5897. 9/2000

USC AIDS CLINICAL TRIALS UNIT

Free clinical trials for people with HIV/AIDS. Located at 5P21, Rand Schrader Clinic, 1300 N. Mission Rd., Room 349, LA. For info, call 323.343.8288. 9/2000

METHADONE TREATMENT FOR HIV+ PEOPLE

If you are HIV+ and opiate-dependent, Western Pacific Rehab offers free out-patient methadone treatment at conveniently located sites. Call 800.223,3869. 9/2000

WELLS HOUSE HOSPICE, LONG BEACH

A home-like environment serving Long Beach and Orange County. Volunteers always welcome. Contact Ron Morgan at 562.435.9363. 9/2000

LA COUNTY RAND SHRADER 5P21 HIV CLINIC

Provides comprehensive HIV care; services available in English and Spanish. Call 213.343.8255. 9/2000

T.H.E. CLINIC, INC.

HIV/AIDS testing, treatment, counseling, family planning, other services. For more information call 323.295.6571. 9/2000

PHARMACY SERVICES

EDDIE'S PHARMACY

As your commuity pharmacy, we are committed to provide the best service possible. Getting to you know and your individual needs is an integral part of that commitment. Small enough to care; large enough to meet your needs. Call 310.358.2400.1/2006

ALL-IN-ONE PHARMACY

For all your pharmacy needs. Adherance tools and delivery provided free of charge. Treatment educators available for any questions you have. Most insurance accepted. Call toll-free: 866.255,6663, 11/2005

MOMS PHARMACY

The original adherence pharmacy. Services include free delivery, pager notification, and optional MOMS Paks medication packets, the ultimate adherence tool. For more information, visit www.momspharmacy.com, or call 866.993.6337. 8/2005

PERSONAL SERVICES

TRUE NORTH MASSAGE

Swedish circulatory massage. Tim Maloney, Certified Massage Technician. APSB. 818.244.3029. 818.726.9480 (cell). shaktim2001@hotmail.com. 1/2006

SPORTS MASSAGE

Deep tissue, soft touch, and Reiki therapy. Discount for HIV+. I've worked on athletes for over five years. Call Wayne at 562.235.8716 and mention this ad. 12/2005

COUNSELING

Payam Ghassemlou, PhD, MFT, gay male counselor. 310.801.2927. Sandplay Therapy—a fun, creative, and healing process to connect to your psyche's self-healing powers.

RESIDENTIAL DRUG TREATMENT

Live-in drug treatment for people living with HIV/AIDS. For info, call Robyn at 818.985.8323. 2/2002

MASSAGE BY JEFFREY

Therapeutic touch at a discount for people living with HIV/AIDS. Contact Jeffrey at jjeffrey54@aol.com, or call 310.770.7515. 10/2001

PROJECT ANGEL FOOD

Project Angel Food's agency delivers nutritious meals to individuals with a formal diagnosis of AIDS or symptomatic HIV disease living in our delivery area. To start free meal delivery service, please call Client Services at 323.845.1810.

FREE GROCERIES

Food and personal care items are provided to PWAs. Tuesdays, Wednesdays, and Thursdays, 10am–1pm. For more information, call Imani Unidos Food Pantry, 323.754.2320. 5/2001

LOW INCOME HOUSING FOR PWAs

1-, and 2-bedroom housing wait list. Contact West Hollywood Community Housing Corporation, 8285 Sunset Blvd., Ste. 3, West Hollywood, or call 323.650.8771, x2. 1/2001

50% MASSAGE DISCOUNT

Full hour Swedish massage. Legit. \$25. Designed for financially challenged HIV+ folk who are looking for a way to afford regular massage. Call Bruce at \$23.660.5358. 9/2000

MISCELLANEOUS

HOLLYWOOD MENTAL HEALTH CENTER

We are accepting new HIV+ clients who are seeking individual or couples counseling. HIV+ clients may obtain services without any insurance, although Medi-CAL and Medicare are accepted. 1224 N. Vine St., Los Angeles 90038. Contact Chris Bridge, MSW, at 323.769.7668. 5/2012

ALLEGRÍA HOUSE SHELTER

Assist families, and couples (gay or straight) living with AIDS. Sober living program. Contact Julie Lewis at 323.454.4200. 11/2007

CHOICES RECOVERY SERVICES

Has homes in Long Beach and Los Angeles, providing clean, comfortable, structured, drug- and alcohol-free living environments for men, women, straight, gay, HIV+, and dual-diagnosed individuals. Please call us for further information at 562.930.0565. www.choicesoflongbeach.com 11/2007

ZAHN EMERGENCY SHELTER

Welcomes singles and families with open arms to our sober living program. Priorty is given to referrals living with HIV/ AIDS. Referrals only. Please call 213.438.1619. 8/2006

MCINTYRE HOUSE

A non-profit residential substance abuse recovery and sober living program for men. Low-cost medical care and food provided. Contact Ed at 323.662.0855. 12/2004

TEENS REACH TEENS

Peer Education Program of L.A. offers educators to lead discussions on HIV/AIDS prevention in schools, group homes, and youth agencies. Call Wendy at 323.651.9888. 8/2002

HELPLINE FOR DEAF PEOPLE WITH HIV

A unique service run by HIV+ deaf people, providing referrals to other deaf and hard-of-hearing people with HIV/ AIDS. Contact Emmett Haggen at 323.550.4258 (TDD) or 323.550.4255 (fax), 9/2001

AIDS EDUCATION/SERVICES FOR THE DEAF

Provides education to schools as well as one-on-one meetings and intepreters to Ryan White-funded HIV/AIDS services and testing with no charge to the service providers. Call 323.550.4250 (TDD/voice). Fax: 323.550.4244.9/2001

HIV/AIDS MENTAL HEALTH PROGRAM

Common Ground offers mental health services to HIV+ residents of Los Angeles who cannot affort to pay. Call Mark Fairfield, LCSW, Director of Mental Health, at 310.314.5480. 4/2002

CRYSTAL METH ANONYMOUS INFO LINE

12-step program offering a 24-hour information hotline at 213.488.4455. 9/2000

AID FOR AIDS: FINANCIAL ASSISTANCE

Aid for AIDS provides financial assistance to people with HIV/AIDS. Help with pharmaceuticals, nutrition, monthly bus passes, rent, health insurance payments, utilities. For more info, call 323.656.1107. 9/2000

Need something to do Friday night?

Join Positive Outlook

for social activities and community participation

Friday nights 7-9

Call Being Alive for more information.