Multnomah County				
Program #40012 - Servi	ces for Persons Living with HIV			7/7/2014
Department:	Health Department	Program Contact:	Kim Toevs	
Program Offer Type:	Existing Operating Program	Program Offer Stage:	As Adopted	
Related Programs:	40011, 40025			
Program Characteristic	S:			

Executive Summary

The HIV Care Services Program (HCS) and HIV Health Services Center (HIV Clinic) provide community-based primary care and support services to 2,450 highly vulnerable people living with HIV. Services target low income, uninsured, mentally ill, substance abusing, and other special needs populations. These services contribute to lower mortality from HIV, fewer disease complications and the associated costs, and reduced transmission of HIV in the community.

Program Summary

The HIV Clinic serves over 1,100 clients each year. Clinic services include outpatient medical care, mental health and substance abuse counseling, case management, health education, HIV prevention and risk reduction support, and treatment adherence counseling. Access to and use of HIV medications is optimized by clinical pharmacy services. On-site chronic disease self management workshops and peer support are also offered to clinic clients. The HIV Clinic integrates prevention into all services to reduce client risk of HIV transmission. The clinic is supported by an active Client Advisory Board and a well established network of HIV social services providers. The clinic is an AIDS Education and Training Center site training over 40 doctors, nurses and pharmacists each year.

HIV Care Services Program coordinates a regional 6 county care system that promotes access to high quality HIV services through contracts with health departments and community organizations. HCS funded services include: Early Intervention: Outreach ensures early identification and treatment.

Care: A coordinated primary care system provides medical, dental, mental health and substance abuse treatment. Service Coordination: Case management connects clients with health insurance, housing, and other services critical to staying in care.

Basic Needs: Housing focuses on building life skills and access to permanent housing.

Health Promotion: Behavioral education provides clients with self-management skills.

Planning: A community-based council does service planning. Over the past three years, the number of persons living with AIDS has increased 15.3%. HCS clients continue to be severely affected by poverty, lack of stable housing, and reductions in insurance and medication programs.

Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	# of unduplicated HCS clients served (all srv types/whole 6-county system)	2,932	2,450	2,900	2,450
Outcome	% of HCS clients engaged in HIV medical care	88%	90%	91%	90%
Output	# of unduplicated HIV Clinic clients	1,173	1,150	1,200	1,260
Quality	% of HIV clinic clients who do not progress to AIDS	93%	95%	93%	93%

Performance Measures Descriptions

2) Measure changed. "% of clients engaged in HIV medical care" reflects the core function of all the supportive/other clinical services required: to meet the other life needs of the patient in a way that allows him/her to maintain HIV medical care and treatment. 4) Quality: helps to determine how well medical and support services contained in this offer support the health outcomes of people living with HIV disease.

Legal / Contractual Obligation

Federal HIV grant and contract funds are restricted. Part A grant requires: 1) Serving Clackamas, Columbia, Multnomah, Washington, Yamhill & Clark Counties; 2) Community-based Planning Council; 3) 10% cap on planning & administration, requiring the County to cover some administrative costs; and 4) The County must spend local funds for HIV services at least at the level spent in the previous year.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds	
Program Expenses	2014	2014	2015	2015	
Personnel	\$219,458	\$2,999,157	\$534,693	\$2,781,667	
Contractual Services	\$72,801	\$2,638,978	\$1,000	\$2,587,462	
Materials & Supplies	\$18,830	\$158,998	\$11,717	\$164,135	
Internal Services	\$27,067	\$865,207	\$56,271	\$916,304	
Total GF/non-GF	\$338,156	\$6,662,340	\$603,681	\$6,449,569	
Program Total:	\$7,00	\$7,000,496		\$7,053,250	
Program FTE	3.15	24.68	5.37	23.93	

Program Revenues				
Indirect for Dept. Admin	\$297,653	\$0	\$284,847	\$0
Intergovernmental	\$0	\$5,529,146	\$0	\$5,471,641
Other / Miscellaneous	\$0	\$0	\$0	\$5,000
Beginning Working Capital	\$0	\$75,000	\$0	\$0
Service Charges	\$322,557	\$1,058,194	\$567,792	\$972,928
Total Revenue	\$620,210	\$6,662,340	\$852,639	\$6,449,569

Explanation of Revenues

Services for Persons Living with HIV receives funding from the federal Ryan White Care Act Part A grant, county general fund, federal grants, local contracts, and medical fees.

HIV Clinic Revenue - Federal grants: \$2,561,472; medical fees: \$1,540,720; and state/local revenue contracts: \$119,322 HIV Care Services Revenue - Federal Ryan White Part A grant: \$2,795,847

Significant Program Changes

Last Year this program was: 40012 Services for Persons Living with HIV

Ryan White grant does not adequately fund administrative costs because of restrictions in the grant. Increased fixed and personnel costs in HIV Care Services team resulted in FTE reductions as we reassigned some FTE onto other funding sources to do other public health work. Clinic caseloads continue to be very high, 250- 300 patients. Less attention will be given to medium acuity patients, and fewer patients will have access to a nurse for disease management services. It is anticipated that the new CAP Network Navigators will take some work from the medical case managers by serving patients with a high need for pyschosocial support. The LPNs will be doing the majority of phone and walk in triage. A plan will be developed to address the reduction in disease management services.