

**Program #40012A - Services for Persons Living with HIV-Clinical Services** 6/25/2019

**Department:** Health Department **Program Contact:** Tasha Wheatt-Delancy  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 40011, 40025  
**Program Characteristics:**

**Executive Summary**

The HIV Health Services Center (HHSC) provide community-based primary care and support services to 1485 highly vulnerable people living with HIV. Services target low income, uninsured, and people experiencing homelessness, mental illness and substance abuse, as well as 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 Health Services Center (HHSC), the only Ryan White clinic in Oregon, serves over 1,485 clients each year and is part of the County's Federally Qualified Health Center (FQHC). HHSC's services include culturally specific LGBTQI HIV/HCV outpatient medical care, mental health services, case management, health education, HIV prevention, art therapy, IPV universal education and screening with referral to community resources, risk reduction support, medication assisted therapy and treatment adherence counseling. Access to and use of HIV medications is optimized by clinical pharmacy services. Patient navigation services assist clients with access to housing and other needs for support. In addition, collaboration with a community partner also makes substance abuse peer support available at the clinic. HHSC integrates prevention into all services to reduce client risk of HIV transmission. The clinic is supported by an active Client Advisory Council and a well-established network of HIV social services providers, and is an AIDS Education and Training Center site, training over 40 doctors, nurses, clinic administrators, quality directors and pharmacists each year. The clinic serves as a Practice Transformation Training site to mentor providers in rural FQHCs caring for clients living with HIV. Clients continue to be severely affected by poverty, lack of stable housing, and lack of adequate services to treat mental illness and substance abuse. The clinic also provides Hepatitis C assessment and treatment to the County's non-HIV Primary Care Patients. HHSC provides intensive onsite medical case management and housing case management to ensure clients who are homeless to secure access to housing resources (short and long term), identify barriers and develop strategies to empower clients to remain engaged in medical care and adherent to medications. Implementation of rapid antiretroviral therapy for newly diagnosed persons living with HIV diagnoses and intake coordination have been implemented in the HIV clinic to enhance engagement and retention in disenfranchised populations who struggle with social and health disparities. Engagement in health insurance of this vulnerable patient population who travel the state to be seen at this clinic is a critical component of the medical case management/eligibility specialist function embedded in the care delivery model of HIV clinic.

**Performance Measures**

Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer
Output	Number of unduplicated HIV Clinic clients.	1488	1,425	1,450	1,425
Outcome	Percent of HIV Clinic clients whose last viral load test is below 200 copies.	89%	95%	90%	90%

**Performance Measures Descriptions**

- 1) This measure shows how many unique clients were seen at the HIV Health Services Center during the fiscal year
- 2) This test measures how much virus is in the blood. Below 200 is a strong sign of individual health and also very low chance of transmitting HIV to others.

## 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) 10% cap on planning & administration, requiring the County to cover some administrative costs; and 3) 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
<b>Program Expenses</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>	<b>2020</b>
Personnel	\$1,058,165	\$2,857,912	\$976,304	\$3,162,174
Contractual Services	\$160,724	\$16,778	\$124,092	\$16,619
Materials & Supplies	\$56,565	\$265,627	\$115,163	\$140,749
Internal Services	\$176,769	\$1,004,139	\$113,154	\$1,079,866
<b>Total GF/non-GF</b>	<b>\$1,452,223</b>	<b>\$4,144,456</b>	<b>\$1,328,713</b>	<b>\$4,399,408</b>
<b>Program Total:</b>	<b>\$5,596,679</b>		<b>\$5,728,121</b>	
<b>Program FTE</b>	7.04	24.12	4.94	25.09

<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,997,636	\$0	\$2,827,202
Other / Miscellaneous	\$0	\$0	\$0	\$293,010
Service Charges	\$1,452,223	\$1,146,820	\$1,328,713	\$1,279,196
<b>Total Revenue</b>	<b>\$1,452,223</b>	<b>\$4,144,456</b>	<b>\$1,328,713</b>	<b>\$4,399,408</b>

## Explanation of Revenues

Ryan White Part A funds for 19-20: \$1,293,679 (Medical, Case management, Non medical case management and Housing)  
Ryan White Part D funds for 19-20: \$368,760 (Women, Children, Youth and IPV program)  
Ryan White Part F funds for 19-20: \$13,121 (OHSU dental referrals case management) and \$81,400. (AETC)  
Primary Care Grant (330) for FY 20: \$45,000.  
Primary Care HIV-Early Intervention: \$811,624  
Oregon Health Authority HIV Care: \$98,606. (OA/Case Management support)  
Oregon Health Authority Ryan White: \$115,000  
Medical Fees: \$2,607,909  
FOCUS Hepatitis C Foundation Grant 19-20: Hep C Primary Care Screening and Treatment: \$293,010

## Significant Program Changes

**Last Year this program was:** FY 2019: 40012-19 Services for Persons Living with HIV

This clinic is part of the State's Alternative Payment Methodology "APM" pilot (paid PM/PM fee to manage care of OHP patients). Beginning 07/01/2019 OHA will discontinue PM/PM payments for those clients who have not had a visit or "CareStep" (engagement with a non-billable provider such as a Community Health Worker) at the clinic in a 24 month period.

HIV Health Services Staffing was reduced by 1.13 FTE.