



Program #40012A - Services for Persons Living with HIV-Clinical Services 3/4/2020

Department: Health Department **Program Contact:** Tasha Wheatt-Delancy
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Requested
Related Programs: 40012B, 40010B
Program Characteristics: In Target

Executive Summary

The HIV Health Services Center (HHSC) provides community-based primary care and support services to 1,400 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 HHSC, the only Ryan White clinic in Oregon, serves over 1,400 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 & screening with referral to community resources, risk reduction support, medication-assisted therapy, and treatment adherence counseling. Access to and use of HIV medications are optimized by clinical pharmacy services. Patient navigation services assist clients with access to housing and other needs for support.

Also, 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 & a well-established network of HIV social services providers and is an AIDS Education and Training Center site, training > 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 use disorder. The clinic provides Programmatic oversight for the FOCUS Grant targeting universal screening, testing, and linkage to care for Hepatitis C in MC's FQHC Primary Care Clinic settings as well as STD & Harm Reduction programs HHSC continues to provide Hepatitis C assessment & 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 has 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 travels 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 the HIV clinic.

Performance Measures

Measure Type	Primary Measure	FY19 Actual	FY20 Budgeted	FY20 Estimate	FY21 Offer
Output	Number of unduplicated HIV Clinic clients.	1,450	1,450	1,398	1,425
Outcome	Percent of HIV Clinic clients whose last viral load test is below 200 copies.	90%	90%	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

	Adopted General Fund	Adopted Other Funds	Requested General Fund	Requested Other Funds
Program Expenses	2020	2020	2021	2021
Personnel	\$976,304	\$3,162,174	\$708,011	\$3,928,685
Contractual Services	\$124,092	\$16,619	\$0	\$153,328
Materials & Supplies	\$115,163	\$140,749	\$33,625	\$326,591
Internal Services	\$113,154	\$1,079,866	\$731,293	\$643,496
Total GF/non-GF	\$1,328,713	\$4,399,408	\$1,472,929	\$5,052,100
Program Total:	\$5,728,121		\$6,525,029	
Program FTE	4.94	25.09	6.52	25.74

Program Revenues				
Intergovernmental	\$0	\$2,827,202	\$0	\$3,292,097
Other / Miscellaneous	\$0	\$293,010	\$0	\$293,010
Service Charges	\$1,328,713	\$1,279,196	\$1,472,929	\$1,466,993
Total Revenue	\$1,328,713	\$4,399,408	\$1,472,929	\$5,052,100

Explanation of Revenues

This program generates \$493,663 in indirect revenues.

\$ 1,339,442 - Ryan White Part A funds for 20-21 (Medical, Case management, Non medical case management and Housing)

\$ 368,760 - Ryan White Part D funds for 20-21 (Women, Children, Youth)

\$ 13,120 - Ryan White Part F funds for 20-21 (OHSU dental referrals case management)

\$ 81,400 - AIDS Education & Training Center - Base (AETC)

\$ 212,000 - Federal Primary Care Grant (330) for FY 21

\$ 811,624 - Federal Ryan White Part C funds Primary Care HIV-Early Intervention

\$ 359,956 - OHA Ryan White

\$ 107,199 - Oregon Health Authority HIV Care (OA/Case Management support)

\$ 2,939,922 - Medical Fees projected

\$ 293,010 - FOCUS Hepatitis C Foundation Grant 20-21: Hep C Primary Care Screening and Treatment

Significant Program Changes

Last Year this program was: FY 2020: 40012A-20 Services for Persons Living with HIV-Clinical Services

Significant increase in HIV/HCV incidence in the homeless camp community which has impacted our program around deliverables, supporting our Rapid Antiretroviral Workflow demonstrating newly diagnosed clients are able to leave with HIV medications same day of their diagnosis and achieving HIV viral load suppression as quickly as 39 days from time of diagnosis.