Viral Suppression Rates of Medi-Cal Enrollees with HIV, 2017

The California Department of Health Care Services (DHCS) in collaboration with the California Department of Public Health (CDPH), Office of AIDS (OA), calculated the annual HIV viral load suppression indicator for the Medi-Cal population.

Sustained HIV viral suppression virtually eliminates HIV transmission to sexual partner(s), improves the health of people living with HIV, and is used as a marker for health care quality. The HIV viral load suppression indicator\(^1\) calculates the number and percentage of HIV-positive Medi-Cal beneficiaries 18 years of age and older who were virally suppressed, among those who had received a medical visit during calendar year (CY) 2017 and were confirmed to be HIV positive by CDPH HIV surveillance data.

For the 2017 data presented in this fact sheet, DHCS provided to OA a list of all Medi-Cal HIV-positive beneficiaries 18 years of age and older along with a variable indicating whether the patient received a medical visit during CY2017 and variables necessary for matching to CDPH's HIV surveillance data.

OA matched the Medi-Cal beneficiaries with HIV-positive individuals in the CDPH HIV surveillance system to confirm HIV infection and determine whether patients were virally suppressed.

### California Medi-Cal Continuum of HIV Care - 2017

- **Medi-Cal enrollees with HIV**: Medi-Cal data was matched to HIV surveillance cases using a probabilistic matching algorithm. Of the 85,764 Medi-Cal cases provided by DHCS, 52,158 (60.8 percent) matched to HIV surveillance cases.
- **In care**: Of the matched Medi-Cal enrollees with HIV, 47,960 (92.0 percent) cases had a medical visit during the year, including 88.2 percent who had at least one HIV care visit (defined as receipt of a CD4 or viral load laboratory test) and an additional 3.8 percent who

\(^1\) Specifications defined in the [Core Set of Adult Health Care Quality Measures for Medicaid (Adult Core Set) Technical Specifications and Resource Manual for Federal Fiscal Year 2018 Reporting](http://example.com).
only had evidence of a Medi-Cal visit (i.e., a Medi-Cal visit but no CD4 or viral load laboratory tests).

- **Virally suppressed**: Of the matched Medi-Cal enrollees with HIV, 38,715 were virally suppressed as determined by laboratory data indicating an HIV viral load of \( \leq 200 \text{ copies/ml} \). This represents 74.2 percent of Medi-Cal enrollees with HIV, and 80.7 percent of the Medi-Cal enrollees receiving care.

In 2017, of all adult Californians (18 years of age and older) living with HIV captured in HIV surveillance data, 74 percent were in HIV care and 63 percent achieved viral suppression. Among adult Californians living with HIV who were not enrolled in Medi-Cal, only 64 percent were in HIV care and 57 percent achieved viral suppression. Compared to adult persons living with HIV not enrolled in Medi-Cal, Medi-Cal enrollees with HIV were more likely to have received a medical visit and more likely to have achieved viral suppression, emphasizing the importance of continued access to quality health care for people living with HIV.

**Medi-Cal Viral Suppression Rates by Race**

Of the 52,158 matched Medi-Cal enrollees with HIV, 0.3 percent were American Indian/Alaska Native, 3.4 percent Asian\(^3\), 23.3 percent Black/African American, 37.1 percent Hispanic/Latinx, 0.2 percent Native Hawaiian/Pacific Islander, 31.5 percent White, and 4.1 percent multiple races.

![California Medi-Cal Continuum of HIV Care by Race/Ethnicity - 2017](image)

The percentage of Medi-Cal enrollees with HIV who were in care during CY2017 was similar among all racial/ethnic groups examined, ranging from 90 to 93 percent. In contrast, viral suppression rates varied, with Black/African American and multiracial Medi-Cal enrollees having the lowest viral suppression at 69.8 percent and 71.7 percent respectively. Asians had the highest viral suppression at 81.7 percent followed by Native Hawaiian/Pacific Islanders, American Indian/Alaska Natives,

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\(^2\) As reported in HIV surveillance data. There were 49 persons diagnosed and living with HIV in California with an unknown race/ethnicity who are not included in the graph.

\(^3\) Until 2003, Asian/Native Hawaiian/Pacific Islander was classified as a single category; therefore persons with race/ethnicity data only available prior to 2003 are classified as Asian because they cannot be disaggregated.
Hispanic/Latinxs, and Whites (81.6 percent, 76.0 percent, 75.7 percent, and 75.5 percent respectively).

For comparison statewide, American Indian/Alaska Natives, Black/African Americans, and Hispanic/Latinxs had the lowest levels of engagement in care in 2017 (67-71 percent) and were less likely than Native Hawaiian/Pacific Islanders, Whites, and Asians to be virally suppressed (55 percent, 56 percent, and 61 percent respectively, compared to 63 percent for Native Hawaiian/Pacific Islanders, 68 percent for Whites, and 70 percent for Asians).

Among adult Californians living with HIV not enrolled in Medi-Cal, engagement in care was significantly lower among all racial/ethnic groups, especially American Indian/Alaska Natives, Black/African Americans, and Hispanic/Latinxs (53-59 percent). Viral suppression ranged from 41 percent to 65 percent with the exception of multiracial persons, who achieved 72 percent viral suppression. American Indian/Alaska Natives, Black/African Americans, Native Hawaiian/Pacific Islanders, and Hispanic/Latinxs were less likely than Asians and Whites to be virally suppressed (41 percent, 44 percent, 51 percent, and 52 percent respectively, compared to 64 percent for Asians and 65 percent for Whites).

**Medi-Cal Viral Suppression Rates by Gender**

The majority of the 52,158 matched Medi-Cal enrollees with HIV were cisgender men (80.8 percent). Retention in care among the gender groups ranged from 88.2 percent to 92.4 percent. Cisgender men achieved a higher viral suppression (74.6 percent) followed by transgender women, cisgender women, and transgender men (73.6 percent, 72.7 percent, and 61.8 percent respectively).

The statewide viral suppression rate is lower than that of Medi-Cal enrollees. In 2017, adult transgender men and cisgender men had higher viral suppression (66 percent and 64 percent respectively)

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4 As reported in HIV surveillance data. Gender was determined as of the last day of the calendar year. Persons were classified as transgender if a case report form affirming their transgender status was present in HIV surveillance data.
respectively) compared to cisgender women and transgender women (60 percent and 59 percent respectively).

Among adult Californians living with HIV and not enrolled in Medi-Cal, viral suppression was higher among transgender men (64 percent) followed by cisgender men, cisgender women, and transgender women (58 percent, 47 percent, and 43 percent respectively).