

# HIV Care Branch Updates



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# HIV Care Program (HCP) Updates



## Local Health Jurisdictions

- Steady decline in need for RW-funded core medical services
- Increase in surveillance-based linkage to care and reengagement activities
- Increase in “care home” models for LHJs
- Reallocation of funds for vital support services
- Coordination of services within jurisdiction

## CDPH Office of AIDS

- Increased technical assistance to reallocate HCP funds toward needed support services (e.g., housing, non-medical case management, transportation, etc.)
- Revised progress reporting
- Value-added annual site monitoring/technical assistance
- Quality assurance (viral suppression, quality measures)
- Data-driven program planning

# HIV Care Program (HCP) Updates...cont'd

## Local Health Jurisdictions

- Tailored Partner Services
- 6-Month Recertification and Self-Verification Process

## CDPH Office of AIDS

- Increased collaboration across Care, Prevention, Surveillance and STD Branches
- Statewide statement of Need/Integrated Plan for 2016-2019
- New 3-year Contracts for 2016-2019
- CSTEP Training Contract 2016-2019
- Annual Ryan White Part B application due

# Core Medical Services Waiver

- OA HRSA waiver application not approved for 2015
    - Feedback: Strong but lacked an adequate implementation plan for reallocating core medical dollars
  - OA seeking further feedback from HRSA...we will apply again for 2016
  - Penalty for over spending in support services could be a reduction in future grant
  - In CA, ADAP expenditures are the only expenditures counting as core medical services. All other expenditures are support services (consortia)
  - OA closely monitoring core medical service expenditures to assess impact
- Needless to say...



# Minority AIDS Initiative (MAI) Updates

## Local Health Jurisdictions

- Increased collaboration with STD for access to disease investigator training
- Using surveillance data to reengage minority clients

## CDPH Office of AIDS

- Contract amendment to add some FY 2013 carryover funds (six MAI contractors who: historically spent funds; at least 40% HIV-positive minorities out of care and could spend in 2015)
- MAI quarterly TA calls
- Outreach enhancement to ARIES for MAI data ...now linkage of anonymous data with in care client

# AIDS Medi-Cal Waiver Program

## Providers



- Seeking increases in Medi-Cal reimbursement rates
- Participating in 1915c Waiver transition plan
- Providing input on the transition plan

## CDPH Office of AIDS

- OA and DHCS participating in waiver transition plan to comply with CMS home and community based services regulations
- 372 report with DHCS
- Increased collaboration with DHCS on oversight/TA and annual compliance reviews
- Increase clinical and behavioral health staff



# Ryan White Housing Subsidy Program

- Demonstration project
- Funded through RW funds reallocated from ADAP
- Increase minorities in care
- Increase housing stability for better care outcomes
- Increase housing services for shallow housing subsidy
- **Eligible clients** (HIV-positive, not in HOPWA, HCP CM, screened for comp. healthcare coverage, provide VL to CM 1x/year, be unstably housed)
- **Counties receiving funds** (San Joaquin, Tulare, Kern and Orange)



# Looking Ahead

- Integrated Plan will guide programming that raises the care continuum bars for CA
- Revisions to the Care formula
- Data-driven program planning and guidance

# Acknowledgements



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# Questions?