PRIORITY SETTING

For the Comprehensive Planning Committee
2022 Priority Setting Process

CHILD CARE

Intermittent child care services for the children living in the household of PLWH who are HRSA RWHAP-eligible clients for the purpose of enabling those clients to attend medical visits, related appointments, and/or HRSA RWHAP-related meetings, groups, or training sessions.

2017 Consumer Survey Data

- 10% said they needed child care and did not receive it in the last 12 months
- 4% used child care in the last 12 months

- This CAN include informal child care provided by neighbor, family friend, or another person (with understanding that there are restrictions on offering direct cash payments)
- Informal child care includes liability

HEALTH INSURANCE PREMIUM AND COST-SHARING ASSISTANCE

For purposes of this service category, health insurance also includes standalone dental insurance. The service provision consists of the following:

- Paying health insurance premiums to provide comprehensive HIV Outpatient/Ambulatory Health Services, and pharmacy benefits that provide a full range of HIV medications for eligible clients; and/or
- Paying standalone dental insurance premiums to provide comprehensive oral health care services for eligible clients; and/or
- Paying cost sharing on behalf of the client

2017 Consumer Survey Data

 10% said they didn't get medical care in the previous 12 months because they could not afford a co-pay/deductible

- In 2019, 11% of EMA PLWH were uninsured at any time
- A total of 75.8% of RWHAP live below 138% FPL (2019)

LINGUISTIC SERVICES

Linguistic Services provide interpretation and translation services, both oral and written, to eligible clients.

2017 Consumer Survey Data

4% reported not receiving a service in the last
 12 months due to language barriers

- Languages within the household (2019 EMA-wide)
 - 7.1% spoke Spanish
 - 5.9% spoke another Indo-European language
 - 3.7% spoke Asian and Pacific Island languages
 - 1.3% spoke another language at home.
 - Linguistic isolation for Asian and Pacific Island speaking households was highest, with 27.2% of these households being limited English-speaking.

NON-MEDICAL CASE MANAGEMENT

Non-Medical Case Management Services have as their objective providing coordination, guidance and assistance in improving access to and retention in needed medical and support services to mitigate and eliminate barriers to HIV care services, whereas Medical Case Management Services have as their objective improving health care outcomes.

WORTH NOTING

Non-Medical Case Management
 Services have as their objective
 providing guidance and assistance in
 improving access to needed services

REHABILITATION SERVICES

Rehabilitation Services provide HIV-related therapies intended to improve or maintain a client's quality of life and optimal capacity for self-care on an outpatient basis, and in accordance with an individualized plan of HIV care.

2017 Consumer Survey Data

- 11% reported using rehabilitation services in the previous 12 months
- 11% reported needing but not receiving rehabilitation services

- Program Guidance: Allowable activities include physical, occupational, speech, and vocational therapy
- Program Guidance: Rehabilitation services provided as part of inpatient hospital services, nursing homes, and other long-term care facilities are not allowable.

SUBSTANCE ABUSE SERVICES (RESIDENTIAL)

Substance Abuse Services (residential) activities are those provided for the treatment of drug or alcohol use disorders in a residential setting to include screening, assessment, diagnosis, and treatment of substance use disorder.

Allowable activities:

- Pretreatment/recovery readiness programs
- Harm reduction
- Behavioral health counseling associated with substance use disorder
- Medication assisted therapy
- Neuro-psychiatric pharmaceuticals
- Relapse prevention
- Detoxification, if offered in a separate licensed residential setting

2017 Consumer Survey Data

- 9% needed but didn't receive in the last 12 months
- 10% reported ever being diagnosed with substance use disorder

- HCV prevalence is high at 81% among HIV positive PWID (NHBS)
- There was a 151% increase in new HIV diagnoses in PWID between 2016 and 2019
- In 2020 (Philadelphia), there were 6,547 Medicaid beneficiaries with a primary diagnosis of SUD participating in residential rehabilitation services
- 24% of PLWH are in need of substance abuse treatment (CDC)
- 80% of PLWH screened positive for previous substance abuse (Philadelphia FIGHT)
- 75% screened positive for history of addiction (AIDS Care Group)

REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES

Referral for Health Care and Support Services directs a client to needed core medical or support services in person or through telephone, written, or other type of communication.

WORTH NOTING

Currently funds the CSU Health Information line