

PRIORITY SETTING

For the Comprehensive Planning Committee
2022 Priority Setting Process

LOCAL PHARMACEUTICAL ASSISTANCE

Local Pharmaceutical Assistance Program (LPAP) is operated by RWHAP Part A as a supplemental means of providing ongoing medication assistance when an HRSA RWHAP ADAP has a restricted formulary, waiting list and/or restricted financial eligibility criteria.

Recipients of LPAP funds must establish:

- Uniform benefits for all enrolled clients
- Recordkeeping system for medications
- LPAP advisory board
- Distribution system
- Client enrollment and rescreening at least every 6 months
- Coordination with Part B ADAP
- Accordance with HRSA 340B requirements

2017 Consumer Survey Data

- SPBP/ADDP: 28%
- Medicare Part D: 34%
- Patient Assistance: 7%
- Other Insurance: 7%
- Pay myself: 5%

WORTH NOTING

- **Program Guidance:** LPAP funds are not to be used for emergency or short-term financial assistance (this is for DEFA).
- Approximately 80% of RWHAP clients have insurance and about 65% are covered under Medicaid/Medicare
- Utilization has decreased because of increased efficiency for SPBP program application

MENTAL HEALTH

Mental Health Services are the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to clients living with HIV. Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by a mental health professional licensed or authorized within the state to render such services. Such professionals typically include psychiatrists, psychologists, and licensed clinical social workers.

2017 Consumer Survey Data

- 63.5% respondents reported having ever being diagnosed with at least one mental health disorder
- 31% reported using mental health services
- 10% reported needing but not receiving this service

WORTH NOTING

- Depression and anxiety is estimated to be fairly common among PLWH
 - *20% - 40% of PLWH are estimated to suffer from depression (American Psychiatric Association)*
 - *50% of PLWH screened positive for depression (Philadelphia FIGHT)*
 - *55% of PLWH screened positive for depression (AIDS Care Group)*

MEDICAL NUTRITION THERAPY

Key activities include:

- Nutrition assessment and screening
- Dietary/nutritional evaluation
- Food and/or nutritional supplements per medical provider's recommendation
- Nutrition education and/or counseling

These activities can be provided in individual and/or group settings and outside of HIV Outpatient/Ambulatory Health Services.

2017 Consumer Survey Data

- 10% reported needing **but NOT receiving** this service
- 48% respondents reported high blood pressure
- 30% respondents reported high cholesterol
- 19% respondents reported diabetes

WORTH NOTING:

- **Program Guidance:** All activities under service must be pursuant to a medical provider's referral. Activities not provided by a registered/licensed dietician should be consider *Psychosocial Support Services*
- May be a service with increased need as the population of PLWH ages, considering that over half of the EMA's PLWH are over 50 years old

SUBSTANCE ABUSE TREATMENT (OUTPATIENT)

Key activities include:

- Screening
- Assessment
- Diagnosis, and/or
- Treatment of substance use disorder, including:
 - *Pretreatment/recovery readiness programs*
 - *Harm reduction*
 - *Behavioral health counseling associated with substance use disorder*
 - *Outpatient drug-free treatment and counseling*
 - *Medication assisted therapy*
 - *Neuro-psychiatric pharmaceuticals*
 - *Relapse prevention*

2017 Consumer Survey Data

- 9% needed **but did NOT get** the treatment
- 13% used this service in the last 12 months
- 10% reported ever being diagnosed with substance use disorder

WORTH NOTING

- **Program Guidance:** Acupuncture therapy may be allowable under this service category if included in a documented plan
- **Program Guidance:** Syringe access services are allowable
- Addiction is estimated to be fairly common among PLWH
 - *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)*

EARLY INTERVENTION SERVICES

EIS is the combination of services rather than stand-alone:

- *Targeted HIV testing* to help the unaware learn of their HIV status and receive referral to HIV care and treatment services if found to be living with HIV
- *Referral services to improve HIV care and treatment services* at key points of entry
- *Access and linkage to HIV care and treatment services* such as HIV Outpatient/Ambulatory Health Services, Medical Case Management, and Substance Abuse Care
- *Outreach Services and Health Education/Risk Reduction* related to HIV diagnosis

WORTH NOTING

- HIV testing paid by EIS cannot supplant testing efforts paid by other sources
- There has been a 151% increase in new HIV diagnoses in PWID between 2016 and 2019
- 63% of EMA diagnoses were in Philadelphia
- Males, Black individuals/AA, Hispanic individuals, those over 40 years old, and MSM are more likely to be diagnosed late
- It is estimated that about 10% of PLWH within Philadelphia are unaware of their status (2019 data) – this 10% accounts for about 39% of new transmissions

HOME HEALTH CARE

Activities provided under Home Health Care must relate to the client's HIV disease and may include:

- Administration of prescribed therapeutics (e.g. intravenous and aerosolized treatment, and parenteral feeding)
- Preventive and specialty care
- Wound care
- Routine diagnostics testing administered in the home
- Other medical therapies

2017 Consumer Survey Data

- 11% reported using the service in the last 12 months
- 11% reported needing **but not receiving** in the last 12 months

WORTH NOTING

- **Program Guidance:** Limited to clients that are homebound; homebound does not include inpatient mental health / substance use treatment facilities
- According to 2020/2021 CSU data, Home Health Care was the least requested service
- May be a service with increased need as the population of PLWH ages, considering that over half of the EMA's PLWH are over 50 years old

HOME & COMMUNITY-BASED HEALTH SERVICES

Key activities include:

- Appropriate mental health, developmental, and rehabilitation services
- Day treatment or other partial hospitalization services
- Durable medical equipment
- Home health aide services and personal care services in the home

2017 Consumer Survey Data

- 11% reported using the service in the last 12 months
- 12% reported needing this service in the last 12 months

WORTH NOTING

- Over 50% of EMA's PLWH are 50+
- May be a service with increased need as the population of PLWH ages, considering that over half of the EMA's PLWH are over 50 years old

HOSPICE SERVICES

Services are only accessible to clients in the terminal stage of an HIV-related illness. Allowable services are:

- Mental health counseling
- Nursing care
- Palliative therapeutics
- Physician services
- Room and board

WORTH NOTING

- **Program Guidance:** May be provided in a home or other residential setting, including a non-acute care section of a hospital that has been designated and staffed to provide hospice services – does NOT extend to skilled nursing facilities or nursing homes
- May be a service with increased need as the population of PLWH ages, considering that over half of the EMA's PLWH are over 50 years old

EMERGENCY FINANCIAL ASSISTANCE (EFA)

- Emergency Financial Assistance provides limited one-time or short-term payments to assist an HRSA RWHAP client with an urgent need for essential items or services necessary to improve health outcomes, including: utilities, housing, food (including groceries and food vouchers), transportation, medication not covered by an AIDS Drug Assistance Program or AIDS Pharmaceutical Assistance, or another HRSA RWHAP-allowable cost needed to improve health outcomes.
- EFA must occur as a direct payment to an agency or through a voucher program.

2017 Consumer Survey Data

- 11% reported using the service in the last 12 months
- 17% reported needing **but NOT getting service** in the last 12 months

WORTH NOTING

- **Program Guidance:** EFA funds are used to pay for otherwise allowable HRSA RWHAP services and must be accounted for under the EFA category. Direct cash payments are NOT permitted.
- House costs and insecurity are a burden for PLWH with low/no income
- PLWH who live at or below 100% FPL (\$12,590 per individual) in the EMA by population:
 - *50% of MSM*
 - *45% of PWID*
 - *47% of Heterosexuals*
 - *61% of Transgender Individuals*