

Ryan White Program Utilization Summary: Core Services RW Year 34: March 1, 2024 - February 28, 2025



COUNTY OF LOS ANGELES
Public Health

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Agenda

- Core Services Overview
- Core Services Deep Dive Framework
- Core Services Expenditures
- Key Takeaways



Overview of Core Services



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Medical Care Coordination (MCC)
18 contracted sites

Addresses **patients' medical and non-medical needs through coordinated case management** to support continuous engagement in care and adherence to ART



Oral Health Care (OHC)
12 contracted sites

Provides **routine comprehensive oral health care**, including prevention, treatment, counseling, and education



Ambulatory Outpatient Medical (AOM)
18 contracted sites

Provides **comprehensive outpatient care** including primary medical care, HIV medication management, laboratory testing, counseling, nutrition education, case management, support groups, and access to specialized HIV treatment options



Mental Health (MH)
7 contracted sites

Provides **mental health assessment, treatment planning and provision**



Home-Based Case Management (HBCM)
5 contracted sites

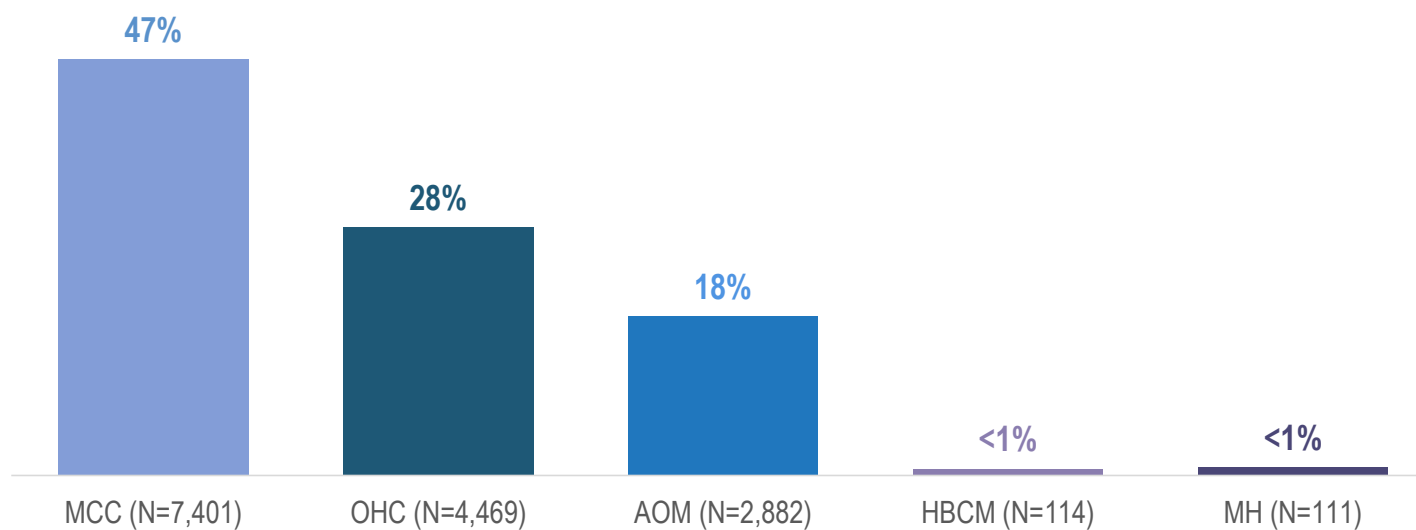
Provides **client-centered case management and social work activities, focusing on care for PLWH who are functionally impaired and require intensive home and/or community-based care**

Medical Care Coordination (MCC) was the most highly used core service in Year 34.



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Utilization of RWP Core Services, Year 34
(Total RWP clients N=15,843)



RWP Year 34: Core Service Category Deep Dive Framework & Discussion



Overall Service Utilization and Expenditure Summary	<ul style="list-style-type: none">• Client Served• Service Units (Total and Per Client)• Expenditures (Total and Per Client)	
Client Demographics	<ul style="list-style-type: none">• Gender• Race• Age	
Priority Population Engagement	<ul style="list-style-type: none">• Latinx MSM• Black/AA MSM• Age ≥ 50 years• Age 13-29 clients	<ul style="list-style-type: none">• Women of color• Transgender Clients• PWID• Unhoused < 12 months
Health Determinants	<ul style="list-style-type: none">• Primary language• Income• Primary insurance	<ul style="list-style-type: none">• Housing status• Incarceration history
HIV Care Continuum Outcomes	<ul style="list-style-type: none">• Engaged in Care• Retained in Care• Suppressed Viral Load	

Ambulatory Outpatient Medical (AOM)

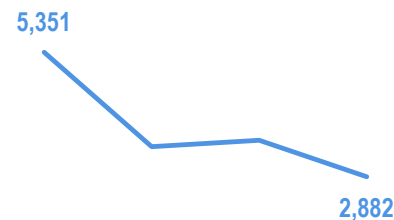
↓ 20% reduction in service utilization in Year 34 compared to Year 33

↓ 31% reduction in expenditures in Year 34 compared to Year 33



- A total of **2,882 unique clients** received AOM services, which represent almost a fifth (18%) of RWP clients.
- There was an **overall decline in AOM utilization over the last couple of years** largely due to DHS agencies departure from RWP and partially due to Medi-Cal expansion.

AOM Clients



AOM Expenditures



Yr 31 Yr 32 Yr 33 Yr 34

YR 31 YR 32 YR 33 YR 34

AOM Service Utilization & Expenditures Summary, Year 34



Service Category	Unique Clients Served	Service Unit(s)	Total Service Units	Units Per Client	Expenditures	Expenditures per client
AOM	2,882	Visits/ Procedures	n/a	n/a	\$5,183,652	\$1,799
Fee for Service	2,882	Visits	7,480	3	\$3,417,295	\$1,186
Supplemental AOM Procedures	2,639	Procedures	53,157	20	\$1,257,972	\$477
Medical Subspecialty*					\$508,385	

Funding Source:

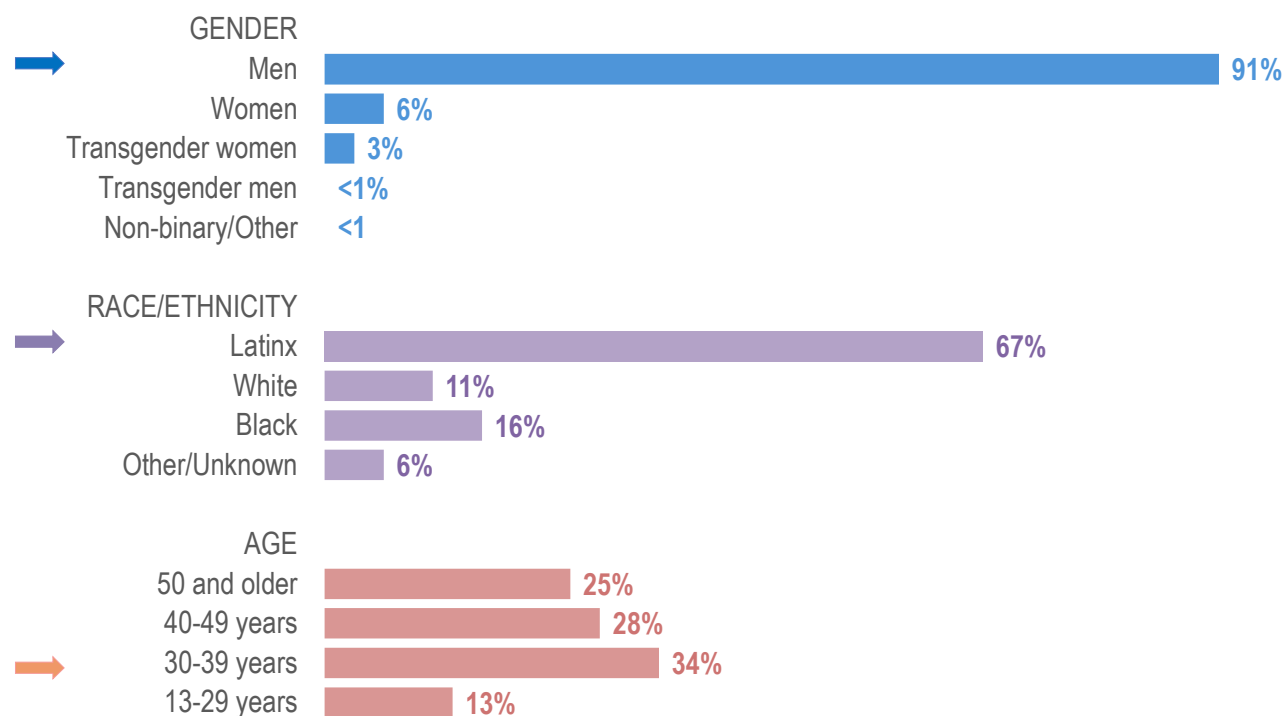
- RWP Part A - \$4,949,495
- HIV NCC - \$234,157

*No data in CaseWatch

AOM clients were predominantly cisgender men, Latinx and people aged 30-39 years old.



AOM Client Demographics, Year 34 (N=2,882)

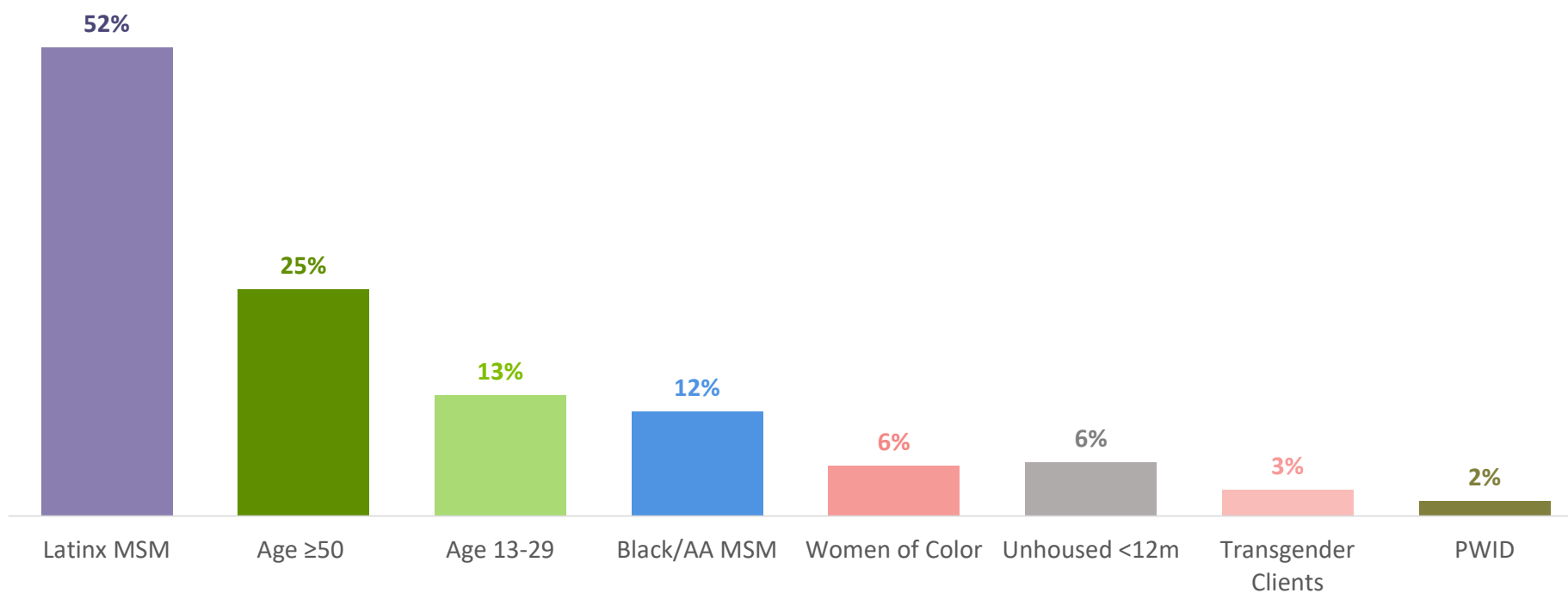


AOM services are reaching clients in LAC priority populations*



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- **Latinx MSM** clients represented the **largest percentage of AOM clients**
- Clients **age ≥ 50** represented a **quarter of AOM clients**

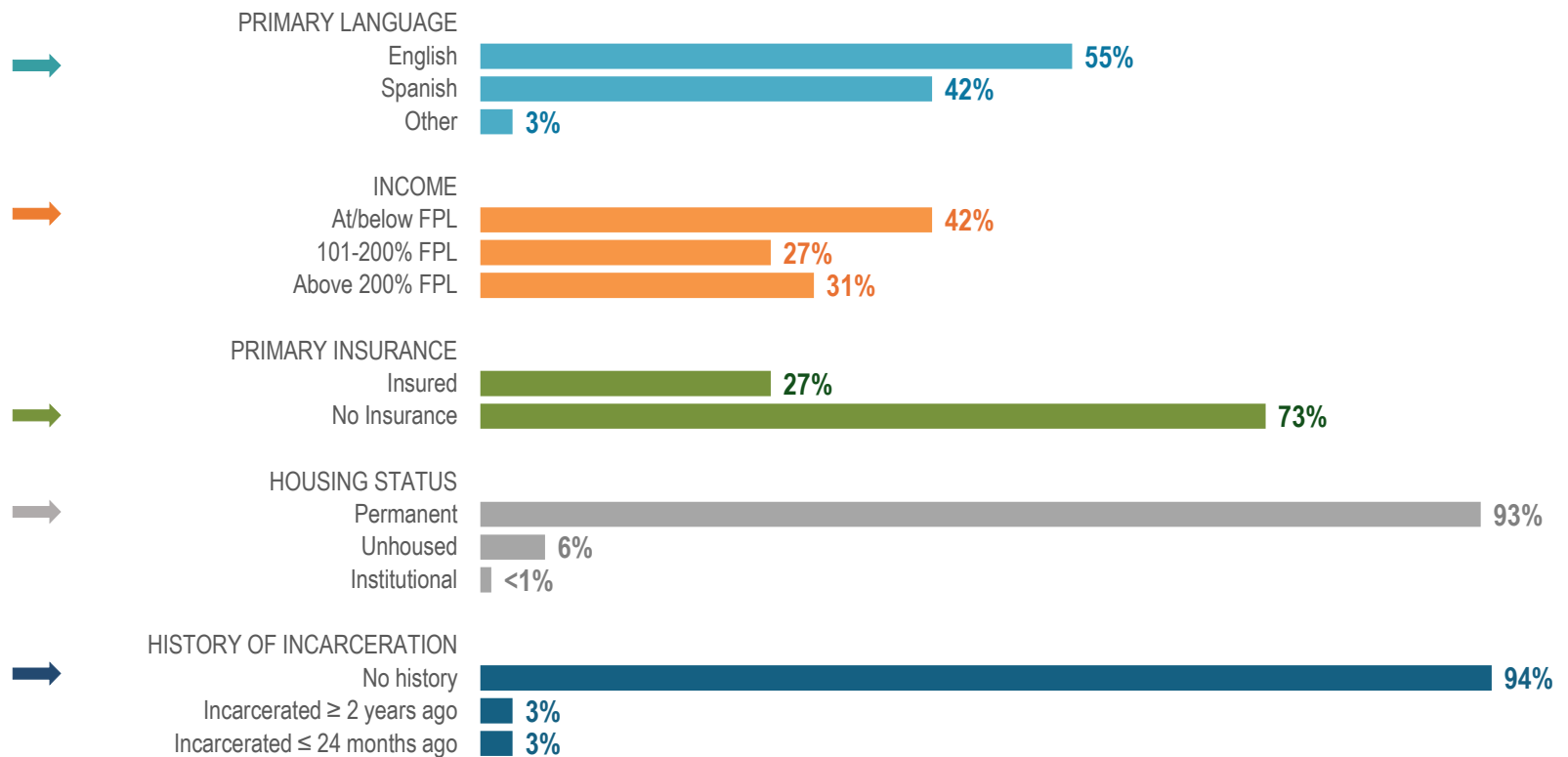


*Priority population groups are not mutually exclusive, they overlap.

Most AOM clients predominantly spoke English, lived at/below FPL, permanently housed, and no insurance or incarceration history.



AOM Client Health Determinants, Year 34 (N=2,882)





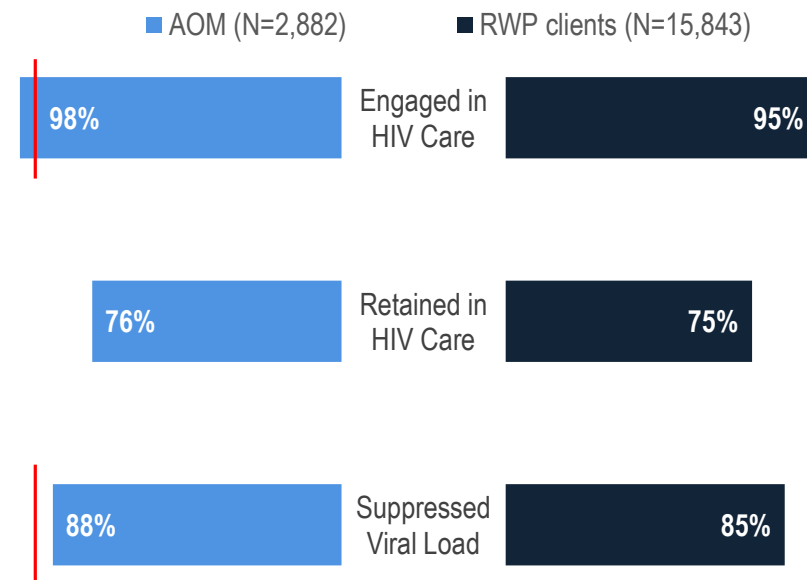
Overall, AOM Clients had better HIV care outcomes attainment compared to RWP clients

- Engagement^a, retention in care^b, and viral load suppression^c percentages were higher for AOM clients compared to RWP clients overall, Year 34.
- AOM clients did not meet the EHE target of 95% for viral suppression. However, they met the local target of 95% for engagement in care in Year 34.

^a**Engagement in Care** defined as 1 ≥ viral load, CD4 or genotype test reported in the 12-month period based on HIV laboratory data as of 5/5/2025

^b**Retention in care** defined as 2 ≥ viral load, CD4 or genotype test reported >30 days apart in the 12-month period based on HIV laboratory data as of 5/5/2025

^c**Viral suppression** defined as most recent viral load test <200 copies/mL in the 12-month period based on HIV laboratory data as of 5/5/2025



— 95% Target

Data source: HIV Casewatch as of 5/1/2025

Medical Care Coordination (MCC)

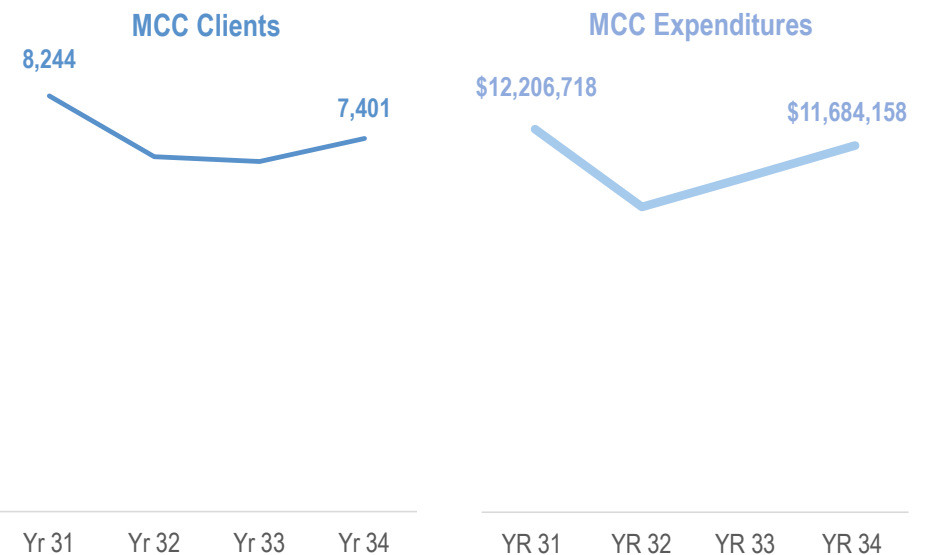
Highest utilized RWP service

↑ 7% increase in service utilization in Year 34 compared to Year 33

↑ 9% increase in expenditures in Year 34 compared to Year 33



- A total of **7,401 unique clients** received MCC services, which represent 47% of RWP clients.
- **MCC service utilization** in starting to **have an uptick in Year 34** compared to the previous 2 years.



MCC Service Utilization & Expenditures Summary, Year 34



Service Category	Unique Clients Served	Service Unit(s)	Total Service Units	Units Per Client	Expenditures	Expenditures per client
MCC	7,401	Hours	102,451	14	\$11,684,158	\$1,579

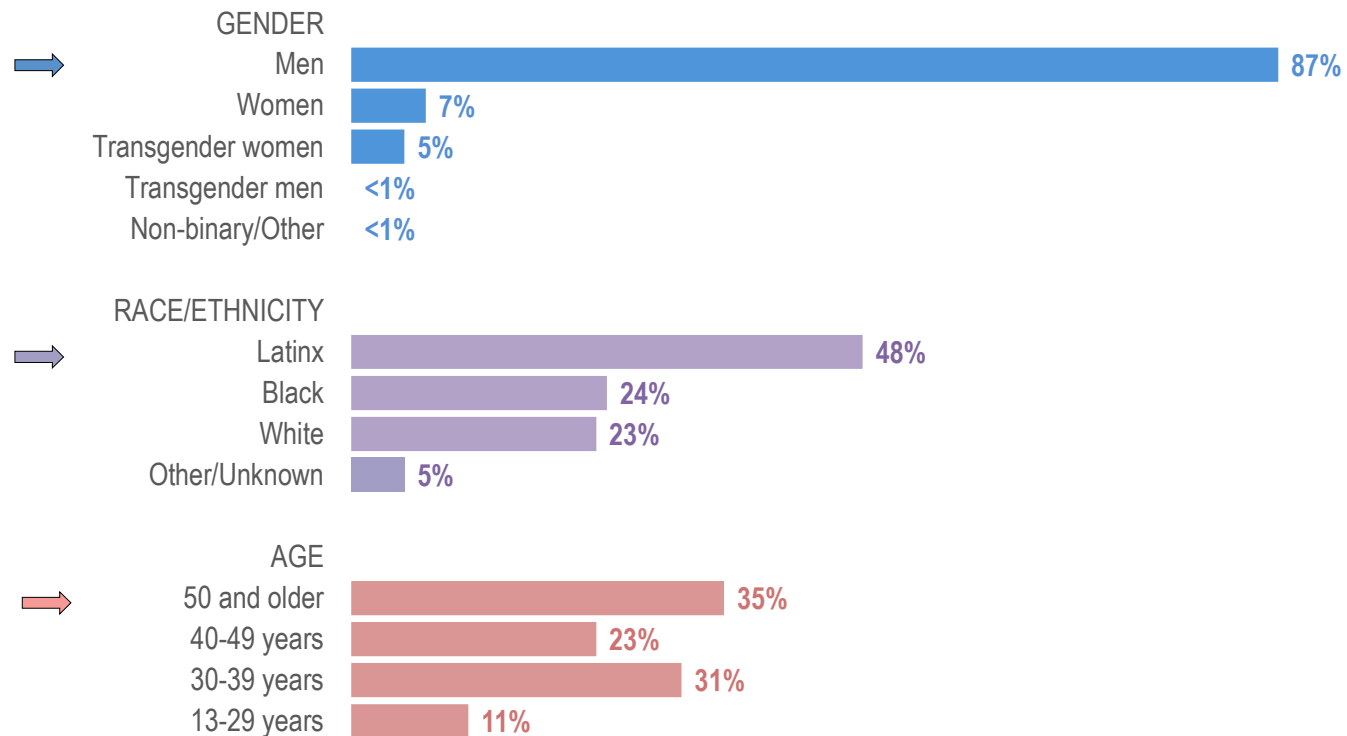
Funding Source:

- Part A - \$11,684,158

MCC clients were predominantly cisgender men, Latinx and people aged 50 and older.



MCC Client Demographics, Year 34 (N=7,401)

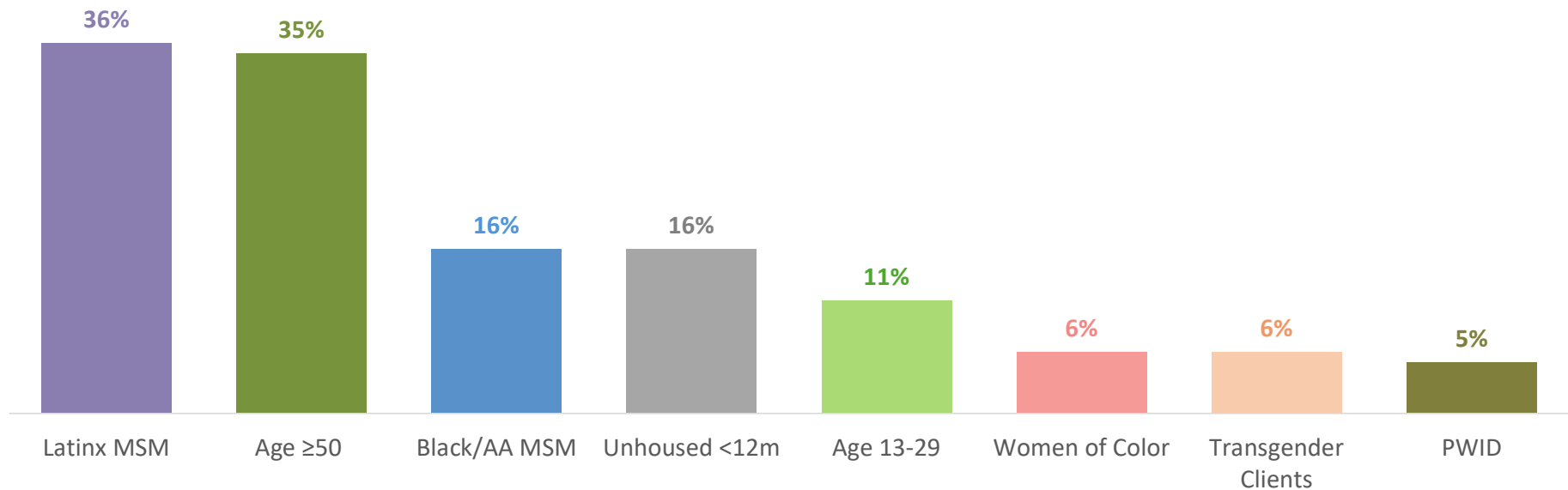


LAC Priority Populations Accessing the MCC Services*, Year 34



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- **Latinx MSM** clients represented the largest percentage
- **Clients age ≥ 50** represented over a third of all MCC clients

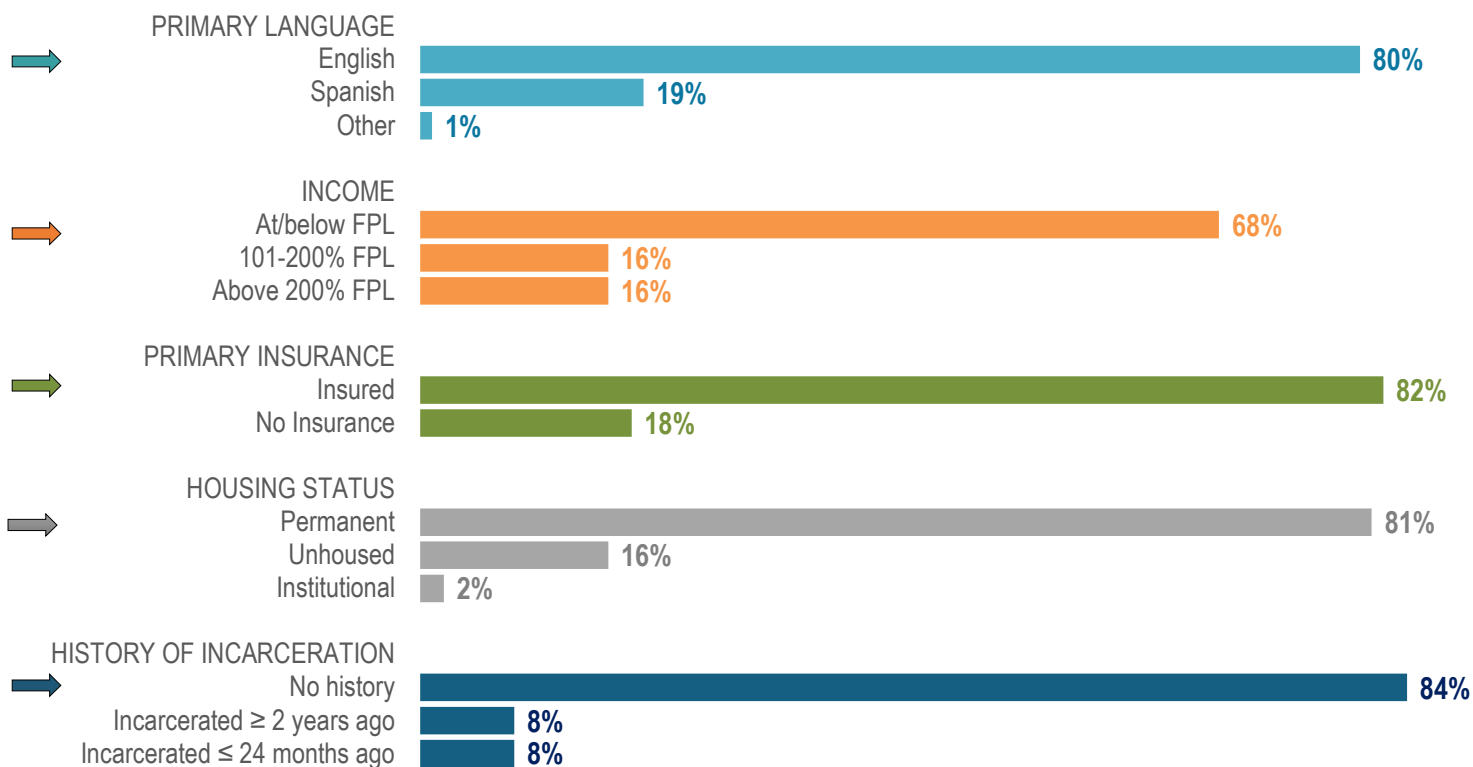


*Priority population groups are not mutually exclusive, they overlap.

Most of MCC clients spoke English, lived at or below FPL, permanently housed, and no history of incarceration.



MCC Client Health Determinants, Year 34 (N=7,401)



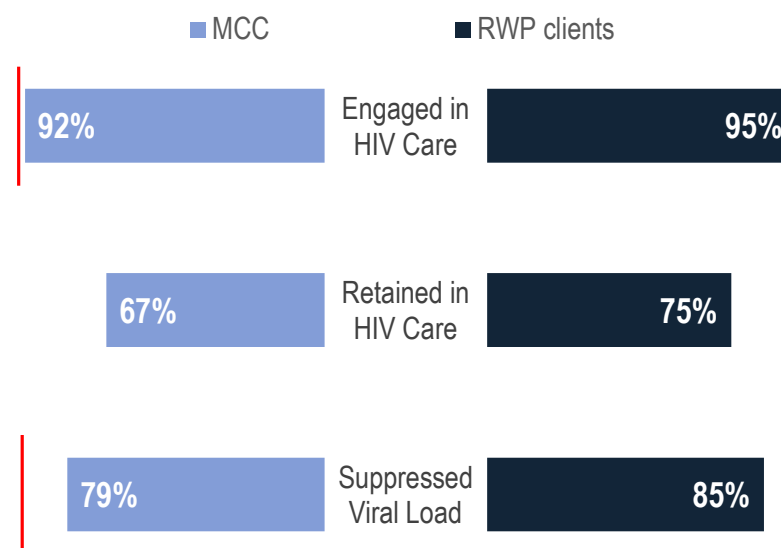
Overall, MCC clients had lower HIV care outcome attainment compared to RWP clients.



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- Engagement^a, retention^b, and viral load suppression^c percentages were lower for MCC clients compared to RWP clients overall, Year 34.

- MCC clients did not meet the EHE targets
 - MCC clients have more barriers than RWP overall



^a**Engagement in Care** defined as 1 ≥ viral load, CD4 or genotype test reported in the 12-month period based on HIV laboratory data as of 5/5/2025

^b**Retention in care** defined as 2 ≥ viral load, CD4 or genotype test reported >30 days apart in the 12-month period based on HIV laboratory data as of 5/5/2025

^c**Viral suppression** defined as most recent viral load test <200 copies/mL in the 12-month period based on HIV laboratory data as of 5/5/2025

95% Target

Data source: HIV Casewatch as of 5/1/2025

Oral Health Care (OHC)

Second highest utilized RWP service

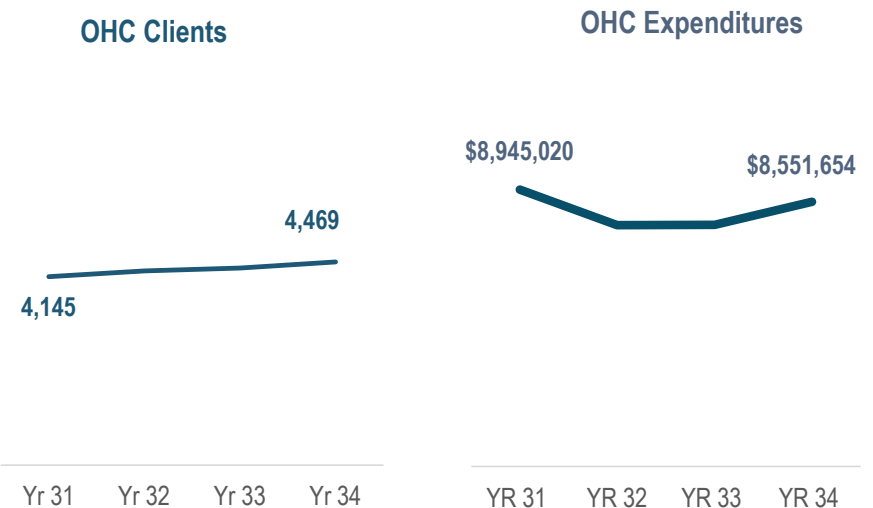
- ↑ 3% increase in service utilization in Year 34 compared to Year 33
- ↑ 10% increase in expenditures in Year 34 compared to Year 33



A total of **4,469 unique clients** received **Oral Health Care services** representing 28% of RWP clients.

- *General Oral Health* services were provided to **4,185** clients.
- *Specialty Oral Health* services were provided to **986** clients.

Oral Health Care utilization **increased** in the past 4 years.



Oral Health Care **Service Utilization** & **Expenditures** Summary, Year 34



Service Category	Unique Clients Served	Service Unit(s)	Total Service Units	Units Per Client	Expenditures	Expenditures per client
Oral Health	4,469	Procedures	49,240	11	\$8,551,671	\$1,914
General	4,185	Procedures	44,064	11	\$6,005,983	\$1478 \$136 per procedure
Specialty	986	Procedures	5,176	5	\$2,545,671	\$2,582 \$492 per procedure

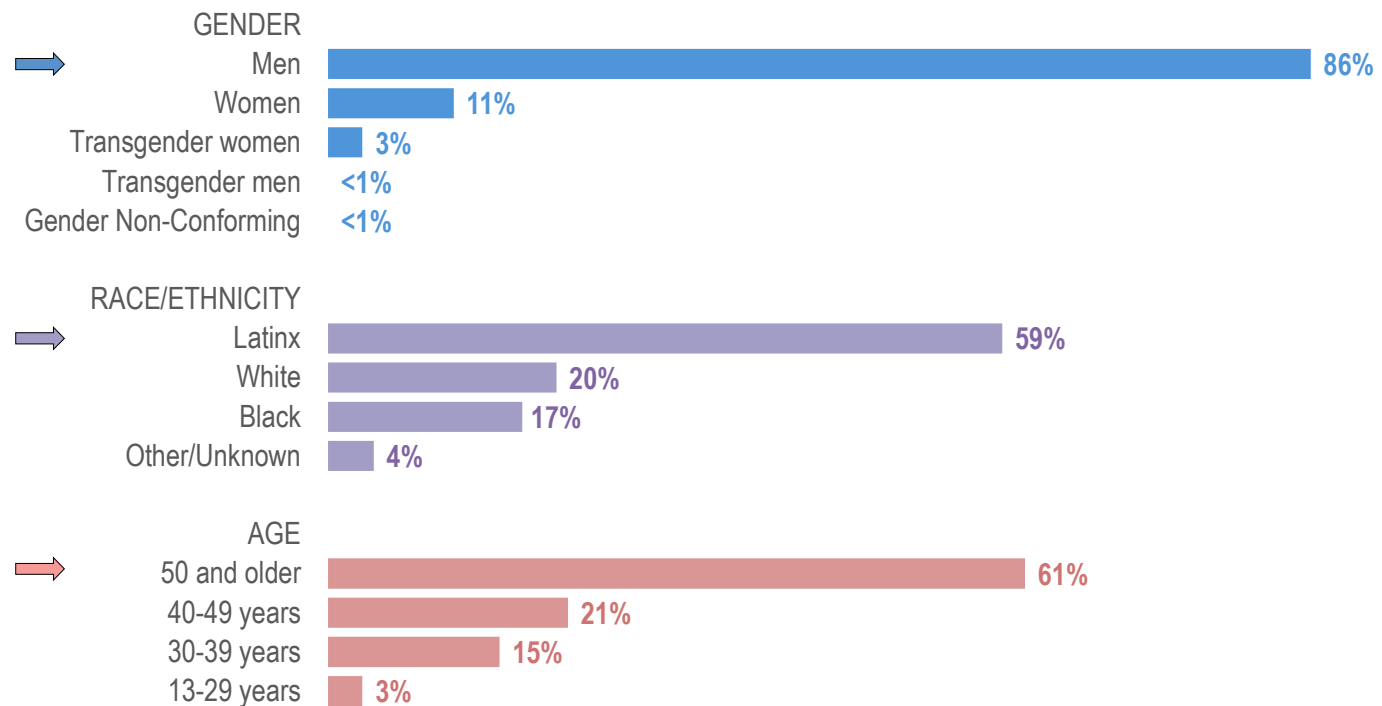
Funding Source:

- Part A - \$8,551,654

Oral Health Care clients were predominantly men, Latinx and people aged 50 and older.



Oral Health Care Client Demographics, Year 34 (N=4,469)

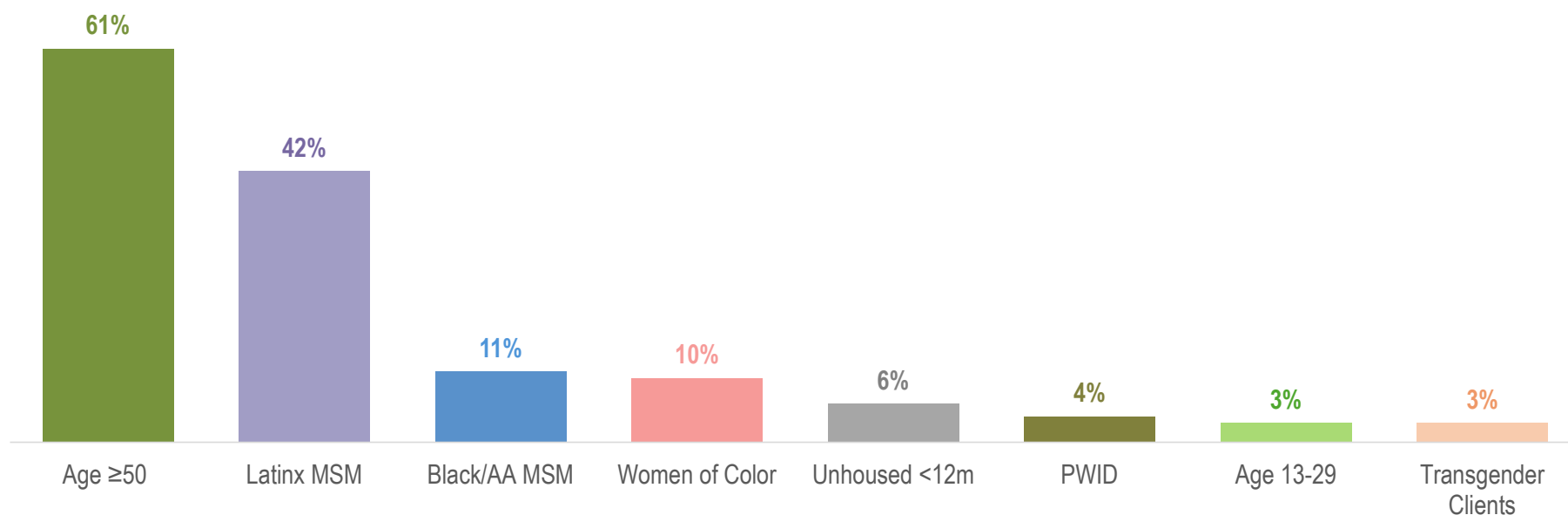


LAC Priority Populations Accessing the OHC Services*, Year 34



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- **Clients aged ≥ 50** represented the largest percentage of Oral Health Care clients
- **Latinx MSM clients** were the second largest population served by Oral Health Care
- Percentages for General and Specialty Oral Health Care look similar

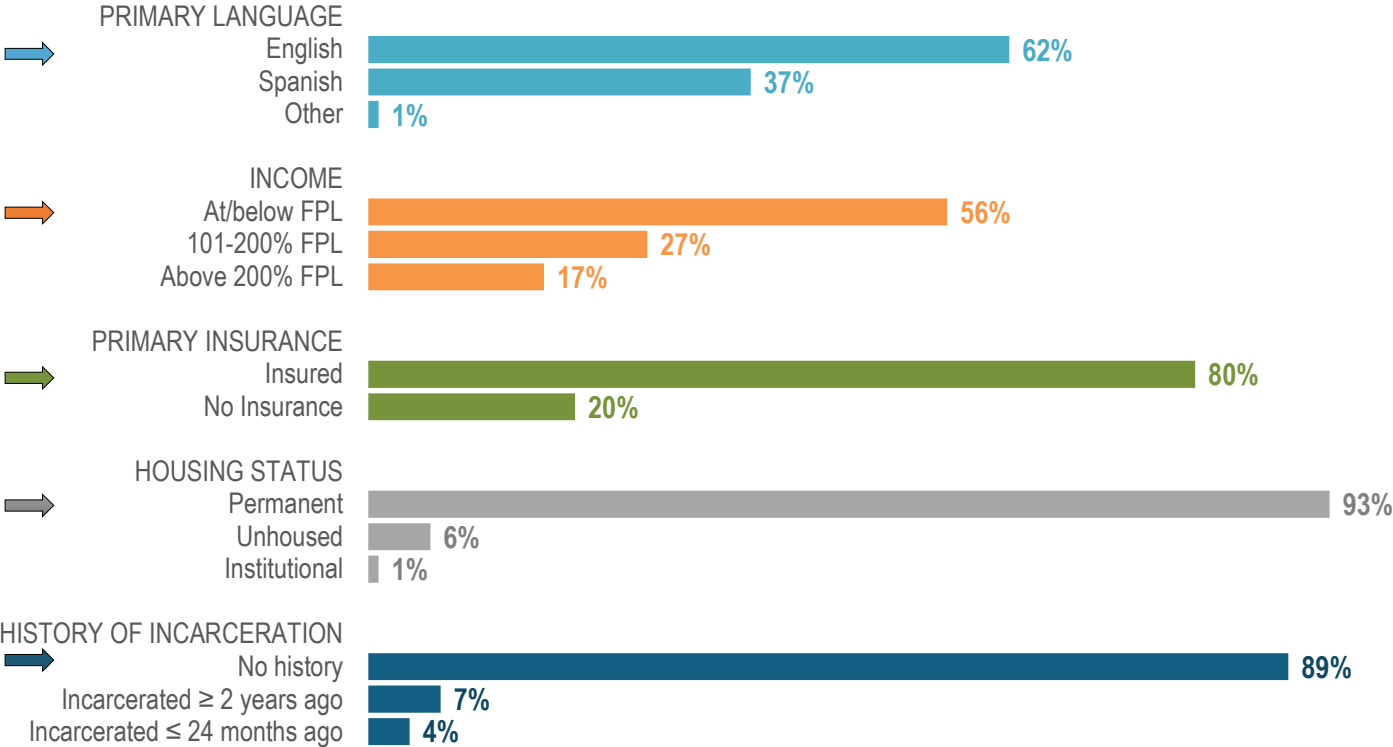


*Priority population groups are not mutually exclusive, they overlap.

Most Oral Health Care clients were English-speakers, lived at or below FPL, were insured, permanently housed, and no history of incarceration.



Oral Health Care Health Determinants, Year 34 (N=4,469)



HIV Care Continuum in Oral Health Care clients, Year 34, N=4,469



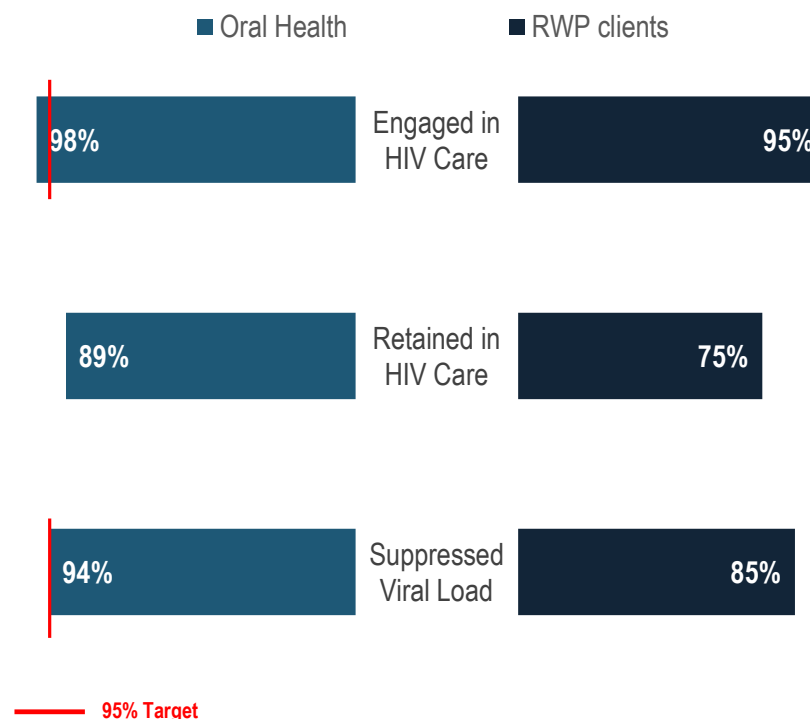
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- Engagement^a, retention in care^b, and viral load suppression^c percentages were higher for Oral Health Care clients compared to RWP clients overall, Year 34.
- Oral Health Care clients did not meet the EHE target of 95% for viral suppression. However, they met the local target of 95% for engagement in care.

^a**Engagement in Care** defined as 1 ≥ viral load, CD4 or genotype test reported in the 12-month period based on HIV laboratory data as of 5/5/2025

^b**Retention in care** defined as 2 ≥ viral load, CD4 or genotype test reported >30 days apart in the 12-month period based on HIV laboratory data as of 5/5/2025

^c**Viral suppression** defined as most recent viral load test <200 copies/mL in the 12-month period based on HIV laboratory data as of 5/5/2025



Data source: HIV Casewatch as of 5/1/2025

Home-Based Case Management (HBCM)

↓ 5% reduction in service utilization in Year 34 compared to Year 33

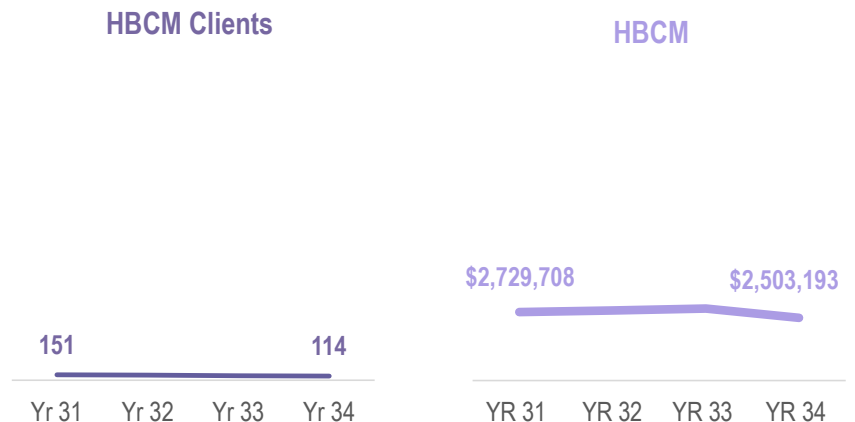
↓ 13% reduction in expenditures in Year 34 compared to Year 33



A total of **114 unique clients** received **HBCM services**, representing **<1% of RWP clients**.

- Attendant Care – 10 clients
- Case Management – 113 clients
- Equipment – 1 client
- Homemaker services – 67 clients
- Nutrition services – 26 clients
- Psychotherapy – 35 clients

HBCM utilization decreased in the past 4 years.



HBCM Service Utilization & Expenditures Summary, Year 34



- Homemaker subservice had the highest service utilization overall and per client.
- Case management had the highest expenditure overall and per client.

Service Category	Unique Clients Served	Service Unit(s)	Total Service Units	Units Per Client	Expenditures	Expenditures per client
HBCM	114	Various	32,640	286	\$2,503,193	\$21,958
Case Management	113	Hours	5,209	46	\$1,373,093	\$12,151
Homemaker	67	Hours	20,348	304	\$660,477	\$9,858
Attendant Care	10	Hours	2,037	204	\$96,202	\$9,620
Psychotherapy CM	35	Hours	851	24	\$102,163	\$2,919
Durable Medical Equipment	1	Medical Equipment	2	2	\$296	\$296
Nutrition	26	Nutritional Supplements	4,193	161	\$6,077	\$234

Funding Source:

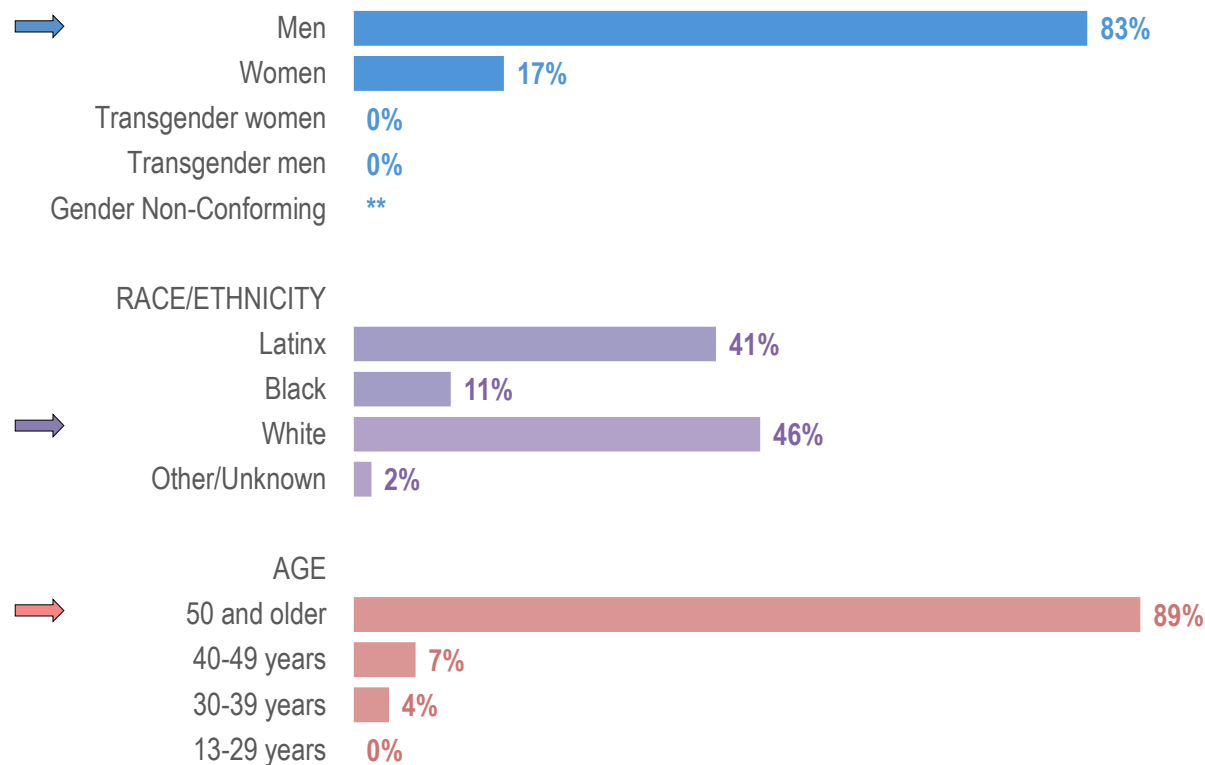
- Part A - \$1,670,226
- HIV NCC - \$832,967

* No information in CaseWatch; we distributed Administrative costs to all HBCM clients

HBCM clients were predominantly men, White and people aged 50 and older.



HBCM Client Demographics, Year 34 (N=114)

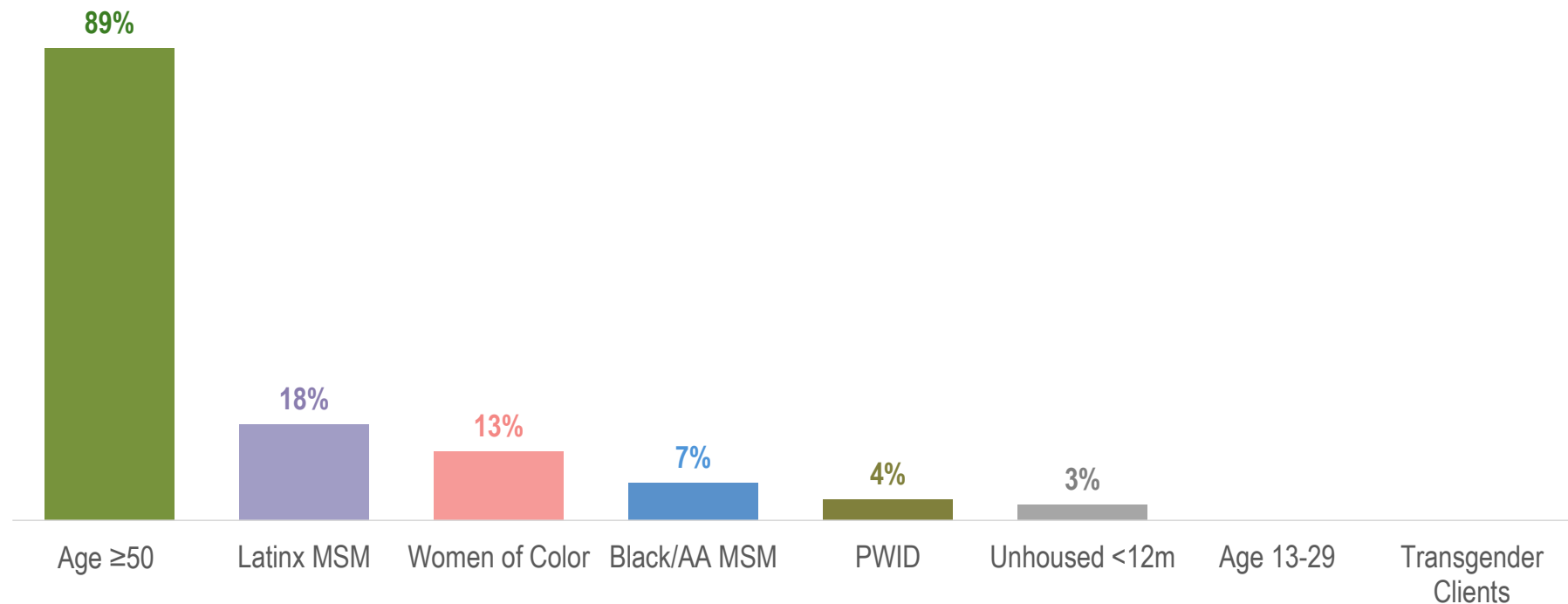


LAC Priority Populations Accessing HBCM Services*, Year 34



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- **Clients age ≥ 50** represented the majority of HBCM clients
- **Latinx MSM clients** were the next highest served by HBCM

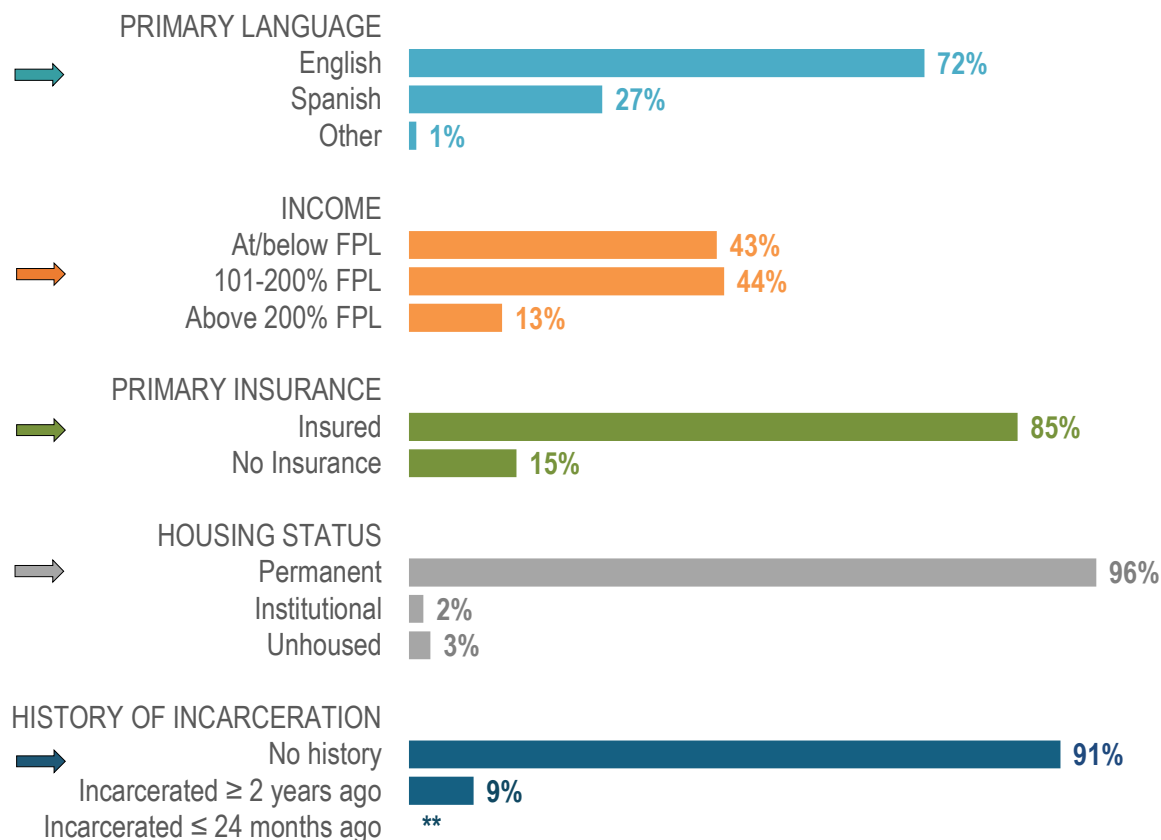


*Priority population groups are not mutually exclusive, they overlap.

Most HBCM clients were English-speakers, lived above FPL, insured, had permanent housing, and no history of incarceration.



HBCM Client Health Determinants, Year 34 (N=114)



HIV Care Continuum in HBCM clients, Year 34 (N=114)



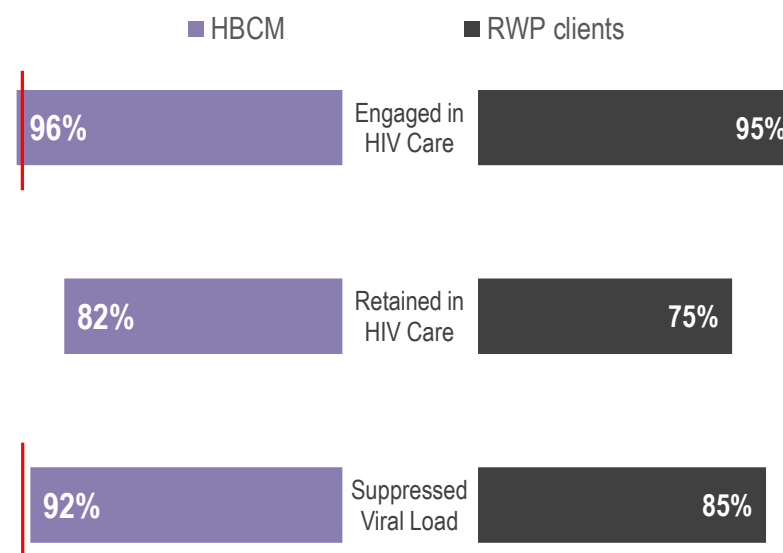
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- Engagement^a and retention in care^b, as well as viral load suppression^c percentages were higher for HBCM clients compared to RWP clients overall, Year 34.
- HBCM clients met the EHE targets for engagement in care.

^a**Engagement in Care** defined as 1 ≥ viral load, CD4 or genotype test reported in the 12-month period based on HIV laboratory data as of 5/5/2025

^b**Retention in care** defined as 2 ≥ viral load, CD4 or genotype test reported >30 days apart in the 12-month period based on HIV laboratory data as of 5/5/2025

^c**Viral suppression** defined as most recent viral load test <200 copies/mL in the 12-month period based on HIV laboratory data as of 5/5/2025



95% Target

Data source: HIV Casewatch as of 5/1/2025

Mental Health (MH) Services

- ↓ 5% reduction in service utilization in Year 34 compared to Year 33
- ↓ 13% reduction in expenditures in Year 34 compared to Year 33



A total of **111 unique clients** received **Mental Health services**, representing **<1% of RWP clients**.

MH utilization decreased in the past 4 years, likely due to a lack of providers within RWP.

MH Clients

MH



Mental Health Service Utilization & Expenditures Summary, Year 34



Service Category	Unique Clients Served	Service Unit(s)	Total Service Units	Units Per Client	Expenditures	Expenditures per client
Mental Health	111	Sessions	547	5	\$87,857	\$792

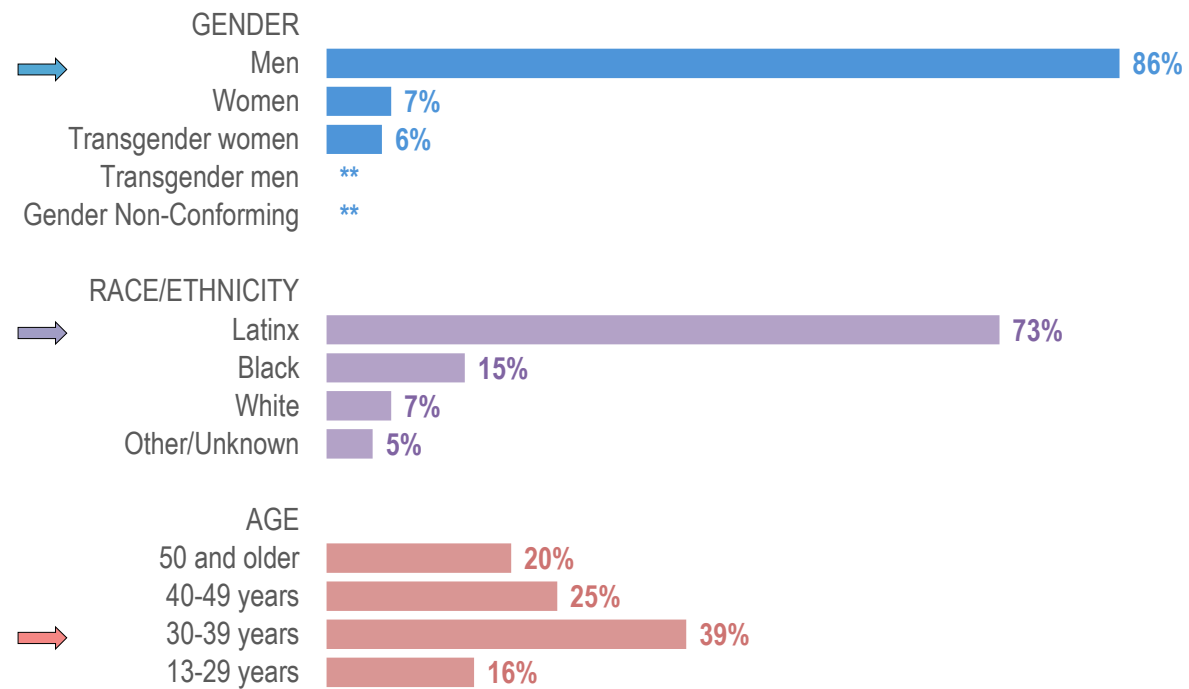
Funding Source:

- Part A - \$87,857

Mental Health Client were predominantly men, Latinx and aged 30-39 years.



Mental Health Client Demographics, Year 34 (N=111)

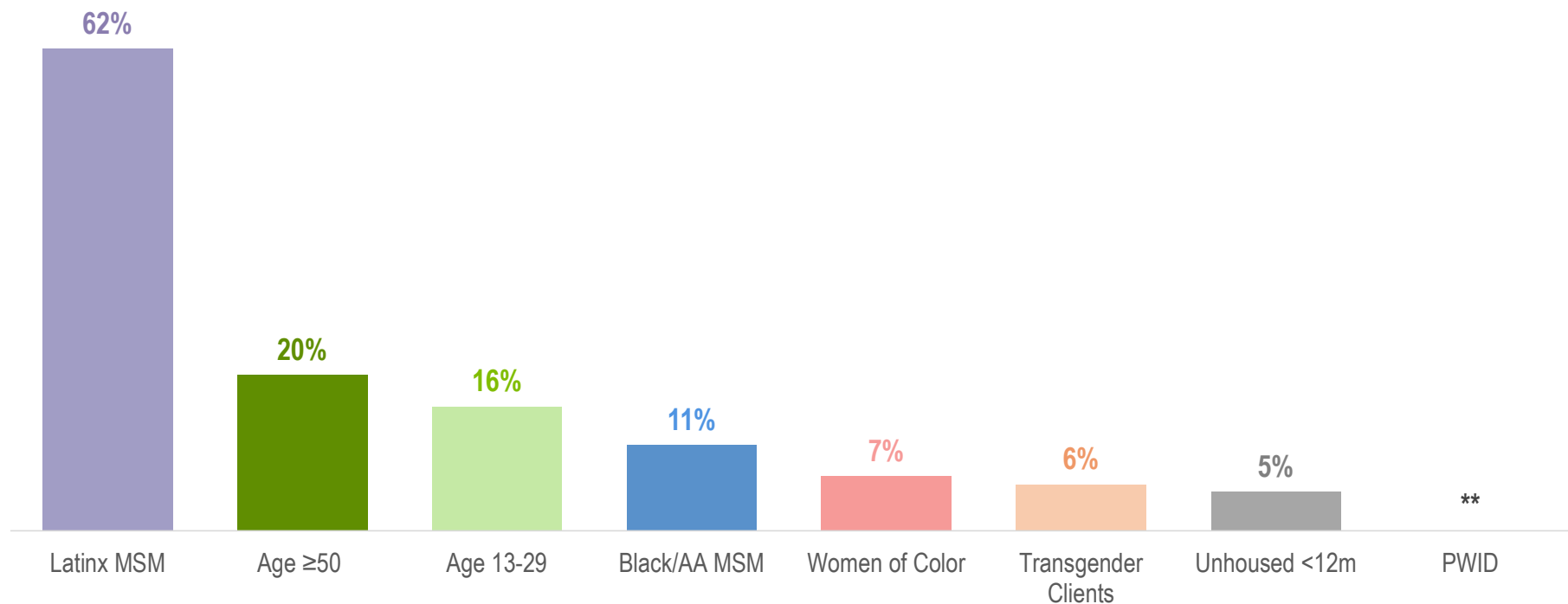


LAC Priority Populations Accessing Mental Health Services*, Year 34



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- **Latinx MSM clients** represented the majority of Mental Health clients
- **Clients age ≥ 50** were the next highest priority population served by Mental Health

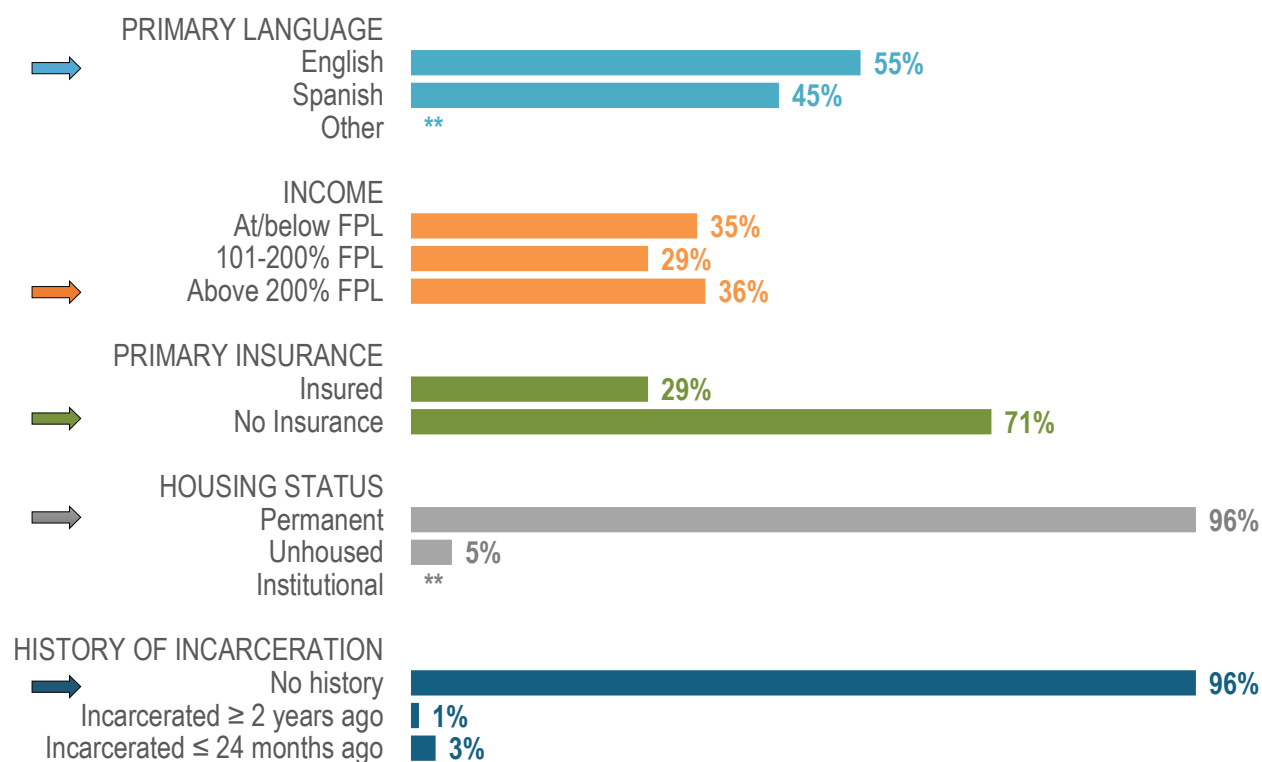


*Priority population groups are not mutually exclusive, they overlap.

MH clients were predominantly English speakers, had varied FPL, uninsured, permanently housed, and had no history of incarceration.



Mental Health Client Health Determinants, Year 34 (N=111)



HIV Care Continuum in Mental Health clients, Year 34 (N=111)



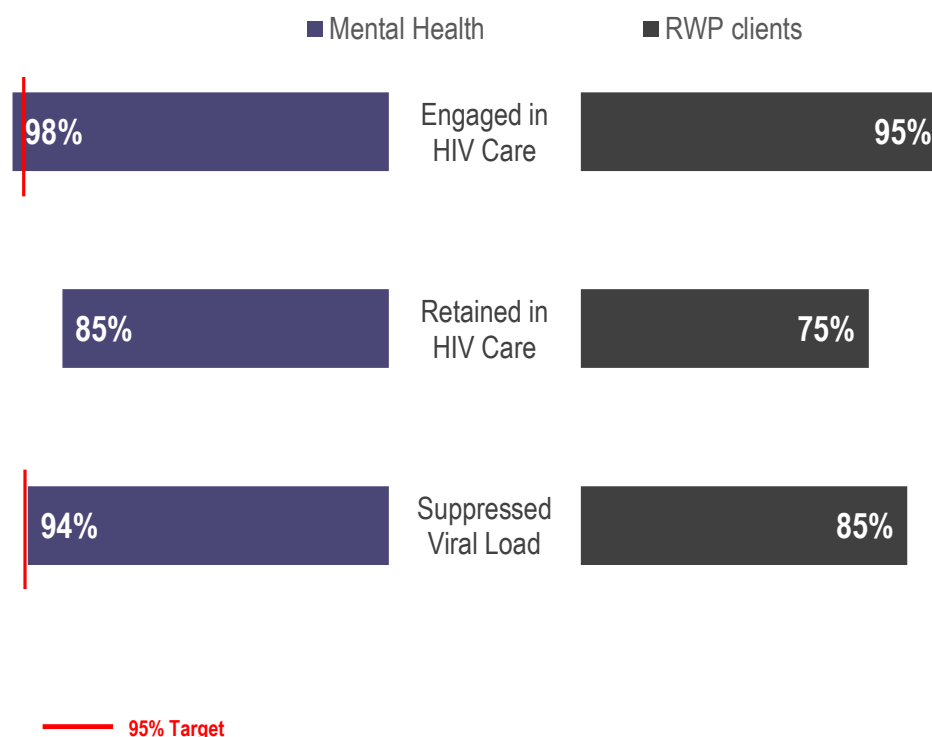
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- Engagement^a, retention in care^b, and viral load suppression^c percentages were higher for Mental Health clients compared to RWP clients overall, Year 34.
- Mental Health clients did not meet the EHE target of 95% for viral suppression. However, they met the local target of 95% for engagement in care.

^a**Engagement in Care** defined as 1 ≥ viral load, CD4 or genotype test reported in the 12-month period based on HIV laboratory data as of 5/5/2025

^b**Retention in care** defined as 2 ≥ viral load, CD4 or genotype test reported >30 days apart in the 12-month period based on HIV laboratory data as of 5/5/2025

^c**Viral suppression** defined as most recent viral load test <200 copies/mL in the 12-month period based on HIV laboratory data as of 5/5/2025



Data source: HIV Casewatch as of 5/1/2025

Core RWP Services Expenditures



AOM	\$5,183,652
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MCC	\$11,684,158
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Oral Health	\$8,551,654
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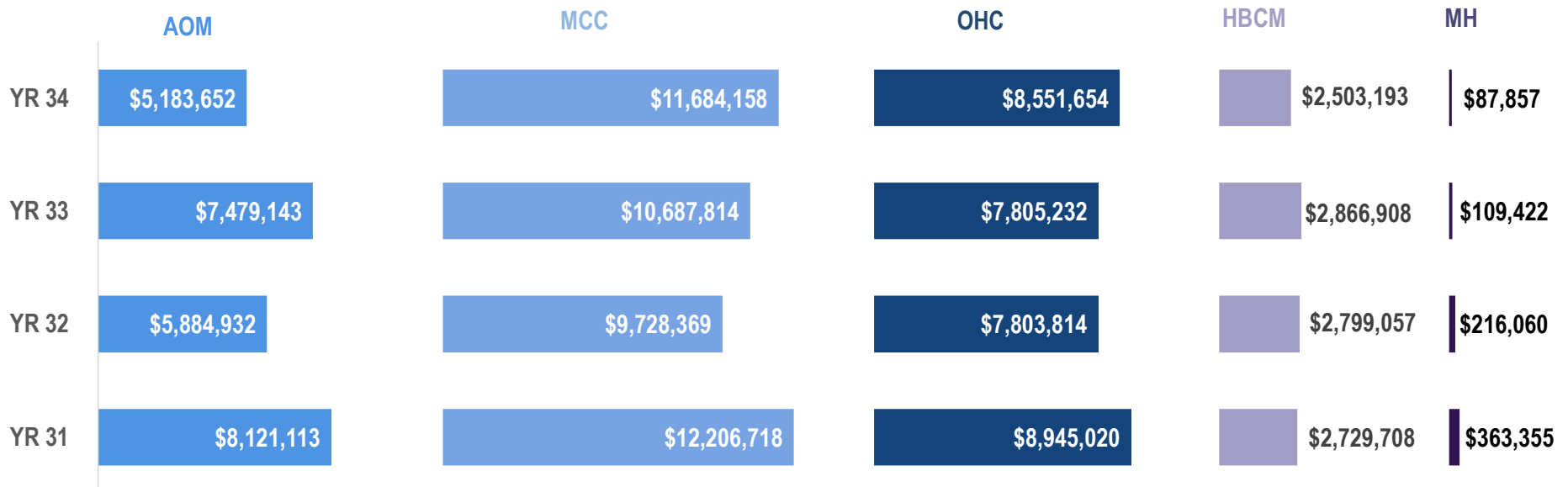
HBCM	\$2,503,193
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Mental Health	\$87,857
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Expenditures for Years 31-34 by Core Service Category



AOM, HBCM and Mental Health services expenditures generally decreased since Year 31 with the lowest in Year 34. Expenditures for Oral Health Care services gradually increased over four years. MCC expenditures varied, increased compared to Years 32-33.



Expenditures per Client for Core RWP Services, Year 34



- The **highest expenditures** per client were spent for **HBCM**.
- The **lowest expenditures** per client were spent for **MH**, followed by **AOM** services.

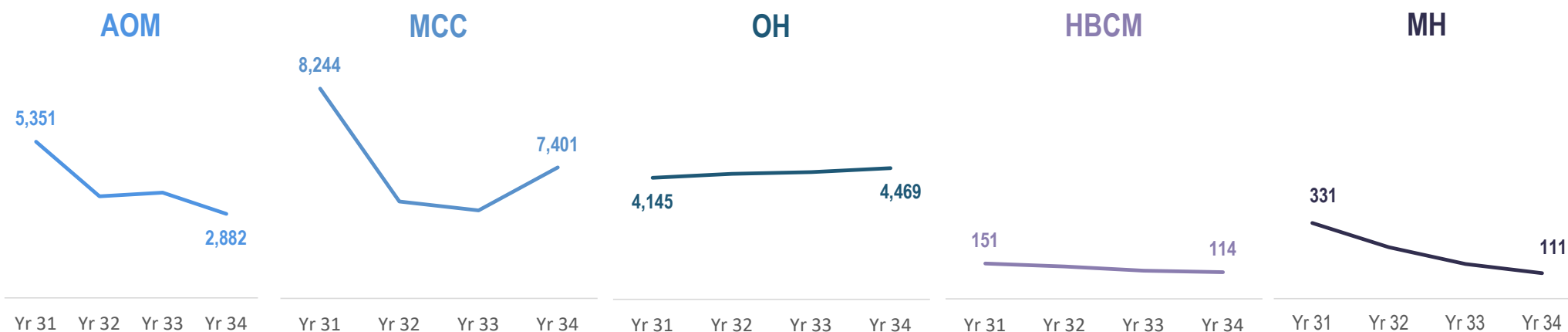
Service Category	Number of clients	% of RWP clients	Expenditures	% of total expenditures	Expenditures <u>per client</u>
<i>MCC</i>	7,401	47%	\$11,684,158	19%	\$1,579
<i>Oral Health</i>	4,469	28%	\$8,551,654	14%	\$1,914
<i>AOM</i>	2,882	18%	\$5,183,652	8%	\$1,187
<i>HBCM</i>	114	< 1%	\$2,503,193	4%	\$21,958
<i>Mental Health</i>	111	< 1%	\$87,857	<1%	\$792

Key Takeaways

- Core Services Utilization
- Client Demographics
- HCC Outcomes
- Expenditures



Core Service Utilization, Years 31-34



Core Service Category	Year 34 Service Utilization Impact	Reasons for Year 34 Impact
AOM	Decreased utilization	DHS departure, Medi-Cal expansion
MCC	Increased utilization	Most consistently utilized service.
OH	Increased Utilization	Recovery from COVID-19 pandemic drop in Year 30
HBCM	Decreased Utilization	Medi-Cal expansion
MH	Decreased Utilization	Lack of MH providers within RWP, Medi-Cal expansion

Key Takeaways: Client Demographics



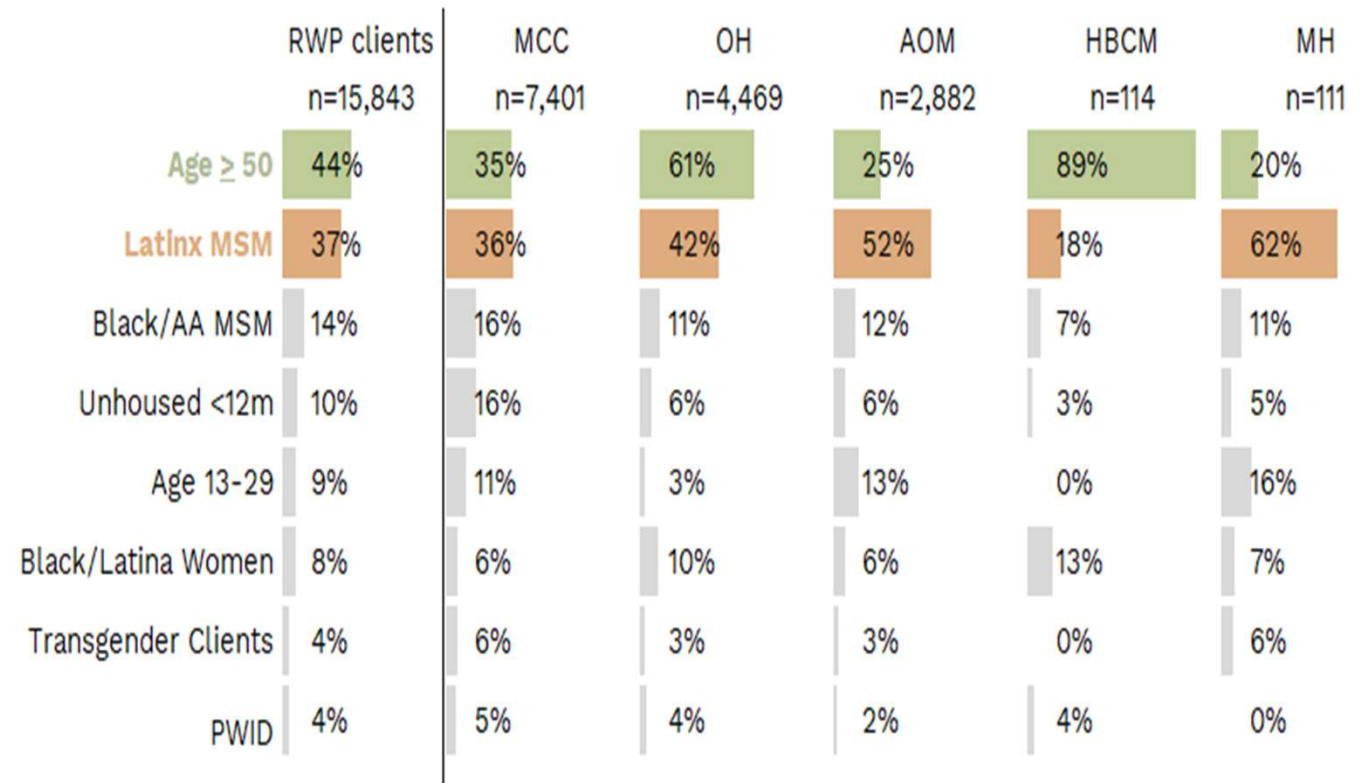
- Primarily **men** across all services.
- Proportionate representation of **Latinx** individuals;
 - except AOM and HBCM with relatively high percentage of white individuals.
- Age distribution varies by service category. However, for all Core services, except AOM, the highest percentage of client were **aged 50 and older**.

	RWP clients n=15,843	MCC n=7,401	OH n=4,469	AOM n=2,882	HBCM n=114	MH n=111
GENDER						
Men	86%	87%	86%	91%	83%	87%
Women	10%	7%	11%	6%	17%	7%
Transgender Women	4%	5%	3%	3%	0%	5%
Trangender Men	0%	<1%	<1%	<1%	0%	<1%
Non-binary/Other	0%	<1%	<1%	<1%	**	<1%
RACE/ETHNICITY						
Latinx	53%	48%	59%	25%	41%	48%
Black	23%	24%	17%	28%	11%	24%
White	21%	23%	20%	34%	46%	23%
Other/Unknown	5%	5%	4%	13%	2%	5%
AGE						
50 and older	44%	35%	61%	25%	90%	35%
40-49 years	22%	23%	21%	28%	7%	23%
30-39 years	25%	31%	15%	34%	4%	31%
13-29 years	9%	11%	3%	13%	0%	11%

Key Takeaways: Priority Population



- The top RWP Core services utilized by priority populations were **MCC**, **Oral Health**, and **AOM**.
- Core services utilization among LAC priority population was consistent relative to their size (larger population — higher utilization):
 - Latinx MSM** and **people aged ≥ 50 and older** were the **highest utilizers** of RWP Core services
 - RWP client **aged 50 and older** were the highest utilizers of **Oral Health** and **HBCM** services
 - Latinx MSM** were the highest utilizers of **AOM**, **MCC** and **MH** services
 - Lowest utilization** of RWP Core services was among **transgender people**, **PWID**, **unhoused** or **youth aged 13-29**, the smallest priority populations.

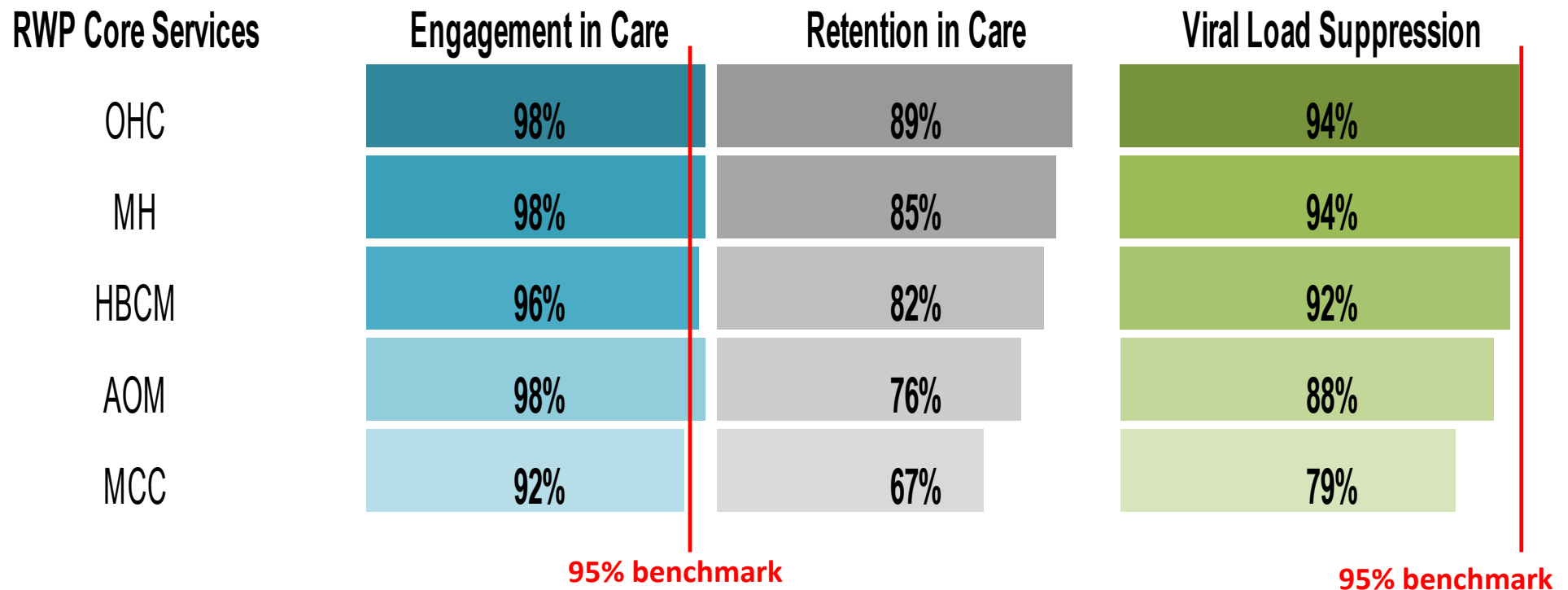


*Priority population groups are not mutually exclusive, clients may overlap

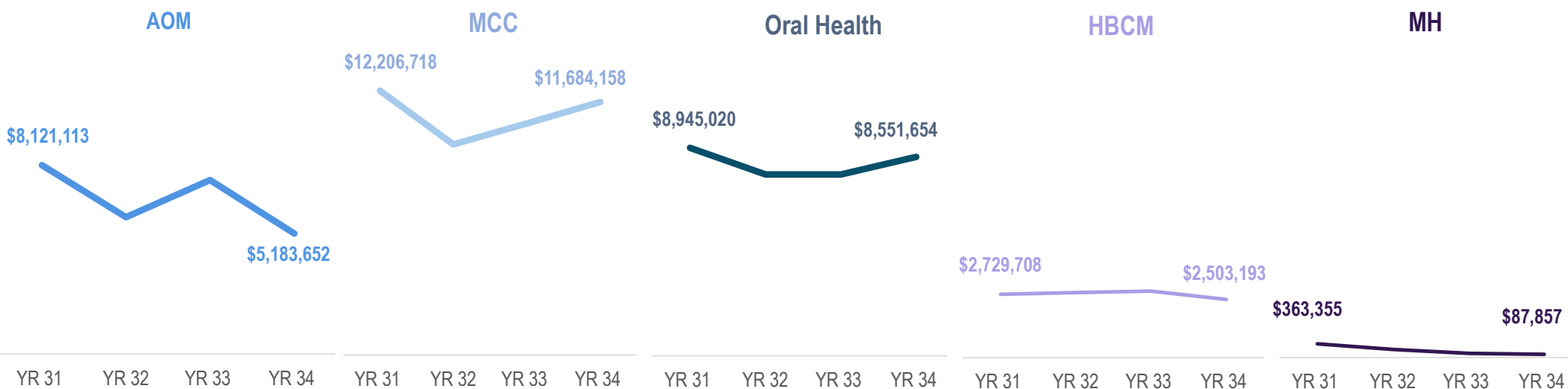
HIV Care Continuum Outcomes, Yr 34



Best outcomes were observed among RWP clients using OHC, HBCM, and MH services.



Key Takeaways - Expenditures



Core Service Category	Expenditures per Service	Expenditures per Clients	Reasons for Year 34 Changes
AOM	Decreased expenditures	Second lowest expenditures per client	Decrease in the number of clients served due to DHS departure and Medi-Cal expansion
MCC	Increased expenditures		Increase in number of clients; most consistently utilized service. Staffing.
OHC	Increased expenditures	Second highest expenditures per client	Recovery from COVID-19 pandemic drop in Year 30
HBCM	Decreased expenditures	Highest expenditures per clients	Decreased number of clients but not a significant decrease in expenditures in Year 34. Staffing.
MH	Decreased expenditures	Lowest expenditures per client	Decreased number of clients due to lack of MH providers within RWP. Medi-Cal expansion.

Next Steps



- Present to COH on the second of two major service clusters
 - Support Services (EFA, Housing, NMCM, Nutrition Support, LRP, Substance Use Residential)
- Examine detailed utilization of RWP services within each LAC priority populations
- Examine RWP by priority population over time



Questions/Discussion

Thank you!

- Acknowledgements
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