

ORAL HEALTH SERVICES GENERAL AND SPECIALTY ORAL CARE

BACKGROUND

As a Ryan White Program (RWP) Part A recipient, the Division of HIV and STD Programs (DHSP) at the Los Angeles County (LAC) Department of Public Health receives grant funds from the Health Resources and Services Administration HIV/AIDS Bureau (HRSA-HAB) to increase access to core medical and related support services for people living with HIV (PLWH)¹. The amount of the award is based on the number of PLWH residing in LAC. DHSP receives additional funding from HRSA-HAB to reduce disparities in health outcomes among persons of color living with HIV through the Minority AIDS Initiative (MAI) and discretionary funds from the LAC Department of Public Health (net county costs [NCC]). DHSP received a total of \$45.9 million from HRSA-HAB in fiscal year 2022 that included \$42.1 million for Part A and \$3.8 million for MAI.

HRSA-HAB and the Centers for Disease Control and Prevention (CDC) require that local HIV planning bodies develop integrated HIV prevention plans in collaboration with the health department to guide prevention and care efforts within the jurisdiction². HIV surveillance and supplemental surveillance along with program service data and unmet need estimates are used to identify priority populations of focus. In LAC, the populations of focus overlap with priority populations identified in the local “Ending the HIV Epidemic” strategic plan and shown in bold³. These include:

- 1. Latino Cisgender Men Who Have Sex with Men (MSM)**
- 2. Black Cisgender MSM**
- 3. Cisgender Women of Color**
- 4. Transgender Persons**
- 5. Youth Aged 13-29**
6. PLWH ≥ Age 50
- 7. Persons Who Inject Drugs (PWID)**
8. RWP Clients Who Were Unhoused

Though not identified as priority populations in the integrated or Ending the HIV Epidemic (EHE) plans, we include RWP clients 50 years of age and older and those experiencing homelessness as an important subpopulation living with HIV with need for RWP services in LAC.

¹ Ryan White HIV/AIDS Programs Parts & Initiatives. (2022). In ryanwhite.hrsa.gov. Retrieved July 20, 2023 from <https://ryanwhite.hrsa.gov/about/parts-and-initiatives>

² Integrated HIV Prevention and Care Plan Guidance, including the Statewide Coordinated Statement of Need, CY 2022-2026.(2021). In ryanwhite.hrsa.gov. Retrieved July 20, 2023 from <https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/integrated-hiv-dear-college-6-30-21.pdf>

³ Ending the HIV Epidemic Plan for Los Angeles. (2021). In lacounty.hiv. Retrieved July 19, 2023, from <https://www.lacounty.hiv/wp-content/uploads/2021/04/EHE-Plan-Final-2021.pdf>

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

This report series summarizes utilization of medical and support services by RWP clients in Contract Year 32 (March 1, 2022-February 28, 2023) to inform the planning and allocation activities of the LAC Commission on HIV (COH). To inform focused discussion, we will present services in the following service clusters:

1. Ambulatory Outpatient Medical (AOM) and Medical Care Coordination (MCC) services
2. Mental Health and Substance Abuse (Residential) services
3. Housing, Emergency Financial Assistance (EFA), and Nutrition Support (NS) services
- 4. General and Specialty Oral Health services**
5. Case Management (CM) Services: Benefits Specialty, Transitional CM- Jails, Home-Based CM and the Linkage and Re-Engagement (LRP)

The data presented is intended to provide priority highlights of who is accessing RWP services in LAC (demographic and socio-economic characteristics, priority populations), the types of services accessed, funding sources, and how these services are delivered (in-person or telehealth). The detailed source tables are included in the appendix for reference.

Outcomes and Indicators

The following information will be used to describe service utilization and estimate expenditures. Each of the five service clusters will include:

- HIV Care Continuum Outcomes (engagement in care, retention in care (RiC) and viral suppression (VS) among priority populations:
 - Engagement in HIV care = ≤ 1 viral load or CD4 test in the contract year
 - Retention in HIV care = ≤ 2 viral load or CD4 tests at least 90 days apart in the contract year
 - Viral suppression =Most recent viral load test < 200 copies/mL in the contract year
- RWP service utilization and expenditure indicators by service category:
 - Total service units=Number of service units paid for by DHSP in the reporting period. *Service units vary by service category and may include visits, hours, procedures, days, or sessions*
 - Service units per client=Total service units/Number of clients
 - Total Expenditure= Total dollar amount paid by DHSP in the reporting period
 - Expenditures per Client= Total Expenditure/Number of clients

DATA SOURCES

- HIV Casewatch (local RWP data reporting system)
 - Client characteristics and service utilization data reported by RWP contracted service agencies
 - Data are manually entered or submitted through electronic data transfer
- Linkage Re-engagement Program (ACCESS Database)
- eHARS (HIV surveillance data system)
- DHSP Expenditure Reports

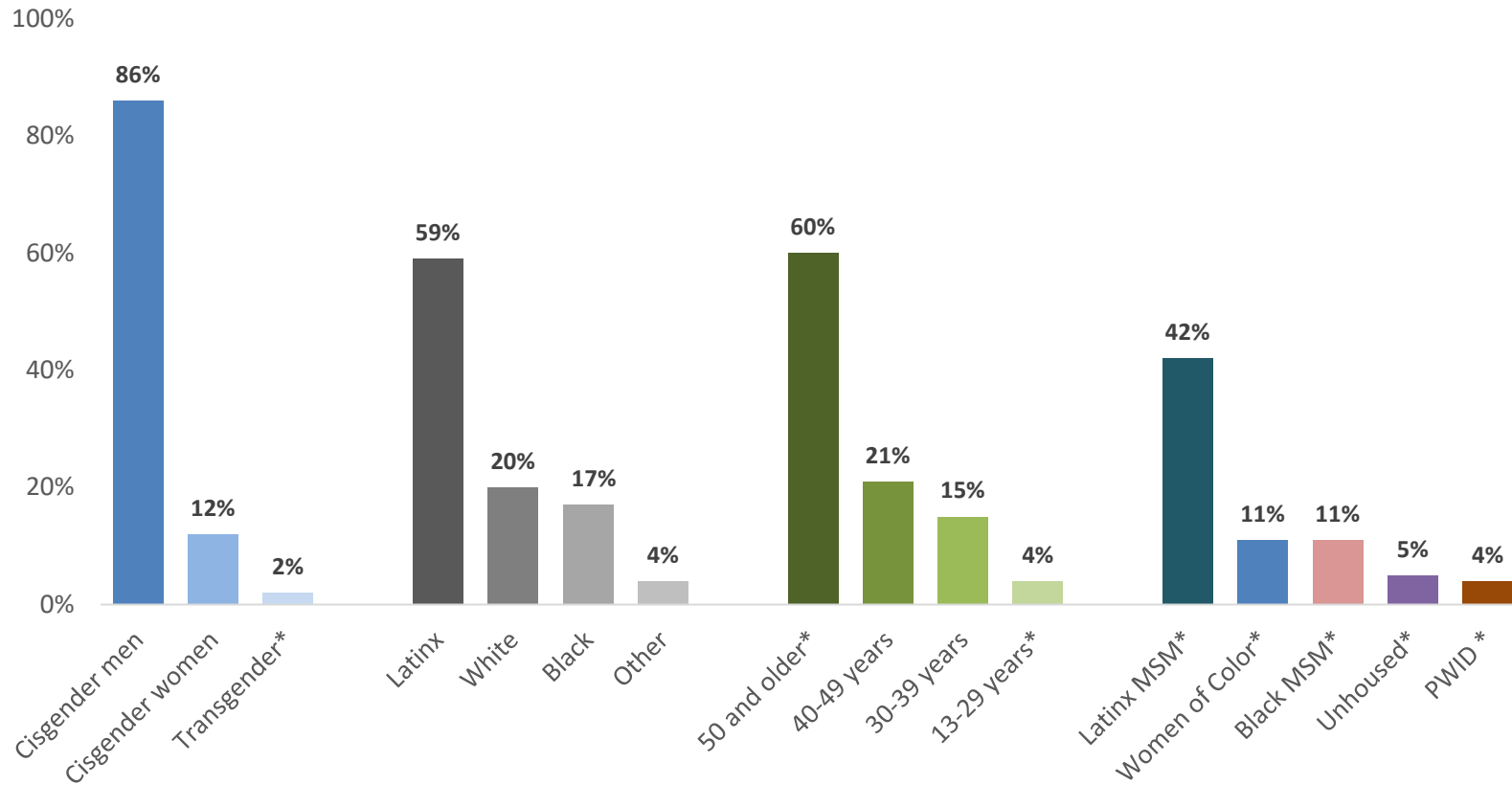
Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

ORAL HEALTH SERVICES

Population Served:

- In Year 32, a total of 4,270 clients received Oral Health (OH) Services in Year 32. In LAC this category includes:
 - General Oral Care (GOC) that served 4,001 clients
 - Specialty Oral Care (SOC) that served 3,580 clients
- Most OH Services clients were cisgender men, Latinx, and aged 50 and older (Figure 1)
- Among the priority populations, the largest percent served were PLWH ≥ age 50, followed by Latinx MSM

Figure 1. Key Characteristics of RWP Clients in Oral Health Services in LAC, Year 32



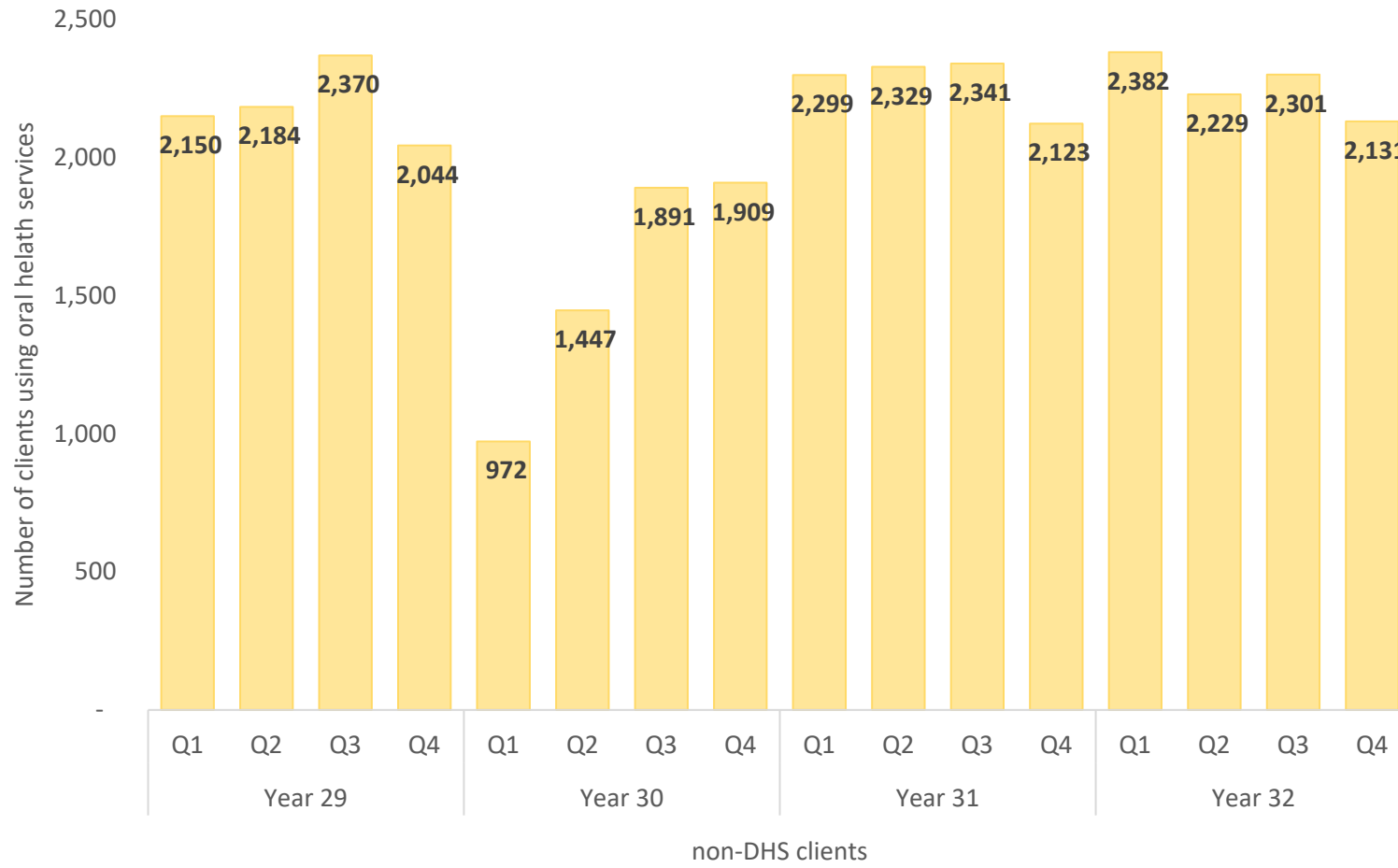
*Priority Populations

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

Service Utilization

Figure 2 below shows the number of RWP clients accessing Oral Health (OH) services from Year 29 through Year 32 by quarter. The total number of OH clients sharply decreased in Year 30 during the COVID-19 pandemic. The number of OH clients started gradually increase in the second half of Year 30 and continued to increase in Years 31 and 32. All oral health services were provided in-person.

Figure 2. RWP Clients Accessing Oral Health (OH) Services by Quarter in LAC, RWP Years 29-32



Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

Service Units and Expenditures

- Year 32 Funding Sources: **RWP Part A (100%)**
 - Expenditures is what DHSP pays for staff time and resources, not for procedures.
- Percentage of RWP Clients Accessing Oral Health services in Year 32: **29%**
- Unit of Service: **Procedures**

Table 1. Oral Health Service Utilization and Expenditures among RWP Clients in LAC, Year 32

Priority Populations	Clients	% of Clients	Total procedures	% of procedures	Procedures per Client	Estimated Expenditures per Client	Estimated Expenditures by Subpopulation
<i>Total Oral Health clients</i>	4,270	100%	45,174	100%	11	\$1,746	\$7,456,098
<i>General Oral Care</i>	4,001	94%	28,041	62%	7	\$1,360	\$5,439,733
<i>Specialty Oral Care</i>	3,580	84%	17,133	38%	5	\$563	\$2,016,365
PLWH ≥ age 50	2,545	60%	27,405	61%	11	\$1,777	\$4,523,274
Latinx MSM	1,802	42%	20,129	45%	11	\$1,844	\$3,322,349
Women of Color	483	11%	5,151	11%	11	\$1,760	\$850,187
Black MSM	478	11%	4,159	9%	9	\$1,436	\$686,455
Unhoused in the contract year	223	5%	1,937	4%	9	\$1,434	\$319,707
Persons who inject drugs (PWID)	165	4%	1,717	4%	10	\$1,718	\$283,396
Youth aged 13-29	156	4%	1,365	3%	9	\$1,636	\$145,577
Transgender Persons	89	2%	882	2%	10	\$1,444	\$225,297

Table 1 Highlights

- *Population Served:* The largest number and percent of OH clients were PLWH ≥ age 50 (60%), followed by Latinx MSM clients (42%).
- *Service Utilization:*
 - PLWH ≥ age 50 had received most of OH procedures (61%), followed by Latinx MSM (45%).
 - Utilization of procedures per client was the highest among PLWH ≥ age 50, Latinx MSM, and women of color (11 procedures/client each)
 - Procedures per client were the lowest among youth aged 13-29 clients, Black MSM and unhoused in the contract year (9 per client each).
 - The percent of OH procedures was slightly higher relative to their population size among Latinx MSM clients (42% vs 45%).
 - The percent of OH procedures was slightly lower relative to their population size among Black MSM (11% vs 9%).
- *Expenditures:*
 - Expenditure per client were highest among PLWH ≥ age 50, Latinx MSM, and women of color.
 - Expenditures per client were the lowest among clients who were unhoused in the contract year, Black MSM and transgender clients.

HIV Care Continuum (HCC) Outcomes

Table 2 below shows HCC outcomes for RWP clients receiving oral health (OH) services in Year 32. OH clients had substantially higher engagement, retention in care, and viral suppression compared to RWP clients who did not accessing OH service.

Table 2. HIV Care Continuum Outcomes for RWP Clients That Used and Did Not Use Oral Health Services (OH) in LAC, Year 32

HCC Measures	OH clients		Non-OH clients	
	N=4,270	%	N=10,502	%
<i>Engaged in HIV Care^a</i>	4,189	98%	9,657	92%
<i>Retained in HIV Care^b</i>	3,689	86%	6,692	64%
<i>Suppressed Viral Load at Recent Test^c</i>	4,004	94%	8,273	79%

^aDefined as having ≥1 HIV laboratory test (viral load, CD4 or genotype test) reported in the 12 months before the end of the reporting period

^bDefined as having ≥2 HIV laboratory tests (viral load, CD4 or genotype test) reported at >90 days apart in the 12 months before the end of the reporting period

^cDefined as viral load <200 copies/ml at most recent test reported in the 12 months before the end of the reporting period

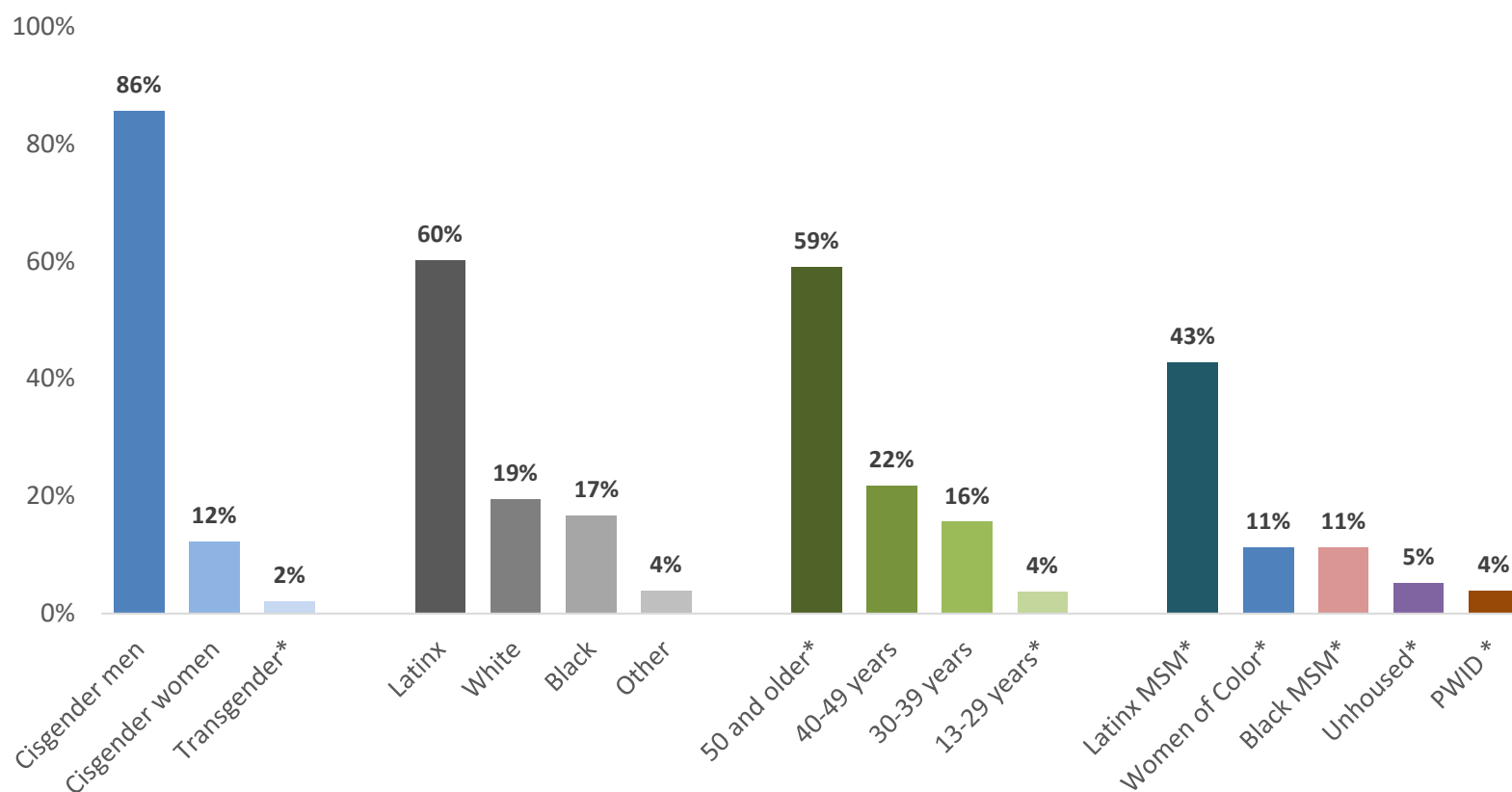
Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

GENERAL ORAL CARE SERVICES

Population Served:

- In Year 32, a total of 4,001 clients received general oral Care (GOC) services:
- Most GOC clients were cisgender men, Latinx and Black, and aged 50 and older (Figure 3)
- PLWH \geq age 50 represented the largest percent among priority populations (59%), followed by Latinx MSM (43%).

Figure 3. Demographic Characteristics and Priority Populations among General Oral Care Clients in LAC, Year 32



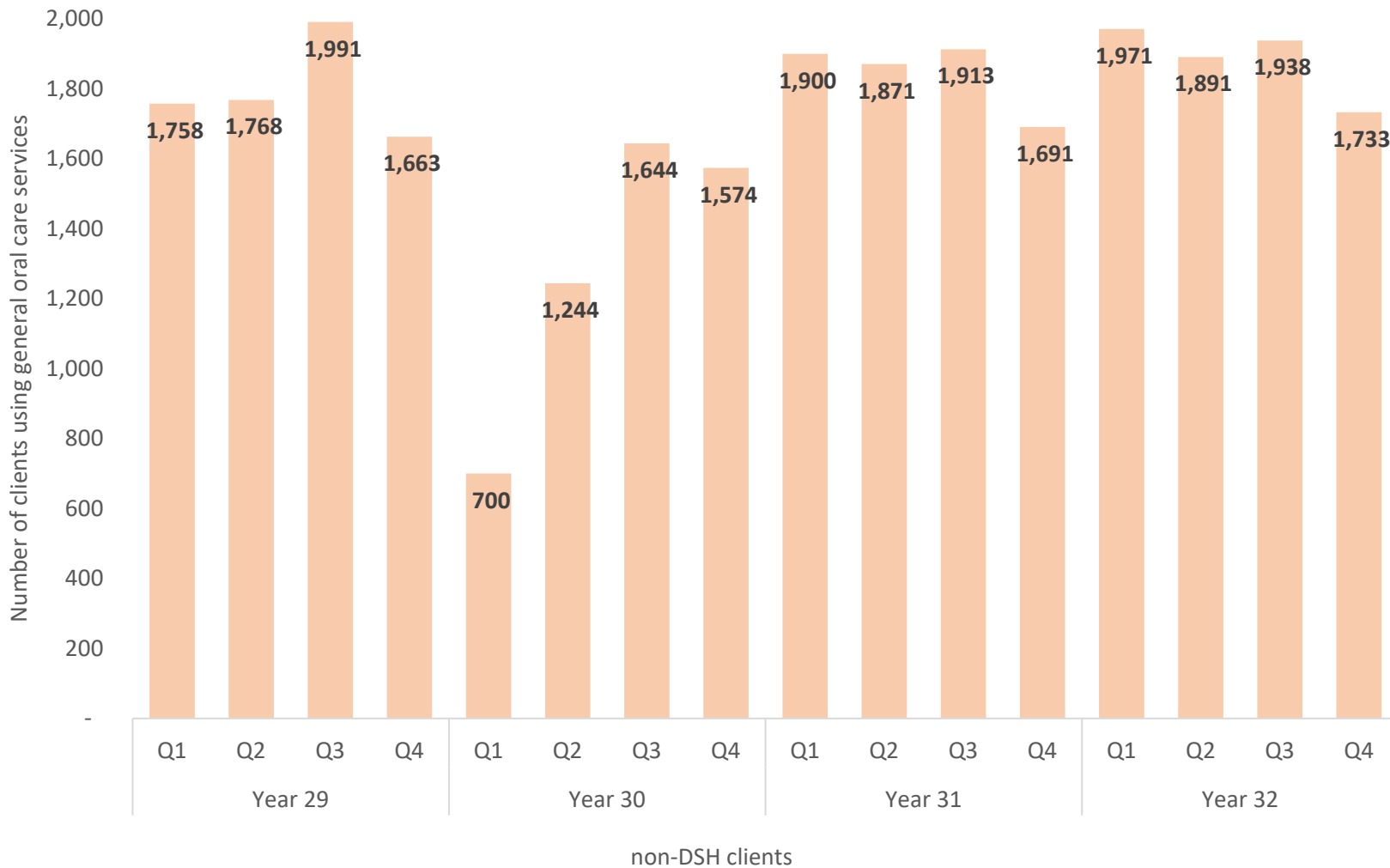
*Priority Populations

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

Service Utilization

The figure below presents the number of clients using general oral care (GOC) services from Year 29 through Year 32 by quarter. The total number of GOC clients sharply decreased in Year 30 during the COVID-19 pandemic. In the second part of Year 30 the number of GOC clients started to increase gradually and continued to increase in Years 31 and 32. All general oral care services were provided in-person.

Figure 4. RWP Clients Accessing General Oral Care (GOC) Services by Quarter in LAC, RWP Years 29-32



Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

Service Units and Expenditures

- Year 32 Funding Sources: **RWP Part A (100%)**
 - Expenditures is what DHSP pays for staff time and resources, not for procedures.
- Percentage of RWP Clients Accessing GOC in Year 32: **27%**
- Unit of Service: **Procedures**

Table 3. General Oral Care Service Utilization and Expenditures among RWP Clients in LAC, Year 32

Priority Populations	Unique Clients	% of Clients	Total Procedures	% of Procedures	Procedures per Client	Estimated Expenditures per Client	Estimated Expenditures by Subpopulation
General Oral Care	4,001	100%	28,041	100%	7	\$1,360	\$5,439,733
PLWH ≥ age 50	2,362	59%	16,713	60%	7	\$1,374	\$3,245,315
Latinx MSM	1,713	43%	12,955	46%	8	\$1,469	\$2,515,590
Women of Color	451	11%	3,349	12%	7	\$1,442	\$650,306
Black MSM	446	11%	2,554	9%	6	\$1,112	\$495,933
Unhoused in the contract year	206	5%	1,188	4%	6	\$1,120	\$230,685
Persons who inject drugs (PWID)	152	4%	1,005	4%	7	\$1,284	\$195,150
Youth aged 13-29	147	4%	866	3%	6	\$1,144	\$168,159
Transgender Persons	83	2%	592	2%	7	\$1,385	\$114,954

Table 3 Highlights

- *Population Served:* Most GOC clients were PLWH ≥ age 50 (59%), followed by Latinx MSM (43%) Year 32.
- *Service Utilization:*
 - PLWH ≥ age 50 and Latinx MSM received the highest number and percentage of GOC procedures.
 - Procedures per client were the highest among Latinx MSM compared to all GOC clients and other subpopulations.
 - Per client utilization was lowest among Black MSM, youth aged 13-29, and clients who were unhoused in the contract year.
 - The percent of GOC procedures was slightly higher relative to the populations size among Latinx MSM (43% vs 46%).
 - The percent of GOC procedures was slightly lower relative to the population size among Black MSM client (11% vs 9%).
- *Expenditures:*
 - Per client expenditures were highest Latinx MSM (\$1,469), followed by women of color (\$1,442).
 - Black MSM and unhoused in the contract year clients had the lowest expenditures per client (\$1,112 and \$1,120, respectively).

HIV Care Continuum (HCC) Outcomes

Table 4 below compares HCC outcomes for RWP clients who did and did not access GOC services in Year 32. A larger percent of clients in GOC were engaged in care, retained in care, and achieved viral suppression compared to those clients not using GOC services.

Table 4. HIV Care Continuum Outcomes for RWP Clients That Used General Oral Care and Did Not Use Oral Health Services in LAC, Year 32

HCC Measures	GOC clients		Non-OH clients	
	N=4,001	Percent	N=10,502	Percent
<i>Engaged in HIV Care^a</i>	3,933	98%	9,657	92%
<i>Retained in HIV Care^b</i>	3,469	87%	6,692	64%
<i>Suppressed Viral Load at Recent Test^c</i>	3,764	94%	8,273	79%

^aDefined as having ≥1 HIV laboratory test (viral load, CD4 or genotype test) reported in the 12 months before the end of the reporting period

^bDefined as having ≥2 HIV laboratory tests (viral load, CD4 or genotype test) reported at >90 days apart in the 12 months before the end of the reporting period

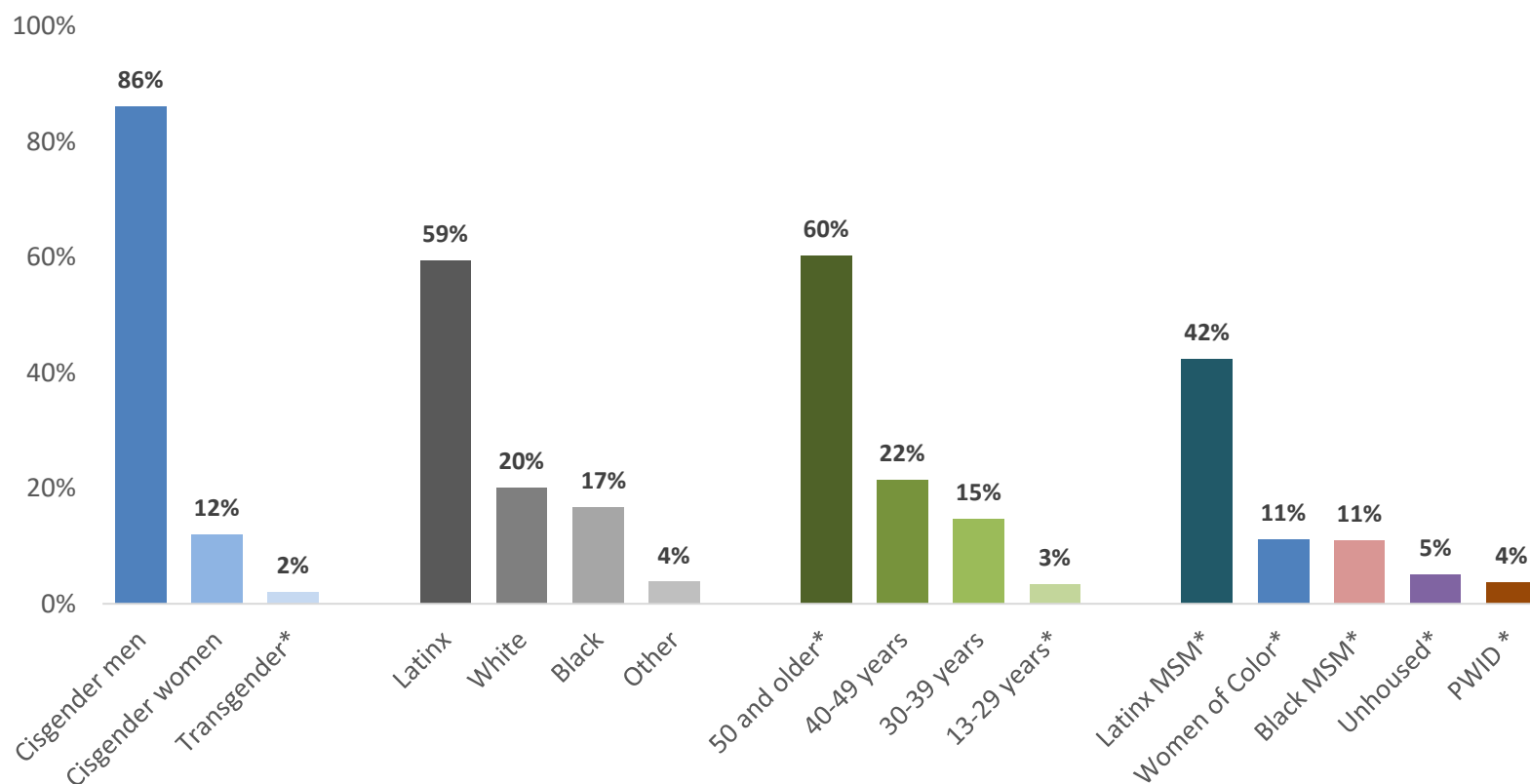
^cDefined as viral load <200 copies/ml at most recent test reported in the 12 months before the end of the reporting period

SPECIALTY ORAL CARE SERVICES

Population Served:

- In Year 32, a total of 3,580 clients received Specialty Oral Care (SOC) services.
- Most SOC clients were cisgender men, Latinx and Black, and PLWH ≥ age 50 (Figure 5).
- PLWH ≥ age 50 represented the largest percent among priority populations (60%), followed by Latinx MSM (42%).

Figure 5. Demographic Characteristics and Priority Populations among Specialty Oral Care Service Clients in LAC, Year 32



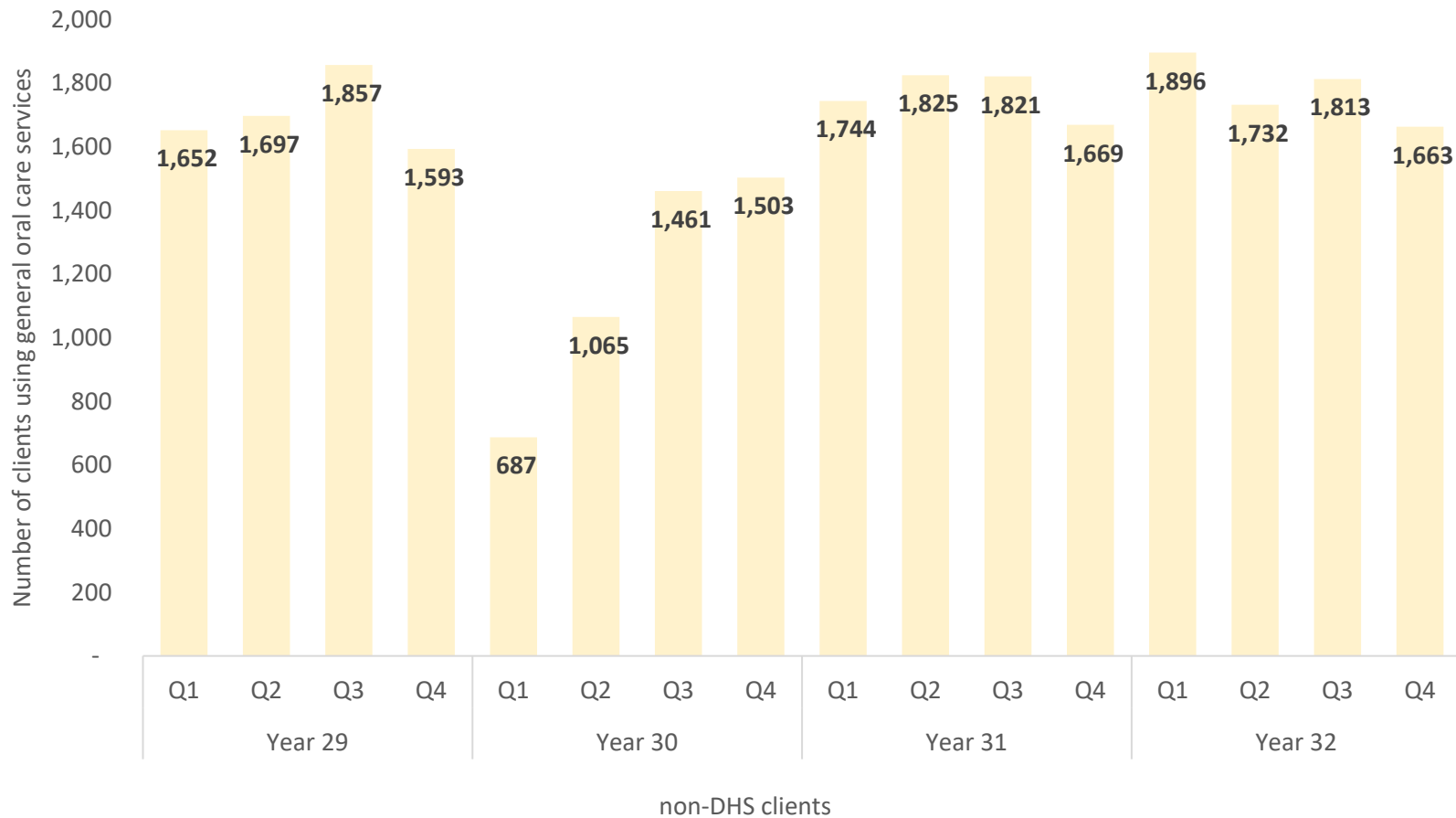
*Priority Populations

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

Service Utilization

The figure below presents the number of clients using specialty oral care (SOC) services from Year 29 through Year 32 by quarter. The total number of SOC clients sharply decreased in Year 30 during the COVID-19 pandemic. In the second part of Year 30 the number of SOC clients started gradually increase and continued to increase in Year 31 and 32. All specialty oral care services were provided in-person.

Figure 6. RWP Clients Accessing Specialty Oral Care (SOC) Services by Quarter in LAC, RWP Years 29-32



Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

Service Units and Expenditures

- Year 32 Funding Sources: **RWP Part A (100%)**
 - Expenditures is what DHSP pays for staff time and resources, not for procedures.
- Percentage of RWP Clients Accessing SOC services in Year 32: **24%**
- Unit of Service: **Procedures**

Table 5. Specialty Oral Care Service Utilization and Expenditures among RWP Clients in LAC, Year 32

Priority Populations	Unique Clients	% of Clients	Total Procedures	% of Procedures	Procedures per Client	Estimated Expenditures per Client	Estimated Expenditures by Subpopulation
Specialty Oral Care	3,580	84%	17,133	100%	5	\$563	\$2,016,365
PLWH ≥ age 50	2,362	59%	16,713	60%	7	\$509	\$1,202,952
Latinx MSM	1,713	43%	12,955	46%	8	\$544	\$932,463
Women of Color	451	11%	3,349	12%	7	\$534	\$241,051
Black MSM	446	11%	2,554	9%	6	\$412	\$183,829
Unhoused in the contract year	206	5%	1,188	4%	6	\$415	\$85,509
Persons who inject drugs (PWID)	152	4%	1,005	4%	7	\$476	\$72,337
Youth aged 13-29	147	4%	866	3%	6	\$424	\$62,332
Transgender Persons	83	2%	592	2%	7	\$513	\$42,610

Table 5 Highlights

- *Population Served:* Most SOC clients were PLWH ≥ age 50 (59%), followed by Latinx MSM (43%) Year 32.
- *Service Utilization:*
 - PLWH ≥ age 50 and Latinx MSM received the highest number and percentage of GOC procedures.
 - Procedures per client were the highest among Latinx MSM compared to all GOC clients and other subpopulations.
 - Per client utilization was lowest among Black MSM, youth aged 13-29, and clients who were unhoused in the contract year.
 - The percent of GOC procedures was slightly higher relative to the populations size among Latinx MSM (43% vs 46%).
 - The percent of GOC procedures was slightly lower relative to the population size among Black MSM client (11% vs 9%).
- *Expenditures:*
 - Per client expenditures were highest among Latinx MSM (\$544), followed by women of color (\$534).
 - Black MSM and unhoused in the contract year clients had the lowest expenditures per client (\$412 and \$415, respectively).

HIV Care Continuum (HCC) Outcomes

Table 6 below compares HCC outcomes for RWP clients who did and did not use NS services in Year 32. A larger percent of clients in NS services were engaged in care, retained in care, and achieved viral suppression compared to those clients not using NS services.

Table 6. HIV Care Continuum Outcomes for RWP Clients That Used Specialty Oral Care and Did Not Use Oral Health Services in LAC, Year 32

HCC Measures	SOC clients		Non-OH clients	
	N=3,580	Percent	N=10,502	Percent
<i>Engaged in HIV Care^a</i>	3,509	98%	9,657	93%
<i>Retained in HIV Care^b</i>	3,092	86%	6,692	69%
<i>Suppressed Viral Load at Recent Test^c</i>	3,364	94%	8,273	83%

^aDefined as having ≥1 HIV laboratory test (viral load, CD4 or genotype test) reported in the 12 months before the end of the reporting period

^bDefined as having ≥2 HIV laboratory tests (viral load, CD4 or genotype test) reported at >90 days apart in the 12 months before the end of the reporting period

^cDefined as viral load <200 copies/ml at most recent test reported in the 12 months before the end of the reporting period

Overlap of Oral Health Services Provided

General and Specialty Oral Care services are not mutually exclusive. To explore the degree of overlap across GOC and SOC services in Year 32, a cross tabulation was constructed (Table 7). Among GOC clients, approximately 83% also accessed SOC. Among SOC clients, nearly 93% also accessed GOC.

Table 7. Cross tabulation of RWP Clients Received General and Specialty Oral Care Services in LAC, Year 32

<i>Count</i> <i>% of row population</i>	General Oral Health	Specialty Oral Health
General Oral Health	4,001	3,311 83%
Specialty Oral Health	3,311 93%	3,580

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

SUMMARY OF FINDINGS

Service use and expenditures vary by service category and by priority populations. This variation may be influenced by the priority population size, underlying characteristics within each priority and priority population such as health status, income, housing status or neighborhood of residence, service need or service access and others. The main findings are summarized in Table 8.

Table 8. Summary of Findings for RWP Service Utilization in LAC, Year 32

	RWP	Oral Health Services	General Oral Care	Specialty Oral Care
Main client population served	<ul style="list-style-type: none"> • Latinx and Black race/ethnicity • Cisgender male • PLWH ≥ age 50 • MSM 	<ul style="list-style-type: none"> • Latinx race/ethnicity • Cisgender male • PLWH ≥ age 50 • MSM 	<ul style="list-style-type: none"> • Latinx race/ethnicity • Cisgender male • PLWH ≥ age 50 • MSM 	<ul style="list-style-type: none"> • Latinx race/ethnicity • Cisgender male • PLWH ≥ age 50 • MSM
Utilization over time	<ul style="list-style-type: none"> • Total number of clients decreased in Year 32 due to AOM, MCC, and MH services stopping at DHS sites • However, number of clients at remaining agencies was steady 	<ul style="list-style-type: none"> • Service provided only by non-DHS sites • Steep decrease in number of clients in Year 30 (due to COVID) <p>Numbers of clients started to increase in the 2nd part of Year 30 and back to pre-pandemic numbers in Years 31 and 32</p>	<ul style="list-style-type: none"> • Service provided only by non-DHS sites • Steep decrease in number of clients in Year 30 (due to COVID) <p>Number of clients started to increase in the 2nd part of Year 30 and back to pre-pandemic numbers in Years 31 and 32.</p>	<ul style="list-style-type: none"> • Service provided only by non-DHS sites • Steep decrease in number of clients in Year 30 (due to COVID) • Number of clients started to increase in the 2nd part of Year 30 and back to pre-pandemic numbers in Years 31 and 32
Service units per client	N/A (units vary)	<ul style="list-style-type: none"> • Procedures 	<ul style="list-style-type: none"> • Procedures 	<ul style="list-style-type: none"> • Procedures
Total expenditures	\$45.9 million	<ul style="list-style-type: none"> • \$7,456,098 (Part A) • \$1,746 per client 	<ul style="list-style-type: none"> • \$5,439,733 (part A) • \$1,360 per client 	<ul style="list-style-type: none"> • \$2,016,365 (Part A) • \$ 563 per client
HCC outcomes	<ul style="list-style-type: none"> • HCC outcomes were higher among RWP clients compared to PLWH in LAC 	HCC outcomes were higher among OH (including GOC and SOC) clients compared to clients not accessing those services		

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

	RWP	Oral Health Services	General Oral Care	Specialty Oral Care
Latinx MSM	<ul style="list-style-type: none"> • The second largest priority population in RWP (38%) • Largest percent of uninsured clients 	<ul style="list-style-type: none"> • Second largest priority population (42%) and accounted for about 45% of services provided • Highest number of OH procedures per client • Highest expenditure per client 	<ul style="list-style-type: none"> • Second largest priority population (43%) and accounted for 46% of GOC services provided • Highest number of GOC procedures per client • Highest expenditure per client 	<ul style="list-style-type: none"> • Second largest priority population (43%) and accounted for 46% of SOC services provided • Highest number of SOC procedures per client • Highest expenditure per client
Black MSM	<ul style="list-style-type: none"> • About 15% of RWP clients • Over 2/3 living ≤ FPL 	<ul style="list-style-type: none"> • Represented 11% of HS clients and only 9% of services provided • Lowest number of procedures per client • Lowest expenditures per client 	<ul style="list-style-type: none"> • Represented 11% of HS clients and only 9% of GOC services provided • One of lowest number of GOC procedures per client • Lowest expenditures per client 	<ul style="list-style-type: none"> • Represented 11% of HS clients and only 9% of SOC services provided • One of lowest number of SOC procedures per client • Lowest expenditures per client
Youth 13-29 years old	<ul style="list-style-type: none"> • 11% of RWP clients • The lowest percent of RiC among priority populations 	<ul style="list-style-type: none"> • The second smallest population by number and percent of clients • The second lowest percent of procedures from the total and procedures per client 	<ul style="list-style-type: none"> • The second smallest population by number and percent of GOC clients • One of lowest numbers of GOC procedures per client • The third lowest expenditures per client 	<ul style="list-style-type: none"> • The second smallest population by number and percent of SOC clients • One of lowest numbers of SOC procedures per client • The third lowest expenditures per client
PLWD ≥ age 50	<ul style="list-style-type: none"> • 43% of RWP clients • The highest percent of RiC and VS and the second highest percent of engagement among priority populations • The highest percent of PWID • Second highest percent of unhoused in the contract year 	<ul style="list-style-type: none"> • Highest utilizers of OH services across categories by percent of clients (~ 60%) and services provided (~ 60%) 		
		<ul style="list-style-type: none"> • Second highest expenditures per client 	<ul style="list-style-type: none"> • Expenditures per client slightly higher than the average for all GOC clients. 	<ul style="list-style-type: none"> • Expenditures per client lower than the average for all SOC clients.
Women of color	<ul style="list-style-type: none"> • 9% of RWP clients • The highest percent of engagement in care • The second highest percent of RiC among priority populations 	<ul style="list-style-type: none"> • Represented 11% of OH clients and same percent of services provided • The third highest per client number of days and expenditures 	<ul style="list-style-type: none"> • Represented 11% of GOC clients and 12% of services provided • The second highest per client number of procedures and expenditures 	<ul style="list-style-type: none"> • Represented 11% of SOC clients and 12% of services provided • The second highest per client number of SOC procedures and expenditures

Ryan White Program Service Utilization Report, Contract Year 32 (March 1, 2022-February 28, 2023)

	RWP	Oral Health Services	General Oral Care	Specialty Oral Care
Transgender clients	<ul style="list-style-type: none"> • 3% of all RWP clients • Highest percent of clients unhoused in the contract period • Second largest percent of people living ≤ FPL 	<ul style="list-style-type: none"> • Represented the smallest number and percent of OH clients (2%) and services provided (2%) 		
		<ul style="list-style-type: none"> • Per client expenditure much lower than overall average and the third lowest among priority populations 	<ul style="list-style-type: none"> • Per client expenditure slightly higher than overall average for GOC clients 	<ul style="list-style-type: none"> • Per client procedures slightly higher than average for all SOC clients • Per client expenditures lower than overall average for SOC clients
Unhoused in the contract year	<ul style="list-style-type: none"> • 12% of all RWP clients • Largest percent of clients living ≤ FPL and PWID 	Similar utilization of OH services across categories by clients who were unhoused in the contract year: <ul style="list-style-type: none"> • Represented 5% percent of clients and 4% of OH services provided 		
		<ul style="list-style-type: none"> • Lowest per client expenditures among priority populations 	<ul style="list-style-type: none"> • The second lowest per client expenditures among priority populations 	<ul style="list-style-type: none"> • The second lowest per client expenditures among priority populations
PWID	<ul style="list-style-type: none"> • 4% of RWP clients • Second highest percent of clients unhoused in the contract year 	Similar utilization of OH services across categories of clients who are PWID: <ul style="list-style-type: none"> • Represented 4% percent of OH clients and 4% services provided 		
		<ul style="list-style-type: none"> • Slightly lower number of OH procedures per client than the average for all OH clients 	<ul style="list-style-type: none"> • Slightly lower expenditures per client than the average for all GOC clients 	<ul style="list-style-type: none"> • Per client procedures slightly higher than average for all SOC clients • Lower expenditures per client than the average for all SOC clients