

Ryan White Program Utilization Summary, Year 33 (March 1, 2023-February 29, 2024)



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Overview



- Background
- Methods
- Results
- Key Takeaways
- Next Steps
- Questions/Discussion

Background

- Ryan White Program (RWP) Funding
- RWP Report Updates
- RWP Service Categories





RWP Funding and Report Updates



Ryan White Program (RWP) Annual Funding to DHSP

Source: Health Resources and Services Administration HIV/AIDS Bureau (HRSA-HAB)

Commission on HIV (COH) RWP DHSP Report

Utilization Report informs service planning and resource allocation activities

RWP Utilization Report Updates

- Separate reports for <u>core and support service categories</u> to better inform activities
- The report is restructured to track utilization across the priority populations identified in the Los Angeles County (LAC) <u>Ending the HIV Epidemic (EHE) Strategic Plan</u> and the <u>LAC Integrated</u> Comprehensive HIV Plan
- While not identified as a priority population in the above plans, persons experiencing homelessness (unhoused people) are included in the utilization report

PRIORITY POPULATIONS

Latinx Men Who Have Sex with Men (MSM)

Black MSM

Cisgender Women of Color

Transgender Persons

Youth (29 years and younger)

PLWH Age ≥ 50

Persons Who Inject Drugs (PWID)

Unhoused RWP Clients

RWP Service Categories



Core Service Categories

- Ambulatory Outpatient Medical (AOM)
- Medical Care Coordination (MCC)
- Oral Health
 - General Oral Health
 - Specialty Oral Health
- Home-Based Care Management (HBCM)
- Mental Health

Support Service Categories

- Emergency Financial Assistance (EFA)
- Housing Services
 - Housing Services (RCFCI)
 - Housing Services (TRCF)
 - Permanent Supportive Housing (H4H)
- Non-Medical Case Management (NMCM):
 - Benefits Specialty
 - Transitional Incarceration
- Nutritional Services
 - Food Bank
 - Delivered Meals
- Substance Abuse Services Residential
- Outreach (LRP)

Methods

- RWP Report Framework
- Evaluation Framework





RWP Report Framework



Year 33: March 1, 2023-February 29, 2024

Data Sources

- HIV Casewatch: Client characteristics and service use
- HIV Surveillance: Viral load, CD4 and genotype tests
- DHSP Expenditure Reports

Utilization Indicators

- Total service units = **Number of services units** paid for by DHSP (includes hours, visits, procedures, days, and sessions)
- Total Expenditures = Total dollar amount paid by DHSP
- Service units per client = Total number of service units / number of clients
- Expenditures per client = Total dollar amount / number of clients

Outcomes

- Engagement in care
- Retention in care
- Viral suppression

Evaluation Framework



Demographics of RWP Clients

Number of unique clients

Type of clients who receive services

Social determinants of health of clients

RWP priority populations

RWP Service Utilization

Types of services utilized

How was the service utilized

How much of the service did clients receive?

Gaps or differences in how clients received services

Local and
Federal HIV
Target Progress

Engagement in care, retention in care, and viral suppression in RWP clients and LAC overall

Disparities in outcomes among priority populations

Client outcomes within specific service categories

Results: Year 33

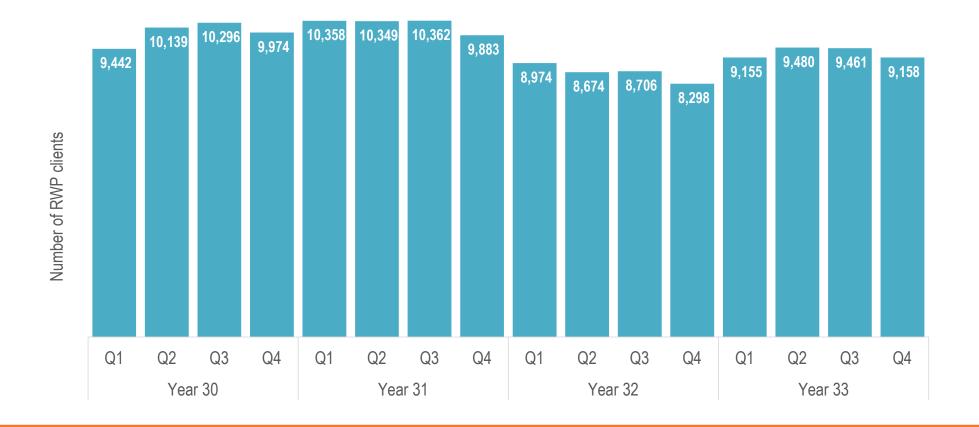
- Service Utilization
- RWP Client Demographics
- RWP Priority Populations
- HIV Care Continuum Outcomes



Utilization remains consistent among contracted providers over the past four years.



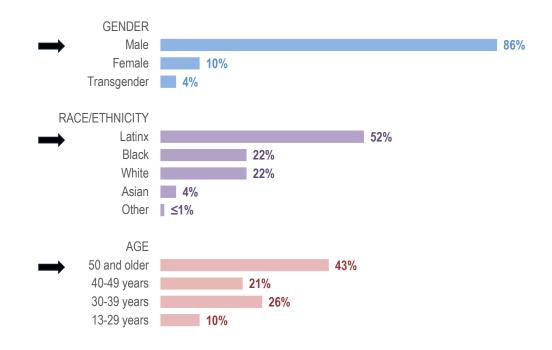
Quarterly RWP Utilization at Funded Agencies, Years 30-33



In Year 33 most RWP clients identified as male, over half were Latinx, and three out of five were under aged 50.



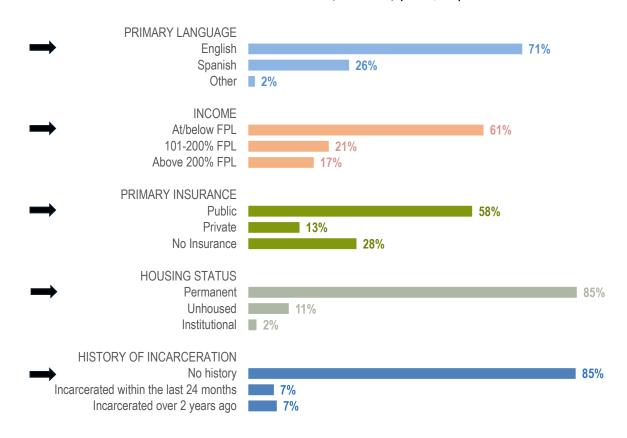
RWP Client Demographics, Year 33 (N=15,882)



Most RWP clients were English-speakers, lived ≤ FPL, had public health insurance, had permanent housing status and no history of incarceration.



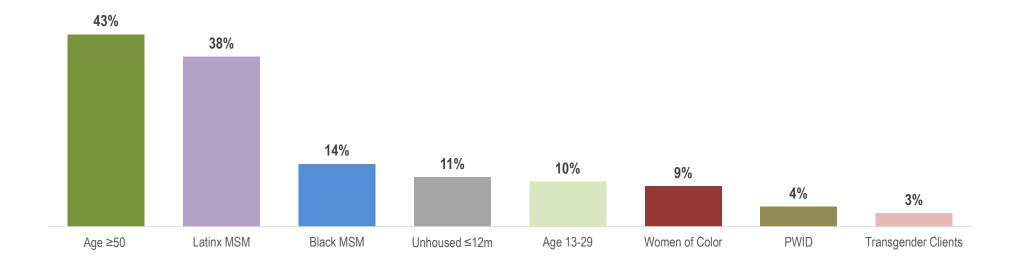
RWP Client Social Determinants of Health, Year 33, (N=15,882)



RWP is reaching clients in LAC priority populations, Year 33



The majority of clients (43%) were 50 years of age or older, followed by Latinx MSM.*



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

Comparison of LAC Priority Populations^a for RWP Utilization, Year 33



Population (% of row population)	Trans- identified Clients ^b	Latinx MSM ^c	Black MSM°	Women of Color	Age 13-29	Age ≥ 50	PWID	Unhoused ≤12m
Trans-identified Clients ^b	535	253	88	-	89	161	12	120
Trans-lacitimea officials	(3% of RWP)	47%	16%		17%	30%	2%	22%
Latinx MSM ^c	253	6,055	-	-	658	2,303	152	520
Latilix Misiri	4%	(38% of RWP)			11%	38%	3%	9%
Black MSM ^c	88	-	2,255	-	292	731	62	327
DIACK MISIM	4%		(14% of RWP)		13%	32%	3%	15%
Women of Color	-	-	-	1,436	105	765	37	140
Wollieff of Color				(9% of RWP)	7%	53%	3%	10%
Age 13-29	89	658	292	105	1,539	-	36	243
Age 13-29	6%	43%	19%	7%	(10% of RWP)		2%	16%
Age ≥ 50	161	2,303	731	765	-	6,872	351	450
	2%	34%	11%	11%		(43% of RWP)	5%	7%
PWID	12	152	62	37	36	351	660	146
	2%	23%	9%	6%	5%	53%	(4% of RWP)	22%
Unhoused ≤12m	120	520	327	140	243	450	146	1,668
Onnoused \$12m	7%	31%	20%	8%	15%	27%	9%	(11% of RWP)

Data source: HIV Casewatch as of 5/2/2024, HIV Surveillance data as of 5/8/2024

^aPopulations not mutually exclusive

^bIncludes 497 transgender women and 38 transgender men

^cMSM defined by primary HIV risk category

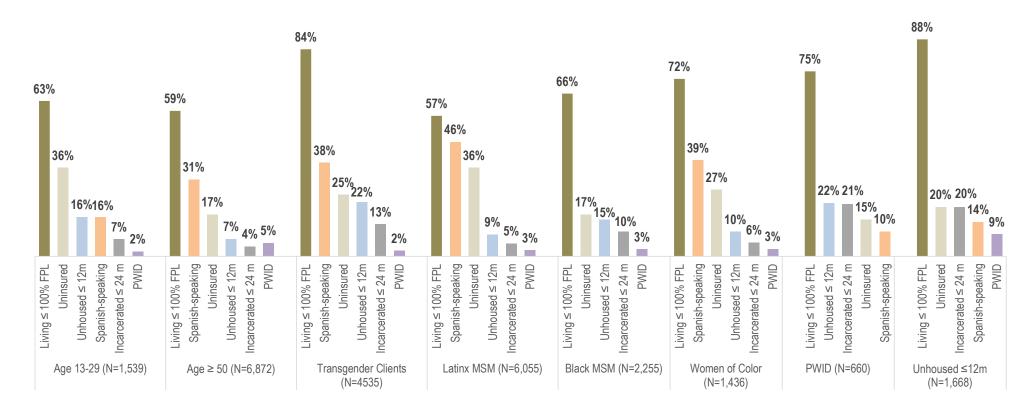
^dReported as unhoused within the 12 months reporting period.

<u>Poverty</u> and having <u>no insurance</u> impacted the highest percent of clients across priority populations, however the other SDOH impacted each population differently.





Social Determinants among LAC Priority Populations, Year 33



Utilization of RWP Services by LAC Priority Populations^a, Year 33

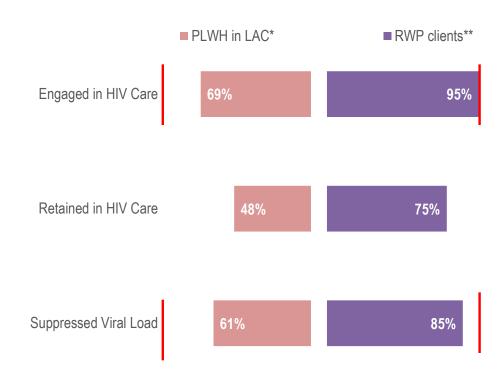


Service Category	Age 12-29	Age ≥ 50	Transgender Clients	Women of Color	Latinx MSM	Black MSM	PWID	Unhoused ≤12m
SUD Residential (n=84)	10%	17%	8%	1%	38%	19%	14%	55%
HBCM (n=120)	-	87%	-	13%	20%	8%	4%	2%
MH Services (n=151)	13%	17%	5%	7%	58%	11%	-	7%
Housing Services (n=270)	9%	45%	6%	13%	37%	15%	7%	45%
EFA (n=617)	5%	51%	2%	11%	28%	24%	5%	7%
Nutrition Support (n=2,461)	3%	64%	4%	11%	35%	13%	6%	14%
AOM (n=3,604)	13%	21%	3%	7%	54%	8%	2%	6%
Oral Health (n=4,332)	3%	58%	3%	11%	43%	11%	4%	6%
NMCM (n=6,553)	10%	43%	2%	9%	40%	13%	4%	7%
MCC (n=6,942)	12%	34%	5%	6%	39%	18%	5%	17%

HIV Care Continuum in LAC and in RWP clients, Year 33 (N=15,882)



- Engagement^a, retention in care^b and viral load suppression^c percentages were higher for RWP clients compared to PLWH in LAC, Year 33.
- RWP overall did not meet the EHE target of 95% for viral suppression or local targets for engagement and retention in care (95%).



^aEngagement in Care defined as 1 ≥ viral load, CD4 or genotype test reported in the 12-month period based on HIV laboratory data as of 5/8/2024

bRetention 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 5/8/2024

Viral suppression defined as most recent viral load test <200 copies/mL in the 12-month period based on HIV laboratory data as of 5/8/2024

^{95%} Target

^{*} Division of HIV and STD Programs, Department of Public Health, County of Los Angeles. HIV Surveillance Annual Report, 2022. http://publichealth.lacounty.gov/dhsp/Reports/HIV/Annual_HIV_Surveillance_Report_2022_LAC_Final.pdf

^{**} Data source: HIV Casewatch as of 5/2/2024

HIV Care Continuum (HCC) Outcomes among Priority Populations, Year 33



- RWP clients aged 50 and older had the highest engagement, retention in care and viral suppression.
- RWP clients experiencing homelessness had the lowest engagement and retention in care and viral suppression.
- RWP clients aged 50 and older, Latinx
 MSM and Women of color met the target of 95% for engagement in care.
- None of other LAC priority populations met the EHE or local targets for HCC outcomes.

Priority Population	No.	% of RWHAP Population	Engaged in Care	Retained in Care	Virally Suppressed
50 years of age or older	6,872	43%	96%	81%	89%
Latinx MSM ^c	5,790	36%	96%	77%	87%
Women of color	1,663	10%	95%	76%	85%
Transgender Persons ^b	535	3%	95%	76%	79%
Youth (29 years and younger)	1,539	10%	94%	64%	79%
Black MSM ^c	2,105	13%	94%	68%	79%
Persons Who Inject Drugs (PWID)	660	4%	93%	74%	82%
People experiencing homelessness	1,668	11%	91%	64%	72%

^aLimited to membership in two priority populations; a client could be in more than two priority populations as population definitions are not mutually exclusive

blncludes 497 transgender women and 38 transgender men

[°]MSM defined as PLWH who reported male sex at birth, sex with men as primary HIV risk category and non-White race/ethnicity

Viral Suppression among RWP and by Service Category, Year 33 (N=15,882)



Among RWP clients, 85% were virally suppressed

 Neither the RWP overall nor any of the service categories met the EHE viral suppression target of 95%

RWP Core Services	Viral Load Suppression
Oral Health Care	93%
Mental Health Services	90%
Outpatient/Ambulatory Medical Care	89%
Home and Community-Based Case Management	84%
Medical Case Management	79%
RWP Support Services	95% EHE
Substance Abuse Services Residential	92% target
Emergency Financial Assistance (EFA)	90%
NMCM Benefits Specialty	90%
Housing Services (RCFCI)	88%
Food Bank	85%
Delivered Meals	85%
Housing Services (TRCF)	83%
Permanent Supportive Housing (H4H)	83%
NMCM Transitional Jail	78%
Outreach	73 %

Expenditures

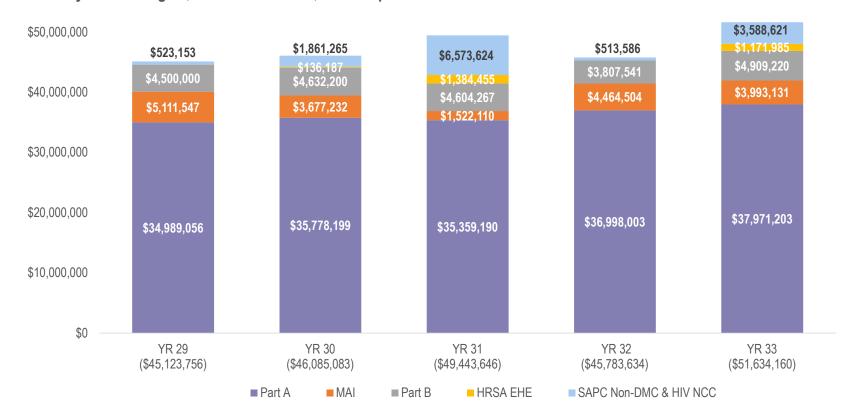
- Expenditures by Funding Source
- Expenditures by Service Category
- Expenditures per Client



RWP Expenditures by Source of Funding, Years 29-33



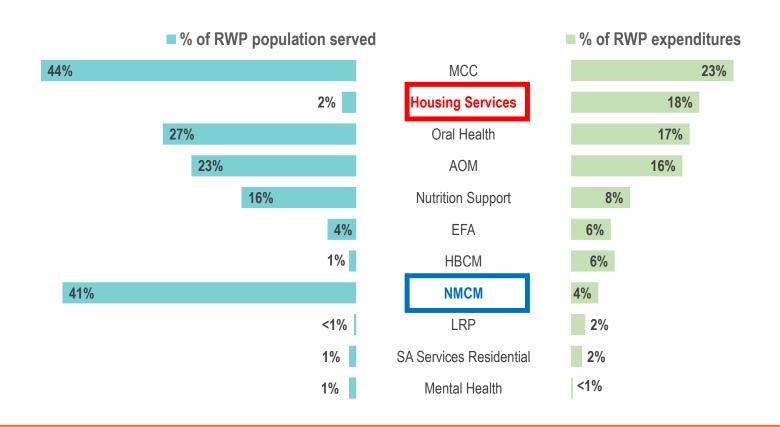
Total expenditures increased: Part A expenditures gradually increased, MAI expenditures varied due to carryover strategies, Part B was stable, other expenditures varied.



The costliest RWP service category compared to the percent of RWP population served was **Housing**; the least costly service was **NMCM**.



RWP Population Served vs Total Expenditures, Year 33



RWP Service Category Expenditures, Year 33



- The highest expenditures per client were spent for Housing Services, followed by HBCM and LRP.
- The lowest expenditures per client were spent for NMCM, Mental Health and MCC.

Service Category	Number of clients	Expenditures YR 33	Expenditures per client YR 33
Housing Services	270	\$8,440,602	\$31,261
Home-Based Case Management	120	\$2,866,908	\$23,891
Linkage Re-Engagement Program	40	\$923,044	\$23,076
Substance Abuse Services Residential - Transitional	84	\$725,000	\$8,631
Emergency Financial Assistance	617	\$2,614,115	\$4,237
Medical Outpatient	3,604	\$7,322,339	\$2,032
Oral Health	4,332	\$7,805,282	\$1,802
Nutrition Support	2,461	\$3,882,464	\$1,578
Medical Care Coordination	6,942	\$10,688,014	\$1,540
Mental Health	151	\$109,422	\$725
Non-Medical Case Management	6,553	\$1,787,095	\$273

Key Takeaways



- Utilization of RWP services remains consistent across community-based agencies
- Most of RWP clients are male, Latinx, aged 50 and older, English-speakers, living at or below FPL, with public health insurance, with permanent housing and without incarceration history
- The RWP is reaching and serving LAC priority populations

Key Takeaways – Priority Populations



- Service utilization among LAC priority populations is consistent relative to their size with the highest among RWP clients aged 50 and older, Latinx MSM and Black MSM.
- While poverty impacts all of the LAC priority populations, they are differentially impacted by SDOH:
 - The majority of RWP clients from each priority population lived at or below FPL.
 - High percentage of priority populations were Spanish-speakers and uninsured.
 - Recent incarceration (≤24m), drug use and unstable housing were more prevalent among RWP clients aged 13-29, unhoused and PWID.

Key Takeaways - Expenditures



- Part A expenditures gradually increased, MAI expenditures varied, and Part
 B was stable over 5 years. The percentage of expenditures from other sources
 increased over the years.
- Although Housing served one of the lowest percentage of RWP clients, it had the highest expenditures per client.
- Although NMCM and MCC served the largest percentage of RWP clients, per client expenditures for NMCM and MCC were the lowest.

Next Steps



- Present to SMT and COH on two major service clusters
 - Core Services (AOM, MCC, Oral Health, HBCM, Mental Health)
 - 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!

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