



# Ryan White HIV/AIDS Program Orientation for People with HIV

2022 National Ryan White Conference on HIV Care and Treatment

*August 24, 2022*

**Stephanie Pehoua**

**Branch Chief, Division of Community HIV/AIDS Programs (DCHAP)**

**HIV/AIDS Bureau (HAB)**

**Vision: Healthy Communities, Healthy People**



# Health Resources and Services Administration (HRSA)

## Overview



Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged



HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities



Every year, HRSA programs serve tens of millions of people, including people with HIV, pregnant individuals, mothers and their families, and those otherwise unable to access quality health care

# HRSA's HIV/AIDS Bureau Vision and Mission

---

## Vision

Optimal HIV care and treatment for all to end the HIV epidemic in the U.S.

## Mission

Provide leadership and resources to advance HIV care and treatment to improve health outcomes and reduce health disparities for people with HIV and affected communities.



# HRSA's Ryan White HIV/AIDS Program (RWHAP) Overview

- Provides a comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV.
- Funds grants to states, cities, counties, and local community-based organizations to improve health outcome and reduce HIV transmission.
  - Recipients determine service delivery and funding priorities based on local needs and planning process.
- Provided services to nearly 562,000 people in 2020—more than half of all people with diagnosed HIV in the United States.
- 89.4% of RWHAP clients receiving HIV medical care were virally suppressed in 2020, exceeding national average of 64.6%<sup>i</sup>.



# Learning Objectives

---

- **The components of the session will include:**
  - **A historical review of the RWHAP**
  - **The structure of the RWHAP and how each Part plays a role in providing a comprehensive system of care**
  - **Goals and impact of the program and the importance of community engagement to achieve optimal health outcomes**
  - **How to navigate the 2022 National Ryan White Conference on HIV Care & Treatment**



# History of People with HIV Voices - Highlights

- **Denver Principles – Self Empowerment manifesto**
- **Ryan White was 13 when he was diagnosed with AIDS after a blood transfusion in December 1984. He spoke out against AIDS-related stigma and discrimination**
- **The RWHAP – created in 1990 - Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. HRSA manages the program, which is the largest HIV federal grant program**
- **Greater Involvement of People with HIV/AIDS policy signed in 1994 eventually transforms into Meaningful Involvement of People with HIV/AIDS policy in 1999**



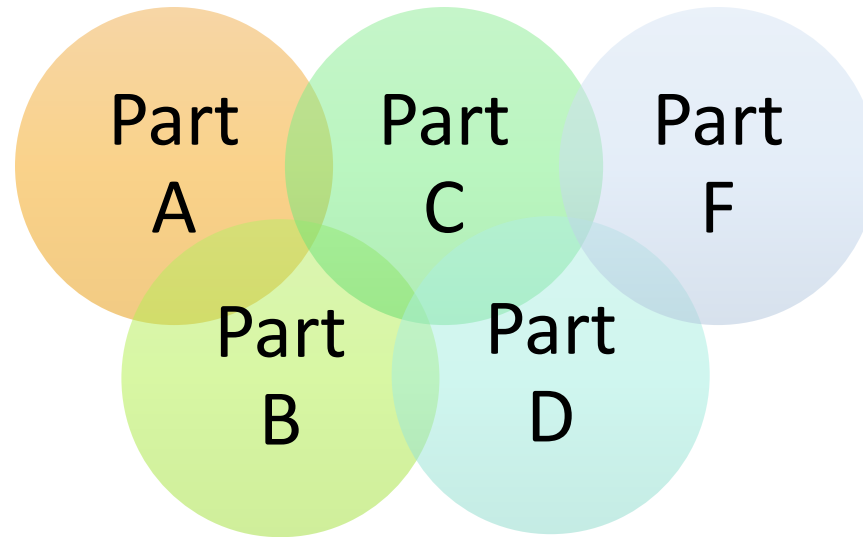
# Questions

**Who has attended this conference before?**

**What do you wish you knew before attending a National Ryan White Conference?**



# RWHAP Parts





# Ryan White HIV/AIDS Program

---

Parts A (Cities), B (States), C (Community-based organizations), and D (Community-based organizations for women, infants, children, and youth).

Services include:

- Medical care, medications, and laboratory services
- Clinical quality management and improvement
- Support services including case management, medical transportation, and other services

Part F services include:

- Clinician training, dental services, and dental provider training
- Development of innovative models of care to improve health outcomes and reduce HIV transmission among people we have not yet successfully maintained in care



# RWHAP Part A Jurisdictions

## Eligible Metropolitan Areas (EMA's)

Atlanta, GA  
Baltimore, MD  
Boston, MA  
Chicago, IL  
Dallas, TX  
Detroit, MI  
Ft. Lauderdale, FL  
Houston, TX  
Los Angeles, CA  
Miami, FL  
Nassau Suffolk, NY  
New Haven, CT  
New Orleans, LA  
New York, NY  
Newark, NJ  
Orlando, FL  
Philadelphia, PA  
Phoenix, AZ  
San Diego, CA  
San Francisco, CA  
San Juan, PR  
Tampa-St. Petersburg, FL  
Washington, DC  
West Palm Beach, FL

## Transitional Grant Areas (TGA's)

Austin, TX  
Baton Rouge, LA  
Bergen-Passaic, NJ  
Charlotte-Gastonia, NC/SC  
Cleveland-Lorain-Elyria, OH  
Columbus, OH  
Denver, CO  
Ft. Worth, TX  
Indianapolis, IN  
Jacksonville, FL  
Jersey City, NJ  
Kansas City, MO  
Las Vegas, NV  
Memphis, TN  
Middlesex-Somerset-Hunterdon, NJ  
Minneapolis-St. Paul, MN  
Nashville, TN  
Norfolk, VA  
Oakland, CA  
Orange County, CA  
Portland, OR  
Riverside-San Bernardino, CA  
Sacramento, CA  
San Antonio, TX  
San Jose, CA  
Seattle, WA  
St. Louis, MO



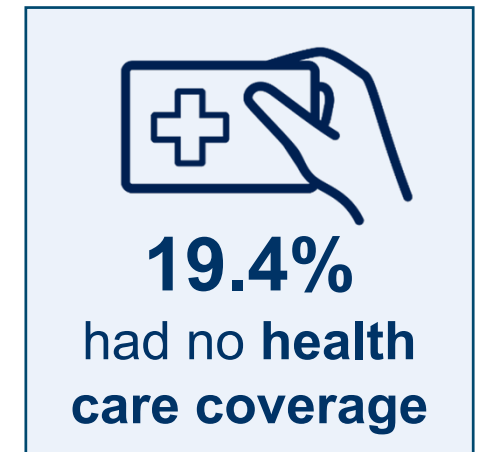
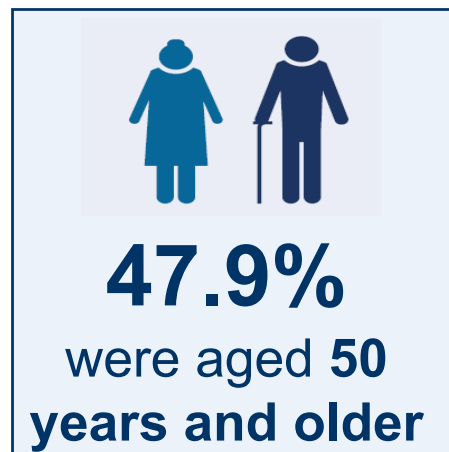
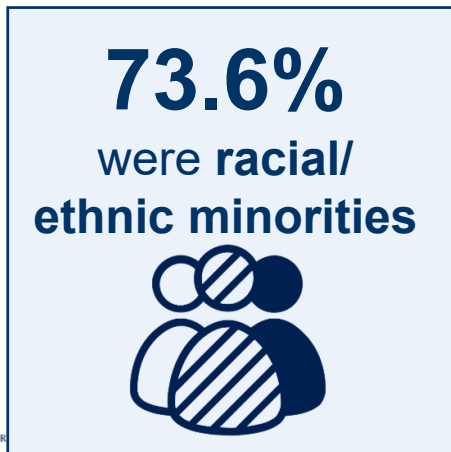
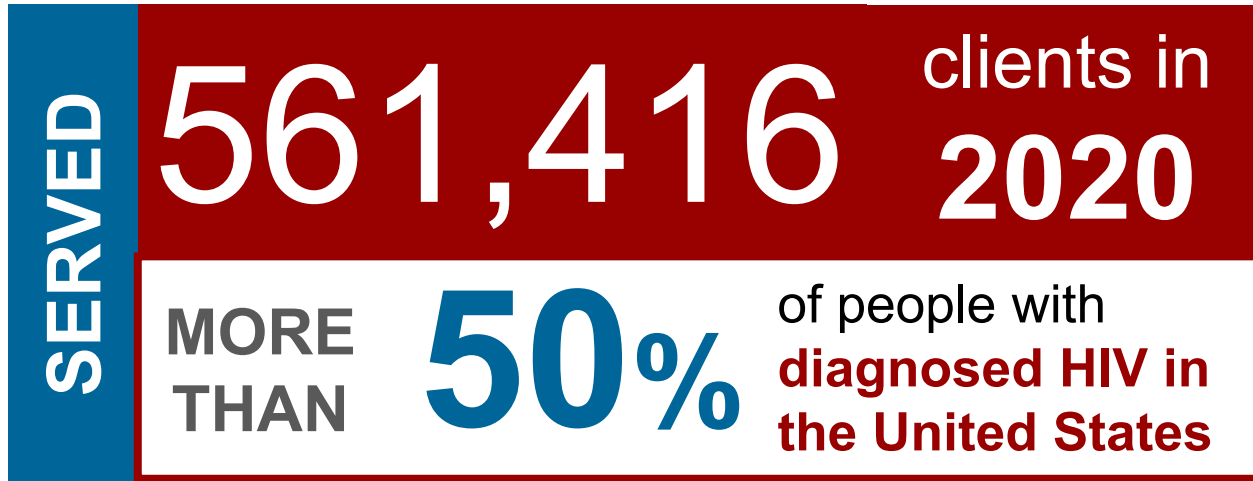
# RWHAP Services

Core Medical Services	Support Services
Outpatient/Ambulatory Health Services	Non-Medical Case Management Services
AIDS Drug Assistance Program Treatments	Child Care Services
AIDS Pharmaceutical Assistance	Emergency Financial Assistance
Oral Health Care	Food Bank/Home Delivered Meals
Early Intervention Services (EIS)	Health Education/Risk Reduction
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	Housing
Home Health Care	Other Professional Services
Home and Community-Based Health Services	Linguistic Services
Hospice Services	Medical Transportation
Mental Health Services	Outreach Services
Medical Nutrition Therapy	Psychosocial Support Services
Medical Case Management, including Treatment and Services	Referral for Health Care and Support
Substance Abuse Outpatient Care	Rehabilitation Services
Respite Care	
Substance Abuse Services (Residential)	

# 2020 RWHAP Client-Level Data



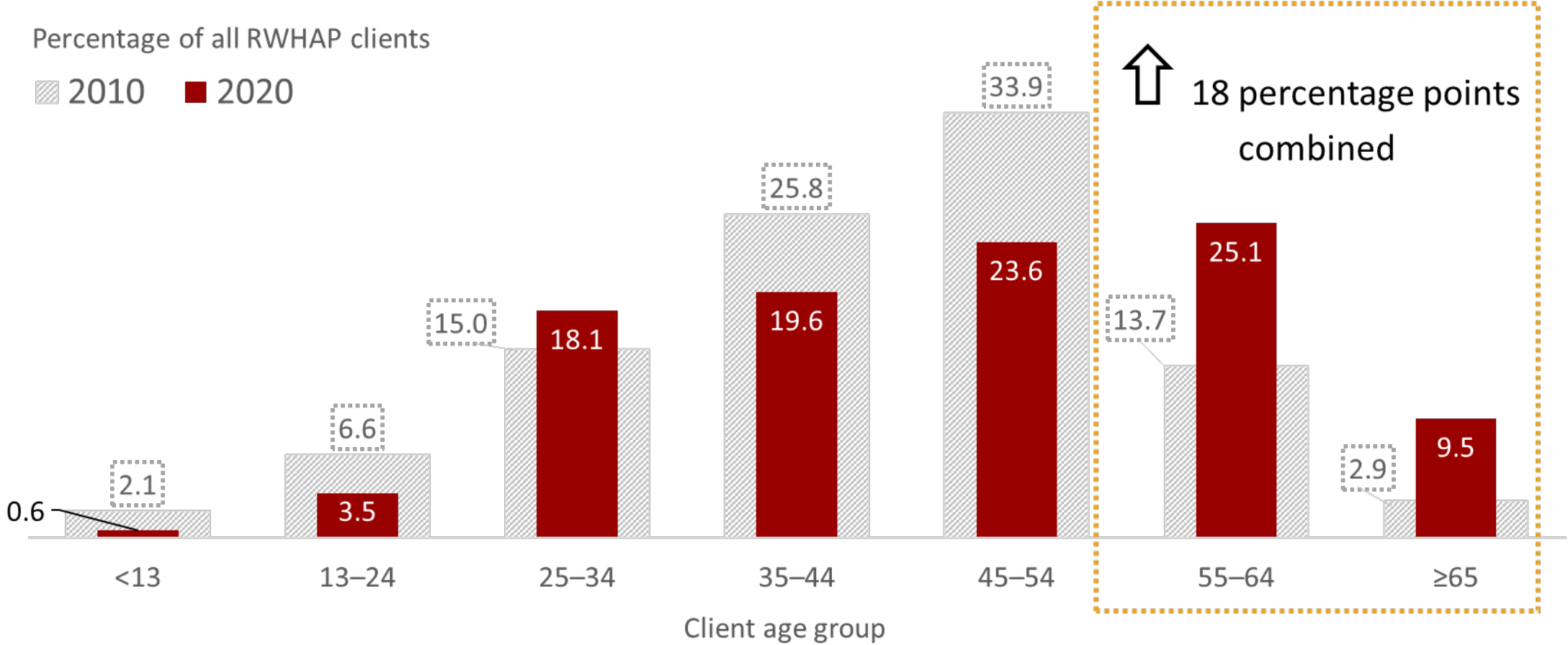
# In 2020, the RWHAP served more than half a million people in the United States and 3 territories<sup>a</sup>



<sup>a</sup> Guam, Puerto Rico, and the U.S. Virgin Islands.

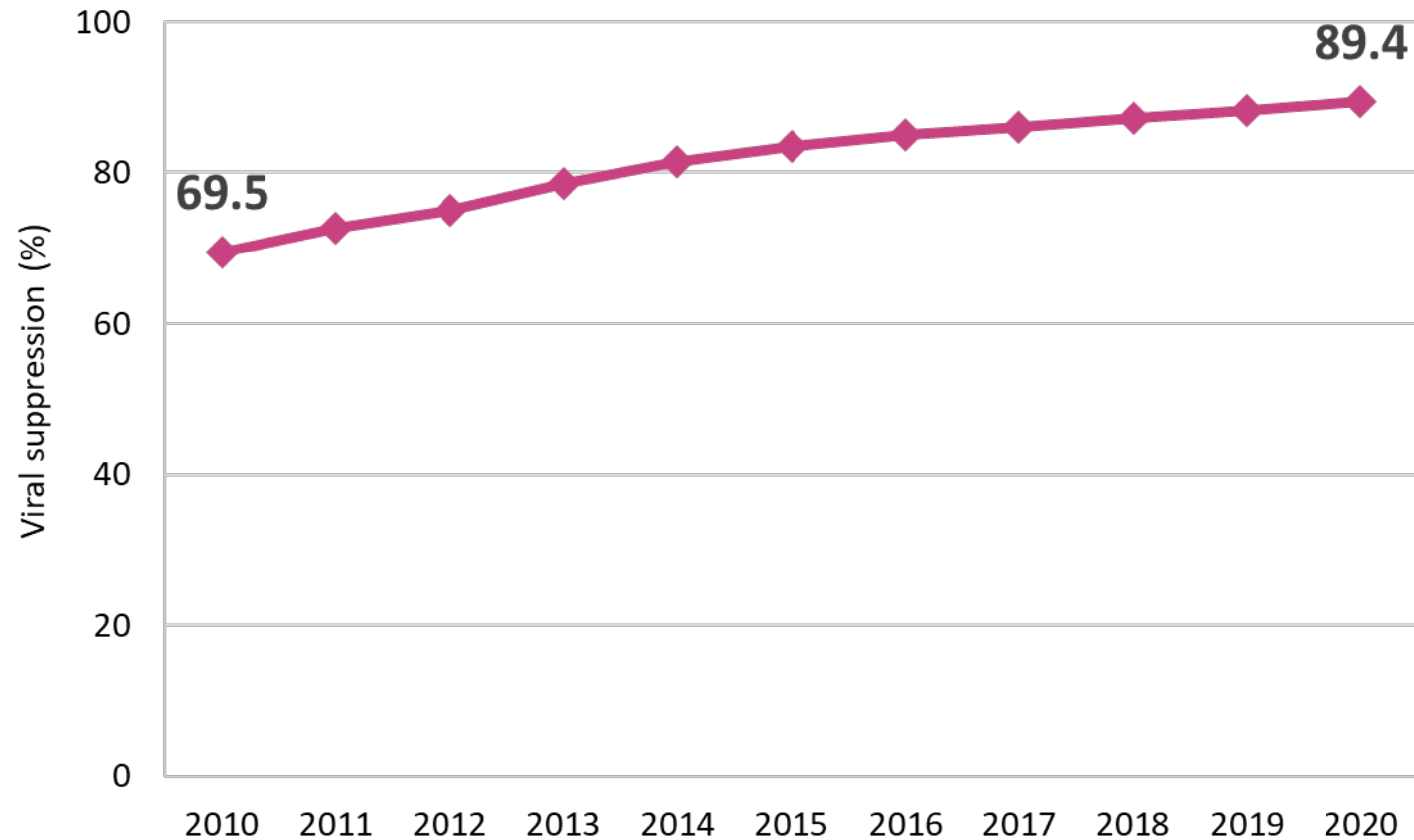


# The RWHAP population is aging: from 2010 through 2020, the percentage of clients aged 55 years and older grew by 18 percentage points



Source: HRSA. Ryan White HIV/AIDS Program Data Report (RSR) 2020. Does not include AIDS Drug Assistance Program data.

# Viral Suppression among Clients Served by the Ryan White HIV/AIDS Program (non-ADAP), 2010–2020—United States and 3 Territories<sup>a</sup>

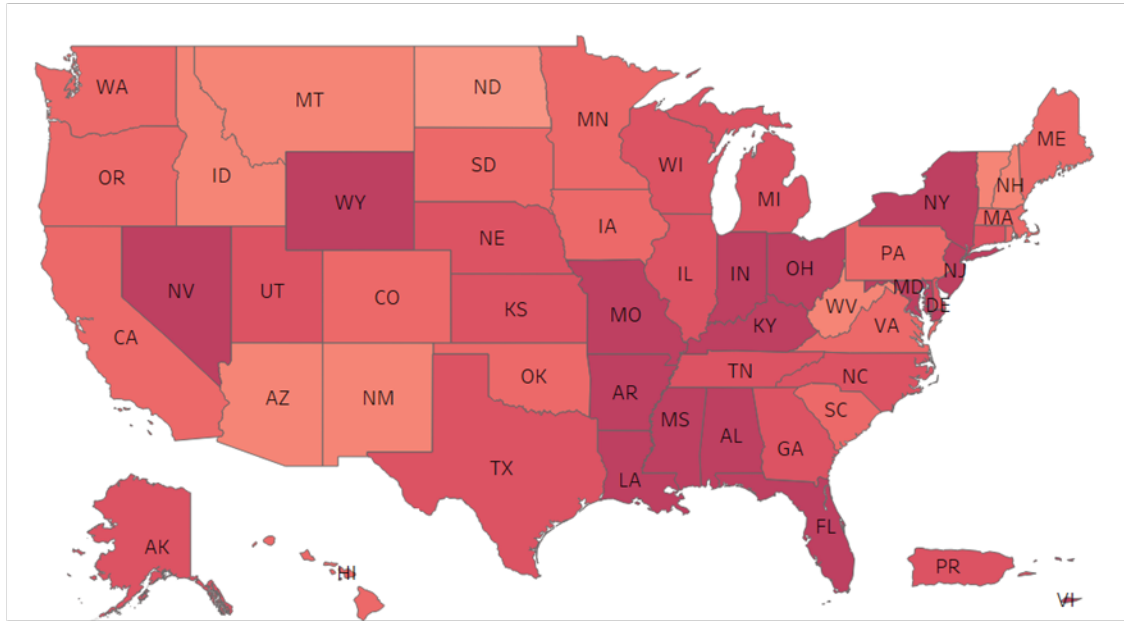


Viral suppression:  $\geq 1$  OAHS visit during the calendar year and  $\geq 1$  viral load reported, with the last viral load result  $< 200$  copies/mL.

<sup>a</sup> Guam, Puerto Rico, and the U.S. Virgin Islands.



# Viral Suppression among RWHAP Clients, by State, 2010 and 2020— United States and 2 Territories<sup>a</sup>



**IN 2010**  
**69.5%**  
**VIRALLY SUPPRESSED**

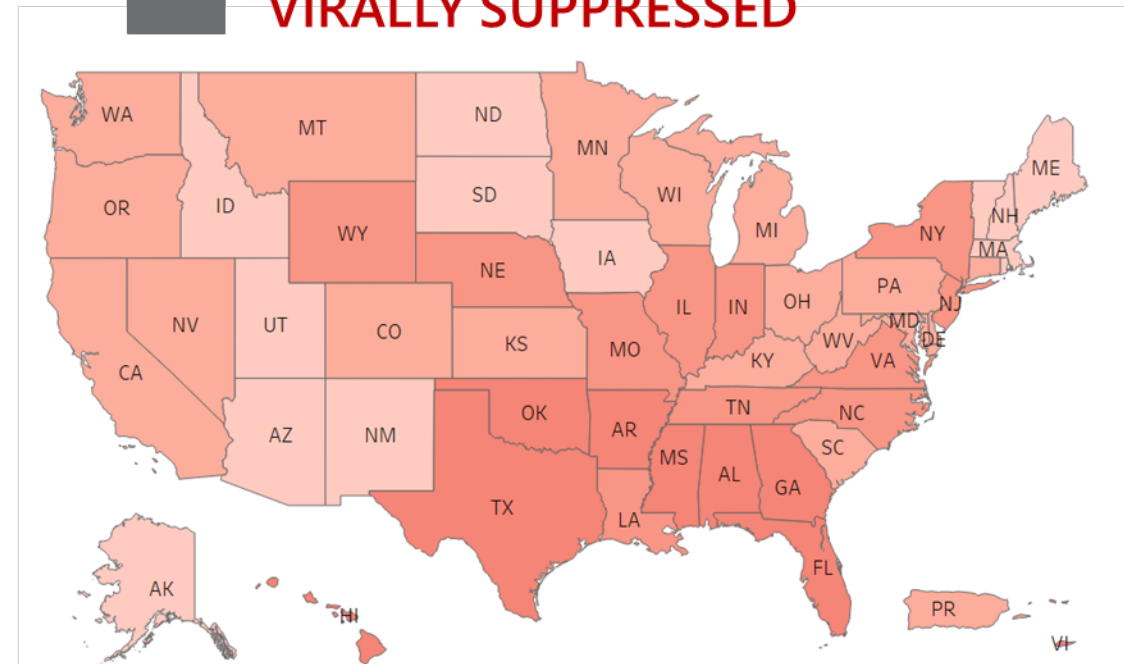
Viral Suppression (%)

- 52.9-66.9
- 70.0-72.9
- 73.0-79.9
- 80.0-87.9
- 88.0-89.9
- 90.0-92.9
- 93.0-98.8

**IN 2020**

**89.4%**

**VIRALLY SUPPRESSED**



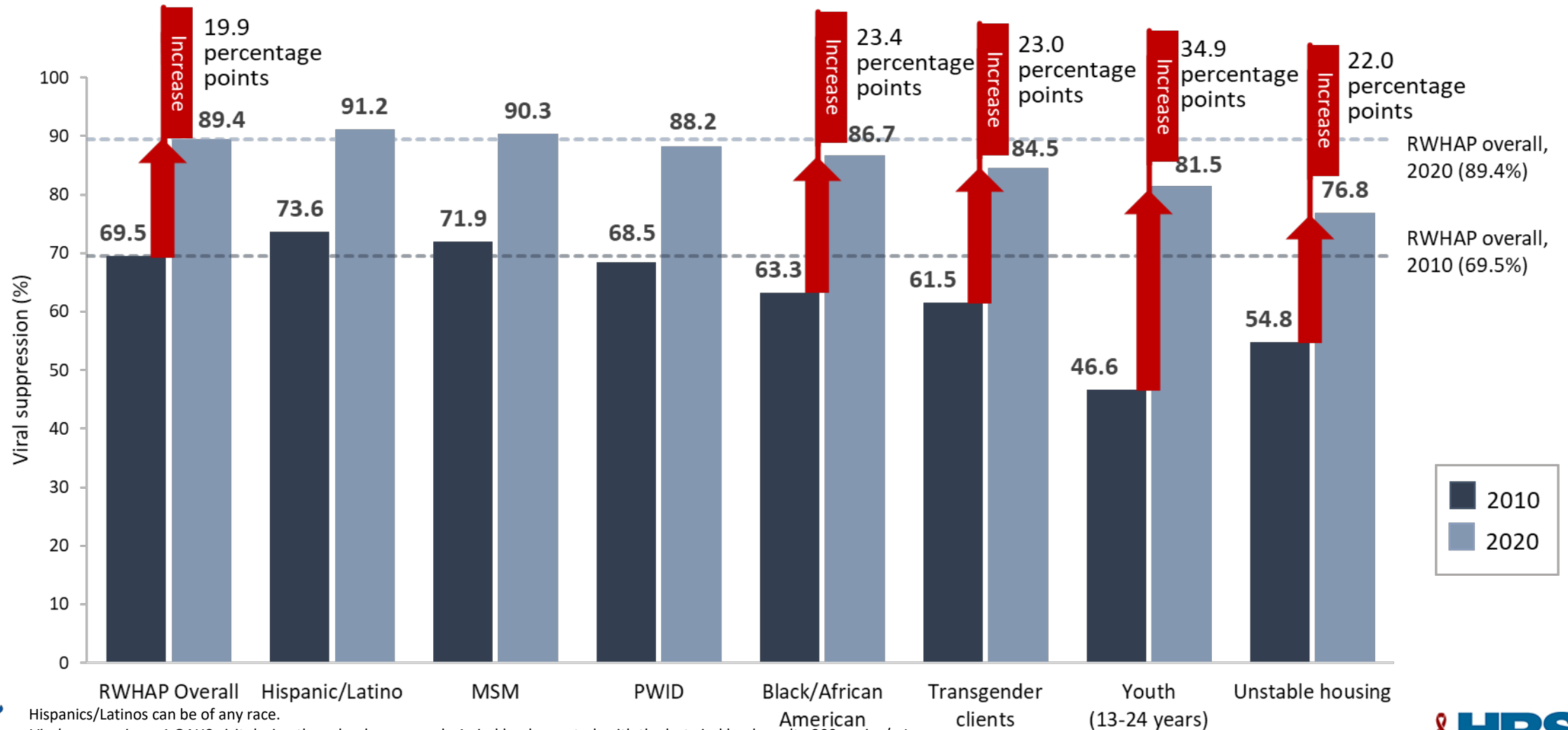
*Viral suppression: ≥1 OAHS visit during the calendar year and ≥1 viral load reported, with the last viral load result <200 copies/mL.*

<sup>a</sup> Puerto Rico and the U.S. Virgin Islands.





# Significant progress has been made in viral suppression among priority populations, but inequities remain, particularly among Black/African American clients, transgender clients, youth aged 13–24 years, and clients with unstable housing



Hispanics/Latinos can be of any race.

Viral suppression:  $\geq 1$  OAHS visit during the calendar year and  $\geq 1$  viral load reported, with the last viral load result  $< 200$  copies/mL.

<sup>a</sup> Guam, Puerto Rico, and the U.S. Virgin Islands.



# Ending the HIV Epidemic

Ending  
the  
HIV  
Epidemic

Ending  
the  
HIV  
Epidemic

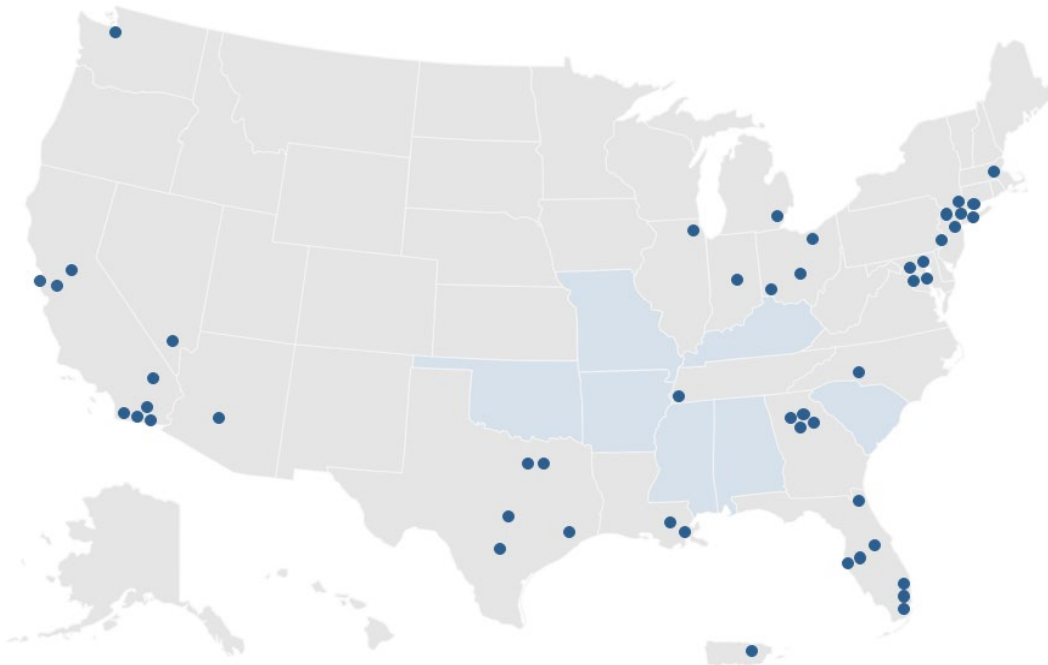
## Now is the time to end the HIV epidemic in the U.S.

We have access to the most powerful HIV treatment and prevention tools in history and we know where infections are rapidly spreading.

By equipping all communities at risk with these tools, we can end HIV in America.

# Focused Jurisdictions for the Ending the HIV Epidemic in the U.S. Initiative

Efforts focused in 48 counties, Washington, DC, and San Juan, PR, where more than 50% of HIV diagnoses occurred in 2016 and 2017, and seven states with substantial rural HIV burden.



# Four Pillars of Ending the HIV Epidemic in the U.S. (EHE)

**75%**  
reduction  
in new  
HIV  
diagnoses  
in 5 years  
and a  
**90%**  
reduction  
in 10  
years.



## Diagnose

All people with HIV as early as possible.



## Treat

People with HIV rapidly and effectively to reach sustained viral suppression.



## Prevent

New HIV transmissions by using using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs).



## Respond

Quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.



# Achieving the Ending the HIV Epidemic in the U.S. Goals

## People with HIV in care

- Improve viral suppression rates
- Decrease disparities

## People newly diagnosed with HIV

- Enhance linkage to care
- Enhance engagement in care

## People with HIV out of care

- Expand re-engagement in care
- Improve retention in care

# HRSA HIV/AIDS Bureau Ending the HIV Epidemic in the U.S. (EHE) Initiative Data Report, 2020



# Overview of Report

HRSA HIV/AIDS Bureau

Ending the HIV Epidemic in the  
U.S. Initiative

Data Report

2020

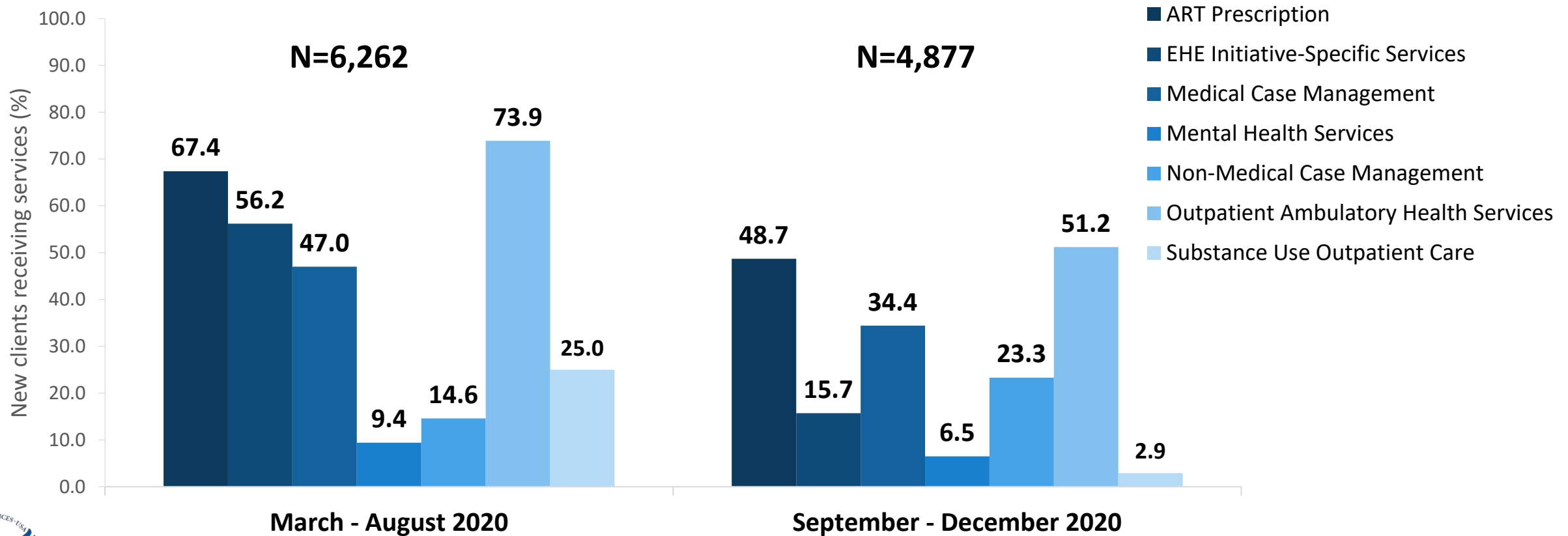


- The inaugural *2020 HRSA HAB Ending the HIV Epidemic in the U.S. Data Report* highlights data submitted to HRSA HAB through the EHE Triannual Module data system.
- EHE Triannual Module data are reported on the calendar year as opposed to budget year
- To align data reporting with the calendar year, two reporting periods were established for 2020
  - March through August (6 months)
  - September through December (4 months).



# New Clients in Care and Treatment by HRSA HAB EHE-Funded Service Providers, March–August 2020 and September–December 2020<sup>a</sup>

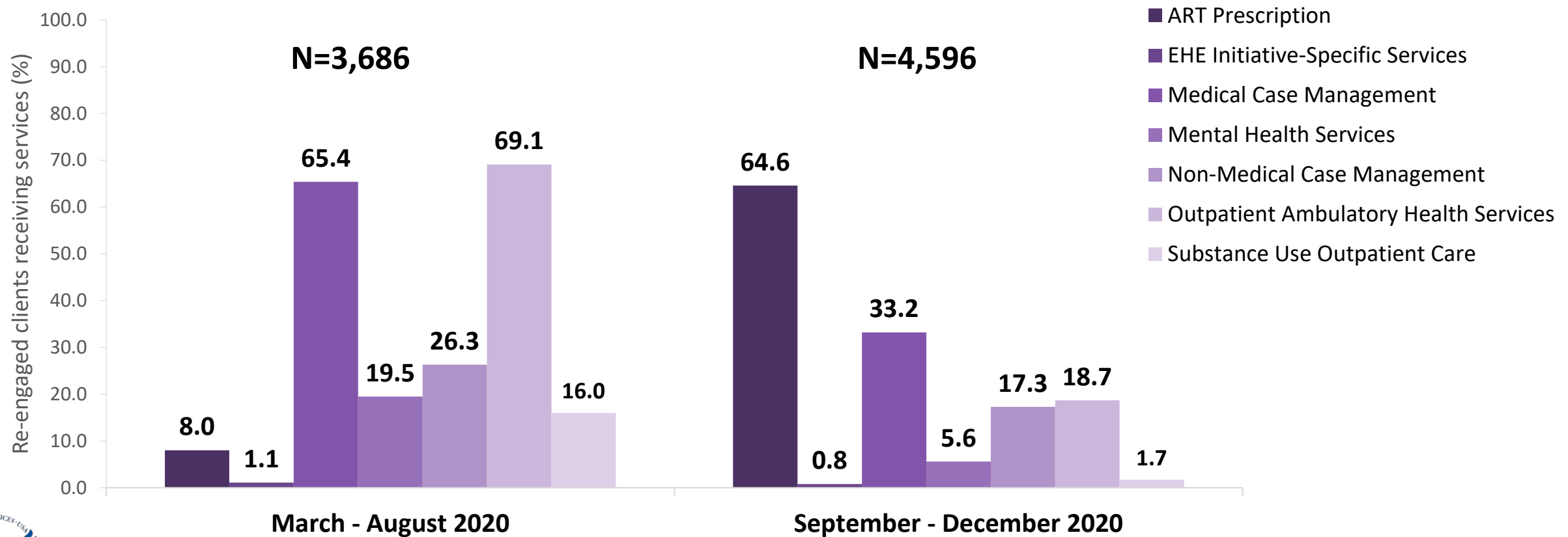
More than 11,000 clients were new to care and treatment by HAB EHE-funded Service Providers during March through December 2020.



<sup>a</sup> Unpublished data, HIV/AIDS Bureau, March through December 2020. Clients may have received multiple services and appear in each category of services received.

# Re-engaged Clients in Care and Treatment by HRSA HAB EHE-Funded Service Providers, March–August 2020 and September–December 2020<sup>a</sup>

More than an estimated 8,200 clients were re-engaged<sup>b</sup> in care and treatment by HAB EHE-funded service providers during March through December 2020.



<sup>a</sup> Unpublished data, HIV/AIDS Bureau, March through December 2020. Clients may have received multiple services and appear in each category of services received.

<sup>b</sup> Estimated based on reported numbers of total clients served, new clients, and existing clients.

# Year 1 EHE Client Data: New Clients and those Re-engaged in Care and Treatment (March–December 2020)

The year 1 EHE goal was to serve 18,000 clients

## *New Clients*

**2020 Total: 11,139**

- March – August: 6,262
- September – December: 4,877

## Re-engaged Clients

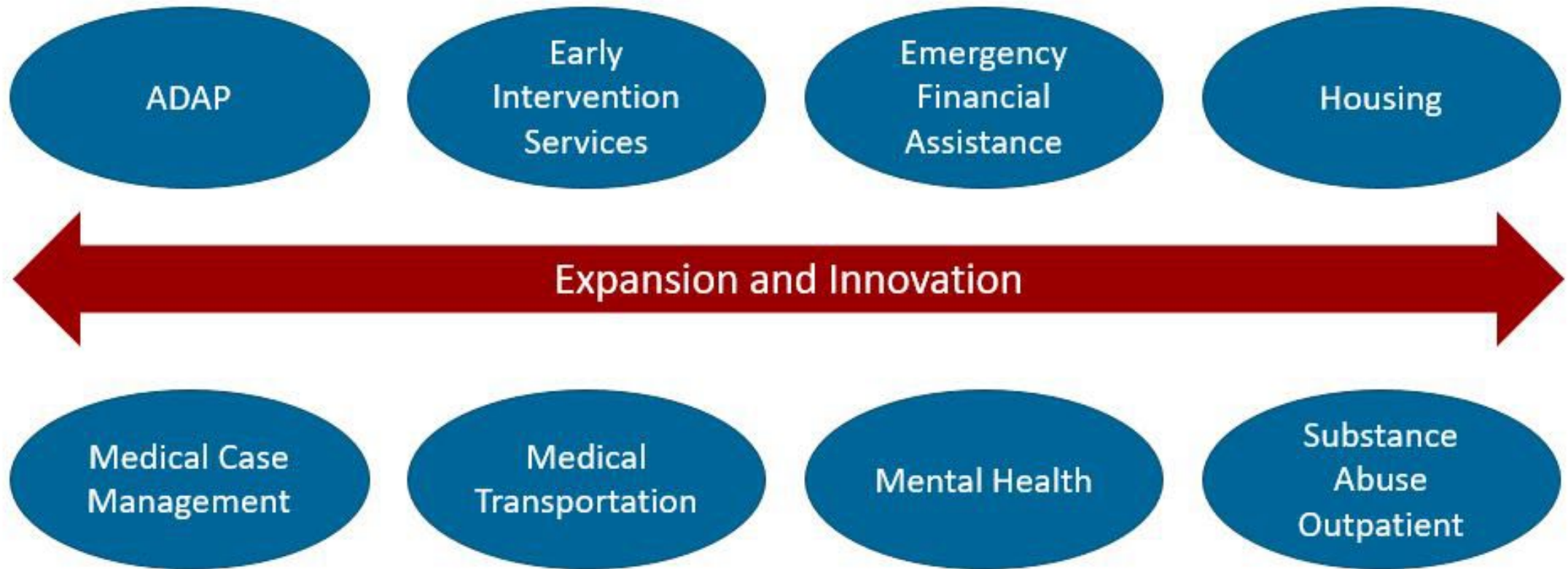
**2020 Total: 8,282**

- March – August: 3,686
- September – December: 4,596

TOTAL NEW AND RE-ENGAGED CLIENTS, 2020

 **19,421**

# EHE Recipient Activities: Expansion of RWHAP Services



# EHE Recipient Activities: Linkage to Care and Re-engagement

## Activities include:

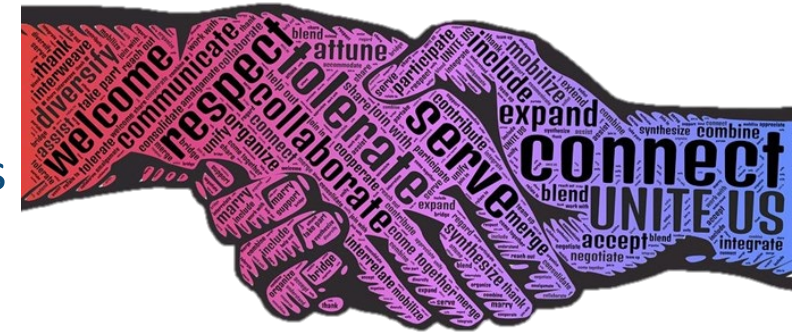
- Low barrier clinics
- Coordinated protocols that streamline client experience
- Rapid re-engagement protocols after missed appointments

## Rapid ART

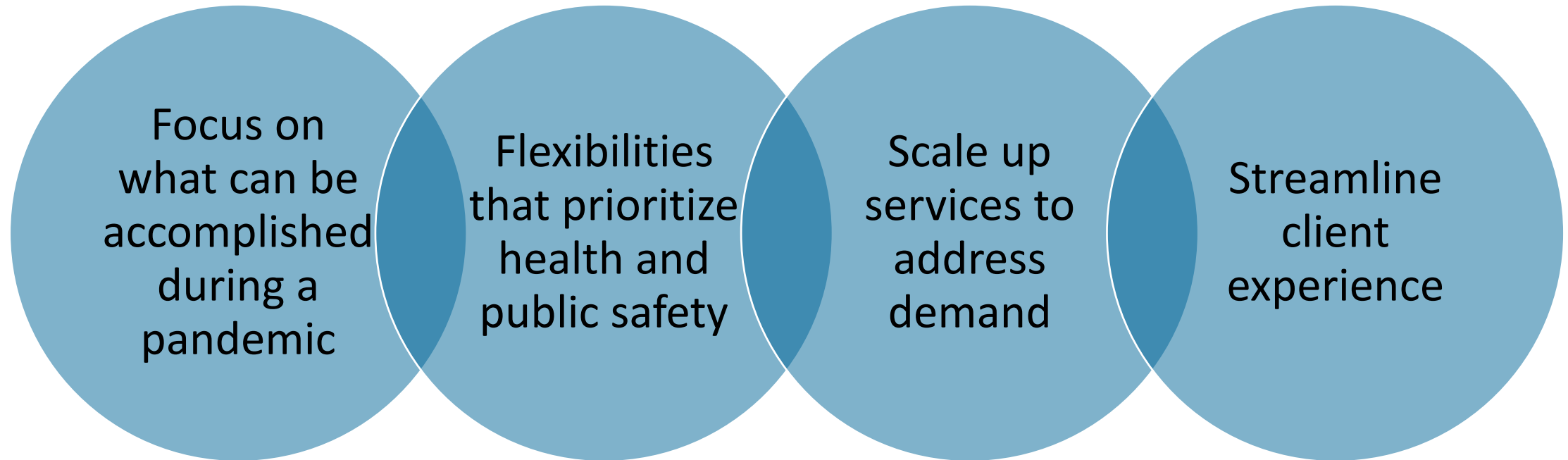
- Introduce a dedicated Rapid Linkage to Care Coordinator
- Provide treatment within 7 days of diagnosis from at-home/self-testing
- Supply ART starter packs (or 30-day supply) at conclusion of first client interaction

## The Many Roles of Peer Navigators and Community Health Workers

- Address social determinants of health
- Enroll clients in health care coverage and schedule appointments
- Provide technology and educational services navigating online medical record access



# Solutions Leveraged by EHE Recipients to Address COVID-19



**HRSA HAB-funded staff & resources allowed states and cities to better respond to COVID-19**



# Contact Information

---

**Stephanie Pehoua**

**Branch Chief, Division of Community HIV/AIDS Program**

**HIV/AIDS Bureau (HAB)**

**Health Resources and Services Administration (HRSA)**

**[spehoua@hrsa.gov](mailto:spehoua@hrsa.gov)**

**(301) 945-9821**

**Web: <https://ryanwhite.hrsa.gov/>**



# Connect with the Ryan White HIV/AIDS Program

Learn more about our program at our new website:

[ryanwhite.hrsa.gov](https://ryanwhite.hrsa.gov)



Sign up for the Ryan White HIV/AIDS Program Listserv:

<https://public.govdelivery.com/accounts/USHSHRSA/signup/29907>



# Connect with HRSA

Learn more about our agency at:

[www.HRSA.gov](http://www.HRSA.gov)



[Sign up for the HRSA eNews](#)

FOLLOW US:

