NATIONAL PARAMETER STREAMENT



Core Medical Services Waiver

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Need for Core Services Waiver

- Implementation of Affordable Care Act increased access to healthcare services
- New resources (funding) for Core Medical Services
- Expanded access (overall health care, emergency services, in-patient hospital care)
- Need to increase funding and staffing for essential support services that help ensure linkage and engagement in care
- Flexibility of allocations to address identified need and service utilization trends



Need for Waiver (Continued)

The following was identified as a significant need:

- Assistance applying for insurance benefits
- Assistance finding a physician and HIV specialist under insurance benefits
- Assistance needed navigating a new system of care including accessing laboratory and pharmaceutical services



Approach to Waiver Submission

- Follow directions on waiver application
- Identify key partners for obtaining support letters:
 - Director of State Part B (HIV/AIDS Director)
 - Director of ADAP
 - State Medicaid Representative
 - Planning Council Chair
- Develop timeline to get required information:
 - Medicaid data may be difficult to obtain and may require a written request
 - Data regarding funding from all Ryan White Parts, HOPWA, CDC, etc. may be difficult to obtain
- Submit request <u>BEFORE</u> Part A Application



Projected Benefits and Outcomes

- Increased access and utilization of healthcare services for overall health needs
- Ability to provide essential supportive (wrap around) services to help individuals remain engaged in care
- Decreased Case Management case loads and more time for client care
- Restructuring of Case Management services to best meet the needs of clients
 - Peer support services
 - ➤ Linkage to Care utilizing Anti-retroviral Treatment and Access to Services (ARTAS) evidence-based intervention
 - Medical Retention Services for high acuity/medically fragile clients
 - Client Support Services to assist medically stable individuals in accessing support services



- Waiver has been successfully submitted/approved annually since 2012
- Funding is maximized to best address the needs of PLWH in Orange County
- Services are delivered in accordance with service utilization trends
- Services are implemented to address strategies for:
 - Reducing new HIV infections
 - Increasing access to care and optimize outcomes for PLWH
 - Reducing HIV-related health disparities
- Improvements along the Ryan White HIV Care Continuum



Goal 1: Reducing new HIV Infections

Objective:	Baseline (2015)	2017	2021 Goal
Reduce number of new HIV diagnosis	300	303	223
Reduce the HIV Transmission Rate (per 100 PLWH)	5.0	4.5	3.0



Goal 2: Increase Access to Care and Optimize Health Outcomes for PLWH

Objective:	Baseline (2015)	2017	2021 Goal
Increase proportion of newly diagnosed linked to medical care within one month of diagnosis	38.7%	54.8%	65.0%
Increase the percentage of persons diagnosed who are virally suppressed	66.1%	65.3%	80.0%

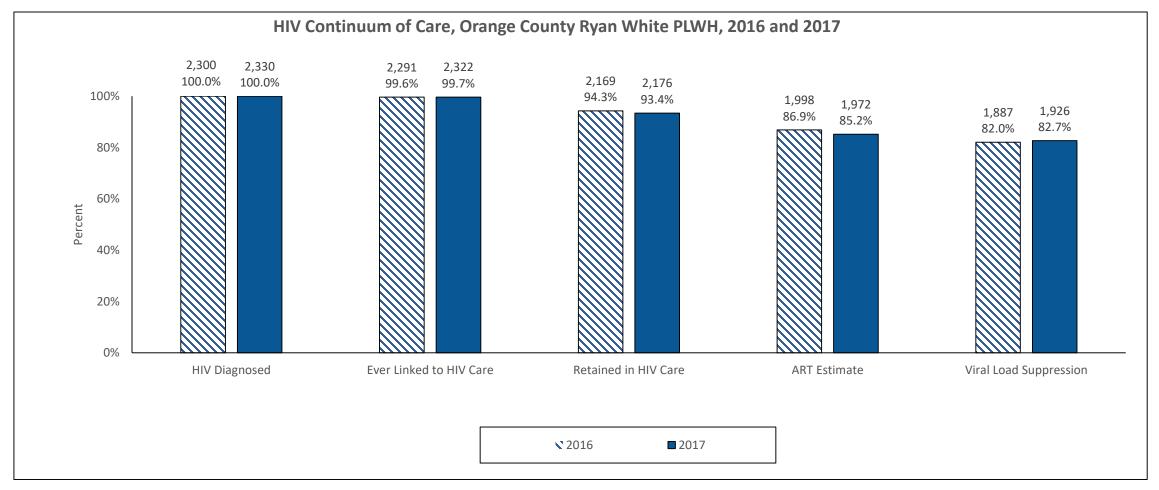


Goal 3: Reduce HIV-related Health Disparities

Objective:	Baseline (2015)	2017	2021 Goal
Reduce disparities in the rate of new diagnoses in gay and bisexual men (per 100,000)	40.8	36.3	36.4
Increase the percentage of youth ages 13-24 who are virally suppressed	59.1%	60.3%	74.0%



Ryan White HIV Care Continuum





Lessons Learned

- Waiver application was denied and had to be resubmitted
- Incorporate waiver discussion into priority setting and resource allocation process
- Maintain contact lists to gather required documentation:
 - Required support letters
 - Funding allocations from various funding sources
- Conduct needs assessments to identify service gaps and justify increased funding to support services
- Do not hesitate to ask colleagues for a copy of their application if you have never submitted an application (borrow shamelessly)

