2009 Comprehensive Strategic Plan Analyses

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Presentation Overview

- Background
- Data Sources Used
- 2009 Ryan White Clients Served
- Objectives 1-4
- Objective 5 Update
- Discussion and next steps

Background

- The Ryan White HIV/AIDS Treatment Modernization Act mandated that planning councils develop a comprehensive plan for the organization and delivery of HIV-related services
- HRSA guidance was used to develop a plan that would comply with Ryan White legislation and meet the needs of PLWHA in the NYC and Tri-County areas
- The current plan is for the 2009-2012 review period
- Today's presentation will focus on Year 1 – 2009
- Baseline data (2008) were updated for all data sources to reflect refined methodology in measuring the indicators

Monitoring Progress on Plan Indicators: Data Sources

1. **Required client-level Ryan White data reported by contractors**
   a. AIDS Institute Reporting System (AIRS) Data
   b. Electronic Medical Record (EMR) Data (two agencies only)
   c. Allows analysis by Ryan White services received
   d. Limited by providers' completeness of reporting
   e. NYC DOHMH only receives Tri-County data from EIS programs
2. **HIV/AIDS Reporting System (HARS) data from NYC DOHMH HEFSP***
   a. Provider Reporting Forms (PRF) Data
   b. Electronic Laboratory Data
   c. Laboratory test data are more complete in HARS than in AIRS
3. **Rapid testing data from NYC DOHMH HIV Prevention Program**
   a. Represents all agencies with NYC DOHMH funding for testing
   b. Reporting is on tests conducted (test-level vs. client-level)

** HIV Epidemiology and Field Services Program, Surveillance Unit*

Monitoring Progress on Plan Indicators: Data Sources

4. **The Community Health Advisory and Information Network (CHAIN) Study**
   a. Longitudinal study (conducted by Columbia University with DOHMH and WCDOH) of PLWHA in NYC and Tri-County
   b. Data are from interviews with persons recruited from agencies providing social services and/or medical care
   c. NYC and Tri-County data are combined for all CHAIN-based indicators

5. **The Medical Monitoring Project (MMP)**
   a. Cross-sectional study (conducted by NYC DOHMH HEFSP and CDC) of PLWHA in New York City
   b. Data are from interviews with persons recruited from HIV medical care facilities (including private physicians' offices)

As the quality, completeness and breadth of required data from Ryan White Part A providers improves, CHAIN and MMP data may no longer be needed for these analyses.

Demographics of Ryan White Clients

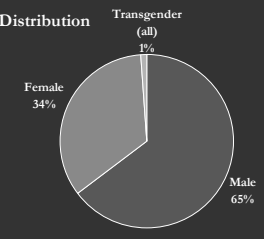
Contract Year 2009

Demographics of Persons Living with HIV/AIDS in 2009

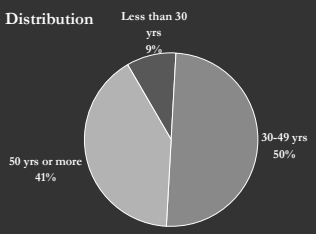
	RW Part A HIV Positive Clients		Citywide HIV Positive Cases	
	N	%	N	%
Total clients	26,578	100.00%	108,886	100.00%
Gender				
Female	9,105	34.20%	31,873	29.30%
Male	17,174	64.60%	77,013	70.70%
Transgender Female	279	1.00%		
Transgender Male	20	0.00%		
Age group (years)				
Less than 30	2450	9.20%	9,463	8.70%
30-49	13,239	49.80%	56,286	51.70%
50 or more	10,889	40.90%	43,137	39.60%
Race/Ethnicity				
Black	12,673	47.60%	48,764	44.80%
Hispanic	9,571	36.00%	35,502	32.60%
White	2,281	8.50%	22,195	20.40%
Asian/Pacific Islander	319	1.20%	1695	1.60%
Other	1,734	6.50%	293	0.30%
Unknown			437	0.40%
Borough				
Manhattan	6,188	23.20%	32,811	30.10%
Brooklyn	7,379	27.70%	26,889	24.70%
Bronx	8,058	30.30%	23,248	21.40%
Queens	3,119	11.70%	15,538	14.30%
Staten Island	783	2.90%	1,909	1.80%
Missing	1,051	3.90%	326	0.30%
Outside NYC			8,165	7.50%
DPHO				
Bronx	8,058	30.30%	12,552	11.50%
Brooklyn	7,379	27.70%	12,832	11.80%
Manhattan	5,210	19.60%	7,452	6.80%
Non-DPHO Chelsea Clinton	978	3.60%	6,103	5.60%
Other Non-DPHO	4,953	18.60%	69,947	64.20%

Demographics: Ryan White HIV Positive Clients Served, 2009

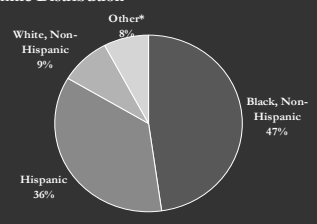
Gender Distribution



Age Distribution

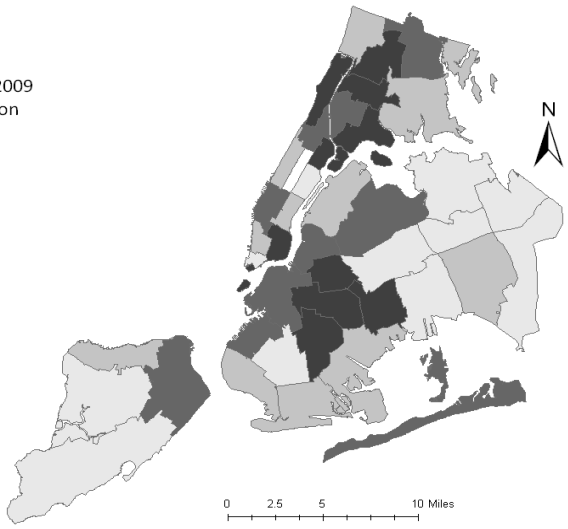


Racial/Ethnic Distribution



*The 'Other' racial/ethnic category includes individuals who identify as Asian/Pacific Islander/Hawaiian, Native American or multiracial. These groups are collapsed into a single category to maintain confidentiality (due to small numbers within the component racial/ethnic groups).

2009 Ryan White Clients Served by Residential UHF Neighborhood



The DPHOs are home to the highest proportions of RW clients served throughout New York City with the Bronx DPHO having the highest concentration of RW clients.

Goals, Objectives and Indicators

Year 1 (2009)

Goal 1

Increase the number of individuals who are aware of their HIV status

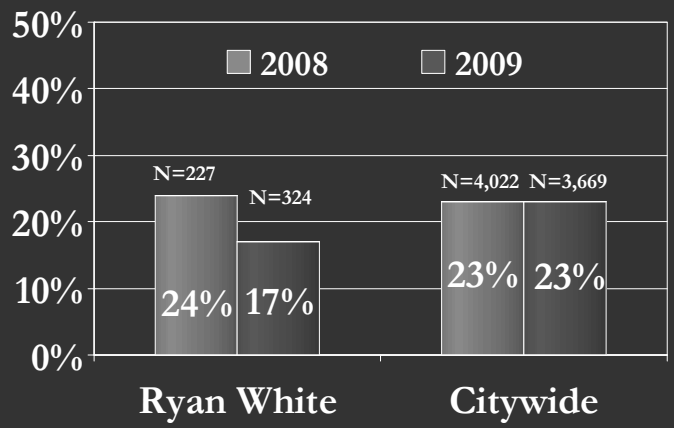
Objective 1A: Increase the number of individuals receiving HIV rapid tests by 2012

	Ryan White 2009			Citywide 2009
	All Regions	NYC	Tri-County‡	
Total No. of Individuals Tested	60,132	58,554	1,578	
Total No. of Rapid Tests Conducted				**291,804**

‡Tri-county data are for Ryan White only (non-RW-funded programs in Tri-county do not report to DOHMH).

Additional Notes:
1. 1.2% of Ryan White clients had preliminary positive results; 0.9% of NYC rapid tests were preliminary positive.
2. There was an 18% increase in the number of rapid tests conducted Citywide from 2008 to 2009 and a 62% increase in the number of individuals tested by Ryan White programs during the same time frame.

Objective 1B: Concurrent Diagnoses



Objective 4A: Reduce disparities in the number of individuals with delayed HIV diagnosis

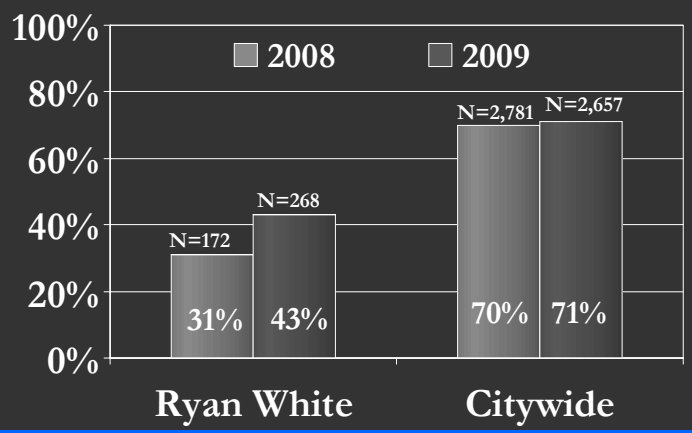
		Ryan White	Citywide
No. (%) of Concurrent HIV/AIDS Diagnoses		**56 (17)**	**859 (23)**
Gender	*Male*	35 (17)	656 (24)
	Female	20 (19)	203 (23)
Race/Ethnicity	*Black , non-Hispanic*	32 (17)	433 (25)
	Hispanic	19 (18)	283 (24)
	White, non-Hispanic	3 (13)	111 (18)
	Other	2 (2)	32 (26)
Age	*Less than 30 years*	7 (13)	145 (12)
	30-49 years	28 (18)	472 (26)
	50 years or older	21 (19)	242 (39)
DPHO	*DPHO*	52 (20)	293 (24)
	Non-DPHO	4 (6)	566 (23)

- **A larger proportion of persons 50 years or older had concurrent diagnoses, in RW and Citywide**
- **Within Ryan White, a larger proportion of DPHO-residing clients had concurrent diagnoses compared to Non-DPHO-residing clients**

Goal 2

Promote early entry into and retention in care

Objective 2A: Prompt Linkage to Care



Ryan White reporting showed a significant increase in the proportion of newly diagnosed clients documented as linked to care within three months of their confirmatory test date (p=0.016).

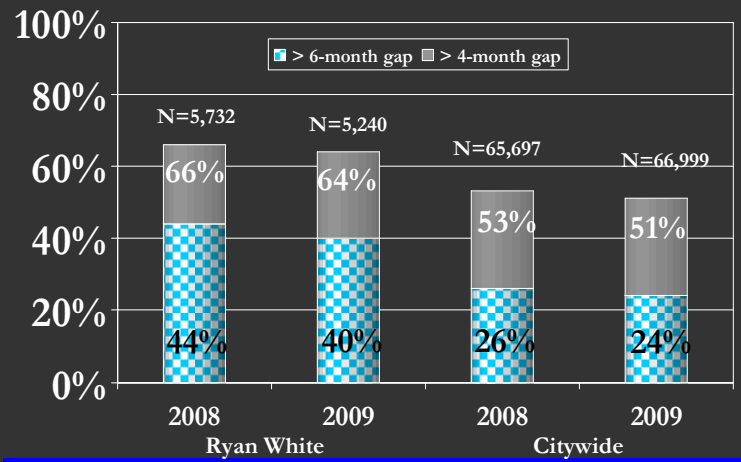
Objective 4B: Reduce disparities in linkage to care

		Ryan White	Citywide
No. (%) of newly diagnosed persons with timely linkage to care		116 (43)	1,893 (71)
Gender	*Male*	76 (43)	1,407 (70)
	Female	39 (45)	486 (75)
Race/Ethnicity	*Black , non-Hispanic*	72 (47)	855 (67)
	Hispanic	35 (42)	619 (73)
	White, non-Hispanic	7 (35)	355 (80)
	Other	2 (20)	64 (75)
Age	*Less than 30 years*	29 (60)	713 (70)
	30-49 years	50 (38)	952 (74)
	50 years or older	37 (42)	228 (68)
DPHO	*DPHO*	94 (46)	620 (71)
	Non-DPHO	22 (34)	1,273 (71)

A larger proportion of RW clients under 30 had documentation of prompt linkage to care, compared to other age groups.

Smaller proportions of White, non-Hispanic or Other and Non-DPHO RW clients had documentation of prompt linkage to care, compared to other racial/ethnic groups and DPHO-residing clients, respectively.

Objective 2B: Retention in Care



Gaps in care were significantly reduced Citywide, and within RW, there was a significant decline in the proportion of clients with a greater-than-6-month gap in documented care from 2008 to 2009 (p<0.0001).

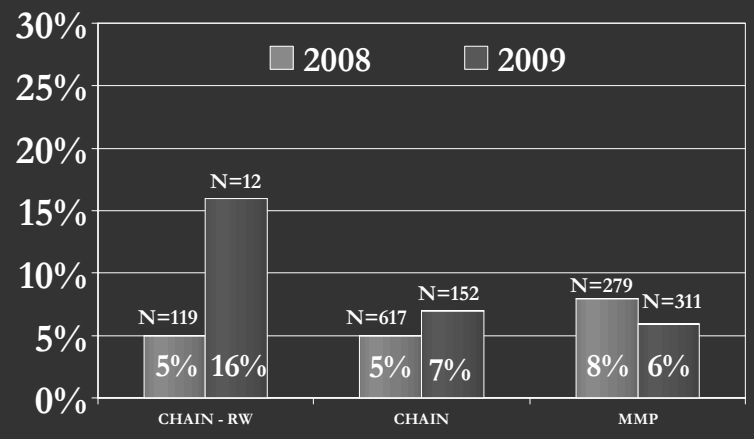
Objective 4C: Reduce disparities in retention in care

		Ryan White	Citywide
No. (%) of individuals with a greater-than-4-month gap in care		3,357 (64.1)	34,148 (51.0)
Gender	*Male*	1,898 (65.1)	23,652 (51.4)
	Female	1,425 (62.8)	10,496 (50.0)
Race/Ethnicity	*Black , non-Hispanic*	1,209 (63.3)	15,440 (51.5)
	Hispanic	1,313 (64.1)	10,468 (46.7)
	White, non-Hispanic	132 (71.4)	7,519 (57.2)
	Other	703 (63.9)	721 (49.9)
Age	*Less than 30 years*	267 (58.3)	3,259 (54.6)
	30-49 years	1,437 (66.9)	19,790 (53.8)
	50 years or older	1,653 (62.8)	11,099 (45.8)
DPHO	*DPHO*	2,778 (64.9)	10,306 (48.6)
	Non-DPHO	579 (60.4)	23,842 (52.1)

A smaller proportion of RW clients under 30 had greater-than-4-month gaps in documented care, compared to other age groups.

A larger proportion of White, non-Hispanic RW clients had greater-than-4-month gaps in documented care, compared to other racial/ethnic groups.

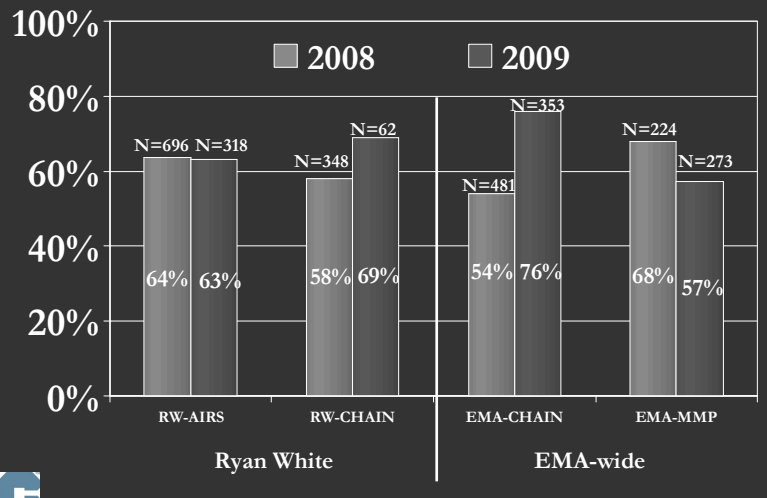
Objective 2C: Reduce Emergency Department Visits



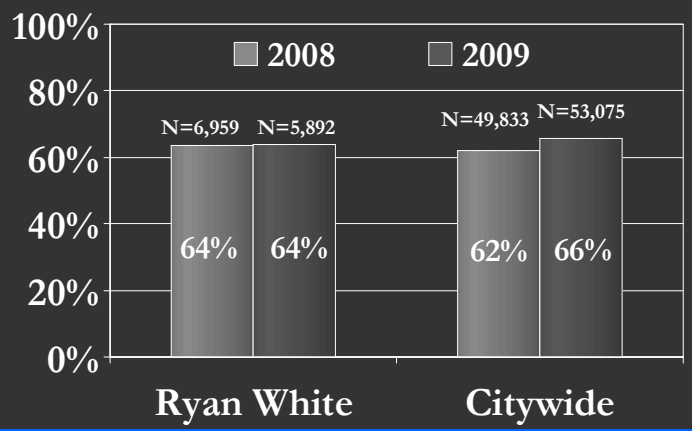
Goal 3

Promote optimal management of HIV infection

Objective 3A: Adherence to Antiretroviral Therapy

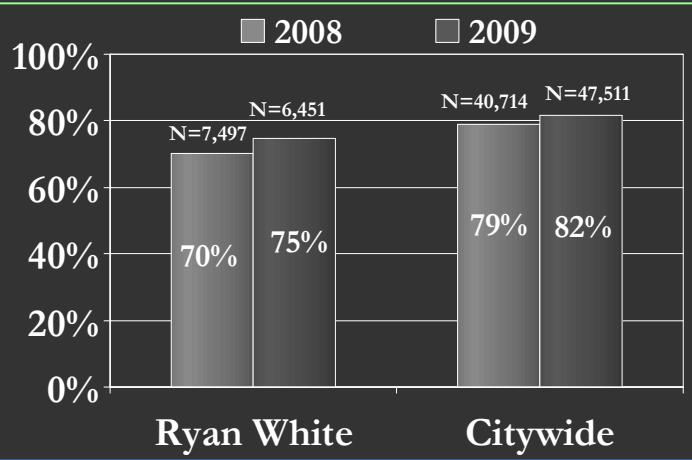


Objective 3B: Viral Suppression



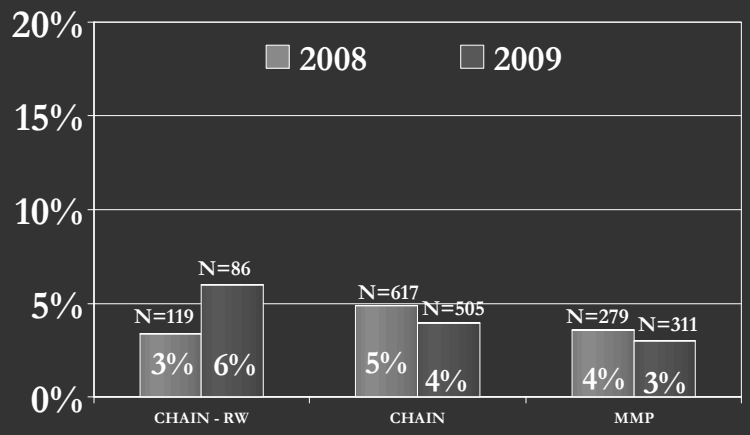
Among Ryan White clients, there was no significant change in the proportion with viral suppression, despite a significant increase Citywide (p<0.0001).

Objective 3C: Immunological Health



Among Ryan White clients and Citywide cases, there were significant increases in the proportion of individuals with improved immunologic function (p<0.0001).

Objective 3D: Reduce Hospitalizations



Goal 5

Economic Evaluation of Ryan White Part A Services

Updates: Economic Evaluation Plan

- Plan was presented to the Planning Council by the SUNY Downstate consulting team, June 2010.
- NYC DOHMH is exploring options for implementing a cost-effectiveness analysis with:
  (a) CHAIN data, or
  (b) eSHARE data.
- First analyses will begin after June 2011, due to:
  - Previously prioritized CHAIN reports in progress now;
  - Need to staff the project at NYC DOHMH;
  - Newness of eSHARE – need for program data over time.

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- **Nina Rothschild, DrPH**
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- **Mary Irvine, DrPH, Ellenie Tuazon, MPH & Folake Eniola, MPH**
  (Research and Evaluation Unit, NYC DOHMH HIV Care, Treatment and Housing Program)

Resource Slides

Supporting Tables for
Indicator Graphics

Objective 1B:
To decrease delayed diagnosis of HIV by 2012

	Ryan White		*Citywide*	
	2008	**2009**	**2008**	**2009**
Total No. of New Diagnoses	227	324	4,022	3,669
No. (%) of Concurrent HIV/AIDS Diagnoses	55 (24%)	56 (17%)	941 (23%)	859 (23%)

Objective 2A:
To increase the number of newly diagnosed individuals who are linked to care within three months of their HIV diagnosis by 2012

	Ryan White		Citywide	
	2008	2009	2008	2009
Total No. of Newly Diagnosed Individuals	172	268	2,781	2,657
No. (%) of Newly Diagnosed Clients with timely (within 3 months) linkage to care	54 (31%)	116 (43%)	1,954 (70%)	1,893 (71%)

Objective 2B:
To increase retention in HIV care and treatment by 2012

	Ryan White		***Citywide***	
	2008	**2009**	**2008**	**2009**
Total No. of Eligible Clients	5,732	5,240	65,697	66,999
No.(%) of PLWHA with a >4-month gap in care	3,767 (66%)	3,357 (64%)	34,536 (53%)	34,148 (51%)
No.(%) of PLWHA with a >6-month gap in care	2,496 (44%)	2,106 (40%)	16,989 (26%)	15,990 (24%)

Objective 2C: To decrease visits to the emergency department by 2012

	Ryan White	EMA-wide	
	CHAIN*	CHAIN	MMP
Total No. of Eligible Clients	12	152	311
No.(%) of Clients with more than one ED visit in 2008	2 (16%)	10 (7%)	18 (6%)
Mean Number of ED visits among clients with ED visit history	2.5	2.5	2.7

**The CHAIN clients included are specifically those who appeared to be enrolled in a Ryan White Medical Case Management program during their recall period*

Objective 3A: To improve medication adherence to at least 95% by 2011

	Ryan White		EMA-wide	
	AIRS	CHAIN*	CHAIN	MMP
Total No. of Eligible Clients	318	62	353	273
No.(%) of Clients adherent to medication	201 (63%)	43 (69%)	268 (76%)	156 (57.1%)

**The CHAIN clients included are specifically those who appeared to be enrolled in a Ryan White Medical Case Management program during their recall period*

Objective 3B:
To increase viral suppression by 2011

	Ryan White		Citywide	
	2008	2009	2008	2009
Total No. of Eligible Clients	6,959	5,892	49,833	53,075
No. (%) achieving/maintaining viral suppression	4,426 (64%)	3,763 (64%)	31,034 (62%)	34,916 (66%)

Objective 3C:
To increase immunologic health (CD4 counts) by 2011

	Ryan White		Citywide	
	2008	2009	2008	2009
Total No. of Eligible Clients	7,497	6,451	40,714	47,511
No. (%) achieving/ maintaining CD4 counts equal to or above 200	5,254 (70.1%)	4,820 (74.7%)	32,179 (79%)	38,751 (81.6%)

Objective 3D: Hospitalizations

	Ryan White		EMA-wide	
	AIRS*	CHAIN**	CHAIN	MMP
Total No. of Eligible Clients	19	86	505	311
No.(%) of Clients with more than one hospitalization in 2009	17 (89.5)	5 (6%)	21 (4%)	10 (3%)
Mean Number of hospitalizations among eligible clients with more than one hospital stay	3.7	2.6	3.3	3.6

**AIRS data on hospitalizations is only available from the Medical Case Management service category at this time*
***The CHAIN clients included are specifically those who appeared to be enrolled in a Ryan White Medical Case Management program during the recall period*

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