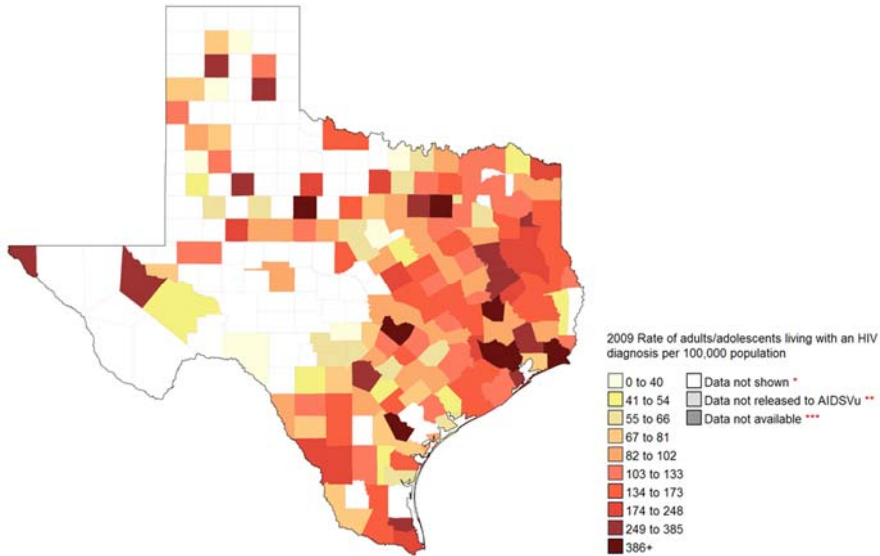


“How to Best Meet The Need” Workgroup #2

Overview of Data for the FY 2021 Decision- Making Process

Ryan White Planning Council Office of Support
Workgroup #2: 1:30 pm
Tuesday, April 21, 2020

Setting the Stage

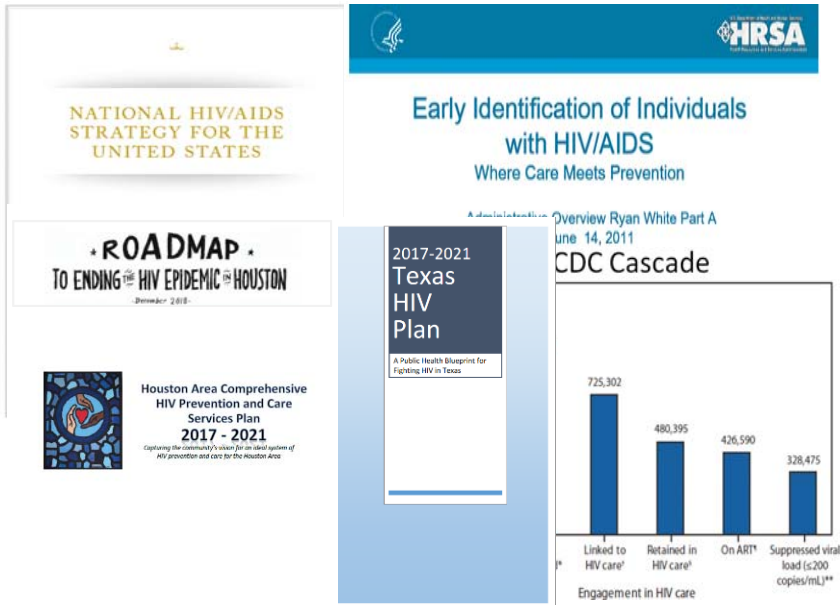


HIV in the Houston Area

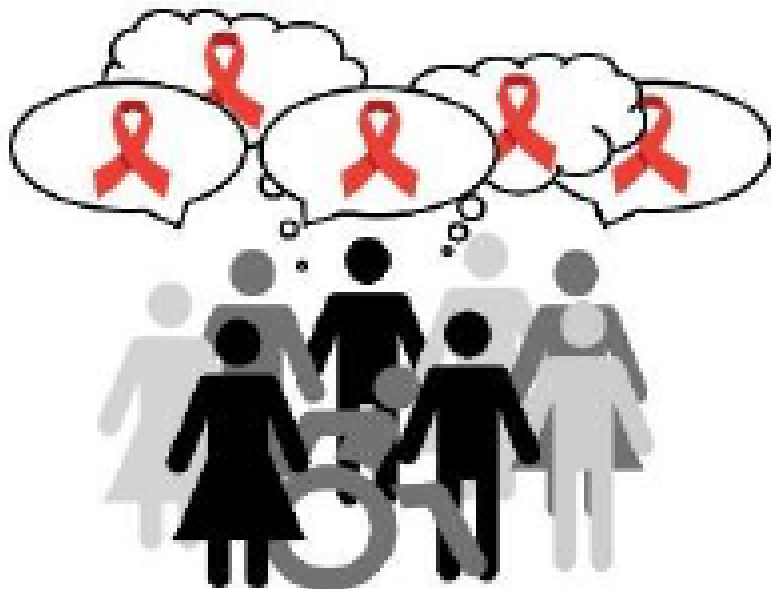


Unmet Need –
Who is Out-of-Care?

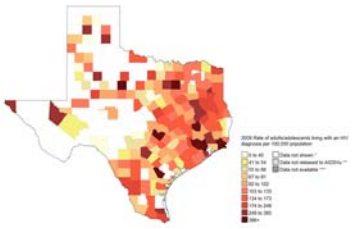
For Each Service Category



National, State, and Local HIV Priorities



Needs Assessment Data –
Voice of the Consumer



HIV in the Houston Area

Q. How many people are living with HIV in the Houston EMA?

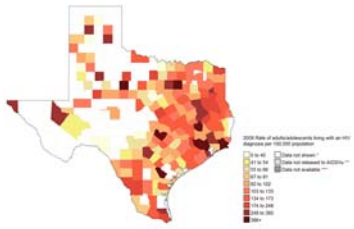
A. 29,078 diagnosed people were living with HIV (**PLWH**) in the EMA at the end of 2018. 1,350 PLWH were newly diagnosed in 2018.

Q. Who is living with HIV in the Houston EMA?

All PLWH	PLWH Newly Diagnosed in 2018
<ul style="list-style-type: none"> 75% are male (sex at birth) 	<ul style="list-style-type: none"> 78% are male (sex at birth)
<ul style="list-style-type: none"> 48% are Black/African American; 29% are Hispanic/Latino 	<ul style="list-style-type: none"> 44% are Black/African American; 37% are Hispanic/Latino
<ul style="list-style-type: none"> 26% are between the ages of 45 and 54; 23% were between the ages of 35 and 44 	<ul style="list-style-type: none"> 36% are between the ages of 25 and 34; 23% were between the ages of 13 and 24
<ul style="list-style-type: none"> 58% have MSM designated as transmission risk factor 	<ul style="list-style-type: none"> 78% have MSM designated as transmission risk factor

Q. How many people are living with HIV and unaware of their status?

A. It is estimated that an additional 6,825 people in the EMA are undiagnosed.



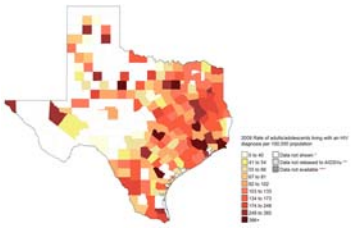
HIV in the Houston Area

Q. Which groups does HIV disproportionately affect in the Houston Area?

A. Using the total 2018 Houston EMA HIV diagnosis rate (21.6 per 100,000 population) as a benchmark, the following populations experience disproportionately higher rates of new HIV diagnoses:

- 149% higher rate among Black/African Americans individuals
- 138% higher rate among individuals age 25-34
- 58% higher rate among males (sex at birth)
- 38% higher rate among individuals age 13-24
- 29% higher rate among individuals age 35-44
- 11% higher rate among individuals age 45-54

While there has been no change in **which** groups experience disproportionately higher new diagnoses since 2013, the **extent of disproportionality** within each population group **has** changed in the Houston EMA. Individuals ages 25-34 experienced the greatest increase in extent of disproportionality with a 19 percentage point increase, followed by Hispanic/Latinx individuals with a 13 percentage point increase in disproportionality.



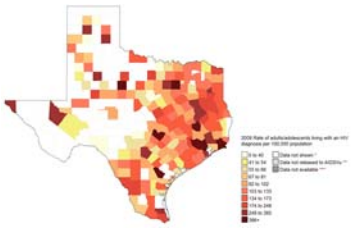
HIV in the Houston Area

Though not yet adequately reflected in local-level epidemiologic data, individuals who are transgender/gender non-conforming, intersex, experiencing homeless, or recently released from incarceration are also understood to be disproportionately affected.

Q. Which groups are experiencing increasing rates of new HIV diagnoses in the Houston Area?

A. Relative rates of increase (or lagging relative rates of decrease) for new HIV diagnoses can indicate new and emerging populations. Though the overall HIV diagnosis rate decreased by 9% between 2013 and 2018, one populations in the Houston EMA have experienced an increase in the relative rates of new diagnoses:

- 5% relative rate increase among Hispanic/Latino individuals



HIV in the Houston Area

Q. Which groups are at greatest risk for late diagnosis in the Houston Area?

A. Of all new diagnoses in the Houston EMA in 2016, **306, or 22%**, also received an Stage 3 HIV (formerly AIDS) diagnosis **within 3 months**.

Populations disproportionately impacted by late/concurrent diagnoses in the Houston EMA in 2016 include:

- Females (sex at birth) – 23%
- Hispanic/Latino individuals – 27%
- Ages 35-44 – 30%
- Ages 45-54 – 34%
- Ages 55-64 – 34%
- Ages 65+ – 30%
- PWIDU risk factor – 33%
- Heterosexual risk factor – 28%



Unmet Need--*Who is Out of Care?*

Q. **What is unmet need?**

A. Unmet need is when a person diagnosed with HIV is not in HIV medical care. To be out of care, a person has had none of the following in a 12 month period: (1) an HIV medical visit, (2) an HIV monitoring test (either a CD4 or viral load), or (3) a prescription for HIV medication.

Q. **How many PLWH are out of care in the Houston EMA?**

A. In 2018, there were 7,187 people are out of care in the EMA, or 25% of all diagnosed PLWH.

Q. **Who is out of care in the Houston EMA?**

A. The highest proportions of people out of care in 2017 were:

- 25% of males (sex at birth)
- 28% of other race/ethnicity
- 26% of Black/African American
- 31% of PLWH age 65+
- 26% of diagnosed PLWH age 35-44
- 28% of diagnosed PLWH with an injection drug use risk factor
- 28% of diagnosed PLWH with perinatal transmission risk factor
- 26% of people diagnosed with HIV before 2011



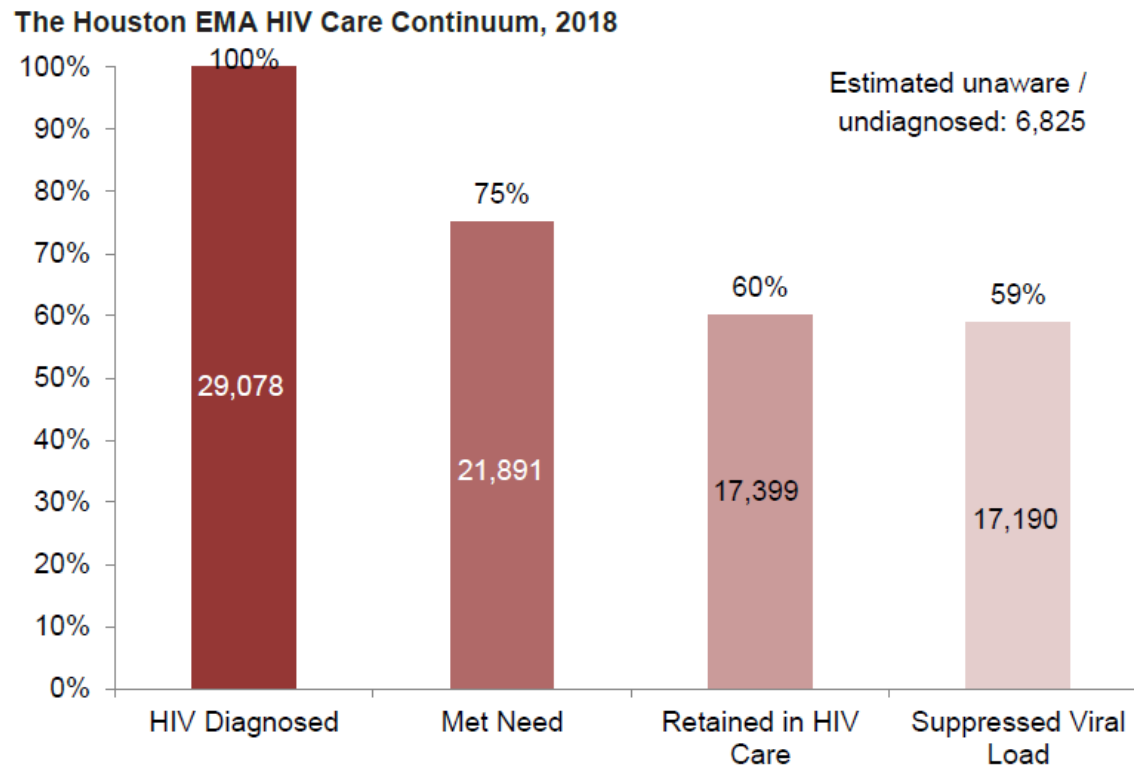
National, State, and Local Priorities for Care

- Q. What national, state, and local initiatives and plans outline priorities for HIV care in the Houston Area?**
- A.** Ending the HIV Epidemic: A Plan for America (EHE)(2019)
The National HIV/AIDS Strategy (NHAS) Updated to 2020 (2015)
Early Identification of Individuals with HIV/AIDS (EIIHA)
HIV Care Continuum
The 2017-2021 Texas HIV Plan
Texas Achieving Together Plan (2018)
Houston Area Comprehensive HIV Plan (2017 – 2021)
Houston END HIV Roadmap (2017-2021)



National, State, and Local Priorities for Care

- Q. In general, what priorities do national, state, and local plans share related to HIV care?**
- A. They outline improvements along the HIV care continuum, and identify populations in need of focused attention for HIV care. Recent priorities also incorporate plans to end the HIV epidemic.



Data represented for PLWH in the Houston EMA between 1/1/2018 and 12/31/2018.

Methodology:

HIV Diagnosed: No. of HIV-diagnosed people, and residing in the Houston EMA, 2018. Source: Texas eHARS

Met Need: No. (%) of PLWH in Houston EMA with met need (at least one: medical visit, ART prescription, or CD4/VL test) in year.

Source: Texas DSHS HIV Unmet Need Project (incl. eHARS, ELR, ARIES, ADAP, Medicaid, private payer data)

Retained in HIV Care: No. (%) of PLWH in Houston EMA with at least 2 medical visits, ART prescriptions, or CD4/VL tests in year, at least 3 months apart

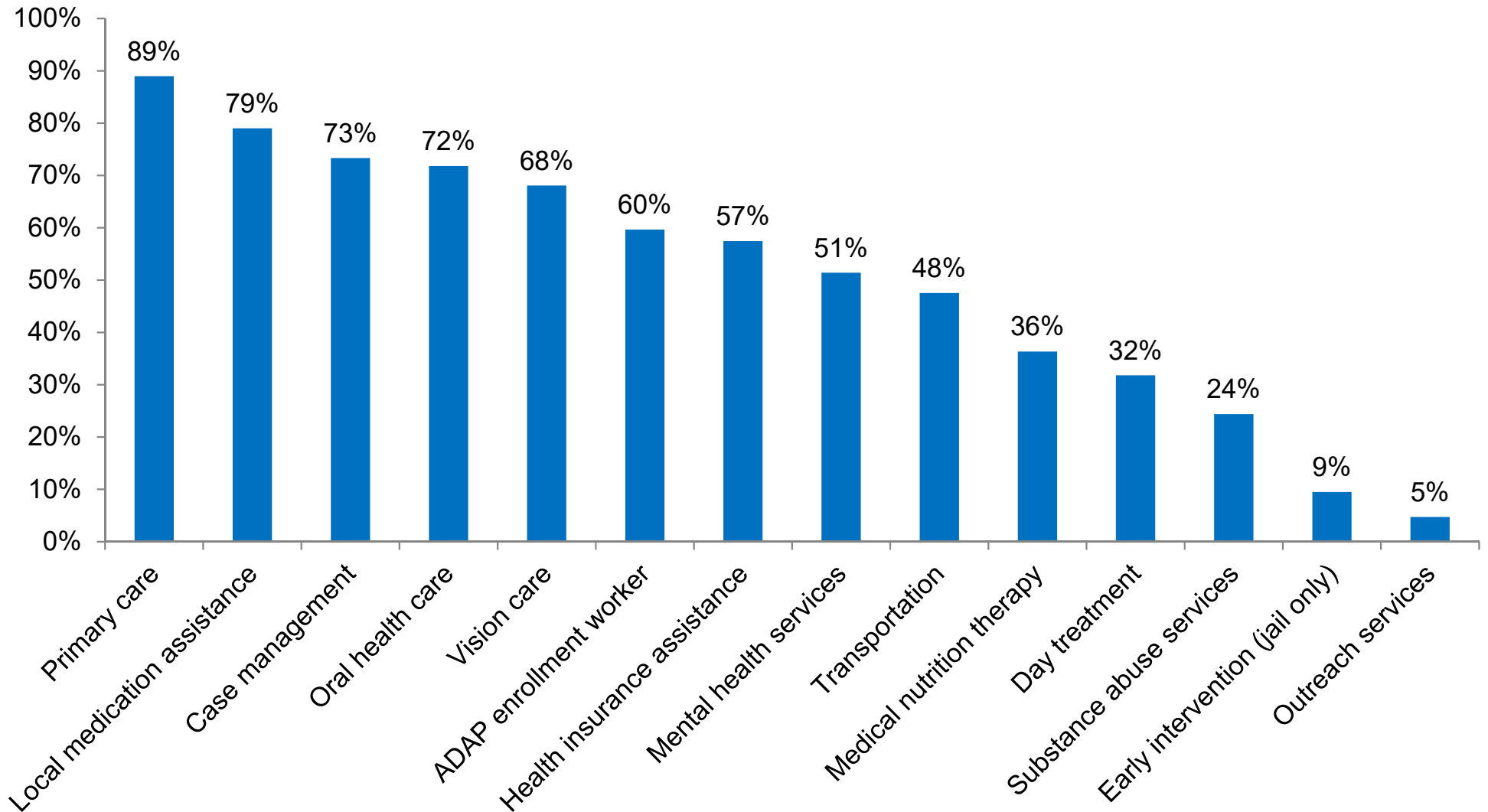
Suppressed Viral Load: No. (%) of PLWH in Houston EMA whose last viral load test of the year was ≤ 200 copies/mL. Source: Texas ELRs, ARIES labs, ADAP labs



Needs Assessment Data

Overall Ranking of Need

Ranking of Funded HIV Services in the Houston Area, By Need, 2020

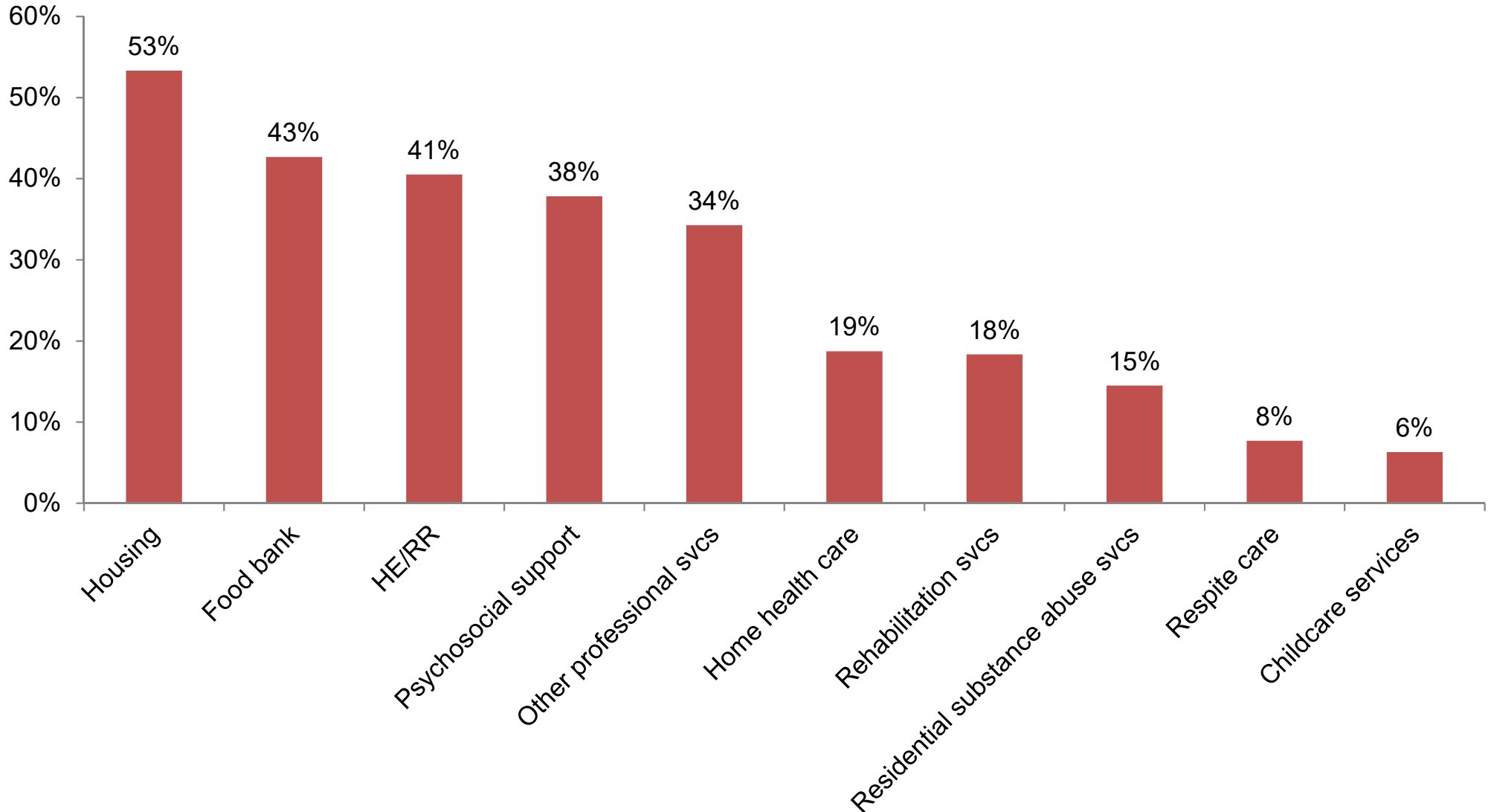




Needs Assessment Data

Overall Ranking of Need

Ranking of Unfunded HIV Services in the Houston Area, By Need, 2020

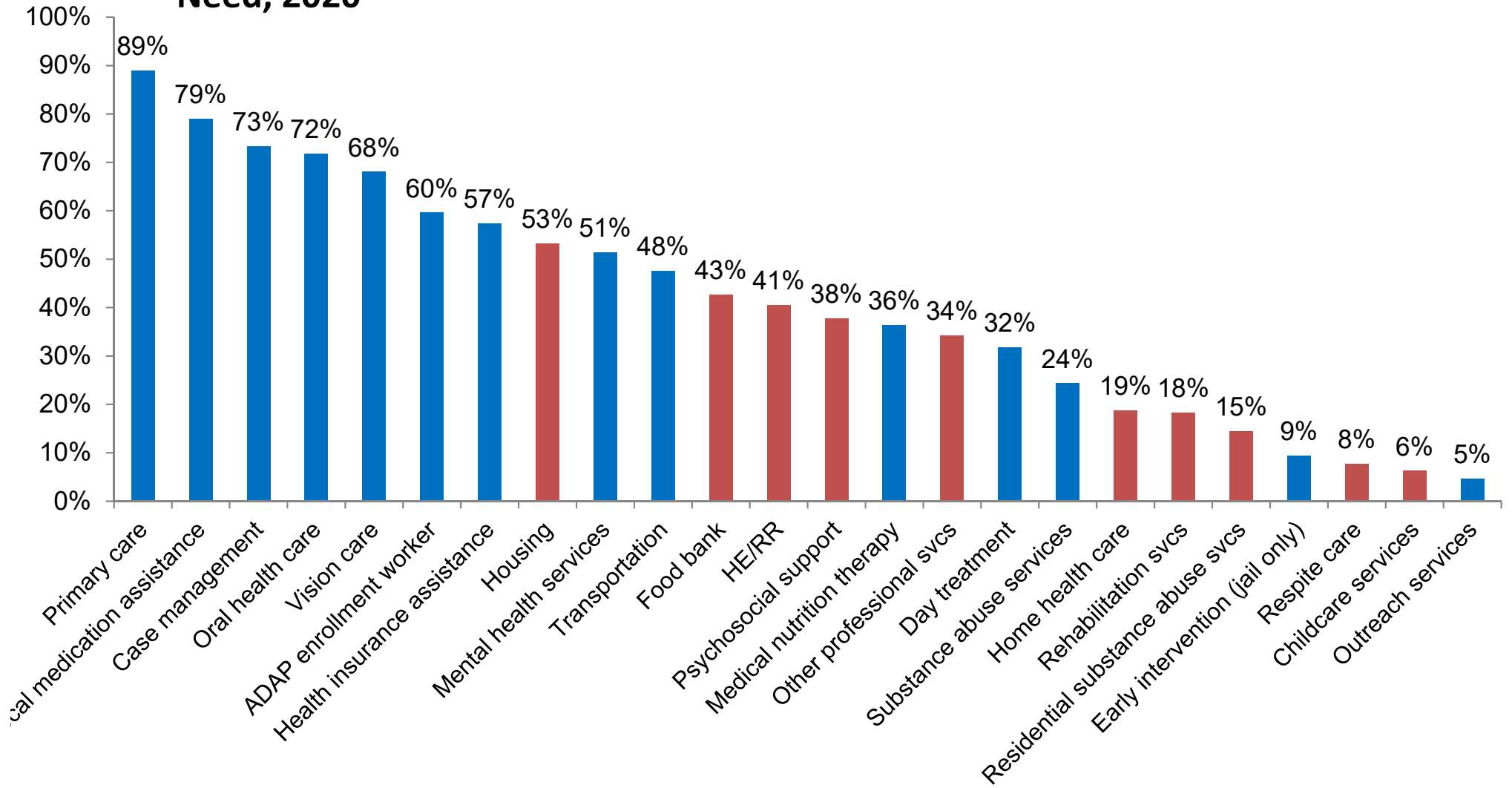




Needs Assessment Data

Overall Ranking of Need

Ranking of Funded and Unfunded HIV Services in the Houston Area, By Need, 2020

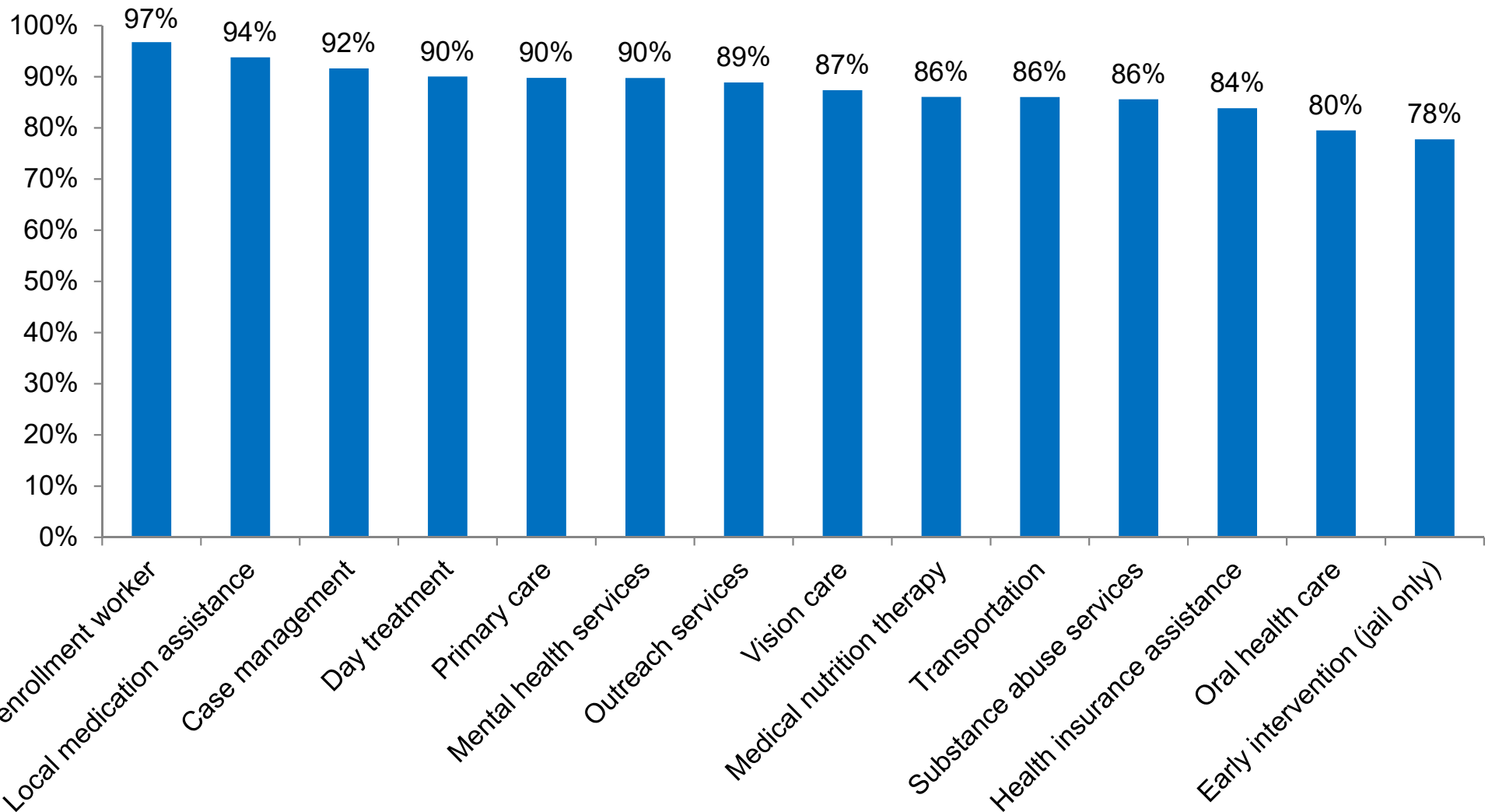




Needs Assessment Data

Overall Ranking of Accessibility

Ranking of Funded HIV Services in the Houston Area, By Accessibility, 2020

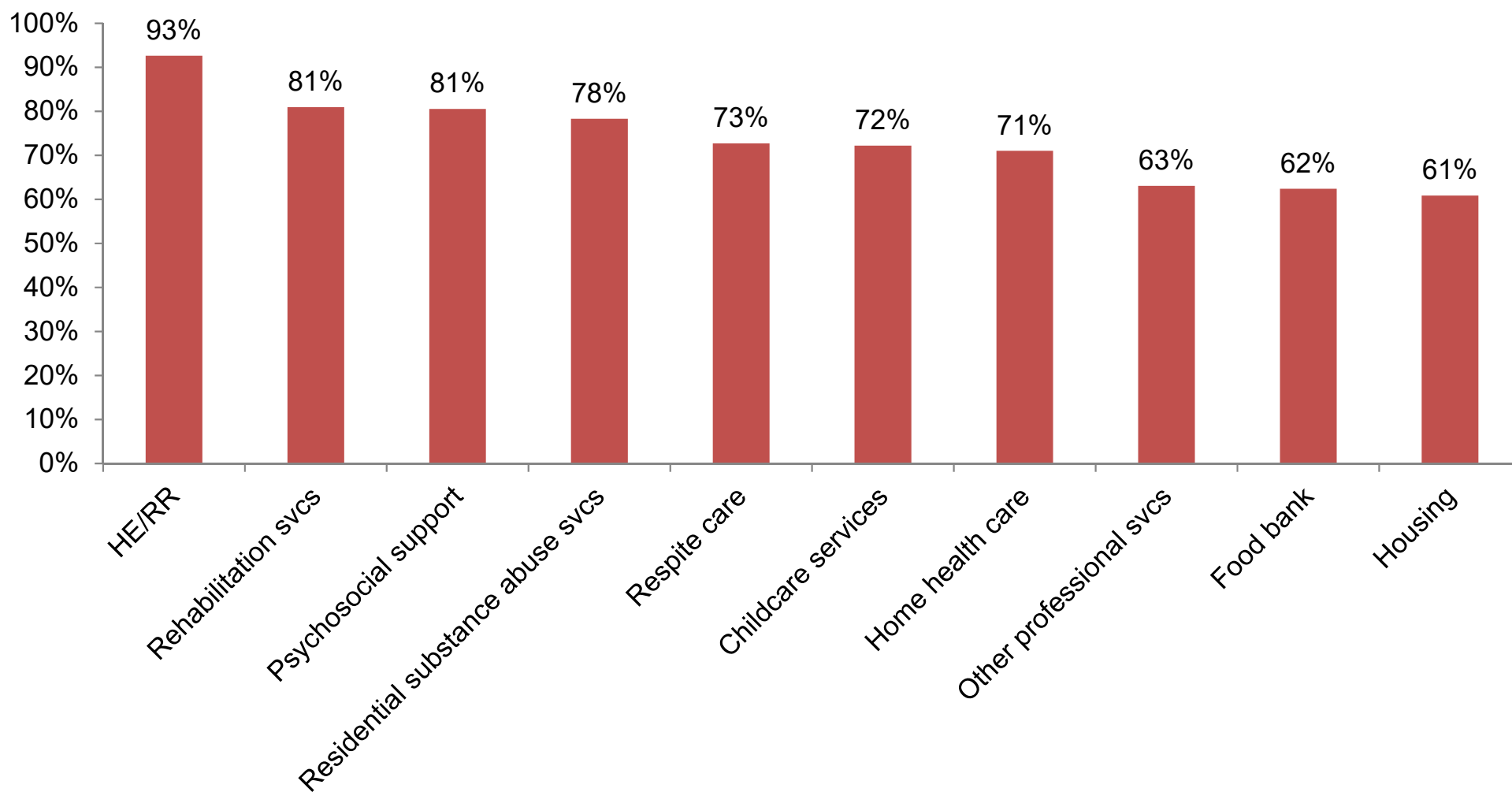




Needs Assessment Data

Overall Ranking of Accessibility

Ranking of Unfunded HIV Services in the Houston Area, By Accessibility, 2020

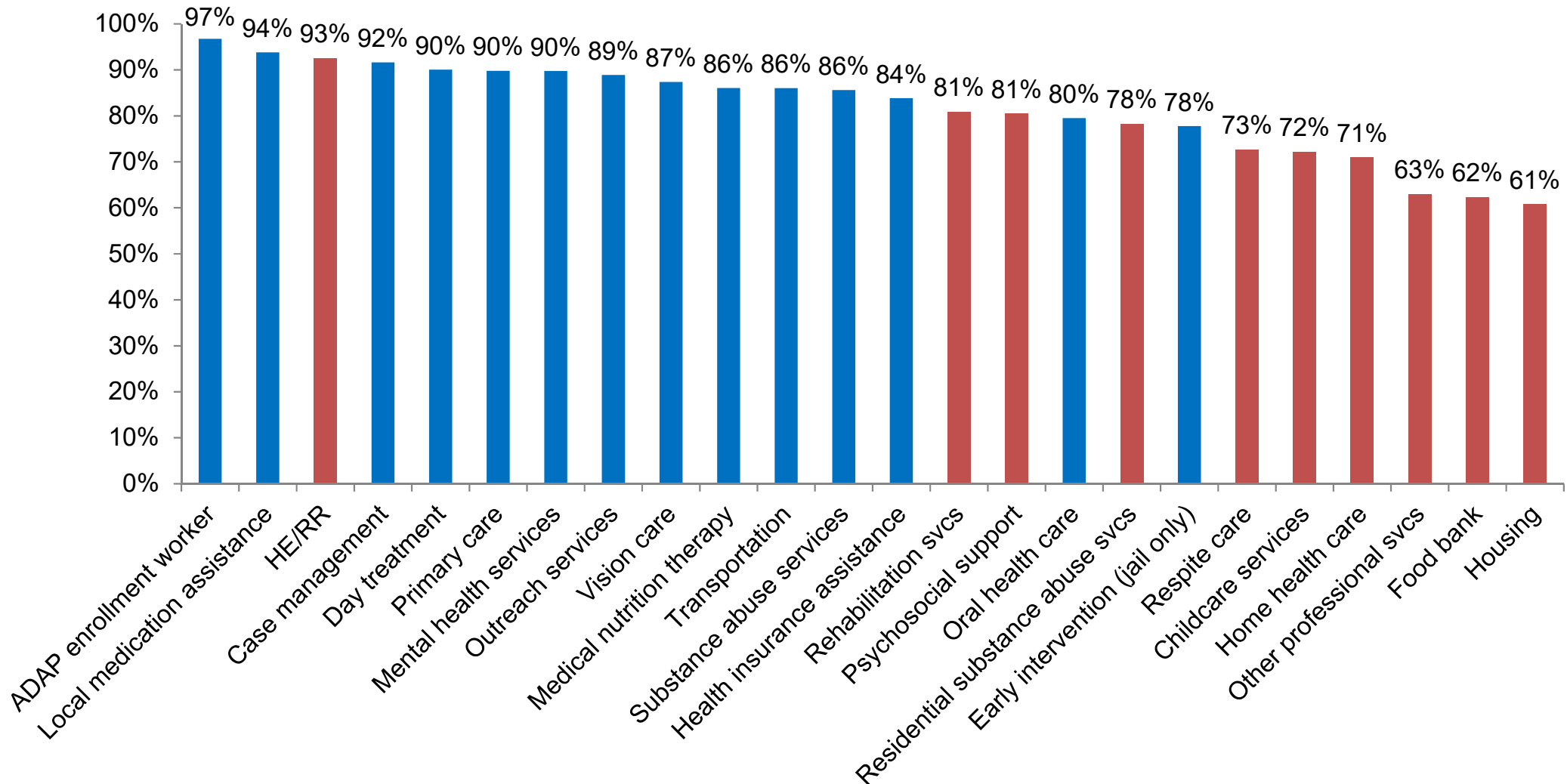




Needs Assessment Data

Overall Ranking of Accessibility

Ranking of Funded and Unfunded HIV Services in the Houston Area, By Accessibility, 2020





Needs Assessment Data

Most Common Barriers

Ranking of Barriers to HIV Services in the Houston Area, 2020

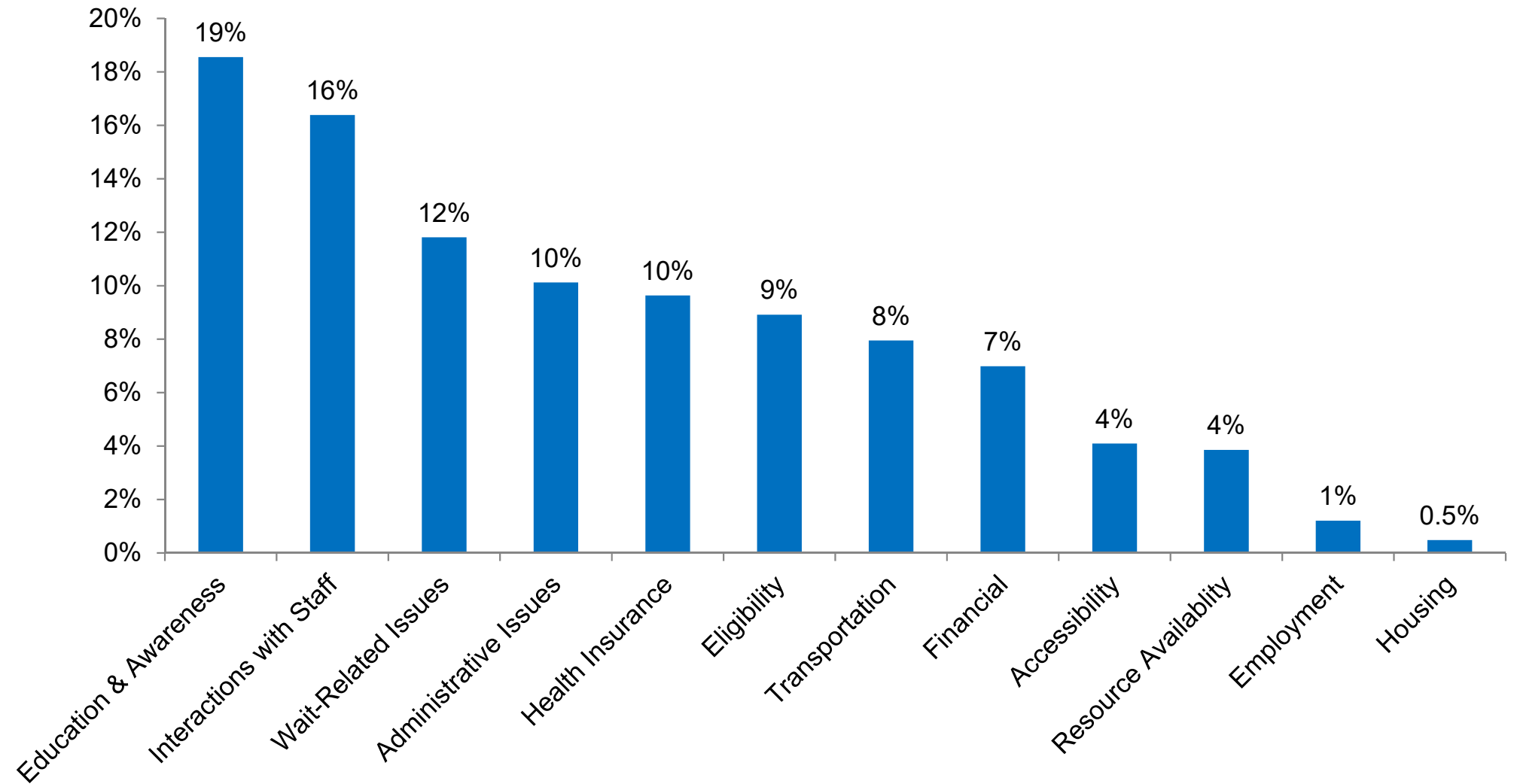




TABLE 1-Barrier Proportions within Each Barrier Type, 2020

Education & Awareness	%	Wait-Related Issues	%	Interactions with Staff	%
Availability (Didn't know the service was available)	51%	Waitlist (Put on a waitlist)	56%	Communication (Poor correspondence/ Follow up from staff)	53%
Definition (Didn't know what service entails)	2%	Unavailable (Waitlist full/not available resulting in client not being placed on waitlist)	22%	Poor Treatment (Staff insensitive to clients)	13%
Location (Didn't know where to go [location or location w/in agency])	30%	Wait at Appointment (Appointment visits take long)	12%	Resistance (Staff refusal/ resistance to assist clients)	6%
Contact (Didn't know who to contact for service)	16%	Approval (Long durations between application and approval)	10%	Staff Knowledge (Staff has no/ limited knowledge of service)	19%
				Referral (Received service referral to provider that did not meet client needs)	10%
Eligibility	%	Administrative Issues	%	Health Insurance	%
Ineligible (Did not meet eligibility requirements)	45%	Staff Changes (Change in staff w/o notice)	10%	Uninsured (Client has no insurance)	25%
Eligibility Process (Redundant process for renewing eligibility)	39%	Understaffing (Shortage of staff)	7%	Coverage Gaps (Certain services/medications not covered)	55%
Documentation (Problems obtaining documentation needed for eligibility)	16%	Service Change (Change in service w/o notice)	7%	Locating Provider (Difficulty locating provider that takes insurance)	18%
		Complex Process (Burden of long complex process for accessing services)	57%	ACA (Problems with ACA enrollment process)	3%
		Dismissal (Client dismissal from agency)	7%		
		Hours (Problem with agency hours of operation)	12%		
Transportation		Financial	%	Accessibility	%
No Transportation (No or limited transportation options)	91%	Financial Resources (Could not afford service)	100%	Literacy (Cannot read/difficulty reading)	12%
Providers (Problems with special transportation providers such as Metrolift or Medicaid transportation)	9%			Spanish Services (Services not made available in Spanish)	0%
				Released from Incarceration (Restricted from services due to probation, parole, or felon status)	12%
				Distance (Service not offered within accessible distance)	76%
Resource Availability	%	Housing	%	Employment	%
Insufficient (Resources offered insufficient for meeting need)	81%	Homeless (Client is without stable housing)	0%	Unemployed (Client is unemployed)	20%
Quality (Resource quality was poor)	19%	IPV (Interpersonal domestic issues make housing situation unsafe)	100%	Leave (Employer does not provide sick/wellness leave for appointments)	80%

Specific Service Categories

Health Insurance Assistance

	2016	2020	Change
Ranking of Need:	59% need #5 of all services	57% need #7 of all services	%; ↓ Rank: ↓
Accessibility:	85% accessible #7 of all services	84% accessible #12 of all services	%; ↓ Rank: ↓
Barriers Reported:	<ol style="list-style-type: none"> 1. Health Insurance Coverage - 31% 2. Education and Awareness - 21% 3. Administrative - 13% 4. Eligibility - 13% 5. Financial - 10% 	<ol style="list-style-type: none"> 1. Eligibility - 23% 2. Financial - 23% 3. Health Insurance Coverage - 18% 4. Administrative - 13% 5. Education and Awareness - 10% 	Groups reporting difficult access: <ul style="list-style-type: none"> - Other / multiracial - HL - 25-49 - Transgender - Homeless - MSM - Rural

Specific Service Categories

Medical Nutritional Therapy

	2016	2020	Change
Ranking of Need:	38% need #9 of all services	36% need #10 of all services	%; ↓ Rank: ↓
Accessibility:	82% accessible #10 of all services	86% accessible #9 of all services (tied)	%; ↑ Rank: ↑
Barriers Reported:	<ol style="list-style-type: none"> 1. Education and Awareness - 34% 2. Administrative – 14% 3. Eligibility - 14% 4. Interactions with Staff - 10% 5. Wait – 10 	<ol style="list-style-type: none"> 1. Education and Awareness - 35% 2. Eligibility - 26% 3. Interactions with Staff - 17% 	Groups reporting difficult access: - Females (sex) - Black/AA - 25-49 - Homeless

Specific Service Categories

Mental Health Services

	2016	2020	Change
Ranking of Need:	53% need #6 of all services	51% need #8 of all services	%; ↓ Rank: ↓
Accessibility:	88% accessible #5 of all services (tied)	90% accessible #4 of all services	%; ↑ Rank: ↑
Barriers Reported:	<ol style="list-style-type: none"> 1. Administrative - 25% 2. Wait - 25% 3. Health Insurance Coverage - 8% 4. Interactions with Staff - 8% 5. Resource Availability - 8% 	<ol style="list-style-type: none"> 1. Administrative - 22% 2. Education and Awareness - 22% 3. Health Insurance Coverage - 13% 4. Interactions with Staff - 9% 5. Transportation - 9% 	Groups reporting difficult access: <ul style="list-style-type: none"> - Females (sex) - Other / multiracial - White - RR - Rural - Homeless

Specific Service Categories

Oral Health

	2016	2020	Change
Ranking of Need:	73% need #4 of all services	72% need #4 of all services	%; ↓ Rank: ---
Accessibility:	76% accessible #12 of all services (tied)	80% accessible #13 of all services	%; ↑ Rank: ↓
Barriers Reported:	<ol style="list-style-type: none"> 1. Wait - 35% 2. Interactions with Staff - 13% 3. Health Insurance Coverage - 12% 4. Eligibility - 10% 5. Administrative - 8% 	<ol style="list-style-type: none"> 1. Wait - 22% 2. Interactions with Staff - 18% 3. Health Insurance Coverage - 13% 4. Education and Awareness - 12% 5. Administrative - 10% 	Groups reporting difficult access: <ul style="list-style-type: none"> - Females (sex) - Other / multiracial - White - 25-49 - OOC - RR - MSM

Specific Service Categories

Substance Abuse Treatment

	2016	2020	Change
Ranking of Need:	24% need #13 of all services	24% need #12 of all services	%; --- Rank: ↑
Accessibility:	92% accessible #1 of all services (tied)	86% accessible #9 of all services (tied)	%; ↓ Rank: ↓
Barriers Reported:	1. Education and Awareness - 33% 2. Eligibility - 33% 3. Health Insurance Coverage - 33% <u>CAVEAT:</u> There was only one report for each of these barrier types in 2016. Not generalizable, proceed with caution.	1. Education and Awareness - 46% 2. Transportation - 18%	Groups reporting difficult access: - Black/AA - 18-24 - RR - Homeless