

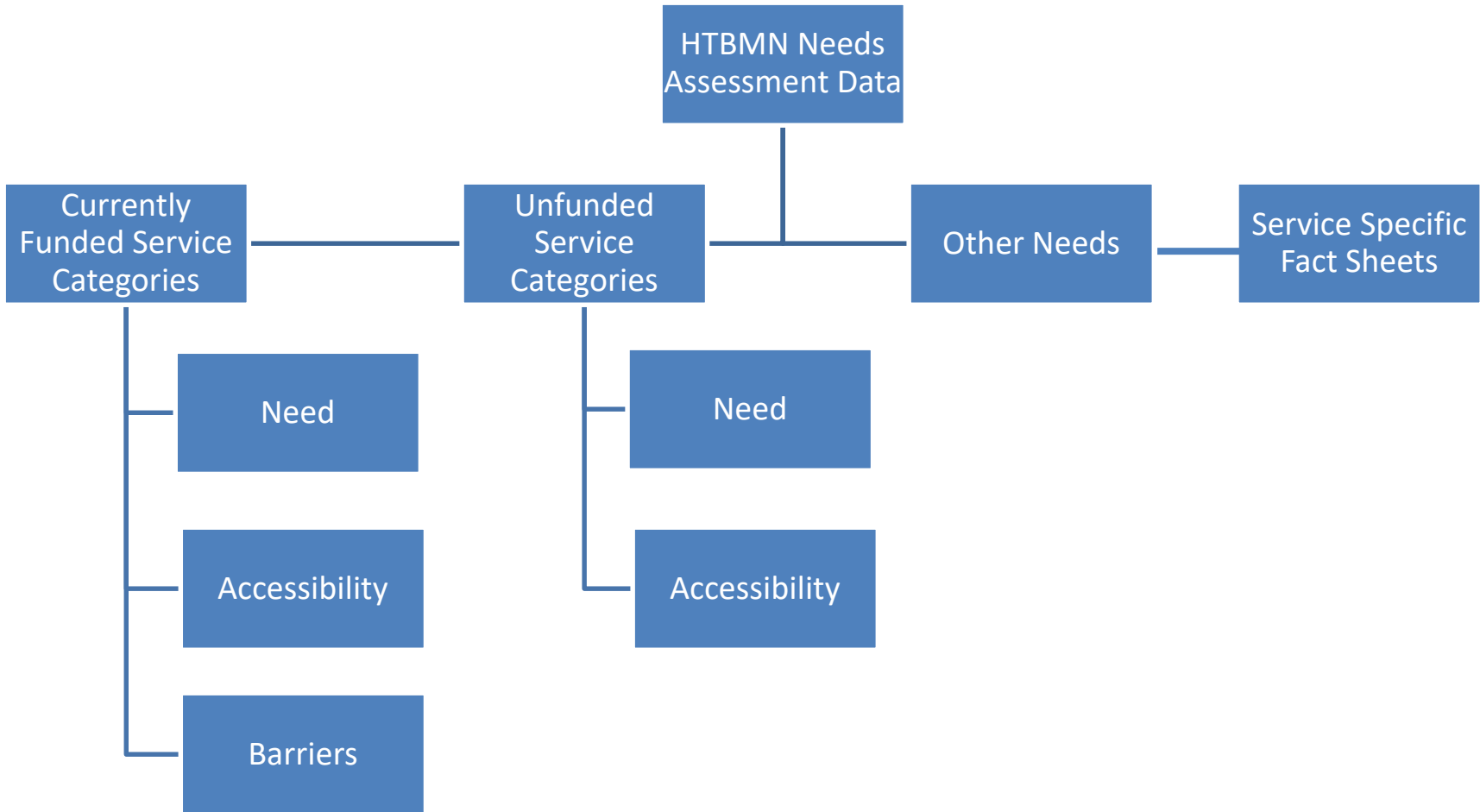
2020 Needs Assessment Data for How to Best Meet the Need



March 23, 2020



Analysis Structure





Currently Funded in the Houston EMA/HSDA through RW Part A/B or State Services:

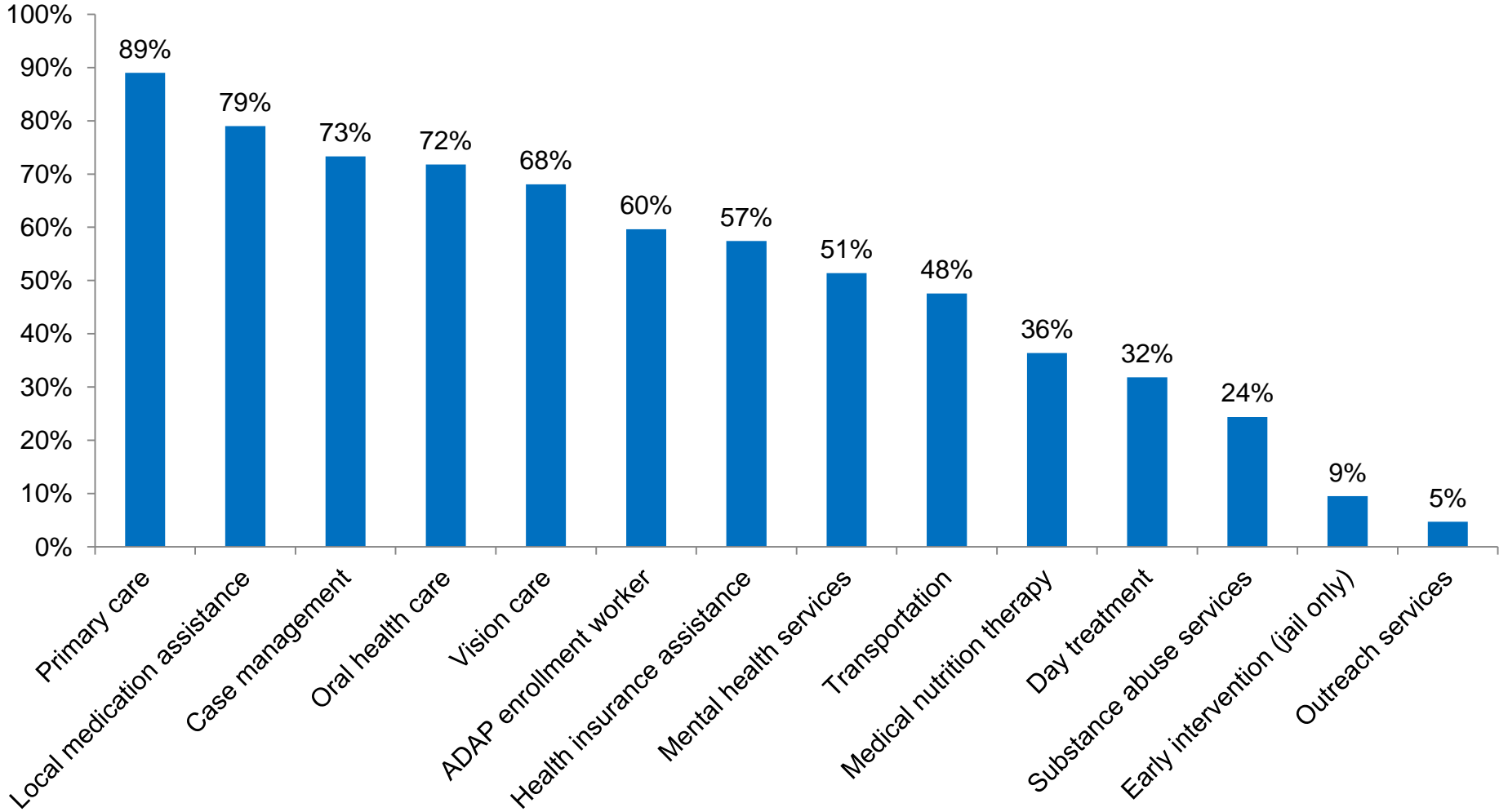
- Primary care
 - Includes vision care
- HIV medication assistance
 - LPAP
 - EFA
- Health insurance assistance
- Oral health care
- Case management
 - Medical/clinical case management
 - Service linkage
- Outpatient alcohol or drug treatment
- Mental health
- Day Treatment
- Hospice (unranked)
- Nutritional supplements
- Language translation
- Transportation
- Outreach services
- ADAP enrollment worker
- Pre-discharge planning (EIS)



Currently Funded Services: Need

GRAPH 1-Ranking of Funded HIV Services in the Houston Area, By Need, 2020

Definition: Percent of needs assessment participants stating they needed the funded service in the past 12 months, regardless of service accessibility.





Currently Funded Services: Need

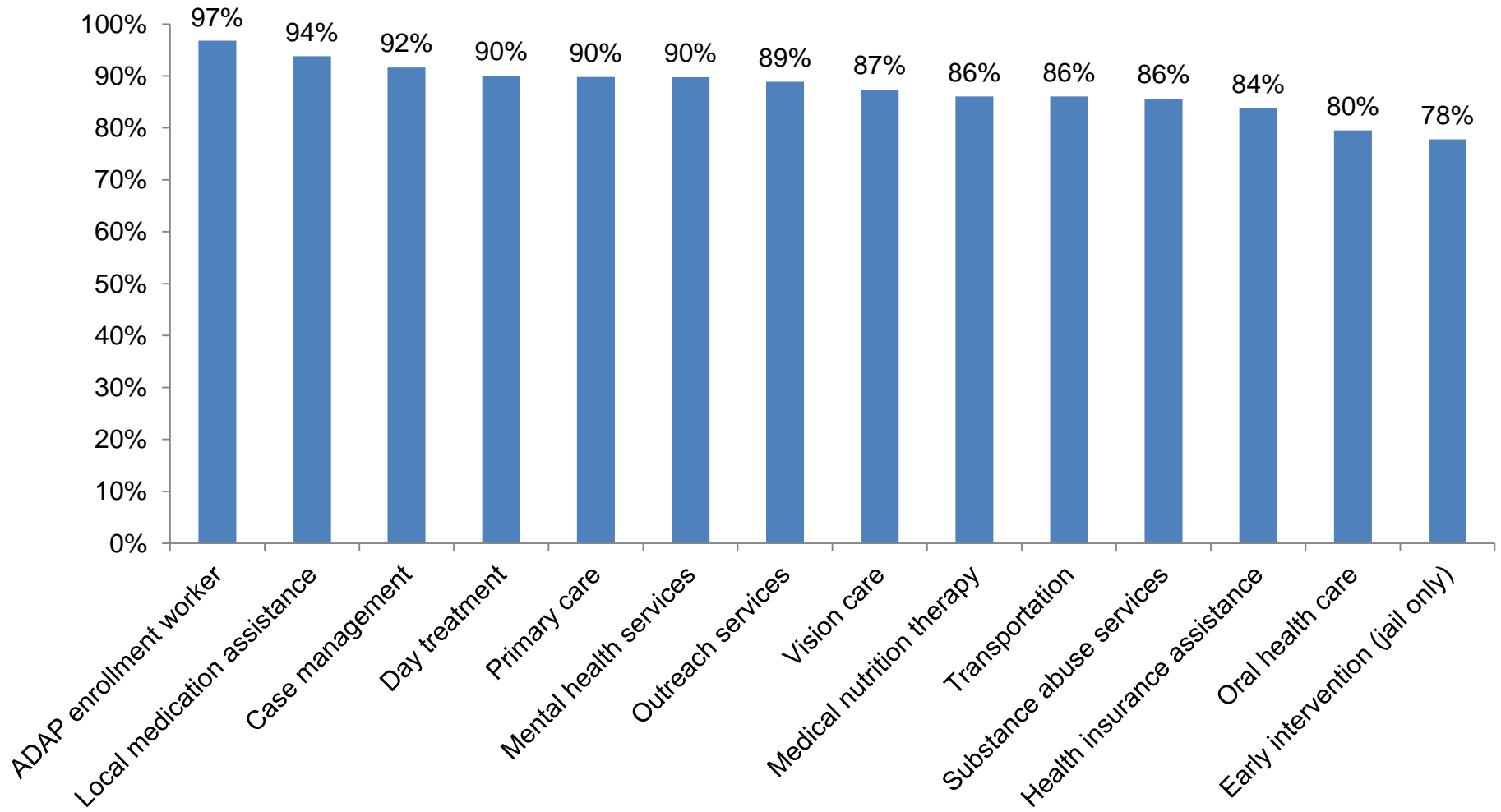
- **Most needed **medical** service:** Primary care
- **Most needed **support** service:** Mental health services
- **Greatest **changes** between 2016 and 2020:**
 - Need decreased the most for case management (↓9 percentage points) and primary care (↓5 percentage points)
 - Need increased the most for local medication assistance and outreach services (↑5 percentage points each)



Currently Funded Services: Accessibility

GRAPH 2-Ranking of Funded HIV Services in the Houston Area, By Accessibility, 2020

Definition: Of needs assessment participants stating they needed the funded service in the past 12 months, the percent stating it was easy to access the service.





Currently Funded Services: Accessibility

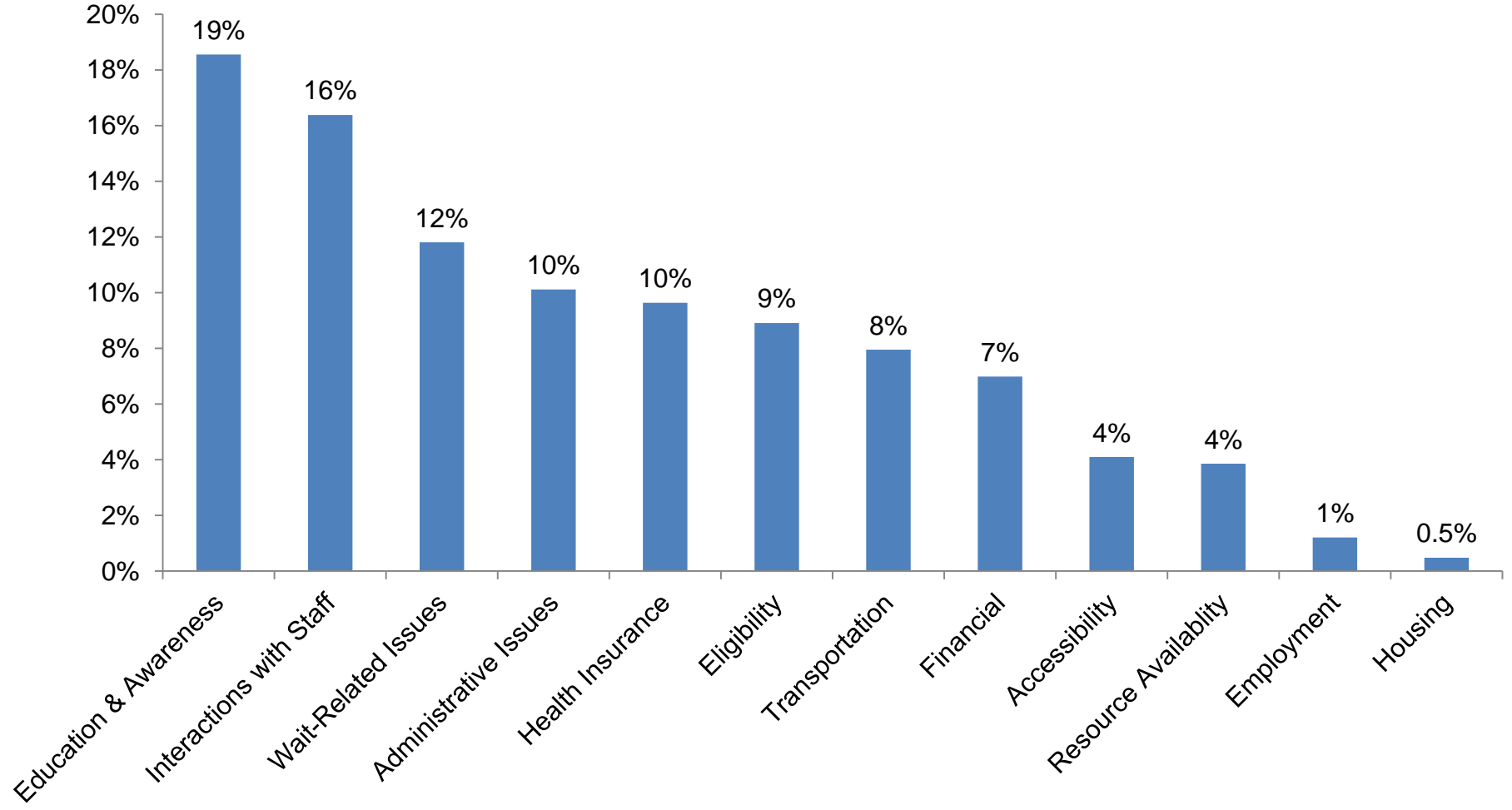
- **Most accessible **medical** service:** Local medication assistance
- **Most accessible **support** service:** ADAP enrollment worker
- **Greatest **changes** between 2016 and 2020:**
 - Accessibility decreased the most for early intervention services (↓7 percentage points)
 - Accessibility increased the most for local medication assistance (↑5 percentage points each)



Currently Funded Services: Barriers

GRAPH 3-Ranking of Types of Barriers to Funded HIV Services in the Houston Area, 2020

Definition: Percent of times each barrier type was reported by needs assessment participants, regardless of funded service, when difficulty accessing needed funded services was reported.





Currently Funded Services: Barriers

- **Barrier type reported most often:** Education and awareness
- **Barrier type reported least often:** Housing
- **Greatest changes between 2016 and 2020:**
 - Barrier reports decreased the most wait-related issues (↓3 percentage points)
 - Barrier reports increased the most for interactions with staff (↑3 percentage points each)



Unfunded Services:

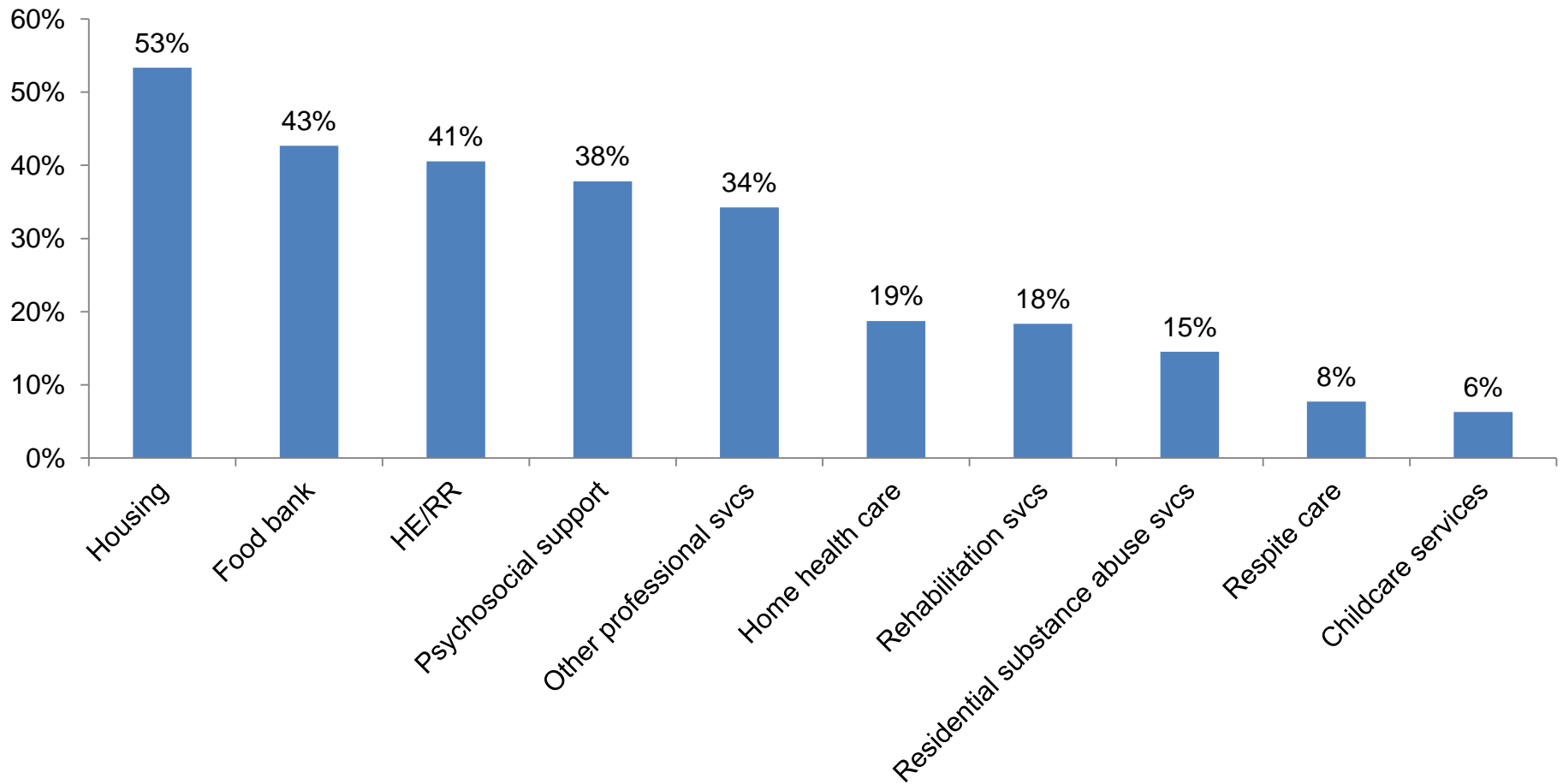
- Home health care
- Child care services
- Food bank
 - Food bank services
 - Home delivered meals
- Health education/risk reduction
- Housing
- Other professional services
 - Legal services
 - Permanency Planning
 - Tax preparation
- Psychosocial support services
 - Online support/groups
 - In person support/groups
- Rehabilitation
- Respite care
- Residential alcohol or drug treatment



Unfunded Services: Need

GRAPH 4-Ranking of Unfunded HIV Services in the Houston Area, By Need, 2020

Definition: Percent of needs assessment participants stating they needed the unfunded service in the past 12 months, regardless of service accessibility.





Unfunded Services: Need

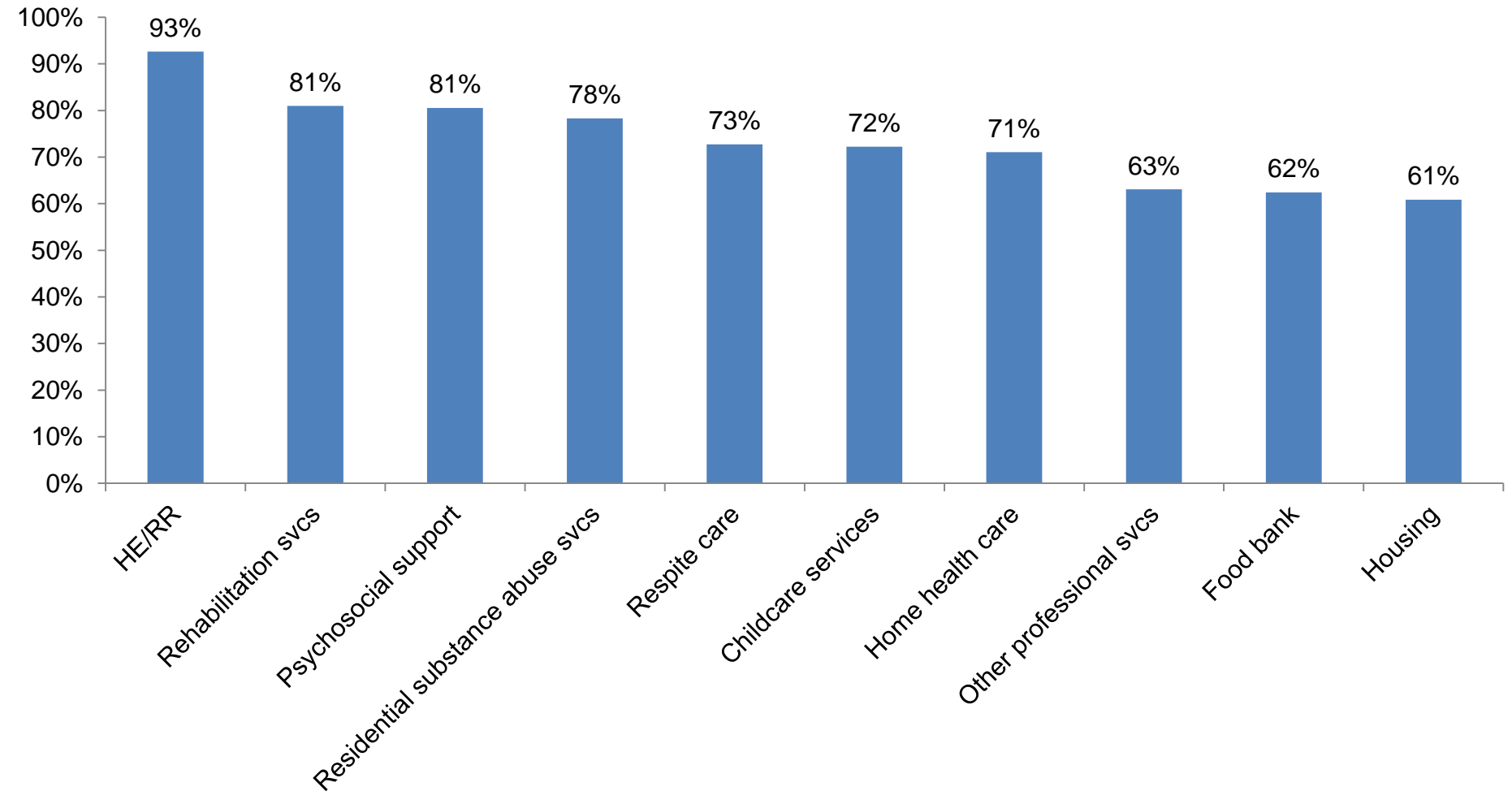
- **Most needed unfunded **medical** service:** Home health care
- **Most needed unfunded **support** service:** Housing
- **Greatest need within unfunded service **subcategories:****
 - Food bank: 69% indicated need for traditional food bank
 - Psychosocial support services: 89% indicated need for in-person support/groups
 - Other professional services: 66% indicated need for legal services



Unfunded Services: Accessibility

GRAPH 5-Ranking of Unfunded HIV Services in the Houston Area, By Accessibility, 2020

Definition: Of needs assessment participants stating they needed the unfunded service in the past 12 months, the percent stating it was easy to access the service





Unfunded Services: Accessibility

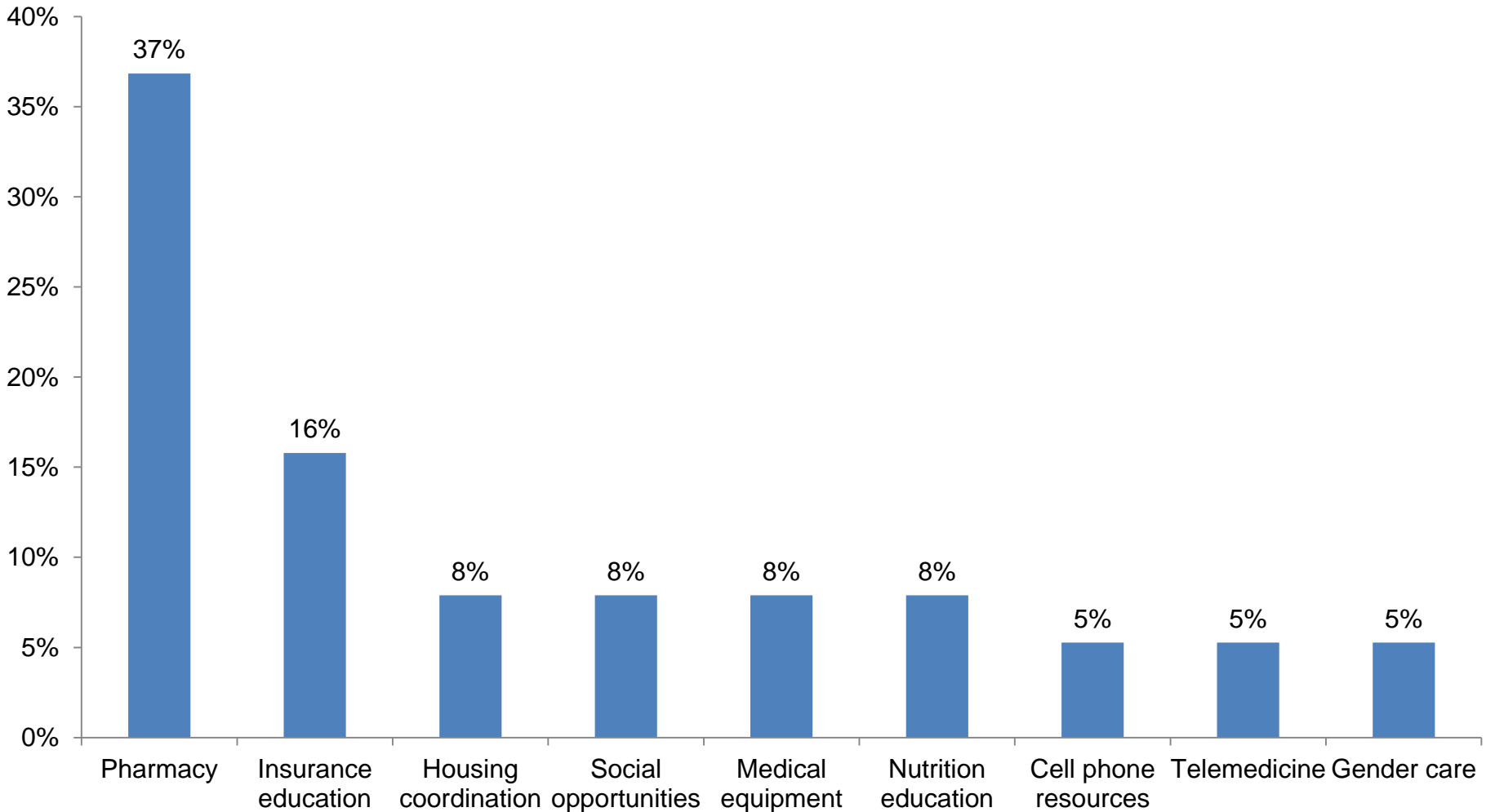
- **Most accessible unfunded **medical** service:**
Home health care
- **Most accessible unfunded **support** service:**
Rehabilitation services
- **Least accessible unfunded support service:**
Housing



Other Needs

GRAPH 6-Other Needs for HIV Services in the Houston Area, 2020

Definition: Percent of write-in responses by type for the survey question, "What other kinds of services do you need to help you get your HIV medical care?"





Other Needs

- **Pharmacy**
 - These include expanded pharmacy services such as medication delivery and automatic refills
- **Insurance education**
 - These include education on how health insurance works, how to use health insurance, and how to get coverage for dental/vision services



Service-Specific Fact Sheets

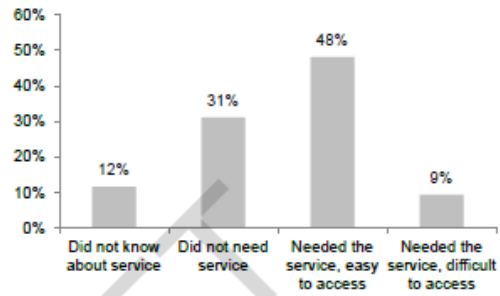
HEALTH INSURANCE ASSISTANCE

Health insurance assistance, also referred to as health insurance premium and cost-sharing assistance, provides financial assistance to persons living with HIV (PLWH) with third-party health insurance coverage (such as private insurance, ACA Qualified Health Plans, COBRA, or Medicare) so they can obtain or maintain health care benefits. This includes funding for premiums, deductibles, Advanced Premium Tax Credit liability, and co-pays for both medical visits and medication.

(Graph 1) In the 2016 Houston HIV Care Services Needs Assessment, 57% of participants indicated a need for health insurance assistance in the past 12 months. 48% reported the service was easy to access, and 9% reported difficulty. 12% stated that they did not know the service was available.

(Table 1) When barriers to health insurance assistance were reported, the most common barrier types were eligibility and financial (each 23%). Eligibility barriers reported include not meeting eligibility requirements, and redundant or complex processes for meeting/renewing eligibility, while financial barriers reported include inability to afford the service.

GRAPH 1-Health Insurance Assistance, 2020



(Table 2 and Table 3) Need and access to services can be analyzed for needs assessment participants according to demographic and other characteristics, revealing the presence of any potential disparities in access to services. For health insurance assistance, this analysis shows the following:

- No difference in service accessibility by sex at birth.
- More white PLWH found the service accessible than other race/ethnicities.
- More PLWH age 18 to 24 found the service accessible than other age groups.
- In addition, more transgender, homeless, MSM, and rural PLWH found the service difficult to access when compared to all participants.

TABLE 1-Top 5 Reported Barrier Types for Health Insurance Assistance, 2020

	No.	%
1. Eligibility (EL)	9	23%
2. Financial (F)	9	23%
3. Health Insurance Coverage (I)	7	18%
4. Administrative (AD)	5	13%
5. Education and Awareness (EA)	4	10%

TABLE 2-Health Insurance Assistance, by Demographic Categories, 2020

Experience with the Service	Sex (at birth)		Race/ethnicity				Age		
	Male	Female	White	Black	Hispanic	Other	18-24	25-49	50+
Did not know about service	12%	9%	15%	13%	8%	12%	0%	12%	11%
Did not need service	30%	34%	43%	29%	32%	12%	14%	30%	34%
Needed, easy to access	48%	48%	40%	48%	50%	58%	81%	47%	49%
Needed, difficult to access	9%	9%	3%	9%	10%	15%	5%	12%	6%

TABLE 3-Health Insurance Assistance, by Selected Special Populations, 2020

Experience with the Service	Homeless ^a	MSM ^b	Out of Care ^c	Recently Released ^d	Rural ^e	Transgender ^f
Did not know about service	21%	11%	16%	25%	17%	13%
Did not need service	32%	30%	42%	25%	23%	25%
Needed, easy to access	34%	47%	42%	43%	49%	33%
Needed, difficult to access	13%	12%	0%	8%	11%	29%

^aPersons reporting current homelessness. ^bMen who have sex with men. ^cPersons with no evidence of HIV care for 12 mo. ^dPersons released from incarceration in the past 12 mo. ^eNon-Houston/Harris County residents. ^fPersons with discordant sex assigned at birth and current gender.