lowa Medicaid-HIV SCP Project

State of the Union: Moving from data to action in Iowa

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Building Capacity to Improve Collecting and Reporting Viral Suppression Data to the Medicaid Adult Core Set Initiative

Engagement in the Project:

- July 2021: Iowa's application to join NASTAD's HIV-Medicaid SCP Learning Collaborative accepted
- July-August 2021: Iowa team engaged, completed budgets and work plans, and identified state team roles and responsibilities necessary to accomplish SCP deliverables
- September 2021: Data sharing agreement between Medicaid and HIV surveillance fully executed
- October 2021: Developed a secure data/file transfer system between Medicaid and HIV. Data matching process, with multiple data documentation and verification steps initiated
- December 2022: Iowa submitted first CMS HVL-AD measure to CMS
- February 2023 current: State team determined structure for engagement of Ryan White, Medicaid leadership, state quality management team and MCOs to implement strategies for increasing viral suppression rates among Medicaid beneficiaries

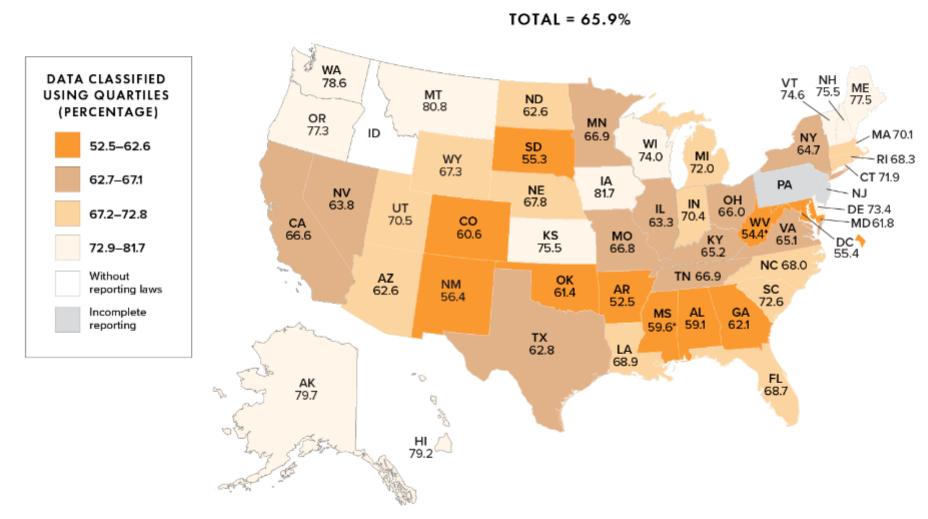






FIGURE 11

Viral suppression during 2021 among persons aged ≥13 years living with diagnosed HIV infection, by area of residence—47 states and the District of Columbia





Note. Data for the year 2021 are preliminary and based on deaths reported to CDC as of December 2022. "Data should be interpreted with caution due to incomplete ascertainment of deaths that occurred during the year 2021. See Guide to Acronyms and Initialisms, Data Tables, and Technical Notes for more information on definitions and data specifications.

Viral Suppression rates for Medicaid beneficiaries living with HIV - 2022

1,157

Number of Medicaid beneficiaries who met eligibility requirements in 2022 90%

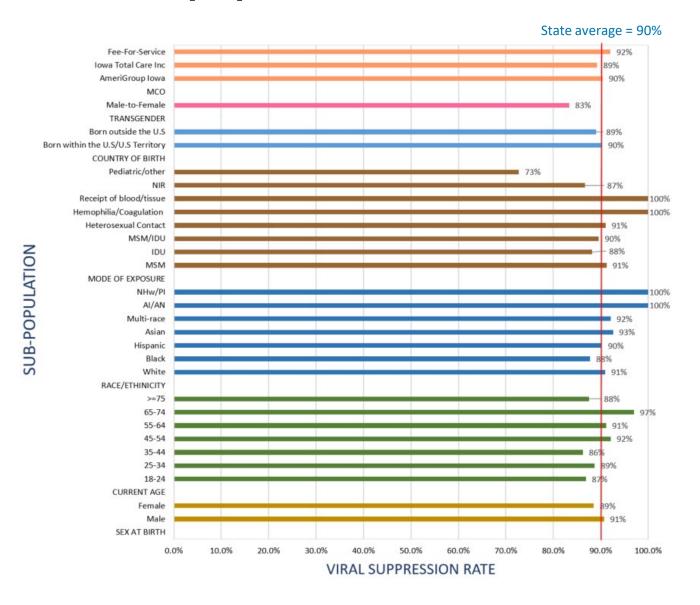
Percentage of Medicaid beneficiaries living with HIV who attained viral suppression in 2022 91%

Percentage of Medicaid beneficiaries with HIV in Ryan White case management or receiving RW services in 2022 who achieved viral suppression

High viral suppression rates among Iowa Medicaid beneficiaries across various sub-populations in 2022

90%

Percentage of Medicaid beneficiaries living with HIV who attained viral suppression in 2022

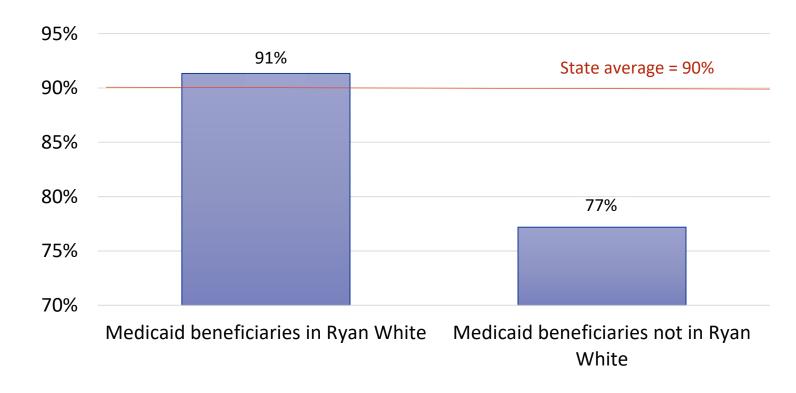


Viral suppression among Medicaid beneficiaries who are not in Ryan White falls far below state average

Proportion who Achieved Viral Suppression

57

Number of Medicaid beneficiaries not in Ryan White case management or receiving RW services



Getting to the 'Why'...



Ryan White Part B Program

The Iowa Ryan White Part B Program (RWPB) provides services to low-income Iowans living with HIV through the Client Services Program and the AIDS Drug Assistance Program (ADAP).

The Client Services Program provides a variety of support services designed to engage and retain clients in medical care.

ADAP provides access to treatment by purchasing medications and health insurance for clients, or by assisting with their existing health insurance costs.

ENGAGEMENT

At the end of 2022, there were 3, 105 lowans who were diagnosed and living with HIV.

The RW Part B program served 2,284 clients (74% of all lowans diagnosed and living with HIV).

ADAP served 858 clients (28% of all Iowans diagnosed and living with HIV).

Ryan White Part B Program

LOCATION

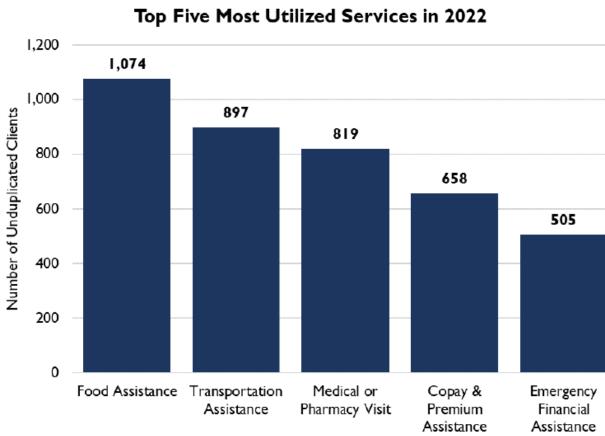
The RWPB directly contracted with nine agencies across the state in 2022. Two agencies then subcontracted services with two additional agencies for a total of 11 organizations that provided RWPB services.

Pictured right: lowa counties and two agencies located outside of lowa with a RWPB agency are shown by a blue star.



Ryan White Part B Program

SERVICE UTILIZATION



* Does not include case management, field benefit specialist, or referral services

Food Assistance was the most utilized service in 2022. It included the provision of grocery store gift cards, nutritional supplements (e.g., Ensure), household cleaning products, or personal hygiene products.

Transportation Assistance included the provision of bus tokens or passes, taxi vouchers, and gas cards; partnerships with UberHealth; and direct transportation of clients by agency staff.

Medical or Pharmacy Visits included the provision of medical services from a licensed healthcare provider or pharmacist.

Copay & Premium Assistance included premium, copay, or deductible payments.

Emergency Financial Assistance included short-term payments that helped clients access or remain in care (e.g., utility bills).



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The Benefits of Ryan White Part B Case Management Services - 2022

Ryan White Part B Program (RWPB) clients have access to support services including:

Case Management & Transportation & Housing & Health Insurance Premiums & Copays & Food & Nutrition

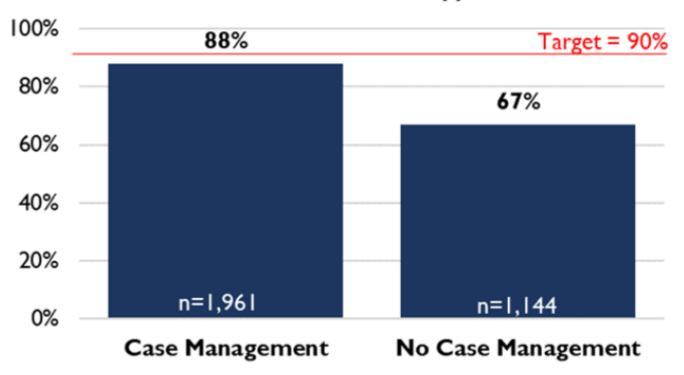
Mental Health Treatment & Substance Use Treatment & Oral Health Care & and More



The Benefits of Ryan White Part B Case Management Services - 2022

VIRAL SUPPRESSION

Percentage of Iowans with Diagnosed HIV in 2022 who Achieved Viral Suppression



The goals of HIV treatment are to improve health outcomes and prevent transmission of HIV. The best marker of successful treatment is reducing the amount of

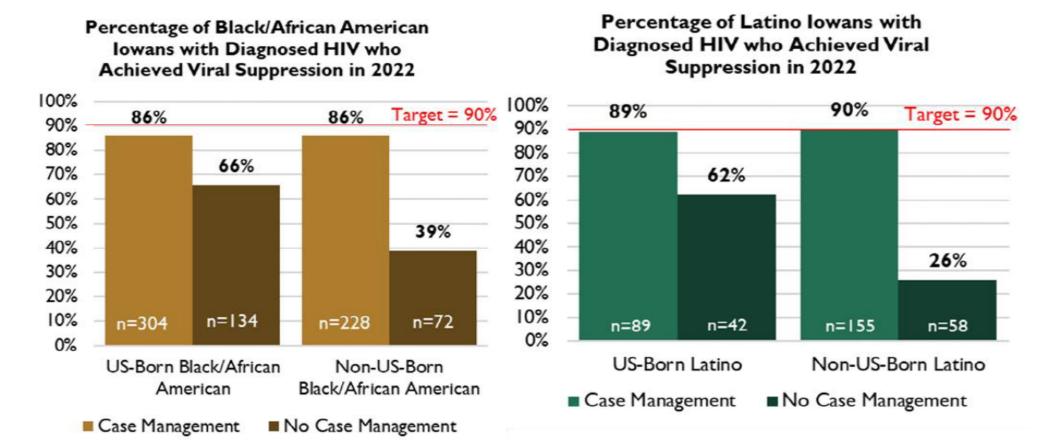
HIV in the blood and elsewhere in the body to very low levels (less than 200 copies/mL). This is called viral suppression.

In 2022, lowans diagnosed and living with HIV who enrolled in case management were more likely to achieve viral suppression compared to lowans who did not.

The Benefits of Ryan White Part B Case Management Services - 2022

VIRAL SUPPRESSION AMONG DISPROPORTIONATELY AFFECTED POPULATIONS

RWPB case management services have a strong impact on viral suppression among Black/African American and Latino Iowans who were diagnosed and living with HIV, especially among non-US-born populations.



Case Management System

What is Case Management?

A client focused process that expands and coordinates existing services to clients.

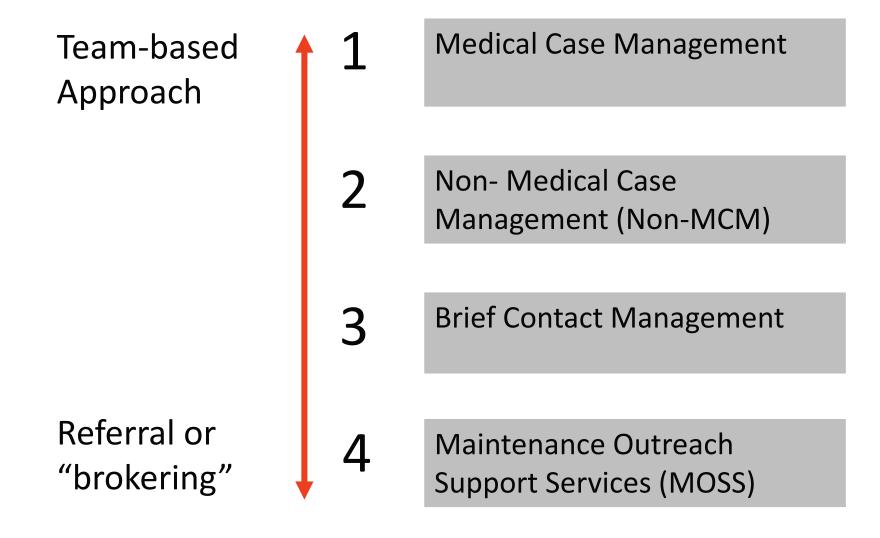
Referral or "brokering" Team-based approach

Overarching goal is to facilitate clients' autonomy to the point where they can obtain needed services on their own.

Iowa's Ryan White Case Management System

- Differentiated Service Delivery (DSD) model
 - Client-centered approach that simplifies and adapts the intensity, frequency and location of HIV services depending on the needs and preferences of patients
 - Create more resource allocation efficiencies, while tailoring more intensive services for patients with greater needs and less intensive services for patients who want or need fewer clinical touch points
 - 'Right-sized' care
 - Members are not dis-enrolled, rather moved to a different tier that meets their needs

Iowa's Ryan White Case Management Program



Next steps: Strengthening the Union

- Share data insights with Medicaid leadership
- Engage Medicaid and Managed Care Organizations to develop strategies to communicate benefits of RW case management and services
 - Engage Medicaid beneficiaries not currently accessing RW service
 - Develop strategies for retention in care for Medicaid beneficiaries likely to fall out of RW case management or services
- Toolkit for MCO case managers and partners
 - Develop/share print and online brochures and flyers detailing RW case management, and other core medical and support services available
 - Ensure access to material translated into most-used languages among Medicaid beneficiaries

Next steps: Strengthening the Union

- Coordinate (including data sharing) with the state Medicaid program to verify ADAP eligibility and/or Medicaid enrollment
- Strengthening partnership to reduce loss of coverage during Medicaid roll back
- Women Infant Children Youth (WICY) data reporting requirements for Ryan White: Collaborate with Medicaid to match data to improve reporting on WICY expenditures. WICY expenditures are a legislative Ryan White reporting requirement

QUESTIONS?

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