

REAFFIRMING MEANINGFUL COMMUNITY ENGAGEMENT

# Ending the HIV Epidemic in New York City: HIV and Aging

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# New York City 2020 Ending the HIV Epidemic Plan



## New York City 2020 Ending the HIV Epidemic Plan

- In February 2019, the U.S. Department of Health and Human Services announced the Ending the HIV Epidemic in the U.S. (EHE), a set of strategies to reduce new HIV infections by 75% in five years and by 90% in 10 years.
- Four New York City counties were identified among the EHE initiative as having a substantial HIV burden: Bronx, Kings (Brooklyn), New York (Manhattan), and Queens Counties.
- In March 2021, the NYC Health Department released the New York City 2020 Ending the HIV Epidemic Plan (NYC 2020 EHE Plan).



# New York City 2020 Ending the HIV Epidemic Plan: Priority Populations

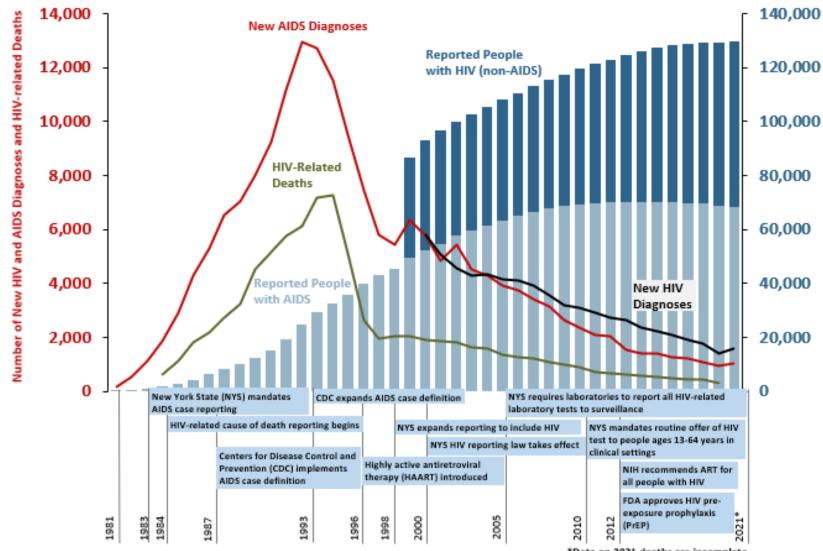
- Black men who have sex with men (MSM), including Black cisgender MSM and Black transgender MSM
- Latino/Hispanic MSM, including Latino/Hispanic cisgender MSM and Latino/Hispanic transgender MSM
- Black women, including Black cisgender women and Black transgender women
- Latina/Hispanic women, including Latina/Hispanic cisgender women and Latina/Hispanic transgender women
- All people of trans experience and people who identify as gender nonconforming, gender non-binary, or gender queer
- People with HIV ages 50 years and older
- Youth and young adults ages 13 to 29 years



# HIV in New York City, 2021



## History of the HIV Epidemic in New York City, 1981-2021



\*Data on 2021 deaths are incomplete.

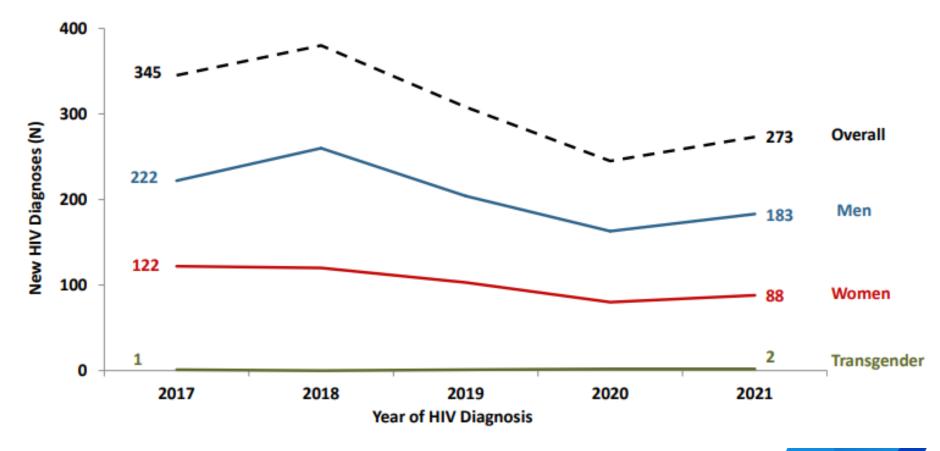
FDA=Food and Drug Administration; NIH=National Institutes of Health.

## HIV in New York City, 2021

- In 2021, there were **1,594 new HIV diagnoses** in New York City, including 273 new HIV diagnoses among people ages 50 years and older
- In 2021, there were **1,054 new AIDS diagnoses** in New York City, including 399 new AIDS diagnoses among people ages 50 years and older.
- In 2021, there were **2,178 deaths** among people with HIV in New York City, including **1,785** deaths among people ages 50 years and older.



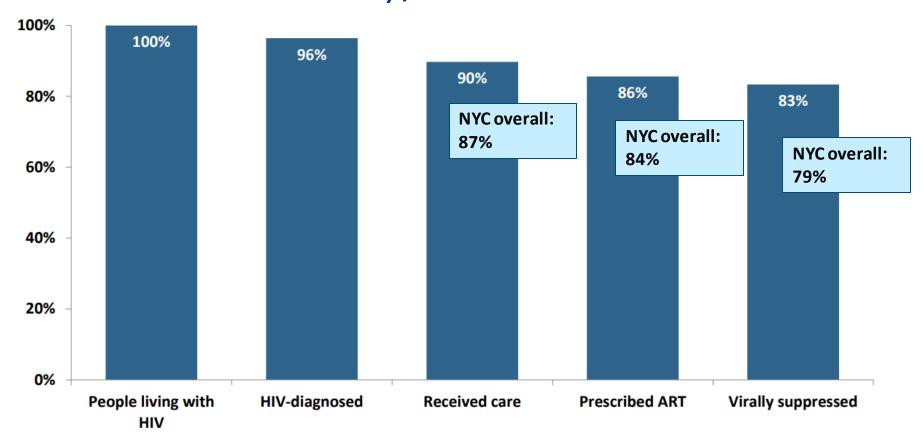
### New HIV Diagnoses Among People 50 Years and Older by Gender in New York City, 2017-2021



There were N=2 new diagnoses among transgender women in 2021 and none among transgender men. As reported to the N.Y.C. Dep't of Health & Mental Hygiene by March 31, 2022.



# HIV Care Continuum Among People 50 Years and Older in New York City, 2021



Of the approximately 49,400 people ages 50 years and over with HIV and living in NYC in 2021, 83% had a suppressed viral load.



# Ryan White Part A Services and Programming

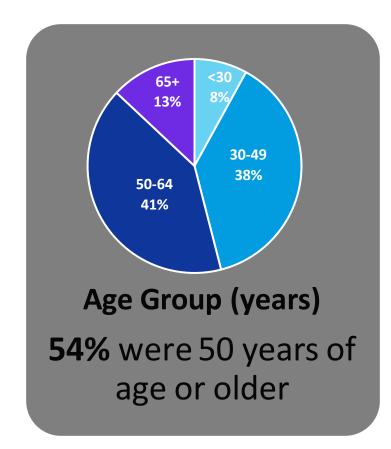


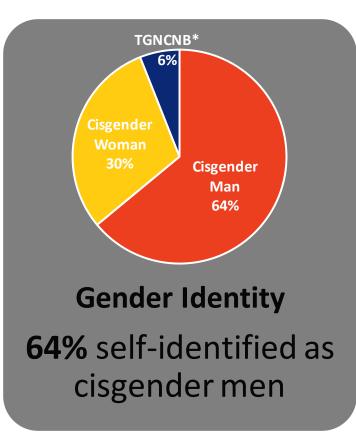
## Ryan White HIV/AIDS Program Part A Overview

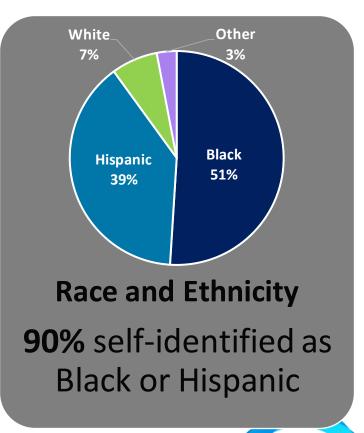
- Administered by HHS Health Resources and Services Administration (HRSA), the **Ryan White HIV/AIDS Program (RWHAP) Part A** funds primary medical care and support services for people with HIV.
  - NYC DOHMH receives RWHAP Part A funding for the New York Eligible Metropolitan Area (NY EMA), which includes New York City and Putnam, Rockland, and Westchester Counties.
- NY EMA's total RWHAP Part A award amount is roughly \$93 million and supports more than 150 programmatic contracts with over 90 agencies.
- In 2021-2022, **54% of all clients** served by RWHAP Part A-funded programs were **50 years of age or older**



# Clients Served by RWHAP Part A-Funded Programs, NY EMA, 2021-2022



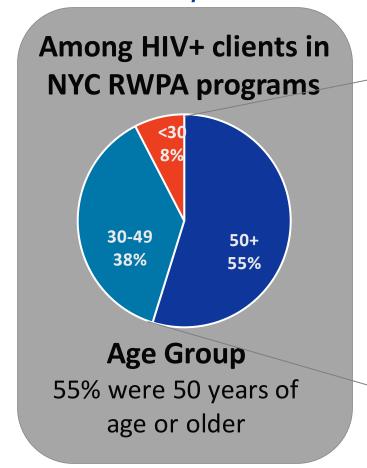


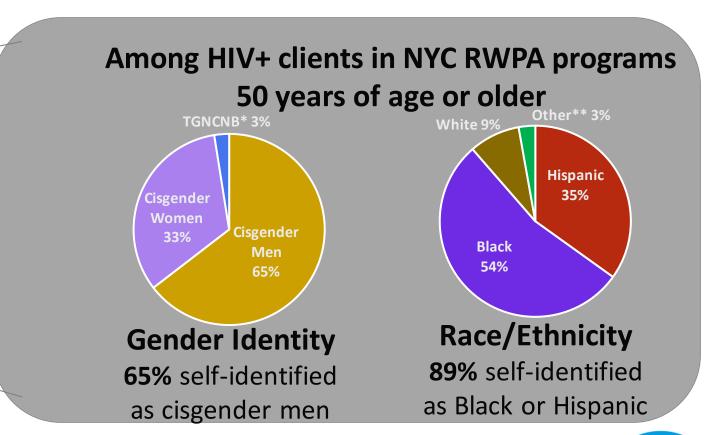




<sup>\*</sup>TGNCNB: transgender, gender non-conforming or non-binary

# Clients Served by RWHAP Part A-Funded Programs, NY EMA, 2021-2022







<sup>\*</sup>TGNCNB: Includes clients who identified as transgender, gender non-conforming, or non-binary.

<sup>\*\*</sup>Other race/ethnicity includes clients who identified as Asian/Pacific Islander, Other or Mixed Race, and those with Unknown race.

## RWHAP Part A Directive for People Aging with HIV

#### **Outpatient Medical Care**

- Developed and approved by the Planning Council, the Outpatient/Ambulatory Health Services (OAS) directive is designed to increase the capacity of outpatient medical care to treat the complex needs of people aging with HIV.
- The directive outlines diagnostic and therapeutic services that should be provided directly to a client by a licensed health care provider in an outpatient medical setting (e.g., clinics, medical offices, mobile vans, telehealth, urgent care facilities for HIVrelated visits).



## RWHAP Part A Directive for People Aging with HIV

#### **Outpatient Medical Care (cont.)**

- The OAS Program is designed to mirror aspects of the Golden Compass model through use of clinical staff (e.g., MD, RN, Pharmacist, Medical Assistant) to provide health education; geriatric, psychiatric, and cardiology consultations; and referrals to ongoing specialty care in line with HHS guidance.
- Funded OAS services should be supported to improve health education, self-advocacy, and self-management so that people aging with HIV can talk to their medical providers about broader health concerns.



## RWHAP Part A Directive for People Aging with HIV

#### Referral for Health Care and Supportive Services

- This directive is designed to increase the knowledge of resources available to support people aging with HIV among RWHAP Part A funded providers.
- Programs focused on the needs of people aging with HIV will utilize referral tracking to ensure people aging with HIV are engaged in needed services.
- NYC DOHMH will work to further develop or support RWHAP Part A provider access to a live resource map that is non-stigmatizing, easily accessible, provider-developed, and updated in real time.

Sources: HIV HEALTH & HUMAN SERVICES PLANNING COUNCIL OF NEW YORK, RYAN WHITE PART A DIRECTIVE FOR AGING PERSONS WITH HIV (PWH) (Oct. 28, 2021), available at <a href="https://nyhiv.org/wp-content/uploads/2022/01/Directive-for-Aging-PWH\_PC-Approved-10-28-21.pdf">https://nyhiv.org/wp-content/uploads/2022/01/Directive-for-Aging-PWH\_PC-Approved-10-28-21.pdf</a>.



# Outpatient/Ambulatory Health Services – Allowable Activities (HRSA)

- Medical history taking
- Physical examination
- Diagnostic testing, including laboratory testing
- Treatment and management of physical and behavioral health conditions
- Preventative care and screening
- Pediatric development assessment
- Prescription and management of medication therapy
- Treatment adherence
- Education and counseling on health and prevention issues
- Referral to and provision of specialty care related to HIV diagnosis



### Outpatient/Ambulatory Health Services in the NY EMA

- Resources for this program (including funding amount) were finalized by the Planning Council.
  - The Planning Council is responsible for setting program priorities and allocating all service-related resources for RWHAP Part A in the NY EMA.
  - The Planning Council allocated resources to fund a total of 3 programs located in New York City's five boroughs.
- Resources allocated will be used to provide services to 30-50 clients, per program
  - This includes 20-30 client referrals per program
- Outpatient Ambulatory Services programs have been operating since March 1, 2023
  - Programs had a successful 6 month start-up phase
  - Program evaluation efforts are ongoing, and TA is consistently provided to ensure fidelity to program model and broad reach of program services to those most in need.



# Select Programs Focused on HIV and Aging



# Provider Training on Enhancing Outcomes for Older People with HIV

In February 2022, NYC DOHMH's Training and Technical Assistance Program (TTAP) launched a new training for clinical and non-clinical service providers focused on enhancing outcomes for older people with HIV. In these trainings, participants learn how the mental and physical health needs of older people with HIV may impact care, treatment, and health outcomes. With an emphasis on a strengths-based, health equity approach, these trainings have equipped providers with tools to better serve older clients with HIV.

So far, NYC DOHMH has held seven trainings with 112 total participants



### Building Equity: Intervening Together for Health (BE InTo Health)

#### **BE InTo Health**

#### Goal

- engagement/ re-engagement in care
- racial/ethnic inequities in HIV outcomes among priority populations

#### **EHE Priority Populations**

- 1. Black and/or Hispanic/Latina women with HIV, including Black and/or Hispanic/Latina cisgender, transgender, non-binary, and/or genderqueer women
- 2. Black and/or Hispanic/Latina transgender women with HIV, and those who identify as non-binary or genderqueer
- 3. Black and/or Hispanic/Latino/a younger people with HIV (ages 13-29)
- 4. Black and/or Hispanic/Latino/a older people with HIV (ages 50 and older)
- 5. Black and/or Hispanic/Latino MSM with HIV, including Black and/or Hispanic/Latino cisgender, transgender, non-binary, and/or genderqueer MSM

#### Intervention

5 clinic and evidence-based interventions to respond to needs of each priority population

## BE InTo Health for Older People with HIV: Eligibility Criteria

People with HIV who identify as Black and/or Hispanic/Latino who are ages 50 years and older and are:

- Newly diagnosed with HIV; or
- Previously diagnosed with HIV and determined to be out of care (i.e., lapse of at least nine months [six months if not virally suppressed] of no HIV medical care visit in a 12-month period); or
- Previously diagnosed with HIV and not virally suppressed; or
- Previously diagnosed with HIV.



# Agencies Implementing BE InTo Health for Older People with HIV

Funded Agency	Projected Client Enrollment	Project Start Date	Location
New York Presbyterian Hospital, Comprehensive Health Program	75 clients	03/01/2021	Washington Heights, Manhattan
Sunset Park Health Council, Inc., Sunset Terrace Family Health Center	75 clients	03/01/2021	Sunset Park, Brooklyn
The Research Foundation for the State University of New York (SUNY), Downstate	75 clients	08/01/2021	Flatbush, Brooklyn



## Discussion



## **Contact Information**

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## Additional slide

