



# **DSRIP & Ending the Epidemic (Transitions in the Medicaid Financed HIV Care System)**

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**MARCH 6, 2015  
DSRIP NYC PPS MEETING**

# HIV Care and Health Care Restructuring Efforts

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HIV Models of Care are expanding to serve other chronic conditions.

Medicaid redesign retains key features of successful programs of integrated HIV care including care coordination, treatment decision support, multidisciplinary care teams, patient retention programs, adherence counseling and staff training, i.e. Medicaid funding for Harm Reduction.

Matching Medicaid claims files with HIV/AIDS Registry for tracking subset of population not on ARVs.

New laws eliminate the requirement for written consent to HIV testing and allow health departments and health care providers to share patient specific data for linkage and retention in care.

# Defining the “End of AIDS”

## A 3-Point plan announced by the Governor on June 29, 2014

1. Identify all persons with HIV who remain undiagnosed and link them to health care.
2. Link and retain those with HIV in health care, to treat them with anti-HIV therapy to maximize virus suppression so they remain healthy and prevent further transmission.
3. Provide Pre-Exposure Prophylaxis (PrEP) for high risk persons to keep them HIV negative



Andrew M. Cuomo - Governor

Governor Cuomo Announces Plan to End the AIDS Epidemic in New York State

Printer-friendly version

*Three-pronged Plan Focuses on Improved HIV Testing, Preventing the Spread of the Disease, and Better Treatment for People Who Have It*

Albany, NY (June 29, 2014)

**Reduce the number of new HIV infections to just 750 [from an estimated 3,000] by 2020**

# NYC HIV DSRIP Projects: Increase Access and Retention

DSRIP HIV Project submissions	PPS Applications submitted in NYC						
	HHC Facilities	Community Care of Brooklyn (CCB) Maimonides	Bronx Partners for Health Communities (BPHC)/St. Barnabas	Lutheran Medical Center	Bronx Lebanon Hospital Center	Mount Sinai Hospitals Group	NY Hospital Queens
<b>4.c.ii – Increase early access to, and retention in, HIV care</b>							
1. Viral Load Suppression (VLS) project		X	X	X	X		X
2. Integration of HIV Screening and Improved Linkages	X	X	X	X	X	X	X
3. PrEP for High Risk Negatives	X	X		X	X	X	X
4. Peer Support Program	X	X	X	X	X		X
5. Develop Peer Specialist Health Navigation Services			X	X	X	X	X
6. Improve Cultural Competency	X		X	X			X
7. Virology Fast Track Plus	X				X		
8. Education Campaign/Social Marketing	X	X	X	X	X		
9. Partner Services							X
10. Offer Therapy for Depression				X			X
11. HIV Registry				X			
12. Link Needle Exchange Services						X	

## DSRIP Application : The New York and Presbyterian Hospital

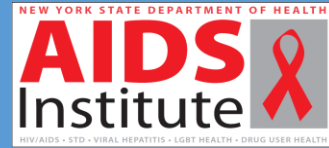
### 3.e.i Center of Excellence for Management of HIV/AIDS

1. Rapid HIV Consult in Emergency Department
2. Expand hours for same day appointments
3. Intensive Care Management & Coordination (Modeled after NYC Part A medical case management program using community navigators)
4. Extend Care Beyond Clinic (train CBO based CHWs)
5. Behavioral Health (SA & MH) Integration
6. Transforming Testing & Adherence including HCV & PrEP Evaluations
7. IT Expansion (EHR for process and outcome of projects)

### 4.c.i Decrease HIV morbidity

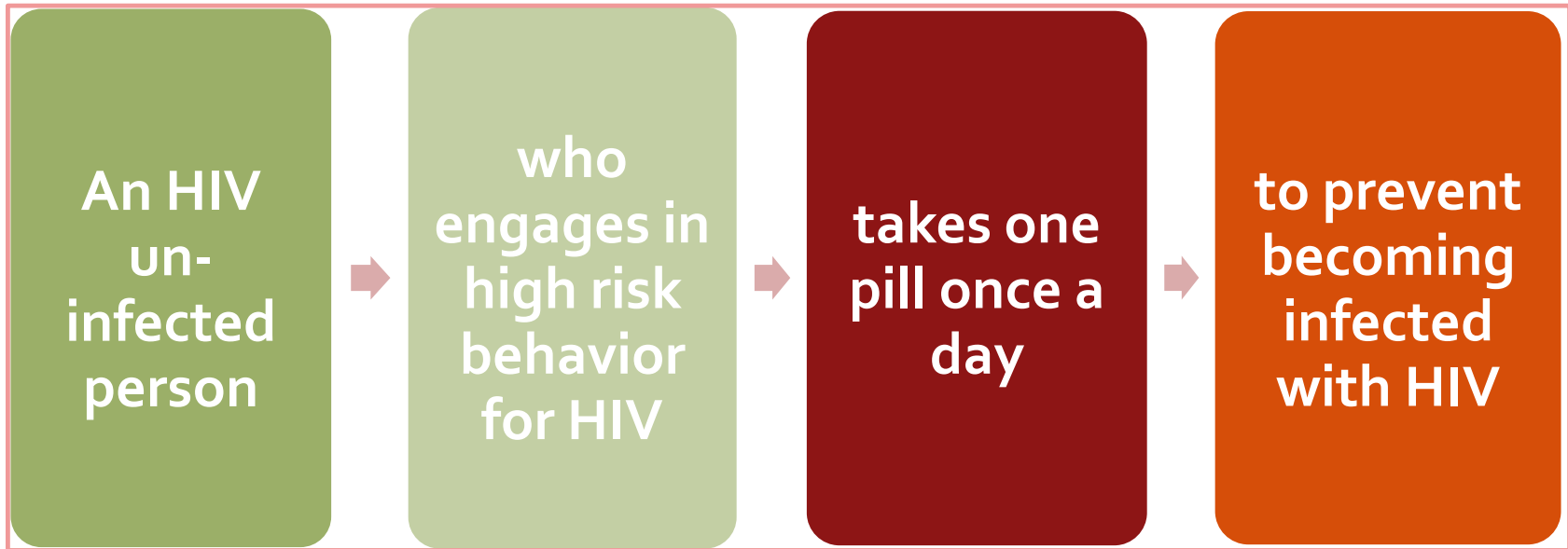
1. Connect agencies for patient tracking and communication
2. Community Health Workers to provide community based support, education & CBO testing
3. Medical Staff available for same day new HIV patient visits

# DSRIP & Medicaid Peer Initiatives



<p><b>Delivery System Reform Incentive Program (DSRIP)</b> 5 year restructuring payments</p> <p>Peers will serve as navigators, staff of self management programs, conducting support groups, outreach for patient activation in community settings (Project 11), etc...</p> <p>In addition, projects with Community Health Workers (CHWs) for chronic conditions will commence (CHWs are not required to be peers)</p>		
<p><b>Health and Recover Plans (HARPs) &amp; HIV Special Need Plans (SNPs)</b></p> <p>Offer 1915i Home and Community Based Services (HCBS) include vocational &amp; peer services</p>		
<p><b>Harm Reduction Counseling as a Medicaid billable service</b></p> <p>Peers provide or assist in providing a wide range of services, including outreach, individual- and group-level interventions, client navigation, support groups, and referrals. - State Plan Amendment (SPA) process for federal approval is underway.</p>		
<p><b>Health Homes</b> flexible care team composition which may employ community members. There are 42 legacy HIV COBRA case management providers who have transitioned to be Health Home providers.</p>		
<p><b>AIDS Adult Day Care (ADHC)</b> utilize peers as stipend workers, providing assistance at the program sites with reception area support, light maintenance, etc. The intention is to foster vocational interests and to build employment related skills.</p>		
<p><b>HIV Special Needs Plans (SNPs)</b> currently utilize peers in care delivery teams.</p>		

# PrEP is HIV prevention



DOH support expressed via Dear Colleague Letter:  
Resources on nPEP and PrEP (January 2014)

# NYCDOHMH promotion of PrEP

- Targeted marketing of PrEP including:
- Outreach to doctors and ads on Facebook, Twitter and apps like Grindr and Scruff.
- Sample message: "Share the Night, Not HIV."

Dr. Demetre Daskalakis  
Assistant Commissioner,  
Bureau of HIV/AIDS Prevention & Control  
NYCDOHMH



# Funding the HIV Continuum of Care

In New York State, over 65% of persons with HIV disease are either on Medicaid, Medicare and Medicaid or are Medicaid pending status.

A historic and ongoing regulatory framework has been established through the Medicaid program that provide a substantial source of ongoing Statewide support for HIV services.

## AIDS Institute Medicaid Initiatives

 1986 Designated AIDS Centers

 1988 AIDS Nursing Facilities

 1989 Pediatric Maternal AIDS Centers

 1989 AIDS Home Care Programs

 1990 Community Follow-Up Program

 1990 HIV Primary Care Medicaid Program

 1991 Enhanced Fees for Physicians Programs

 1993 AIDS Adult Day Health Care Programs

 2003 HIV Special Needs Plans

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