

>> HIV Care and Treatment  
Services, Quality  
Management Report

# Acknowledgments

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This report would not have been possible without the efforts of the local Ryan White Part B, HIV case management programs throughout the state.

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# Programs summary

Oregon Health Authority's HIV care & treatment programs provide high-quality, cost-effective services that promote access to and ongoing success in HIV treatment for people living with HIV (PLWH).

PLWH can effectively manage their HIV disease and improve their overall health and quality of life with successful case management, access to housing through the Oregon Housing Opportunities in Partnership (OHOP) Program, and assistance with medications through Oregon's AIDS Drug Assistance Program (CAREAssist).

Number of Oregon ADAP/CAREAssist clients served in 2014:

**3,470** (including 510 new clients)

Number of OHOP Program clients served in 2014:

**355** (including 117 new clients)

## What CAREAssist clients say:

“ I would be dead if it wasn't for CAREAssist. CAREAssist literally saved my life. ”

“ My coverage, case worker and benefits are **awesome**. ”

**88%\*** of CAREAssist clients had suppressed viral loads at last test;

- **81%** sustained suppression over at least two consecutive tests.

*\*Goal=90%*

## Most common ways OHOP helped:

- **Rent payments:** 201 clients
- **Utilities:** 190 clients
- **Help paying deposits:** 50 clients

## What OHOP clients say:

“ A big thank you for getting me into a home ... I feel secure I will never be homeless ever again. I am beginning to live daily and have **remained sober for one year and two months**. ”

“ If it wasn't for this program, I'd probably be back in prison. **Instead I'm attending college**. ”

The state of Oregon provides HIV case management services for PLWH living in the 31 counties outside the Portland metropolitan region. These diverse communities are served through contracts, administered by eight local public health authorities and two nonprofit agencies.

### Number of Part B HIV case management clients served in 2014:

**1,144** (including 169 new clients)

- **941** clients served through the regional model.
- **203** clients served by local public health departments.

**88%\*** of Part B case management clients had suppressed viral loads at last test;

- **82%** sustained suppression over at least two consecutive tests.

*\*Goal=90%*

**87%** of case management clients rate the overall quality of services as **excellent** or **good**.

**94%** of medical case management clients have a care plan.\*

*\*Federal performance measure*

### What HIV case management clients say:

“

My case manager helped with transportation and dental care, and **I would not have gotten to the doctor or dentist this year without her.**

”

“

I lost my [medication] coverage and my case manager made sure I would **get my HIV drugs** on a very short notice.

”

“

My case manager provided great information on dental, food and eye care, which is allowing me to **stay healthy.**

”

# Quality management trended data

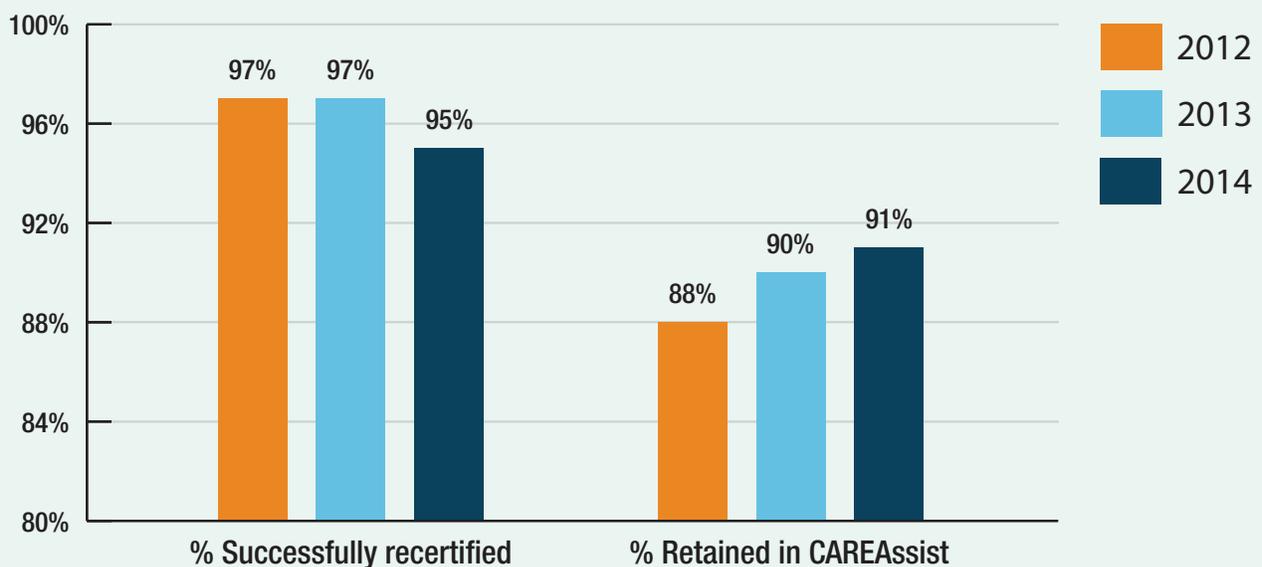
Oregon's CAREAssist and HIV Community Services programs trend a variety of outcomes for its services. We use these data to make decisions about program directions, funding, policies and procedures, training needs, and need for new services. The following indicators show progress over time towards three key service goals.

## I. Provision of CAREAssist services

**Service goal:** Improve the health of HIV-positive Oregon residents through access to HIV/AIDS medical treatment by paying for insurance premiums and prescriptions.

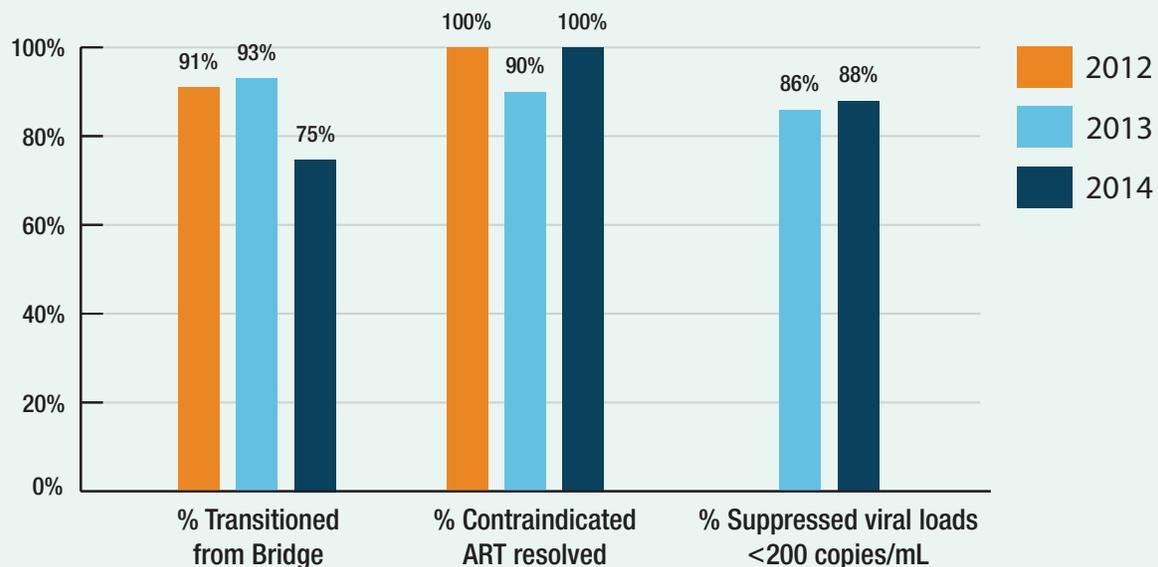
The CAREAssist Program serves more than 3,000 unduplicated clients and receives about 500 new applications each year (508 in 2013; 510 in 2014). CAREAssist staff work hard to ensure clients recertify in a timely manner and receive uninterrupted benefits from the program. A high proportion of CAREAssist clients successfully recertify, as required by federal regulations, and are retained in the program (Table 1).

Table 1: CAREAssist program retention, 2012–2014



Two quality care concerns the CAREAssist program tracks are Bridge Program participation and resolution of contraindicated antiretroviral therapy (ART). CAREAssist assumes full costs for clients participating in the Bridge Program while they wait for other insurance coverage to begin. Bridge is intended to be a temporary program, with the intention that clients will transition fully to CAREAssist as soon as possible. The vast majority of clients successfully make this transition. Rates were lower in 2014 because a higher proportion of clients were covered by Medicaid through the Affordable Care Act. Once on Medicaid coverage, they had no out-of-pocket expenses to cover and did not need further assistance from CAREAssist. The ultimate goal is to ensure at least 90% of CAREAssist clients remain healthy, with a suppressed viral load under 200 copies/mL (Table 2).

**Table 2: CAREAssist program quality measures, Oregon 2012–2014**



*Note: Some data not reviewed in 2012.*

CAREAssist’s pharmacy benefit manager, as part of their ongoing quality management program, reviews client pharmacy data to identify contraindicated regimens, contact prescribing physicians and transition the client to an approved ART regimen. In 2014, 100% of identified clients were successfully transitioned to approved regimens (Table 2).

Only 9.4% of CAREAssist clients left the program in 2014, for voluntary reasons (moving out of state, receiving other insurance) or involuntary reasons (death, not paying cost-share or not recertifying). This compares to 9.6% of clients leaving CAREAssist in 2013 and 12% in 2012.

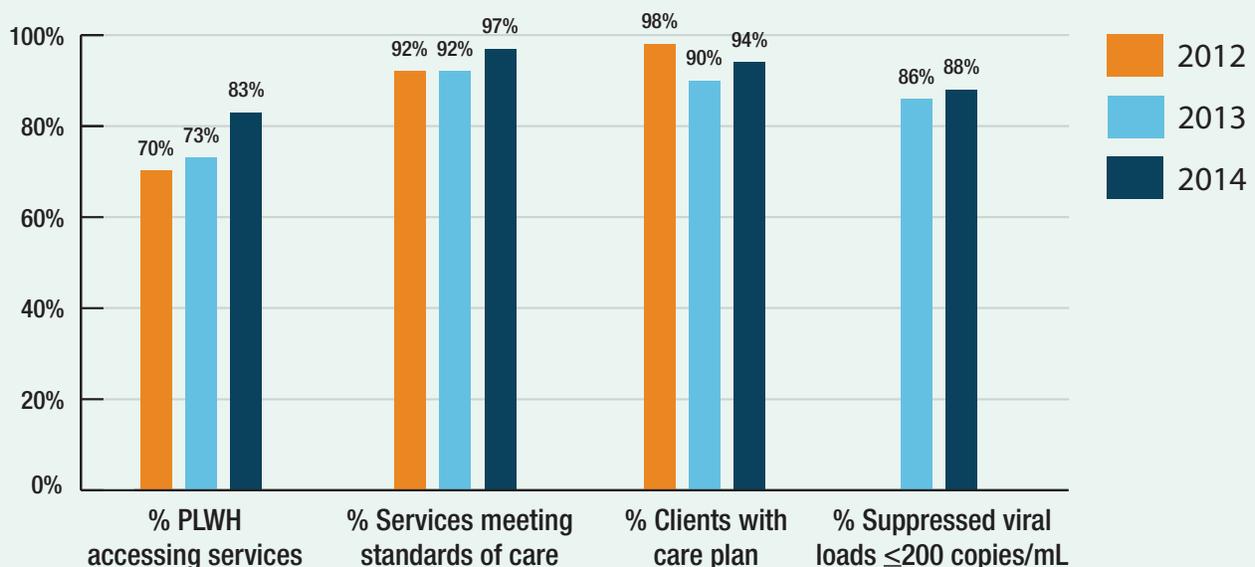
## II. Medical case management

**Service goal:** Provide access to high quality medical care and support services coordination through HIV medical case management and other core services.

Oregon's HIV Community Services Program endeavors to make services available and accessible to PLWH in the Part B service area who need them. Based on surveillance data estimates, we believe more than 80% of PLWH are successfully accessing HIV community services (Table 3), which exceeds the federal goal of 75%.

In 2014, more than 90% of Part B case management clients and services met the programs quality management targets. Specifically, 97% of program services met program standards of care and 94% of medical case management clients had a documented care plan (Table 3). Medical case management employs a wide range of interventions to reduce barriers, provide support, education and advocacy necessary to ensure access and increase engagement and retention in HIV care. The program aims to help clients to achieve viral suppression (goal = 90%)

**Table 3: Part B HIV Community Services Program quality measures, 2012–2014**



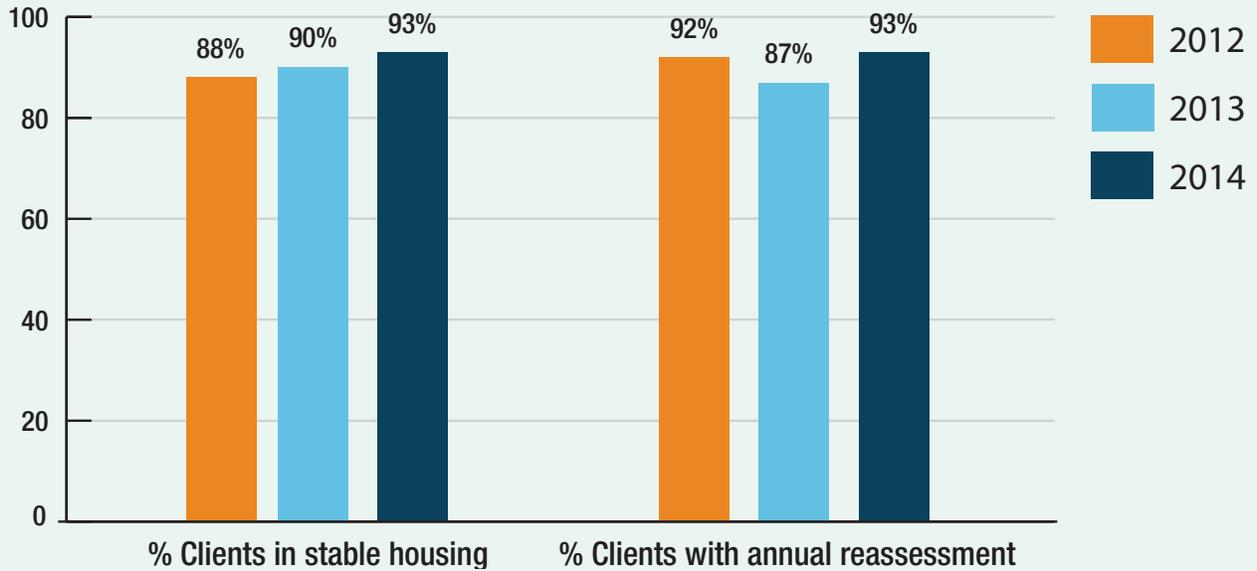
*Note: Some data not reviewed in 2012.*

### III. Housing and other supportive services

**Service goal:** Increase access to and retention in HIV medical care and treatment through support services.

Part B direct support services include housing help, transportation, food vouchers and other services designed to reduce barriers to accessing HIV care for those who struggle to meet basic needs. Housing in particular has been identified as a crucial support for retention in HIV medical care. The program’s goal is 95% of its clients have stable housing and 100% receive an annual reassessment from a medical case manager (Table 4).

**Table 4: Part B housing and retention in case management**





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