

Ending the Epidemic Task Force Recommendation Form

#56



COMPLETE

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PAGE 1

Q2: Title of your recommendation

CBOs role in retention in care

Q3: Please provide a description of your proposed recommendation

Community Based Organizations with expertise in outreach have an important role to play in finding clients who have fallen out of care and helping them re-engage in medical treatment and other services. It is recommended that patient level data be provided directly to CBOs with an expertise in community-based and street outreach to facilitate the process of locating people who are not engaging in medical care. Currently, CBOs do not have access to this data.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

Ending the Epidemic Task Force Recommendation Form

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

Data Committee: Develop recommendations for metrics and identify data sources to assess the comprehensive statewide HIV strategy. The Committee will determine metrics that will measure effective community engagement/ ownership, political leadership, and supportive services. It will also determine metrics that will measure quality of care, impact of interventions and outcomes across all populations, particularly identified sub populations such as transgender men and women, women of color, men who have sex with men and youth. In addition, the Committee will evaluate to determine optimal strategies for using data to identify infected persons who have not achieved viral suppression and address their support service, behavioral health, and adherence needs.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Statutory change required

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

Q9: What are the perceived benefits of implementing this recommendation?

CBOs have been successful in finding people most at-risk for HIV and getting them into testing and treatment programs. This expertise should be used to find clients who have dropped out of care to help them re-engage in services. CBOs already have the structure in place to quickly implement outreach programs but lack the data about who is not receiving medical care. People who are lost to care could be found and re-engaged more quickly.

Ending the Epidemic Task Force Recommendation Form

Q10: Are there any concerns with implementing this recommendation that should be considered?

There are no concerns about implementing this recommendation. The NYSDOH may be concerned about sharing sensitive data with CBOs. However, CBOs already handle confidential medical data. In addition, CBOs who are also Health Home downstream providers are provided with medical data (last 5 Medicaid claims) from lead Health Homes.

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Respondent skipped this question

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Respondent skipped this question

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

Individuals who are lost to care

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

As part of the contract and workplan process, DOH could monitor the number of clients who are found and re-engaged in medical care as a marker of program success.

Q15: This recommendation was submitted by one of the following

Respondent skipped this question