



CDC/HRSA Advisory Committee on HIV, STI, and Viral Hepatitis

HIV/AIDS Bureau Updates

April 26, 2022

Laura Cheever, MD, ScM
Associate Administrator
HIV/AIDS Bureau (HAB)

Vision: Healthy Communities, Healthy People



HAB Welcomes New HRSA Administrator



Carole Johnson
Administrator, Health Resources and Services
Administration

HRSA's HIV/AIDS Bureau Vision and Mission

Vision

Optimal HIV care and treatment for all to end the HIV epidemic in the U.S.

Mission

Provide leadership and resources to advance HIV care and treatment to improve health outcomes and reduce health disparities for people with HIV and affected communities.



New Look, New URL: The HAB Website Has Officially Relunched as RYANWHITE.HRSA.GOV!

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HRSA
Ryan White HIV/AIDS Program


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Home About the Program HIV Care Grants Data Resources

New 2020 Ryan White HIV/AIDS Program Data

Read the latest client-level data report

[Learn More](#)



FEATURED



Find HIV Care and Treatment

Get connected to HIV care, treatment, and support through the Ryan White HIV/AIDS Program.



Register for the 2022 National Ryan White Conference

The National Ryan White Conference is August 23-26, 2022, in Washington D.C. The conference is being planned to include both limited in-person and virtual attendance options.

EXPLORE

Resources

View fact sheets, infographics, publications, and more.

Data

Learn about clients served by the Ryan White HIV/AIDS Program.

Grants

Access resources that support Ryan White HIV/AIDS Program grant recipients.

HIV Care

How to find HIV care and services through the Ryan White HIV/AIDS Program.

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Find a Ryan White HIV/AIDS Program Medical Provider

Enter a city name, ZIP code (such as "20002"), address, state name, or place name.

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More About the Program

[Who Was Ryan White?](#)

[State Hotlines](#)

[Find Funding](#)

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HRSA
Health Resources & Services Administration



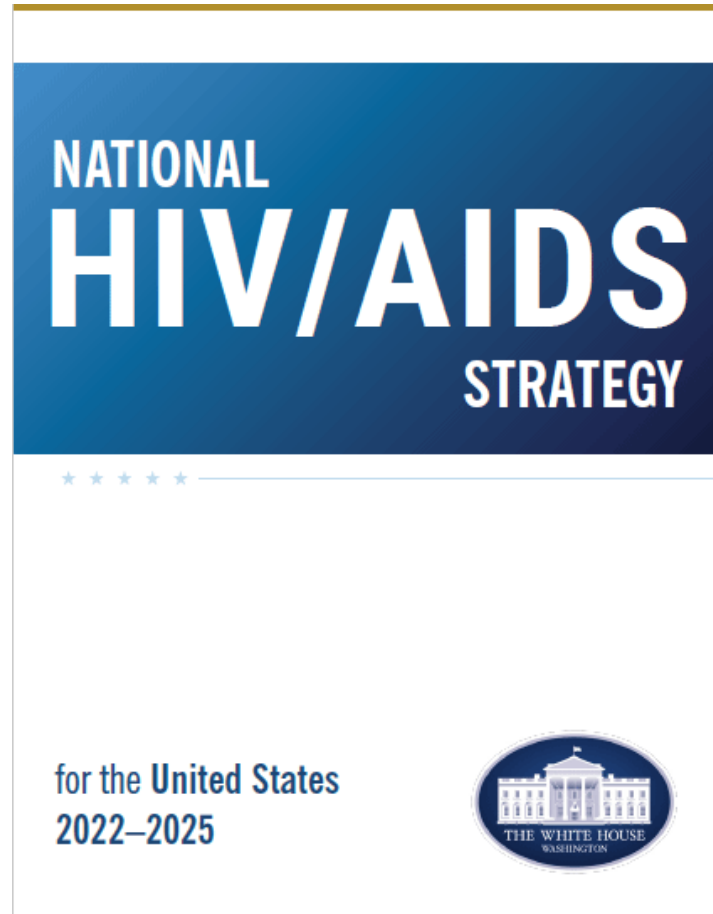
[Contact Us](#)

New website URL: www.ryanwhite.hrsa.gov



HRSA
Ryan White HIV/AIDS Program

National HIV/AIDS Strategy



- The [National HIV/AIDS Strategy \(2022-2025\)](#) was released on December 1, 2021.
 - Roadmap to accelerate efforts to end the HIV epidemic in the United States by 2030
- Strategy focuses on **four** goals:
 1. Prevent new HIV infections.
 2. Improve HIV-related health outcomes of people with HIV.
 3. Reduce HIV-related disparities and health inequities.
 4. Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders.

Implementing the National HIV/AIDS Strategy (NHAS)

- HRSA developed an Implementation Plan that outlines **specific actions** that it will take to achieve the Strategy's goals and objectives
- HRSA engaged with the Ryan White HIV/AIDS Program stakeholder community in order to hear thoughts and ideas on ways we can support NHAS goals and accelerate our efforts toward ending the HIV epidemic
- HRSA conducted listening sessions with key stakeholder groups, including:
 - Patient Advocacy Organizations
 - HIV Provider Organizations
 - Constituency Based Organizations
 - Coalition Groups



National HIV/AIDS Strategy Quality of Life Indicator Workgroup

Purpose: Develop an indicator to measure quality of life for people with HIV

Key points:

- Workgroup membership includes ACL, DOJ, CDC, HRSA, NIMH, NIAID, and SAMHSA
- Co-chaired by CDC and HRSA
- Accelerated timeline to complete work – 75 days!
- Utilize existing datasets to identify indicator and future actions
- Community engagement met in late February 2022



HAB Collaboration with ACL and HUD



Collaboration with the Administration for Community Living (ACL) and the U.S. Department of Housing and Urban Development (HUD)

Ongoing partnership with the ACL:

- To foster safe, high quality health care for the aging population
- To share information about RWHAP and hear from ACL about their program and services

Long-standing, committed collaboration with HUD:

- Because the RWHAP does not function as a housing provider
- To expand our work with HUD *beyond* the Housing Opportunities for People with AIDS (HOWPA) program



2022 National Ryan White Conference Updates



- Thank you for submitting your abstracts for the 2022 National Ryan White Conference on HIV Care & Treatment
- Nearly 400 abstracts were submitted
- Abstract approvals sent out the week of April 12th

The 2022 NRWC is Going Virtual!

Conference
registration is
now open



Moving to an all virtual format

Unlimited virtual participation

No RWHAP part specific caps
required

Similar interactive virtual platform
like in 2020

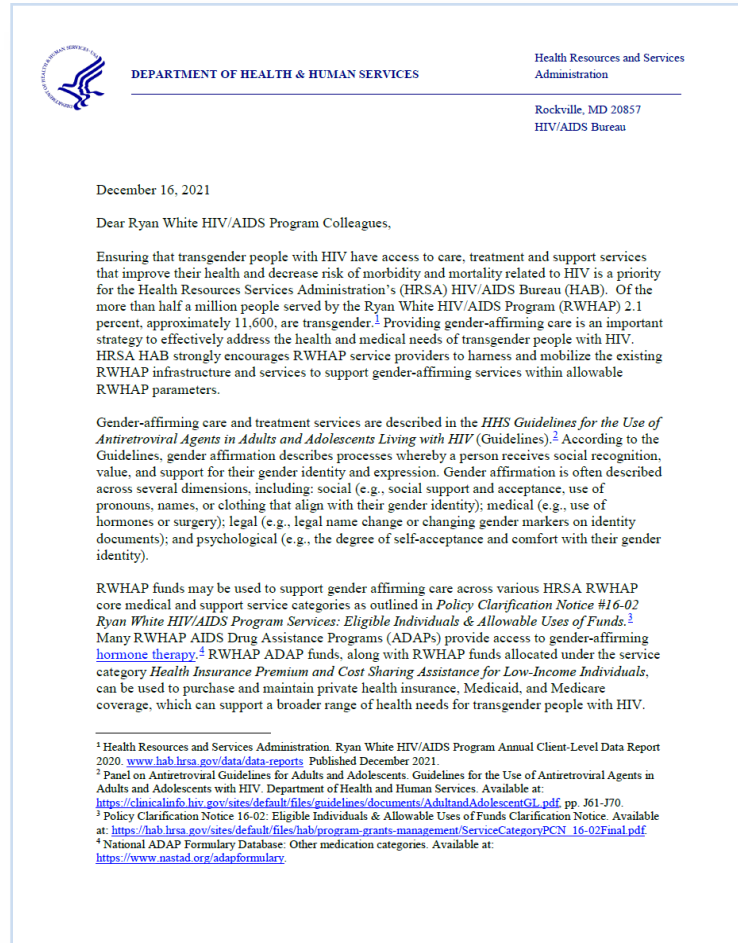
All breakout sessions will be pre-
recorded

Policy Updates



Gender Affirming Care in the RWHAP Program Letter

- Reaffirms the importance of providing culturally-affirming health care and social services to the transgender community
- Letter is *not* new policy or approach to the services delivered by the RWHAP
- Accessible via:
<https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/hiv-care/gender-affirming-care-rwhap.pdf>



Ryan White HIV/AIDS Program Updates



New EHE Community Listening Sessions and Telehealth and the RWHAP Executive Summaries Now Available

Access the new resources:
<https://ryanwhite.hrsa.gov/resources/expert-panel-summaries>



Ending the HIV Epidemic in the U.S. Initiative 2021 Community Engagement Listening Sessions

Executive Summary

In 2021, the Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB) offered two sessions: (1) a public health leader roundtable and (2) a community members listening session. In total, more than 1,900 participants attended at least one of the sessions.

Background
The Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB) oversees the Ryan White HIV/AIDS Program (RWHAP) and has a leading role in the Ending the HIV Epidemic in the U.S. (EHE) initiative. Community engagement has been fundamental to HRSA's success since the beginning of the RWHAP. HRSA HAB believes our collective success in meeting the goals of the RWHAP and EHE initiative depends on how well we engage people with HIV and their communities in the planning, development, and implementation of HIV care and treatment strategies.


Participants in HRSA HAB's EHE Listening Sessions
Listening session participants included—

- community-based organizations, including organizations focused on behavioral health, youth, and LGBTQ+ support
- state and local health departments
- federal agencies
- Federally Qualified Health Centers and look-alikes
- faith-based organizations
- people with HIV and clients served by the Ryan White HIV/AIDS Program EHE recipients
- RWHAP AIDS Education and Training Centers
- other RWHAP organizations
- other individuals who are not captured in the categories above

Leaders from the HRSA Bureau of Primary Health Care, the HRSA Office of External Affairs, and the Centers for Disease Control and Prevention Division of HIV, STD, and TB Elimination were in attendance.

Listening Session Topics
The listening sessions were guided by questions on the following topics: (1) opportunities for effective HIV prevention and treatment; (2) innovative approaches to HIV prevention and treatment; and (3) current and future partners for community-based and public health communities.

* Please note, this document is a high-level summary of the feedback and suggestions offered during the sessions and does not include all the comments and ideas shared during the sessions.



Innovation and Resilience: How Ryan White HIV/AIDS Program Recipients Leverage Telehealth during the COVID-19 Pandemic

Executive Summary

Topics Addressed in This Summary

- Leveraging telehealth laws, provisions, and flexibilities during the coronavirus disease 2019 (COVID-19) pandemic
- Strategies to ensure linkage to and retention in care
- Technology considerations and bridging the digital divide
- Obtaining informed consent for treatment
- Telehealth procedural workflows
- Documentation and third-party billing
- Case examples of the successful application of telehealth
- Keys to success


Telehealth Laws, Regulations, and Provisions
A number of legislative and regulatory changes have been made by states regarding telehealth—including to Medicaid programs—in response to the COVID-19 pandemic. Many of these provisions are tied to continued declarations of a public health emergency and, thus, will be discontinued once the declarations are no longer in effect, absent further statutory or regulatory changes.

Developed by the Health Resources and Services Administration (HRSA), the [Telehealth HRSA website](https://www.hrsa.gov/telehealth)⁸ includes information for providers and patients regarding federal efforts to support and promote the provision of healthcare via telehealth. It also includes [linkage resources](#)⁹ to help providers, patients, and their caregivers understand and prepare for telehealth visits, including a best practice guide for providers on [telehealth and HIV care](#). HRSA supports telehealth efforts made by the U.S. Department of Health and Human Services (HHS) to expand healthcare access and improve health outcomes, including telehealth grant programs that promote and advance telehealth services in rural areas. In addition, HRSA funds the Rural Health Information Hub ([RHII](#))¹⁰ which includes the Rural HIV/AIDS Prevention and Treatment Toolkit¹¹ and resources on telehealth.¹²

The following subsections describe ways to leverage the changes to telehealth while they remain in effect, many of which may be applicable post-pandemic.

Marketing and messaging. Tailor materials for audiences—patients or providers—to highlight the range of resources and modify approaches to obtain or deliver care via telehealth. Clients should be provided a description of the array of conditions that may be treated using telehealth (e.g. management of diabetes, hypertension, mental/behavioral health, HIV care, etc.) and the ease of accessing these services while practicing social distancing. In addition, providers should be notified of the provisions for telehealth reimbursement. Disseminate the material via email messages, telephone calls, or mailed handouts.

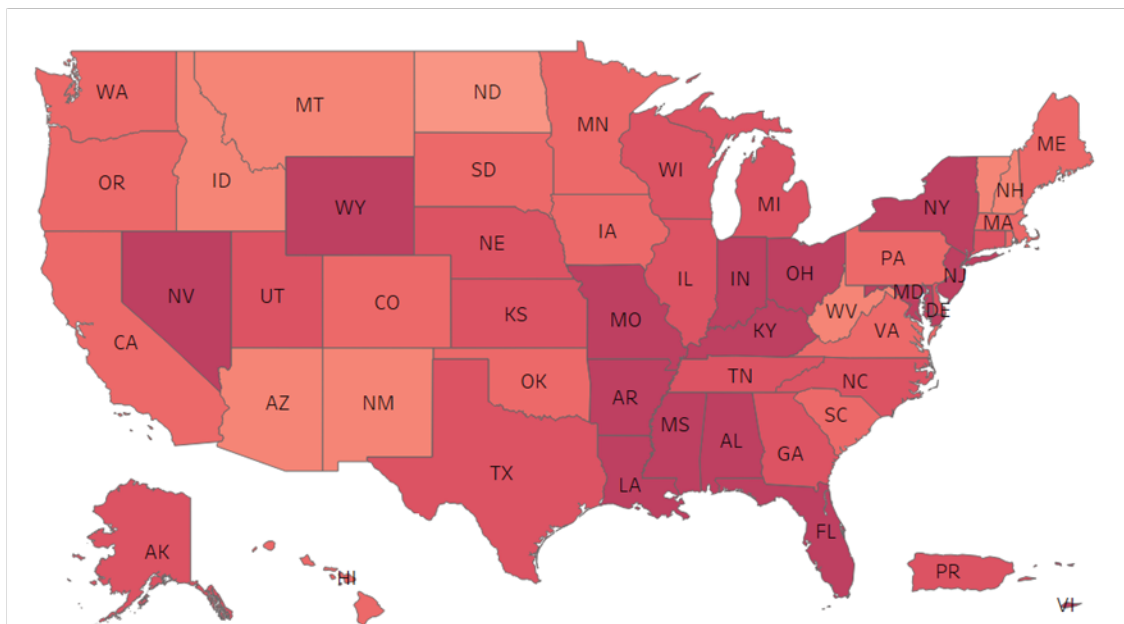
Coordination with local and state resources to serve people who are unstably housed. Leverage local and state resources to provide care for patients experiencing homelessness or unstably housing. Cellphones can facilitate care coordination and telehealth appointments for patients who are unstably housed. Although cellphones may be purchased for some clients using Ryan White



Data Updates



Viral Suppression among RWHAP Clients, by State, 2010 and 2020— United States and 2 Territories^a

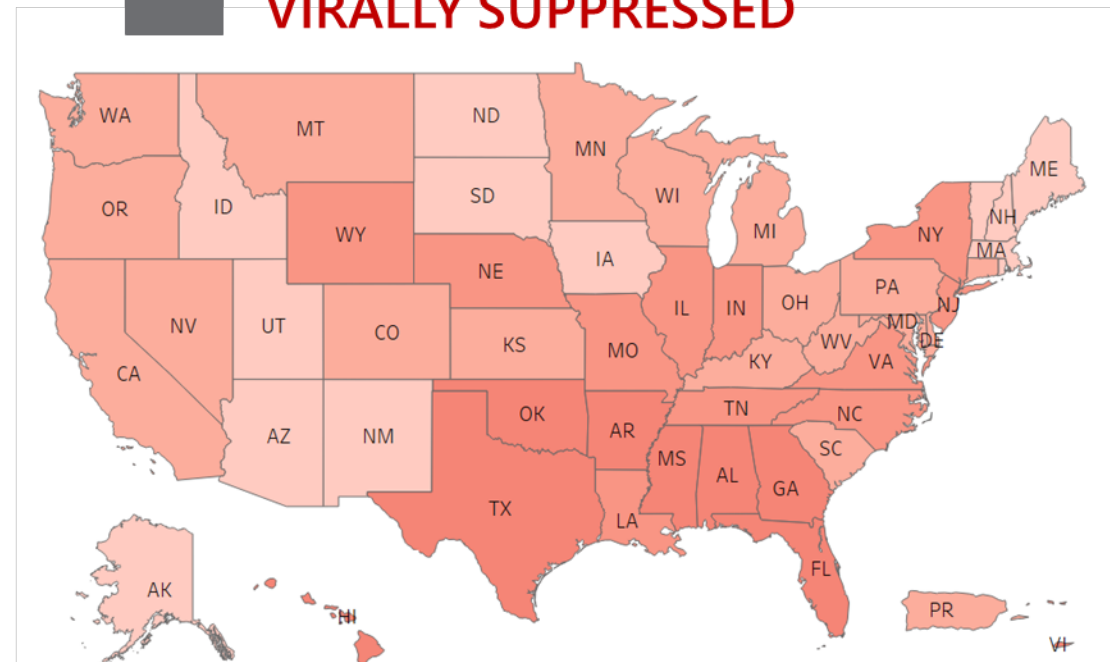


IN 2010
69.5%
VIRALLY SUPPRESSED

Viral Suppression (%)

- 52.9-66.9
- 70.0-72.9
- 73.0-79.9
- 80.0-87.9
- 88.0-89.9
- 90.0-92.9
- 93.0-98.8

IN 2020
89.4%
VIRALLY SUPPRESSED

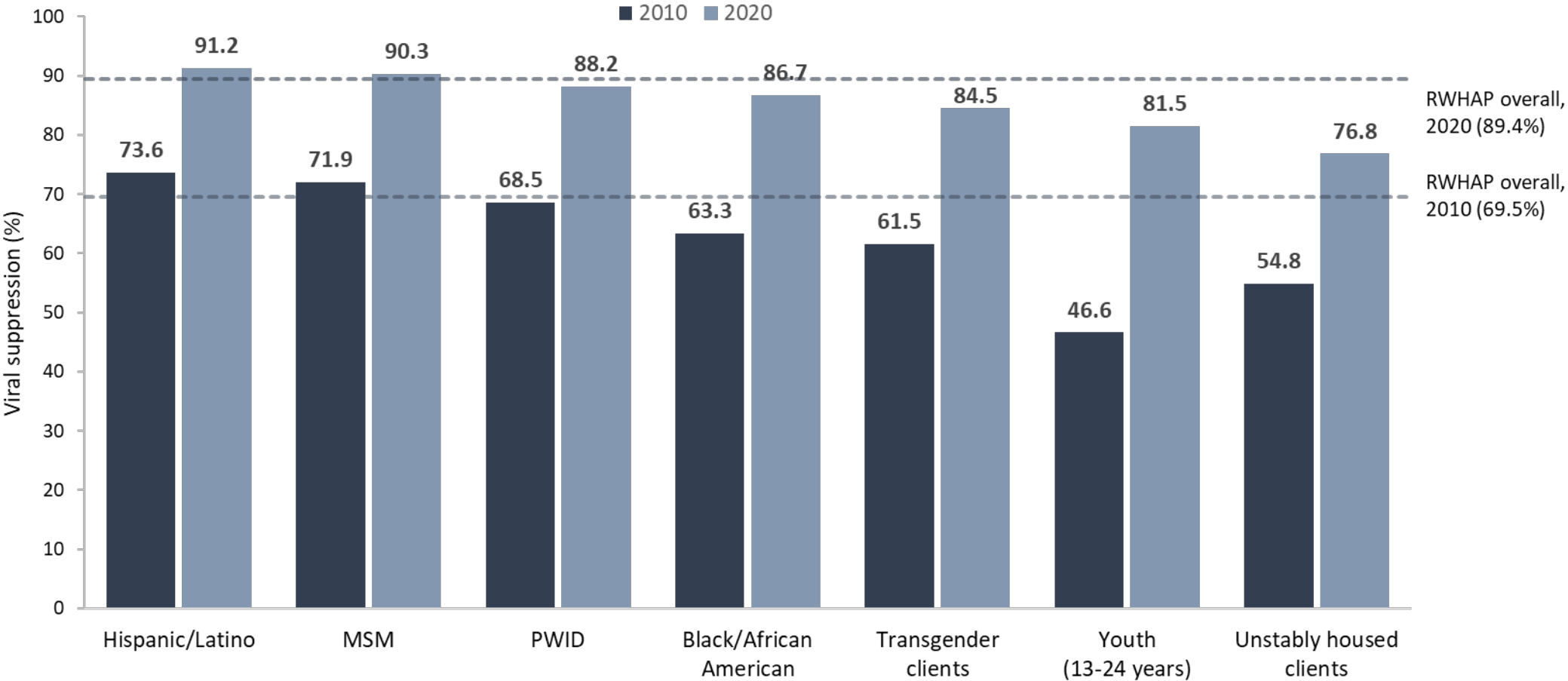


Viral suppression: ≥1 OAHS visit during the calendar year and ≥1 viral load reported, with the last viral load result <200 copies/mL.

^a Puerto Rico and the U.S. Virgin Islands.



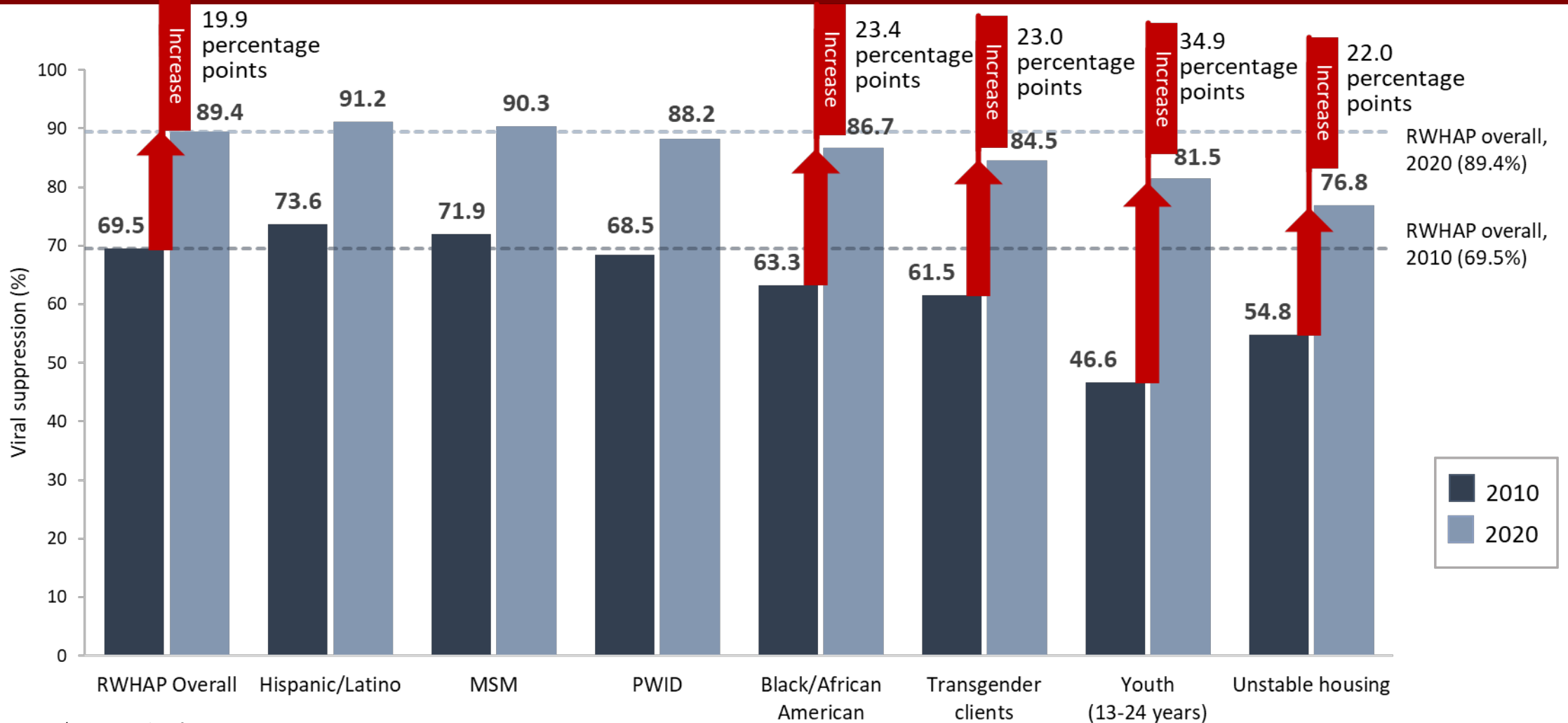
Viral Suppression among Priority Populations Served by the Ryan White HIV/AIDS Program, 2010 and 2020—United States and 3 Territories^a



Hispanics/Latinos can be of any race.
Viral suppression: ≥1 OAH visit during the calendar year and ≥1 viral load reported, with the last viral load result <200 copies/mL.
^a Guam, Puerto Rico, and the U.S. Virgin Islands.



Significant progress has been made in viral suppression among priority populations, but inequities remain, particularly among Black/African American clients, transgender clients, youth aged 13–24 years, and clients with unstable housing.



Hispanics/Latinos can be of any race.
 Viral suppression: ≥ 1 OAHs visit during the calendar year and ≥ 1 viral load reported, with the last viral load result < 200 copies/mL.
^a Guam, Puerto Rico, and the U.S. Virgin Islands.



HRSA HIV/AIDS Bureau Ending the HIV Epidemic in the U.S. (EHE) Initiative Data Report, 2020



Overview of Report

HRSA HIV/AIDS Bureau

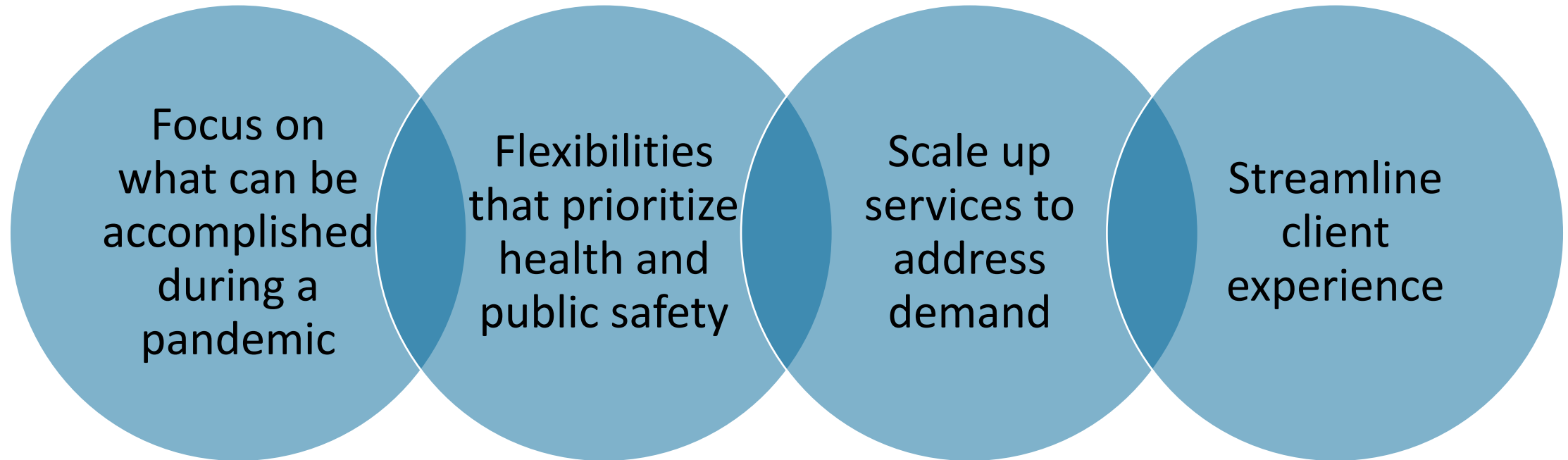
Ending the HIV Epidemic in the
U.S. Initiative

Data Report
2020



- The inaugural *2020 HRSA HAB Ending the HIV Epidemic in the U.S. Data Report* highlights data submitted to HRSA HAB through the EHE Triannual Module data system.
- EHE Triannual Module data are reported on the calendar year rather than on the budget year
- To align data reporting with the calendar year, two reporting periods were established for 2020
 - March through August (6 months)
 - September through December (4 months).

Solutions Leveraged by EHE Recipients to Address COVID-19



HRSA HAB-funded EHE staff & resources allowed states and cities to better respond to COVID-19



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