



VIRTUAL
2020 NATIONAL
RYAN WHITE
CONFERENCE ON
HIV CARE & TREATMENT

Utilizing Program Income and community partnerships to address challenges of poverty in the deep south

Mary Frances Spitler

Kathy Gaddis, MSW, LICSW

Laterica Williams, MSW

Kris Hauenstein, LMSW

Learning Objectives



- Establish relationships with community partners who are working in your clinic's area
- Create programs through collaborative partnerships to address the complex needs of patients
- Develop contracts with community partners in order to support initiatives using program income

Today's Agenda



- Overview of UAB 1917 Clinic and 340B Program
- Leveraging community expertise and program development
- Development contracts with community partners using HRSA's PCN 16-02 guidance
- Overview of Temporary Housing Program
- Overview of B-FED Project
- Challenges
- Q & A



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UAB MEDICINE
1917 CLINIC

Knowledge that will change your world

1917 Clinic and 340B Program Development

Kathy Gaddis

University of Alabama at Birmingham 1917 Clinic

Director of Social Services, Program Development, and Community Engagement

UAB 1917 Clinic



- 1988 – University teaching hospital clinic was founded
- 1997 – First awarded Ryan White Part C grant
- 2010 – Registered as a 340B entity
- 2011 – Registered with an external 340B pharmacy
- 2013 – Contracted with internal 340B pharmacy
- 2017 – Implemented contracts with Community Partners

Services Provided at UAB 1917 Clinic



Medical Services

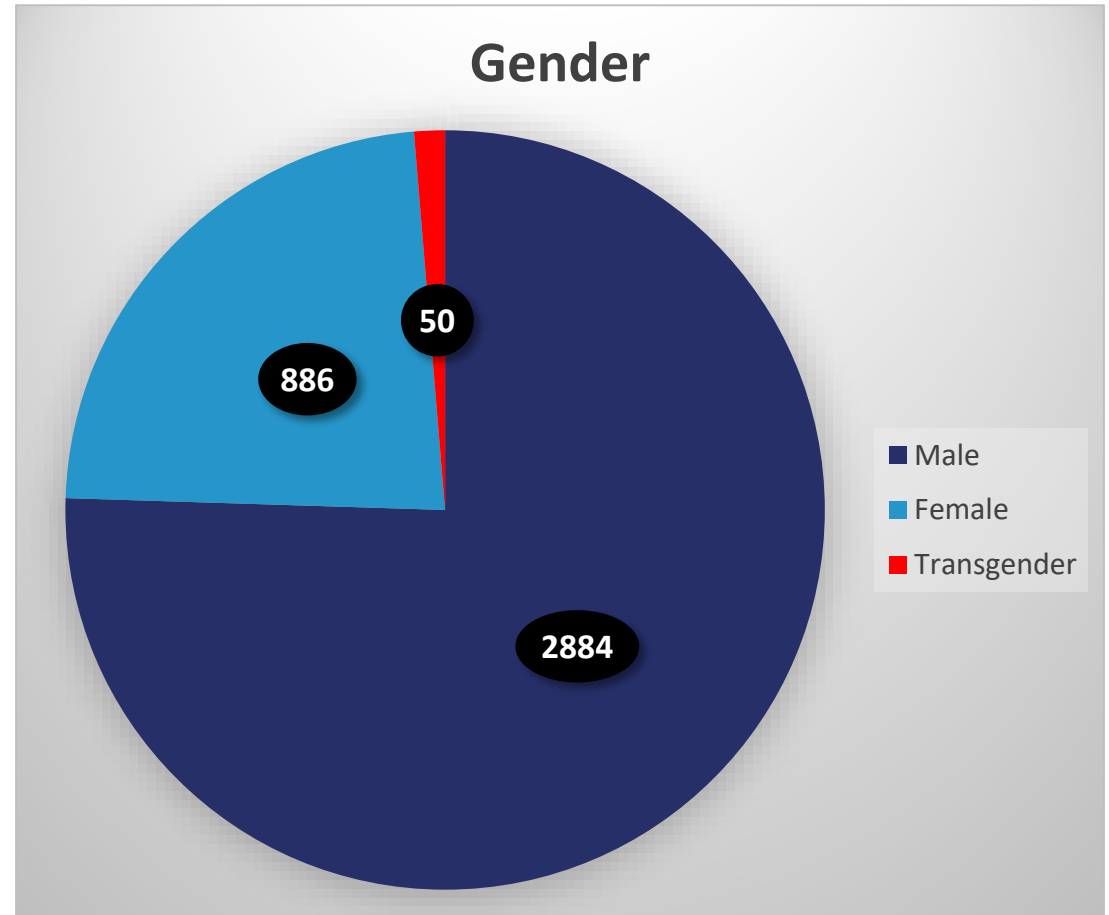
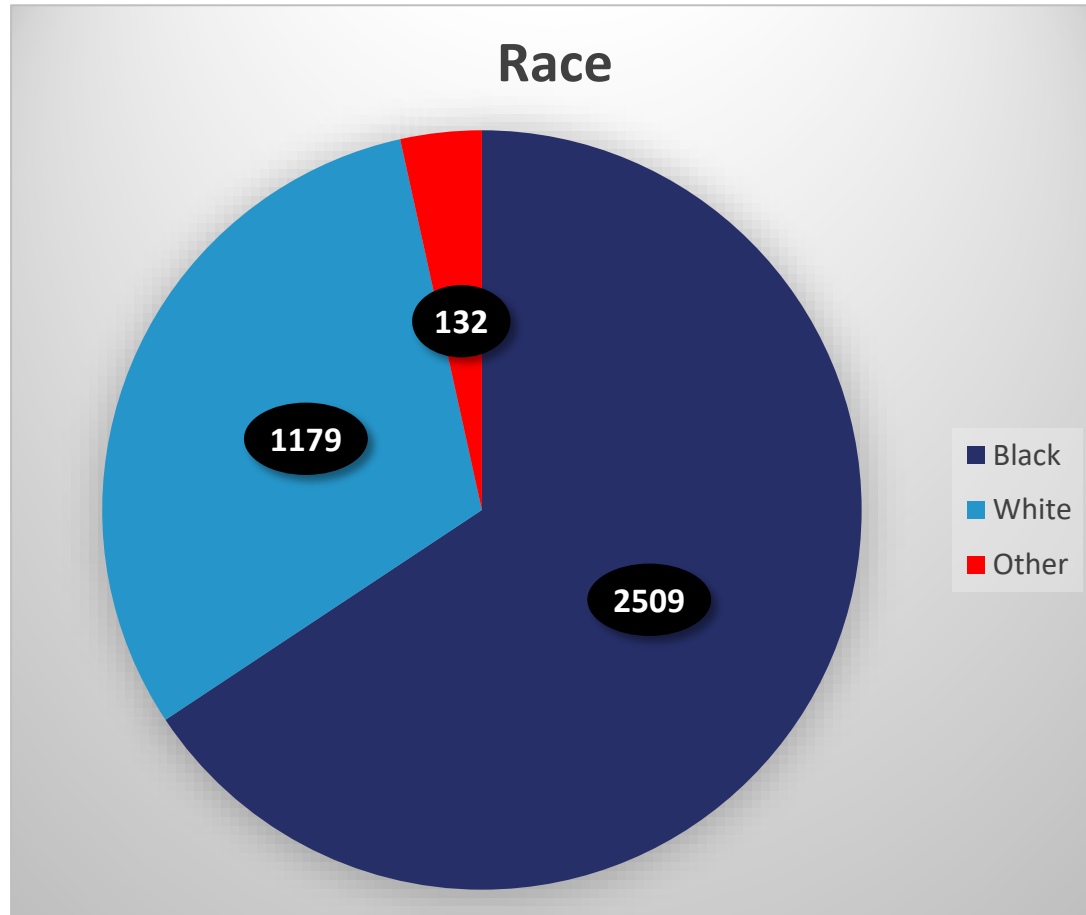
- HIV Primary Care
- Women's Health
- Endocrinology
- Psychiatry
- Neurology
- Nephrology
- Dermatology
- Chronic Pain Management
- OBOT (Office-based Opioid Treatment)

Comprehensive Services

- Pharmacy & Medication Education
- Social Work
- Mental Health
- Nutrition
- Support Groups
- Partner HIV Testing
- Prevention Services / Outreach
- Volunteer Opportunities & Advisory Boards

UAB 1917 Clinic Demographics

Clinic Patients = 3820



Income -

Clinic population – 3,820

- 78.3% have income less than 200% of the Federal Poverty Level, earning less than \$2,126 per month
- 54% earn less than \$1000 per month



Identify Gaps

- Community needs assessment
- Patient Surveys
- Discussions with clinic patients, providers, clinic staff

Housing

Nutrition

Housing

AIDS Alabama and Aletheia House

- Fall 2016 - Initial meetings
- Summer 2017 – Implementation

Nutrition Program

Birmingham AIDS Outreach (BAO)

- Summer 2017 - Initial meeting
- Fall 2017 - Implementation

Process with Community Partners



Initial start-up meeting to outline proposal requirements

Review proposal and make modifications
prepare contract

Collaborative communication during development

Evaluation and planning meetings

Client Centered Teamwork



- Move away from 1917 Clinic versus Community Partners and learn to become one team
- Focus on supporting clients
- Multi agency leadership team
- Work together to develop programs, policies and troubleshoot challenges
- Communication is KEY

Internal Housing Committee



- Clinic social workers
- Member of the multiagency leadership team
- “Super User”
- Review and select referrals
- Meet regularly with community partners
- Assist in planning multi agency quarterly trainings

Lessons Learned



- Internal committees to assist with policy development, implementation and regular meetings with community partners
- Regular meetings between clinic and community partners are important in the planning, implementation and evaluation
- Consistent parameters and clear expectations are imperative
- Housing – Quarterly training with all staff for policy updates and to share best practices.
- Good communication is crucial



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Fiscal Oversight of Community Partnerships using 340B Program Income

Mary Frances Spitler

UAB Center for AIDS Research

Ryan White Financial Officer

Ensuring Appropriate Use of Program Income



- Program Director approves all new expenditures & initiatives
- Program Manager, Financial Officer, and institutional signing official ensure that expenditures meet HRSA regulations/guidelines
- Review of all invoices for the following:
 - Patient is Ryan White Eligible
 - Referral of patient is documented and services match
 - Allowability of charges
 - Use of RW Policy Clarification notices 15-03 and 16-02 to educate institutional partners

Planning for Use of Program Income



- Annual operating budgets are developed based on Ryan White Service Categories and incorporate all funding streams for the program
 - 340B program income
 - 3rd party payers revenue streams
 - Part C funding
- Quarterly assessments are done of average revenue vs expenses and operating budgets are adjusted accordingly

Internal Barriers to Engaging in Various Opportunities



Barrier

- Differing interpretations of HRSA policy by institutional stakeholders
- Risk aversion from our institution
 - The “too good to be true” scenario

Our Solution

- Ongoing and open conversations with HRSA program officer
- Strategic planning to utilize program income that includes all levels of institutional leadership
- Staff education on the 340B program and what it means to our clinic staff, patient population, and community partners
- Sharing availability of 340B funded opportunities in an appropriate way

Allowable Services (PCN 16-02)



- AIDS Pharmaceutical Assistance
- Early Intervention Services (EIS)
- Health Insurance Premium and Cost Sharing Assistance
- Home Health Care
- Hospice
- Medical Case Management
- Medical Nutrition Therapy
- Mental Health Services
- Oral Health Care
- Outpatient/Ambulatory Health Services
- Substance Abuse Outpatient Care
- Child Care Services
- **Emergency Financial Assistance**
- **Food Bank/Home Delivered Meals**
- Health Education/Risk Reduction
- **Housing**
- Legal Services
- Linguistic Services
- Medical Transportation
- Non-Medical Case Management Services
- Other Professional Services
- Outreach Services
- Permanency Planning
- Psychosocial Support Services
- Referral for Health Care and Support Services
- Rehabilitation Services
- Respite Care
- **Substance Abuse Services (residential)**

Contract Template



<u>Position</u>	<u>Name</u>	<u>Annual Salary</u>	<u>FTE</u>	<u>Salary Cost</u>	<u>Fringe</u>	<u>Total Cost</u>
Housing Project Coordinator			100%	\$ -	\$ -	\$ -
Administrative Support			100%	\$ -	\$ -	\$ -
Clinical Supervisor			15%	\$ -	\$ -	\$ -
Housing Case Manager			100%	\$ -	\$ -	\$ -
Housing Case Manager			100%	\$ -	\$ -	\$ -
Housing Case Manager			100%	\$ -	\$ -	\$ -
Housing Case Manager			50%	\$ -	\$ -	\$ -
Housing Case Manager			100%	\$ -	\$ -	\$ -
Housing Case Manager			100%	\$ -	\$ -	\$ -
			765%		Total	\$ -
<u>Other Administrative Costs</u>	<u>Cost Per month per FTE</u>	<u>FTE's</u>	<u># months</u>	<u>Total Cost</u>		
Rent/Utilities	\$ 400.00		12	\$ -		
Communications	\$ 80.00		12	\$ -		
Internet Services	\$ 100.00		12	\$ -		
Supplies	\$ 85.00		12	\$ -		
			Total	\$ -		
<u>Annual Fixed Cost Direct</u>	\$ -	<u>Annual Variable Costs Direct</u>	\$ -			
<u>Annual Fixed IDC</u>	\$ -	<u>Annual Variable IDC</u>	\$ -			

Allowable Variable Costs



Housing Program

Code	Description
RE	Rent
UP	Utilities Payment
FN	Furnishings
AF	Application Fees
GR	Groceries/Food
HO	Hotel
RI	Renter's Insurance
UA	Utility Arrearage
RA	Rental Arrearage
ME	Moving Expenses
ID	State ID (as required for housing)
MI	Mileage
BC	Background Check
CC	Credit Check

Nutrition Program

Code	Description
EN	Ensure
NS	Nutritional Supplements Other
FV	Food Vouchers
MD	Meal Delivery
FB	Food Boxes
CS	Class Supplies
FP	Food Prep Item

Invoice Template



- Use Invoice Templates to provide data in a uniform way
- Community Partners provide invoices as backup documentation for each listed charge
- Ensures fiscal oversight of program along with consistent codification of charges

Birmingham AIDS Outreach				
To: _____			Invoice #: _____	
			Date: _____	
Date	MR #	Code	Descriptive Free Text	Total
Reimbursable Costs Total			\$	-
Monthly Fixed costs			\$	-
IDC			\$	-
Total			\$	-

Lessons Learned in Program Development



- Establish standard invoicing templates
- Establish standard reporting system
- One shared data base is helpful between clinics and all community partners
- Create an Authorization for Use or Disclosure of Information for shared data base between clinics and agencies



Temporary Housing Partnership

Laterica Williams, MSW

AIDS Alabama

Program Coordinator

Temporary Housing Partnership



- Strategic partnership with 1917 Clinic and AIDS Service Organizations (AIDS Alabama and Aletheia House)
- Improving health outcomes through housing stabilization

AIDS Alabama Mission Statement



- AIDS Alabama devotes its energy and resources statewide to helping people with HIV/AIDS live healthy, independent lives and works to prevent the spread of HIV.

Aletheia House Mission Statement



ALETHEIA HOUSE
A Special Kind of Caring

- To promote the health and well-being of individuals and communities by providing high quality, low cost services with a special kind of caring.

Stabilization for clients who are currently housed (1-3 months eligibility)



- Rental and Utility Assistance
- Arrearages – from 6 months to current
- Budgeting
- Furniture – one time only

Housing for clients experiencing homelessness (1-12 months eligibility)



- Increase and Manage Resources
- Affordable Housing Search
- Assistance with moving
- Provide Furniture
- Apply for long term housing assistance

Emergency Temporary Housing



- S.O.A.R. – “Succeeding Over All Requirements”
- 21 efficiency units
- 2 Case Managers
- 12 Residential Support Specialists
- What referrals go to SOAR?
- What services are provided at SOAR?
- How long does a client stay at SOAR?

Sober Living Facilities As A Valid Housing Option



- Sober Living Facility- is a drug free living environment for individuals attempting to maintain abstinence from alcohol and drugs.

Eligibility Criteria



- Consider eligibility requirements - Must be Ryan White eligible and engaged in medical care at the 1917 Clinic.
- The housing committee reviews referrals and selects most vulnerable and highest need balanced with high likelihood of success.
- People struggling with active substance use and/or untreated mental illness are not referred to this temporary program.

- Housing referrals open for one year from initial referral date
- Clients are eligible for re-referral 1 year from discharge from the program; (exceptions may be made if income was affected by COVID 19)

“The Process”



- What does it look like for a client after a referral from the Clinic?
 - Assignment to Case Manager
 - Intake/Human Needs Assessment
 - Case planning
 - Addressing housing barriers
 - Housing applications
 - Move-in activities
-
- How long does it take for a client to obtain housing?

Common Housing Barriers



Client Perspective

- Low/No Income
- Employment Barriers
- Poor Credit History
- Previous Felonies
- Previous Evictions
- Lack of Family/Personal Support
- Substance Use

Landlord Perspective

- Require income 3x rent amount
- Length of financial support from ASO
- Require passing background checks

Lessons Learned



- Patients need more than housing to become independent
- Case Management and basic living skills are imperative to success
- Substance Use presents a negative impact on housing stabilization

AIDS Alabama 1917 THP Team

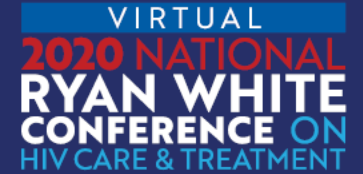


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- Laterica Williams
- Robin Benjamin
- Byanca Underwood
- Stephanie Ackers
- Candice Bradley
- Breanna White
- Donendra Banks
- Miya Maxwell



Aletheia House 1917 THP Team



- Leanne Portera
- Keisha Kennedy
- Alichia Bibb
- Kevin Davis
- Donna Hutchinson
- Courtney Means
- Niaya Nelms
- Ronese Lee
- Courtney Craig
- Amanda Preston

ALETHEIA HOUSE
A Special Kind of Caring

UAB Medicine 1917 Clinic Team



- Housing Committee:

- Elizabeth Allred

- Rachel Hanle

- Joanna Hawkins

- Rashundra Hopkins

- Shanika Boyd

- 1917 Clinic Social Workers:

- Ashley Barte, Amanda Byrd, Juandolyn Fails, LaKendra Grimes, Tiffany Hall, Tarae Hornsby, Vanessa Hudson, Savannah Henderson





B-FED

B-FED:

BAO Food and Education Delivery

Kris Hauenstein, LMSW

BAO

Director of Client Services

Birmingham AIDS Outreach



- BAO was incorporated in 1985
- First nonprofit dedicated to providing HIV/AIDS prevention, education and services for persons living with HIV/AIDS in AL.
- The mission of BAO is to enhance the quality of life for people living with HIV/AIDS, at-risk, affected individuals, and the LGBTQ community through outreach, age-appropriate prevention education, and supportive services.

Before B-FED



10/1/16 – 9/30/17
201,000 POUNDS



UNITED WAY FOOD
BANK



RYAN WHITE
FUNDED



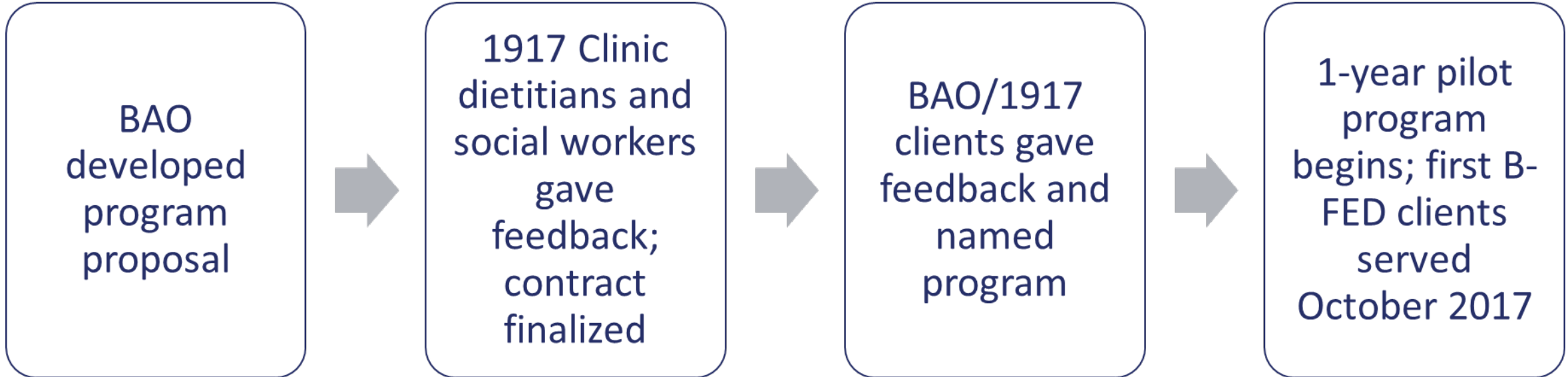
3-5 NEW CLIENTS
A MONTH

Clinical Care Concerns



- Clinician says “Change your diet”; Patient says “I can’t”
- Food assistance participation in the U.S.
 - Negative health outcomes
 - Processed foods and simple sugars
 - Limited in fresh vegetables and fruits
 - Limited in quality protein sources
- What can be done?
 - The 1917 Clinic and Birmingham AIDS Outreach (BAO) collaborated to expand BAO’s existing food assistance program

How was B-FED developed?



Continuous feedback across B-FED team
Example: Referral Forms, Food Box Components

Dietitians heavily involved in client monitoring and team communication

- **BUT** all RDs agree that effort is substantially less than expected due to organized BAO system

BFED Collaborative Team



- BAO

- Karen Musgrove – CEO
- Polly Kellar – CCO
- Kris Hauenstein, LMSW – CLS Director
- Anastasia Ferrell – BFED Fulfillment Coordinator
- Joshua Glenn – BFED Education Specialist
- Jameia Patterson
- Lee Livingston
- Robert Miller
- Case Managers: Shaniqua Smith, Mason Fox, Angel Childs, Charlotte Givhan

- The 1917 Clinic

- Dietitians: Mandy Willig, Donna Yester, Meredith Atwater
- Social Workers: Kathy Gaddis, Tiffany Hall, Joanna Hawkins, Elizabeth Allred, Ashley Bartee, Juandolyn Fails, Amanda Byrd, Savannah Henderson, Rachel Hanle, Rashundra Hopkins, Tarae Hornsby, Vanessa Hudson, Shanika Boyd, Tamika Pilgrom

B-FED Program Elements



- **For all Ryan White-eligible clients:**

- Expanded Food Boxes – fresh produce, dairy, bread, and lean proteins
- \$50 Food Vouchers
- Nutrition, Food Safety, and Food Preparation Education
- Food Prep Items (by prescription or class participation)
- Must be UAB 1917 Clinic patient
- Program has been extended to the UAB Family Clinic
- Must be in medical care

- **By Prescription via The 1917 Clinic Dietitians:**

- Expanded Nutritional Supplement Fulfillment
- Home-Meal Delivery
- Food Safety & Preparation Equipment

B-FED Program Components



- **Former Approach**

- Nutritional Supplements
- Food Box
 - Cans/Dry Goods
- Small Grocery Voucher

- **Updated Pilot Approach – Year 1**

- Enhanced Components

- Nutrition Supplements (Dietitian Assessment)
- B-FED Food Box (Ryan White criteria)
 - Fresh/frozen veggies, meat, fruit, dairy, etc.
- Increased Grocery Voucher

- New Components

- Meal Delivery
- Home Assessment Visit
- Meal Prep Items
- Emergency Same Day Assistance

B-FED Program Components



- **B-FED – Year 2**

- Cooking Classes
- Newsletter

- **B-FED – Year 3**

- Education Program
 - Weekly Cooking Classes
 - Cooking Videos
 - Educational Workshops
 - Support Groups

Nutritional Supplementation



- **Without B-FED:**

- 2 kinds of nutritional supplements
- Limited to 1 case per client per month

- **With B-FED:**

- 24+ types of nutritional supplements
- As many cases as prescribed by dietitians

Education Program

- **Cooking Classes:**
 - Nutrition
 - Food Safety
 - Meal Preparation
 - Facebook/YouTube Videos
- **B-FED Bulletin:**
 - Recipes
 - Reminders
 - Nutrition Articles
- **Health Education:**
 - Workshops
 - Diabetes Education
 - Stress Management
 - Goal Setting (SMART)
 - Support Groups
 - Lifestyle
 - Healthy Living
 - N-DEPTH
 - (Nutrition Diabetes Education, Peers Teaching Health)



Testimonials



- “ My daughter was telling me that my cooking classes are good for me because now my food tastes better.” – First year cooking class student
- What is your favorite thing you have learned? “Being positive and remaining positive.” – Stress management workshop attendee
- “Cooking different foods I never thought I would eat, and I really enjoy the hands on cooking experience in the group and sharing with others.” – Second year cooking class student
- What is your favorite thing you have learned? “How to keep the food I am cooking safe so I don’t make myself or anyone else sick.” – Food safety class student

A Typical Monthly Box



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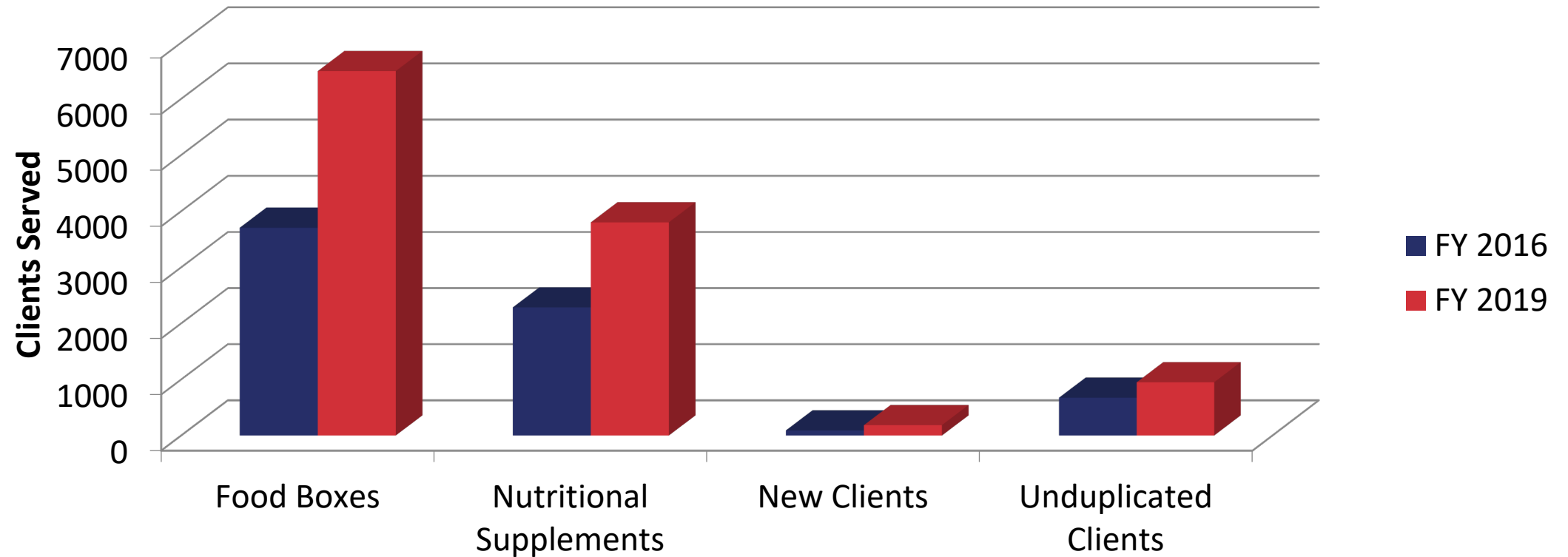
- Ground turkey
- Salmon
- Whole Chicken
- Frozen Broccoli
- Frozen Green Beans
- Potatoes
- Sweet Potatoes
- Onions
- Carrots
- Romaine Lettuce
- Apples
- Oranges
- Bananas
- Pineapple
- Butter
- Fresh Eggs
- Yellow Squash
- Cucumber
- Celery
- Radishes
- Bell Peppers
- Tomatoes
- Boiled Eggs
- Sliced Cheese
- String Cheese
- Yogurt
- Whole wheat bread
- Oatmeal
- Applesauce
- Fruit Cup
- Granola Bars
- Protein Packs



B-FED Impact

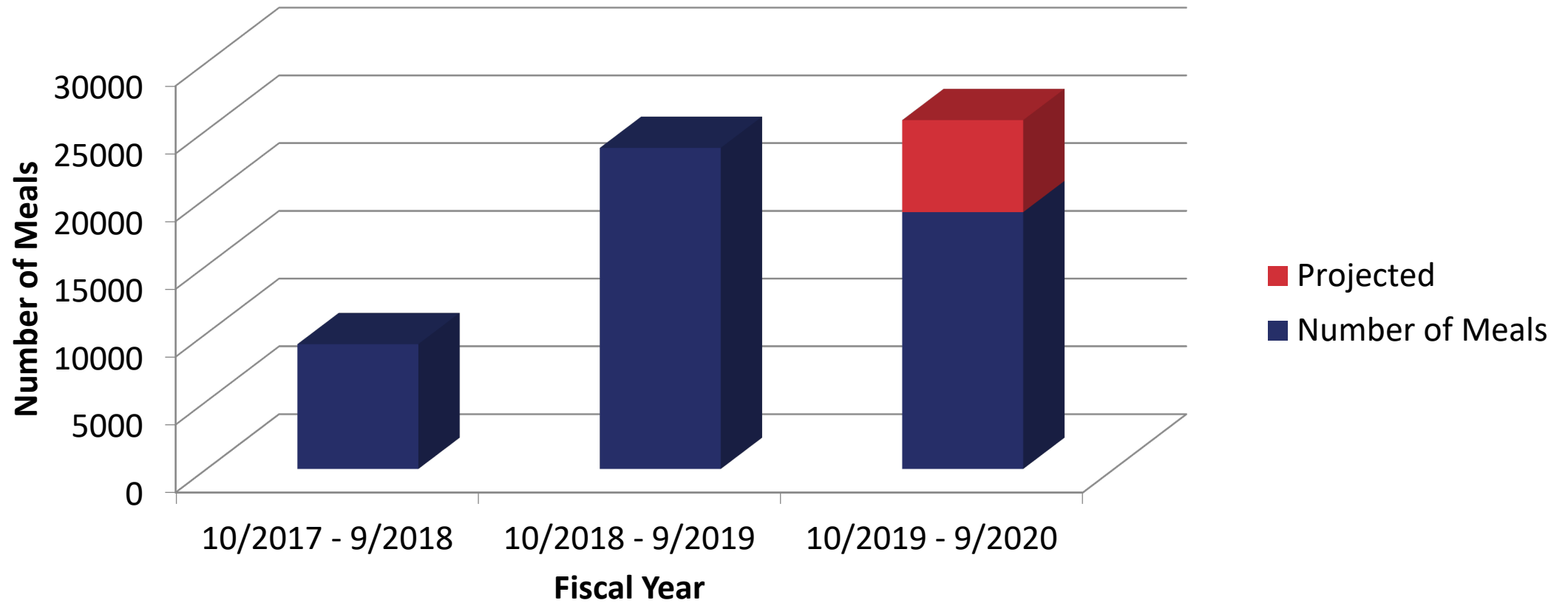
Reporting and Projections

Services Provided & Clients Served Overview



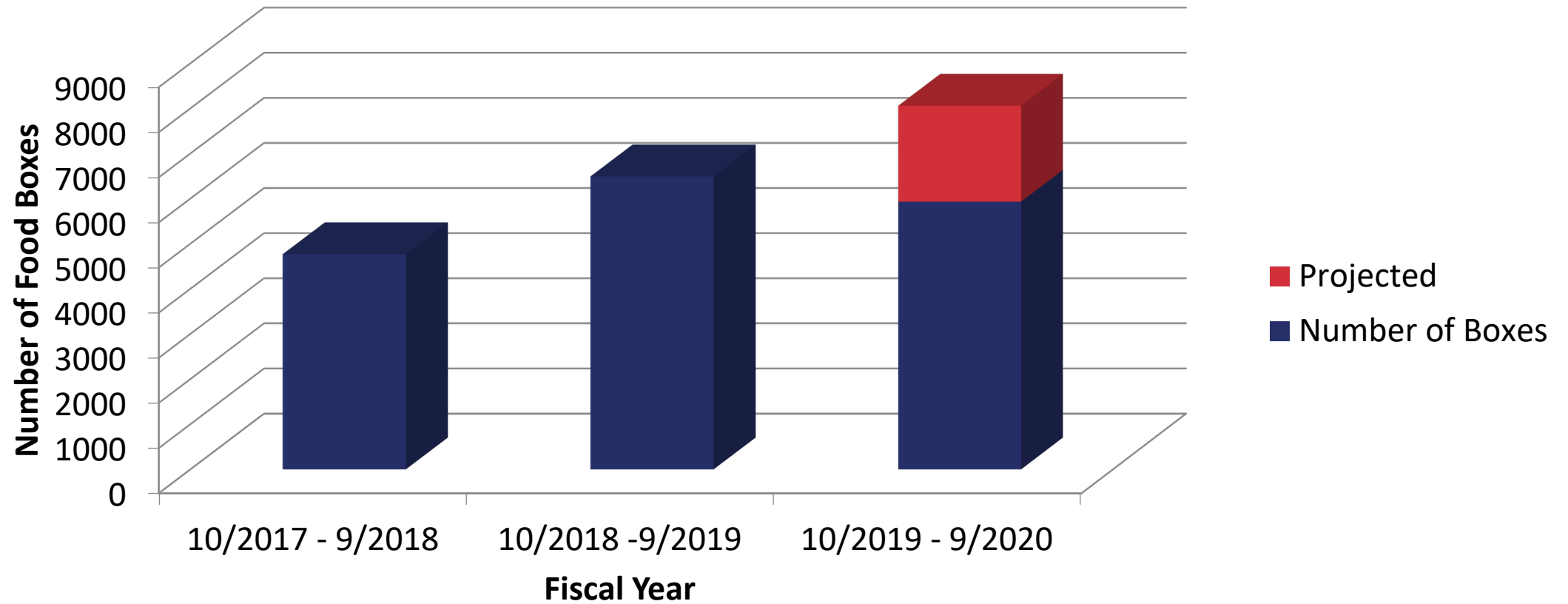
Reporting and Projections

Home Delivered Meals



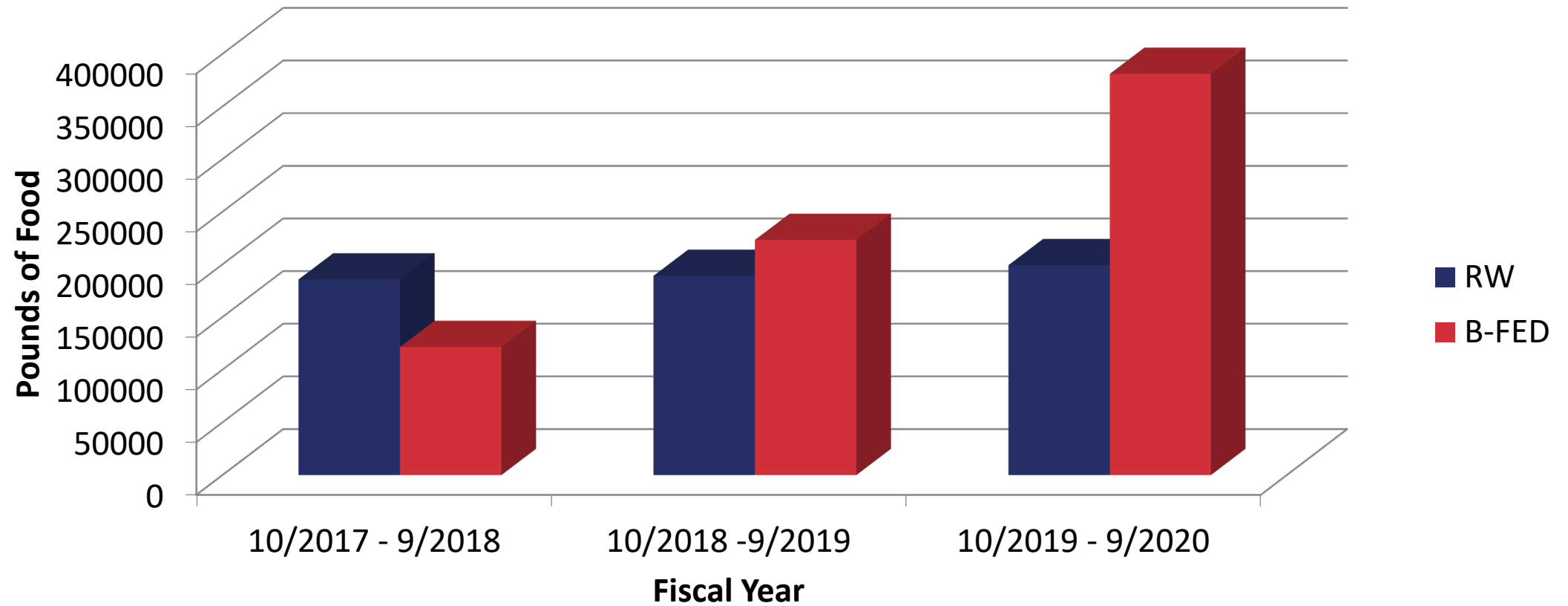
Reporting and Projections

Food Boxes

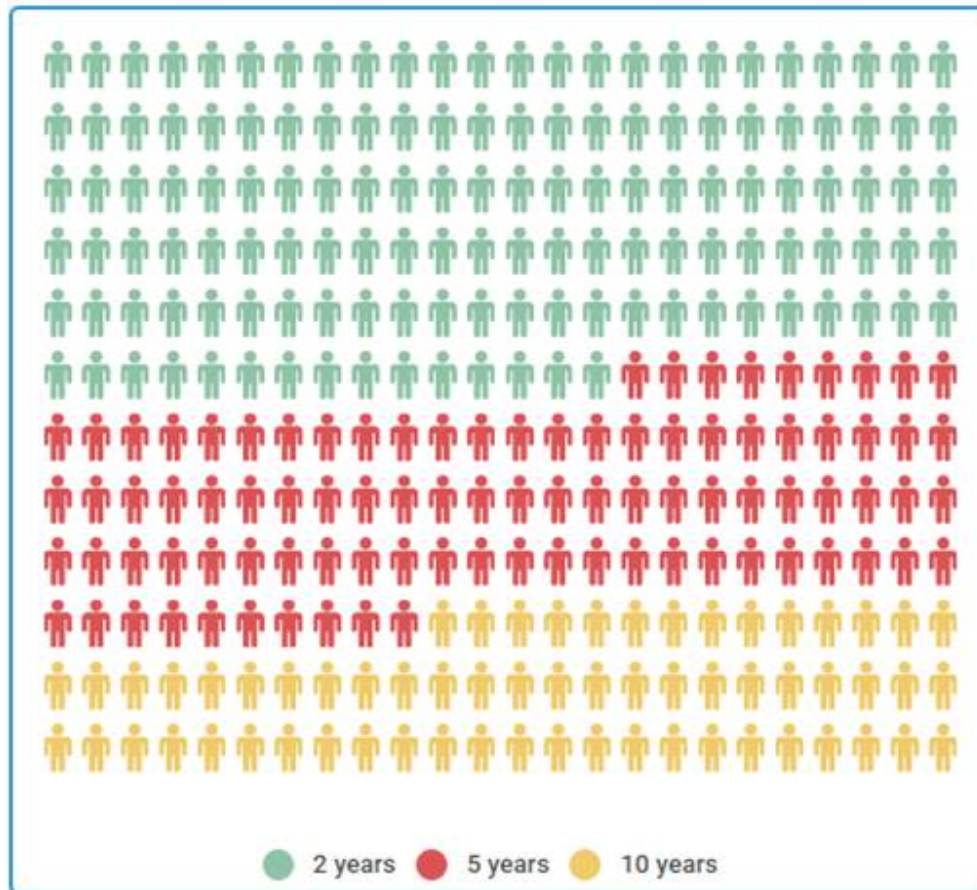


Reporting and Projections

Pounds of Food



Return to Care at BAO



- As of June 2020: 196 clients returned to care
 - 2-5 years: 27
 - 5-10 years: 102
 - > 10 years: 67

2019-2020 Goals



- Hired 3 New Social Workers – May 2019
- New Building – July 2019
- Future Approach
 - Client-centered with Choice selection
 - Diet-specific selection per dietician
 - Nutrition Student led classes

B-FED COVID-19 Response



- Transitioned to curbside service on March 16th, 2020
 - No service disruption
 - Increased cross training
- Extended agency hours
- Virtual cooking demonstrations
- Increased referrals

Lessons Learned



- Inclusion of dietitians and food professionals (food safety/ food distribution) is paramount to beginning a successful nutrition program.
- Client feedback is important to the success and sustainability of a new program.
- Be adaptable to potential disruptions in service delivery.
- Limitations are inevitable, adapt.

If you don't know, ask!



Have candid conversations to get the most useful information.

- HRSA 340B Eligibility & Registration
- HRSA HAB Policy Notices & Program Letters
- HAB PCN 15-03: Clarifications Regarding the Ryan White HIV/AIDS Program and Program Income
- HAB PCN 16-02: Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds

Contact Information



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Questions?