

State Medicaid Programs: Achieving Viral Suppression

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8 a.m.

Disclosures

Marlene Matosky has no financial interest to disclose.

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Agenda

- Welcome, Introductions, and Overview (Marlene Matosky)
- Overview of Quality of Care for Adults in Medicaid (Josh Hardy)
- Business case for State HIV and Medicaid Programs to Work Together (Abigail Viall)
- HIV Health Improvement Affinity Group (Marlene Matosky)
- Examples of State HIV and Medicaid Programs Working Together (Ryan White HIV/AIDS Program Recipients)

Learning Objectives

Attendees will be able to:

- Describe the Medicaid Quality Reporting Program including the HIV measures in the program
- Identify state Medicaid programs that have submitted HIV viral suppression data and methods used to collect performance measure data
- Explain the business case for State HIV and Medicaid Programs to collaborate on HIV viral suppression data

HIV/AIDS Bureau Vision and Mission

Vision

Optimal HIV/AIDS care and treatment for all.

Mission

Provide leadership and resources to assure access to and retention in high quality, integrated care, and treatment services for vulnerable people living with HIV/AIDS and their families.

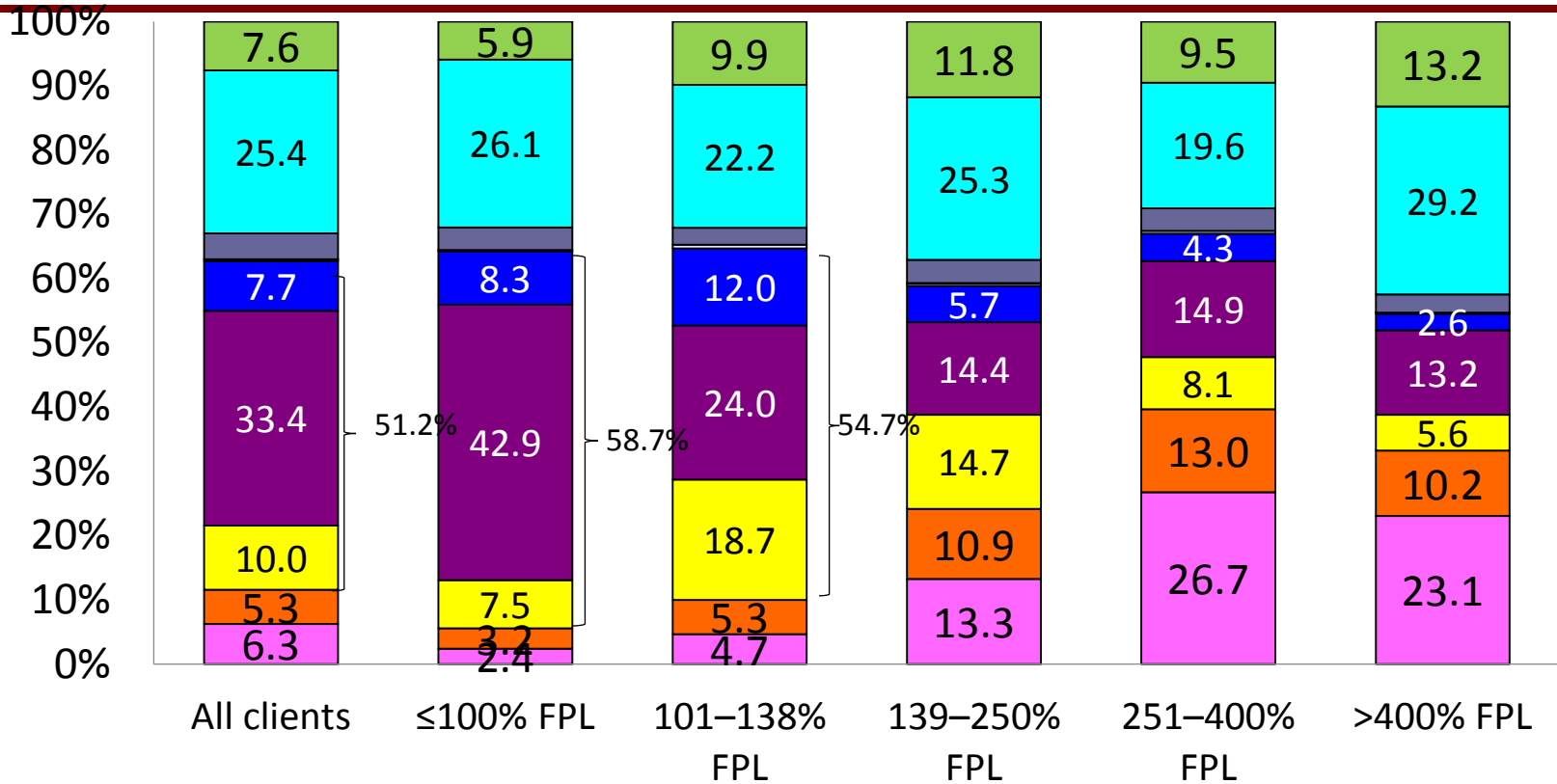
HIV/AIDS Bureau Priorities

- **NHAS 2020/PEPFAR 3.0** - Maximize HRSA HAB expertise and resources to operationalize NHAS 2020 and PEPFAR 3.0
- **Leadership** - Enhance and lead national and international HIV care and treatment through evidence-informed innovations, policy development, health workforce development, and program implementation
- **Partnerships** - Enhance and develop strategic domestic and international partnerships internally and externally
- **Integration** - Integrate HIV prevention, care, and treatment in an evolving healthcare environment
- **Data Utilization** - Use data from program reporting systems, surveillance, modeling, and other programs, as well as results from evaluation and special projects efforts to target, prioritize, and improve policies, programs, and service delivery
- **Operations** - Strengthen HAB administrative and programmatic processes through Bureau-wide knowledge management, innovation, and collaboration

Ryan White HIV/AIDS Program

- The Ryan White HIV/AIDS Program provides a comprehensive, community based system of care through primary medical care and essential support services for low-income people living with HIV (PLWH) who are uninsured or underinsured
 - Including PLWH in the planning of services
 - Employing a public health approach to care and treatment
- The program works with cities, states and local community based organizations to provide a cohesive system of care, serving over 500,000 people living with HIV
- A smaller but equally critical portion is used to fund technical assistance, clinical training, and the development of innovative models of care
- The Ryan White HIV/AIDS Program is funded at \$2.32 billion in fiscal year (FY) 2016

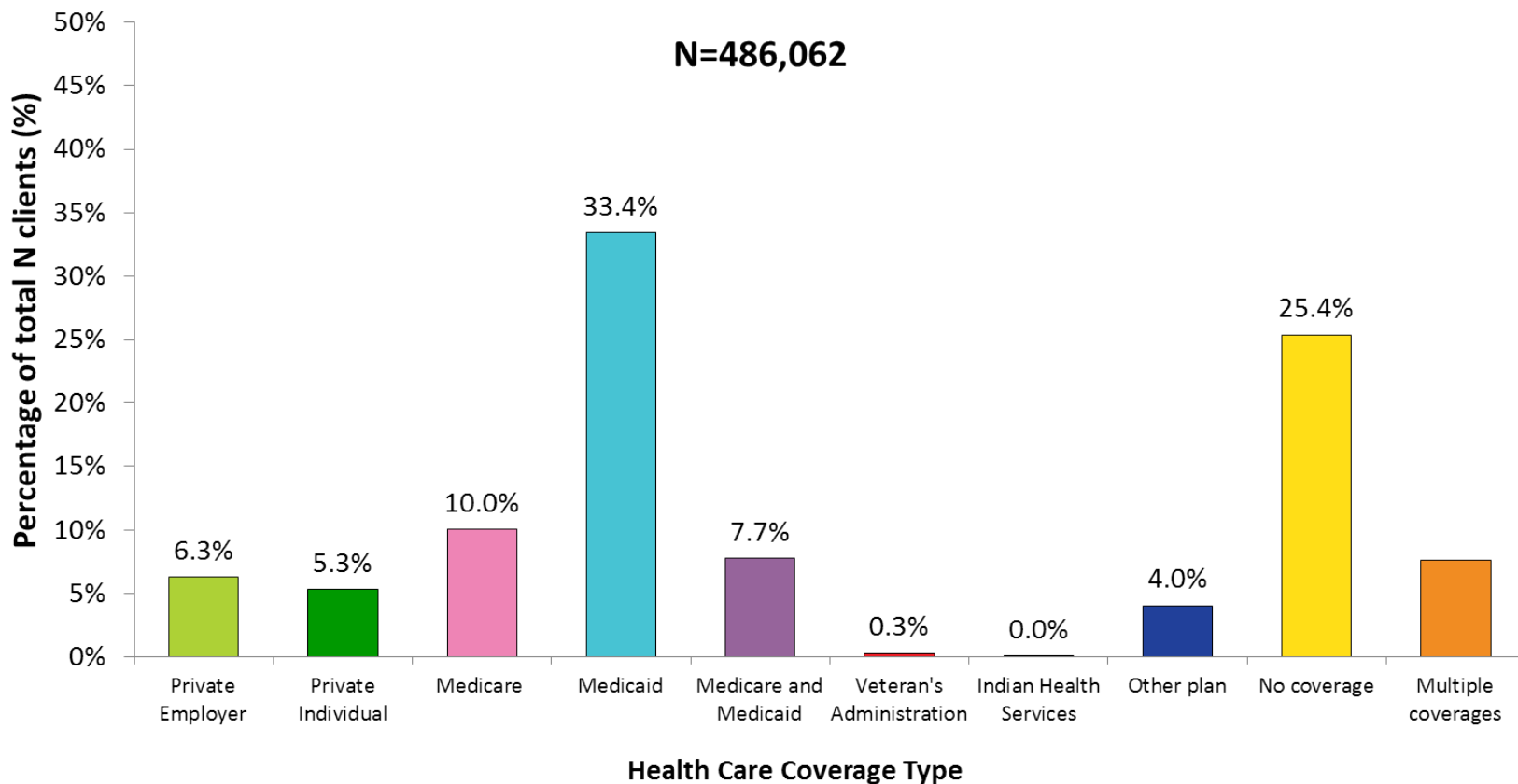
Ryan White HIV/AIDS Program Clients (non-ADAP), by Federal Poverty Level and Health Care Coverage, 2014



Source: Ryan White Services Report

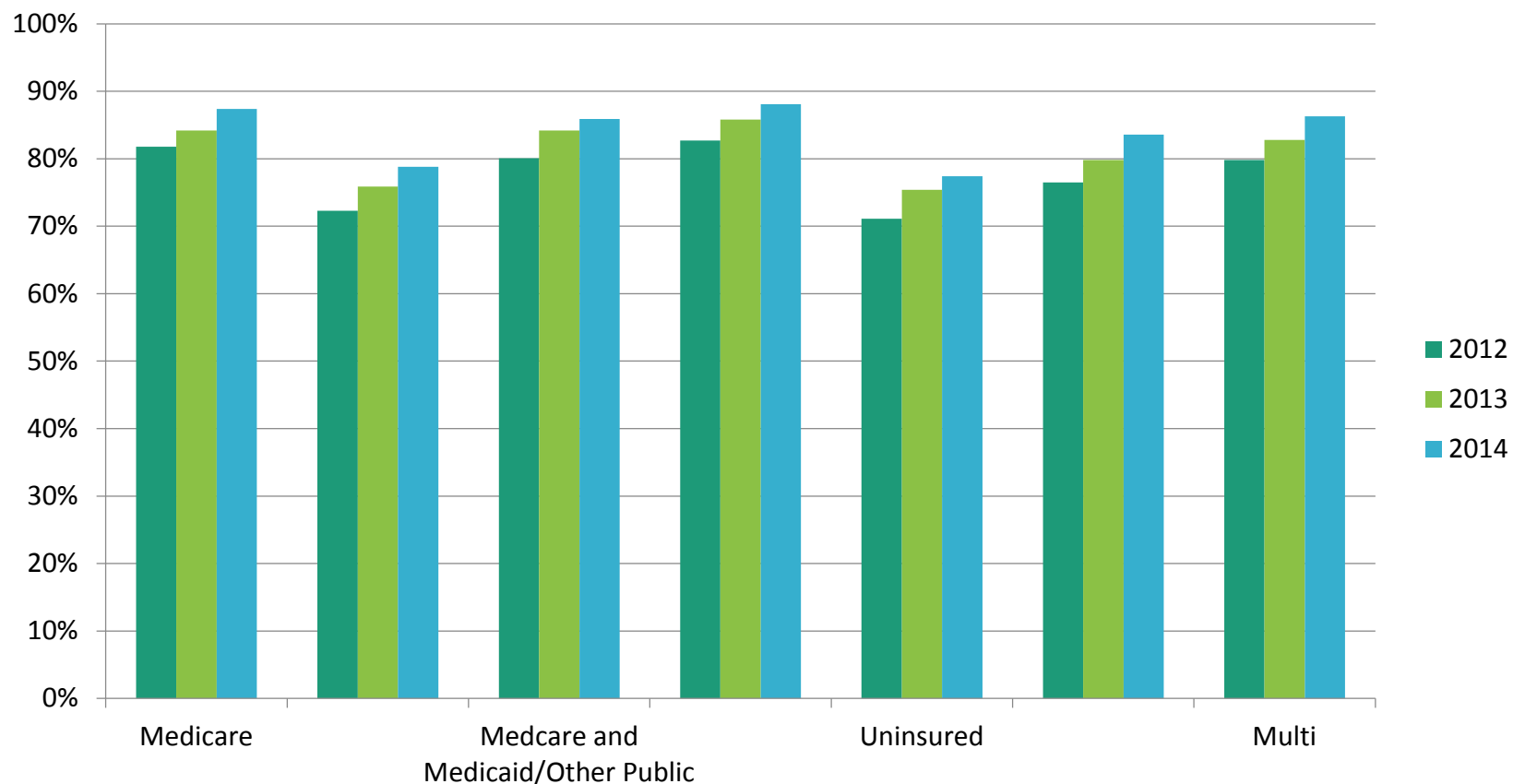
- Private Employer
- Medicare
- Medicare and Medicaid
- Private Individual
- Medicaid
- Veteran's Administration
- Indian Health Services
- Other plan
- No coverage
- Multiple coverages

Ryan White HIV/AIDS Program Clients (non-ADAP), by Health Care Coverage, 2014—United States and 3 Territories



Source: Ryan White Services Report

Viral Suppression Among Ryan White HIV/AIDS Program Clients (non-ADAP), by Health Care Coverage, 2012-2014



HIV Health Improvement Affinity Group

- Collaboration between Centers for Disease Control and Prevention, Centers for Medicare and Medicaid Services, and Health Resources and Services Administration
- Purpose: Support state collaborations between public health and Medicaid programs to improve rates of sustained virologic suppression among Medicaid and Children's Health Insurance Program (CHIP) enrollees who are living with HIV
- Participating states will develop and implement one or more performance improvement projects that address gaps along the HIV care continuum to improve health outcomes for Medicaid and CHIP enrollees

Benefits to State Participants

- Direct technical assistance that supports improved HIV-related outcomes among Medicaid and CHIP enrollees
- An opportunity for state-to-state learning and sharing of best and promising approaches to improve viral load suppression among Medicaid and CHIP enrollees
- Stronger collaborative relationships among state Medicaid/CHIP programs, state public health departments, and other partners who are well positioned to advise and support efforts for maximum impact

Core Participants

- State Medicaid agency staff who will support the project to improve access to, utilization of, and quality of HIV preventive and care services
- State health department staff who will coordinate with State Medicaid/CHIP programs to support and extend their efforts to bolster access to, utilization of, and quality of HIV preventive and care services among Medicaid eligible and enrolled populations
- Staff from CDC, CMS, and HRSA, who will provide or facilitate access to needed technical assistance
- State teams may also include other state and local partners, such as primary care associations, federally qualified health centers, local health departments, and other relevant public and private entities

Commitment

- Submission of the expression of interest form that identifies the state's proposed project and goal(s), identifies team members, and indicates support of both the state AIDS Director and Medicaid leadership
- Participation in monthly state team calls with CMS, CDC, and HRSA for 12 months beginning in November 2016
- Participation in monthly HIV Health Improvement Affinity Group virtual meetings with other states and quality improvement experts
- Attendance at HIV Health Improvement Affinity Group kick-off meeting, to be held in Washington D.C. on October 11th and 12th, 2016

Thank you

Josh Hardy

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