

The Importance of Comprehensive, Coordinated HIV Care in Virginia

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HIV: Once Deadly, Now a Chronic Disease

With modern medication, people with HIV can have near-normal lifespans.¹ Now, HIV can be treated much like other complex chronic diseases (e.g., diabetes), which require ongoing care including clinical monitoring and prescription drugs. However, HIV is still unique:

- it is an infectious disease, and the medications that treat HIV also reduce the likelihood of HIV transmission, meaning that HIV treatment is also a form of HIV prevention;²
- it continues to be heavily stigmatized; and
- it often affects socially and economically disadvantaged communities, increasing the importance of additional assistance beyond medical treatment.

Therefore, the >24,000 Virginians living with HIV³ depend on comprehensive, coordinated HIV services in order to maintain good health and prevent further transmission of the disease.

The Ryan White CARE Act Supports Comprehensive, Coordinated HIV Care

The federal Ryan White CARE Act, initiated in 1990 as a payer of last resort, assists states, localities and clinics in providing HIV care for those who cannot afford it otherwise.⁴ In addition to facilitating access to HIV drugs through the AIDS Drug Assistance Program (ADAP), the Ryan White program enables access to outpatient medical care, helps patients pay for health insurance, and provides support services like transportation to help people living with HIV stay in care (see Box 1^{5,6}). By offering this broad range of services, the Ryan White program assists in delivering comprehensive, coordinated HIV care. Across Virginia, nearly one third of people with HIV received any Ryan White service in 2014^{3,5} (see Figure 1).

Comprehensive, Coordinated HIV Care Improves Health

Ryan White-funded care, a prime example of comprehensive, coordinated care, is associated with better health for people living with HIV. One key health indicator for this population is retention in care, which is important for maintaining antiretroviral drug regimens and preventing drug resistance. A related health outcome is HIV viral suppression (when the level of HIV virus in the body is undetectably low), which can only be achieved through consistent use of antiretroviral therapy. HIV

BOX 1: What are some examples of services that the Ryan White program provides?^{5,6}

CORE MEDICAL SERVICES



- Outpatient medical care
- Laboratory testing
- Medical case management
- Dental care
- Mental health and outpatient substance use care

SUPPORT SERVICES



- Support for retention in care and treatment adherence
- Medical transportation
- Non-medical case management
- Child care
- Health education

AIDS DRUG ASSISTANCE PROGRAM (ADAP)



- Direct medication (i.e., clinics dispensing HIV drugs)
- or
- Financial assistance for health insurance

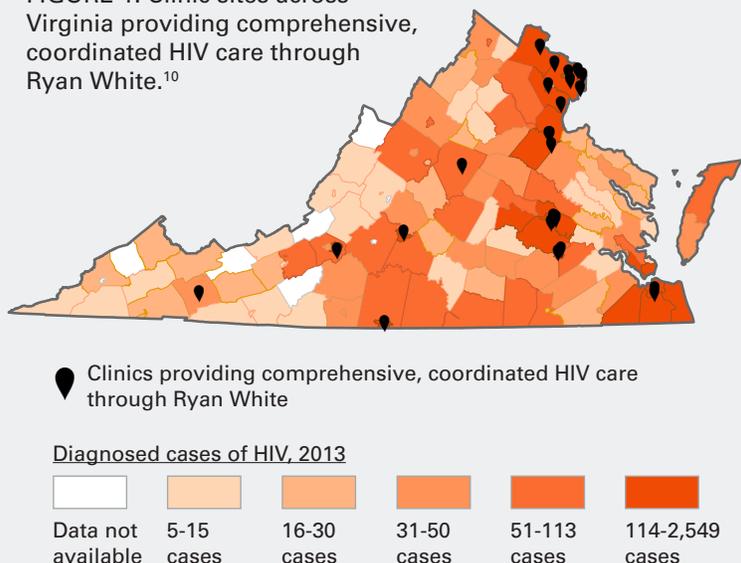
viral suppression is the primary goal of care because it produces the best health outcomes for a person living with HIV and dramatically reduces the likelihood of transmitting HIV to others.²

The spectrum of services offered through the Ryan White program works. Nationally, 82% of people living with HIV who receive Ryan White assistance are retained in care and 73% achieve HIV viral suppression, compared to only 40% retained in care and 19% virally suppressed in the overall HIV population.⁷ Further, among uninsured people with HIV, those who receive Ryan White assistance are much more likely to be prescribed antiretroviral therapy (94%) and to achieve HIV viral suppression (77%) than those who do not receive Ryan White assistance (52% prescribed antiretroviral therapy, 39% virally suppressed).⁸

A recent study from Virginia Commonwealth University and the Virginia Department of Health examined the different classes of Ryan White services (see Box 1). The study finds that, compared to people in care who do not receive Ryan White services, those who receive more classes of services are more likely to be retained in care and virally suppressed (see Figure 2).⁵ Those who receive comprehensive, coordinated care – defined as receiving medical, support, and ADAP services – have the best health outcomes. Thus the comprehensive, coordinated care delivered by the Ryan White program improves the health of Virginians living with HIV.



FIGURE 1: Clinic sites across Virginia providing comprehensive, coordinated HIV care through Ryan White.¹⁰



Health Insurance Alone Isn't Enough

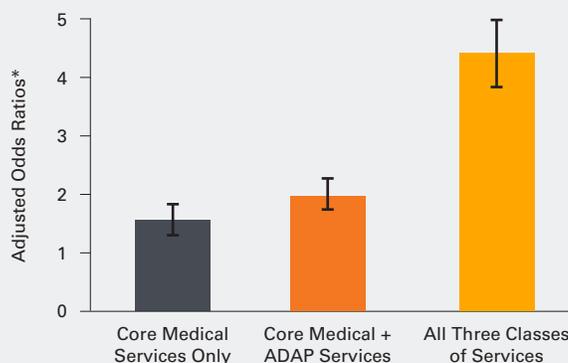
Even those with health insurance benefit from additional support services. Across the U.S., people living with HIV who have insurance and receive Ryan White care are more likely to be prescribed antiretroviral therapy and to be virally suppressed than those who have insurance but do not receive Ryan White care,⁸ suggesting that Ryan White care provides a substantial benefit beyond what insurance coverage provides.

Ryan White's ADAP program assists with insurance payments or provides medication directly to people with HIV. In Virginia, people living with HIV who receive insurance assistance through ADAP are more likely to be virally suppressed than those who receive their HIV medication directly through ADAP.⁹ However, this is only true for people who also receive other Ryan White care services as well – not for those who only receive ADAP.⁵ Having insurance does not necessarily provide the same health benefits as comprehensive Ryan White care, suggesting that a range of Ryan White services is essential even for those with insurance.

What This Means For Virginia

Comprehensive, coordinated HIV care – like that delivered by the Ryan White program – is strongly associated with better health for people with HIV, even for those with health insurance. Moreover, this care may serve as a vital HIV prevention measure. This means that policies to keep comprehensive, coordinated HIV care available and accessible are important in controlling Virginia's HIV epidemic. However, not everyone is eligible to receive Ryan White care in Virginia, nor does the program cover all the medical and support services that people may need (e.g., hospital care). The Commonwealth can ensure the continued health of its residents by working with federal legislators to sustain Ryan White funding, promoting support services, and maintaining strong HIV prevention efforts.

FIGURE 2: Receiving more classes of Ryan White services is associated with higher rates of HIV viral suppression.⁵



*Odds ratios are adjusted for a variety of demographic factors (e.g., race/ethnicity). Here, the strongest relationship is between receiving all three classes (comprehensive care) and HIV viral suppression. Classes of services are defined in Box 1. Figure is adapted from Diepstra et al. (2017).⁵

This policy brief was prepared by **Rose S. Bono** and **April D. Kimmel**, PhD from the Department of Health Behavior and Policy at Virginia Commonwealth University. This brief was funded by the National Institutes of Health, award number R01 MD011277. The views expressed here belong to the authors and do not reflect the views of the funders.

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