# Multidisciplinary Approach to Retention and Engagement in Care within a One-Stop Shop Model

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## Background

For individuals living with HIV, being retained in care is vitally important to remain on ART and achieve viral suppression.

Various studies have shown that increased retention in care correlates with viral suppression, better health outcomes, and lower risk of transmitting HIV.

Improving retention in care is just one-way to work towards the goal of the most recent initiative: Ending the Epidemic: A Plan for America.

#### Process

The MacGregor Practice cares for more than 1,000 patients living with HIV and is one of the largest HIV practices in the Philadelphia, PA area.

Through weekly Quality Improvement meetings with a multidisciplinary team, expanded collaboration with Penn Specialty Pharmacy, enhanced panel management, and a systematic workflow, the goals were to increase retention in care and viral suppression.

### Methods

- 1 Patients identified through monthly out of care reports generated through CARE-Ware and through EMR, pharmacy team identified patients who do not respond to refills or deliveries, and through a weekly report showing patients without scheduled follow-up appointments.
- 2 Patients are outreached by front desk team to schedule their next appointment.
- 3 If unable to be reached, multidisciplinary team reaches out to patients to schedule their next appointment and discuss any barriers to care.
- 4 If patients are still unable to be reached after various outreach attempts, the Program Manager sends a generic letter to address on file.
- 5 Patients are monitored and placed on the Data to Care list for outreach by a Disease Intervention Specialist.
- 6 Patients linked back to care and assigned to a Social Worker or Medical Case Manager

#### Outcomes

Retention in Care of patients living with HIV increased from 76% to 80% overall and, importantly, from 56% to \$82.5% for the virologically unsuppressed patients

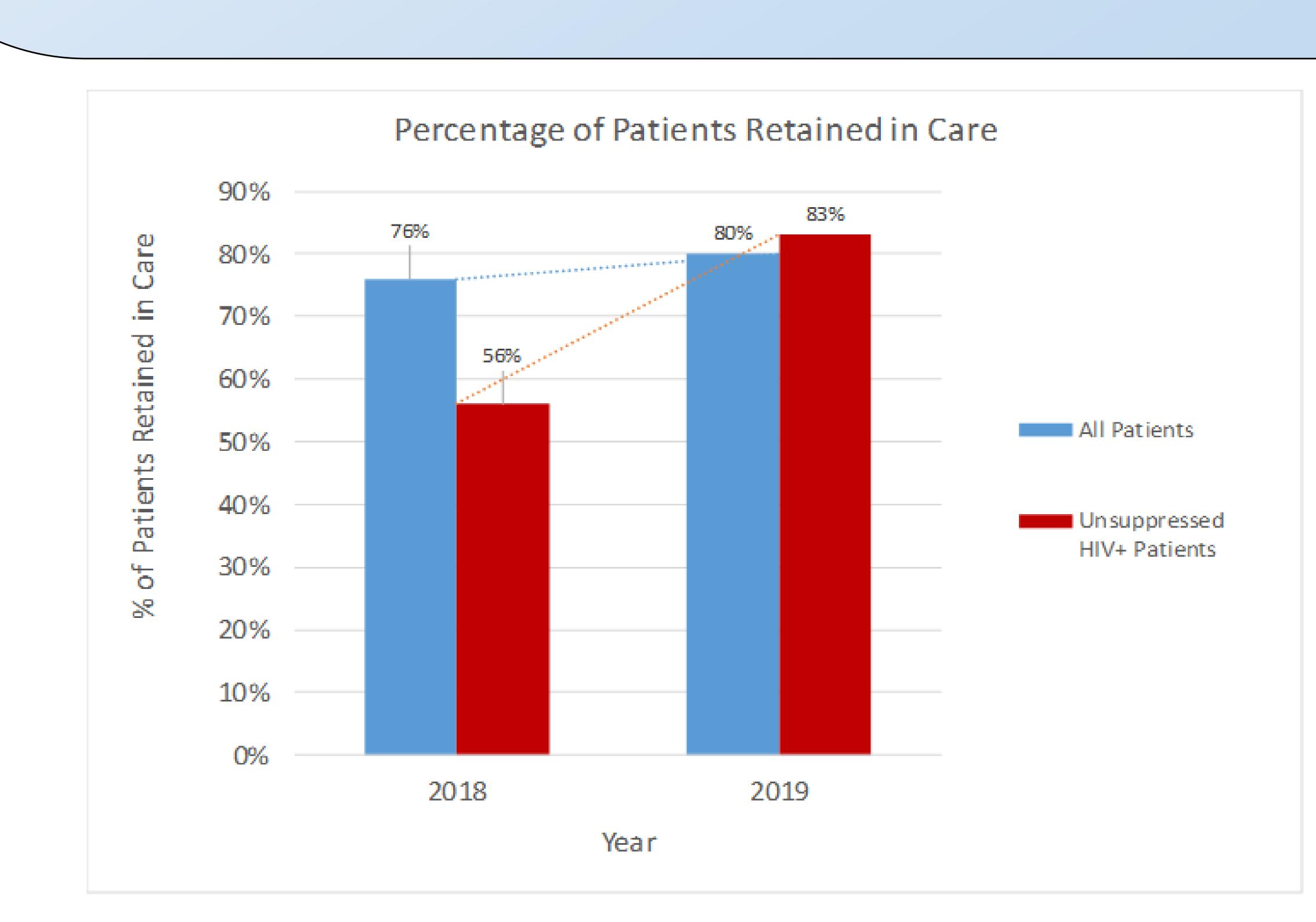
Excellent HIV Viral Load suppression rates of 88-90% were achieved, exceeding the 2019 Philadelphia Department of Health threshold of 85% and the HRSA Benchmark Goal of 85%

Improved patient access to appointments by creating urgent and walk-in clinic appointment slots for lost to care HIV and HIV/HCV co-infected patients

Improved patient access to Medical Case management by increasing MCM capacity to serve over 135 patients

Improved patient access to care by offering Financial and Benefits Counseling as well as Social Work support for those aged 18-29

Developed relationship and started new initiative, Data to Care, with the City of Philadelphia



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Treat and suppress HIV VL in >85% of patients, to meet or exceed the Department of Health (DOH) Threshold Values and HRSA Benchmark Goals
Retain >80% of the HIV-unsuppressed patients in care so that treatment barriers can be addressed
and supported
(≥1 visit in the first and last 6 months of each year, per AACO/DOH Performance Measures)

Goals