



VIRTUAL
2020 NATIONAL
RYAN WHITE
CONFERENCE ON
HIV CARE & TREATMENT

Maintaining 90+ VLS Rates: Using 340B to Maximize a Comprehensive Care Model

HOPE @ St. Luke's Hospital
Bethlehem & Easton, PA

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Learning Objectives



Participants will learn Ryan White-compliant strategies for using 340B and other resources to develop innovative and integrated solutions that improve patient outcomes and engaged teams

LEARNING OBJECTIVES

- 1.** Participants will know how to plan programs compliant with Ryan White PCNs.
- 2.** Participants will learn to think outside the box for resolving barriers to care.
- 3.** Participants will take away skills to implement and evaluate your comprehensive care integration.

Contents of Presentation



- Components of Comprehensive Care
- How to Budget
- Tracking Expenditures
- Addressing Patient Barriers
- Thinking Outside the Box – Innovative Programs and Initiatives
- Evaluation – Quality Management
- Q&A

Components of Comprehensive Care



- **Funding:** Ryan White Part B & C (Case Management & Clinical services); Pennsylvania DOH (Testing, Outreach, STD clinic); Program Income (340B Funds)
- All program services co-located at sites in Bethlehem & Easton, PA
- Services include
 - Clinical Services
 - HIV specialty care, primary care, patient navigation, medical nutrition therapy, health coaching, integrated behavioral health, pastoral care, tobacco cessation assistance, substance abuse screening and linkage, Hepatitis B and C testing and treatment
 - Case Management
 - Access to care & insurance coverage, housing, transportation assistance, resource identification and linkage, social determinants of health screening & assistance, certified medical interpretation
 - Prevention Services
 - HIV testing, HIV prevention/education, linkage to care, patient navigation, risk reduction counseling
 - STD clinic
 - STD testing/treatment; PrEP services - held weekly in Easton location

How to Budget



- **Ryan White Part C** used almost exclusively for Early Intervention Services (EIS)/Core Medical
 - Support clinical staff salaries and benefits
 - Typically between 0.1 and 0.25 FTE per staff member
- **Program Income (340B Funds)** used for all other Ryan White Compliant costs
 - Administration, Support Services, Quality Improvement
 - Remainder of EIS/Core Medical
 - Additional compliant services identified as program needs

Tracking Expenditures



- Develop cost centers and spreadsheets specific to each funding source
- If fortunate, work with hospital accounting department and auditors
 - No accounting department, no problem: Use 340B/Program Income to hire one (or more).
- For 340B, create a “Deferred Account” to keep funds. Release funds to cover costs quarterly.
 - Insures books are accurate with costs.
 - Allows for transparency in spending Program Income first (after MOE).
- Program Director and Finance Officer relationship

Tracking Expenditures

- Sample Spreadsheet for all funding sources

- Create columns to easily track expenditures
- Accountant/Accounting staff record spending
- For “UNALLOWED”, Program Director identifies whether a cost is allowable

T	U	V	W	X	Y	Z
UNALLOWED OR EXCLUDED	OTHER PROGRAM - NOT GRANT FUNDED	STATE FUNDED	AIDSNET - RW PART B	AIDSNET - HOPWA	HRSA - RW PART C AWARD FUNDS JAN 20 - MAR 20	HRSA - RW PART C EXP OF PROGRAM INCOME JAN 20 - MAR 20
Total 5,679.26	Total (7,945.74)	Total -	Total -	Total -	Total 9,106.56	Total 161,369.19
Amount	Amount	Amount	Amount	Amount	Amount	Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Tracking Expenditures

- Sample Spreadsheet for Part C

W\X	Y	Z	AA	AB	AC	AD	AE	AF	AG
	HRSA - RW PART C AWARD FUNDS JAN 20 - MAR 20	HRSA - RW PART C EXP OF PROGRAM INCOME JAN 20 - MAR 20	Unallowed Grant Salaries in excess of Federal Executive Pay Scale Level II rate	Excluded: Prior Quarter Adjustments - Net to zero	OTHER PROGRAM COSTS NOT EIS GRANT FUNDED	UNASSIGNED		HRSA - RW PART C EXP OF PROGRAM INCOME JAN 20 - MAR 20 25% FRINGE BENEFITS	HRSA - RW PART C AWARD FUNDS JAN 20 - MAR 20 25% FRINGE BENEFITS
			\$197,300 effective January 2020						
	\$ 178,177.06	\$ 40,681.29	\$ 94.86	\$ -	\$ -	\$ -	\$ -	\$ 10,170.37	\$ 44,544.40

- Create columns to easily track expenditures
- Accountant/Accounting staff record spending
- For “UNASSIGNED”, Program Director identifies whether a cost is allowable
- To left of these columns are rows to record **Salaries, Benefits, Travel/Training, Supplies, Contracted Services, and Other.**

Tracking Expenditures



- Sample Budget Tracking

Ryan White Part C Outpatient EIS Program – Year 6				Req: 50% of Funds		Req: 75% of Funds		CQM & Support Remainder of Funds after Core Med & Admin		Req: Limit to 10% of Funds		BUDGET YEAR 6 (per budget revision 06-01)						REMAINING BUDGET	NOA 06-01 NOA APPROVED BUDGET
Budget Period: 4/1/19 - 3/31/20																			
Internal Grant Expenditure Tracking Schedule																			
A. Personnel Services				ACTUAL															
Role	Total Grant Expenditure	GL Account to Credit Grant Revenue	EIS	Core Medical	CQM	Support	Admin	Total	EIS	Core Medical	CQM	Support	Admin	Total	Total				
Nurse Practitioner	22,228.24	10-601800-3074000	22,228.24	22,228.24	N/A	N/A	N/A	22,228.24	23,530.00	23,530.00	-	-	-	23,530.00	1,301.76				
Nurse Practitioner	20,564.90	10-601800-3074000	20,564.90	20,564.90	N/A	N/A	N/A	20,564.90	23,239.00	23,239.00	-	-	-	23,239.00	2,674.10				
Clinical Coordinator	21,229.98	10-601800-3074000	21,229.98	21,229.98	N/A	N/A	N/A	21,229.98	19,017.00	19,017.00	-	-	-	19,017.00	(2,212.98)				
Registered Nurse	20,738.35	10-601800-3074000	20,738.35	20,738.35	N/A	N/A	N/A	20,738.35	18,476.00	18,476.00	-	-	-	18,476.00	(2,262.35)				
Visiting Nurse	-	10-601800-3074000	-	-	N/A	N/A	N/A	-	15,070.00	15,070.00	-	-	-	15,070.00	15,070.00				
Medical Assistant	3,656.56	10-601800-3074000	3,656.56	3,656.56	N/A	N/A	N/A	3,656.56	8,339.00	8,339.00	-	-	-	8,339.00	(717.56)				
Medical Assistant/Office Coordinator	10,325.10	10-601800-3074000	10,325.10	10,325.10	N/A	N/A	N/A	10,325.10	10,140.00	10,140.00	-	-	-	10,140.00	(785.10)				
Registered Dietitian	10,864.50	10-601800-3074000	N/A	10,864.50	N/A	N/A	N/A	10,864.50	-	15,583.00	-	-	-	15,583.00	4,718.50				
Registered Dietitian	12,392.62	10-601800-3074000	N/A	12,392.62	N/A	N/A	N/A	12,392.62	-	8,624.00	-	-	-	8,624.00	(3,768.62)				
Registered Dietitian	10,481.48	10-601800-3074000	N/A	10,481.48	N/A	N/A	N/A	10,481.48	-	3,301.00	-	-	-	3,301.00	(580.48)				
Patient Navigator	3,656.29	10-601800-3074000	3,656.29	3,656.29	N/A	N/A	N/A	3,656.29	12,121.00	12,121.00	-	-	-	12,121.00	2,464.71				
Patient Navigator	2,858.66	10-601800-3074000	2,858.66	2,858.66	N/A	N/A	N/A	2,858.66	3,384.00	3,384.00	-	-	-	3,384.00	7,125.34				
RWHAB Program Director	4,166.66	10-601800-3074000	N/A	N/A	N/A	N/A	4,166.66	4,166.66	-	-	-	-	11,099.00	11,099.00	6,332.34				
HOPE Director of Operations	8,090.08	10-601800-3074000	N/A	N/A	N/A	N/A	8,090.08	8,090.08	-	-	-	-	3,380.00	3,380.00	1,289.92				
Data Coordinator	14,323.64	10-601800-3074000	N/A	N/A	14,323.64	N/A	N/A	14,323.64	-	-	7,426.00	-	-	7,426.00	(6,897.64)				
	\$ 178,177.06		\$ 117,858.08	\$ 151,596.68	\$ 14,323.64	\$ -	\$ 12,256.74	\$ 178,177.06	\$ 140,516.00	\$ 174,624.00	\$ 7,426.00	\$ -	\$ 20,479.00	\$ 202,529.00	\$ 24,351.94	\$202,529.00			

Req: 50% of Funds				Req: 75% of Funds		CQM & Support Remainder of Funds after Core Med & Admin		Req: Limit to 10% of Funds	
ACTUAL									
EIS	Core Medical	CQM	Support	Admin	Total				
22,228.24	22,228.24	N/A	N/A	N/A	22,228.24				

BUDGET YEAR 6 (per budget revision 06-01)						REMAINING BUDGET	NOA 06-01 NOA APPROVED BUDGET
EIS	Core Medical	CQM	Support	Admin	Total	Total	

Tracking Expenditures

- Sample Budget Tracking

Req: 50% of Funds	Req: 75% of Funds	CQM & Support Remainder of Funds after Core Med & Admin	Req: Limit to 10% of Funds	BUDGET YEAR 6 (per budget revision 06-01)						REMAINING BUDGET	NOA 06-01 NOA APPROVED BUDGET			
ACTUAL														
EIS	Core Medical	CQM	Support	Admin	Total	EIS	Core Medical	CQM	Support	Admin	Total	Total		



Req: 50% of Funds	Req: 75% of Funds	CQM & Support Remainder of Funds after Core Med & Admin	Req: Limit to 10% of Funds								
ACTUAL											
EIS	Core Medical	CQM	Support	Admin	Total						
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -						
\$ 155,290.88	\$ 197,464.15	\$ 19,042.95	\$ -	\$ 15,320.92	\$ 231,828.02						
67.0%	85.2%	8.2%	0.0%	6.61%	-						
COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT							
Req: 50% of Funds	Req: 75% of Funds	CQM & Support Remainder of Funds after Core Med & Admin	Req: Limit to 10% of Funds								
EIS is Core Medical	Not all Core Medical is EIS										

- At bottom of spreadsheet, auto-calculates compliance within HRSA Ryan White requirements.

Addressing Patient Barriers



Solutions to common barriers have been addressed utilizing program income to create innovative and Ryan White compliant program initiatives.

- Barriers Addressed:
 - Transportation
 - Behavioral Health
 - Legal
 - Retention
 - Stigma

Transportation



- Client Mileage Reimbursement
- Taxi Services
- Lyft Program
 - Used for patients lacking any other feasible solution for transportation (vehicle, bus, etc.)
 - St. Luke's mission to serve underserved; HOPE chosen to pilot Lyft services
 - Contract developed with legal department; patient must sign Lyft contract prior to receiving services
 - Staff calls St. Luke's dispatch to set up ride and handle payment

- Funding:
 - Client Mileage Reimbursement
 - Ryan White Part B – Case Management
 - Taxi Services
 - Part C/Program Income (340B)
 - Charged directly to our department credit card and re-classed by finance under Part C or 340B cost center
 - Lyft Program
 - Program Income (340B)
 - Dispatch trained to charge services out to 340B cost center under HOPE program

- Behavioral Health Consultants (BHC)
 - Annual mental health screenings with appropriate follow-up
 - Ongoing behavioral health support
 - Crisis management
 - Linkage to behavioral health and substance abuse services
 - Manage referrals and connections to Network psychiatric providers

Behavioral Health



- Funding:
 - Program Income (340B) funded service
 - Contracted with local behavioral health service provider for staff
 - 340B funds used for contract and salaries

- Medical-Legal Partnership

- Contract with local attorney to provide Ryan White compliant assistance for legal barriers
 - Majority of cases related to Social Security Disability, wills, housing, immigration
 - Refers to other attorneys in area for assistance in other areas

- Funding:
 - Program Income (340B) funded
 - Contract established with attorney and funds used to pay for
 - Must be aware of federal compensation limit for attorney salary
 - Can be difficult to find someone to provide services for a “low bono” rate

- Patient Navigators & Linkage to Care Coordinator
 - Linkage to Care Coordinator focuses on engaging new diagnoses to care and re-engaging those lost to care
 - Patient Navigators play pivotal role in initiating care with program and follow new patients for their first 6 months to establish relationship
 - Additional, on-going duties include:
 - Certification for non-case managed patients
 - Application, resource assistance
 - Re-engagement for patients lost to care
 - Home visits
- Peer Navigator – currently developing position as additional support to patients struggling to remain in care

- Funding:
 - Linkage to Coordinator
 - Start-up funding through capacity building grant
 - Program Income (340B) supporting ongoing salary
 - Patient Navigators
 - Program Income (340) supporting salaries
 - Peer Navigator
 - Program Income (340) to support salary once position filled

- Community Centered Health Home
 - Program funded services aimed at reducing stigma by promoting social connectedness and sense of community while simultaneously engaging in health promoting activities
 - Safe space and resource center
 - Yoga and fitness
 - Cooking classes, farm-to-fork
 - Support group
 - Spirituality programs
 - Ultimate goal of reducing stigma and enhancing resiliency is to ensure patients remain actively engaged in their health care

- Funding:
 - Program Income (340B) supports salaries and supplies necessary to implement programming developed

Evaluation – Quality Management

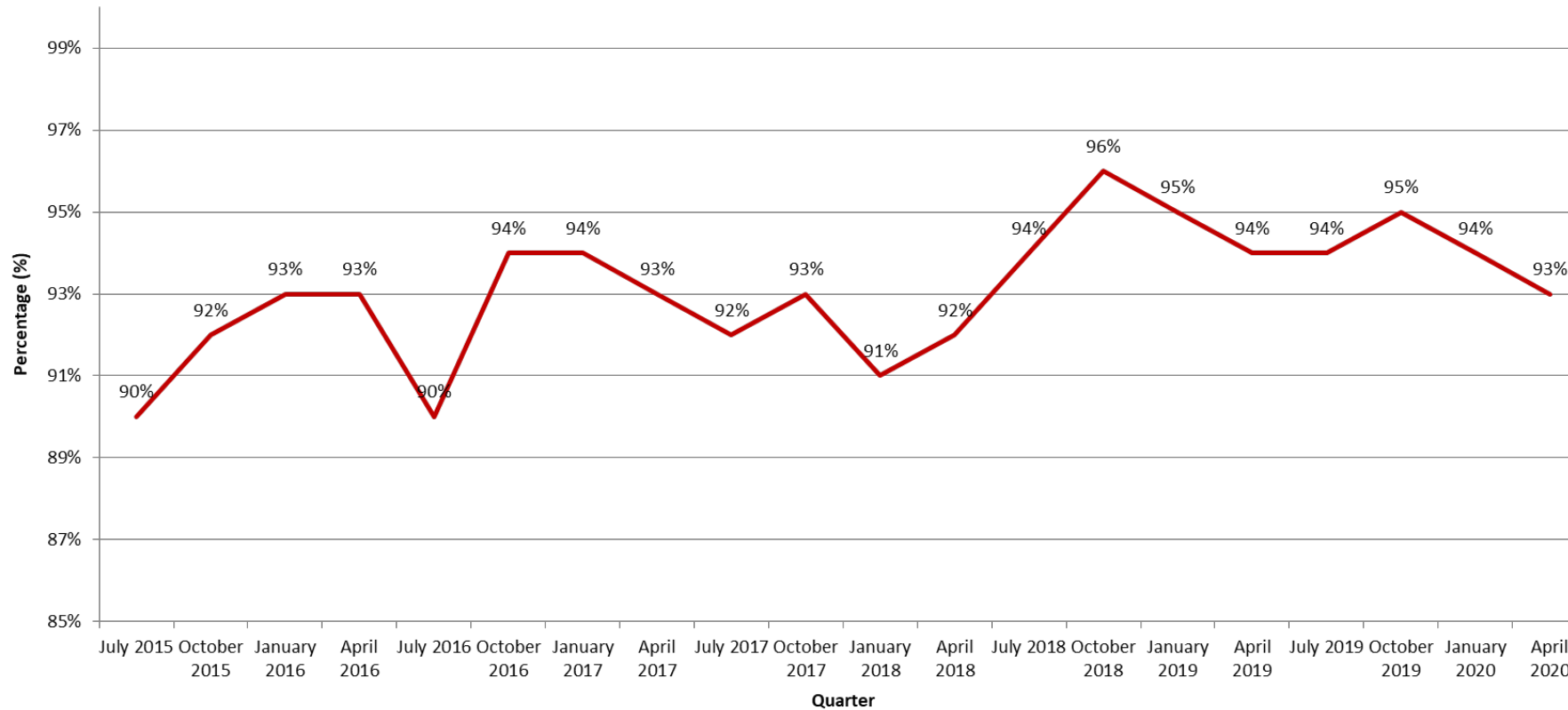


- HOPE is largely guided by our Quality Management (QM) Program
 - *Quality Management Committee* – multidisciplinary committee of leaders and staff monitoring qualitative and quantitative quality data
 - *Quality Management Plan* – overarching document outlining all aspects of QM program from data management, monitoring, improvement efforts, and evaluation
- As the ultimate goal of the program, **Viral Load Suppression** is the leading marker to evaluate quality of care and services
- As highlighted, Program Income/340B funds have been used to identify services that address barriers impacting patients' ability to reach and sustain viral load suppression

Evaluation – Quality Management



HOPE at St. Luke's Hospital, Viral Load Suppression Rates, 2015-2020



- Thank you!
- We will be happy to answer any questions at this time.