

BACKGROUND

Consistent follow-ups to addressing Social Determinants of Health (SDOH) are an important component of patient engagement leading to viral load suppression (VLS) for people living with HIV/AIDS (PLWHA). Leveraging resources is crucial part in current era to maintain this infrastructure and support with limited fundings. Learning from our experience at the peak of COVID-19, Apicha CHC's integrated care model minimize interruption in essential services while maintain higher continuum of care.



LEARNING OBJECTIVES

- 1) Strategies for helping PLWHA achieve and maintain optimal Viral Load Suppression.
- 2) Evaluate gaps in services and develop strategies to improve the delivery of multidisciplinary care in HIV populations based on best practices.
- 3) Leveraging resources within FQHC.

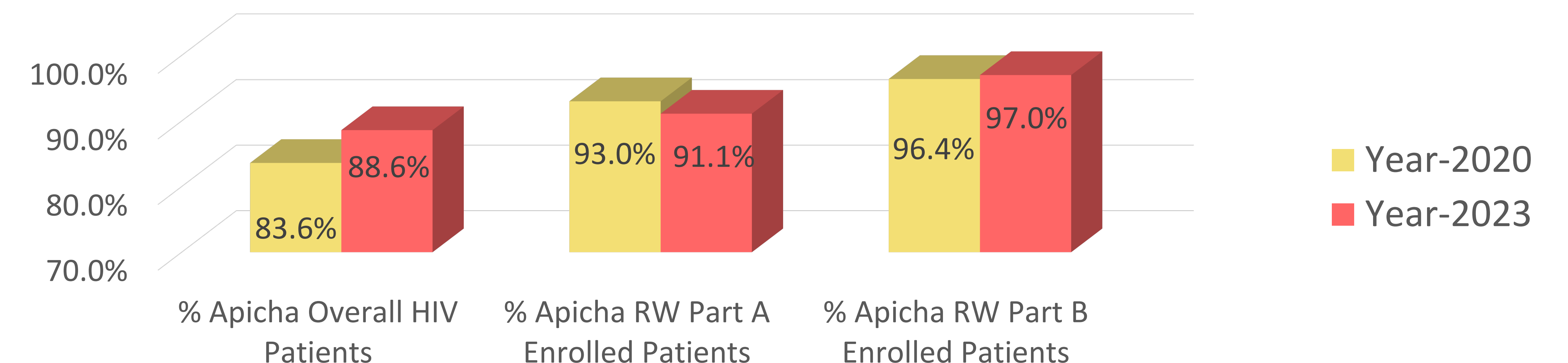
METHODS

- 1) **Primary Care Patients:** With Apicha CHC's integrated care model, patients needing gets screened for HIV and SDOH needs including those who were out of care or are newly diagnosed by our Medical Case Management team. Identified patients gets linked to HIV specialty programs (HIV Care Coordination & Nutrition Health Education).
- 2) **RW Part-A Services (RWPA):** Eligible patients receives comprehensive HIV Care Coordination program through RWPA assisting with SDOH needs (e.g. navigation, housing, transportation, food) while provide health education to enhance patient engagement into HIV treatment.
- 3) **RW Part-B Services (RWPB):** Patient needing food and nutrition support to achieve optimal health outcomes are linked to Nutrition Health Education program. Individual & group nutrition educations provided to enrolled patients; promotes healthy lifestyle to support retention in medical care and maintain VLS even after graduation.

RESULTS

Apicha CHC's integrated care model with primary care and Ryan White (RW) services evidently works cohesively to help patients with higher engagement and VLS. Since COVID-19 pandemic from 2020 to 2023, Apicha CHC's overall VLS rate showed 5% increase from 83.6% to 88.6% (surpassing NYC average of 86%) as more patients benefit from RW services. It is of note that more than 90% patients who received RWPA and 97% who received RWPB services were virally suppressed in year 2023 which was major contributing factor in the increase of overall health center VLS rates of 88.6%.

Patients Engaged and Virally Suppressed



NEXT STEPS/LESSONS LEARNED

Our comprehensive approach leveraging resources is evident to continue with improvement in our overall patients' health outcomes that are resulted from learned skills and knowledge through the multidisciplinary care team including Primary Care Physician, HIV Care Coordination program staff and Nutrition Health Education program staff. Our Health Center staff are successfully continuing with consistent follow-up via integrated care model to maintain patient engagements in care and VLS (*Irvine et al., 2015*).

REFERENCE

AIDS Institute HIV/AIDS Nutrition Health Education And Food and Meal Standards (2019).
Irvine, M. K., Chamberlin, S. A., Robbins, R. S., Myers, J. E., Braunstein, S. L., Mitts, B. J., Harriman, G. A., & Nash, D. (2015). Improvements in HIV care management and viral load suppression following enrollment in a comprehensive HIV care coordination program. *Clinical Infectious Diseases*, 60, 298-310. doi: 10.1093/cid/ciu783.
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