

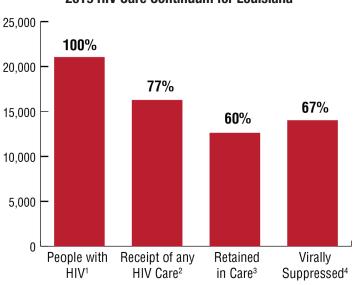


Louisiana Profile from the HRSA 19-039 SPNS Enhancing Linkage of STI and HIV Surveillance Data in the Ryan White HIV/AIDS Program (RWHAP)

HIV and STI Epidemiological Context in Louisiana

Within the Louisiana Department of Public Health (LA DOH), the HIV/STD Program is housed in Louisiana's Community and Health Section. The LA DOH receives Ryan White Part B money and distributes it via the Louisiana Ryan White Health Insurance Program (HIP).

Louisiana's 2019 HIV Care Continuum shows 21,051 people were living with HIV. Of those people with HIV, 77% (16,276) were in care, 60% (12,621) were retained in care, and 67% (14,027) were virally suppressed.



2019 HIV Care Continuum for Louisiana

¹ People with HIV in Louisiana in 2019.

² People with HIV who received any care in the past. This includes a medical visit, viral load test, or CD4 test.

³ People with HIV who attended at least two medical visits or labs, at least 3 months apart in 2019.

⁴ People with HIV who achieved viral suppression in 2019. Their viral load test value was <= 200 copies/mL.</p>

HIV/STI Data Linking Process in Louisiana

In Louisiana, rates of new HIV, chlamydia, gonorrhea, and syphilis cases are all above the national average.

New HIV and STI Cases and Rates in Louisiana, 2020						
	Cases	Rate ¹	National Rate ¹			
HIV	884 ²	22.8 ²	11.1 ²			
Chlamydia	32,997	709.8	481.3			
Gonorrhea	15,483	333.1	206.5			
P & S Syphilis	704	15.1	12.7			

¹ Cases per 100,000 people

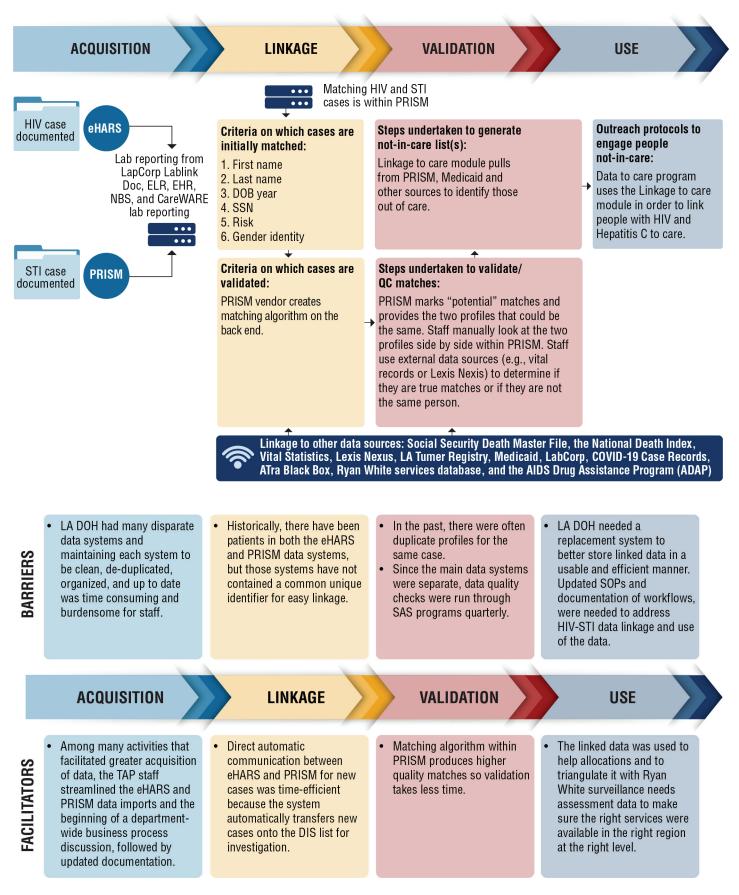
² New HIV cases, rates, and the national rate are from 2019

This evaluation summary was produced for the U.S. Department of Health and Human Services, Health Resources and Services Administration, under contract number HHSH250201300005I.

This summary lists evaluation data in order to provide additional information to recipients participating in cooperative agreement HRSA-19-039. The evaluation data in this summary have not been formally approved by the U.S. Department of Health and Human Services (HHS) or the Health Resources and Services Administration (HRSA) and is not an endorsement by HHS or HRSA.

The following graphic shows the acquisition of HIV and STI surveillance data, linkage, and validation process and the process by which linked HIV-STI data are intended to be used. HIV case documentation is housed in the Enhanced HIV/AIDS Reporting System (eHARS). STI case documentation is entered into the Patient Reporting Investigation Surveillance Manager (PRISM) system. The Technical Assistance Provider

(TAP) worked with IT staff to develop a linkage process within PRISM, to link and store HIV case data from eHARS with the PRISM STI profiles. For this match, a file is uploaded to PRISM, and the company which supports the PRISM system uploads these new HIV case records and runs a linkage algorithm. All linkages above a specific threshold were accepted, while "fuzzy matches" were sent for manual review.



Louisiana's Data Linking Goals, Progress, and Tailored Technical Assistance to Support those Goals

Jurisdiction-specific Goals and Progress at the End of Each Project Year

Goals	Progress at end of Year 2	Progress at end of Year 3
Enhance data sharing among existing data systems by working with the Technical Assistance Provider (TAP) to assess data sharing workflows, assess gaps and barriers, and improve standardization of linkage-related SOPs.	LA DOH hired and on-boarded a Business Analyst to help define and implement business development and document processes to enhance and standardize data sharing, cleaning, linking, and analysis protocols. LA DOH and TAP staff imported new data (i.e., HIV testing and lab information from their Patient Reporting Investigation Surveillance Manager (PRISM) system) into existing software systems to enhance data quality and linkage capacity.	To address challenges in data linkage, the TAP and LA DOH staff assessed data sharing strategies, timelines, and assessed gaps in current data sharing process. They encouraged collaboration between teams and facilitated the creation of SOPs for routine data sharing within LA SHHP.
Discuss feasibility of and strategies for transitioning from the existing case management platform (LA LINKS) to a more robust alternative by working with the TAP to review existing system documentation and capacity.	LA DOH staff received SAS code from Florida Department of Health (FDOH) staff to assist with data matching.	LA DOH staff used the SAS code provided by FDOH staff to match Hepatitis C data.
Enhance Data to Care (D2C) activities by incorporating RWHAP data into existing linkage processes by working with the TAP to engage RWHAP Part A staff in discussions about data integration feasibility and how linked data can/ would be used by D2C outreach staff.	LA DOH and TAP staff facilitated a data sharing project with providers. They created a DSA, toolkit and conducted webinar training with facilities to formalize an existing data exchange pathway that was previously informal and ad hoc, where facilities send their out-of-care patient list for updates by the DOH.	LA DOH and TAP staff made progress with CAREWare data integration. A test file of services for one day was sent to LA DOH. Once the formatting and content of the file was addressed, this transfer should happen on a daily basis. All future files will be correctly formatted automatically.

Louisiana's Technical Assistance Focus Areas and Activities by Theme

Technical Assistance (TA) Theme	Focus Areas for Louisiana	Activities in Year 2	Activities in Year 3
Business Process Development	Coordinate and Enhance Data Sharing between the STD/ HIV/Hepatitis Program (SHHP) Data System Processes and Data flows	 LA DOH and TAP staff documented comprehensive SHHP business processes, including systems, data transfers, and data use - and developed a holistic understanding of data integration requirements from a programmatic and technical lens. More specifically, the TAP improved the documentation of tracking the proportion of eHARS to PRISM matches and activities after an eHARS to PRISM match. 	 LA DOH and TAP staff continued to develop documentation on business processes. LA DOH staff scheduled a standing monthly meeting to work through a SHHP business process outline to ensure all processes are documented.
Integrated Data System Development Business Process Development Data Transfer Development/ Enhancement	Transition Linkage Database away from MS Access System	 Peers at the Florida Department of Health shared SAS code with LA DOH staff assist with HIV-STI data matching. 	 Using the SAS code provided by peers at the Florida Department of Health for data matching, LA DOH staff worked with matching Hepatitis C data.

Technical Assistance (TA) Theme	Focus Areas for Louisiana	Activities in Year 2	Activities in Year 3
Data Transfer Development/ Enhancement Collaboration Building	Enhance Data to Care Activities via Utilization of RW Data in Linkage Activities	 TAP and LA DOH staff outlined the roadblocks for increasing data-to-care capacity. TAP and LA DOH discussed improved D2C activities by better coordination of the internal data sharing/integration. TAP and LA DOH staff enhanced communication pathways between state and local HIV surveillance programs, clinics/providers, Ryan White programs. Data integration focused on ensuring that the linkage activities translated to increased data-to-care/RW out-of-care engagement practices. 	 TAP and LA DOH staff began discussions with the Care Services team regarding data availability and the potential to streamline these data with the SHHP systems. LA DOH worked to get DSAs signed by the HIV providers to conduct a match between LA DOH data and the providers' services data. LA DOH and TAP staff discussed ways that the "Out-of-care matching" toolkit could be better disseminated.