



Building Bridges Between Silo-ed Systems: Improving D2C Activities and Increasing Retention in the Chicago EMA

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Agenda

- Overview of Ryan White Part A Program in Chicago EMA 2017
- Overview of CDPH Bridge to Care Program for the Chicago EMA 2017
- RW and NIC Data Matching Logic and Process
- Outcomes & Next steps

Goals for Today's Presentation

- Gain a basic understanding of both the Ryan White Part A and Bridge to Care program in the Chicago EMA, administered by the Chicago Department of Public Health (CDPH)
- Review the logic and process for matching Ryan White data with Surveillance “Not in Care” (NIC) data and the associated challenges and benefits

Where is the Chicago EMA?

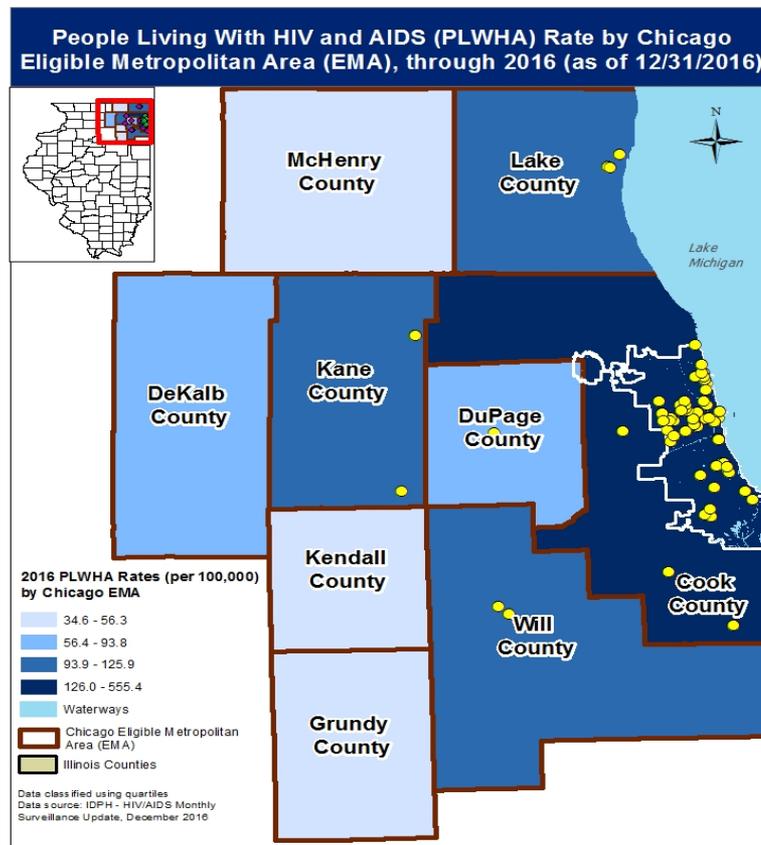


Population of Illinois: 12.84 million (2016)



Population of the Chicago EMA: 8.6 million
or 67% of Illinois

Where is the Chicago EMA?



9 counties: Cook, DeKalb, DuPage, Grundy, Kane, Kendall, Lake, McHenry, and Will

HIV in the Chicago EMA

As of 2016:

- 38,011 individuals living with HIV in Illinois
- 32,450 individuals living with HIV in the Chicago EMA (85%)
- 24,161 in the City of Chicago (64%)

County	Percentage	Ranking by Cases
Cook County	90.24%	1
Lake County	2.48%	2
DuPage County	2.31%	3
Will County	2.18%	4
Kane County	1.97%	5
McHenry County	0.38%	6
DeKalb County	0.26%	7
Kendall County	0.12%	8
Grundy County	0.06%	9

**Chicago Department of
Public Health:
Ryan White Part A Program**

Snapshot of the Ryan White Part A Program in the Chicago EMA FY2017

Funding

- \$27,450,535 for Part A and MAI in FY2017
- 43 funded sub-recipient agencies
- 33,934 unduplicated clients served across all service categories in calendar year 2017

Snapshot of the Ryan White Part A Program in the Chicago EMA FY2017

Service Category Break Down

- 16 funded service categories: 7 core and 9 essential support
- 18 sub-recipients funded for outpatient ambulatory health services
- 17,397 clients services through Outpatient Ambulatory Health Services (OAHS) in calendar year 2017

Chicago Department of Public Health: Bridge to Care Program

CDPH Bridge to Care Program

In response to NHAS guidance, CDPH established the B2C program in 2015 to do the following:

- 1) Utilize HIV surveillance data to identify individuals who are not in care (NIC)
- 2) Use highly trained Communicable Disease Control Investigators (CDCI), also known as Disease Intervention Specialists (DIS), to serve as Bridge Workers (BW)
- 3) BWs will use their investigative skills to locate these PLWHA
- 4) Re-engage into care system(s)

Generating the Bridge Case Assignment

- “Not in care” report run monthly by CDPH HIV Surveillance team from eHARS (~10,000 individuals on this list)
- Prioritized by the Bridge supervisor
- Cases are assigned to Bridge Workers through RedCap

Case Assignment Sample: September 2018

Category	Total Number of Cases
Total Not in Care as of August 2018:	9729
Minus Last Case Assignment:	9592
EHARS: Living in Chicago:	6282
VL 1500 or above:	59
VL 75 or above:	149
Accurint: Living in Chicago:	138
Total Assigned to Bridge Staff:	138

Quality Improvement Project Born: Data Matching Ryan White and NIC Data

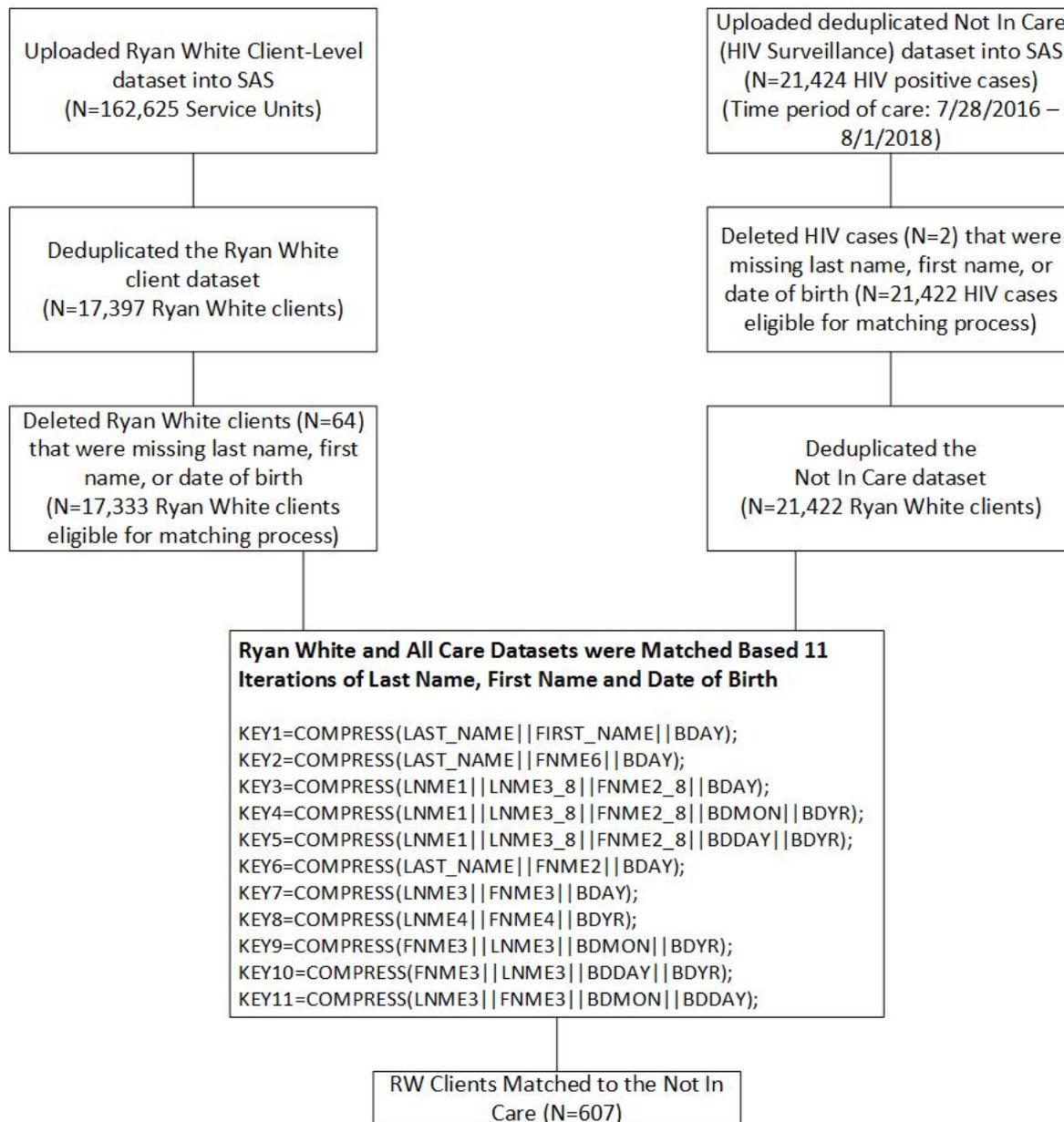
- CDPH participates in HRSA Continuum of Care Learning Collaborative in 2016
- Begins data-matching Ryan White with eHARS in a de-duplication effort
- Ryan White Program Director interim supervises Bridge to Care Program
- “Not in Care” (NIC) list discovered

Data Matching: Ryan White and NIC List

CDPH HIV Surveillance: Not In Care (NIC) Dataset

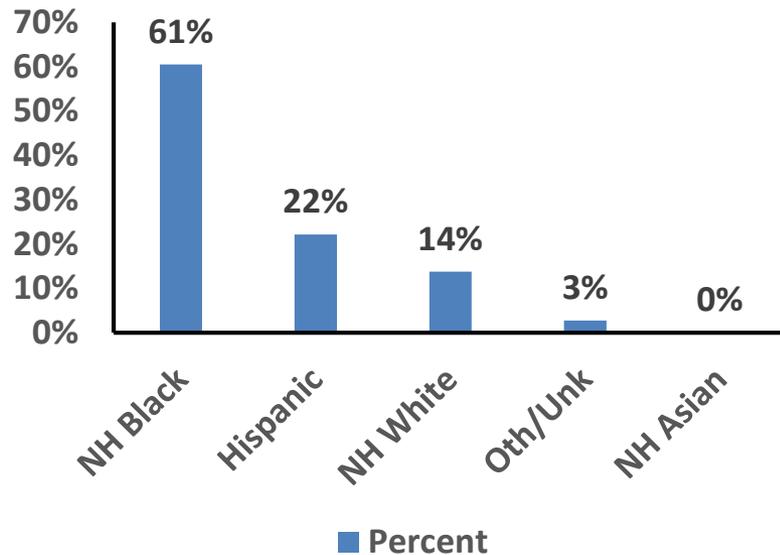
- HIV Medical Care Interval (18 months): 7/28/2016 (T_1) – 1/28/2018 (T_2)
- Case Inclusion/Exclusion
 - HIV+
 - Alive and not deleted/purged
 - In Jurisdiction
 - Within designated time parameters
- NIC Definition
 - No CD4, HIV viral load, or HIV-1 genotype test results based on a specimen collected during period
 - No other evidence of HIV medical care during period

Flowchart of Methodological Steps to Match the Ryan White Client Level Dataset to Not In Care Dataset

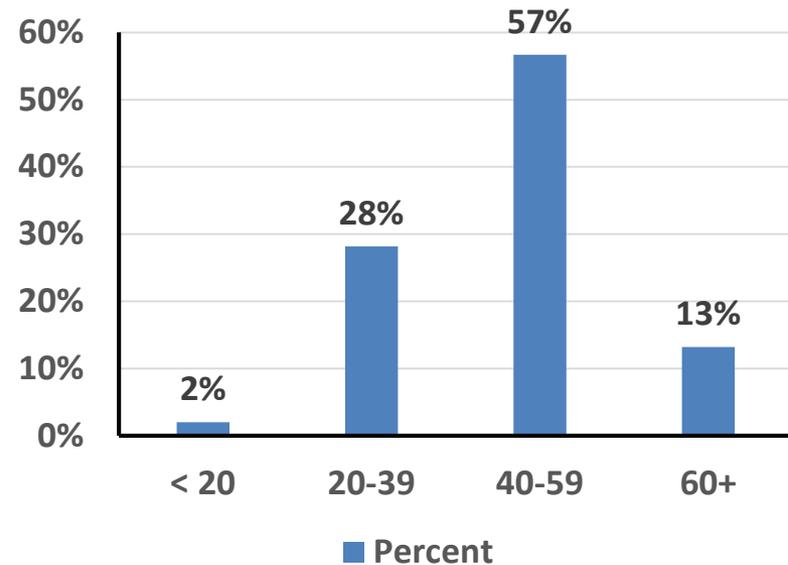


Ryan White Clients on the Not in Care List in 2017 (N=607)

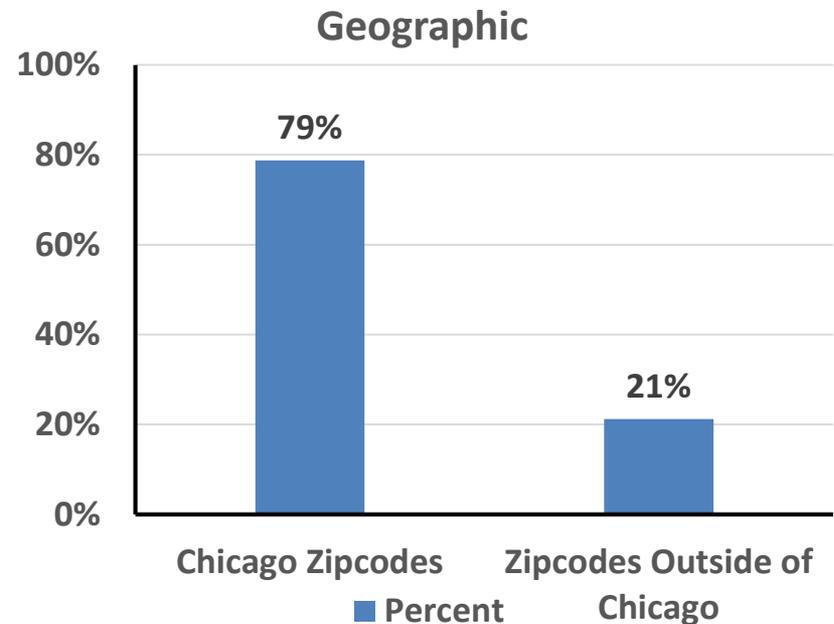
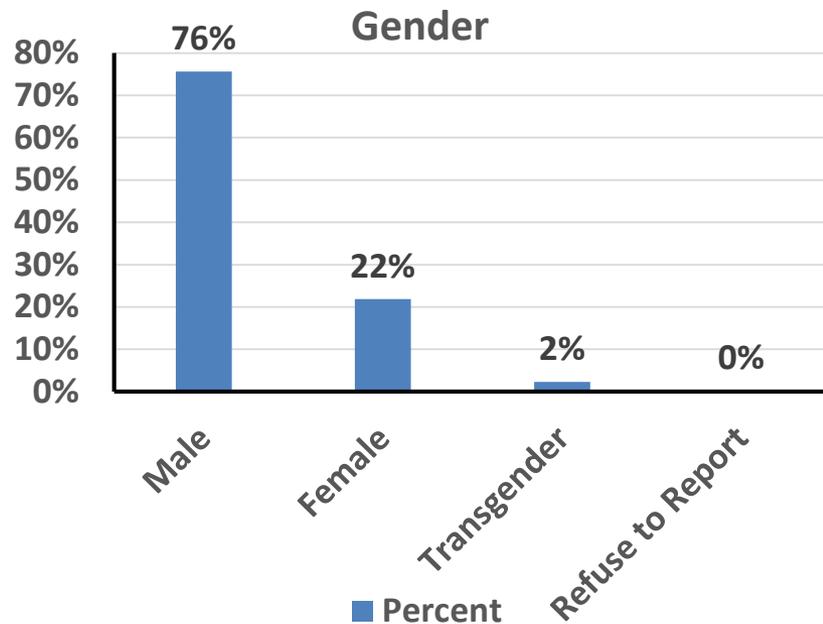
Race/Ethnicity



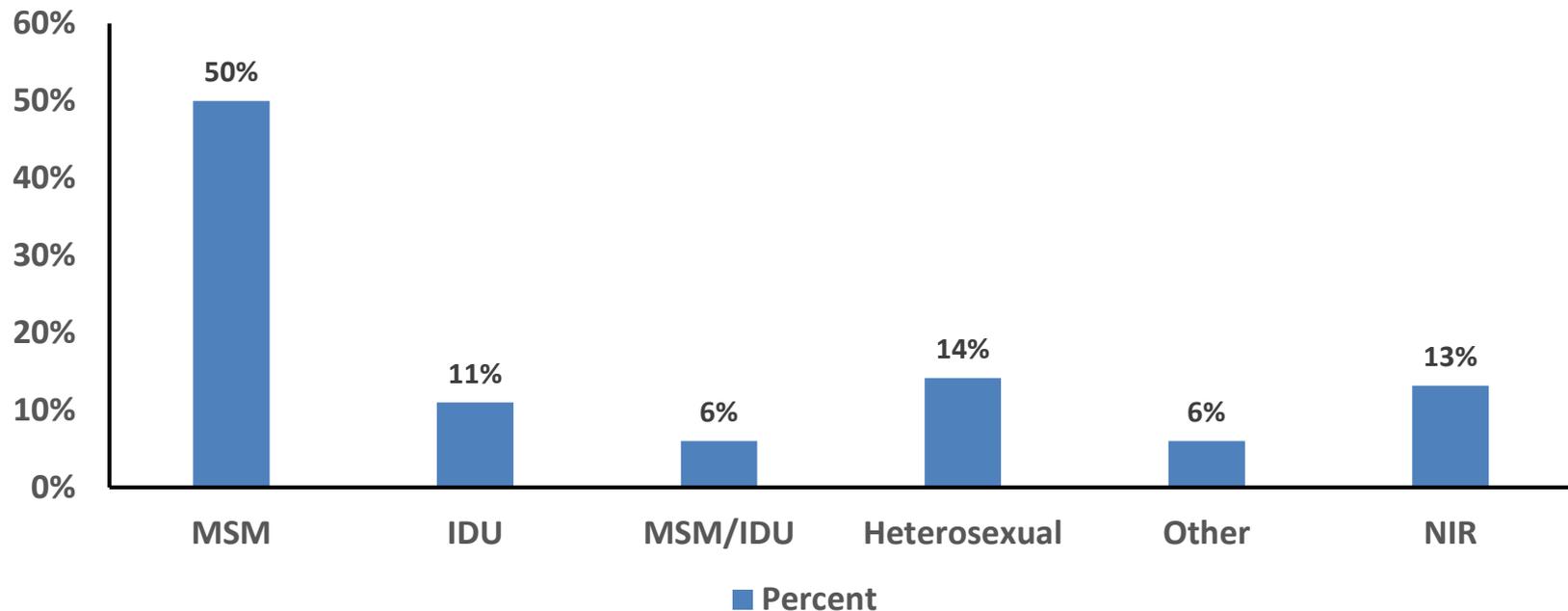
Age Group



Ryan White Clients on the Not in Care List in 2017 (N=607)



Ryan White Clients on the Not in Care List in 2017 (N=607)



Challenges

1) Size and Bureaucracy of CDPH

- Ryan White data lives in Dept. of IT (DoIT)
- Surveillance data lives in Public Health Services division of HIV/STI Bureau

2) Staff Turnover

- Part A QM director position change
- Epidemiologist on staff left and was re-assigned twice

3) Program silos

- Bridge to Care considered an internal program with separate staff and leadership than RW and other external programs

4) Data Accuracy

- RW data submitted through SFTP
- Under-reporting in eHARS

Expected Outcomes

- Geocoding
- “Place-based” epi-analysis
- Demographic analysis of NIC data
- Ryan White Surveillance Report
- Follow up on under-reporting
- Best practices for Ryan White agencies
- Intensified monitoring for agencies with high numbers of clients OOC or under-reported to surveillance

Questions?



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