

# Health Department/HIV Clinic Collaboration Improves Re-Engagement in Out of Care Persons

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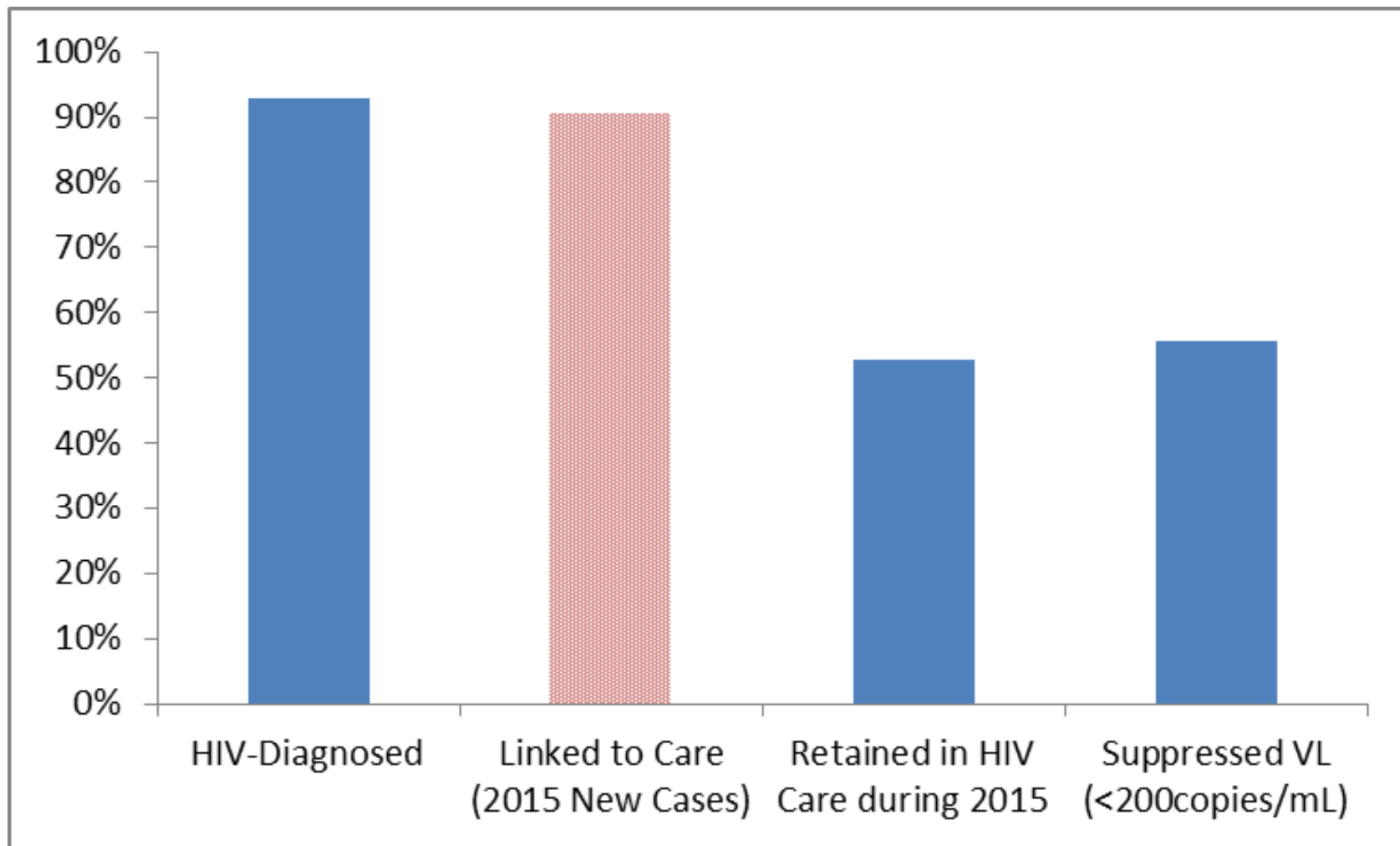
Philadelphia Department of Public Health  
AIDS Activities Coordinating Office  
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## Philadelphia Diagnosis-Based HIV Care Continuum, 2015



Source: Philadelphia Department of Public Health, AIDS Activities Coordinating Office, 2016

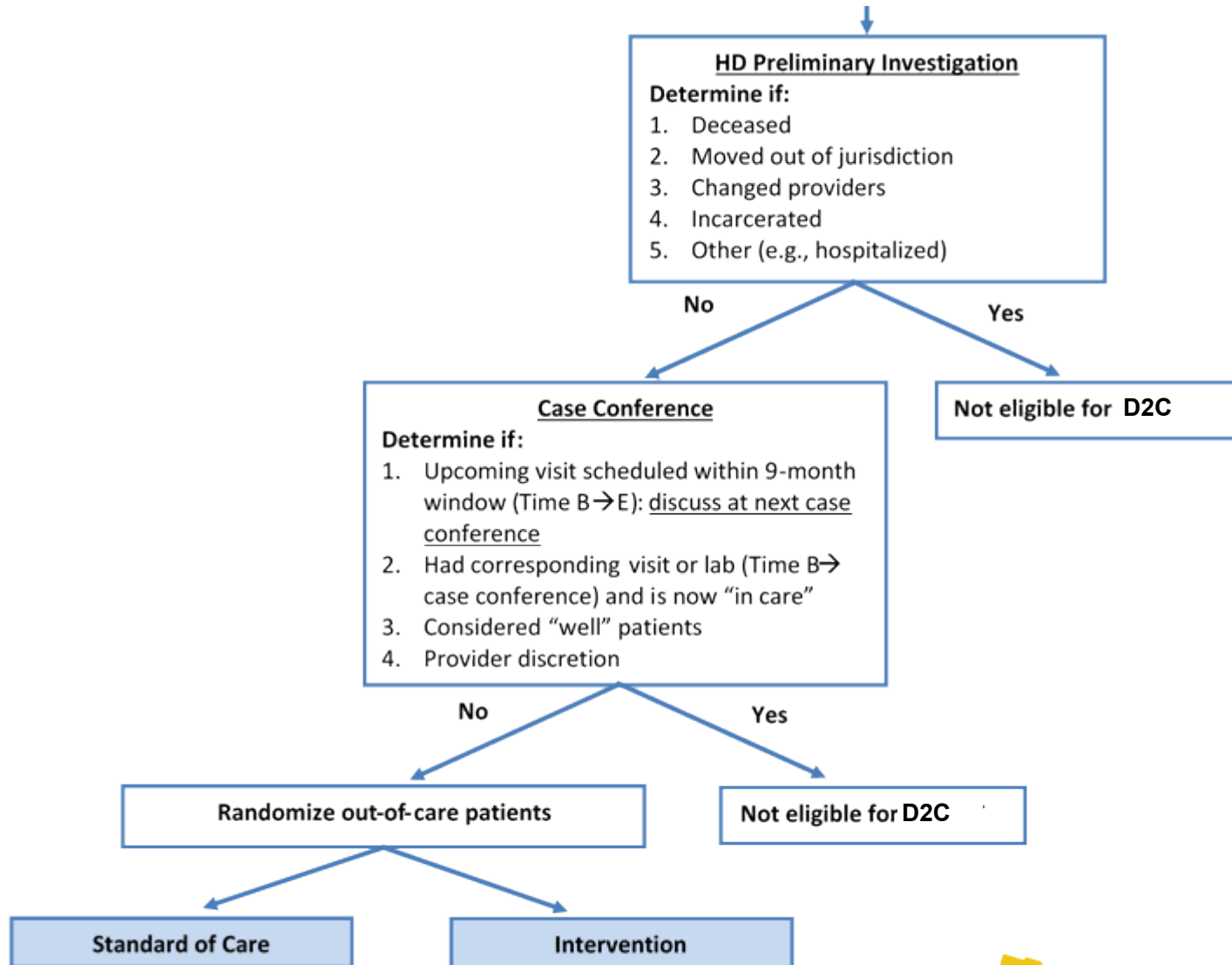
# Objectives

- Establish a data-sharing partnership between the Health Department and HIV care clinical providers designed to identify HIV-infected persons who are out-of-care (OOC)
  - Data to Care: Health Department AND Healthcare Provider Model
- Implement a proven intervention to increase the number of HIV-infected out-of-care individuals who:
  - link to an HIV medical facility;
  - remain in HIV medical care;
  - achieve HIV viral load suppression within 12 months; and
  - achieve durable HIV viral load suppression over 18 months

# Eligibility

- Philadelphia residents
- Over the age of 18 years old
- Received HIV medical care at a participating facility and then disengage by either of the following definitions:
  - Clinic definition: did not have a visit with a prescribing provider for 6 months.
  - Health department definition: no CD4 or viral load test result reported to health department surveillance for more than 6 months.

# Methods



# Intervention

- Implemented using Disease Intervention Specialists
- Used a modified strengths based Anti-Retroviral Treatment and Access to Services (ARTAS) model to:
  - Locate and contact patients;
  - Help OOC patients link/re-link to care;
  - Work with patients once they return to care;
  - Offer partner services; and
  - Work with facility staff to help patients transition to care

# Results

Total Eligible Patients; Initial Out-of-Care Lists from 05/01/16 – 07/31/16

**N=4768**

**Health Department Preliminary Investigation**

Incarcerated

1.5%

**N=73**

Outmigration:

12.3%

**N=588**

Deceased:

3.0%

**N=145**

Transferred

Care: 7.9%

**N=375**

Evidence of

care: 64.5%

**N=3076**

Eligible for Case Conference from Out of Care List

**N=512**

Eligible for Randomization

**N=287**



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# Demographics

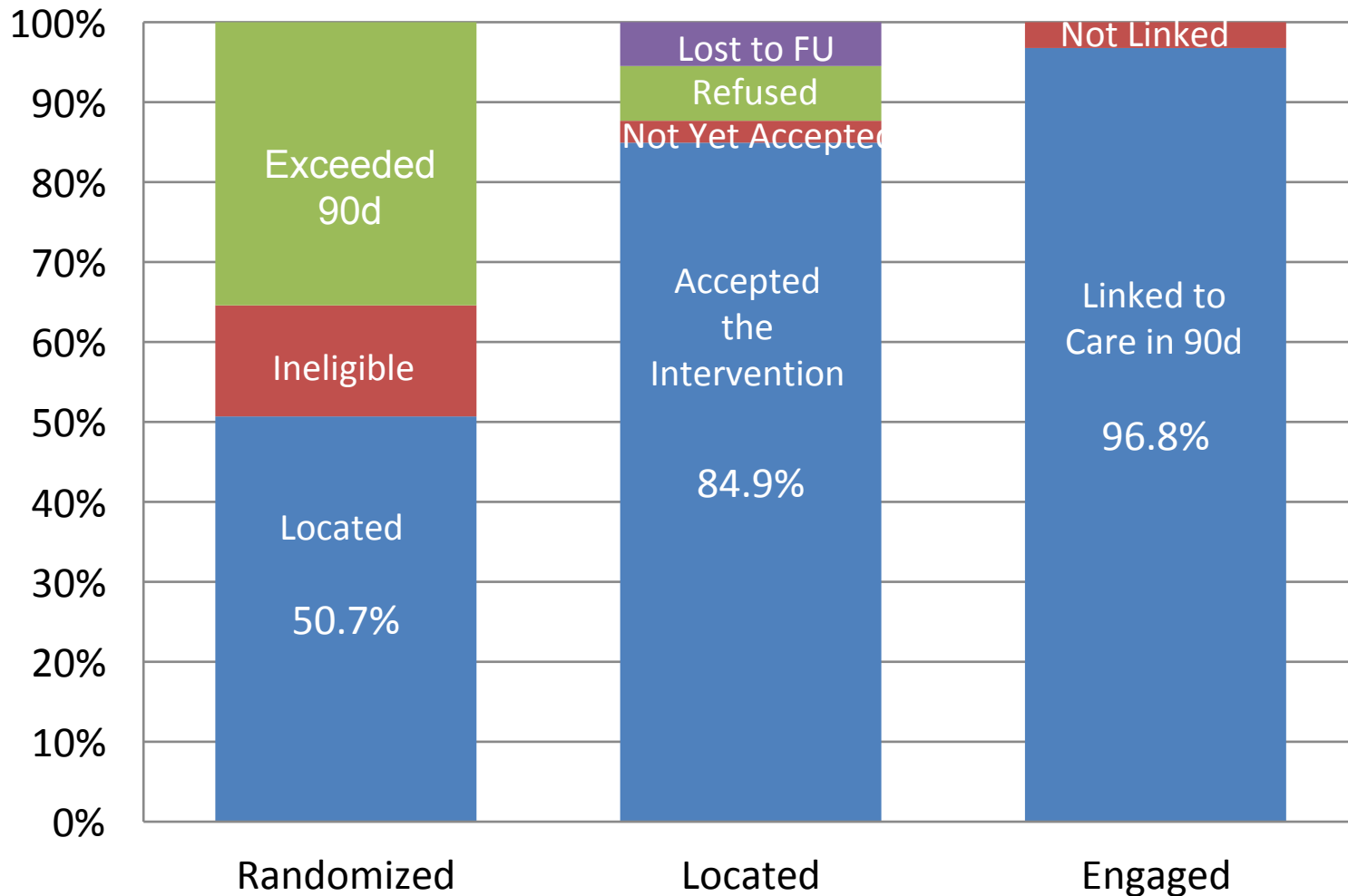
Characteristic	Intervention Group N=144 (%)	SOC Group N=143 (%)	P-value
<b>Race</b>			0.2481
NH Black	103 (71.5)	99 (70.2)	
NH White	11 (7.6)	22 (15.6)	
Hispanic, any Race	24 (16.7)	16 (11.4)	
Other	6 (4.2)	4 (2.8)	
<b>Age</b>			0.5755
18-24	8 (5.6)	3 (2.1)	
25-34	37 (25.7)	41 (28.9)	
35-44	38 (26.4)	34 (24.0)	
45-54	41 (28.5)	41 (28.9)	
55+	20 (13.9)	23 (16.2)	
<b>Sex at birth</b>			0.8026
Male	98 (68.1)	94 (66.7)	
Female	46 (31.9)	47 (33.3)	
<b>Mode of Transmission</b>			0.8929
MSM	41 (28.7)	36 (25.5)	
IDU	30 (21.0)	32 (22.7)	
Heterosexual	58 (40.6)	62 (44.0)	
MSM+IDU	9 (6.3)	6 (4.3)	
Other	5 (3.5)	5 (3.6)	



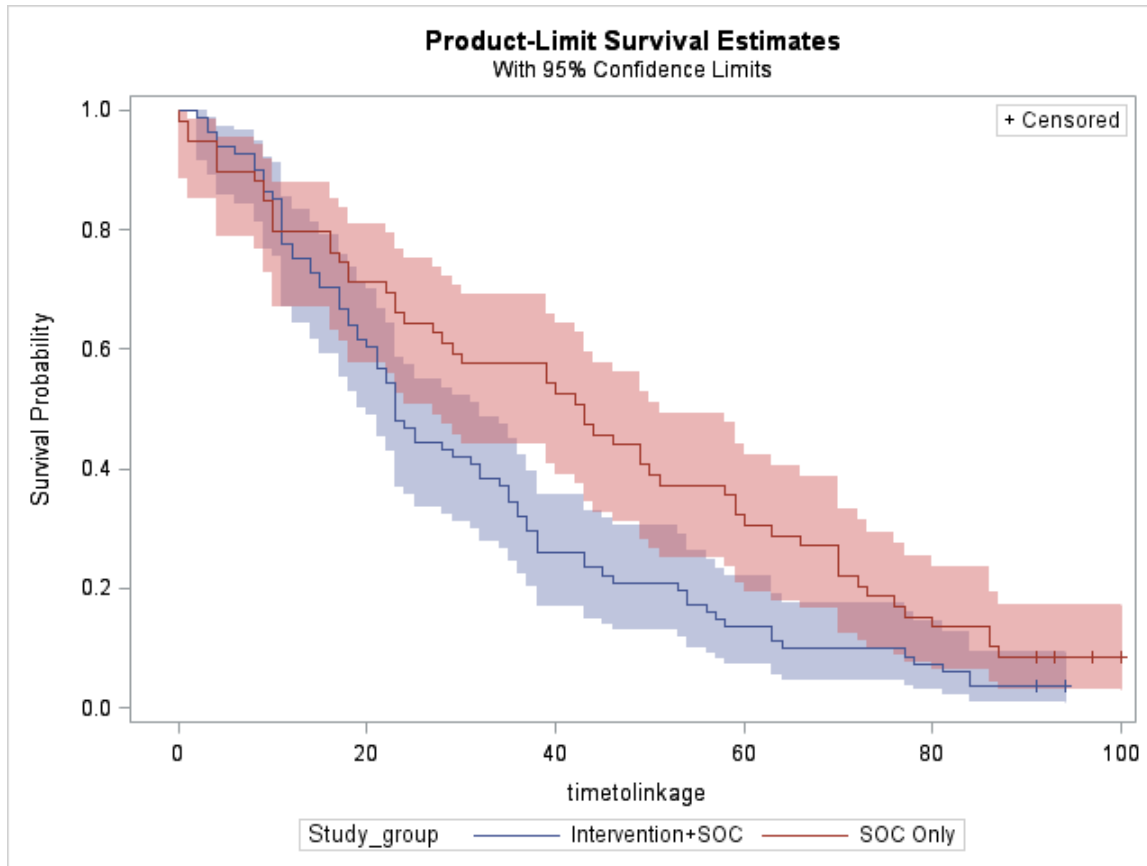
# Demographics

Characteristic	Intervention Group N=144 (%)	SOC Group N=143 (%)	P-value
<b>AIDS Status</b>			0.5127
AIDS dx	74 (51.4)	79 (55.2)	
No AIDS dx	70 (48.6)	64 (44.8)	
<b>Time since last visit</b>			0.8278
0-3m ago	2 (1.7)	3 (2.1)	
3-6m ago	9 (7.5)	8 (5.6)	
6-9m ago	34 (28.3)	36 (25.2)	
9m+ ago	75 (62.5)	96 (67.1)	
<b>Time since last lab</b>			0.9945
0-3m ago	2 (1.4)	2 (1.4)	
3-6m ago	7 (4.9)	7 (4.9)	
6-9m ago	35 (24.6)	37 (26.1)	
9m+ ago	98 (69.0)	96 (67.6)	

# Intervention Data



# Results



	<b>30 days</b>	<b>60 days</b>	<b>90 days</b>
Intervention Group N=144 (%)	47 (32.64)	69 (47.92)	77 (53.47)
Control Group N=143 (%)	27 (18.88)	42 (29.37)	55 (38.46)
P-value	0.008	0.001	0.011

# Results of Cox Proportional Hazard Model

Characteristic	Hazard Ratio	P-value
<b>Race</b>		0.4637
NH White	Ref.	
NH Black	1.39 (0.74-2.58)	
Hispanic, any Race	1.02 (0.47-2.22)	
Other	0.91 (0.26-3.28)	
<b>Age</b>		0.2594
18-24	Ref.	
25-34	1.84 (0.44-7.65)	
35-44	1.63 (0.39-6.80)	
45-54	2.24 (0.54-9.25)	
55+	1.29 (0.30-5.56)	
<b>Sex at birth</b>		0.7971
Male	Ref.	
Female	0.95 (0.66-1.38)	
<b>Mode of Transmission</b>		0.5342
Heterosexual	Ref.	
MSM	1.11 (0.48-1.20)	
IDU	0.76 (0.74-1.68)	
MSM+IDU	1.10 (0.44-2.75)	
Other	0.69 (0.28-1.73)	

# Results of Cox Proportional Hazard Model

Characteristic	Hazard Ratio	P-value
<b>AIDS Status</b>		0.1204
No AIDS dx	Ref.	
AIDS dx	1.32 (0.93-1.88)	
<b>Time since last visit</b>		0.6594
0-3m ago	Ref.	
3-6m ago	1.53 (0.44-5.37)	
6-9m ago	1.07 (0.33-3.49)	
9m+ ago	1.05 (0.33-3.33)	
<b>Time since last lab</b>		0.2829
0-3m ago	Ref.	
3-6m ago	2.51 (0.53-11.83)	
6-9m ago	1.27 (0.30-5.29)	
9m+ ago	1.66 (0.41-6.74)	
<b>Facility of origin</b>		0.5577
Facility 1	Ref.	
Facility 2	1.25 (0.83-1.89)	
Facility 3	1.15 (0.76-1.74)	
<b>Assignment</b>		<b>0.001</b>
Standard of Care	Ref.	
Intervention + SOC	1.83 (1.29-2.60)	

# Data Summary

- Health Department collaboration with clinics reduced OOC lists by 25%
- Mean time to linkage:
  - Intervention + SOC: 29.2 days
  - SOC: 39.0 days
- Likelihood of remaining OOC is lower for those in Intervention + SOC group
- Only significant predictor of linkage to care was study group

# Limitations

- CD4/VL data from surveillance data used as a proxy for in care status during follow up period
  - May overestimate the true linkage rate
- Prescription information not available to track ART usage
- Do not yet have data on long term outcomes including retention in care and viral suppression

# Implications

- Health Department collaborations with clinics to identify OOC HIV-infected persons is feasible
- Collaboration can significantly improve the efficiency and effectiveness of interventions to re-engage OOC individuals in HIV care



# Future Directions

- Further evaluation is needed to see if these successes translate into improved retention in care and viral suppression
- Expand this project to include greater number and type of clinics

# Acknowledgements

## PDPH Collaborators

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## HIV Clinic Collaborators

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- **Temple Comprehensive staff:** Ellen Tedaldi, Princess Davenport
- **Drexel Partnership staff:** Sara Allen, Amy Althoff, Alexis Allen, Taneesa Franks, Alicia Wilson, Tawanda Armour

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