Virtual Pre-Conference

Continuity of HIV Care in the Presence of COVID-19

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Implementing HIV Telemedicine in a high COVID-19 Prevalent Context







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Nothing to declare







Outline



- COVID-19 in New York City and The Bronx
- Description of Montefiore's HIV primary care treatment care model
- Disruptions Faced
- Implementation of telemedicine to date
- Challenges faced
- Future directions for practice and research

CONTINUITY OF HIV CARE IN THE PRESENCE OF COVID-19







COVID-19 Global and US Cases

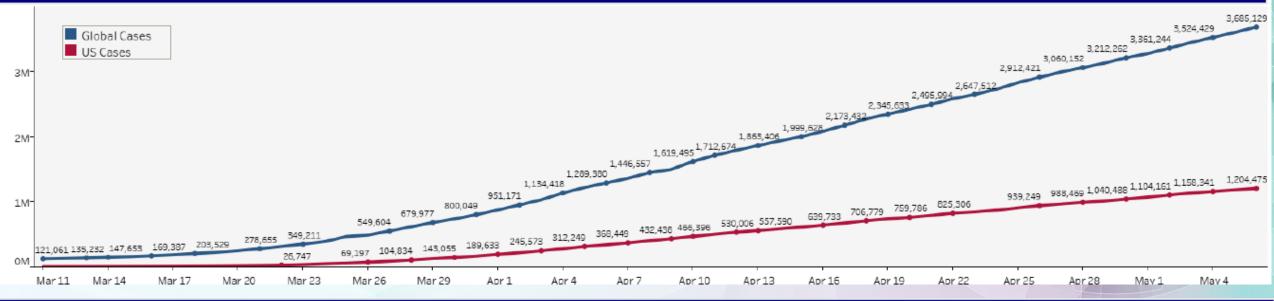




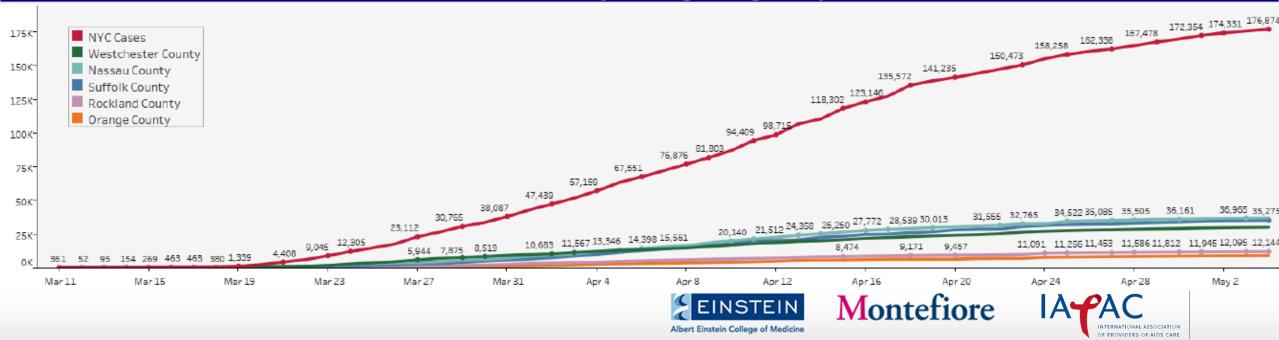




COVID-19 Global and US Cases

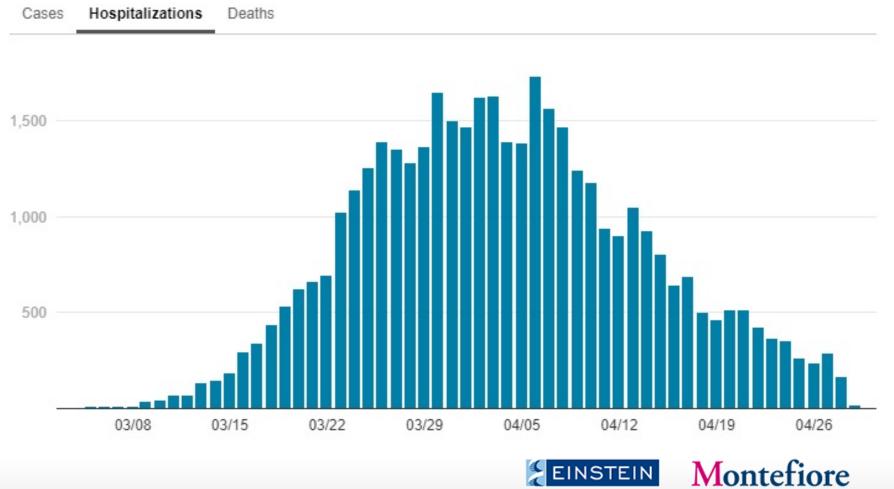


COVID-19 New York City and Neighboring County Cases



COVID-19 Cases Hospitalizations in New York City

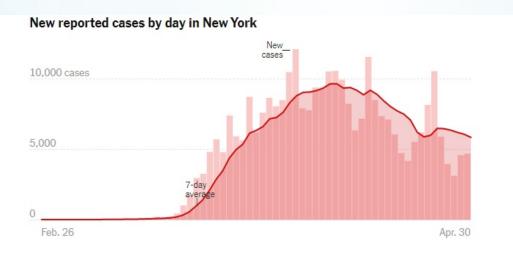
Due to delays in reporting, recent data are incomplete.





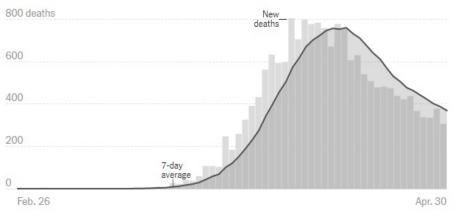


COVID-19Cases and Deaths in NYC



Note: The seven-day average is the average of a day and the previous six days of data.

New reported deaths by day in New York





*https://www.archives.gov/research/military/vietnam-war/casualty-statistics

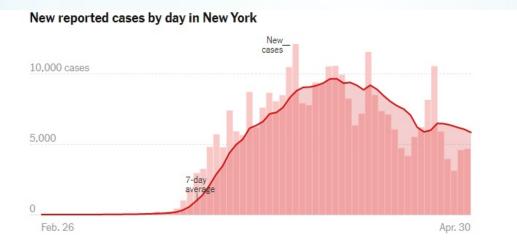






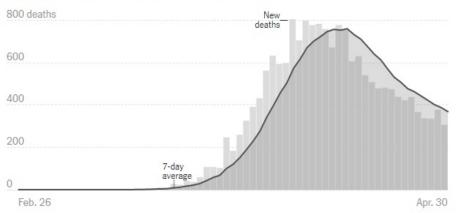
COVID-19Cases and Deaths in NYC

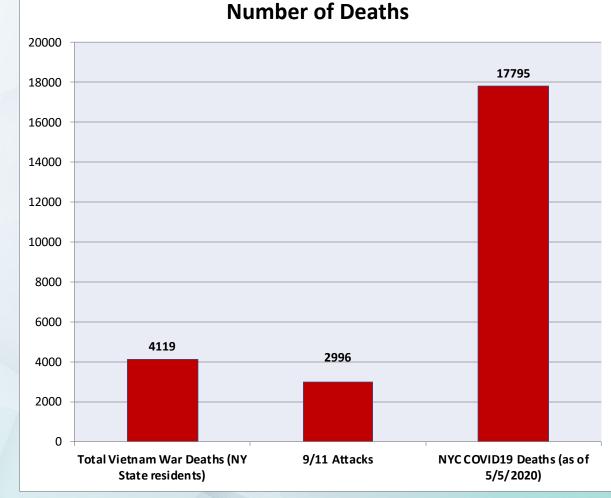




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Montefiore

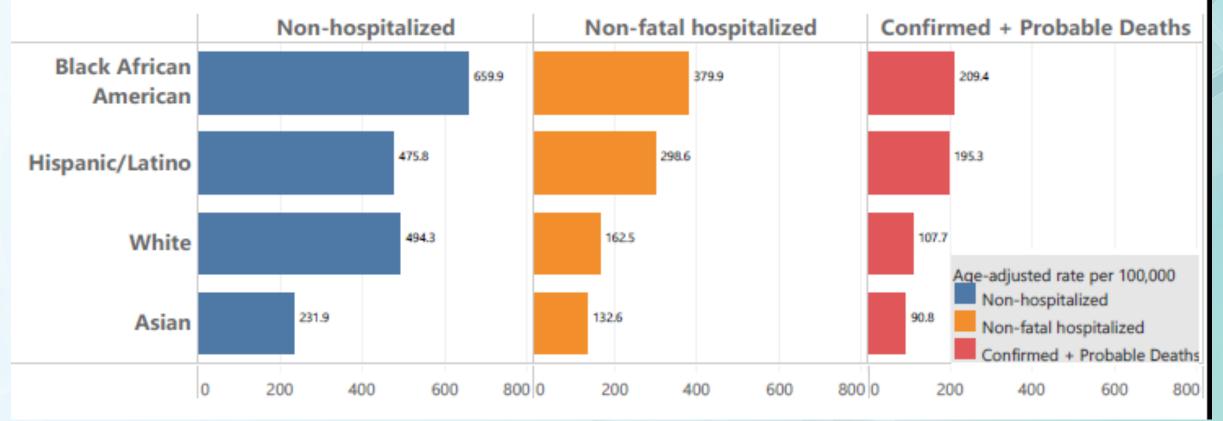




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Disparities by Race/Ethnicity

Age-adjusted rates of lab-confirmed COVID-19 non hospitalized cases, estimated non-fatal hospitalized cases, and total persons known to have died (lab-confirmed and probable) per 100,000 by race/ethnicity group





Montefiore



NYC Health:Cases by Borough











New York City: Before

19 10 15 11

· · · 10 11

- -

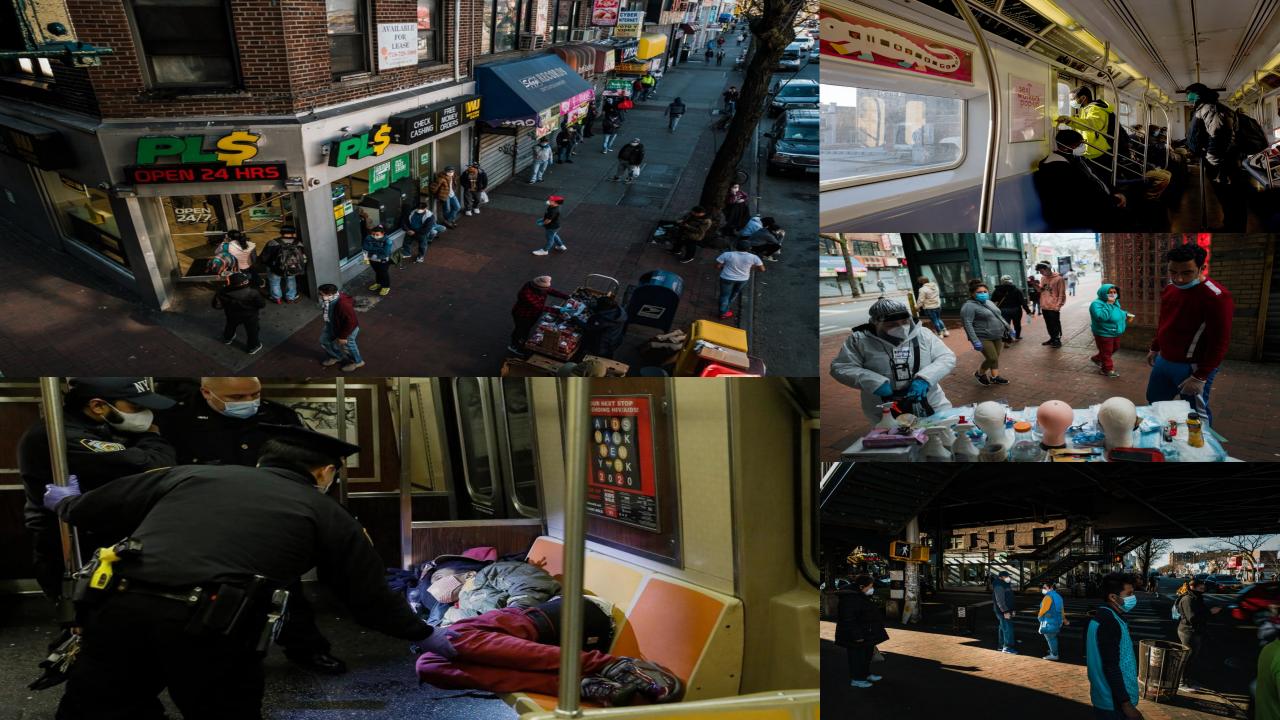


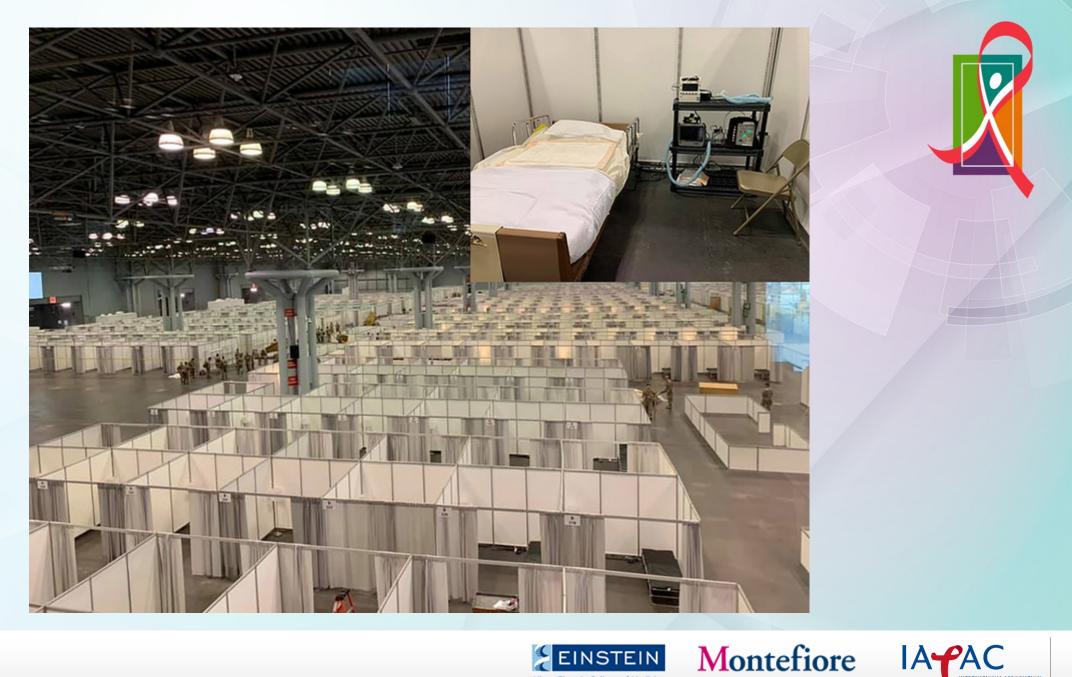




NYC: After











NYC Health: Cases by Borough



Bronx Manhattan Queens New York City Brooklyn Staten

Rates by Borough

This chart shows the number of positive cases per 100,000 people in each borough. It indicates the spread of COVID-19 relative to each borough's population.



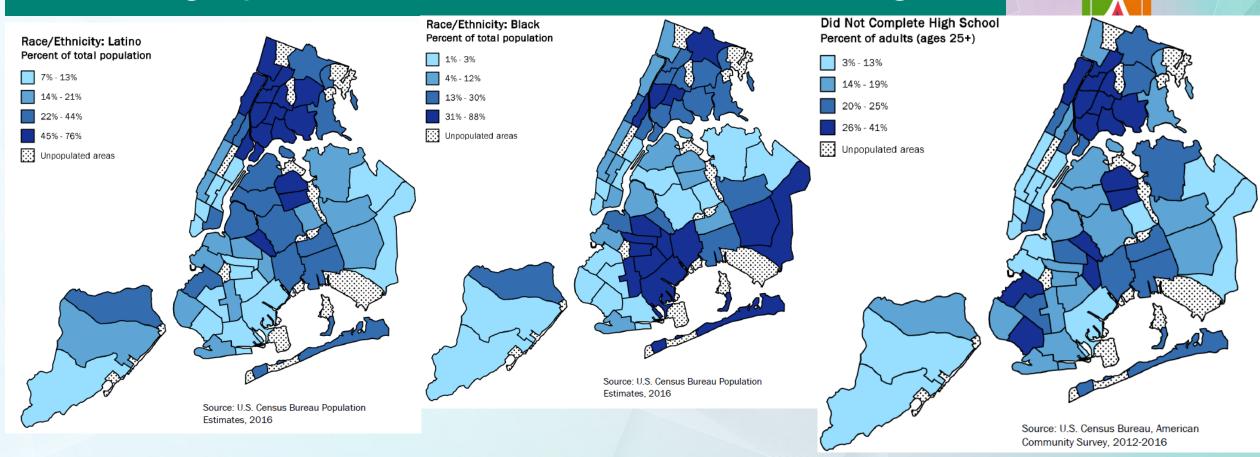
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Get the data . Created with Datawrapper





Demographic Characteristics of NYC Boroughs

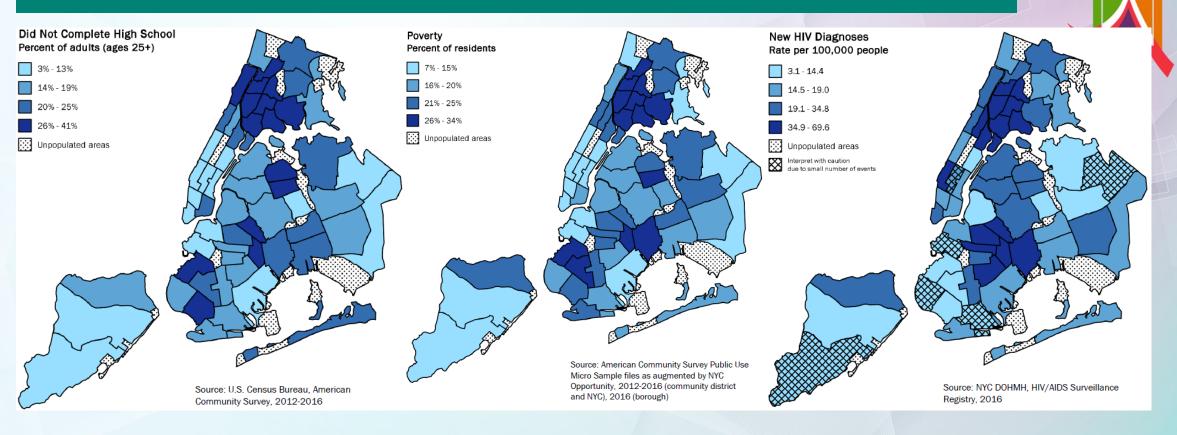








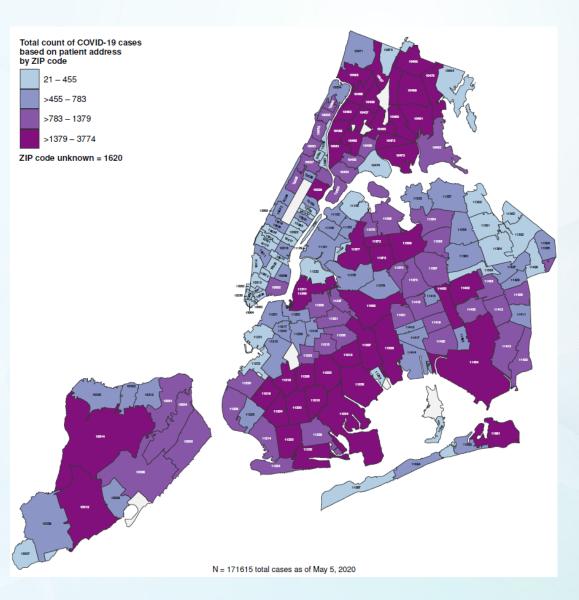
Demographic Characteristics of NYC Boroughs









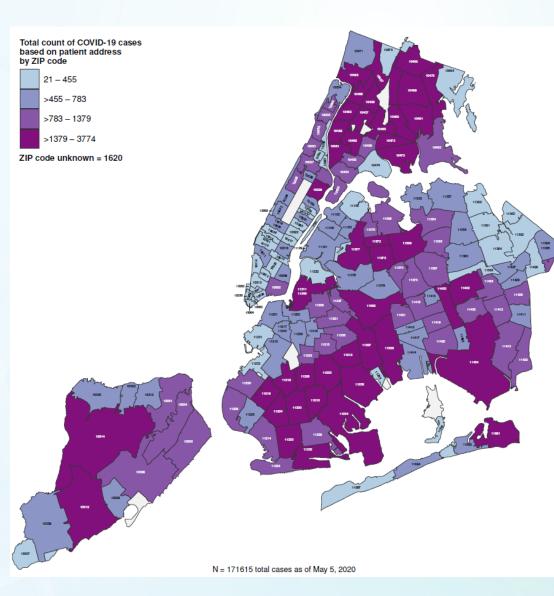


https://www.nytimes.com/interactive/2020/04/28/us/coronavirus-death-toll-total.html

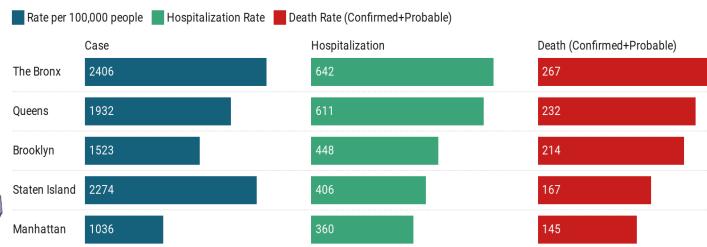








COVID-19 rates per 100,000 people



May 5, 2020

Source: NYCDOHMH • Created with Datawrapper

https://www.nytimes.com/interactive/2020/04/28/us/coronavirus-death-toll-total.html





Montefiore Health System

- Largest healthcare provider in the Bronx
- Among the largest patient populations with HIV
- High levels of care for uninsured, Medicaid (low-income)
- Encounter social and structural barriers to care daily for our patients

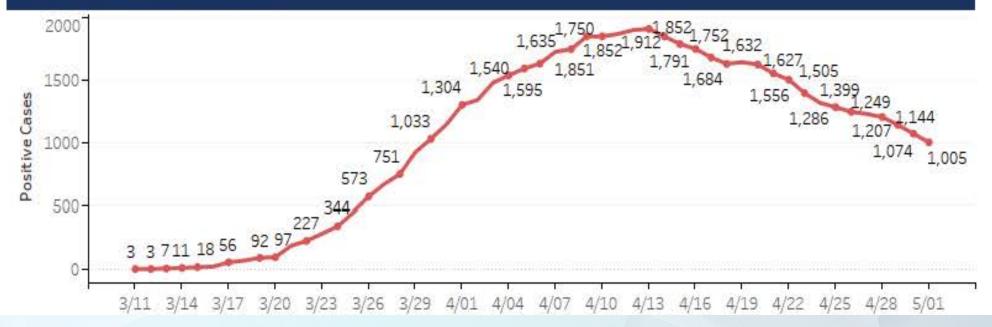






Montefiore Medical Center Case Count

MHS Total Case Count





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HIV Primary Care at Montefiore



- HIV Care delivery via primary care community health centers, ID clinic, and an adolescent specific clinic
- In the Primary Care Network, 1,003 patients with HIV
- Care by a team approach
 - Physican/NP/PA providers
 - Social Workers, Psychologist, Psychiatrist
 - Clinical Pharmacist, Navigators, Counselors

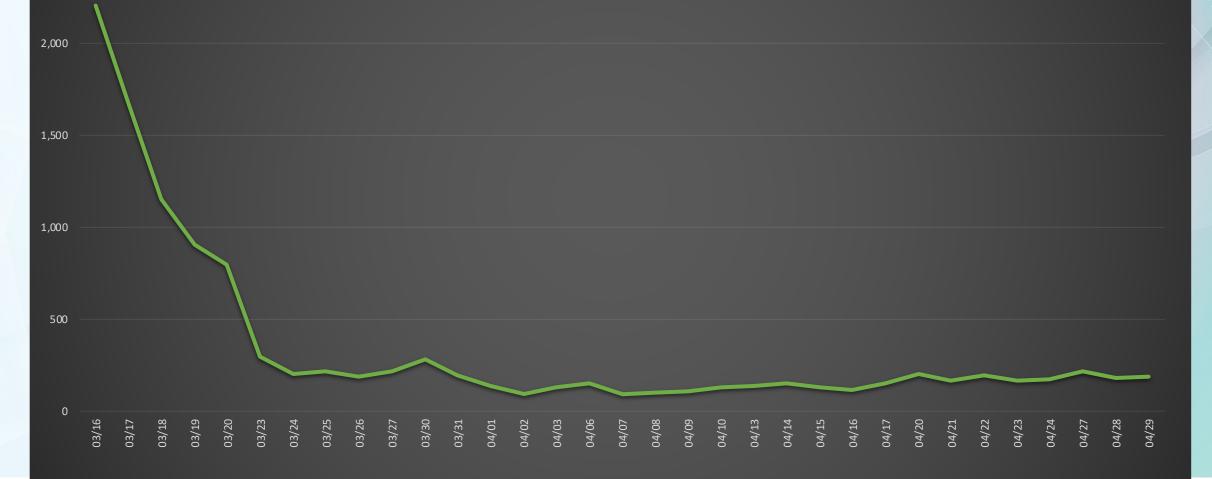




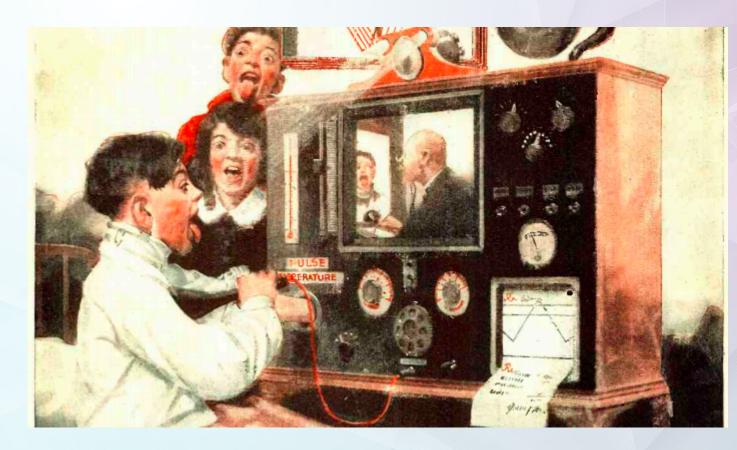


Total Daily Outpatient Clinical Visits (all patients) March 15 - April 29

2,500



— Medical Face-to-face (excl. Labs)









Need for Other Care models



The Official Newsletter of the New York State Medicaid Program

March 23, 2020 Volume 36 | Number 5

Special Edition – This Document is Updated Frequently – please check back

Comprehensive Guidance Regarding Use of Telehealth including Telephonic Services During the COVID-19 State of Emergency



Telehealth Resource Guide During COVID-19 Public Health Crisis for the Outpatient Setting

March 23, 2020

Montefiore Montefiore FACULTY PRACTICE GROUP Medical Group

This document should be used while Montefiore is acting under Emergency Procedures.







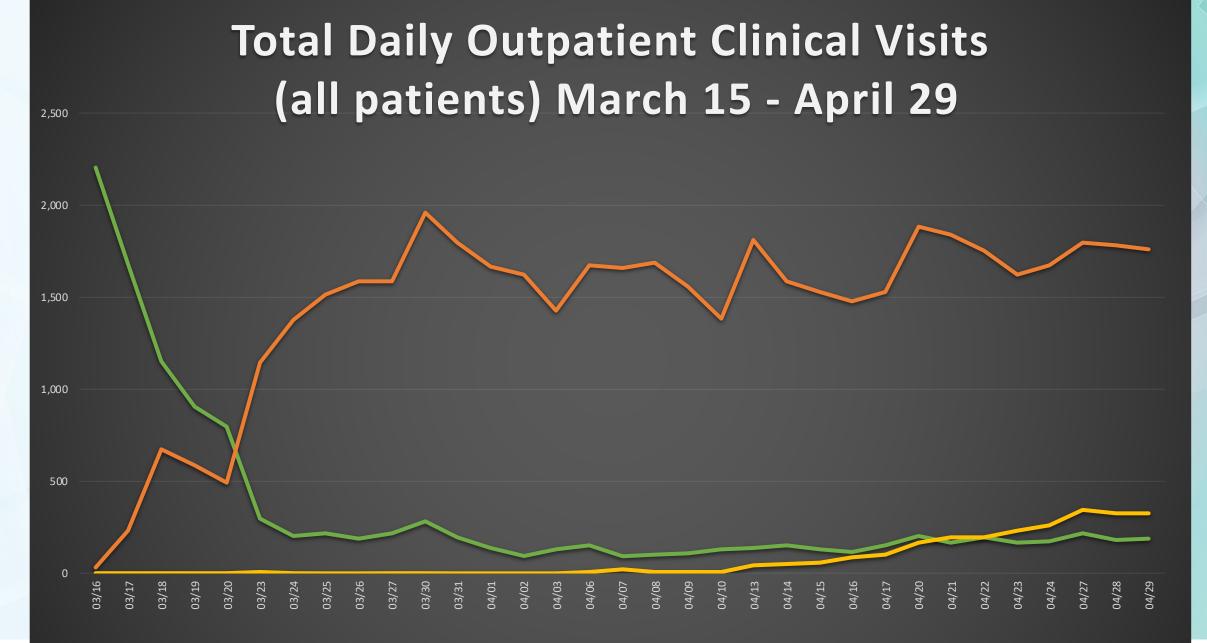
Current Telemedicine Flow

- All existing and future appointments converted to televisits
- Need to train and keep up with shifting protocols (all happening rapidly)
 - Documentation changes for billing
- Supporting patients to be able to use the tools (video/telephone)
- Use of email via electronic health record
- Mail (e.g., self-test kits for HIV → PrEP)







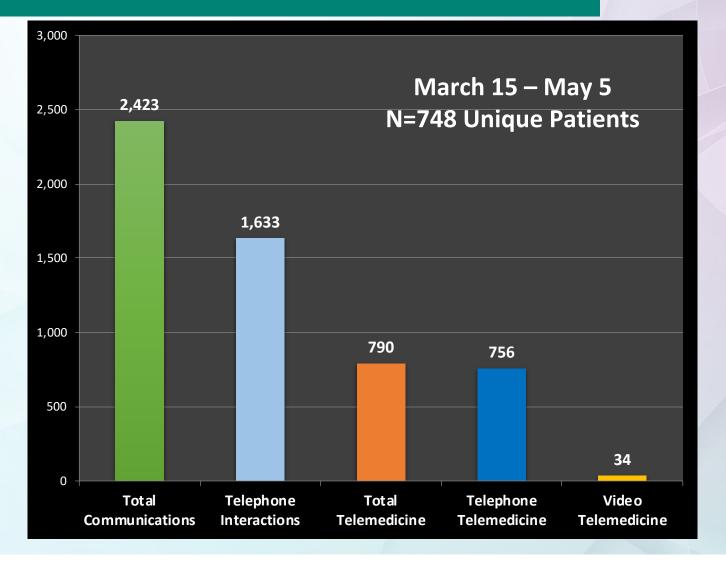


—Medical Face-to-face (excl. Labs)

— Tele-Health Visits - Medical

—TeleHealth Video Visits

HIV Primary Care Telemedicine Encounters







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Care Modifications



- No or very limited lab capacity
- Lack of PPE & need to preserve PPE
- Providers/staff not available → pulled into inpatient/ED care







Patient-Provider Interactions

- What are more effective ways to have a virtual encounter?
- Research needed on virtual patient-provider communication
- Can aides/support personal overcome digital literacy barriers?
- Privacy concerns, may increase vulnerability of patients
- Bias in encounters due to assumptions made by providers
 based on what they see or don't see?







Exacerbate disparities?

- Age disparities?
- Digital Literacy?
- Access issues (data plans + compatible device)
- · Limitations of telephone/audio vs. video
- Who does Telemedicine/Virtual Care help improve care outcomes, and for whom does it worsen?
- What can we do proactively to ensure equity?







New Opportunities

- Overcome some barriers
- Possibly increase timely access
- Lower costs to the system
- Preserve resources for those most at need
- Reorganize care delivery → improve it









No need to reinvent the wheel...



- Learn from LMIC implementation of innovations to support care
 - "ATMs" to dispense medications





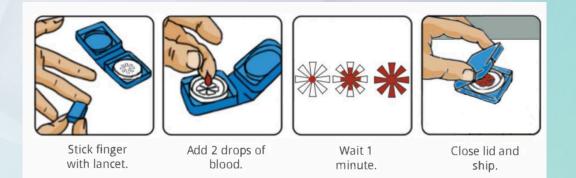




No need to reinvent the wheel...

- Learn from LMIC implementation of innovations to support care
 - "ATMs" to dispense medications
 - Dried Blood Spots for HIV VL monitoring (e.g., Sikombe 2019; Thepbundit 2019, Hirshfield 2018)











Thank You

Our Patients



IAPAC Aaron Pajeras Miguel Vasquez Joseph Deluca Rob Beil Deepika Slawek Matthew Akiyama Bronx Community Health Network

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