



State HIV Allocations in Baltimore

**Baltimore Part A Planning Council
April 19, 2016**

**Maryland Department of Health and Mental Hygiene
Prevention and Health Promotion Administration
Jeffrey Hitt, MEd
Director
Infectious Disease Prevention and Health Services Bureau**



MISSION AND VISION

MISSION

- The mission of the Prevention and Health Promotion Administration is to protect, promote and improve the health and well-being of all Marylanders and their families through provision of public health leadership and through community-based public health efforts in partnership with local health departments, providers, community based organizations, and public and private sector agencies, giving special attention to at-risk and vulnerable populations.

VISION

- The Prevention and Health Promotion Administration envisions a future in which all Marylanders and their families enjoy optimal health and well-being.



PHPA HIV Services Funding

- Health Resources and Services Administration (HRSA)
 - Ryan White Part B
 - AIDS Drug Assistance Program (ADAP)
 - Minority AIDS Initiative (MAI)
- Housing and Urban Development (HUD)
 - Housing Opportunities for People with AIDS (HOPWA)
- State Special Funds



Maryland DHMH Allocations to Baltimore City by Service Category SFY2016

Core	Outpatient/Ambulatory Medical Care	\$1,369,137
	Medical Case Management	\$994,285
	Mental Health Services	\$421,160
	Substance Abuse	\$191,206
	Oral Health Care	\$859,900
	<i>Subtotal</i>	<i>\$3,835,688</i>
Support	Non-Medical Case Management	\$1,307,873
	Psychosocial	\$409,033
	Treatment Adherence Counseling	\$1,417,880
	Outreach	\$820,742
	<i>Subtotal</i>	<i>\$3,955,528</i>
Baltimore City Total		\$7,791,216



DHMH Allocations to Baltimore EMA Surrounding Counties by Service Category SFY2016

Core	Outpatient/ Ambulatory Medical Care	\$0
	Medical Case Management	\$1,092,107
	Mental Health Services	\$0
	Substance Abuse	\$0
	Oral Health Care	\$0
	Medical Nutrition Therapy	\$10,800
	<i>Subtotal</i>	<i>\$1,102,907</i>
Support	Housing Services	\$90,744
	Emergency Financial Assistance	\$173,472
	Non-Medical Case Management	\$612,641
	Psychosocial	\$71,046
	<i>Subtotal</i>	<i>\$947,903</i>
Surrounding Counties Total		\$2,050,810



MADAP Expenditures and Utilization, CY2015

BALTIMORE EMA					
County	Enrolled Clients [over course of year]	Pharmacy Drug Claims \$	Pharmacy Clients	Insurance Premium \$	MADAP Plus Clients
Anne Arundel	326	\$1,328,265	265	\$412,974	115
Baltimore	798	\$3,418,337	668	\$878,924	246
Baltimore City	2,851	\$9,428,735	2,203	\$2,265,932	668
Carroll	30	\$209,803	30	\$30,537	9
Harford	140	\$527,649	116	\$176,668	52
Howard	157	\$751,660	130	\$197,652	54
Queen Annes	9	\$21,406	9	\$21,137	4
Total	4,311	\$15,685,855	3,421	\$3,983,824	1,148



PHPA HIV Prevention Funding

- Centers for Disease Control & Prevention (CDC)
 - HIV Prevention Cooperative Agreement
 - STI Prevention Cooperative Agreement
 - Partnerships for Care*
- Substance Abuse & Mental Health Services Administration (SAMHSA)
 - Portion of CSAT Block Grant awarded to BHA
- State General Funds

*Parallel funding from HRSA's Bureau of Primary Health Care to three FQHCs in Baltimore City.



PHPA HIV Prevention Funding for Direct Services in the Baltimore EMA

HIV Prevention Service/Program	Approx Amt
HIV Testing and Linkage to Care	\$500,000
HIV/STI Partner Services	\$410,000
Partnerships for Care	\$150,000
Sexual Health Integration Initiative	\$435,000
Needle Exchange	\$290,000
Total	\$1,785,000



PHPA-Supported HIV Testing in the Baltimore EMA – CY2015

Jurisdiction	# of HIV Tests	# of Newly-Diagnosed PLWH
Anne Arundel County	793	3
Baltimore County	3,877	7
Carroll County	932	1
Harford County	652	3
Howard County	772	4
Queen Anne's County	69	0
DPSCS Facilities	8,849	20
EMA Total	15,944	38



Maryland HIV Plan Strategies and Priorities

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Vision from National HIV/AIDS Strategy

The United States will become a place where **new HIV infections are rare** and when they do occur, **every person** regardless of age, gender, race/ethnicity, sexual orientation, gender identity or socio-economic circumstance, **will have unfettered access to** high quality, life-extending **care**, free from stigma and discrimination.

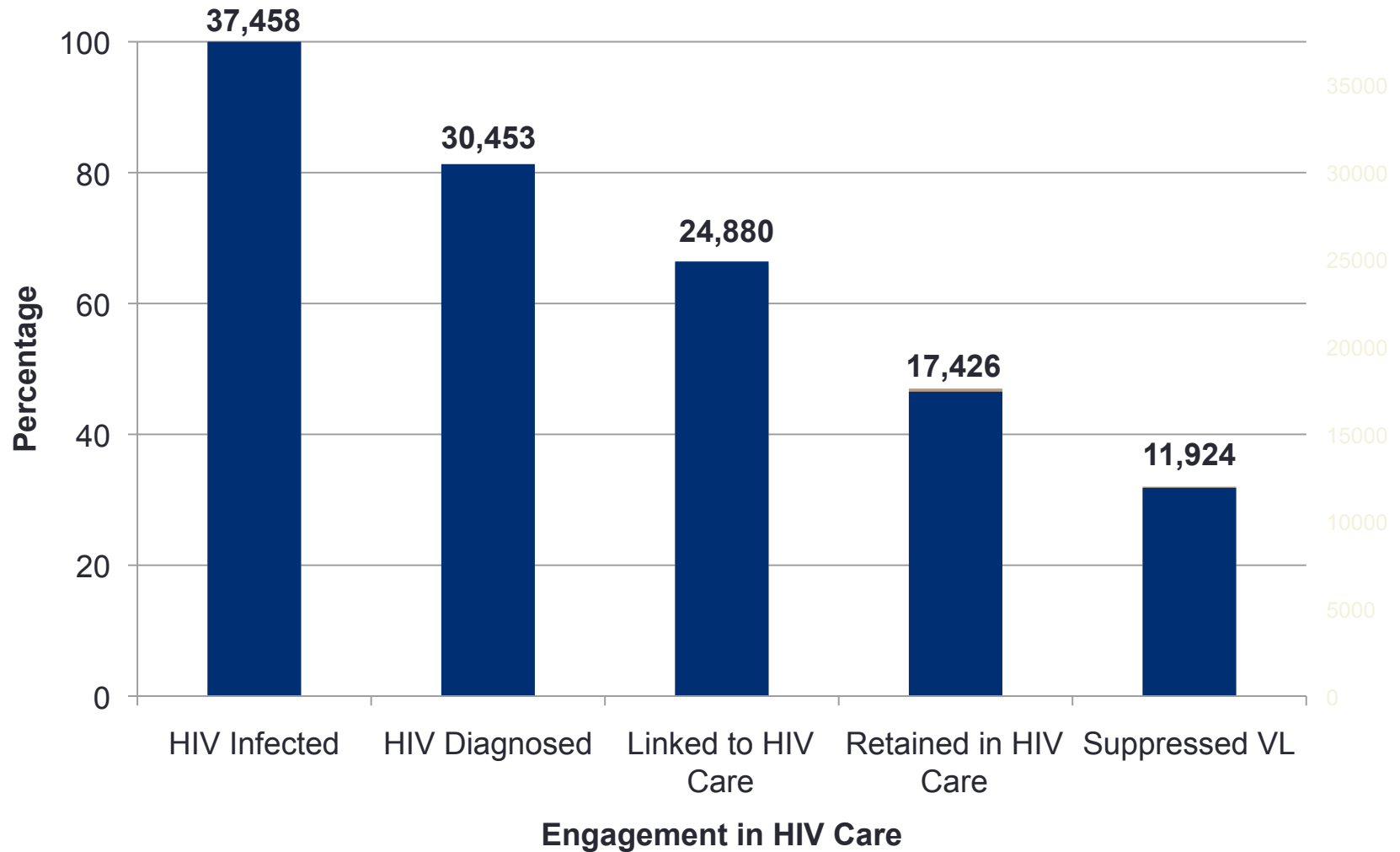


National Strategy Goals

1. Reduce New Infections
2. Increase Access to Care and Improve Health Outcomes for People Living with HIV
3. Reduce Disparities and Inequities
4. Achieve a More Coordinated Response

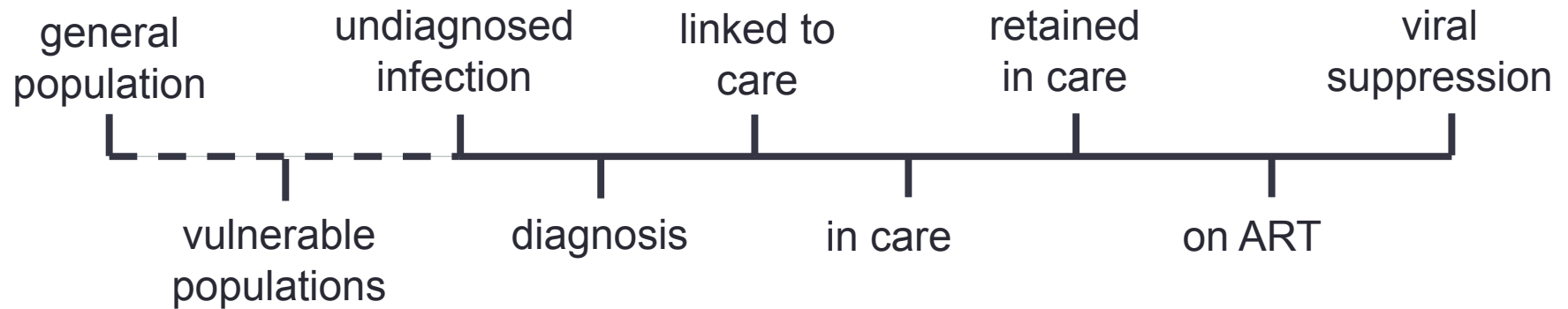


Maryland Continuum of Care, 2014





Expanded Continuum

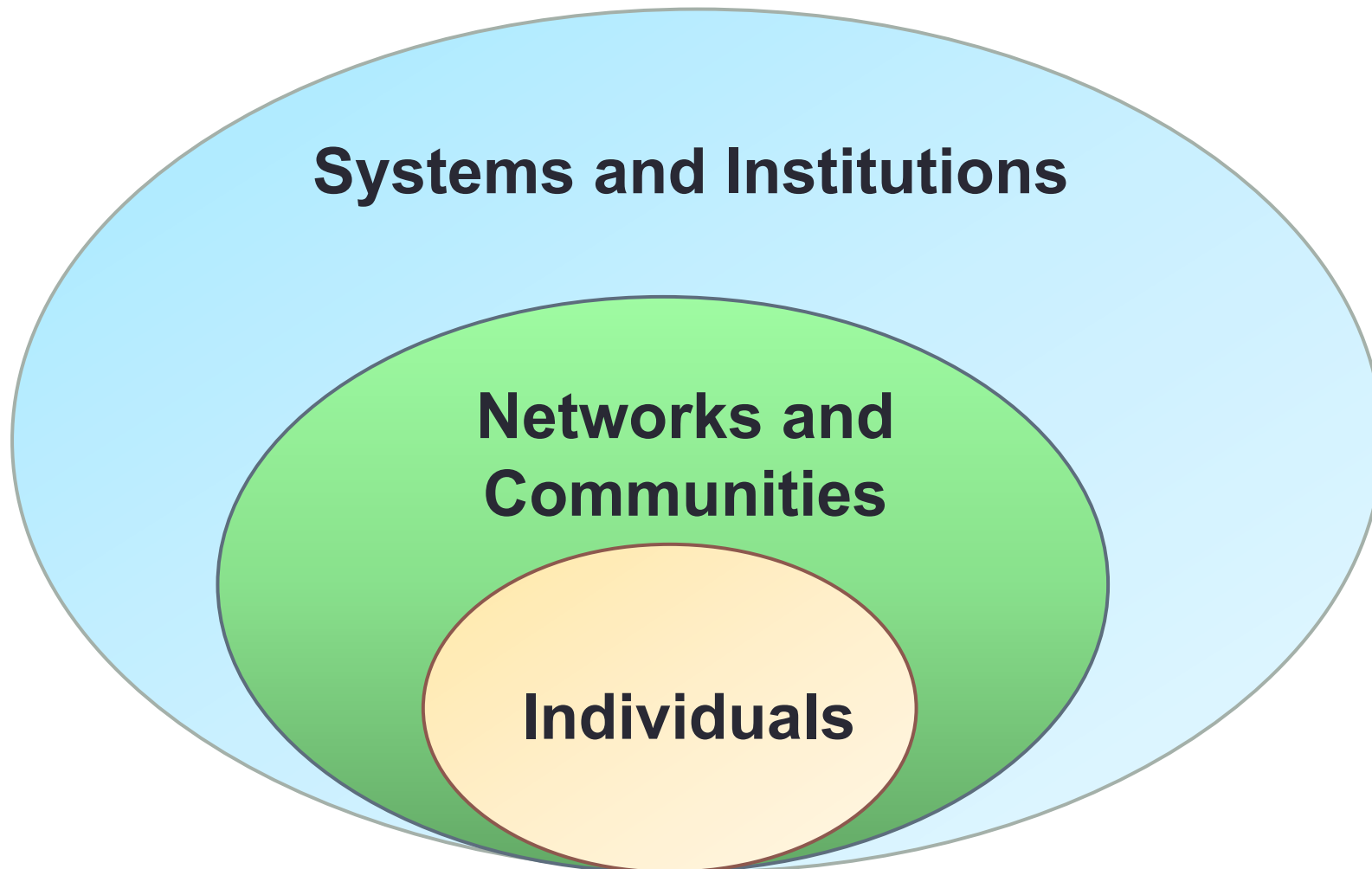




Comprehensive Coordinated Response

- Speak to set of needed activities beyond just health department actions
- Identify and involve a broad set of people and organizations in HIV response
- Coordinate planning and implementation across jurisdictions and funders
- Focus on creating stronger connections between programming at the local level

Socio-Ecological Model





Plan Values

- Harm Reduction
- Health Equity
- Self-Determination
- Sexual Health Promotion

Plan Characteristics

- Comprehensive
- Multi-sectoral
- Focus on systems and environments
- Multi-jurisdictional



Plan Framework

General Population	Vulnerable Populations	Full Diagnosis of HIV Infection	Care Engagement	Viral Suppression
<p>Educate all Marylanders to heighten HIV awareness and reduce stigma.</p>	<p>Protect individuals and communities at highest risk for HIV infection in Maryland.</p>	<p>Diagnose all Marylanders living with HIV who are unaware of their HIV status.</p>	<p>Engage all Marylanders living with HIV in high quality HIV care.</p>	<p>Achieve viral suppression for all Marylanders living with HIV.</p>



General Population



Community Mobilization (35)

Marketing for General Awareness (25)

Educate Health and Social Services Professionals (24)

Coordinated Eligibility and Referral (7)



Vulnerable Populations

Biomedical Interventions: (PrEP and nPEP) (38)

Behavioral Risk Reduction Interventions (26)

HIV-informed Systems Integration (20)

Condom Distribution and Promotion (14)

Comprehensive Syringe Exchange Programs (9)



Full Diagnosis

Routine HIV Testing (35)

HIV/STI Partner Services (24)

Targeted HIV Testing (19)

Marketing to Promote Testing (10)



Care Engagement

Linkage to Care/Data to Care (38)

Expanded HIV Provider Network (27)

Care Coordination (21)

Utilization of Peer Support Networks (17)

Culturally Competent Workforce (15)

Health Literacy (12)



Viral Suppression

Health Literacy and Medication Adherence (31)

Comprehensive Care (26)

Client Education and Empowerment (19)

Insurance (18)



Tier 1

Linkage to Care/Data to Care (38)

Biomedical Interventions: (PrEP and nPEP) (38)

Routine HIV Testing (35)

Community Mobilization (35)

Health Literacy and Medication Adherence (31)



Tier 2

Expanded HIV Provider Network (27)

Comprehensive Care (26)

Behavioral Risk Reduction Interventions (26)

Marketing for General Awareness (25)

HIV/STI Partner Services (24)

Educate Health and Social Services Professionals (24)

Care Coordination (21)

HIV-informed Systems Integration (20)



Tier 3

Targeted HIV Testing (19)

Client Education and Empowerment (19)

Insurance (18)

Utilization of Peer Support Networks (17)

Culturally Competent Workforce (15)

Health Literacy (12)

Marketing to Promote Testing (10)

Comprehensive Syringe Exchange Programs (9)

Coordinated Eligibility and Referral (7)



Thank you

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Thanks to staff: Peter DeMartino, Mary Bahr, Lilly Cubano, Kip Castner, Jenna McCall, Hope Cassidy-Stewart



Prevention and Health Promotion Administration

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