HIV Care and Treatment Service Utilization Data

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Presentation Overview

- What are service utilization data?
- How data are collected
- How data are analyzed and reported
- What are the uses of these data?
- What are the limitations of the data?
- Summary of YR 19 (FY 2009) Service Utilization Data





What Are Service Utilization Data?

They are information about:

- Services funded by OAPP
- Services provided by OAPPcontracted care providers



Services used by PLWH in OAPP-funded system of care



What Are Service Utilization Data?

They can tell you:

- What services are funded with what level of investment
- Who is served in the system of care
- Who accesses what services; where; how frequently





What Are Service Utilization Data?

Combined with other information, they can tell you:

- Level of compliance in terms of SOC, contract requirement, and performance measures
- Whether services are meeting the needs
- Whether services are improving health outcomes





Service Utilization Data Collection

Providers:

- Document client info and service encounters
- Report client and service info
 - Directly enter data in Casewatch
 - Transfer data to Casewatch from their own health IT systems
 - Via monthly reports to OAPP





Service Utilization Data Collection

OAPP:

- Unduplicate records based on client unique record number (URN)
- Request missing data
- Clean and validate data
- SAS analyses of data extractions







Service Utilization Reporting

- Mandated reporting to funders
 - HRSA HIV/AIDS Bureau
 - Ryan White client data reporting (RDR; RSR)
 - Conditions of Awards
 - State Office of AIDS
 - Ryan White client data reporting
 - Contract requirements





Service Utilization Reporting

- Local reporting for planning
 - Annual service utilization report
 - March each year
 - http://www.lapublichealth.org/aids



- Year-end service utilization
- Ongoing service utilization for specific service categories
- OAPP planning and allocations
- Other community planning activities





Service Utilization Data Flow



data entry in EMR



client encounters



data entry in Casewatch



data dump/transfer to Casewatch



data in Casewatch

Casewatch (ACMS)



report data to funders



data cleaning validation analysis



OAPP



data extraction

planning allocation performance measure



Commission, OAPP, Others









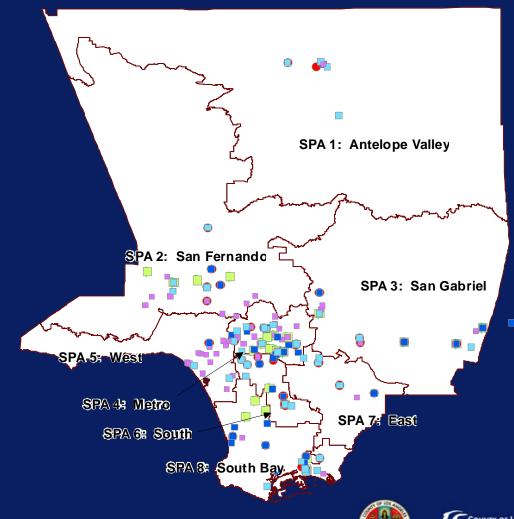
- Mapping client distribution in relation to service sites
- Detect gaps in services
- Project trends and service needs
- Assess unmet need (not in care)
- Improve services

Example: Care Service Delivery Sites, 2008

Legend

Ryan White Care Sites

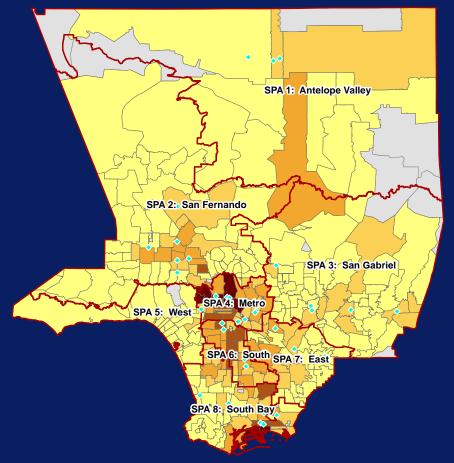
- Case Management Services
- Housing Services
- Medical Case Management
- Medical Nutritional Therapy
- Mental Health Services
- Outpatient/ambulatory Med Svcs
- Treatment Adherence Services
- SPA



Source: Casewatch, 2008,



Example: Distribution of Clients by Resident Zip-code in Relation to OAPP Medical Outpatient Sites



Source: Casewatch YR 19 (March. '09 – Feb. '10): Limited to Zip-Codes w/ > 10 RW clients.

Legend

- Medical Outpatient Sites
- < 11 RW Clients</p>

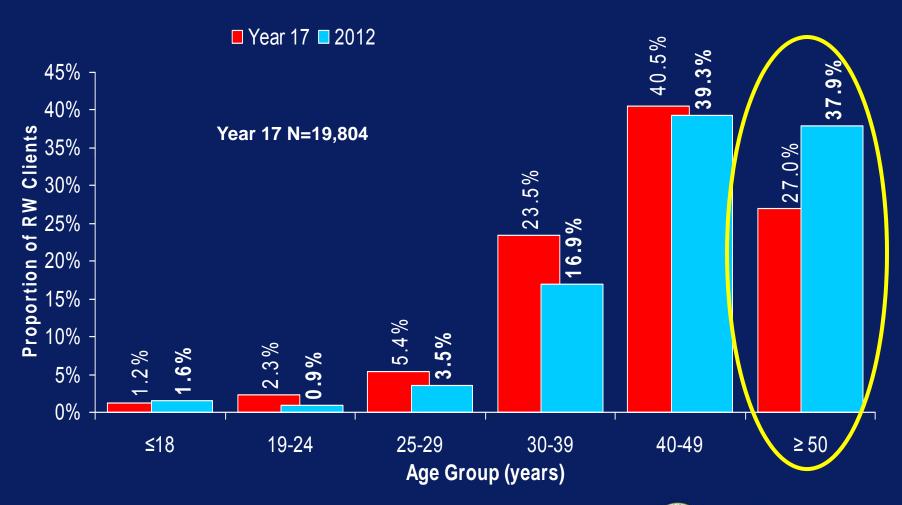
of RW Clients

- <= 35
- 36-80
- 81-140
- 141-270
- > 270





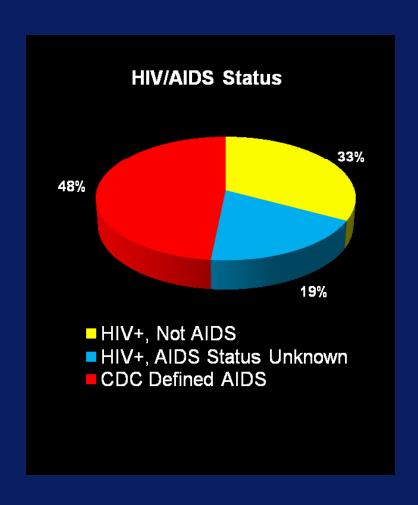
Example: Projected LAC Clients ≥ 50 years in 2012

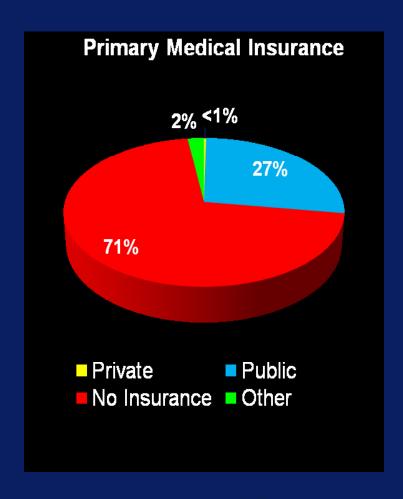






Example: Transitional Case Management Client Profile



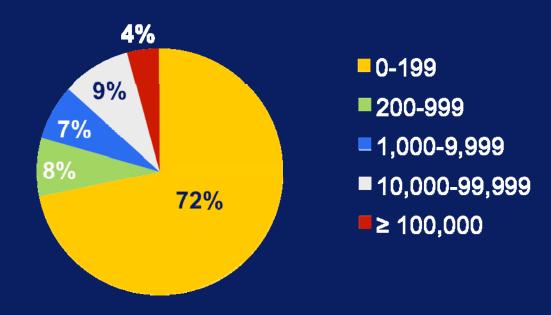






Example: HIV-1 Viral loads among RW Clients

- 14,875 RW clients database had 1 or more medical outpatient (MOP) visit in YR 19.
 - Of that, 12,725 (\sim 86%) had at least one viral load test during that year. **N** = **12,725**



Source: Casewatch YR 19 (March . '09 – Feb. '10): Data limited to RW Client w/ 1 or more MOP visit





Year 19 Service Utilization Data

Total clients	18,545
Clients who had at least one medical visit	14,875 (80%)



Year 19 Service Utilization Data

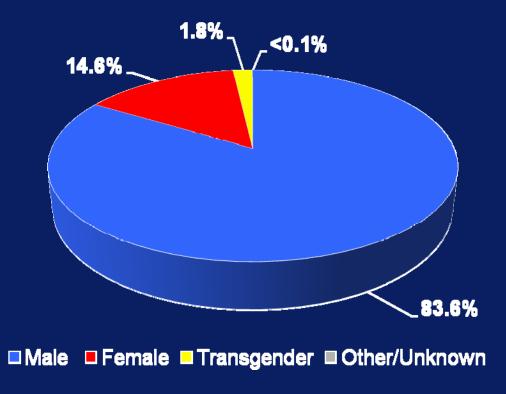
Service Category	No. Clients Served	% Clients Served
Medical Outpatient	14,875	80%
Psychosocial Case Management	4,180	23%
Oral Health Care	2,967	16%
Nutrition Support	2,576	14%
Mental Health Psychotherapy	2,345	13%
Medical Case Management	2,093	11%
Mental Health Psychiatry	1,917	10%





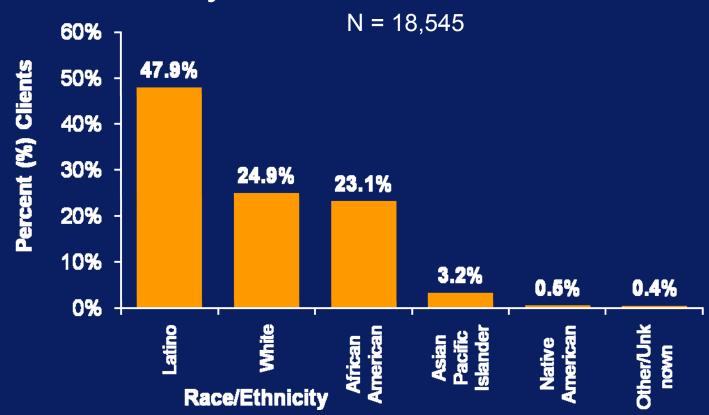
Gender

N = 18,545



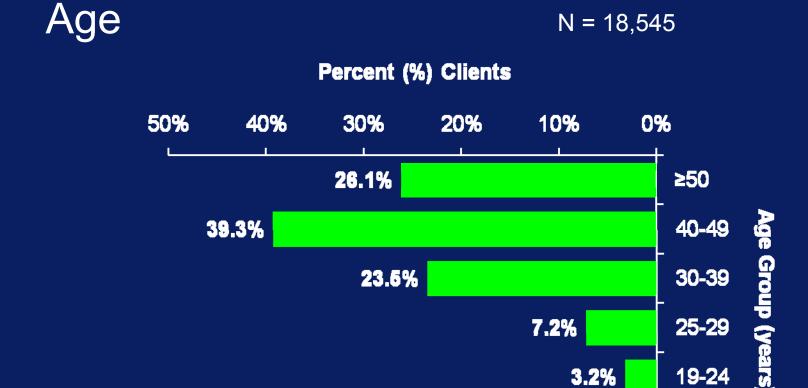


Race/Ethnicity













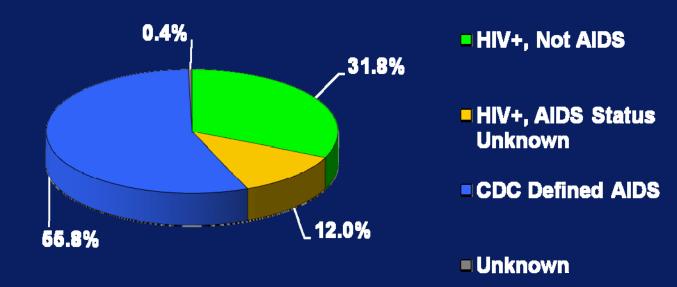
≤18

0.8%



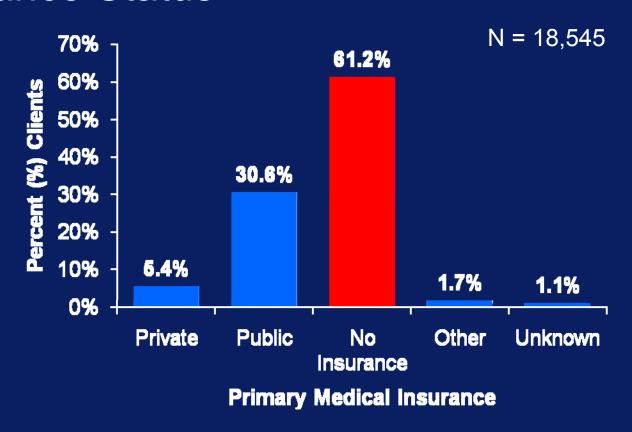
HIV/AIDS Status

N = 18,545





Insurance Status

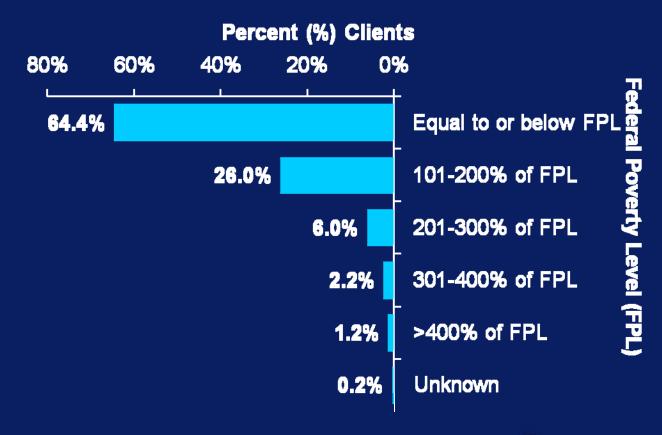






Income Level

N = 18,545

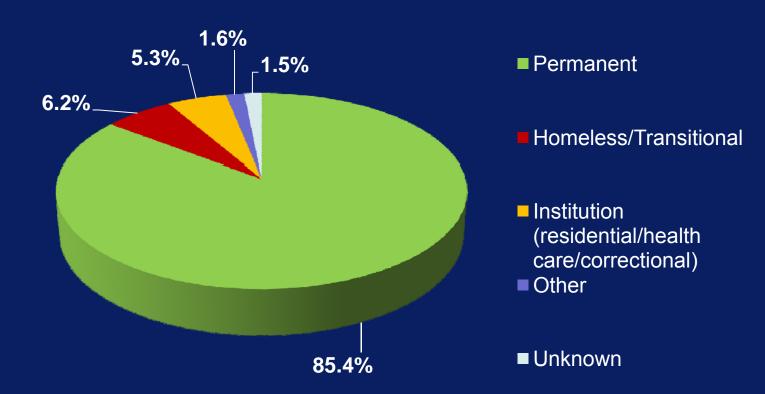






Housing/Living Situation

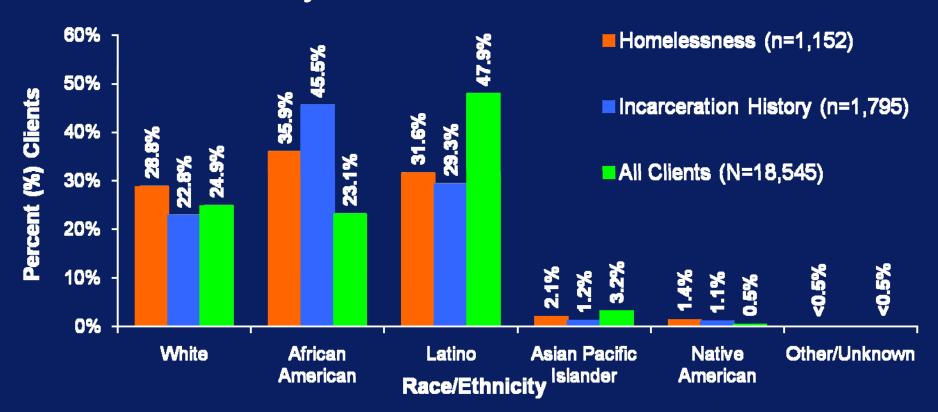
N = 18,545







Homeless, Incarcerated and All Clients by Race/Ethnicity

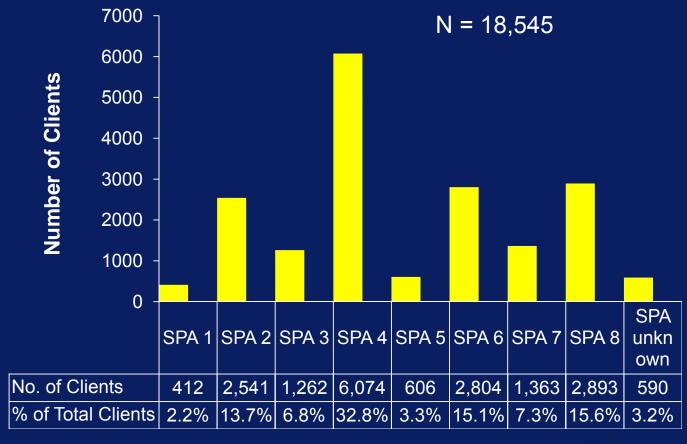






Year 19 Data - Client Distribution

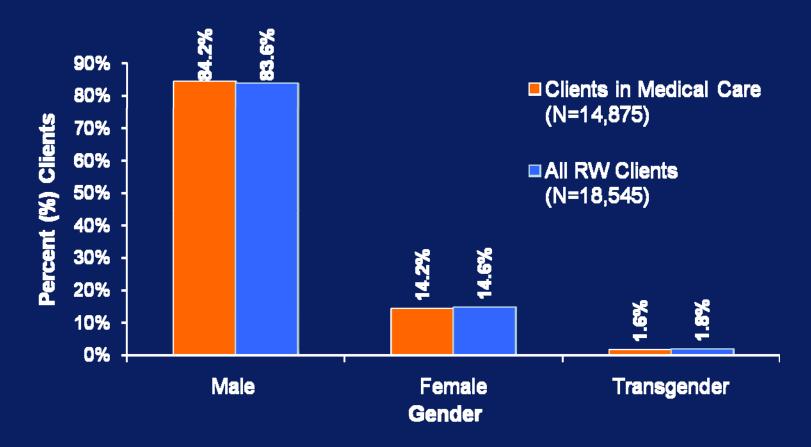
Client Distribution by Residence SPA







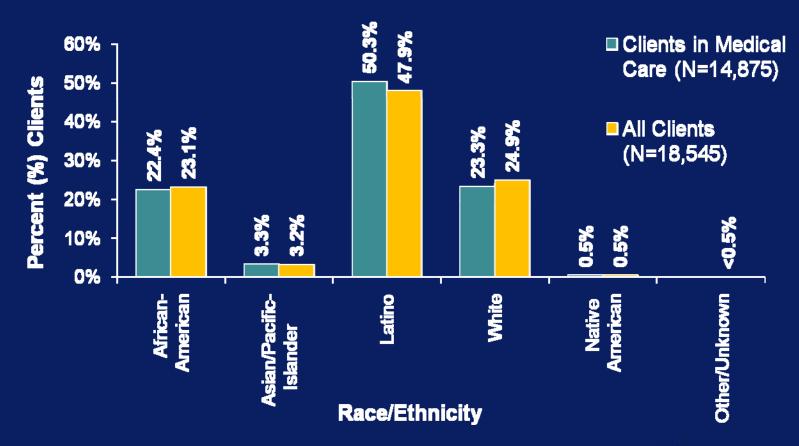
Gender – compared with all clients







Race/Ethnicity – compared with all clients

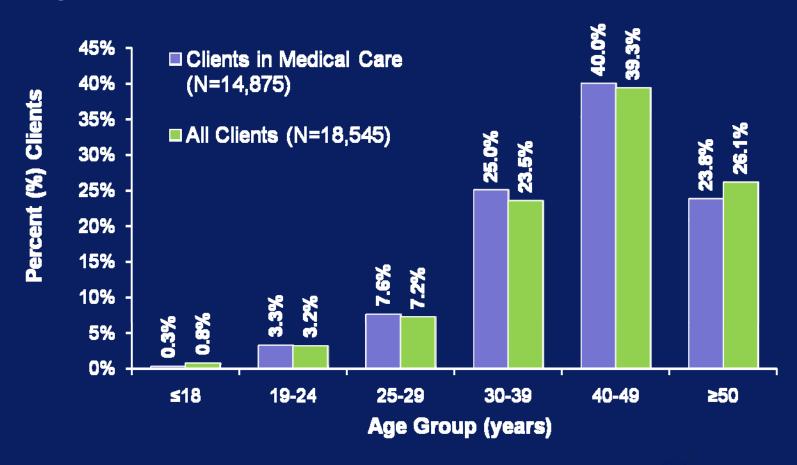








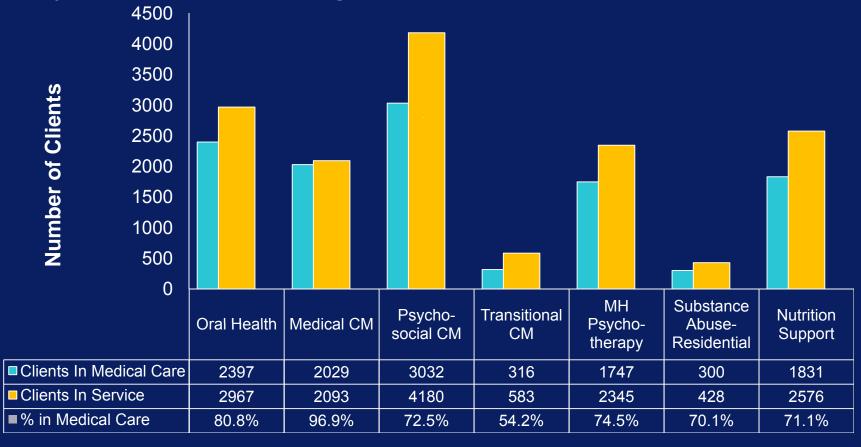
Age Group – compared with all clients







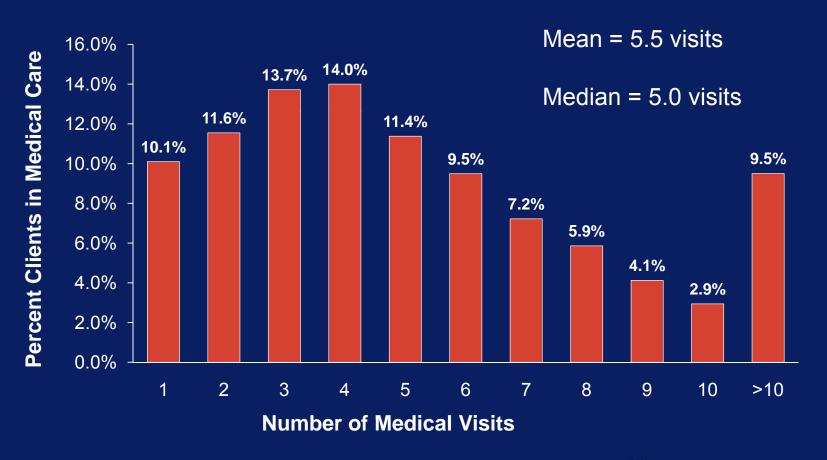
Key Service Categories







Frequency of Medical Visits









Service Utilization Data Limitations

- Represent service utilization at a specific point in time (date of data extraction)
 - Delay in data reporting may not include all service activities that occurred
- Clients served and services delivered should be considered in the context of financial investment/expenditures
 - by OAPP
 - Outside of system (e.g., elimination of Dental-Cal)

Service Utilization Data Limitations

- Accuracy and completeness of data rely heavily on service providers data input
- Service units mean different things for different service categories
- Important clinical data via data transfer are still missing
- Lack a good way to identify clients who exit the care system



Questions?





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