SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
HIV Funding Overview:
HIV Health Services (HHS)
Community Health Equity and
Promotion (CHEP)

Health Commission
June 21, 2022

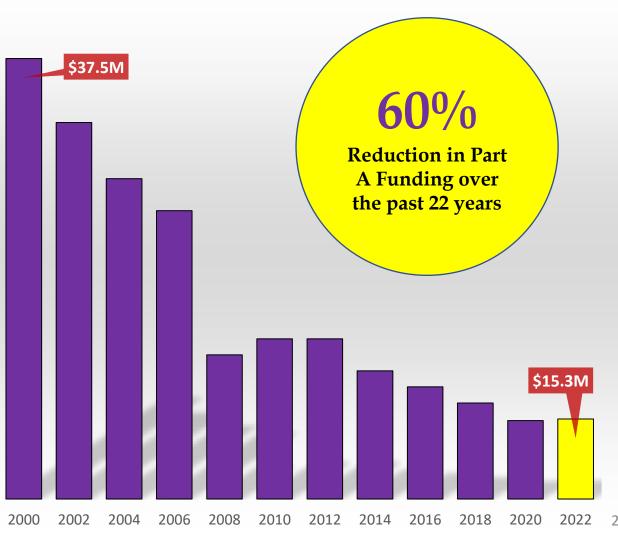
Bill Blum, HHS Director Tracey Packer, CHEP Director Nyisha Underwood, Equity and Quality Improvement, CHEP



How much federal HIV care funding does San Francisco DPH HIV Health Services (HHS) receive? And has this changed?

Federal Funding: \$17,003,836 **State Funding: \$3,348,921** San Francisco General Fund: \$22,034,987 HHS Funding – 2021 San Francisco General Fund Ryan White Part A (2022-23 Award) \$37.5M Ryan White Part B (California SOA) Ryan White Part B Supplemental (California SOA) Ryan White Part C San Francisco Getting To Zero Ryan White Ending the HIV Epidemic \$328,347\_\$1,682,777 \_\$1,677,000 \$353,620 \$2,895,301 \$22,034,987

\$15,202,479



**Total HHS Funding: \$42,287,744** 

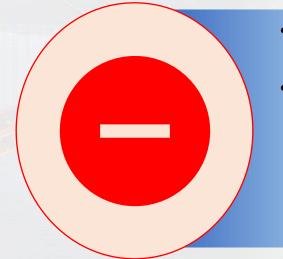
### What changes in HIV care funding have occurred?



No reductions in funding to the DPH HIV Health Services programs since 2010

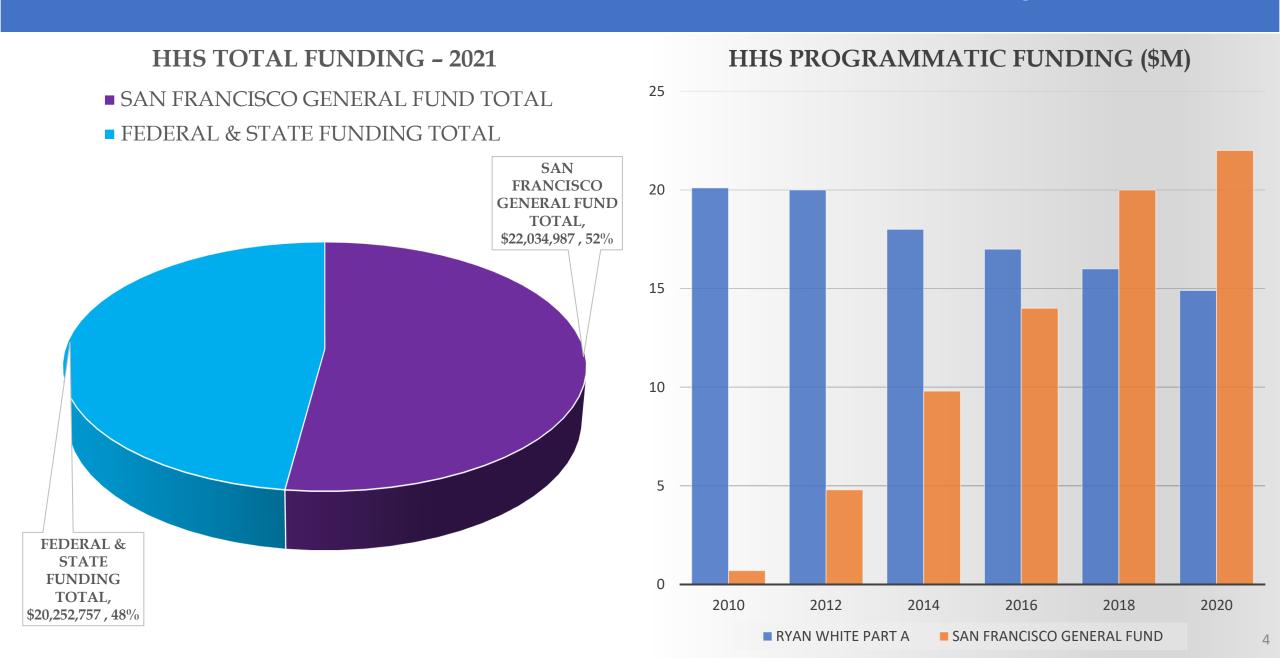


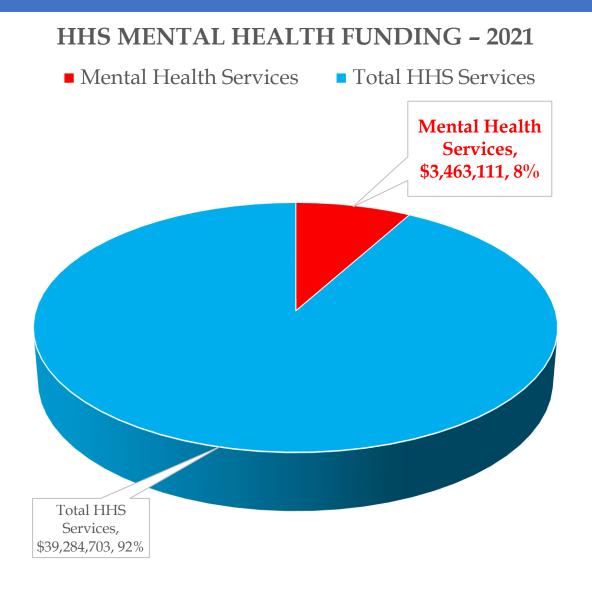
- HRSA Ending The HIV Epidemic
- San Francisco General Fund Getting to Zero
- San Francisco Board of Supervisors
   Backfill of grant reductions and Addback
   for new funding for behavioral health for
   long term survivors



- 60% of HRSA Ryan White Part A funding in 20 years
- \$9.1M reduction in 2007 resulting in elimination of service categories:
  - Adult day health care; complimentary therapies; congregate meals; transportation; HIV detox; companion services; child care

## How much San Francisco General Fund is used to supplement or expand federal-funded programs for HIV care?

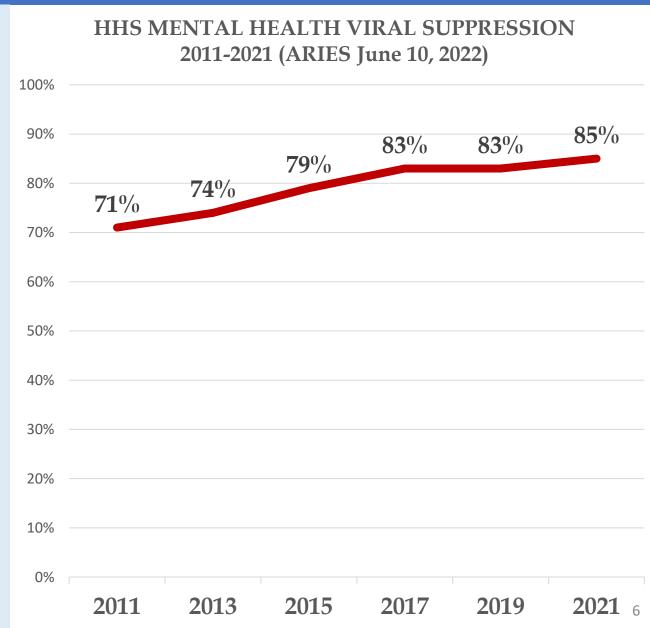




- Local SF General Funds for HHS were increased by \$200,000 for Mental Health & Psychosocial Services for Long-term Survivors. This is an increase of 40% in addition to the \$500,000 in funding initially awarded by the Board of Supervisors for these services in FY-2018-19.
- When this funding for Long-Term Survivors
  was first made available in FY-2018-19 it was
  awarded by HHS to the five Community-Based
  Organizations (non-DPH programs) providing
  Mental Health and/or Psychosocial Services
  and added to existing contracts for these
  purposes. Funding amounts were determined
  by reviewing total clients served at each
  program and awarding the funding
  proportionally based on that data to allow all
  five programs to scale up services.

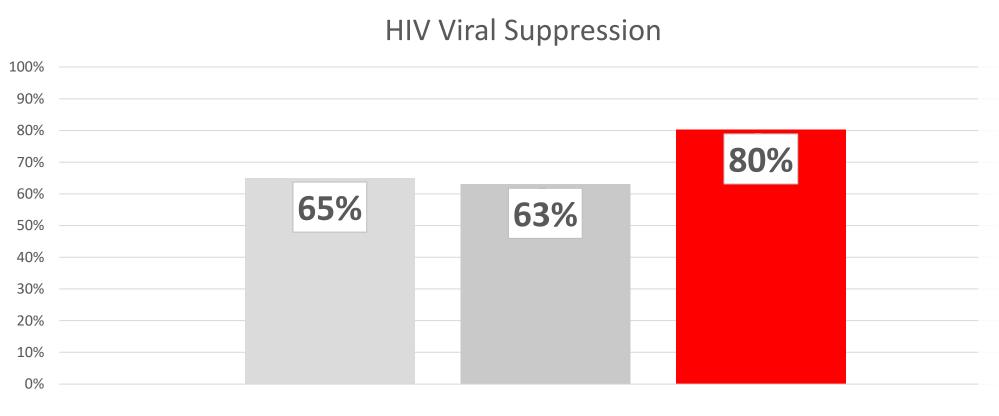
23% (N = 1,004) of all HHS clients accessed MENTAL HEALTH services in 2021; of those 85% (N = 852) were virally suppressed

- Increased funding for these services in FY-2021-22 were added to these same programs, increasing the funding for these services by 40%.
- Additionally, SF General Funds in the amount of \$350,000 was made available to HHS for providing CODB (Cost of Doing Business) increases for our grant funded programs (non DPH). This resulted in an increase of approximately 3.2% for these programs. Adjustments were made with existing allocations so that the increased CODB funding would be provided in the same funding source (Ryan White Part A, B or C).



### How are we meeting the challenges of HIV treatment for SFDPH patients?

Source: HRSA Surveillance Reports\*; California State Office of AIDS Surveillance Reports\*\*; ARIES Data System (4/28/2022)\*\*\*



2020

- Viral Suppression USA\*
- Viral Suppression California\*\*
- Viral Suppression receiving primary medical care funded by HHS\*\*\*

## Demographics changes of who is living with HIV/AIDS in San Francisco receiving funding through DPH

Source: ARIES Data System (4/28/2022)



SFDPH HHS provided services to 4,368 individual clients and primary medical care services to 3,231 clients in 2022



OVER THE
AGE OF 65

7.8%2010

19.8%

**CIS & TRANS WOMEN** 

> 14.2% 2010

**15.2**% 2022

**IDENTIFY AS** A PERSON OF **COLOR** 

> 48.7% 2010

54.1%

2022

24.3% 2022

NO STABLE/

**PERMANENT** 

HOUSING

20.4%

2010

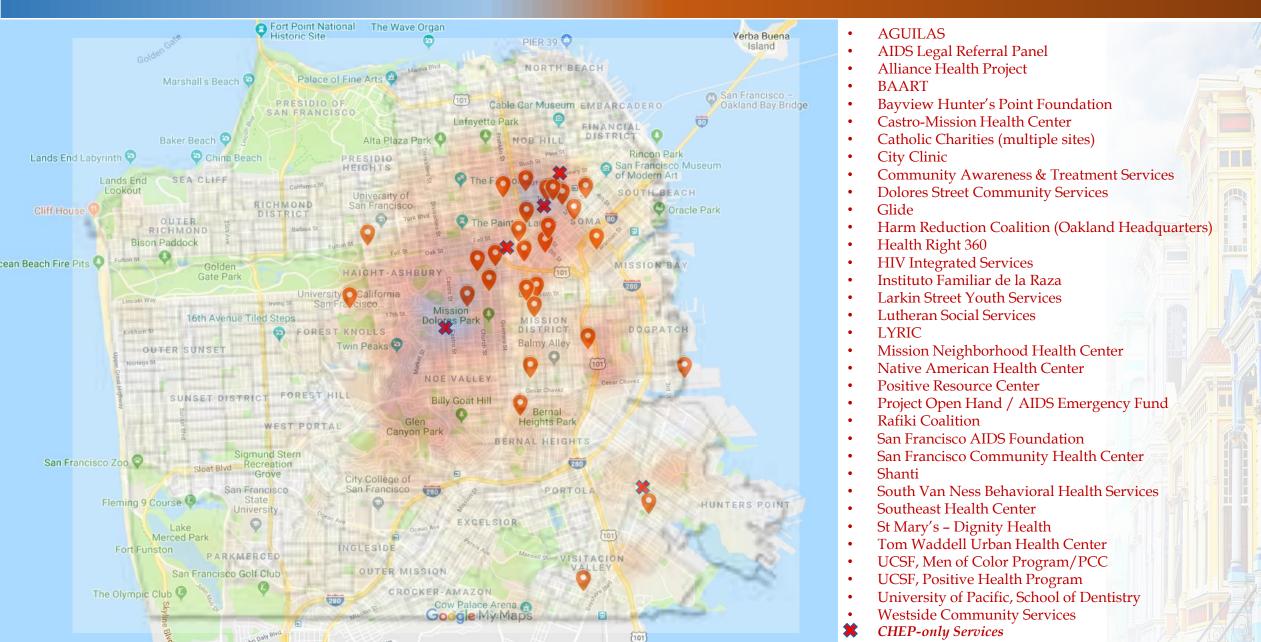
**POVERTY LEVEL <200%** of FPL

82.9% 2010

85.9% 2022

2022

## Is our strategy meeting the needs of changing demographics? Map of DPH funded HIV Service Providers - Meeting clients where they reside

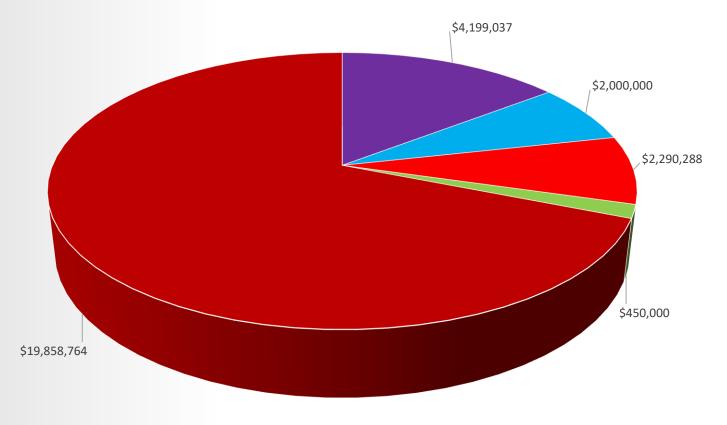


### How much federal funding does San Francisco receive?

Federal Funding: \$8,939,325 San Francisco General Fund: \$19,858,764 **Total HIV Prevention Funding: \$28,798,089** 

### **CHEP HIV Prevention Funding - 2021**

- CDC Core Funding (Comp A) CDC Demonstration (Comp B)
- CDC Ending the Epidemic Comp A CDC Ending the Epidemic Comp C
- SF General Fund



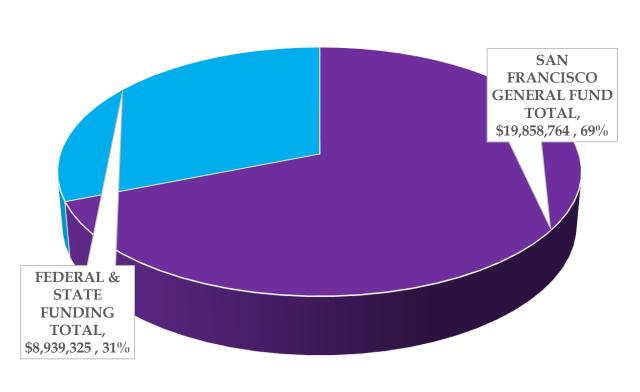


## How much San Francisco General Fund is used to supplement or expand federal-funded programs?

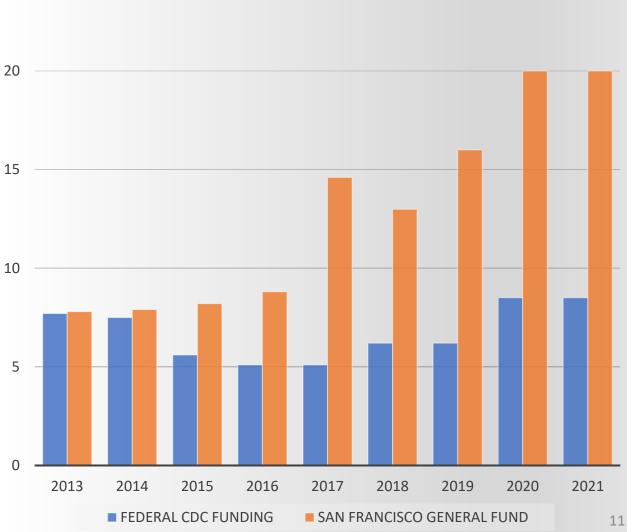
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#### **CHEP TOTAL FUNDING - 2021**

- SAN FRANCISCO GENERAL FUND TOTAL
- FEDERAL & STATE FUNDING TOTAL



#### CHEP HIV PREVENTION FUNDING (\$M)



### What has changed due to prevention funding shifts and treatment and prevention advances?



## **Impact of Changes**

- Improved HCV and HIV treatment, testing, U=U, PrEP
- Opportunities for integration of HCV/STI, and overdose prevention
- Improved health outcomes
- Persistent inequities
- Need for intensive efforts towards "high acuity" populations to test, link, and maintain in care
- Workforce

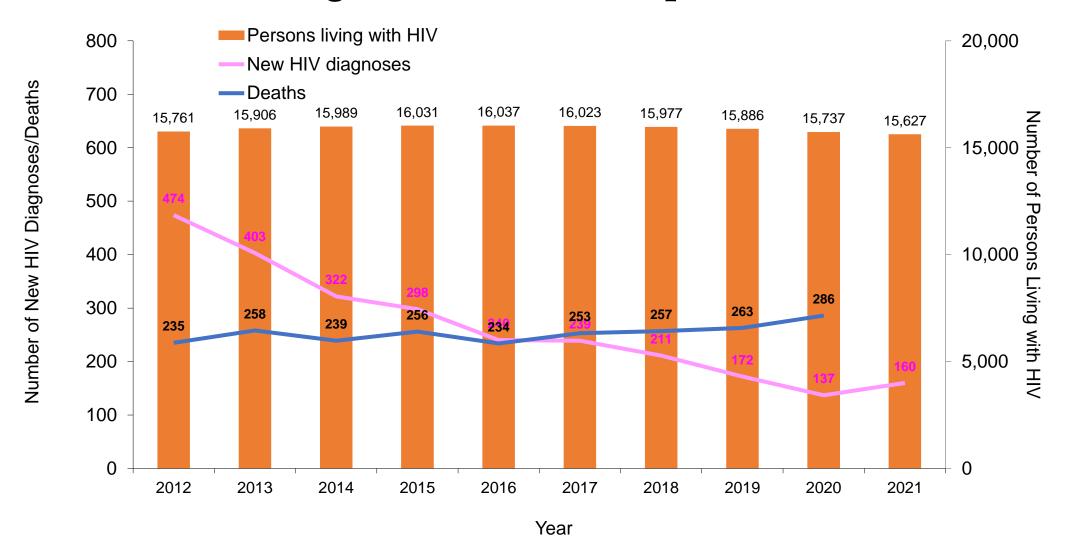


- Ending The Epidemics Funding
- CDC Comp B (OPT IN)
- San Francisco General Fund Getting to Zero
- San Francisco Board of Supervisors Backfill
- Mayor's Office HIV Investment

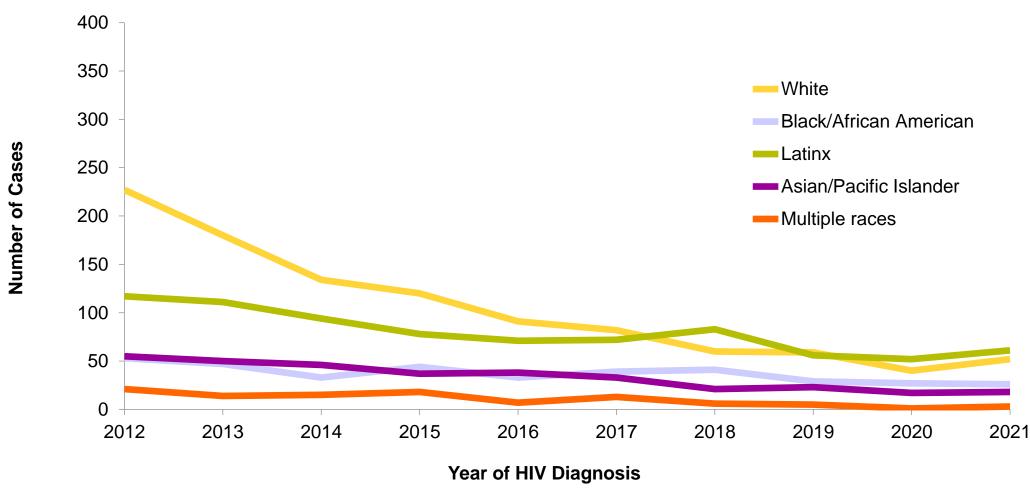


Prevention funding in 2012 due to changes in formula

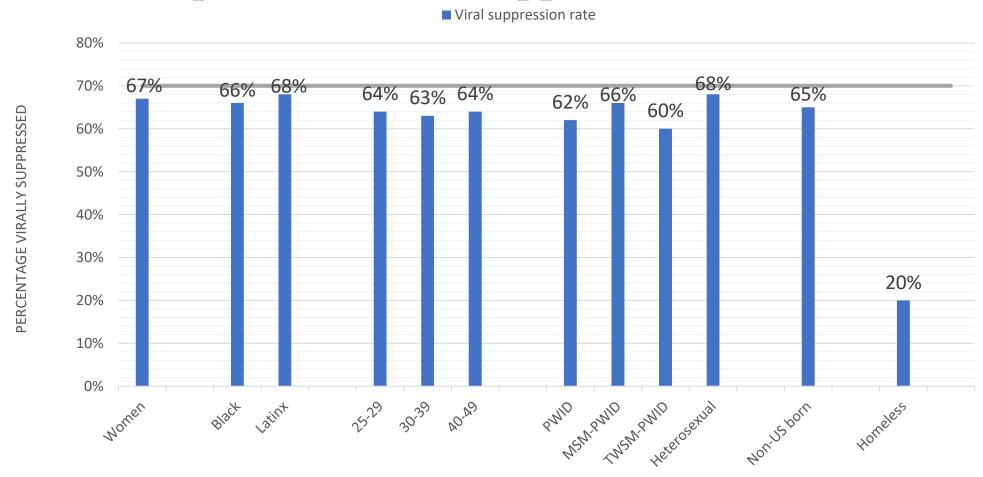
## New SF HIV diagnoses, deaths, and prevalence, 2012-2021



## Diagnosis Trends by Race/ethnicity, 2012-2021



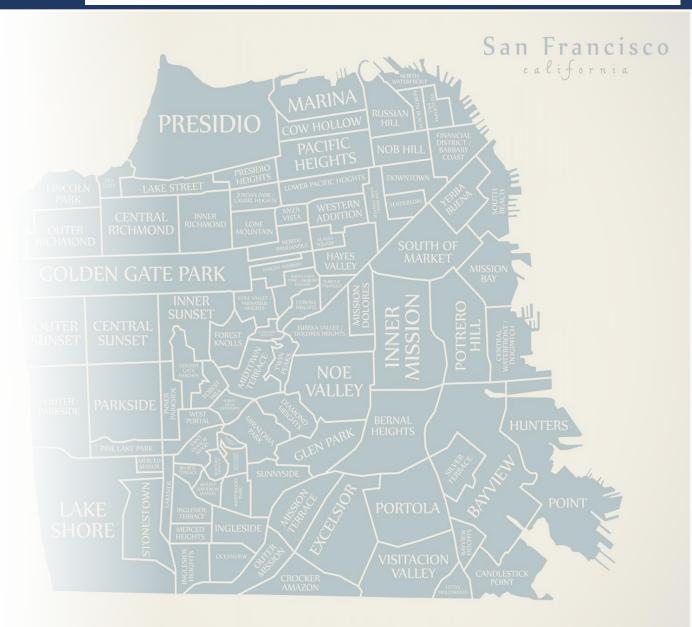
## Disparities in Viral Suppression – PLWHA 2020





## RFP 4-2019

An Equity Focused,
Community Centered, Whole
Person Care Approach to
Integrated HIV, HCV, and STD
Prevention Programs for
Affected Communities



## Goal & Focus of RFP 4-2019

To ensure that all San Franciscans have equitable access to high quality prevention, care, and treatment services to attain optimal health in HIV, STI, and HCV wellness.

To be intentional about addressing equity by focusing on populations where the greatest disparities result in disproportionate levels of HIV, HCV, and STI.

Inclusion of disparities as criteria for funding allocation

Alignment with the HIV, HCV, STD Roadmap Stakeholder Engagement guiding principles, as well as national and SFDPH priorities



**Feb – Sept 2018** 

**Aug – Sept 2018** 

**Sept – Oct 2018** 

Oct - Aug 2019

#### **ESTIMATED TIMELINE**

RFP September 2019 New services <del>July 2020</del> January 2023

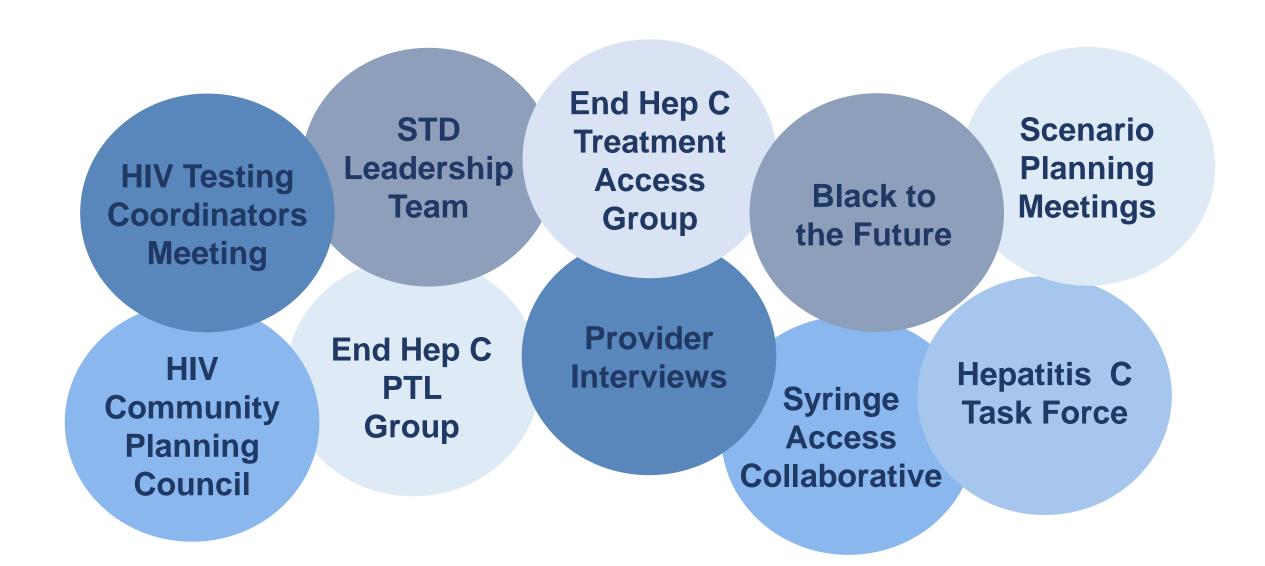
Stakeholder Input

DPH Analyzes
Input,
Develops
Strategy

Stakeholder Feedback on Strategy DPH Develops
Operational
Details

Implementation

CHEP RFP Work Group: HIV, HCV, and STD prevention staff



### **Examples of What is Different**



Equity focused, community-centered, whole person care approach (Health Access Point – HAP)



Integration of HCV and STI with HIV



Increased emphasis on harm reduction services



**Enhanced community engagement** 

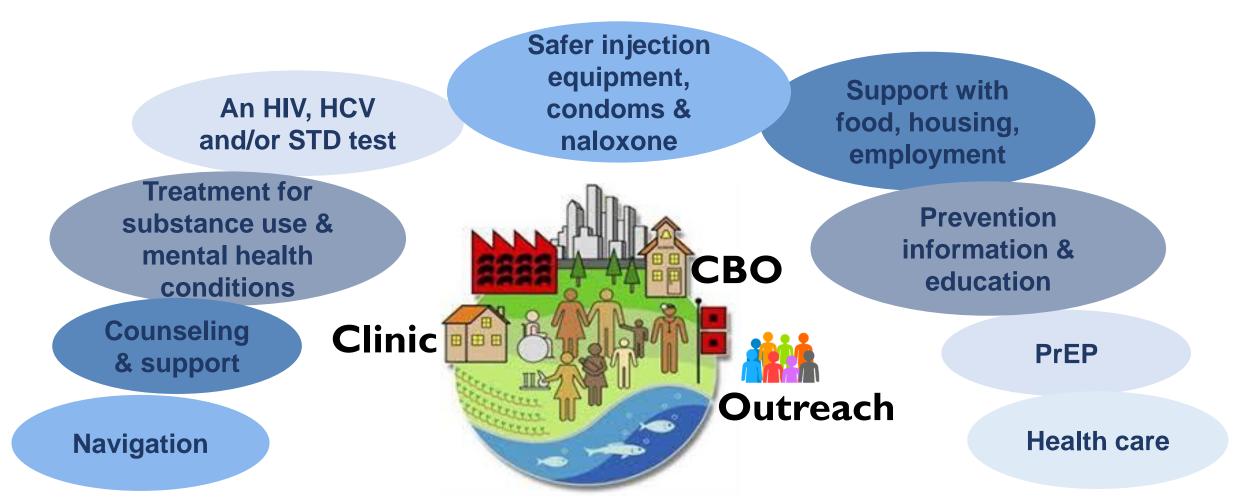


**Collaboration** 



## **Health Access Point (HAP)**

Goal: Reduce disparities by addressing vulnerabilities through focused community investment



## Categories 1 through 7 in the order listed

- + Latinx
- + Trans Women
- People who use drugs, including injecting drugs (PWUD/ID)
- + Gay/Men who have sex with men (MSM)
- + Asian/Pacific Islander (API)
- **+** Young Adults
- + Black/African American (B/AA)

Health Access Points (HAPs) allow people who identify with multiple populations to receive services where they feel most comfortable.

### Category 7: Training and Capacity Building for a Health Access Point for Black/African Americans



## Funds capacity building activities with the goal of implementing a Health Access Point (HAP)

## SFDPH will partner with agency during the first funding year to:

- Conduct an assessment of training and capacity needs.
- Develop a plan to build capacity.
- Receive training/s and capacity building efforts.
- Depending on the needs of the agency, program implementation may not begin immediately in the first funding year and will begin by the second funding year.











## **Health Access Point (HAP) Services**

Integrated HIV, HCV, and STD Testing

Linkage and Navigation

Health
Education and
Counseling

Overdose Prevention

Syringe Access and Disposal

Substance Use and Harm Reduction Services for Opioids, Stimulants, Alcohol, Tobacco, and Cannabis Community
Engagement
and
Mobilization

Condom Distribution

**Basic Needs** 

**Primary Care** 

Mental Health Services Prevention and Treatment
Medication: PrEP and ART for HIV;
HCV Treatment; STD Treatment,
Including Medical Storage

Substance Use Treatment

## **Funded Vendors & Amounts**

**Health Access Point (HAP)** 

**Service Category/Program** 

Cat. 1 – HAP for Latinx	Instituto Familiar de la Raza (IFR)	IFR     El/La Para TransLatinas	\$1,884,570	INSTITUTO FAMILIAR DE LA RAZA, INC.
Cat. 2 – HAP for <b>Trans Women</b>	San Francisco Community Health Center (SFCHC formerly APIWC)	<ul><li>EI/La Para TransLatinas</li><li>IFR</li><li>St. James Infirmary</li><li>SFAF</li></ul>	\$753,828	SAN FRANCISCO COMMUNITY HEALTH CENTER
Cat. 3 – HAP for PWUD/ID	Positive Care Program Ward 86 (PHP)	<ul><li>Glide</li><li>St. James Infirmary</li><li>UC-AHP</li></ul>	\$876,325	University of California San Francisco
Cat. 4 – HAP for Gay/MSM	San Francisco AIDS Foundation (SFAF)	<ul><li>Glide</li><li>SFCHC</li><li>Shanti</li></ul>	\$1,130,742	EN AND SECTION OF THE PROPERTY
Cat. 5 – HAP for Asian/Pacific Islander	UCSF Alliance Health Project (UC-AHP)	• SFCHC	\$621,908	All Designance HAXTH PROJECT OF THE COMMUNITIES STRIKES FOR THE SECTION OF THE COMMUNITIES
Cat. 6 – HAP for <b>Young Adults</b>	Lavender Youth Recreation and Information Center, Inc. (LYRIC)	<ul><li>SFAF</li><li>Huckleberry</li><li>Homeless Youth Alliance (HYA)</li><li>Larkin Street Youth Services</li></ul>	\$471,143	LIRIC CENTER FOR LGBTQQ YOUTH
Cat. 7 – HAP for <b>Black/African American</b> (includes training and capacity building support)	Rafiki Coalition (Programmatic and Capacity Building)	<ul> <li>SFAF</li> <li>Positive Resource Center (PRC)</li> <li>UC-AHP</li> <li>3<sup>rd</sup> Street Youth Center</li> </ul>	\$2,261,484	Rafiki COALITION

**Subcontractors (partner** 

agencies)

• Mission Neighborhood Health Center

**Funding amount** 

Applicant that ranked highest or was only

applicant



- Meeting with each vendor and collaborators
- Negotiate contracts
- Provide ongoing technical assistance and support

# **THANK YOU**



POPULATION HEALTH DIVISION

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTI





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