

John E. Baldacci, Governor

Brenda M. Harvey, Commissioner

# 2008 Data Report

# Medical Case Management Services for People living with HIV/AIDS in Maine

#### Introduction

In 2008, the Ryan White Part B program in Maine funded six community-based organizations to provide medical case management services to people living with HIV/AIDS (PLWHA) statewide. These organizations included: Down East AIDS Network (DEAN); Eastern Maine AIDS Network (EMAN); Frannie Peabody Center (FPC); The Horizon Program (HZN); Positive Health Care (PHC); and St. Mary's Regional Medical Center (STM).

Please note the following service area information:

- Southern Region: FPC Cumberland and York counties; PHC greater Portland
- Central Region: STM Androscoggin and Oxford counties; HZN -Sagadahoc, Lincoln, Kennebec, Knox, Waldo, and Somerset counties
- Northern Region: DEAN Hancock and Washington counties; EMAN Piscataquis, Penobscot, and Aroostook counties

Many of these agencies also receive other funds (including Ryan White Part C, HOPWA, United Way, fundraising) to support their medical case management services.

Positive Health Care received Part B funding for the first time in late 2007, as part of a pilot program for an intensive outreach case management position designed to serve a smaller caseload than traditional medical case managers.

Data presented in this report was extracted from CAREWare, a client- and service-level database that providers have been using since at least 2005.

Much of the data from calendar year 2007 raised questions about data quality. Three statewide data quality trainings were held in 2008 to improve data entry in CAREWare and address known data quality issues; other individualized support was also available as needed and requested.

When comparing 2008 data to 2007 data, it is important to recognize that much of the older data is of questionable quality.

#### **Client Profile**

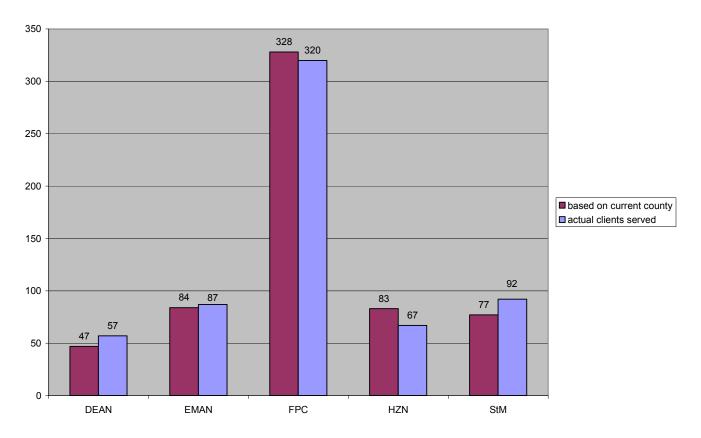
An unduplicated total of 619 individuals received medical case management services in 2008; two of these individuals were later discovered to be HIV-negative.

There was almost an 11% increase in the unduplicated number of clients served from calendar year 2007 to calendar year 2008. Because statewide data prior to 2007 is largely unreliable, it is difficult to assess whether or not this growth is unusual.

The greatest percentage of clients served in 2008 remains in the southern region, with about 53% of clients. This percentage is down from 55% in 2007. The central region accounted for 26% of clients in 2008, compared to 24% of clients in 2007. The northern region accounted for 21% of clients in 2008 and 2007.

There is some discrepancy between the current county of residence reported and the agency serving clients. Although 83 clients live in a county served by HZN, only 67 clients were served by HZN. In contrast, 77 clients live in a county served by STM, while the agency served 92 clients.

#### **Active Client Distribution**



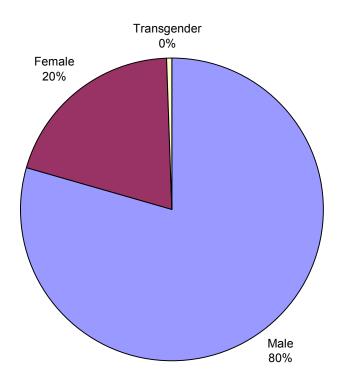
The majority (60%) of clients served reported some form of MaineCare as their primary insurance, followed by Medicare (20%), and private insurance (13%). These percentages are roughly in line with the prior year.

About 4% of clients served in 2007 reported no insurance at the end of the year; 100% of those clients who were served in 2008 had some form of insurance by the end of 2008.

About 35% of clients reported receiving their HIV care from a publicly-funded clinic or health department in 2008, down from 43% in 2007. About 32% of clients reported receiving HIV care from a hospital-based clinic in 2008, up from 21% in 2007. About 27% of clients reported private practice as their source for HIV care in 2008, down from 33% in 2007.

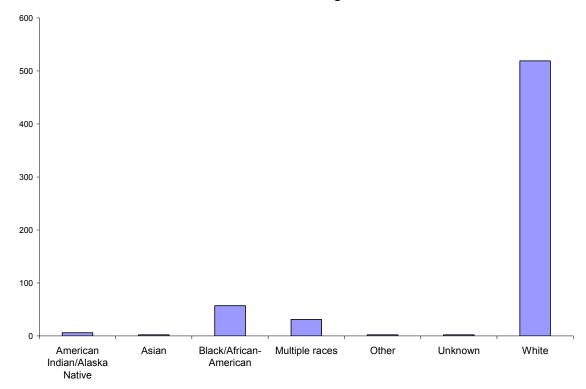
About 1% of clients served in 2007 reported no source of HIV medical care at the end of the year; of those served in 2008, 83% reported some form of HIV medical care at the end of 2008.

The majority of clients are male, steady from 2007.

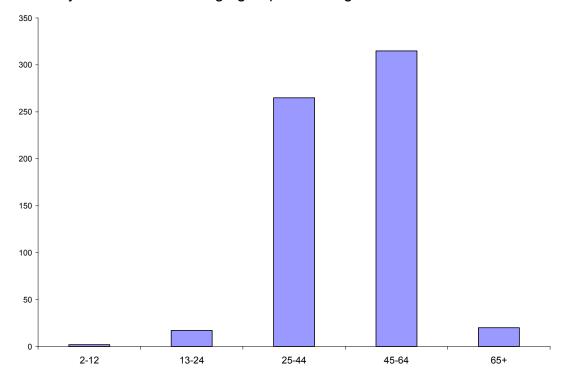


The majority (95%) of clients are not Hispanic or Latino, steady from 2007.

About 9% of clients are classified by the federal census as Black/African-American (this includes immigrants and refugees from Africa); 5% report multiple races; and 1% are Native Americans. These figures are in line with 2007.



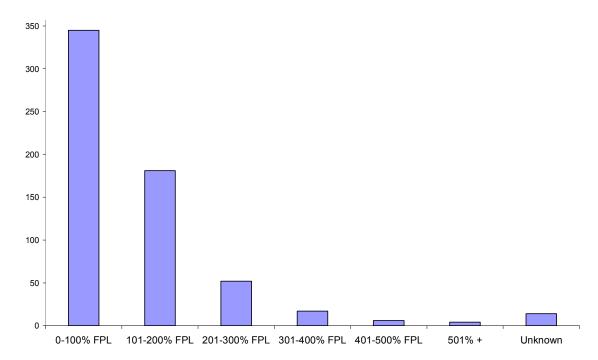
The greatest percentage (51%) of clients falls in the age range 45-64 years, followed by 43% in the 25-44 age group. These figures are in line with 2007.



More than half (56%) of clients have a household income between 0% and 100% of the Federal Poverty Level and 29% have a household income between 101 and 200% of the Federal Poverty Level. These percentages match 2007.

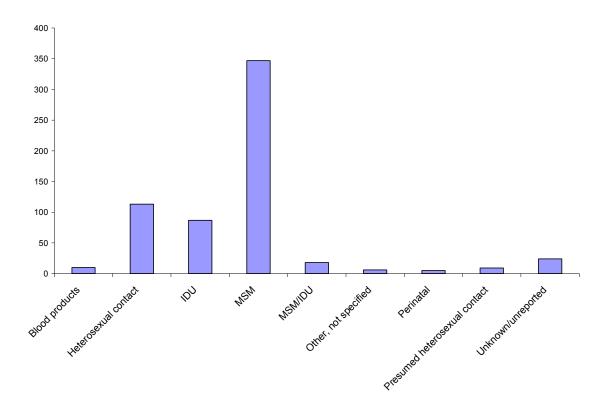
About 8% of clients reported a household income between 201% and 300% of the Federal Poverty Level in 2008, compared to 11% in 2007, while 3% reported a household income between 301% and 400% of the Federal Poverty Level in 2008, compared to 1% in 2007.

A total of 2% of clients did not have income information recorded in 2008.



Males who have unsafe sex with males (MSM) account for 56% of clients, while 18% of individuals identify heterosexual contact as their route of transmission. About 14% report injection drug use (IDU) as their route of transmission, and 3% report combined MSM/IDU.

A total of 4% of clients served in 2008 had an unknown or unreported route of transmission.



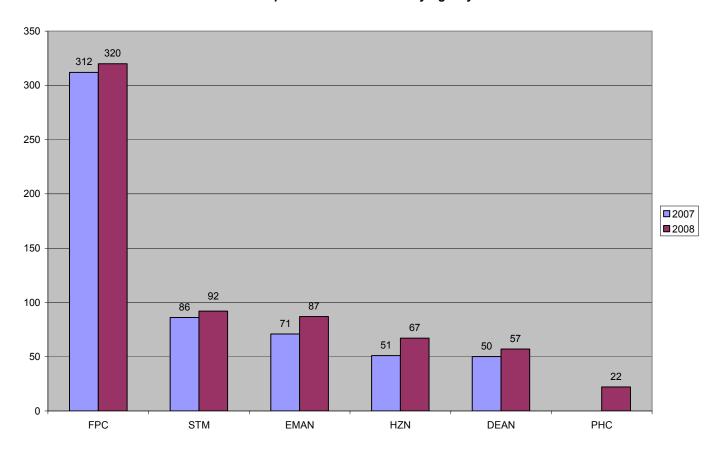
At least 22% of clients report some history of homelessness, and 8% meet HUD's definition for chronic homelessness. About 15% of clients currently receive a HOPWA subsidy through Frannie Peabody Center.

At least 16% of clients report a history of experiencing domestic violence; at least 15% report a history of incarceration; and at least 6% are veterans of the U.S. Armed Forces.

#### Service-Level Data

The number of unduplicated clients served by each agency was higher in 2008 than 2007. PHC began providing services at the very end of calendar year 2007, so only 2008 figures are being reported.

#### **Unduplicated Clients Served by Agency**



When comparing 2008 data to 2007 data, it is important to recognize that much of the older data is of questionable quality.

#### Caseload Growth

Overall caseload growth for an agency can be determined by looking at the total intakes and re-intakes (clients who had been discharged for a year or more before reinitiating services) and subtracting the number of discharges. Please note that discharges frequently are not being logged in CAREWare according to state standards, which could skew the data. Please also note that incorrectly entering an annual assessment as either an intake or re-intake would also skew the data.

The caseload growth percentage takes the adjusted new clients (intakes/re-intakes minus discharges) as a percentage of unduplicated clients served for the year. Based on these figures, HZN had the greatest caseload growth in 2008, followed by EMAN, DEAN, STM, and FPC.

2008	Unduplicated Clients	nduplicated Clients  New Intakes/ Re-intakes  Discharges	Caseload Growth		
		ixe-iiitakes		#	%
HZN	67	47	14	33	49%
EMAN	87	29	5	24	28%
DEAN	57	23	10	13	23%
STM	92	19	11	8	9%
FPC	320	63	42	21	7%

#### Duration and Frequency of Contact

Overall, there was an 18% increase in contacts from 2007.

FPC, STM, EMAN, and HZN all increased their contacts per client from 2007. While DEAN's number of contacts per client in 2008 was down compared to 2007, DEAN still had the highest number of contacts per client, at 35. The state average is 24 contacts per client.

EMAN did not log time units in CAREWare in 2007, so there is no baseline for comparison.

The average minutes per contact increased for FPC, STM, and HZN. Again, while DEAN's figure dropped compared to last year, DEAN still reported a higher amount of time per contact than any agency, except PHC. PHC reported 57 minutes per contact. The state average is 35 minutes per contact.

The average number of hours per client for the year was up at FPC and STM; it was double at HZN. DEAN was the only agency with a decrease in hours per client, but DEAN reported the highest figure, at 23 hours. The statewide average is 14 hours per client for the year (just over one hour per client per month).

2008	Unduplicated Clients	Total Contacts	Avg Contacts/ Client	Total Hours	Avg Minutes/ Contact	Avg Hrs/ Client/ Year
FPC	320	7,240	23	4,537	38	14
STM	92	2,271	25	1,083	29	12
EMAN	87	2,046	24	1,032	30	12
HZN	67	945	14	532	34	8
DEAN	57	2,015	35	1,292	38	23
PHC	22	271	12	257	57	12
Total	619	14,788	24	8,733	35	14

#### Quality Measures

#### <u>Annual Assessment</u>

Although no agencies met the goal of 95% of clients being assessed during the year, three agencies (FPC, PHC, and HZN) fell above the statewide average for the year. For 2007 and 2008, FPC had the highest percentages of clients being assessed. All agencies showed an increase in the percentage of clients assessed in 2008 compared to 2007.

% Clients with at least 1 Annual Assessment Visit, 2007		
Goal	95%	
FPC	88%	
Statewide	69%	
STM	59%	
DEAN	52%	
EMAN	31%	
HZN	30%	

% Clients with at least 1 Annual Assessment Visit, 2008		
Goal	95%	
FPC	91%	
PHC	91%	
HZN	90%	
Statewide	85%	
DEAN	84%	
STM	82%	
EMAN	82%	

#### Care Plan

The case management standards state that clients must have a care plan every quarter. The figures presented below represent clients who had at least one care plan during the year. The percentages of clients who had care plans every quarter would be significantly lower; however, a bug in the current version of CAREWare makes it almost impossible to analyze care plans by quarter for 2008.

For the second year in a row, STM and FPC are the only agencies who exceeded the statewide goal of 90% of clients having a care plan. Please note that eight clients at STM and 12 clients at FPC did not have a single care plan in

2008; it is unclear how many of these clients were discharged before they could complete a care plan.

All agencies showed an increase in the percentage of clients with a care plan in 2008, compared to 2007.

2007	% Clients with at least 1 Quarterly Care Plan Visit	# Clients with no Care Plan
FPC	94%	ı
STM	93%	6
Goal	90%	•
Statewide	88%	-
DEAN	80%	8
EMAN	73%	9
HZN	58%	10

2008	% Clients with at least 1 Quarterly Care Plan Visit	# Clients with no Care Plan
STM	97%	8
FPC	96%	12
Statewide	93%	44
Goal	90%	-
HZN	88%	8
DEAN	84%	2
PHC	82%	4
EMAN	80%	17

#### Goal Achievement

The statewide goal is that each client will achieve a minimum of four short-term goals per year. Figures from 2007 reflect clients achieving at least *one* goal, while figures from 2008 reflect clients achieving the standard *four* goals.

No agencies met the goal of 90% of clients achieving four or more goals. The average number of goals achieved per client, however, is greater than four for all agencies except HZN. This indicates that many clients achieve a high number of goals (much greater than four) in a year, while other clients do not meet the threshold standard of four.

2007	% Clients achieving at least 1 goal	Avg goals/client who achieved
STM	95%	13
Goal	90%	4
FPC	83%	8
DEAN	80%	6
Statewide	77%	8
EMAN	43%	3
HZN	28%	2

2008	% Clients achieving at least 4 goals	Avg goals/client who achieved
Goal	90%	4
FPC	82%	9
Statewide	75%	14
STM	75%	9
EMAN	62%	7
PHC	45%	4
DEAN	44%	5
HZN	16%	3

### **Linkage**

EMAN and STM exceeded the goal of 90% linkage for referrals made in 2008. All agencies except FPC increased the percentage of clients being linked to referral resources in 2008, compared to 2007; this is likely due in part to poor data quality in 2007.

2007	% referrals linked	
Goal	90%	
FPC	76%	
DEAN	56%	
Statewide	53%	
STM	11%	
HZN	5%	
EMAN	1%	

2008	% referrals linked
EMAN	93%
STM	92%
Goal	90%
Statewide	81%
DEAN	75%
FPC	74%
HZN	72%
PHC	0%

#### Care Status

HRSA considers a client "in care" if the client is taking antiretrovirals, and/or has seen a doctor in the last six months, and/or has had a CD4 test in the last six months, and/or has had a viral load test in the last six months.

FPC is the only provider exceeding the statewide goal of 90% of clients in care, according to this standard.

DEAN, STM, and EMAN all show a drop in the percentage of clients in care in 2008, compared to 2007. This may be an indication that the data is not being collected and entered correctly in CAREWare.

2007	% of clients in care
DEAN	100%
STM	100%
Statewide	99%
FPC	98%
EMAN	98%
Goal	90%
HZN	n/a

2008	% of clients in care
FPC	94%
Goal	90%
Statewide	89%
HZN	88%
DEAN	84%
STM	83%
EMAN	78%
PHC	68%

#### Adherence

Adherence is a defining component of medical case management. Provider contracts state that case managers will engage in quarterly adherence contacts with all clients. The figures presented below represent clients who had at least one adherence contact during the year. The percentages of clients who had adherence contacts every quarter would be significantly lower; however, a bug in the current version of CAREWare makes it almost impossible to analyze adherence contacts by quarter for 2008.

No agency had 100% of clients receiving adherence counseling in 2008. All but HZN and PHC were above 90%. All agencies showed an increase in the percentage of clients receiving adherence counseling in 2008, compared to 2007.

% clients with 1 or more adherence contacts, 2007			
DEAN	94%		
EMAN	93%		
FPC	89%		
Statewide	82%		
STM	78%		
HZN	4%		

% clients with 1 or more adherence contacts, 2008			
DEAN	96%		
EMAN	95%		
FPC	93%		
STM	91%		
Statewide	90%		
HZN	61%		
PHC	27%		

#### Secondary Prevention

Secondary prevention services are not currently an area of performance measurement for agencies. However, it is still important to review these data for training and quality needs as these services are important to reduce the spread of HIV.

The statewide average for clients receiving secondary prevention services increased in 2008. All agencies except FPC showed an increase in the percentage of clients receiving secondary prevention services in 2008, compared to 2007.

% clients accessing secondary prevention, 2007			
STM	81%		
FPC	79%		
Statewide	60%		
DEAN	16%		
EMAN	8%		
HZN	6%		

% clients accessing secondary prevention, 2008			
EMAN	84%		
STM	82%		
FPC	78%		
Statewide	74%		
HZN	64%		
PHC	50%		
DEAN	32%		

## Support Services

Clients have indicated that financial assistance, support groups and socializing, and transportation are great needs throughout the state. Compared to 2007, the overall percentage of clients accessing financial assistance slightly increased, the overall percentage of clients accessing support groups remained steady, and the overall percentage of clients accessing transportation assistance slightly decreased.

2008	Financial Assistance	Support Groups	Transportation
DEAN	82%	53%	75%
EMAN	26%	26%	78%
FPC	62%	5%	31%
HZN	51%	12%	9%
STM	95%	16%	9%
Statewide	62%	14%	30%

#### **Conclusions**

Case managers may still need support about entering quarterly data (care plans, goal achievement, care status, adherence) into CAREWare as well as a thorough understanding of the importance of these activities occurring each quarter.

Case managers may benefit from training related to helping clients with ongoing needs to achieve short-term goals.

Secondary prevention services may be prioritized if they are added as a contractual performance measure. Additional training for case managers may also be beneficial.

February 2009 Tara B. Thomas, MFA Data & Quality Specialist, Maine Ryan White Part B Program