

# Provider Briefing on LA County's Continuum of HIV/AIDS Services

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The California Endowment



# State Funding for Los Angeles County\*

SERVICE CATEGORY	08/09
Prevention	\$ 7,518,956
Care Services	\$ 14,399,298
Housing	\$ 385,644
Surveillance	\$ 2,033,683
<b>Total State General Fund Contribution</b>	<b>\$ 24,337,581</b>

\*Includes City of Long Beach, City of Pasadena, and direct funding to organizations.



# State Funding for Los Angeles County\*

SERVICE CATEGORY	09/10
Prevention	\$ 1,814,848
Care Services	\$ 9,578,960
Housing	\$ 0
Surveillance	\$ 2,033,683
<b>Total State General Fund Contribution</b>	<b>\$ 13,427,491</b>

\*Includes direct EIP and prevention funding to LB, direct surveillance funding to LB and Pasadena, and includes TMP funding for LAC, LB and Pasadena.



# State Funding for Los Angeles County\*

Serv. Category	08/09	09/10	Impact
Prevention	\$ 7,518,956	\$ 1,814,848	\$ (5,704,108)
Care	\$ 14,399,298	\$ 9,578,960	\$ (4,820,338)
Housing	\$ 385,644	\$ 0	\$ (385,644)
Surveillance	\$ 2,033,683	\$ 2,033,683	\$ 0
	<b>\$ 24,337,581</b>	<b>\$ 13,427,491</b>	<b>\$ (10,910,090)</b>

\*Includes City of Long Beach, City of Pasadena, and direct funding to organizations.



# Service Categories to be Fully Preserved

- Residential
- Oral Health
- Medical Outpatient and Medical Specialty
- Skilled Nursing/Hospice
- Mental Health, Psych.
- Medical Case Management
- Home-based Case Management
- Transitional Case Management
- Nutrition Support (Food)
- Substance Abuse
- Language
- HIV C & T



# Residential

- Work with HOPWA on identifying additional beds and eliminating duplicative services.
- OAPP meeting with residential services providers in October.
- Rebid of reduced portfolio in 2009.



# Oral Health

- No cut or increased funding for services.
- May need to absorb clients as a result of cuts to Denti-Cal.
- Need to finalize placement of a full-time endodontist.



# Medical Outpatient and Medical Specialty

- No cut, core services.
- Adopt new rate structure and performance metrics.
- Complete rebid 2009-2010.





# Skilled Nursing/Hospice

- No cut, preserve services.
- Still gaps in services at current investment level.
- Rebid in 2010.



# Mental Health, Psychiatry

- No cut, preserve services.
- Ongoing need for contracted psychiatrists.



# Medical Case Management

- No cut, core service.
- Key in the transition to medical care coordination.
- Complete restructure in 2010.
- Rebid 6 months after completion of Medical Services RFP.



# Home-based Case Management

- No cut, preserve services.
- State cuts affect 8 directly State-funded programs.
- Partially restore funding to 6 OAPP-funded programs through contract augmentations.
- Complete rebid 2010.



# Transitional Case Management

- No cut, preserve services.
- The amount of clients coming out of correctional system remains large.
- TCM is key to link them to care.
- OAPP/LASD workgroup is being convened to revamp entire HIV/AIDS jail-based service delivery system.



# Nutrition Support (Food)

- No cut, preserve services.



# Substance Abuse

- No cut, preserve services.
- ADPA received sizable state cuts for county-wide SA services, including Proposition 36 funds.
- Crystal meth enhancement funds continue to be important complement to historic SA funding.



# Language

- No cut, preserve services.
- Relatively small investment to address an important need, especially for Asian languages.





# HIV Counseling and Testing

- No cut. Highest ever investment level.
- Must do due diligence to reduce the number of people unaware of their HIV status—essential for curtailing the growing epidemic.
- New contracts in place.



# Service Categories to be Partially Preserved

SERVICE CATEGORY	RESTORE
Health Education/ Risk Reduction	~\$4,300,000
Early Intervention Programs	\$1,000,000
<b>Total</b>	<b>~\$5,300,000</b>



# Health Education/Risk Reduction

- Reduce funding available for new contracts by ~\$1 million.
- Recommended for Board action on September 29, with an October 1, 2009 start date.



# Early Intervention Programs

- Cut contracts by 52%.
- Maintain one comprehensive EIP in an impacted area; preserve outreach and social work components for the other two programs.
- Migrate clients from ARIES to existing data collection system.



# Service Categories to be Eliminated

SERVICE CATEGORY	2009-2010 Reduction
Legal <sup>1</sup>	\$(370,433)*
Peer Support <sup>1</sup>	\$(404,965)*
Provider Training <sup>1</sup>	\$(168,888)*
Capacity Building <sup>1</sup>	\$(600,000)*
Medical Nutrition Therapy	\$(326,871)
Treatment Education	\$(1,451,895)

<sup>1</sup> Contract/funding terms cross fiscal year, therefore funding adjustments do not reflect expenditures prior to July 1, 2009.

\* Indicate full contract amount for a 12-month period.



# Legal

- Contract sunsets effective February 28, 2010.
- Allows for dispensation of 149 current clients as supported by County Counsel.
- Allows for local planning and implementation of public health legal services project.



# Peer Support

- Contracts end effective October 15.
- Possible that peer support services will return to a largely volunteer-driven model.



# Provider Training

- End contracts effective October 15.
- Frees up funds for direct services.
- Services can be provided in house.





# Capacity Building

- End contract effective October 15.
- Frees up funds for direct services.



# Medical Nutrition Therapy

- End contracts effective October 15.
- Fold services into Medical Outpatient services as possible.



# Treatment Education

- End contracts effective October 15.
- Restructure and propose highly-targeted treatment education investment.



# Service Categories to Be Reduced

SERVICE CATEGORY	2009-2010 Reduction
Case Management, Psychosocial <sup>1</sup>	\$(800,000)
Social Marketing	\$(600,000)
Client Advocacy	\$(121,000)
Transportation	\$(200,000)

<sup>1</sup> Contract/funding terms cross fiscal year, therefore funding adjustments do not reflect expenditures prior to July 1, 2009.



# Social Marketing

- Reduce contract by \$600,000.
- Frees up funds for direct services.



# Case Management, Psychosocial

- Eliminate the NCC funded amount, but retain Commission allocation percentage.
- Key in the transition to medical care coordination.
- Complete restructure in 2010.
- Rebid 6 months after completion of Medical Services RFP.



# Client Advocacy

- Cut contract by 50%.
- Maintain HIV LA online directory and reduce print version.



# Transportation

- Reduce by \$200,000.
- Implement stricter client eligibility rules and screening consistent with federal poverty guidelines, effective October 2009.
- Revamp distribution among smaller network.
- Complete rebid 2010.





# Service Categories to be Indefinitely Postponed

SERVICE CATEGORY	2009-2010 Reduction
Community Mobilization Initiative (CMI)	\$(220,000)*
<b>Total Contract Savings</b>	<b>\$(5,264,052)</b>

<sup>1</sup> Contract/funding terms cross fiscal year, therefore funding adjustments do not reflect expenditures prior to July 1, 2009.

\* Indicate full contract amount for a 12-month period.



# Community Mobilization Initiative (CMI)

- Indefinite postponement of RFP.
- Frees up funding for direct services.



# Potential Available Funding

Sources	2009-2010	RECOMMENDATIONS/RATIONALE
Year 19 Part A Oral Health Savings	\$500,000	Projected Part A savings resulting from Year 19 transfer of Oral Health costs to MAI rollover.
Total Proposed Administrative Reductions (OAPP & COH)	\$2,900,000	Operational budget reductions to both OAPP and Commission.
<b>Subtotal</b>	<b>\$3,400,000</b>	<b>Available funds to preserve essential services affected by State cuts.</b>
<b>Grand Total Available Funding</b>	<b>\$8,664,052</b>	<b>Total available funds (projected) to preserve essential services affected by State cuts (12 month adjusted).</b>



# Questions



# On the Horizon

- CDC funding
- Ryan White reauthorization
- Grim State budget outlook
- ADAP health
- More uninsured
- More demand for basic services



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This presentation is available at [www.ph.lacounty.gov/aids](http://www.ph.lacounty.gov/aids).

