

Shifting from in-person to expanded telehealth delivery of medical care coordination for people with HIV: Impact on viral suppression

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Background

- In 2013, the Los Angeles County Public Health implemented Medical Care Coordination (MCC) Program to support people with HIV in Ryan White clinics who have complex need and barriers to viral suppression.
- In 2020, the MCC Program expanded its telehealth delivery of MCC services to ensure continuity of care during COVID-19 safer-at-home orders.
- MCC now operates under a hybrid model of in-person and telehealth

Aim

- It is unknown whether there have been changes in MCC's effects on HIV viral suppression since this change in service delivery.
- Therefore, the aim of this analysis is to longitudinally evaluate changes in service delivery and viral suppression before and after the LAC MCC Program scaled up hybrid delivery of case management services.

Methods

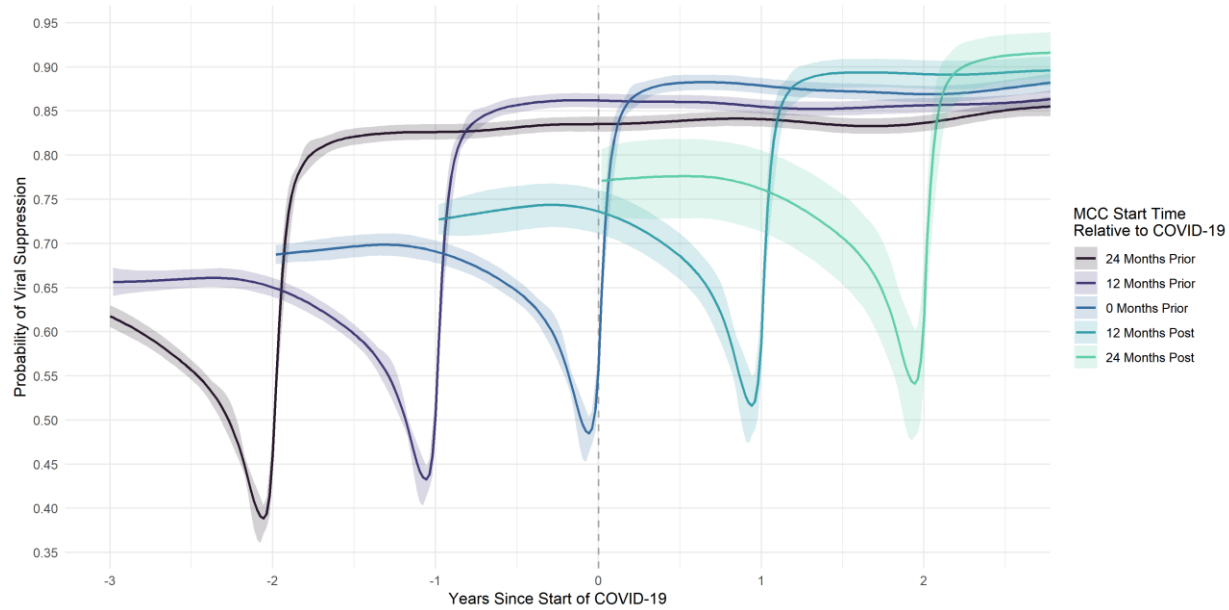
- Analyses included 13,913 people with HIV enrolled in MCC between January 2013 to August 2023.
- Two Bayesian semi-parametric hierarchical models were developed
 - A logistic model comparing longitudinal changes in viral suppression between people who entered the MCC Program before MCC changed to a hybrid model, and those who joined MCC after this change.
 - A recurrent events model comparing the rate or intensity of services provided before and after the MCC changed to a hybrid model.

Participant Characteristics

		Enrollment in Medical Care Coordination	
		Before COVID-19 (N=9977)	After COVID-19 (N=3936)
Viral Suppression at Baseline	Unsuppressed	5107 (51.2%)	1448 (36.8%)
	Suppressed	4870 (48.8%)	2488 (63.2%)
Age at Baseline (mean(sd))		40.29 (12.09)	41.34 (12.62)
Gender	Male	8484 (85.0%)	3378 (85.8%)
	Female	1129 (11.3%)	388 (9.9%)
	Transgender Female	364 (3.6%)	170 (4.3%)
Race/Ethnicity	White	2109 (21.1%)	868 (22.1%)
	Latinx	4716 (47.3%)	1916 (48.7%)
	Black / African American	2747 (27.5%)	995 (25.3%)
	Asian American / Pacific Islander	405 (4.1%)	157 (4.0%)

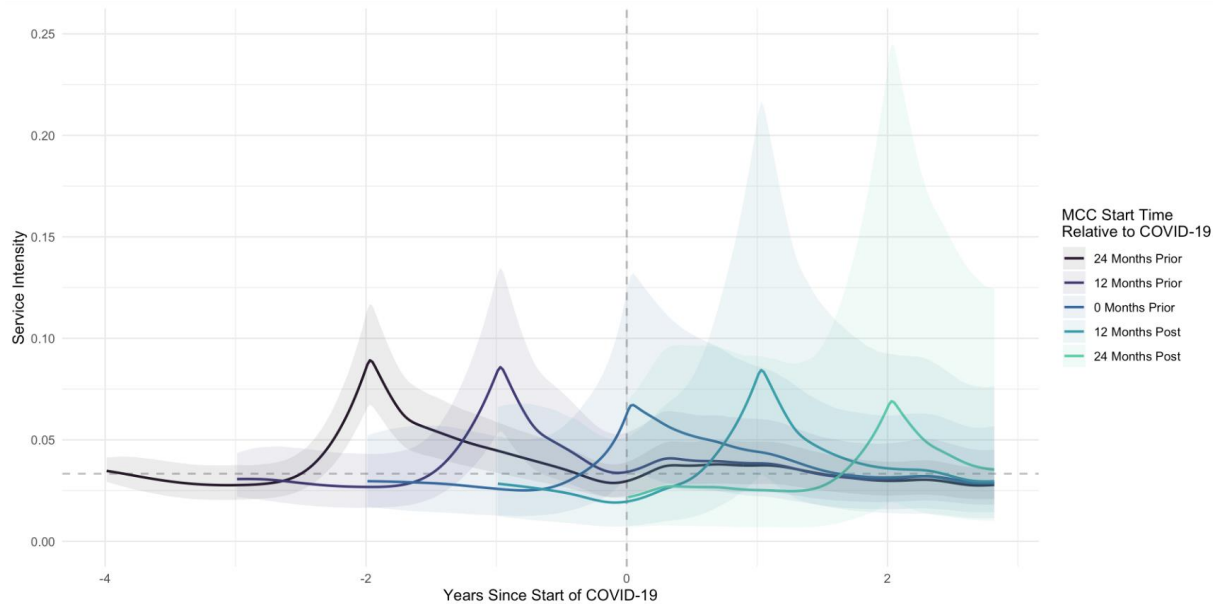
Results

- Viral suppression before and after the start of COVID-19



Results

- Service-Rate Intensity before and after COVID-19



Conclusions

- Analyses indicate no lapse in improvements in viral suppression among people who entered MCC in the year following the expansion of telehealth case management, nor among those who had entered MCC in the year prior.
 - Findings are consistent with surveillance reports of all people with diagnosed HIV in LA County, which indicate that viral suppression rates did not rebound since COVID-19 safer-at-home orders in 2020.

Conclusions

- In general, 80% of MCC patients seem to achieve viral suppression after 6 months in the program.
 - However, the overall rate of viral suppression for all 50,386 people with HIV Los Angeles County is lower, ranging from 61% in 2014 to 64% in 2023.
- Further research is needed to identify ways to improve public health's reach to people with HIV who are not getting the services they need.

Questions?

