Data-to-CareHIV Re-linkage to care



What is Data-to-Care/Re-linkage?

Data-to-care (D2C) is an HIV prevention strategy which uses information gathered by the health department to help people who have fallen out of HIV medical care get back into care. D2C uses the Houston Health Department's Service Linkage Program to re-link people living with HIV (PLWH) back into HIV medical care, as well as provide linkage to other support services that address barriers to receiving HIV care.

Key Terms³

- Antiretroviral therapy (ART) medications used to treat HIV.
- Viral Load the amount of HIV in the body.
- **HIV treatment** taking medications that reduce the amount of HIV in the body, which prevents illness.
- **Viral suppression** reduction of a person's viral load to less than 200 copies per milliliter of blood.
- **Undetectable viral load** a reduction in viral load so low that a test can't detect it.

Services offered by the Houston Health Department's Service Linkage Program

*Food pantry services
*Pain management services *Medication
prescription assistance services *Rental
assistance services *Family planning
services *Substance abuse counseling
services *Support system services
*Transportation services *Vaccination
services *Vision services *Other services

Data-to-Care Process











Referrals

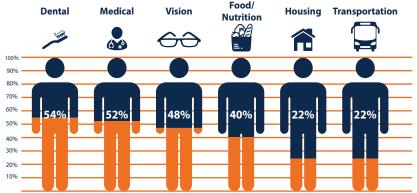
Surveillance Investigation

Case to HIV Service Linkage

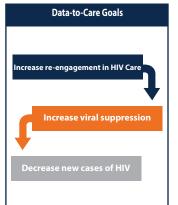
Contact Attempts

Client Intake: Link to Care & Assess Service Support Needs Services

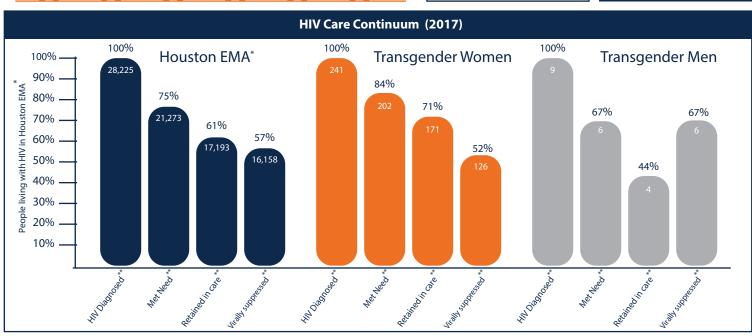
Top Needs of People Living with HIV in Houston, 2017



Why do we need Data-to-Care/Re-linkage?



People living with HIV (PLWH) who take HIV medicine as prescribed and get and keep an undetectable viral load (or stay virally suppressed) have effectively no risk of transmitting HIV to sexual partners²





References:

- 1. Cohen MS, Chen YQ, McCauley M, et al. Prevention of HIV-1 Infection with Early Antiretroviral Therapy. New England Journal of Medicine. 2011;365(6):493-505. doi:10.1056/NEJMoa1105243.
- 2. Montaner JS, Lima VD, Barrios R, et al. Association of highly active antiretroviral therapy coverage, population viral load, and yearly new HIV diagnoses in British Columbia, Canada: a population-based study. Lancet 2010;376:532-539.
- 3. Centers for Disease Control and Prevention. (2019, December 18). HIV Treatment as Prevention. Retrieved April 30, 2019, from https://www.cdc.gov/hiv/risk/art/index.html

Notes:

*The Houston Eligible Metropolitan Area (EMA) is the geographic service area defined by the Health Resources and Services Administration (HRSA) for the Ryan White HIV/AIDS Program Part A and Minority AIDS Initiative (MAI). It includes Chambers, Fort Bend, Harris, Liberty, Montgomery, and Waller Counties. Harris County Public Health Ryan White Grant Administration (RWGA) administers HRSA Ryan White HIV/AIDS Program Part A and MAI HIV care services funding and activities in the EMA. Epidemiologic data for the EMA are provided by TDSHS.

ĺ	Measure	Description	Data source
	HIV diagnosed	No. of persons living with HIV (PLWH) residing in Houston EMA through end of year (alive)	Texas eHARS data
	Met need	No. (%) of PLWH in Houston EMA with met need (at least one: medical visit, ART prescription, or CD4/VL test) in year	Texas Department of State Health Services HIV Unmet Need Project (incl. eHARS, ELR, ARIES, ADAP, Medicaid, private payer data)
	Linked to care	No. (%) of newly diagnosed PLWH in Houston EMA who were linked to medical care ("Met need") within N months of their HIV diagnosis	
	Retained in care	No. (%) of PLWH in Houston EMA with at least 2 medical visits, ART prescriptions, or CD4/VL tests in year, at least 3 months apart	
	Virally suppressed	No. (%) of PLWH in Houston EMA whose last viral load test of the year was ≤200 copies/mL	Texas ELRs, ARIES labs, ADAP labs