Priority setting

FOR THE COMPREHENSIVE PLANNING COMMITTEE 2025 PRIORITY SETTING PROCESS



What is Priority Setting.. And Why?

DEFINITION:

Priority setting is the DATA-DRIVEN process of ranking ALL service categories in order of importance, helping to guide the council's work



PURPOSE:

- ✓ To Identify Essential Services: Determining which HIV services are most crucial to ensure that funding is directed toward areas of greatest need
- ✓ To Guide Resource Allocation: Informing how funds should be distributed across prioritized services
- ✓ To Support the Continuum of Care: Ensuring engagement in care, retention in care, and viral suppression for people living with HIV (PLWH)
- ✓ To Fulfill Federal Requirements for Ryan White Part A funding.

RW PART A CORE SERVICES

- 1. AIDS Drug Assistance Program (ADAP)
- 2. Ambulatory Care
- 3. Case Management (medical)
- 4. Early Intervention Services
- 5. Benefits Assistance (HIPCP)
- 6. Home & Community-Based Health Services
- 7. Home Health Care
- 8. Hospice Services
- 9. LPAP
- 10. Mental Health Therapy/Counseling
- 11. Nutritional Services
- 12. Oral Health Care
- 13. Substance Abuse Treatment (Outpatient)

RW PART A SUPPORT SERVICES

- 1. Care Outreach
- 2. Case Management (non-medical)
- 3. Child Care Services
- 4. Day or Respite Care
- 5. Emergency Financial Assistance
- 6. Food Bank/Home-Delivered Meals
- 7. Health Education Risk Reduction
- 8. Housing Assistance
- 9. Referral for Health Care & Support Services
- 10. Other Professional Services/Legal Services
- 11. Psychosocial Support Services
- 12. Rehabilitation Care
- 13. Substance Abuse (Residential)
- 14. Translation & Interpretation
- 15. Transportation

What Else To Note?

- ➤ WHEN: While the Priority Setting Process has typically been every **three years** (or sooner if needed), <u>we anticipate a yearly process</u> according to Ryan White Part A Manual
- Allocations/funding does NOT guide Priority Setting
- Data-Driven Ranking:
 - >CSU (Client Services Unit)
 - >MMP (Medical Monitoring Project)
 - ➤ Consumer Survey
 - *COMMUNITY VOICES

Client Services Unit (CSU)

Health Information Helpline

* EMA-Wide service need of (1,837 PLWH) at intake (2023)

- Key point of entry for MCM
- Scheduling medical appointments for those newly diagnosed, lost to care, and relocating to the EMA
- Provides information and referral services for all other DHH-funded programs
- > Processes grievances about funded services



Medical Monitoring Project (MMP)

* Unmet Service Need of (51,419) PLWH in care in Philadelphia (weighted 2020-2022)



- Population-based surveillance system
- ➤ Through eHARS case surveillance database to create MMP sample
- > Detailed survey including:
 - Direct Contact: Anonymous45 60 minute survey
 - Indirect Contact: Medical record abstraction (MRA)

Consumer Survey (2021-2022)

- * EMA-Wide data on percentage of (236) PLWH who "needed but didn't get" a service in the last 12 months
- Service access:
 - 1. Never personally needed the service
 - 2. Personally needed service & received it
 - 3. Personally needed service & did not receive it
 - 4. Never heard of this service
- > Online and hardcopy survey, mainly distributed by providers

Ranking for CSU/MMP/Consumer Survey

- 1 This is the lowest rating which signifies there is either no mention of the service or that it deviates -0.5 or more below the average.
- 3- This rating signifies a medium, or average priority. It should be prioritized as much as any other service. That is why these services are right around the average, deviating 0.3 at most from the average.
- 5- This rating signifies that a service is definitely needed by clients to ensure proper care. That is why these services are well above the average, deviating at most 1.3 from the average.
- 8- This rating signifies that a service is critical to client care. That is why these services far exceed the average, deviating at least 1.4 from the average.

Determining Final Ranking

COMMUNITY VOICES 40%

CSU 20%

Consumer Survey 20%

MMP 20%

COMMUNITY VOICES (current):

This factor seeks to quantify community experience/expertise of delivering and receiving HIV services in relationship to emergent needs and issues, vulnerable populations, community knowledge, and other EMA data.

- 1- This service is important to ensure engagement in care, retention in care and/or viral suppression
- 5- This service is needed to ensure engagement in care, retention in care, and/or viral suppression
- 8- This service is critical to ensure engagement in care, retention in care and viral suppression

Data Helping Community Voices:

- *Epidemiological Infographics / 2023 Update
- **★ Care Continuum Data**
- **★ Consumer Survey Findings**
- **★Medicaid/Medicare Data**
- **★Service Program Guidance**
- * Recipient Considerations
- **★Lambda 2025 Threat Talk**



- Negotiation of Priority Ranking Process -

FOR CSU/MMP/CONSUMER SURVEY & COMMUNITY VOICES PORTIONS