

Priority Setting Changes  
CPC and Prevention Committee  
Wednesday, June 25, 2025  
2:30 p.m. – 4:30 p.m.

*The following services have had greater than a + or -3 change in ranking from 2022-2025. The reasons for these changes are described below.*

*Please note, there was a significant difference in number of members voting in 2022 versus 2025 – on average, more members were voting in 2025 than 2022. The limited number of voters caused repeat rankings (e.g. three services ranked as #3 priority) in 2022. As a result, this may be a factor for significant changes in ranking from 2022 to 2025.*

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**Direct Emergency Financial Assistance (DEFA) (-5)**

DEFA ranked #7 in 2025 and #2 in 2022.

While 85% of members ranked this service as a critical priority, it did not rank as high under other ranking factors. Decline in ranking is due to less reported need under CSU (Client Services Unit) than the top-ranking services and no mention of the service under MMP (Medical Monitoring Project).

**Information & Referral (+6)**

Information & Referral ranked #13 in 2025 and #19 in 2022.

This service supports the Client Services Unit (CSU) which members discussed as critical for navigation, linkage, and retention in care. 56% of members rated the service as an 8 because it connect people to all other services.

**AIDS Drug Assistance Program (ADAP) (-7)**

ADAP ranked #15 in 2025 and #8 in 2022.

While the group saw value in this service, they noted the lower usage and overlap with insurance/Medicaid. Cost and access issues were noted but not seen as urgent since other mechanisms were covering most people

### **Home & Community-Based Health Services (+7)**

Home & Community-Based Health Services ranked #16 in 2025 and #23 in 2022.

Many members saw this service as needed to ensure engagement in care, many ranking it a 5. There was a large discussion around its importance for the aging PLWH population which is a priority population. They also recognized the service as important for helping those with disabilities and supporting social integration for seniors through day treatment.

### **Legal Services (-12)**

Legal Services ranked #17 in 2025 and #5 in 2022.

75% of members ranked this service as a low service priority (ranked as a 1). This was despite acknowledgment of future discrimination threats. Members felt that this service, under Ryan White, was limited for addressing immigration or minority discrimination.

### **Translation & Interpretation (-5)**

Translation & Interpretation ranked #17 in 2025 and #12 in 2022.

This service ranked low in CSU, MMP (did not appear), and the Consumer Survey. For the Consumer Survey, the perceived demand was not reflected in data due to language barriers in the survey itself (only 7 Spanish surveys returned).

Additionally, translation tools like language apps were noted, but concerns about quality and limitations led to middling scores.

### **Home Health Care (+4)**

Home Health Care ranked #18 in 2025 and #22 in 2022.

Although low utilization was noted, members stressed its growing importance for homebound and older clients. This was seen as a key service to help PLWH remain in their homes safely, especially given the limitations for coverage under Medicaid.

### **Health Education / Risk Reduction (-6)**

Health Education / Risk Reduction ranked #19 in 2025 and #13 in 2022.

The service ranked low in CSU and the Consumer Survey. As for community voices, most members voted it as a 5, right in the middle of essential and important to engagement in care. Members felt this service, while important for HIV prevention, was not most critical for PLWH's engagement in care.

### **Substance Use Residential (-14)**

Substance Use (Residential) was ranked #20 in 2025 and #6 in 2022.

While this service was acknowledged as needed, the members discussed its low efficacy (<5% long-term sobriety). The discussion favored outpatient models, and members noted the high readmission.

### **Care Outreach (-14)**

Care Outreach ranked #22 in 2025 and #8 in 2022.

Most of the participants found the service to be essential (80% voting it as a 5) for PLWH's engagement in care. However, CSU, MMP, and Consumer Survey data ranked the service low, affecting its overall ranking.

### **Local Pharmaceutical Assistance Program (LPAP) (-9)**

LPAP ranked #23 in 2025 and #14 in 2022.

The service was recently defunded in the Philadelphia EMA because it was deemed duplicative of ADAP and EFA-Pharma. Members discussed the service and noted that other pharmaceutical services were more effective.

### **Child Care Services (-6)**

Child Care Services ranked #24 in 2025 and #18 in 2022.

While this service was important, members discussed how the demographic of those who may need this service was majorly reflective of the EMA's PLWH. Additionally, there was program guidance which could make receiving more informal child care services from a trusted neighbor or friend, for example, more difficult.

### **Non-Medical Case Management (-5)**

Non-Medical Case Management ranked #25 in 2025 and #20 in 2022.

This service was seen as “light-touch” support for those not needing intensive help. Members discussed how it was not currently funded by RW Part A and how Medical Case Management was priority over Non-Medical. They also discussed other avenues, such as PhillyKeepOnLoving or CSU, which could help people connect with services and offer “light-touch” support.

### **Rehabilitation Care (-5)**

Rehabilitation Care ranked #26 in 2025 and #21 in 2022.

The group discussed how the service was helpful for aging adults, but limited funding and competing needs made it a lower-tier priority despite benefits for older adults (e.g., mobility, reduced ER visits). It was noted that, realistically, this was not a priority for clients who had other priorities in their lives.

### **Day or Respite Care (-10)**

Respite Care ranked as #27 in 2025 and #17 in 2022.

This was reportedly underutilized in the Consumer Survey and ranked low under CSU and MMP. There was not much discussion around how this service was essential for PLWH's engagement in care.