



HRSA's Ryan White HIV/AIDS Program Part F: Special Projects of National Significance

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The Health Resources and Services Administration's Ryan White HIV/AIDS Program (RWHAP) provides a comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV. More than half the people with diagnosed HIV in the United States—nearly 568,000 people in 2019—receive services through the RWHAP each year. The RWHAP funds grants to states, cities, counties, and local community-based organizations to provide care, treatment, and support services for people with HIV to improve health outcomes and reduce HIV transmission. The RWHAP, first authorized in 1990, was funded at \$2.4 billion in fiscal year (FY) 2020.

The Health Resources and Services Administration's (HRSA) Ryan White HIV/AIDS Program (RWHAP) Part F Special Projects of National Significance (SPNS) Program supports the development of innovative models of HIV care and treatment to quickly respond to emerging needs of RWHAP clients. Through its demonstration, implementation, and IT projects, SPNS uses implementation science to evaluate the design, implementation, utilization, cost, and health-related outcomes of treatment strategies while promoting the dissemination and replication of successful interventions. This unique program advances knowledge and skills in the delivery of health care, support services and data integration to support underserved populations. Through these special projects, RWHAP SPNS recipients implement a variety of interventions, which contribute to the advancement of public health knowledge and the goal of ending the HIV epidemic in the United States.

Recipients

Of the 39 FY 2021 RWHAP SPNS grant recipients currently funded, 26 percent are community-based/AIDS services organizations; 8 percent are state/county/local departments of health; 26 percent are community health centers; 15 percent are academic-based clinics; 8 percent are public health research/training institutes; and 17 percent are universities/evaluation and technical assistance providers. In FY 2020, the SPNS Program served more than 8,000 clients with HIV.

Current Initiatives

Using Innovative Intervention Strategies to Improve Health Outcomes Among People With HIV (FY 2021–FY 2025)

The purpose of this initiative is to use an implementation science framework to identify, pilot test, and evaluate innovative intervention strategies in four focus areas to improve health outcomes among people with HIV. The Innovative Intervention Strategies Coordinating Center for Technical Assistance (2iS CCTA) will solicit and subaward up to 20 RWHAP-funded recipients and subrecipients (approximately five sites per focus area) to serve as implementation sites where one intervention strategy per site will be piloted. This initiative will focus on three priority populations and one area of opportunity to improve service delivery. Combined, these four focus areas are—

1. Improving HIV health outcomes for people with substance use disorder
2. Improving HIV health outcomes for lesbian, gay, bisexual, transgender, and queer (LGBTQ+) youth
3. Improving HIV health outcomes for people who are or have been incarcerated
4. Improving HIV health outcomes by using telehealth services

The piloted intervention strategies will be evaluated by the Using Innovative Intervention Strategies to Improve Health Outcomes Among People with HIV – Evaluation Center (2iS EC).

Building Capacity to Improve Collecting and Reporting Viral Suppression Data to the Medicaid Adult Core Set (FY 2021–FY 2025)

This initiative seeks to develop strategies to build capacity among HIV surveillance and Medicaid programs for reporting high-quality HIV viral suppression data to comply with HIV Viral Load Suppression measure reporting on the Medicaid Adult Core Set. HRSA awarded one System Coordination Provider (SCP) to select, fund, and work with up to 10 RWHAP Part B recipients, as well as HIV surveillance and Medicaid programs to build capacity to report high-quality HIV viral suppression data to the CMS as part of the annual state Medicaid Adult Core Set reporting. The SCP will work with state RWHAP, HIV surveillance, and Medicaid programs to develop, implement, and evaluate strategies to improve the collection and reporting of HIV viral suppression data to the Medicaid Adult Core Set. In addition, the SCP will promote the dissemination and replication of effective strategies and lessons learned for adoption across other states.

Leveraging a Data to Care Approach to Cure Hepatitis C Within the Ryan White HIV/AIDS Program (FY 2020–FY 2022)

This demonstration project links people with hepatitis C virus (HCV) and HIV within the RWHAP to care by leveraging existing public health surveillance with clinical data systems. A Technical Assistance Provider (TAP) organization is funded to provide targeted technical assistance to up to 10 RWHAP Part A and/or Part B jurisdictions (i.e., state, city, and/or local health departments) to focus jurisdictional efforts on improving existing collaboration between their HCV surveillance systems and RWHAP care providers. The goal is to facilitate the sharing of data and identification of people with HIV and HCV who currently are not receiving care to improve collaboration between HCV and HIV surveillance systems and RWHAP providers. The TAP is working collaboratively with a contractor that will evaluate the overall effectiveness and impact of this project.

Building Capacity to Implement Rapid Antiretroviral Therapy Start for Improved Care Engagement in the Ryan White HIV/AIDS Program (FY 2020–FY 2023)

This initiative supports the implementation and evaluation of “rapid start,” or the accelerated entry into HIV medical care and rapid initiation of antiretroviral therapy (ART) for people with HIV who are newly diagnosed, new to care, or out of care. The program funds 15 implementation sites that have the capacity and infrastructure to support rapid start initiation, but have not yet been able to, with the goal of replicating and expanding successful rapid start models. This initiative is supported through funding from the U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health Minority HIV/AIDS Fund (MHAF).

Rapid ART Start in the RWHAP – Dissemination Assistance Provider (FY 2020–FY 2023)

This initiative funds a single organization that will develop a compendium of promising rapid ART interventions. The recipient will systematically identify and document innovative practices and procedures of rapid ART interventions and promote the dissemination of these models for replication among RWHAP and other providers serving people with HIV.

Improving Care and Treatment Coordination Focusing on Black Women With HIV (FY 2020–FY 2023)

This initiative supports 12 cooperative agreements for up to three years to design, implement, and evaluate the use of bundled interventions for Black women with HIV. Bundled interventions address sociocultural health determinants, expand the delivery and utilization of comprehensive HIV care and treatment services, support continuous engagement in care, and improve health outcomes for Black women with HIV in a culturally sensitive and responsive manner. All demonstration sites funded under this initiative will be required to collaborate with the Evaluation and Technical Assistance Provider (ETAP). This initiative is supported through funding from HHS MHAF.

Capacity Building in the RWHAP to Support Innovative Program Model Replication (FY 2019–FY 2022)

This initiative builds and enhances the capacity of RWHAP recipients and subrecipients to replicate evidence-informed models of care and interventions among RWHAP jurisdictions using previously developed program implementation tools, manuals, and other resources. In addition, this initiative increases system-level capacity for adopting these models of care and interventions that offer comprehensive, high-quality, culturally competent HIV screening, care, and treatment for people with HIV who are not fully engaged in primary care. By building capacity and encouraging the implementation or replication of effective models of care, the RWHAP will improve systems of care, reduce health disparities, and improve outcomes along the HIV care continuum. The recipient leads and supports the dissemination and replication of evidence-informed innovative models of care and interventions in Atlanta, GA; Jackson, MS; Las Vegas, NV; and New Orleans, LA.

Enhancing Linkage of Sexually Transmitted Infection and HIV Surveillance Data in the RWHAP (FY 2019–FY 2022)

This initiative improves linkage, re-engagement in care, and health outcomes for people with HIV in the RWHAP. HRSA funded a TAP to identify and fund up to five jurisdictions (state, city, and/or local health departments) to provide programmatic technical assistance for each jurisdiction to create or improve data sharing across its sexually transmitted infection (STI) and HIV surveillance systems, as well as an evaluation contractor to evaluate the overall effectiveness of the project. The TAP assesses jurisdictional barriers to data sharing across STI and HIV surveillance departments and develops tools to address these barriers. Improved data sharing will allow the matching of STI (i.e., chlamydia, gonorrhea, and/or syphilis cases) and HIV surveillance data, which will be used to improve the capacity of RWHAP clinics to prioritize resources for linking and re-engaging people with HIV into care. Improving the frequency of this data sharing will inform RWHAP clinics' decisionmaking around allocation of resources and services to improve health outcomes of people with HIV.

Strengthening Systems of Care for People With HIV and Opioid Use Disorder (FY 2019–FY 2022)

This initiative supports two SCPs that assist states in leveraging resources at the federal, state, and local levels for people with HIV and opioid use disorder (OUD). The SCP recipients work across 14 state partners, which include Arizona, Connecticut, Iowa, Kentucky, Louisiana, Maine, Massachusetts, New Jersey, Rhode Island, Utah, Vermont, Virginia, Washington, and West Virginia. This initiative will strengthen system-level coordination and networks of care between RWHAP recipients and other federal, state, and local entities funded to respond to the opioid epidemic to ensure people with HIV and OUD have access to behavioral health care, treatment, and recovery services. In addition, this initiative will build upon existing systems of care and treatment that will maximize cross-sector collaboration to achieve improvements in system-level coordination and to leverage available resources for improving the health outcomes of people with HIV and OUD.

Improving STI Screening and Treatment Among People Living With or At Risk for HIV (FY 2018–FY 2021)

This initiative supports the implementation and evaluation of clinical and system-level interventions to improve screening and treatment of STIs among low-income people with HIV or at risk for HIV. The recipient is partnering with clinical and systems-level institutions in Washington, DC, Florida, and Louisiana to implement, evaluate, and disseminate results and best practices of select interventions. This cooperative agreement is a collaborative effort between HRSA's HIV/AIDS Bureau and Bureau of Primary Health Care, with input from the Centers for Disease Control and Prevention's Division of STD Prevention.

Evidence-Informed Approaches to Improving Health Outcomes for People With HIV (FY 2018–FY 2021)

This initiative systematically identifies, catalogs, disseminates, and supports the replication of evidence-informed approaches and interventions to engage people with HIV who are out of care or at risk of not continuing HIV medical care. This initiative will identify acuity scales tools to determine the likelihood of people with HIV engaging or re-engaging in health care; identify data utilization interventions to actively identify and intervene with people with HIV who are out of care; identify innovative service delivery models; evaluate the costs associated with each approach or intervention; catalog the approaches; develop an implementation manual; disseminate the approaches and interventions; and support replication through technical assistance to RWHAP and HIV health care service providers. The ETAP is evaluating and promoting the effectiveness of these approaches and the design, implementation, utilization, cost, and health outcomes of the interventions.

Implementation of Evidence-Informed Behavioral Health Models to Improve HIV Health Outcomes for Black Men Who Have Sex With Men (FY 2018–FY 2021)

This initiative supports the implementation and evaluation of evidence-informed models of care designed to engage, link, and retain Black men who have sex with men (BMSM) in HIV medical care and supportive services. This initiative funds eight demonstration sites for three years and one ETAP for four years to implement and evaluate four evidence-informed interventions and/or models of care. These models of care include STYLE, a youth-focused case management intervention, Linkage to Care, and Project Silk; the models integrate behavioral health services with HIV care to address specifically the needs of BMSM and to improve health outcomes. The demonstration projects will disseminate lessons learned and effective models of care. The ETAP will coordinate the multisite evaluation, provide programmatic technical assistance to the demonstration sites, and lead publication and dissemination efforts.

Improving HIV Health Outcomes Through the Coordination of Supportive Employment and Housing Services (FY 2017–FY 2021)

This initiative supports the design, implementation, and evaluation of innovative interventions that coordinate HIV care and treatment, housing, and employment services to improve HIV health outcomes for low-income, uninsured, and underserved people with HIV in racial and ethnic minority communities. The goal of this coordinated services intervention is to decrease the impact of the social determinants of health—such as unmet housing or employment needs—that affect long-term HIV health outcomes for people with HIV affected by employment and housing instability in racial and ethnic minority communities. This SPNS Program initiative is supported through HHS MHAF.

Curing Hepatitis C Among People of Color With HIV (FY 2017–FY 2021)

This three-year initiative supports the expansion of HCV prevention, testing, care, and treatment capacity; improves the coordination of linkage and retention in HCV care and treatment for people with both HIV and HCV; and improves coordination with Substance Abuse and Mental Health Services Administration–funded substance use disorder (SUD) treatment providers to deliver behavioral health and SUD treatment support to achieve treatment completion and prevent HCV infection and re-infection. In addition, the initiative enhances state and local health department surveillance systems to increase their capacity to monitor acute and chronic infections of HIV and HCV in areas with high populations of low-income, uninsured, and underserved racial and ethnic minorities. This SPNS Program initiative is supported through HHS MHAF.

Using Evidence-Informed Interventions to Improve Health Outcomes Among People Living With HIV (FY 2016–FY 2021)

This E2i initiative identifies and provides support for the implementation of evidence-informed interventions to reduce HIV-related health disparities and improve health outcomes, including increasing retention in care, improving treatment adherence, and improving viral suppression for people with HIV. The Evidence-Informed Interventions Coordinating Center for Technical Assistance (E2i CCTA) and up to 24 RWHAP-funded recipients and subrecipients support the implementation of evidence-informed interventions. An Evidence-Informed Interventions Evaluation Center also will support this initiative.

Funding Considerations

Congress appropriated approximately \$25 million for the Part F SPNS Program in FY 2021.

