# Fact Sheet

## Assessing Care and Health Outcomes Among RWHAP Clients Who Do Not Receive Outpatient Ambulatory Health Services Through the RWHAP

The Ryan White HIV/AIDS Program (RWHAP) funds a comprehensive set of services for people living with HIV (PLWH) in the United States. Although each year providers funded by RWHAP submit client-level data to the HIV/AIDS Bureau (HAB) in the Health Resources and Services Administration (HRSA), there are still gaps in HRSA HAB’s knowledge about service use and process and clinical outcomes. Clinical data, including use of antiretroviral therapy (ART) and testing of viral load, are unavailable for clients who receive their HIV medical care outside the RWHAP system.

HRSA HAB has contracted with Mathematica Policy Research and its partners, Mission Analytics Group and Amenity Consulting, to collect qualitative and quantitative information from both RWHAP- and non-RWHAP-funded providers (either in person or remotely) to explore the health services and outcomes of these clients. This document answers some questions you may have about the study.

| Question | Answer |
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| Why was my site selected? | Your site was selected for our study because you provide HIV medical care to RWHAP clients. A RWHAP provider that provides non-medical services to your clients referred you to the study team. |
| What are the goals of this effort? | :   1. To understand health care use and health outcomes for RWHAP clients not receiving HIV medical care from a RWHAP provider. 2. To identify program improvement opportunities to better coordinate and deliver HIV medical care to PLWH who access services outside the RWHAP. |
| What kind of data will you collect? | We plan to conduct two primary data collection activities for this study, which have been approved by the New England Institutional Review Board and the Office of Management and Budget:   1. We will interview RWHAP program administrators, staff involved in providing care to RWHAP clients, and clients. *For non-RWHAP providers, we will only interview a medical provider involved in providing care to RWHAP clients.* 2. We will request clients’ medical record data, including demographic characteristics, service use, and health outcomes. If preferred, a study team member can abstract client-level data on your behalf. |
| Who will conduct the data collection? | Interviews will be conducted by a qualitative researcher from Mathematica Policy Research or Mission Analytics Group.  The study team will instruct your site in how to abstract the clients’ medical record data. If preferred, a chart abstractor from Amenity can do the abstraction on-site or remotely. |
| Why was I chosen to be interviewed? | You provide direct services to RWHAP clients and/or are familiar with the care models at your organization and referral partnerships with clinical non-RWHAP providers. |
| Who do you want to speak with? | In general we hope to speak with the practice’s medical director or other medical provider knowledgeable about the RWHAP clients served at the practice. |
| How long will interviews and chart abstraction take? | Individual interviews will be 30 to 60 minutes. We will work with site staff to facilitate chart abstraction. We anticipate it will take approximately 5 minutes per client chart to abstract the necessary data, with a maximum of 50 client charts per provider site. |
| What types of questions will you ask? | The interview will include several questions:   1. We will ask about services your organization provides. 2. We will ask about formal and informal partnerships and referral processes you have with RWHAP providers. 3. We will ask about barriers your clients face in accessing the care and services they need. 4. We will ask about opportunities to bridge gaps for HIV medical care, treatment, and support services among your RWHAP clients. |
| Will my answers be kept confidential? | We will maintain confidentiality by aggregating information from interviewees across all sites. We will not link your name and organization to your information. We will ask your permission before attributing any quotes to you. |
| What does the chart review entail? | We will seek the following medical record data for up to 50 RWHAP clients at your clinic:   1. Demographics such as age, gender, race, ethnicity, and health insurance 2. Services such as clinical encounters and ART prescription 3. Health status and health outcomes such as year of HIV diagnosis and viral load value   To ensure clients’ privacy and security of sensitive data, we are not requesting personally identifiable information. We will work with you to develop a data use agreement and identify the least burdensome way to abstract the data. |
| How will you use the data? | We will present the aggregated findings from the interviews and charts to HRSA HAB and summarize the results in journal manuscripts. |
| What are the benefits to my participation? | Your participation will help HRSA HAB learn how RWHAP clients access HIV medical care and develop strategies for improving and monitoring health outcomes.  Your organization will receive a $1,000 honorarium if the project team can perform chart abstractions of clients’ medical records. |