### Ending the Epidemic Task Force Recommendation Form



#### **COMPLETE**

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

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Q2: Title of your recommendation NYS Expanded Scope of New Access Points

HRSA (FQHC) Mobile Health Units

#### Q3: Please provide a description of your proposed recommendation

New York State DOH should help to deepen the reach of HRSA-funded mobile medical units by offering approval for currently funded units to extend beyond HRSA catchment areas. In addition, DOH should provide funding to support current primary care expansion efforts ie; CHCANYS Primary Care Emergency Prepardness Network and faciliate Medicaid reimburstment for these expanded services out of predetermined catchment areas.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Identifying persons with HIV who remain undiagnosed and linking them to health care

Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply) Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

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Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing program,

Other (please specify)

This recommendation would strengthen existing mechanisms to allow for HRSA funded units to access state Medicaid funds when those units go out of scope and catchment areas.

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Permitted under current law

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

### Q9: What are the perceived benefits of implementing this recommendation?

State Medicaid funds could support the expansion of comprehensive primary and preventive medical health care services and increase access to comprehensive, culturally competent, quality primary health care services and improve the health status of medically underserved and vulnerable populations. NYS has an opportunity to complement HRSA funded mobile units, extending the reach, providing more HIV testing and linkage to care for patients who might not otherwise find their way to a community health clinic.

Q10: Are there any concerns with implementing this recommendation that should be considered?

This will require state and federal communication.

## Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

More research is needed to determine the cost and ultimately there will be a cost savings to the state by reaching the same high-need individuals and providing primary and preventive care.

## Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Emergency room visits and hospitalizations will be reduced.

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

Undiagnosed HIV+ individuals,

HIV+ individuals not currently linked to care including - but not limited to - homeless.

# Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Invest in primary care readiness project

Increase and improve state, federal collaboration about this, and other, initiatives.

# Q15: This recommendation was submitted by one of the following

Member of the public