



NATIONAL LGBTQIA+ HEALTH  
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE

# The role of health centers in ending the HIV epidemic

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The National LGBTQIA+ Health Education Center, The Fenway Institute  
Boston, MA

# Our roots

## Fenway Health

- Independent 501(c)(3) FQHC
- Founded 1971
- Mission: To enhance the wellbeing of the LGBTQIA+ community as well as people in our neighborhoods and beyond through access to the highest quality health care, education, research, and advocacy
- Integrated primary care model, including HIV and transgender health services

## The Fenway Institute

- Research, Education, Policy



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# LGBTQIA+ Education and Training

The National LGBTQIA+ Health Education Center offers educational programs, resources, and consultation to health care organizations with the goal of providing affirmative, high quality, cost-effective health care for lesbian, gay, bisexual, transgender, queer, intersex, asexual, and all sexual and gender minority (LGBTQIA+) people.

- Training and Technical Assistance
- Grand Rounds
- Online Learning
  - Webinars, Learning Modules
  - CE, and HEI Credit
- ECHO Programs
- Resources and Publications

[www.lgbtqiahealtheducation.org](http://www.lgbtqiahealtheducation.org)

[education@fenwayhealth.org](mailto:education@fenwayhealth.org)



**Creating a Transgender Health Program  
at Your Health Center:**

From Planning to Implementation

SEPTEMBER 2018



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# Technical questions?

- Please call Zoom Technical Support: 1.888.799.9666 ext 2
- You can contact the webinar host using the chat function in Zoom. Click the “Chat” icon, and type your question.
- Alternatively, e-mail us at [education@fenwayhealth.org](mailto:education@fenwayhealth.org) for less urgent questions.

# Sound issues?

- Ensure your computer speakers are not muted.
- If you cannot hear through your computer speakers: Navigate to the bottom toolbar on your screen, go to the far left, and click the arrow next to the phone icon.
- Choose “I will call in.”
- Dial the phone number and access code.



# When the webinar concludes:

- Close the browser, and an evaluation will automatically open for you to complete.
- We very much appreciate receiving feedback from all participants.

# The EHE initiative and the role of health centers in HIV prevention



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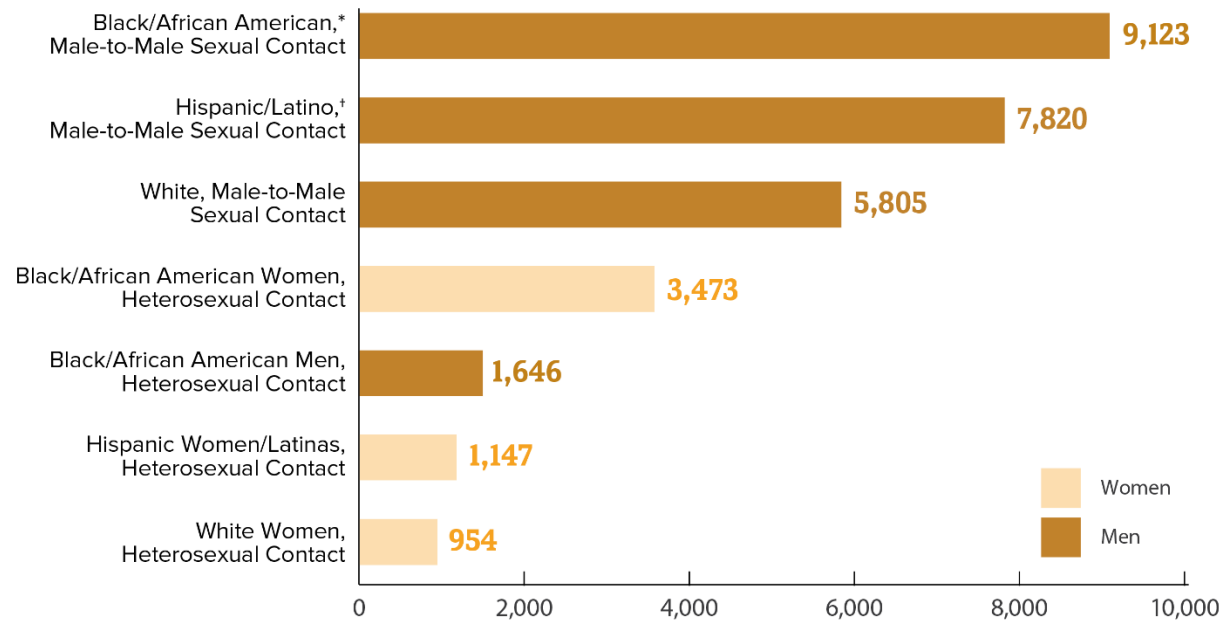
# Learning objectives

1. Describe the importance of integrating HIV prevention with PrEP into health center workflow.
2. Explain the unique perspectives of health centers on the challenges and successes of PrEP program development.
3. Apply strategies to access resources, training and technical assistance to support PrEP program development.

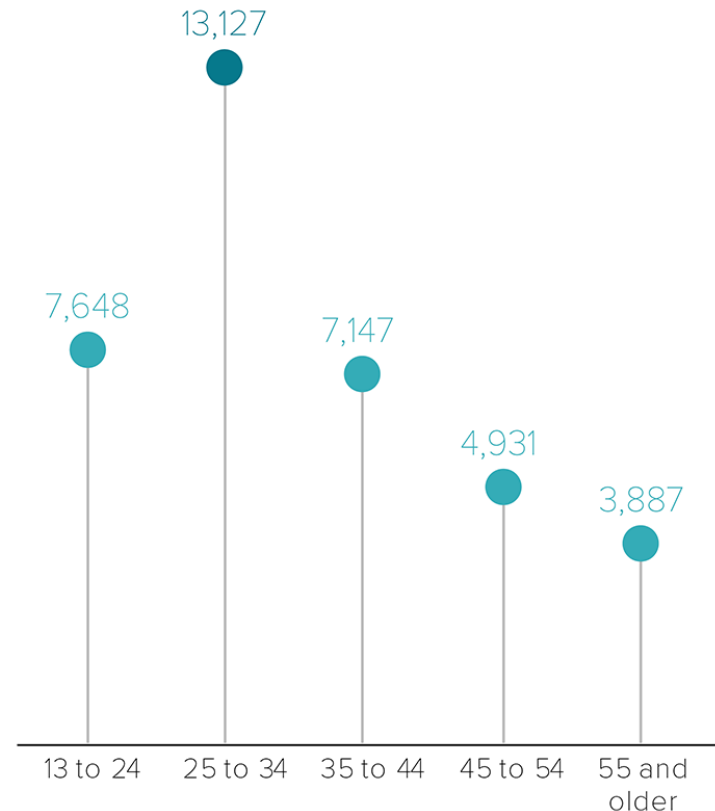


# A snapshot of HIV in the US

## New HIV diagnoses for the most-affected populations, 2019

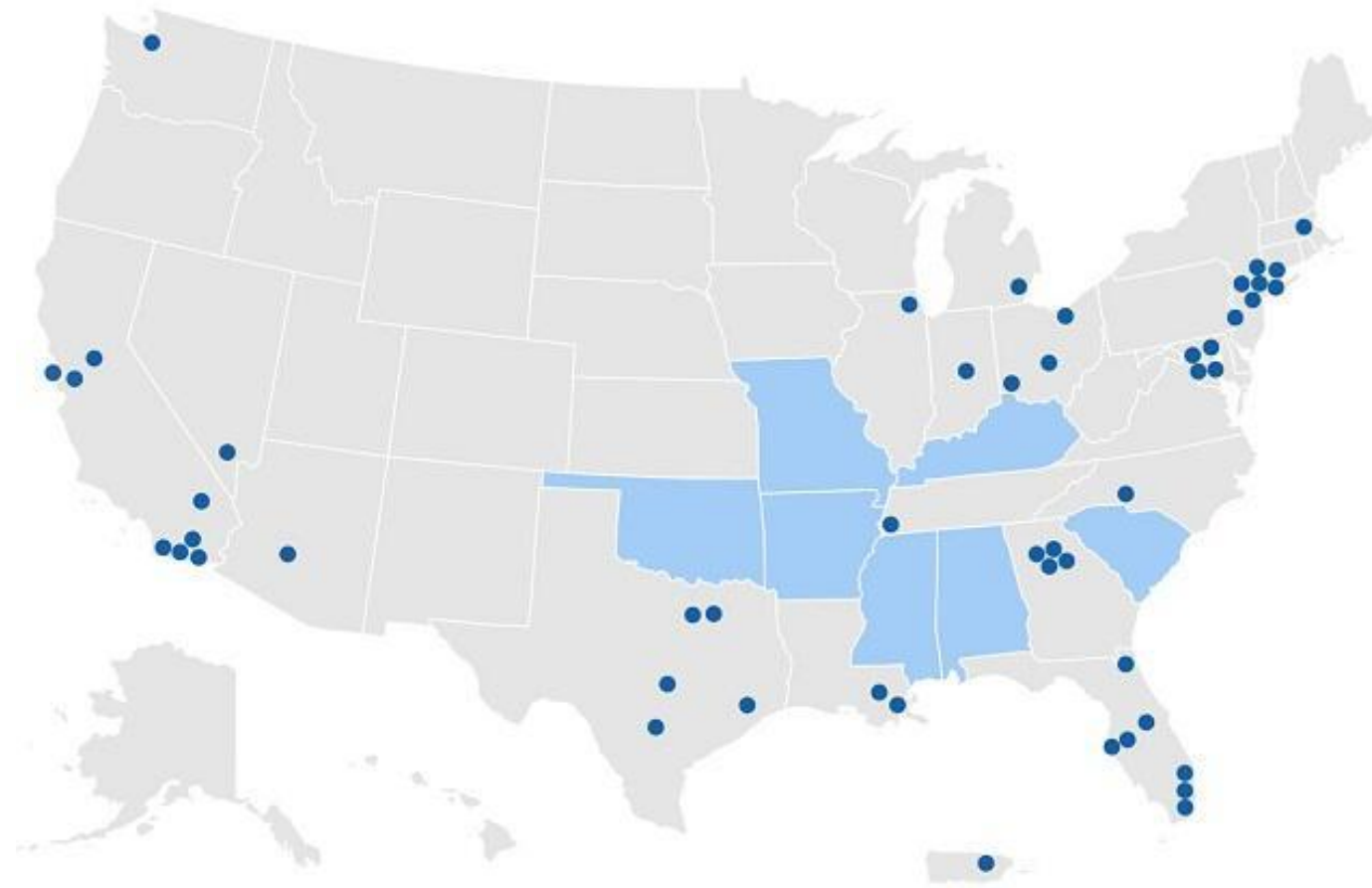


## New HIV diagnoses by age, 2019



Basic Statistics. CDC. 2021.

# Most new HIV infections occur in a handful of locations



HRSA. Ending the HIV epidemic: A plan for America. 2019.

**75%**  
reduction  
in new HIV  
infections  
in 5 years  
and at least  
**90%**  
reduction  
in 10 years.



**Diagnose** all people with HIV as early as possible.

**Treat** people with HIV rapidly and effectively to reach sustained viral suppression.



**Prevent** new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs).

**Respond** quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.



<https://files.hiv.gov/s3fs-public/ending-the-hiv-epidemic-flyer.pdf>



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# Pillar 3: Prevent

**PrEP (pre-exposure prophylaxis):** The use of antiretroviral medication by people without, but at high risk for, HIV in order to prevent infection.

The only versions of PrEP currently approved in the United States are combination tablets of the antiretrovirals tenofovir and emtricitabine:

- Tenofovir disoproxil fumarate/emtricitabine (TDF/FTC, Truvada)
- Tenofovir alafenamide/emtricitabine (TAF/FTC, Descovy)

The FDA's decision about long-acting injectable cabotegravir for PrEP is anticipated by early 2022.

# Why should HIV prevention be incorporated into health centers' workflow?

1. Preventive care is a core activity of health centers.
2. Health centers are on the front lines of care; their patients include people with undiagnosed HIV infection, diagnosed but not treated HIV infection, and those who could benefit from PrEP.
3. Expanding access to PrEP in health centers is a priority of the HRSA/BPHC.

# Implementing a PrEP program

Models vary, but all must address 3 core tasks:

1. Identifying and engaging PrEP candidates
2. Completing the initial and follow-up clinical visits
3. Accessing financial assistance programs, when necessary



# For whom is PrEP indicated?

GROUP	RISK FACTORS	ESTIMATED POPULATION SIZE
<b>Men who have sex with men (MSM)</b>	<ul style="list-style-type: none"><li>- Bacterial STI in the past 6 months</li><li>- Anal sex without a condom in the past 6 months (outside of a monogamous relationship with an HIV-uninfected man)</li></ul>	~814,000
<b>Heterosexual people</b>	<ul style="list-style-type: none"><li>- Gonorrhea or syphilis in the past 6 months</li><li>- Sex without a condom in the past 6 months with a partner who has a higher risk of HIV (e.g., bisexual man, PWID) or who is known to have HIV</li></ul>	~258,000
<b>People who inject drugs (PWID)</b>	<ul style="list-style-type: none"><li>- Sharing injection equipment</li></ul>	~73,000

Preexposure prophylaxis for prevention of HIV infection in the United States. CDC. 2018.



# Clinically, PrEP is straightforward

- **Baseline laboratory testing:** HIV, syphilis, gonorrhea, chlamydia, hepatitis B, hepatitis C, pregnancy
- **Prescribe:** TDF/FTC or TAF/FTC, fixed-dose combinations
- **Monitor:** Every-3-month check-ups for labs, tolerability, adherence, risk assessment

Preexposure prophylaxis for prevention of HIV infection in the United States. CDC. 2018.



# Monitoring PrEP

At least every 3 months	At least every 6 months
HIV test, preferably antibody/antigen assay	Serum creatinine to estimate creatinine clearance
STI screening (syphilis serology and 3-site gonorrhea/chlamydia NAAT) for MSM	STI screening for heterosexually-active PrEP users (syphilis serology and genital gonorrhea NAAT)
Urine pregnancy test in those who could become pregnant	

**At most visits:** Assess tolerability and adherence, re-assess HIV risk and need for PrEP

Preexposure prophylaxis for prevention of HIV infection in the United States. CDC. 2018

# Overcoming concerns

- PrEP is beyond the scope of a health center
  - **PrEP is preventive care, with a grade A recommendation from the USPSTF.**
  - **PrEP is like oral contraception, but for HIV.**
- My patients cannot afford PrEP.
  - **With access to drug assistance programs, most patients can obtain the medication.**
- I don't have time for PrEP.
  - **Multiple role groups can collaborate to facilitate PrEP and decrease the burden on any one person.**



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# PrEP

## ACTION KIT

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## Managing PrEP consists of three steps [9].

- 1 Determine eligibility and obtain baseline laboratory studies:
  - a. Confirm that the patient does not have HIV by obtaining a baseline HIV test, preferably an antigen-antibody assay. Ask all patients about symptoms of acute HIV infection in the prior four weeks (e.g., fever, pharyngitis, lymphadenopathy, rash); those who report symptoms should have an HIV-1 RNA PCR (i.e., viral load) prior to starting PrEP.
  - b. Estimate the creatinine clearance by obtaining a serum creatinine.
  - c. Assess hepatitis B status by obtaining a hepatitis B surface antibody, hepatitis B core antibody, and hepatitis B surface antigen. People without evidence of chronic infection with, or immunity to, hepatitis B should be vaccinated. Both tenofovir and emtricitabine are active against hepatitis B infection. Pre-existing hepatitis B is not a contraindication to PrEP with TDF/FTC or TAF/FTC but may necessitate continuation of the medication even when it is no longer needed for HIV prevention.
  - d. Assess hepatitis C status by obtaining a hepatitis C antibody.
  - e. Assess pregnancy status by obtaining a urine pregnancy test in those who could become pregnant. TDF/FTC is not contraindicated in the setting of pregnancy. Risk of HIV acquisition increases around the time of pregnancy, so PrEP may be particularly beneficial for people who are or may become pregnant. There are no proven adverse

## Choosing an agent for PrEP

Clinical feature	Favors
Pre-existing renal and/or bone disease	TAF/FTC
Patient's risk for HIV arises from anal sex	TDF/FTC or TAF/FTC
Patient's risk for HIV arises from receptive vaginal sex and/or injection drug use	TDF/FTC
Pre-existing chronic hepatitis B	TDF/FTC or TAF/FTC
Overweight, obesity, or dyslipidemia	TDF/FTC



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## Common Clinical Questions

### Is PrEP worthwhile for the seronegative partner in a serodifferent relationship?

A serodifferent relationship is a sexual relationship in which one partner is living with HIV and one is not. Whether PrEP is beneficial in this setting depends upon the treatment status of the partner living with HIV and the potential for other HIV exposures on the part of the seronegative partner.

- Virologic suppression with antiretroviral therapy prevents sexual transmission of HIV [18, 19]; thus, if the partner living with HIV is durably virologically suppressed on treatment and the seronegative partner is not otherwise at risk for HIV (i.e., no other sexual partners or injection drug use), PrEP for the seronegative partner would not be beneficial.
- If the partner living with HIV is not durably virologically suppressed on treatment, the virologic suppression status is unknown or not confirmed, or if the seronegative partner has sexual contacts outside the relationship and/or shares injection drug use equipment, PrEP may be beneficial.



# Additional resources

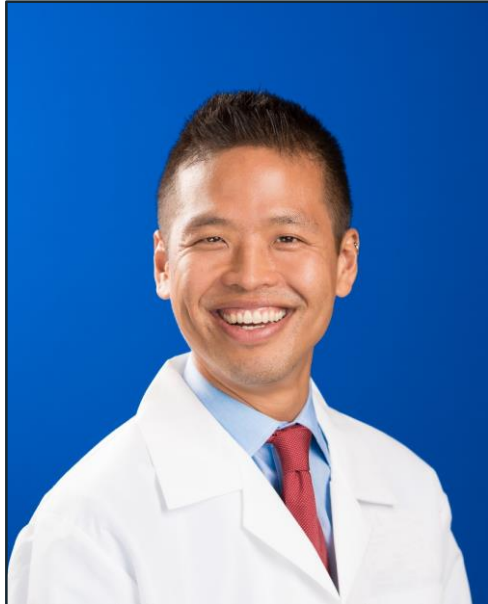
- CDC PrEP guidelines: <https://www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2017.pdf>
- Ending the HIV Epidemic Initiative: <https://www.hrsa.gov/ending-hiv-epidemic>
- Ready, Set, PrEP program: <https://www.getyourprep.com/>
- National LGBTQIA+ Health Education Center: [www.lgbtqiahealtheducation.org](http://www.lgbtqiahealtheducation.org)



# Summary: HIV prevention in health centers

- PrEP is relevant to health centers' work and feasible to implement.
- There are many resources to support PrEP provision in health centers.

# Meet our panelists



**James Huang MD, FAAFP**  
Core Faculty, Site Lead for Upper Cardozo Health Center, Family Medicine Specialty Director



**Sudha Nagalingam MD, FACP**  
Medical Director - El Rio Special Immunology Associates





Healthier You. Healthier Communities.



# PREP AT UNITY

# Who is Unity Health Care?

- Started as Health Care for the Homeless in 1985
- Has grown to include 26 sites
  - 9 community health centers (FQHC)
  - 2 school-based centers
  - 2 clinics in the DC jail
  - multiple clinic sites in homeless shelters, and a mobile van unit
- Cares for >25% of the city's Medicaid population
- Sites in all 8 Wards of the city



# PrEP network at Unity

- Identify PrEP champions at each site
  - Support ongoing education at their site
  - Troubleshoot any issues in workflows, STI testing
  - Generate ideas to expand PrEP usage and STI testing and treatment in general
- PrEP Train the Trainer training from Fenway
- Monthly 30 minute meetings



# PrEP Champions

- Developed and implemented self swab workflow



## What is Self-swabbing:

In certain populations, urine-based screening for gonorrhea and chlamydia will miss 70% to 95% of infections. Self-swabbing is a method where patients self-collect samples for STI screening. Patients are empowered to collect their own specimen from anatomical areas of exposure: vagina, pharynx and rectum. Self-swabbing is patient-centered because it offers privacy and autonomy; in addition, research demonstrates self-collected specimens have equivalent or better detection rates compared to provider-collected specimens. Some patients familiar with self-swabbing may ask to “do a selfie” or “take a selfie”.

Self-swabbing is not required; sample(s) can be collected by provider as part of an in-person visit if that is the patient’s preference.

## MA workflow:

1. Print out and keep copies of *Self-Swab Collection Instructions* (the second page of this document) at work station. Instructions are in English and Spanish.
2. Select the correct specimen container(s) for each test ordered by provider or requested by patient during triage intake. Refer to *STI Collection Quick Reference*.
3. Label the specimen container(s) before giving the kit(s) to patient. Write the source (i.e. Rectal, Vaginal or Pharyngeal) on each swab.
4. Give patient collection kit(s) and self-swab collection instructions in order for patient to obtain the samples themselves. Instruct patient to collect samples in restroom or exam room, depending on the anatomical location being sampled.
5. Instruct patients to:
  - a. Wash hands before self-swabbing
  - b. Read instructions and collect the specimen
  - c. Wash hands after self-swabbing
  - d. Return the sealed test tube(s) as instructed by the MA/Lab
  - e. Discard self-swabbing instruction sheet in trash

## For more information:

<https://californiaptc.com/extragenital-screening/>  
<https://www.ncsddc.org/wp-content/uploads/2019/09/Three-Sites-a-Charm-Webinar-8.29.19.pdf>

Created March, 2021

# Standardizing PrEP in EHR

The screenshot shows an EHR interface with a sidebar on the left containing a tree view of medical categories. The main area is titled 'Sexual Reproductive Health/PrEP' and has tabs for 'General' and 'PrEP'. A 'Structured' data entry window is open, showing a table with columns for 'Name', 'Value', and 'Notes'. The table contains the following items:

Name	Value	Notes
<input type="checkbox"/> Indication for PrEP:		X
<input type="checkbox"/> Most recent negative HIV tes		X
<input type="checkbox"/> Acute HIV infection: Flu like s		X
<input type="checkbox"/> PEP indicated: Within the pas		X
<input type="checkbox"/> Previous Hep B results:		X
<input type="checkbox"/> Most recent negative Hep C t		X
<input type="checkbox"/> Baseline STI screening at an:		X
<input type="checkbox"/> Known renal impairment?		X
<input type="checkbox"/> For female bodied patients, p		X
<input type="checkbox"/> For female bodied patients, p		X
<input type="checkbox"/> Patient Education and Follow		X
<input type="checkbox"/> Adolescent counseling provid		X
<input type="checkbox"/> Notes:		X

# Incorporating PrEP into workflows

HPI ▸ Notes:STI Testing TEST, Peds 📄 Apr 19, 2020 (12 mo F) 📄 Acc No. 300225740 Appt: (04/19/2021 ... ✕)

▾ 
  ▾

Name	Value	Notes
<input type="checkbox"/> Desires STI testing due to:	▾ ✕	✕
<input type="checkbox"/> Social Hx: Sexual History Updated:	▾ ✕	✕
<input type="checkbox"/> Social Hx: Family Planning - One Key Que ...	▾ ✕	✕
<input type="checkbox"/> Counseled on PrEP for HIV Prevention?	▾ ✕	✕
<input type="checkbox"/> Adolescent counseling provided (Under ag ...	▾ ✕	✕
<input type="checkbox"/> Notes:	▾ ✕	✕

# PrEP access

- We have three 340b pharmacies that have the medications in stock to service patients in need of PrEP or PEP.
- All prescriptions for PrEP should be issued to Unity Pharmacies for 30 day supply.
- Include notes on the prescription field “Rapid start PrEP or PEP”.
- The pharmacy will bill first any existing insurance coverage and ensure that the patient receives the medication at no cost.
- Uninsured patients will receive the medication also at no cost and the pharmacy will track those prescriptions and provide monthly reporting to be billed to the grant.



# PrEP team

- PrEP Health coach and patient navigator
  - On-site/remote counseling for patients
  - Complete PAs for medication
  - Checking in on adherence of patients on PrEP
  - Ensuring patients on PrEP are coming in for routine testing
  - Population health – contacting patients who have tested positive for certain STIs and counseling
  - Outreach in the community





# Challenges

- Challenges in collecting SOGI data
- Increasing awareness of PrEP in all communities
  - Myth that PrEP is only for MSM
- Due to the pandemic, less opportunities for outreach events
- Health centers' focused on covid-19 testing and vaccination efforts





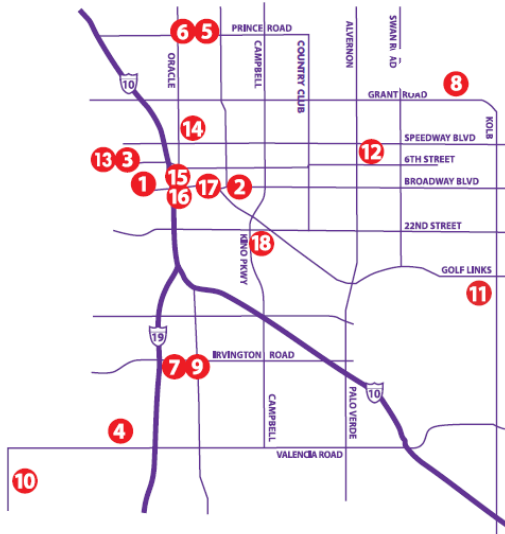
# Preventing HIV with PrEP

Sudha Nagalingam, MD

Dec 2021



# More than just healthcare



- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><b>1</b> Congress Health Center - Medical / Dental<br/>839 W. Congress St.</li> <li><b>2</b> Broadway Health Center<br/>1101 E. Broadway Blvd.</li> <li><b>3</b> Special Immunology Associates (SIA)<br/>1701 W. St. Mary's Rd.</li> <li><b>4</b> Southwest Health Center - Medical / Dental<br/>1500 W. Commerce Ct.</li> <li><b>5</b> Northwest Health Center<br/>320 W. Prince Rd.</li> <li><b>6</b> Northwest Dental<br/>340 W. Prince Rd.</li> <li><b>7</b> OB / GYN Associates<br/>225 W. Irvington Rd.</li> <li><b>8</b> Birth &amp; Women's Health Center<br/>5979 E. Grant Rd., Suite 107</li> <li><b>9</b> El Pueblo Health Center<br/>101 W. Irvington Rd.</li> </ul> | <ul style="list-style-type: none"> <li><b>10</b> Pascua Yaqui Health Center<br/>7474 S. Camino de Oeste</li> <li><b>11</b> El Rio at CODAC<br/>630 N. Alvernon Way</li> <li><b>12</b> St. Mary's Wound Center<br/>1802 W. St. Mary's Rd.</li> <li><b>13</b> St. Elizabeth's Health Center (sub-recipient)<br/>140 W. Speedway Blvd.</li> <li><b>14</b> El Rio Health Center Foundation / Administration<br/>Manning House 450 W. Paseo Redondo</li> <li><b>15</b> El Rio Diagnostic Laboratory<br/>450 W. Paseo Redondo</li> <li><b>16</b> Health on Broadway<br/>1 W. Broadway Blvd.</li> <li><b>17</b> Cherrybell Health Center<br/>Coming late 2018<br/>1538 E. 22nd St.</li> </ul> |
|---|--|



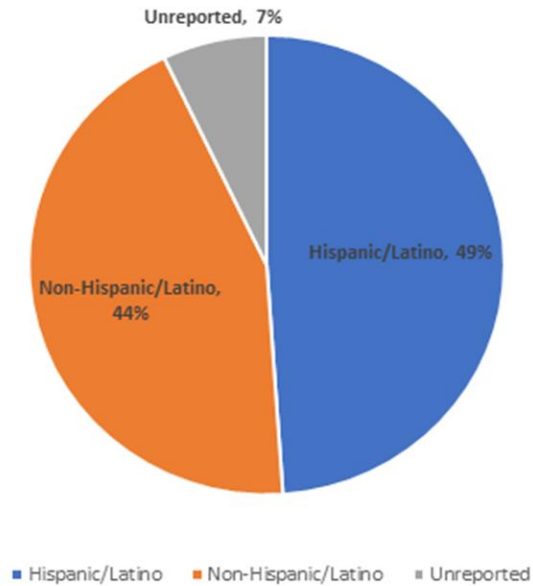
# Our organization

- ❑ Federally Qualified Health Center
- ❑ Patient Centered Medical Home Level 3 ( NCQA ) ,  
JC accredited
- ❑ Do not refuse patients regardless of their ability to  
pay
- ❑ Utilizes a sliding fee scale for self-paying patients
- ❑ Healthcare Equality Index (HEI) Leader in LGBTQ  
Healthcare Equality by the Human Rights  
Campaign.
- ❑ Silver status as a Health Center Quality Leader  
(HRSA).

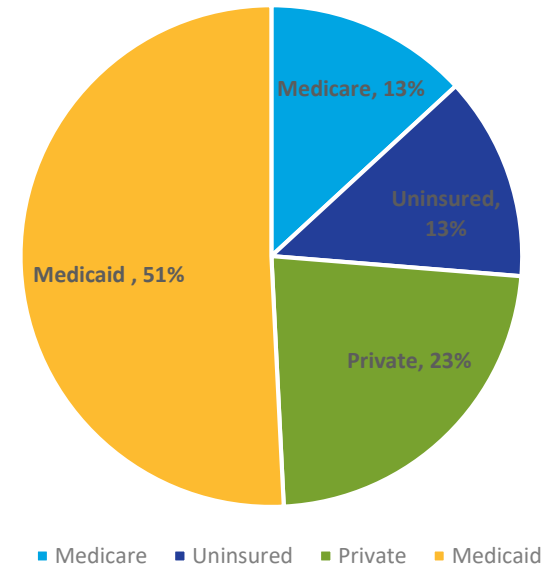


# Our patients

Patients by Ethnicity, El Rio Health  
UDS, 2020



Patients by Insurance Type, El Rio Health  
UDS, 2020



**2020 Total Number of Patients Served = 112, 700**  
**Encounters Provided = 425, 800**

# El Rio SIA – History

- Began in 1991 with 1 provider and one nurse
- **1500 patients living with HIV** are actively in care
- Integrated Outpatient Ambulatory Care & Behavioral Health License & Program
- **HRSA Grantee** for **Ryan White Part C** funds since **1991**, as well as a contract with **ADHS Ryan White Part B** for over **24 years**
- Previously funded by **SAMHSA** for prevention for positives programming, integration of Behavioral Health into an HIV/AIDS Clinic, and Arizona Border HIV/AIDS Coalition

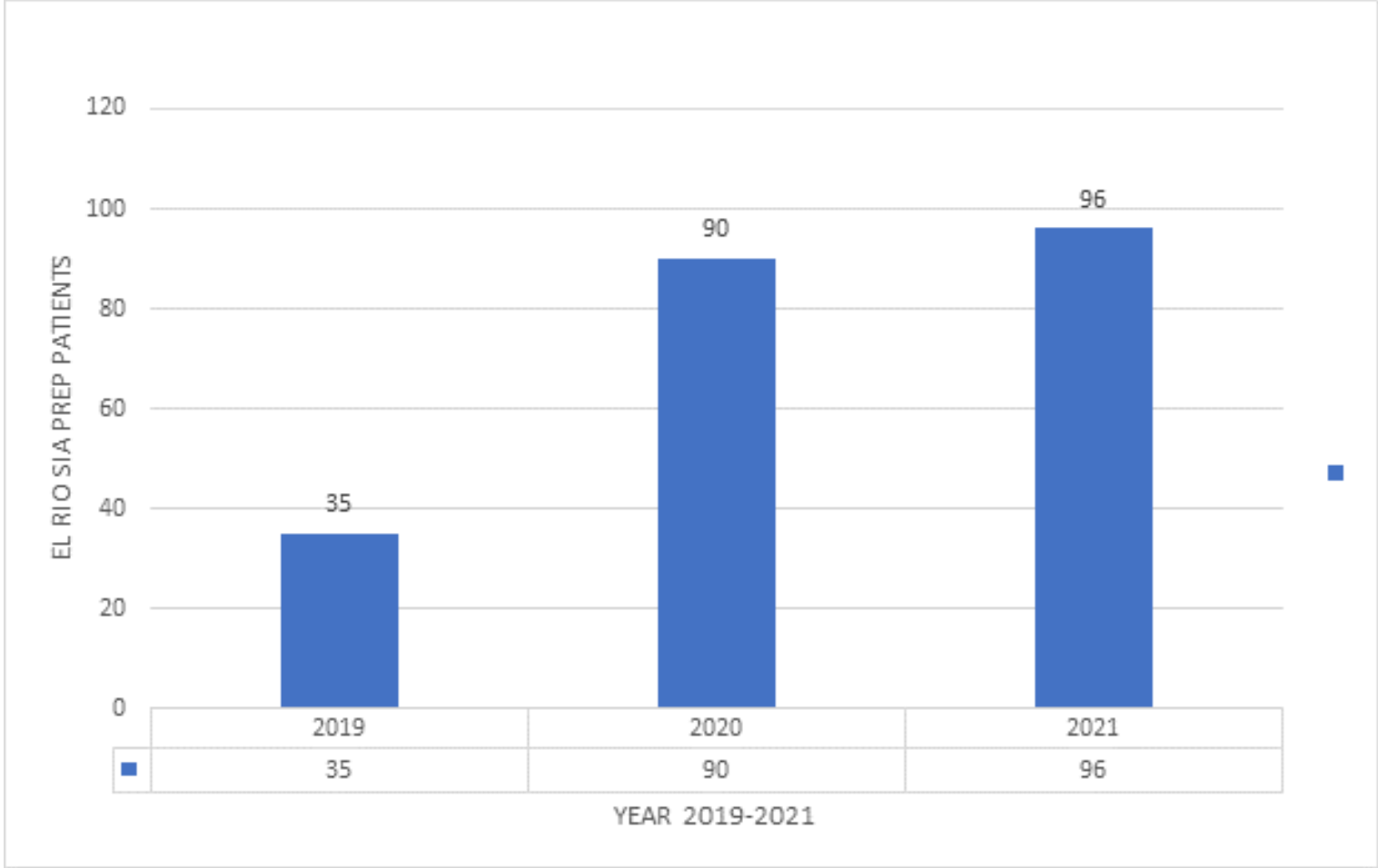
# SIA Current Program Funding

- **2018 ~ \$4,411,041**
  - Total Grants: \$3,491,878
    - Ryan White Part B (ADHS subrecipient)\*
    - Ryan White Part C (HRSA recipient)
    - NYU Langone Hospital – Brooklyn - Ryan White Part F Dental (Subrecipient)
  - Total Revenue/Program Income: \$919,163

*\*Requested \$3,028,384 from RWPB in recent RFP, an additional \$649,025*



# PrEP referrals



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HEALTH



# PrEP staffing

- 6 providers (4 MDs, 2APPS)
- 2 PrEP navigators
  - Entry into care
  - Insurance eligibility
  - Copay assistance
  - Retention outreach
- 2 LPNs
- Program Manager



# Services offered

- Primary care
- Specialty Behavioral Health
- Health Care for the Homeless (330h) programming
- Dental
- Laboratory
- Radiology
- Pharmacy
- Wellness classes



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Thank you

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The National LGBTQIA+ Health Education Center provides educational programs, resources, and consultation to health care organizations with the goal of optimizing quality, cost-effective health care for lesbian, gay, bisexual, transgender, queer, intersex, asexual, and all sexual and gender minority (LGBTQIA+) people.

The Education Center is part of The Fenway Institute, the research, training, and health policy division of Fenway Health, a Federally Qualified Health Center, and one of the world's largest LGBTQIA+ focused health centers.

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 [www.lgbtqiahealtheducation.org](http://www.lgbtqiahealtheducation.org)

 [www.acponline.org/fenway](http://www.acponline.org/fenway)