



# County of San Mateo Health System

## Persons Living with HIV/AIDS, San Mateo County Comparison

As of December 31, 2014 there were 1,460 persons living with HIV/AIDS in San Mateo County<sup>1</sup>. This is a slight decrease of 1 case (<1%) over the 1,461 cases reported as of December 31, 2013.

### Demographic and Risk Characteristics of Persons Living with HIV/AIDS, San Mateo County (2014) and California (2013)

	San Mateo County <sup>1</sup>		California <sup>2</sup>	
	(N = 1,460) Number	%	(N = 120,480) Number	%
<b>Gender</b>				
Male	1217	83.4	105,344	87.4
Female	229	15.7	14,131	11.7
Transgender	14	1.0	1,005	0.8
<b>Race/Ethnicity</b>				
White	705	48.3	52,212	43.3
Black	188	12.9	21,492	17.8
Hispanic	397	27.2	39,859	33.1
Asian/Pacific Islander	146	10.0	4,716	3.9
American Indian/Alaskan Native	3	0.2	475	0.4
Multi-Race/Other/Unknown	21	1.4	1,726	1.4
<b>Current Age*</b>				
0 - 19	3	0.2	2,662	2.2
20 - 29	85	5.8	27,021	22.4
30 - 39	176	12.1	45,993	38.2
40 - 49	314	21.5	31,639	26.3
50+	881	60.4	13,165	10.9
<b>Exposure Category</b>				
MSM	886	60.7	79,523	66.0
IDU	151	10.3	8,463	7.0
Heterosexual contact	174	11.9	10,909	9.1
MSM/IDU	77	5.3	9,171	7.6
Other Risk/Not Specified	172	11.8	11,287	9.4

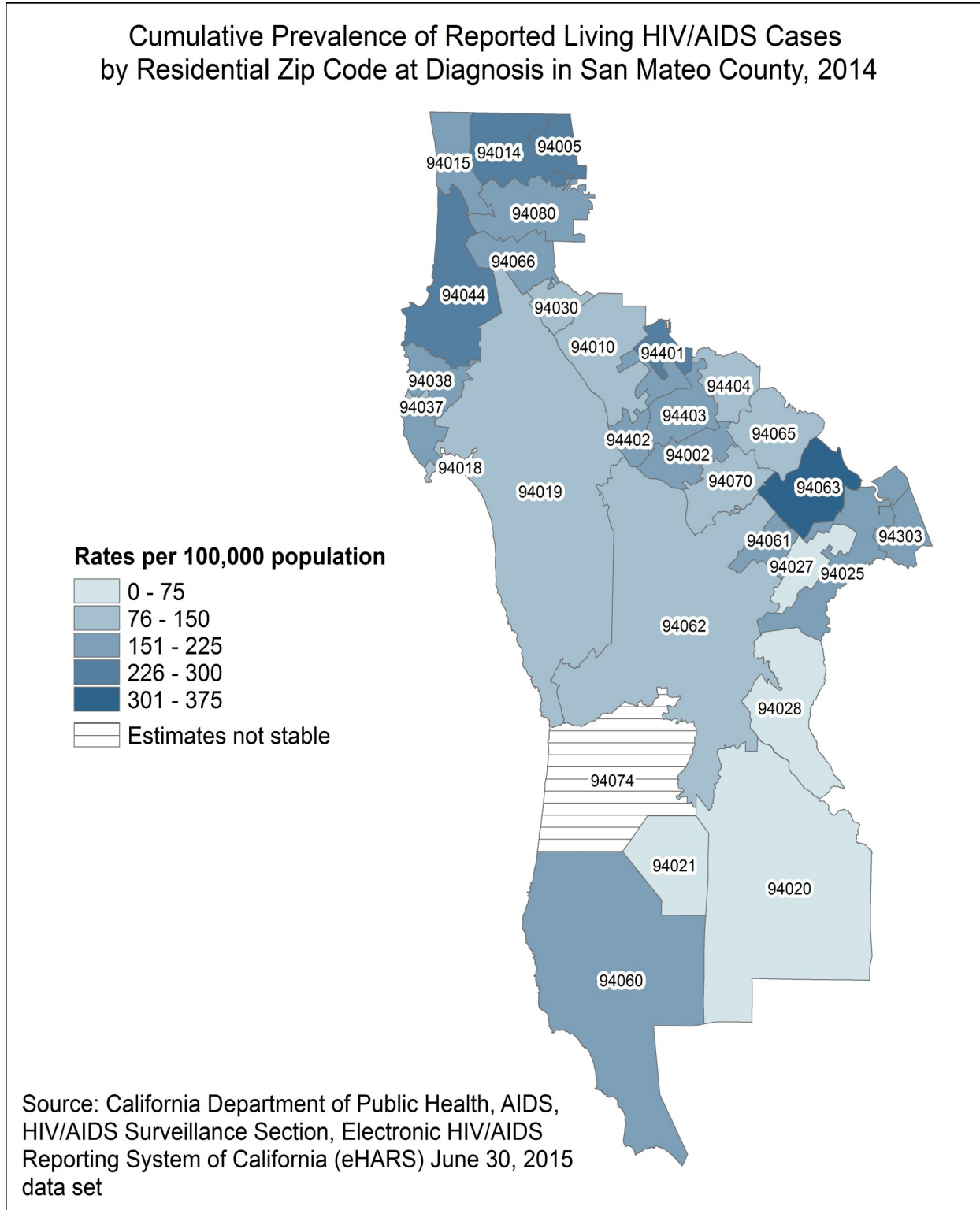
\*N=1459; one individual with missing age information.

<sup>1</sup> California Department of Public Health, Office of AIDS, HIV/AIDS Surveillance Section. Electronic HIV/AIDS Reporting System of California (eHARS) June 30, 2015 data set.

<sup>2</sup> California Department of Public Health, Office of AIDS, HIV/AIDS Surveillance Section. Year 2013 data included as 2014 data is not yet available.

## Geography of HIV Cases, San Mateo County

The highest rate where living HIV/AIDS cases resided when they were diagnosed is zip code 94063 (Redwood City/North Fair Oaks). Other zip codes with high rates are 94005 (Brisbane), 94014 (Colma), 94044 (Pacifica), and 94401 (San Mateo).



## Characteristics of Newly Diagnosed HIV Cases

San Mateo County continues to see the vast majority of newly reported HIV cases in males. Latinos continue to be the highest number of cases based on race/ethnicity, followed by Asian/Pacific Islanders. Whites saw a decrease from 32% of the cases in 2013 to only 19% in 2014. Risk behavior continues to remain MSM, with an increase being observed in 2014. Notable is the continued low rate of IDU (0%). Other risk/not specified risk decreased this year after last year's increase, and heterosexual contact stayed fairly constant.

**Characteristics of Newly Reported HIV Cases, San Mateo County, 2010 - 2014<sup>1</sup>**

	2010	2011	2012	2013	2014
<b>Total Number</b>	73	83	57	47	47
	Percent	Percent	Percent	Percent	Percent
<b>Gender</b>					
Male	76%	90%	84%	92%	89%
Female	19%	10%	16%	6%	4%
Transgender	4%	0%	0%	2%	6%
<b>Age at Diagnosis</b>					
0 - 19 Years	2%	4%	0%	2%	2%
20 - 29 Years	28%	19%	28%	26%	34%
30 - 39 Years	28%	29%	18%	23%	32%
40 - 49 Years	30%	34%	40%	26%	26%
50+ Years	12%	14%	8%	23%	6%
<b>Race/Ethnicity</b>					
White	37%	29%	32%	32%	19%
Black	9%	11%	12%	6%	11%
Latino/Hispanic	34%	31%	35%	36%	38%
Asian/Pacific Islander	19%	28%	21%	19%	28%
Multi-Race/Other/ Unknown	0%	1%	0%	6%	4%
<b>Exposure Category</b>					
MSM	61%	57%	65%	70%	79%
IDU	4%	2%	2%	2%	0%
Heterosexual Contact*	8%	5%	17%	2%	4%
MSM/IDU	1%	6%	0%	0%	2%
Other Risk/ Not specified	25%	30%	16%	25%	15%

<sup>1</sup>San Mateo County data are reported through June 30, 2015 from the electronic HIV/AIDS Reporting System (eHARS).

\* sex with MSM, IDU or known HIV infected person

## Key Points for San Mateo County

The San Mateo County STD/HIV Program did not experience a decrease in funding for the first time since 2011-2012. From Fiscal Year 2011-2012 through 2014-2015, we experienced a decrease of 42.3% (\$868,187). This year we received an increase of \$7.

San Mateo County continues to experience an increase in new clients seeking Ryan White funded services. During fiscal year 2014-2015, 66 new clients accessed services.

The Affordable Care Act has impacted Ryan White funded service categories. San Mateo County began screening clients for LIHP as of October 1, 2011. LIHP funded services included medical care, psychiatric services, and outpatient and residential drug treatment. These LIHP clients transitioned to Medi-Cal as of January 1, 2014. Also, Medi-Cal began to cover many dental procedures again as of May 2014.

Due to a majority of clients now having another payor source for these covered service categories, San Mateo has re-allocated Ryan White funding to different service categories. Due to this re-allocation of funding, San Mateo added a new service category this year; Early Intervention Services. This additional category allows us to expand our Linkage to Care/Retention services beyond the small amount of Minority AIDS Initiative funding we receive from CDPH—OA and expand Linkage to Care/Retention services to all clients.

San Mateo has begun to offer PrEP services at the Edison Clinic. Referrals come from other providers, the HIV Prevention team, STD Clinic and patient self-referrals. Information and protocols for PrEP are available on the website at <http://smchealth.org/std#prep>

## San Mateo County HIV Community Board

The San Mateo County HIV Program Community Board is made up of 10 full-time members. Members include HIV-positive consumers, HIV-positive non-consumers and HIV-negative community members. There are also non-members who regularly attend the meetings. These individuals include staff from Ryan White and HOPWA contract agencies, 3 members of the Youth Commission, 1 member of the Commission on Aging and an aide from Supervisor Warren Slocum's office. The Community Board meets as a full board quarterly, with the Executive Committee meeting one of the two months in between. All agendas, minutes and presentations can be found at <http://smchealth.org/node/590>

### Demographics, San Mateo HIV Program Community Board (N = 10)

	Number	%
<b>Gender</b>		
Male	6	60
Female	3	30
Transgender	1	10
<b>Race/Ethnicity</b>		
Black or African American	6	60
White	3	30
Asian/Pacific Islander	1	10
<b>HIV status</b>		
Positive	7	70
Negative	3	30

## San Mateo County Prioritization Process

During the April 2015 full board meeting, the STD/HIV Program Director provided the board with information on service utilization as well as clarification of the service categories. The discussion led to moving Mental Health services just above Medical Case Management. The board voted to make no changes in prioritization of Support Services. The board did want to stress the importance of Medical Transportation, which is fully funded under Ryan White Part B, due to the lack of adequate public transportation and the large geographic size of the county. The addition of the Early Intervention Services category happened during the July meeting due to the notification of Ryan White Part A funding. We were able to increase the Support Services categories by \$35,000 this year. These are all services provided by contract agencies.

<b>Core Services</b>	<b>Previous Priority</b>	<b>New Priority</b>	<b>% Part A Allocation</b>	<b>Amount</b>
Outpatient/Ambulatory Care*	1	1	18.80%	\$222,362
Oral Health/Dental Care	2	2	7.60%	\$90,000
Medical Case Management	3	4	44.14%	\$522,405
Mental Health Services	4	3	10.15%	\$120,069
Early Intervention Services	*	*	1.64%	\$19,441
<b>Subtotal</b>			<b>82.33%</b>	<b>\$974,277</b>
<b>Support Services</b>				
Housing Services	1	1	1.41%	\$16,688
Food Program	2	2	9.72%	\$115,000
Medical Transportation*	3	3	0.00%	\$0
Emergency Financial Assistance	4	4	6.55%	\$77,495
<b>Subtotal</b>			<b>17.67%</b>	<b>\$209,183</b>
<b>Total</b>			<b>100.00%</b>	<b>\$1,183,460</b>

## San Mateo County - Shifting of Resources

With the implementation of the Affordable Care Act, many clients have been able to enroll in Medi-Cal or other payor sources. These other payor sources covered some of the services that were traditionally funded under Ryan White. Due to payor of last resort, fewer clients needed Ryan White to cover these services so San Mateo was able to re-allocate funding to service categories that that were not covered by these other payor sources. This included the addition of the Early Intervention Services category, which allowed the expansion of linkage to care/retention in care services, as well as the increase in allocation to services provided by CBOs in the county.

<b>Core Services</b>	<b>2012-2013</b>	<b>2013-2014</b>	<b>2014-2015</b>	<b>2015-2016</b>
Outpatient/Ambulatory Care	\$878,359	\$520,036	\$412,970	\$222,362
Oral Health/Dental Care	\$240,000	180,000	\$90,000	\$90,000
Medical Case Management	\$124,699	\$358,209	\$396,790	\$522,405
Mental Health Services	\$77,260	\$99,850	\$110,069	\$120,069
Early Intervention Services	\$0	\$0	\$0	\$19,441
Substance Abuse-Outpatient	\$70,279	\$13,426	\$0	\$0
<b>Support Services</b>				
Housing Services	\$11,129	\$11,129	\$11,129	\$16,688
Food Program	\$110,000	\$100,000	\$100,000	\$115,00
Medical Transportation (Part B)	\$15,908	\$19,200	\$25,590	\$25,590
Emergency Financial Assistance	\$62,495	\$62,495	\$62,495	\$77,495
Substance Abuse-Residential	\$51,500	\$13,500	\$0	\$0