



# Early Intervention Services

## 2010 Service Area Review Summary

**Early Intervention Services** - includes counseling individuals with respect to HIV/AIDS; testing (including tests to confirm the presence of the disease, tests to diagnose to extent of immune deficiency, tests to provide information on appropriate therapeutic measures); referrals; other clinical and diagnostic services regarding HIV/AIDS; periodic medical evaluations for individuals with HIV/AIDS; and providing therapeutic measures.

There are currently 2 contracts with metro providers and 0 contracts with greater MN providers to serve 45 clients.

HRSA Core Medical Service

Essential Service—  
Continuum of Care

Comprehensive Plan—YES

### DATA SUMMARY HIGHLIGHTS

This service area was previously prioritized as a service activity within the Outpatient/Ambulatory Medical Care Service Area and, as a result does not have a separate ranking for the 2008-2010 prioritization cycle. Likewise, the decision to separate this service activity into its own separate service area was made after the web-based needs assessment was launched. Therefore, the 2010 consumer ranking also reflects the Outpatient/Ambulatory Medical Care ranking and not a separate ranking for Early Intervention Services.

The 2009 reauthorization of the Ryan White CARE Act (the Ryan White HIV/AIDS Treatment Extension Act of 2009) requires Part A grantees and the Planning Council to develop a plan to reach persons who are unaware of their HIV-positive status and get them into care. Early Intervention Services is one of the few service areas that will allow for the types of activities to find those who are unaware of their HIV status, test them, and get them into care if they are positive.

In the Path to Care Study, 12% of the 63 respondents reported that it was “a year or longer” between their initial diagnosis and when they first sought HIV medical care.

Because this service area is designed to find people who are HIV positive and get them into care as soon as possible, consumers do not seek out this service. Rather, this service is offered to a person when they test positive or a sero-positive status is confirmed. Therefore, consumers were not asked about accessing this service in the 2010 Comprehensive Needs Assessment of Minnesotans Living with HIV Disease.

### CURRENT RANKINGS

COUNCIL (2008)	CONSUMERS (2010)
3 out of 24 service areas	20 out of 25 service areas

### ALLOCATIONS HISTORY

FY	ALLOCATION	% CHANGE	SPENT	% UTILIZED
2010	\$42,000	11%		
2009	\$37,700	41%	\$29,959	79%
2008	\$26,767	-39%	\$21,587	81%

### UTILIZATION HISTORY

FY	# Accessing Service Area or Activity	% of All HIV/AIDS Cases	% of Unduplicated RW Clients
2009	45	<1% (n=6,552)	1% (n=3,700)
2008	37	<1% (n=6,221)	<1% (n=4,713)
2007	43	<1% (n=5,950)	1% (n=4,038)

### ASSESSMENT OF NEED

2010 COMPREHENSIVE NEEDS ASSESSMENT (SELF ASSESSMENT BY CLIENTS n=326)		
Accessed Service (Last 12 Months) n=269	Didn't Access (Last 12 Months) n=57	Didn't Access but Needed to (Last 12 Months) n=9
NA	NA	NA



