



The Looming Crisis in HIV Care: Who Will Provide the Care?

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HIV treatment is one of the most effective medical interventions available today. Thanks to remarkable medical research breakthroughs – at least 3 million years of life have been saved in the U.S. by HIV care.ⁱ While HIV is a manageable disease today, treatment is complex and positive health outcomes require expert medical management and access to HIV drug therapies along with a range of critical medical and support services.

HIV Provider Experience and Expertise Make a Difference

Patients managed by experienced HIV physicians have significantly better treatment outcomes and receive more cost effective care.^{ii iii} Similar findings have been reported for physician assistants and nurse practitioners, who also play a vital role in the delivery of HIV care.^{iv}

HIV Provider Shortages: A Growing Crisis in Care Capacity

The current HIV medical workforce is largely composed of the first generation of HIV medical providers who entered the field more than 20 years ago. While the number of people with HIV continues to grow in the U.S., the HIV medical workforce is constricting as the first generation retires or leaves the field without a sufficient pool of new providers to take their place.

In a survey conducted by HIVMA and the Forum for Collaborative HIV Research, a majority of Ryan White Part C-funded programs reported increasing caseloads and serious challenges recruiting and retaining HIV clinicians.

Reimbursement and a lack of qualified providers were the top two barriers cited.^v

Addressing the Shortage: What's Needed

HIVMA and the American Academy of HIV Medicine released a joint statement *Averting a Crisis in HIV Care* in June 2009 that outlines a comprehensive set of recommendations for addressing the current shortage of HIV clinicians. Key recommendations include:

- Targeted loan forgiveness through the National Health Service Corps for HIV medical providers that work at Ryan White Part C-funded sites.
- Increased federal support for clinical training opportunities in HIV medicine, similar to the HIV Minority Clinical Fellowship Program.
- Increase Medicaid payment rates for HIV providers to support the care of the 40% of HIV patients that currently rely on Medicaid for health coverage – *a percentage that will grow as the Medicaid expansion under health reform is implemented.*

Making a Difference: HIVMA Minority Clinical Fellowship Program

Since 2007 – HIVMA has helped to grow the pool of African American and Latino HIV clinicians through fellowship grants that support one year of HIV clinical training at clinics serving largely minority patient populations. The fellows uniformly report that the year of on-the-job training was invaluable and without it pursuing careers in HIV medicine would have been difficult. Highlighted below are the fellows completing and beginning their training in 2010.



Left to right: Damon Francis, MD, (2010) Chavon Onumah, MD, MPH (2010), Carolina Abuelo, MD (2009), Oni Blackstock, MD (2009)

ⁱ RP Walensky et al. The survival benefits of AIDS treatment in the United States. *The Journal of Infectious Diseases*. Published online June 1, 2006.

ⁱⁱ Bozzette SA, Joyce G, McCaffrey DF, et al. Expenditures for the care of HIV-infected patients in the era of highly active antiretroviral therapy. *N Engl J Med*. 2001;344(1):817-823.

ⁱⁱⁱ Landon BE, Wilson IB, Wenger NS, et al. Specialty training and specialization among physicians who treat HIV/AIDS in the United States. *J Gen Intern Med*. 2002;17(1):12-22.

^{iv} Wilson, et al. Quality of HIV Care Provided by Nurse Practitioners, Physician Assistants, and Physicians. *Ann of Inter Med* 2005;143:729-736.

^v A Weddle. HIV Clinic Capacity and Workforce Challenges: Results of a Survey of Ryan White Part C Programs. 2008 National Summit on HIV Diagnosis, Prevention and Access to Care. Nov. 20, 2008. Available online: www.hivforum.org.

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The HIV Medicine Association is the professional home for more than 3,800 physicians, scientists and other health care professionals dedicated to the field of HIV/AIDS. Nested within the Infectious Diseases Society of America, HIVMA promotes quality in HIV care and advocates policies that ensure a comprehensive and humane response to the AIDS pandemic informed by science and social justice.