

COVID-19 Ryan White Coordinated Services Network Info
(Updated 03/24/2020)

Monarch Health: (561) 523-4589

- EIS services will now be offered both on site and via telehealth.

Monday

8:30am-12:30pm-Onsite

1:00pm-5:00pm-Telehealth

Tuesday

8:30am-12:30pm-Telehealth

1:00pm-5:00pm-Onsite

Wednesday & Thursday

8:30am-5:00pm-Onsite

Friday

8:30am-5:00pm-Telehealth

Health Council of Southeast Florida: (561)-844-4220

- Staff will be working regular hours both in office on alternate days and remotely from home.
- Staff will not be traveling to community-based placements, but will be conducting business by phone.

Compass: (561)-533-9699

- Direct client services have transitioned to virtual services.
- All appointments will be held via phone or video call, as staff and clients determine what is best for their circumstances.
- Clients eligible to receive tangible resources, such as food pantry or bus passes, will be contacted by their case managers to arrange these meetings.

Lysette Pérez, Health Services Director x.4007

Jacquelyn Jamason, Mental Health x.4055

Catherine Doe, Mental Health, x.4015

Raymond Cortes, x.4008

Lovely Noel, x.4041

Graham Brown, x.4025

Neka Mackay, x.4003

Alisha Hardge, x.4033

Cathy Mulcahey, x.4012

Christopher Slydell, x.4005

Jackie Garetano, x.4018

FoundCare: (561)-472-2466

- All offices are operational from Monday-Friday 8-4:30 PM
- Services are being provided remotely wherever possible, including telehealth for clinical services.

AHF:

- Medical Case Management staff on site at both locations, as well as remotely. Monday through Friday at the West Palm Beach (561)-284-8182 and Delray (561)-279-0991 office.

Legal Aid Society: (561)-655-8944

- Ryan White staff will not hold in-office hours and we will be working remotely.
- Not accepting walk-ins.
- Please note the contact info for our staff:
 - Paralegal Laura Rivera- English and Spanish speaking; email: lriviera@legalaidpbc.org; office: ext. 114;
 - Legal Assistant Jessica Pierre- contacted only for Creole speaking clients; office: ext. 360;
 - Two staff attorneys, Kristina Rowe (email: krowe@legalaidpbc.org; office: ext. 103) and Jerald Washington (email: jwashington@legalaidpbc.org; office: ext. 226); and
 - Supervising Attorney, Sandra Powery Moses: smoses@legalaidpbc.org; ext. 292.
- The Ryan White hotline is available to accept non-urgent calls at: ext. 315.
- The online intake is available for prospective RW eligible clients and Case Managers to complete at: www.legalaidpbc.org/onlineintake
There are several LAS programs that accept online intakes, so please choose the correct project, identified as: *Ryan White/HIV Aids Legal Project: For individuals who are part of the Ryan White community OR PLWH.*

Florida Department of Health-Palm Beach County:

- Walk-ins for Eligibility have shifted to telephonic eligibility entirely.
- Peers, Perinatal Linkage and Case Managers are working remotely, available by phone and email.
- ADAP is still seeing walk-ins but is also proactively reaching out to clients to do as many telephonic eligibility certifications as possible.
- Clinical care is transitioning to telehealth; rescheduling all routine visits until June 2020 and refilling all medications for 90 days.

COVID-19: What people living with HIV should know

Although the risk of serious illness from COVID-19 for people living with HIV is not known, people living with HIV may have concerns and questions related to their risk.

Are people living with HIV at higher risk for COVID-19 than other people?

At the present time, we have no specific information about the risk of COVID-19 in people living with HIV.

The risk from immune suppression is not known, but with other viral respiratory infections, the risk for people with HIV getting very sick is greatest in:

- People with a low CD4 cell count, and
- People not on HIV treatment (antiretroviral therapy or ART).

People living with HIV can also be at increased risk of getting very sick with COVID-19 based on their age and other medical conditions.

What can people living with HIV do to protect themselves from COVID-19?

There is currently no vaccine to prevent COVID-19. The best way to prevent getting sick is to avoid exposure to the virus.

People living with HIV should take everyday preventive actions, such as hand washing and social distancing, to help prevent the spread of COVID-19.

People living with HIV should also continue to maintain a healthy lifestyle. This includes:

- Eating right,
- Getting at least 8 hours of sleep, and
- Reducing stress as much as possible.

Staying healthy helps your immune system fight off infection should it occur.

If you are living with HIV, it is important to continue taking your medication and follow the advice of your health care provider. This is the best way to keep your immune system healthy.

What should I do if I think I might have COVID-19?

Call your health care provider if you develop symptoms that could be consistent with COVID-19. Discuss how to get evaluated and how to avoid potentially exposing others to COVID-19.

What else can people living with HIV who are at higher risk of getting very sick from COVID-19 do to protect themselves?

Nearly half of people in the United States with diagnosed HIV are aged 50 years and older.

People with HIV also have higher rates of certain underlying health conditions. Both increased age and these conditions can increase their risk for more severe illness if people with HIV get COVID-19, especially people living with advanced HIV.

Steps that people living with HIV can take to prepare in addition to what is recommended for everybody:

- Make sure you have at least a 30-day supply of your HIV medicine and any other medications or medical supplies you need for managing HIV.

- Talk to your health care provider and make sure all your vaccinations are up-to-date, including vaccinations against seasonal influenza and bacterial pneumonia because these vaccine preventable diseases disproportionately affect people living with HIV.
- Establish a plan for clinical care if you have to stay at home for a couple of weeks. Try to establish a telemedicine link through your HIV care provider's online portal. If telemedicine is not available to you, make sure you can communicate with your provider by phone or text.
- Make sure you can maintain a social network remotely, such as online, by phone, or by video chat. This can help you stay socially connected and mentally healthy, which is especially important for people living with HIV.
- People living with HIV can sometimes be more likely than others to need extra help, from friends, family, neighbors, community health workers, and others. If you become sick make sure you stay in touch by phone or email with people who can help you.

Can HIV medicine (ART) be used to treat COVID-19?

Some types of HIV medicines (in particular, lopinavir/ritonavir) are being evaluated in clinical trials to treat COVID-19. While there is some evidence that this type of HIV medicine might help treat infections with SARS and MERS (two other coronaviruses related to the virus that causes COVID-19), there are no data available yet from clinical trials that these drugs help people with COVID-19.

People living with HIV should not switch their HIV medicine in an attempt to prevent or treat COVID-19.

Are shortages of HIV medicine (ART) or pre-exposure prophylaxis (PrEP) expected?

Drug shortages or anticipated problems with HIV medicine have not been identified.

The U.S. Food and Drug Administration (FDA) is closely monitoring the drug supply chain as the COVID-19 outbreak has the potential to disrupt the supply of medical and pharmaceutical products in the United States.

As of March 10, 2020, there were no reports of manufacturing concerns or supply shortages.

What can everyone do to minimize stigma about COVID-19?

Minimizing stigma and misinformation about COVID-19 is very important. People living with HIV have lived experience in dealing with stigma and can be allies in preventing COVID-19 stigma. You can reduce stigma and help prevent the spread of rumors about COVID-19.