

## FY 2009-10 Program Guidance

Approve June 4, 2008

### Portland TGA Ryan White Program Services

The following document outlines the current HRSA Ryan White program service definitions for the service categories we fund, Planning Council guidance for these services, and what programs and services we actually do fund in each service category. These service categories are listed in their priority order.

FY 08 general Planning Council guidance includes:

1. Services must be provided to historically underserved populations, including but not limited to women, children, youth and people of color, at least in proportion to their representation in the TGA's estimated HIV prevalence demographics.
2. Services must be provided to clients in all counties in proportion to their representation in the TGA's estimated prevalence demographics, except where stated in specific service category guidance.
3. Recognizing that the Ryan White Care Services system may no longer be able to provide the breadth of services available, preference in service delivery should be given to providers that demonstrate the ability to leverage other sources to enhance funded services, and develop working relationships with non-Ryan White funded providers.
4. Providers will coordinate services and refer to other Ryan White Service Providers, whenever appropriate.
5. Providers shall utilize client self management to better support client access to necessary services and improve health outcomes, as appropriate

This guidance is applicable to all service categories, except where indicated.

### CORE SERVICES

#### *1. Outpatient/Ambulatory Medical Care (Ambulatory Care)*

*HRSA definition:* The provision of professional diagnostic and therapeutic services rendered by a physician, physician's assistant, clinical nurse specialist, or nurse practitioner in an outpatient setting. Settings include clinics, medical offices, and mobile vans where clients generally do not stay overnight. Emergency room services are not outpatient settings. Services includes diagnostic testing, early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental conditions, prescribing and managing medication therapy, education and counseling on health issues, well-baby care, continuing care and management of chronic conditions, and referral to and provision of specialty care (includes all medical subspecialties). *Primary medical care* for the treatment of HIV infection includes the provision of care that is consistent with the Public Health Service's guidelines. Such care must include access to antiretroviral and other drug therapies, including prophylaxis and treatment of opportunistic infections and combination antiretroviral therapies.

*Planning Council guidance:* All general guidance listed above. Medical care providers must develop, implement and monitor strategies to support the Chronic Care Model.

*What we fund:* Provision of primary and HIV medical care at specialty clinics that follow national standards of care for the treatment of HIV. Care includes diagnosis and treatment of physical and mental health conditions, medication management and adherence counseling, medical care coordination, and referral to other specialty providers and linkage to case management services. Diagnosis and treatment of physical conditions is limited to services for uninsured and underinsured clients.

## **2. Health Insurance Premium & Cost Sharing Assistance (Health Insurance)**

*HRSA definition:* The provision of financial assistance for eligible individuals living with HIV to maintain a continuity of health insurance or to receive medical benefits under a health insurance program. This includes premium payments, risk pools, co-payments, and deductibles.

*Planning Council guidance:* All general guidance listed above, except #1 and #2.

*What we fund:* Health insurance funds pay for health insurance premiums, co-pays and deductibles for clients who live in the TGA. In the 2008-2009 fiscal year, Part A funds in this category are only being utilized for Clark County, Washington residents. CareAssist through Part B provides similar funds for Oregon TGA clients.

## **3. Mental Health Services (Mental Health Therapy/Counseling)**

*HRSA definition:* Psychological and psychiatric treatment and counseling services offered to individuals with a diagnosed mental illness, conducted in a group or individual setting, and provided by a mental health professional licensed or authorized within the State to render such services. This typically includes psychiatrists, psychologists, and licensed clinical social workers.

*Planning Council guidance:* All general guidance listed above. Services shall address dually diagnosed clients (mental illness and substance abuse) in their service delivery model.

*What we fund:* Mental health assessment and individual counseling on-site or at-home, couples or group counseling, crisis intervention, and medication management for PLWH/A. Mental health services are delivered by mental health professionals (psychiatrists, psychiatric nurse practitioners, licensed social workers, or licensed professional counselors). Recruitment into mental health and substance abuse treatment services by peer mentors are also funded through a joint mental health and substance abuse funding effort.

## **4. Oral Health Care (Dental Care)**

*HRSA definition:* The provision diagnostic, preventive, and therapeutic services provided by general dental practitioners, dental specialists, dental hygienists and auxiliaries, and other trained primary care providers.

*Planning Council guidance:* All general guidance listed above.

*What we fund:* Comprehensive dental care provided by practitioners who specialize in treating HIV positive patients. Services include diagnostic, preventative and restorative care, oral surgery and emergency care resulting from pain and infection. Crown and bridge procedures are also provided, with some limitations.

## **5. Substance Abuse Treatment**

*HRSA definition:* The provision of medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting, rendered by a physician or under the supervision of a physician, or by other qualified personnel.

*Planning Council guidance:* All general guidance listed above except #2 because the number of clients served may not be enough to address all historically underserved populations and the entire geographic area of the TGA. Whenever appropriate, coordinate outpatient treatment with alcohol and drug-free housing. Services shall address dually diagnosed clients (mental health and substance abuse) in their service delivery model.

*What we fund:* Assessment, individual and group counseling, as well as engagement coordination in outpatient treatment for clients in alcohol and drug-free housing. Recruitment into mental health and substance abuse treatment services by peer mentors are also funded through a joint mental health and substance abuse funding effort.

## **6. Medical Case Management Services**

*HRSA definition:* The provision of a range of client-centered services that link clients with health care, psychosocial, and other services. The coordination and follow-up of medical treatments is a component of medical case management. These services ensure timely and coordinated access to medically appropriate levels of health and support services and continuity of care, through ongoing assessment of the client's and other key family members' needs and personal support systems. Medical case management includes the provision of treatment adherence counseling to ensure readiness for, and adherence to, complex HIV/AIDS treatments. Key activities include (1) initial assessment of service needs; (2) development of a comprehensive, individualized service plan; (3) coordination of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic re-evaluation and adaptation of the plan as necessary over the life of the client. It includes client-specific advocacy and/or review of utilization of services. This includes all types of case management including face-to-face, phone contact, and any other forms of communication.

*Planning Council guidance:* All general guidance listed above. Coordinate client linkage to transportation services. Service will develop and utilize client self management models to better support client access to necessary services and improve health outcomes. Medical case management services shall coordinate and engage clients in Support programs to improve health outcomes of those with multiple diagnoses.

*What we fund:* Assessment, coordination of services and linkages to services inside and outside the Ryan White system of care. All medical case management clients receive primary medical case management services which include treatment adherence assessment, health insurance maintenance, and coordinating timely access to appropriate levels of medical and supportive services, through ongoing client assessment. Specialty case management services are also offered in conjunction with primary case management services; this includes nursing case management, intensive case management for high acuity Latino and African and African American clients, and services for clients living in transitional housing units to ensure they are able to maintain housing, thereby impacting their ability to maintain medical care and adherence to medications.

## **7. Early Intervention Services**

*HRSA definition:* This includes counseling individuals with respect to HIV/AIDS; testing (including tests to confirm the presence of the disease, tests to diagnose the 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.

*Planning Council guidance:* All general guidance listed above. Services for newly diagnosed shall be tailored to address needs found in current HIV incidence data.

*What we fund:* Counseling to individuals with respect to HIV/AIDS, testing, and referrals to medical care and treatment and mental health and substance abuse treatment services, as appropriate, to newly diagnosed individuals and persons who are out of care.

## **SUPPORT SERVICES**

### **8. Housing Services**

*HRSA definition:* The provision of short-term assistance to support emergency, temporary or transitional housing to enable an individual or family to gain or maintain medical care. Housing-related referral services include assessment, search, placement, advocacy, and the fees associated with them. Eligible housing can include both housing that does not provide direct medical or supportive services and housing that provides some type of medical or supportive services such as residential mental health services, foster care, or assisted living residential services.

*Planning Council guidance:* All general guidance listed above. Coordinate between HOPWA and Part A programs. Prioritize services that assist clients to access and preserve permanent housing. Services to clients living outside of Multnomah County must constitute a minimum of 20%. Service delivery model will support BOTH leveraged housing units and direct housing assistance to engage the highest possible number of clients in stable housing.

*What we fund:* Emergency and transitional housing assistance to PLWH/A and their families. Eviction prevention, information and referral and housing case work enable clients to access and remain in transitional and permanent housing. Alcohol/drug-free housing is also provided for PLWH/A while enrolled in outpatient substance abuse treatment.

### ***9. Psychosocial Support Services***

*HRSA definition:* The provision of support and counseling activities, child abuse and neglect counseling, HIV support groups, pastoral care, caregiver support, and bereavement counseling. Includes nutrition counseling provided by a non-registered dietitian, but excludes the provision of nutritional supplements.

*Planning Council guidance:* All general guidance listed above, except #2. Efforts should be made to improve access to services for people in outlying areas. Services shall be coordinated with case management.

*What we fund:* Emotional, social and practical support to clients through day drop-in centers, congregate meals and peer support. Psychosocial services are targeted for women, youth and children and historically underserved populations – clients who are homeless, clients with multiple diagnoses, and racial and ethnic minorities.

### ***10. Food bank/home-delivered meals***

*HRSA definition:* The provision of actual food or meals. It does not include finances to purchase food or meals. The provision of essential household supplies such as hygiene items and household cleaning supplies should be included in this item. Includes vouchers to purchase food.

*Planning Council guidance:* All general guidance listed above.

*What we fund:* This service provides meals including medically necessary home-delivered meals and congregate (group) meals at the multi-service center.