

Program: Ryan White Part B	Section: Core medical services
Department: Health and Human Services	Last review: 2024.02.01
Owner: Senior RN quality consultant	Next review: 2025.02.01
Approved by: HEART program manager	Origination: 2011.09.15

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Purpose

To define and establish standards for the minimal level of outpatient ambulatory health services (OAHS).

Standard

- 1. Outpatient ambulatory health services include the provision of professional diagnostic and therapeutic services directly to a client by a physician, physician assistant, clinical nurse specialist, nurse practitioner, or other healthcare professional to prescribe antiretroviral therapy (ARV) in an outpatient setting.
- 2. These settings include clinics, medical offices, and mobile vans where clients generally do not stay overnight, using telehealth technology, and urgent care facilities for HIV-related visits.
- 3. Emergency or urgent care services are not considered outpatient settings.

Definitions

Client means an individual who is eligible for covered services

DHHS means Utah Department of Health and Human Services

HAB means HIV/AIDS Bureau.

HHS means United States Department of Health and Human Services

HIV means human immunodeficiency virus.

HRSA means Health Resources and Services Administration

OAHS means outpatient ambulatory health services

RWB means Ryan White Part B program

Service standards

Service standards provide the framework and guidance to establish the minimum level of service or care that an RWB subrecipient or provider offers, provide benchmarks for monitoring, inform contract development, maintain quality of care, improve the client and public health outcomes, align care practices, clinical policy, and service delivery consistent with the HHS and Infectious Disease Society of America clinical guidelines. The clinical guidelines are frequently updated and should be accessed directly at the website. Any deviation is justified by specific client circumstances and evidence-based medical practices.



The subrecipient complies with the following <u>service standards</u>.

- 1. AIDS Drug Assistance Program
- 2. Health insurance premium and cost-sharing assistance
- 3. Medical transportation
- 4. Oral health
- 5. Universal service standards
 - Access to care
 - Records management
 - Staff requirements/personnel qualifications
 - Eligibility determination/screening
 - Client-related policy
 - Fiscal standards
 - Quality management standards
 - Monitoring standards

Service delivery

Covered services

Expectation

- Medical history taking
- Physical examination
- Laboratory and diagnostic testing
- Prescription and management of medication therapy
- Treatment adherence
- Behavioral risk assessment, subsequent counseling, and referral
- Preventive care and screening
- Counseling on health and prevention issues
- Education, treatment, and management of physical and behavioral health conditions
- Pediatric developmental assessment
- Referral to and provision of specialty care related to HIV diagnosis, including audiology and ophthalmology

Measure

Documentation in the client's medical record of the following:

• Services provided are for the treatment of HIV to eligible clients



- Clinical notes are signed by the licensed service provider
- Diagnostic and laboratory tests performed
- Specialty medical care relates to HIV infection and/or conditions arising from the use of HIV medications which result in side effects
- Services are consistent with HHS clinical guidelines for the treatment of HIV

Licensed healthcare professionals

Expectation	
Access to treatment by a qualified, licensed healthcare professional in an outpatient setting.	
Measure	
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Documentation of current licensure with the Utah Division of Professional Licensing

Service coordination

Expectation

Service coordination involves active collaboration and coordination with other agencies to facilitate client access to the full spectrum of HIV-related services. The subrecipient:

- Maintains a comprehensive list of internal and external providers including but not limited to, regional AIDS service providers, local, state, and federal services available for people living with HIV
- Responds to RWB phone and email communications within 2 business days

Measure

Documentation in the client record includes:

- Psychosocial and behavioral health screenings
- Substance use screening using an evidence-based tool
- If needs are identified through screenings—documentation of related intervention, referral, and coordination with community service providers

Health education/risk reduction and treatment adherence counseling

Expectation

- Services support client adherence with complex HIV/AIDS treatments
- Assess if the client is ready, willing, and able to engage in HIV treatment and receive HIV counseling and education

Measure



Documentation in the client record includes:

- Readiness assessment
- Counseling about:
 - o treatment adherence
 - o maintaining HIV viral suppression prevents the transmission of HIV
 - o maintaining HIV viral suppression does not prevent the acquisition or transmission of other sexually transmitted infections
 - o improving health
- Education and information about
 - o available medical and psychosocial support services
 - o HIV transmission and how to reduce the risk of HIV transmission

Case review

Interdisciplinary team case review addresses non-adherence and major life transitions for the client. The interdisciplinary client care team may include a physician, case manager, pharmacy, or other care providers as indicated to review and coordinate care, identify barriers, and facilitate client transitions and treatment success for the client.

Expectation

A case review is performed every 6 months at minimum for clients who:

- are not virally suppressed
- require special considerations such as transitions in care, multiple co-morbidity, and HIV medication adherence barriers

Measure

Documentation of case review in the client record includes:

- Date
- Name of participants
- Issues and concerns
- Adherence barriers identified for the clients with high viral load levels
- Follow-up plan
- Verification that guidance has been implemented



Laboratory

Expectation

- The laboratory is approved by the Food and Drug Administration, and/or certified under the Clinical Laboratory Improvement Amendments Program
- Include the number of diagnostic and laboratory tests performed in the client's medical records
- Diagnostic and laboratory tests are:
 - o Integral to the treatment of HIV and related complications, and necessary based on established clinical practice
 - o Ordered by a registered, certified, licensed provider
 - o Are consistent with medical and laboratory standards

Measure

Document and include in the medical record when appropriate and make available to the recipient upon request:

- Certification, licenses, or FDA approval of the laboratory from which tests were ordered
- Number of diagnostic and laboratory tests performed
- Credentials of the individuals who order the tests
- The quantity of tests in the medical record matches the quantity of tests in the reports

Policy and regulations

The subrecipient shall comply with the **<u>RWB Program Manual</u>**

Forms and references

The subrecipient shall comply with the <u>RWB Clinical Quality Management Plan</u> and <u>ClientTrack resources</u>.

Resources

- 1. <u>HRSA National Monitoring Standards</u>
- 2. HRSA PCN #15-02 Clinical Quality Management
- 3. HRSA PCN #16-02 Eligible Individuals & Allowable Uses of Funds
- 4. IDSA Primary Care Guidance for Persons With Human Immunodeficiency Virus
- 5. NASTAD Service Standards for Ryan White HIV/AIDS Program Part B



- OMB Circulars: Educational and Non-Profit Instructions Documents (<u>https://www.whitehouse.gov/omb/information-for-agencies/circulars/</u>) (<u>https://obamawhitehouse.archives.gov/omb/circulars_default/</u>)
- 7. Public Service Health Act, Title XXVI, Amendment October 2009
- 8. <u>Ryan White Part B Clinical Quality Management Plan</u> (For Providers > Forms and Reference Materials > Ryan White Part B Clinical Quality Management Plan)
- 9. Service Standards Ryan White HIV/AIDS Programs
- 10. Uniform Guidance
- 11.<u>U.S. Department of Health and Human Services Clinical Guidelines for the</u> <u>Treatment of HIV/AIDS</u>
- 12. <u>Utah Administrative Code Rule R388-805 (</u>>Health)
- 13.<u>U.S. Department of Health and Human Services Ryan White HIV/AIDS Program</u> Part B Manual

Approval Group

Approval group	Reviewed
Senior RN quality consultant: Vinnie Watkins	2024.01.17
HEART program manager: Tyler Fisher	2024.02.01
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Date	Reviewer	Change description or location
2024.02.01	Senior RN quality consultant	Updates to reflect current NMS and formatting
2024.02.08	Senior RN quality consultant	Updates to font inconsistency and other changes based on review