



## FY 2023 Service Category Definitions

### CLIENT ELIGIBILITY STATEMENT

Eligibility must be completed at least once every 6 months for all clients and must follow the guidelines below.

Eligible clients must have:

- Proof of Residency: Live in one of the five regions within the New Haven/Fairfield Counties EMA (Region 1, New Haven; Region 2, Waterbury; Region 3, Bridgeport; Region 4, Stamford/Norwalk; Region 5, Danbury)
- Proof of HIV Status
- Proof of Income: Have a household income that is at or below 300% of the federal poverty level with the exception of **Medical Case Management including Intensive MCM** where the household income may not exceed 500% of the federal poverty level.

## CORE SERVICES

### Medical Case Management

Medical Case management services, including treatment adherence are a range of client centered services that link clients with health care. MCM's ensure timely and coordinated access to medically appropriate levels of health and support services with continuity of care, provided by trained professionals who are part of the clinical care team. Key activities of Medical Case Management are as follows: initial assessment of service needs, development of a comprehensive individualized service plan, and coordination of services required to implement the plan, client monitoring to assess the efficacy of said plan and periodic reevaluation and adaptation of the plan as necessary over the life of the client. This includes utilization of services. Varying levels of case management such as face-to-face, phone contact and any other forms of communication.

Included in this is the Intensive Medical Case Management component: Intensive Medical Case Management utilizes all MAI funding and focuses on the EMAs priority populations; women of color, transgender women of color and men of color who have sex with men. The goal of which is to help clients re-enter or maintain medical care and other supportive services and to ultimately achieve viral suppression. IMCM teams develop care plans, enhancing life skills, addressing health and mental health/substance use needs, engaging in meaningful activities and building social and community relations. It is designed for clients who are, newly diagnosed, returned to care or not virally suppressed and who are identified as needing intensive support (higher acuity) for a shorter and time-delineated period.

### **Outpatient Substance Abuse Services**

Support for Substance Abuse Treatment Services-Outpatient, provided by or under the supervision of physician or other qualified/licensed personnel; may include use of funds to expand HIV-specific capacity of programs if timely access to treatment and counseling is not otherwise available.

### **Mental Health Services**

Mental Health Services are the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to clients living with HIV. Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by or under the supervision of a mental health professional or other qualified/licensed personnel.

### **Dental/Oral Health**

Support for Oral Health Services including diagnostic, preventive, and therapeutic dental care that is in compliance with state dental practice laws, includes evidence-based clinical decisions that are informed by the American Dental Association Dental Practice Parameters, is based on an oral health treatment plan, adheres to specified services, and is provided by licensed and certified dental professionals.

### **Outpatient/Ambulatory Health Services**

Outpatient/Ambulatory medical care (health services) is the provision of professional diagnostic and therapeutic services rendered by a physician, physician's assistant, APRN, RN or LPN 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.

### **Health Insurance Premium & Cost Sharing Assistance**

Health Insurance Premium and Cost-sharing Assistance provides financial assistance for co-payments (including co-payments for prescription eyewear for conditions related to HIV/AIDS), and deductibles. These monitored short-term payments are limited in amounts and periods of time.

### **AIDS Pharmaceutical Assistance(local)**

Implementation of a Local AIDS Pharmaceutical Assistance Program (LPAP) for the provision of HIV/AIDS medications using a drug distribution system that has:

- A client enrollment and eligibility process
- Uniform benefits for all enrolled clients throughout the EMA
- A drug formulary approved by the local advisory committee/board
- A recordkeeping system for distributed medications
- A drug distribution system
- A system for drug therapy management

An LPAP that does not dispense medications as:

- A result or component of a primary medical visit
- A single occurrence of short duration (an emergency)
- Vouchers to clients on an emergency basis

A Program that is:

- Consistent with the most current HIV/AIDS Treatment Guidelines
- Coordinated with the State's Part B AIDS Drug Assistance Program



## **NON-CORE SERVICES**

### **Housing Assistance and Related Services**

Housing Services provides short-term or emergency housing assistance to enable an individual or family to gain or maintain outpatient/ambulatory health services and treatment. Funds can be used for emergency rental assistance including 1st month's rent and any rent arrearage.

Housing activities also include housing referral services, including assessment, search, placement, and housing advocacy services on behalf of the eligible client, as well as fees associated with these activities.

Short term emergency housing assistance (other than 1st month and back rent) requires prior authorization from the Ryan White Office (Recipient). Housing activities cannot be in the form of direct cash payments to clients and cannot be used for mortgage payments or rental deposits. Activities within the Housing category must also include the development of an individualized housing plan, updated annually, to guide the client's linkage to permanent housing.

### **Inpatient Substance Abuse Services**

Funding for Substance Abuse Treatment – Inpatient to address substance use disorders (including alcohol and/or legal and illegal drugs) in a short-term residential health service setting requirement:

- Services to be provided by or under the supervision of physician or other qualified personnel with appropriate and valid licensure and certification by the State in which the services are provided
- Services to be provided in accordance with a treatment plan
- Detoxification to be provided in a separate licensed residential setting (including a separately- licensed detoxification facility within the walls of a hospital)

### **Emergency Financial Assistance**

Emergency Financial Assistance is the provision of short-term payments to assist eligible clients with emergency expenses related to essential utilities, such as heat, electricity, water/sewer, and telephone service. These short-term payments must be carefully monitored to confirm eligibility, ensure that Ryan White is the payer of last resort, and to assure limited amounts, limited use, and for limited periods of time. Note: Direct cash payments to clients are not permitted. Emergency Financial Assistance must occur as a direct payment to an agency or through a voucher program.



## **Medical Transportation**

Medical Transportation is the provision of non-emergency transportation that enables an eligible client to access or be retained in core medical and support services. Medical transportation may be provided through:

1. Contracts with providers of transportation services
2. Mileage reimbursement (through a non-cash system) that enables clients to travel to needed medical or other support services, but should not in any case exceed the established rates for federal Programs (Federal Joint Travel Regulations provide further guidance on this subject)
3. Purchase or lease of organizational vehicles for client transportation programs, provided the recipient receives prior approval for the purchase of a vehicle
4. Organization and use of volunteer drivers (through programs with insurance and other liability issues specifically addressed)
5. Voucher or token systems

## **Food Bank/ Home Delivered Meals**

Food Bank/Home Delivered refers to the provision of actual food items, hot meals, home delivered meals based on medical necessity and/or a voucher program to purchase food. This also includes the provision of essential non-food items that are limited to personal hygiene products and household cleaning supplies.