

Service Category Definition (approved by SPA June 2021)

Housing Assistance and Related 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, although these may be allowable costs under the HUD Housing Opportunities for Persons with AIDS grant awards. 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.

Intake and Eligibility (HIV/AIDS BUREAU PCN #21-02)

For both initial/annual and six-month recertification procedures, eligibility determinations may be performed simultaneously with testing and treatment. Recipients and subrecipients assume the risk of recouping any HRSA RWHAP funds utilized for clients ultimately determined to be ineligible, and instead, charge an alternate payment source, or otherwise ensure that funds are returned to the HRSA RWHAP program.

REQUIRED ELIGIBILITY DOCUMENTATION TABLE

Eligibility Requirement	Initial Eligibility Determination	Recertification Once a Year/12 Month Period
HIV Status	Documentation required for Initial Eligibility Determination: <ul style="list-style-type: none"> • Confirmatory lab results • Lab results (including VL/CD4) • Lab request form signed by provider 	No documentation required
Income	Documentation required for Initial Eligibility Determination: <ul style="list-style-type: none"> • Paystubs • SSI, SSDI and DSS income determination forms • Zero income affidavit • Bank Statement • Self-Employment Letter 	<ul style="list-style-type: none"> • Recipient may choose to require a full application and associated documentation OR • Self-attestation of no change • Self-attestation of change - Recipient must require documentation of change in eligibility status

<p>Residency</p>	<p>Documentation required for Initial Eligibility Determination:</p> <ul style="list-style-type: none"> • Driver’s License/ID • Utility Bill • Medical Bill • Bank Statement • Landlord Letter-Notarized • Copy of Lease/Mortgage • Letter from Shelter • Official Correspondence 	<ul style="list-style-type: none"> • Recipient may choose to require a full application and associated documentation OR • Self-attestation of no change • Self-attestation of change - Recipient must require documentation of change in eligibility status
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All agencies are required to have a client intake and eligibility policy on file that adheres to the EMA’s eligibility policy. It is the responsibility of the agency to determine and document client eligibility status, as outlined in the Ryan White Part A Eligibility Policy in accordance with HRSA/HAB regulations. Eligibility must be completed at least once every six months.

Eligible clients in the New Haven & Fairfield Counties EMA must:

- Live in New Haven or Fairfield Counties in Connecticut.
- Have a documented diagnosis of HIV/AIDS.
- Have a household income that is at or below 300% of the federal poverty level.

Services will be provided to all clients without discrimination based on: HIV infection, race, creed, age, sex, gender identity or expression, marital or parental status, sexual orientation, religion, physical or mental handicap, immigrant status, prior medical history, or any other basis prohibited by law.

Guidance on Complying with the Payor of Last Resort Requirement:

- RWHAP Recipients and Subrecipients must ensure that reasonable efforts are made to use non RWHAP resources whenever possible, including establishing, implementing, and monitoring policies and procedures to identify any other possible payors to extend finite RWHAP funds.
- RWHAP Recipients and Subrecipients must maintain policies and document their efforts to ensure that they assist clients to vigorously pursue enrollment in health care coverage and that clients have accessed all other available public and private funding sources for which they may be eligible.
- RWHAP Recipients and Subrecipients can continue providing services funded through RWHAP to a client who remains unenrolled in other health care coverage so long as there is rigorous documentation that such coverage was vigorously pursued.
- RWHAP Recipients and Subrecipients should conduct periodic checks to identify any potential changes to clients’ healthcare coverage that may affect whether the RWHAP remains the payor of last resort and require clients to report any such changes.

Payor of Last Resort:

Once a client is eligible to receive RWHAP services, the RWHAP is considered the payor of last resort, and as such, funds may not be used for any item or service to the extent that payment has been made, or can reasonably be expected to be made under:

1. Any State compensation program
2. An insurance policy, or under any Federal or State health benefits program
3. An entity that provides health services on a pre-paid basis

Services will be provided to all Ryan White Part A eligible clients without discrimination on the basis of: HIV infection, race, creed, age, sex, gender identity or expression, marital or parental status, sexual orientation, religion, physical or mental handicap, immigrant status, prior medical history, or any other basis prohibited by law.

Personnel Qualifications (including licensure)

Agency ensures that housing staff is qualified and trained for the responsibilities of providing housing services and administering the housing program.

Care and Quality Improvement Outcome Goals

Program Outcomes:

- 100% of clients receiving housing services maintain stable housing during the measurement year.
- 90% of clients are virally suppressed as evidenced by the last viral load test within the measurement year (<200 copies/mL) as documented in the reporting system.

Service Standards and Goals

HRSA/HAB Performance Measure: Viral Suppression (NQF#: 2082)

GOAL

STANDARD/MEASURE	AGENCY RESPONSIBILITY	
Clients are virally suppressed.	<ul style="list-style-type: none"> Documentation that the client is virally suppressed as evidenced by the last viral load test within the measurement year (<200 copies/mL) as documented in the reporting system. 	90%
HRSA/HAB National Program Monitoring Standards for RWHAP Part A: Section C: Support Services		
		GOAL
STANDARD/MEASURE	AGENCY RESPONSIBILITY	
Documentation that funds are used only for allowable purposes as defined by 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.	Document: <ol style="list-style-type: none"> Services provided including number of clients served, duration of housing services, types of housing provided, and housing referral services. Staff providing housing services are case managers or other professionals who possess a comprehensive knowledge of local, state, and federal housing programs and how to access those programs. 	100%
Each client receives assistance designed to help him/her obtain stable long-term housing, through a strategy to identify, relocate, and/or ensure the individual or family is moved to or capable of maintaining a stable long-term living situation.	<ul style="list-style-type: none"> Maintain client records that document: <ol style="list-style-type: none"> Client eligibility determination Housing services, including referral services provided Individualized housing plans for all clients that receive short-term, transitional, and emergency housing services. 	
Housing services are essential for an individual or family to gain or maintain access and compliance with HIV-related medical care and treatment.	Mechanisms are in place to allow newly identified clients access to housing services.	
Policies and procedures to provide individualized written housing plan, consistent with this Housing Policy, covering each client receiving short term, transitional and emergency housing services.	Develop and maintain housing policies and procedures that are consistent with this Housing Policy Assistance provided to clients to help them obtain stable long-term housing.	
No funds are used for direct payments to recipients of services for rent or mortgages.	Provide documentation and assurance that no Ryan White funds are used to provide direct payments to clients for rent or mortgages.	100%
New housing clients receive an initial assessment within five (5) business days of referral.	Documentation of initial assessment is completed within five (5) business days and is included in the client chart for the measurement year.	100%
Clients have a completed comprehensive housing plan within ten (10) business days of initial assessment.	Documentation of completed comprehensive housing plan within ten (10) business days and is included in the client chart for the measurement year.	100%
Clients are monitored to assess the efficacy of their housing plan.	Documentation of monitoring to assess the efficacy of the housing plan is evident in the client chart/progress notes, etc.	100%
New Haven/Fairfield Counties EMA RWHAP Part A Program Monitoring Standards for Housing Assistance		GOAL

STANDARD/MEASURE	AGENCY RESPONSIBILITY	
Provider agency ensures that housing staff is qualified and trained for the responsibilities of providing housing services and administering the housing program.	Job descriptions and resumes document appropriate qualifications.	100%
Timeliness of provision of housing assistance.	Housing Assistance funds to landlord within 7 business days of completed housing request.	100%
Client maintains/obtains housing.	Documentation of housing services are entered into CAREWare.	100%
Housing increases access to and maintenance in medical care.	Clients had a medical visit during the measurement year.	90%

Clients Rights and Responsibilities

Agencies providing services are required to have a statement of consumer rights and responsibilities posted and/or accessible to the client. Each agency will take all necessary actions to ensure that services are provided in accordance with the consumer rights and responsibilities statement and that each consumer fully understands their rights and responsibilities.

Client Charts, Privacy, and Confidentiality

Agencies providing services must comply with the Health Insurance Portability and Accountability Act (HIPAA) provisions and regulations and all federal and state laws concerning confidentiality of the client's Personal Health Information (PHI). Agencies must have a client's release of information policy in place and review the release regulations with the client before services are provided. A signed copy of the client's release of information must be included in the client's chart.

Cultural and Linguistic Competency

Agencies providing services must adhere to the National Standards on Culturally and Linguistically Appropriate Services. (Please see <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53> for more information)

Client Grievance Process

Each agency must have a written grievance procedure policy. Clients will be informed and assisted in utilizing this procedure and shall not be discriminated against for doing so. A signed copy of receipt of the grievance procedure policy form must be included in the client's chart.

Case Closure Protocol

Each agency providing services will have a case closure protocol. The reason for case closure must be properly documented in each client's chart.