

# Ryan White HIV/AIDS Program Services: Eligible Individuals and Allowable Uses of Funds

*Policy Clarification Notice #16-02*

*February 4, 2016*

# Objectives

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- **Update to the Policy Clarification Notice (PCN) regarding the Ryan White HIV/AIDS Program (RWHAP) eligibility and allowable costs**
- **Update to the RWHAP description and program guidance on select service categories**

# Background

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## Purpose of PCN

- Consistency of service categories with RWHAP statute
- Clarification of service categories and program guidance
- Alignment of service categories across HIV/AIDS Bureau documents/products/activities

**This policy clarification notice replaces the Health Resources and Services Administration (HRSA) PCN 10-02: Eligible Individuals & Allowable Uses of Funds for Discretely Defined Categories of Services regarding eligible individuals and the description of allowable service categories for Ryan White HIV/AIDS Program and program guidance for implementation.**

# Inform HIV/AIDS Bureau Activities/Products

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## Effective with Fiscal Year 2017 funding

- Ryan White HIV/AIDS Program Services Report/AIDS Drug Assistance Program Data Report (RSR/ADR)
- National Monitoring Standards
- Funding Opportunity Announcements
- RWHAP Part Manuals
- Program Terms in the Notice of Grant Awards (NoAs)
- Site Visits Modules

# Structure of the Policy Clarification Notice

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- Scope of coverage
- Purpose of PCN
- Background
- Further Guidance on Eligible Individuals and Allowable Uses of Ryan White HIV/AIDS Program Funds
  - Eligible individuals
  - Unallowable costs
  - Allowable costs
- Service Category Descriptions and Program Guidance
- Effective Date

# Background

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- RWHAP legislation – Title XXVI of the PHS Act
- 45 CFR Part 75—HHS Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards
  - §75.351 – 353—Subrecipient Monitoring and Management
  - Subpart E—Cost Principles
- Recipients are reminded that it is their responsibility to be fully cognizant of limitations on uses of funds as outlined in programmatic statute, 45 CFR Part 75, the HHS Grants Policy Statement, and applicable HAB Policy Clarification Notices

# Further Guidance on Eligible Individuals and Allowable Uses of Ryan White HIV/AIDS Program Funds

- **Payer of last resort – vigorously pursue**
- **HAB expectation: services supported with RWHAP funds will**
  - (1) fall within the legislatively-defined range of services,
  - (2) as appropriate, within Part A, have been identified as a local priority by the HIV Health Services Planning Council/Body,
  - (3) in the case of allocation decisions made by a Part B State/Territory or by a local or regional consortium, meet documented needs and contribute to the establishment of a continuum of care,
  - (4) adhere to statutory limitations on expenditures (e.g., 10% administration, 75% core medical services, Part C – 50% EIS, etc.)
- **RWHAP funds are intended to support only the HIV-related needs of eligible individuals. Recipients and subrecipients must be able to make an explicit connection between any service supported with RWHAP funds and the intended client’s HIV status, or care-giving relationship to a person with HIV.**

# Eligible Individuals

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- **Principal intent of the RWHAP statute: to provide services to low income, underinsured people living with HIV, including those whose illness has progressed to the point of clinically defined AIDS**
- **Setting and implementing priorities for the allocation of funds: may optionally define eligibility for certain services more precisely, but may NOT broaden the definition of who is eligible for services**
- **HAB expectation: all RWHAP recipients establish and monitor procedures to ensure that all funded providers verify and document client eligibility**

# Eligible Individuals

- **Affected individuals (people not identified with HIV) may be eligible for RWHAP services in limited situations, but these services for affected individuals must always benefit people living with HIV.**
  - Services to individuals affected with HIV only in the circumstances described below.
    - Primary purpose enables the affected individual to participate in the care of someone with HIV or AIDS
    - Service directly enables an infected individual to receive needed medical or support services by removing an identified barrier to care
    - Service promotes family stability for coping with the unique challenges posed by HIV

# Unallowable Costs

- **Cash payments to intended clients of RWHAP-funded services**
- **General-use prepaid cards (bear the logo of a payment network, such as Visa, MasterCard, or American Express)**
- **Gift cards that are cobranded with the logo of a payment network and the logo of a merchant or affiliated group of merchants are general-use prepaid cards, not store gift cards**
- **Other unallowable costs include:**
  - Clothing
  - Employment and Employment-Readiness Services
  - Funeral and Burial Expenses
  - Property Taxes

# Allowable Costs

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- **Store gift cards or vouchers**
  - Where direct provision of the service is not possible or effective, store gift cards, vouchers, coupons, or tickets that can be exchanged for a specific service or commodity (e.g., food or transportation)
  - Incentives for eligible program participants: store gift cards that can be redeemed at one merchant or an affiliated group of merchants for specific goods or services are allowable
  - Voucher and store gift card programs administered in a manner which assures that vouchers and store gift cards cannot be exchanged for cash or used for anything other than the allowable goods or services

# Allowable Costs

- Services outlined in the PCN 16-02: core medical and support services
- RWHAP recipient, along with respective planning bodies, decide the specific services to be funded under grant or cooperative agreement
- Apply to the entire Ryan White HIV/AIDS Program (RWHAP)
- Reasonable and allocable to RWHAP
- No expectation that a RWHAP Part would cover all services – program income must also be used for otherwise allowable costs
- Coordinate service delivery across Parts to ensure that the entire jurisdiction/service area has access to services based on needs assessment
- Assist in the diagnosis of HIV infection, linkage to care for seropositive individuals, retention in care, and the provision of HIV treatment
- All services must relate to HIV diagnosis, care and support and must adhere to established HIV clinical practice standards consistent with the Department of Health and Human Services (HHS) treatment guidelines
- All providers must be appropriately licensed and in compliance with state and local regulations
- Development and adoption of service standards for all RWHAP-funded services
- RWHAP clients must meet income and other eligibility criteria as established by RWHAP Part A, B, C, or D recipients

# Service Category Descriptions

**Core Medical Services**

**Support Services**

# Service Categories

CORE MEDICAL SERVICES	SUPPORT SERVICES
Outpatient/Ambulatory Health Services	Non-Medical Case Management Services
AIDS Drug Assistance Program Treatments	Child Care Services
AIDS Pharmaceutical Assistance	Emergency Financial Assistance
Oral Health Care	Food Bank/Home Delivered Meals
Early Intervention Services (EIS)	Health Education/Risk Reduction
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	Housing
Home Health Care	Other Professional Services
Home and Community-Based Health Services	Linguistic Services
Hospice Services	Medical Transportation
Mental Health Services	Outreach Services
Medical Nutrition Therapy	Psychosocial Support Services
Medical Case Management, including Treatment Adherence Services	Referral for Health Care and Support Services
Substance Abuse Outpatient Care	Rehabilitation Services
	Respite Care
	Substance Abuse Services (residential)

# Changes/Deletions

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- **Naming of services**
  - Consistency with RWHAP statute
  - Non-medical Case Management
- **Combination of services**
  - Pediatric Developmental Assessment
  - Treatment Adherence Services
  - Other Professional Services
- **More descriptive of services**
  - AIDS Pharmaceutical Assistance
  - Early Intervention Services

# Core Medical Services

- **Outpatient/Ambulatory Health Services**
- **AIDS Pharmaceutical Assistance**
- **Early Intervention Services (EIS)**
- Home Health Care
- Hospice Services
- **Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals**
- Substance Abuse Outpatient Care
- **AIDS Drug Assistance Program Treatments**
- Oral Health Care
- Medical Nutrition Therapy
- Home and Community-Based Health Services
- Mental Health Services
- **Medical Case Management, including Treatment Adherence Services**

# Outpatient/Ambulatory Health Services (OAHS)

## *Description:*

- Diagnostic and therapeutic services provided directly to a client by a licensed healthcare provider in an outpatient medical setting
- Outpatient medical settings include clinics, medical offices, and mobile vans where clients do not stay overnight. Emergency room or urgent care services are not considered outpatient settings
- **Allowable services include:**

Medical history taking	Physical examination
Diagnostic testing, including laboratory testing	<b>Prescription and management of medication therapy</b>
Behavioral risk assessment, subsequent counseling, and referral	Treatment and management of physical and behavioral health conditions
Preventive care and screening	<b>Pediatric developmental assessment</b>
<b>Treatment adherence</b>	Education and counseling on health and prevention issues
Referral to and provision of specialty care related to HIV diagnosis	

## *Program Guidance:*

- Treatment Adherence services provided during an Outpatient/Ambulatory Health Service visit should be reported under the Outpatient/Ambulatory Health Services category whereas Treatment Adherence services provided during a Medical Case Management visit should be reported in the Medical Case Management service category.

# Early Intervention Services (EIS)

## *Description:*

- The RWHAP legislation defines EIS for Parts A, B, and C. See § 2651(e) of the Public Health Service Act.

## *Program Guidance:*

- The elements of EIS often overlap with other service category descriptions; however, EIS is the combination of such services rather than a stand-alone service.
- RWHAP Part recipients should be aware of programmatic expectations that stipulate the allocation of funds into specific service categories.

# Early Intervention Services (EIS): Parts A and B

- **RWHAP Parts A and B EIS services must include the following four components:**
  - Targeted HIV testing to help the unaware learn of their HIV status and receive referral to HIV care and treatment services if found to be HIV-infected
    - Recipients must coordinate these testing services with other HIV prevention and testing programs to avoid duplication of efforts
    - HIV testing paid for by EIS cannot supplant testing efforts paid for by other sources
  - Referral services to improve HIV care and treatment services at key points of entry
  - Access and linkage to HIV care and treatment services such as HIV Outpatient/Ambulatory Health Services, Medical Case Management, and Substance Abuse Care
  - Outreach Services and Health Education/Risk Reduction related to HIV diagnosis

# Early Intervention Services (EIS): Part C EIS

- **RWHAP Part C EIS services must include the following four components:**
  - Counseling individuals with respect to HIV
  - High risk targeted HIV testing (confirmation and diagnosis of the extent of immune deficiency)
    - Recipients must coordinate these testing services under Part C EIS with other HIV prevention and testing programs to avoid duplication of efforts
    - The HIV testing services supported by Part C EIS funds cannot supplant testing efforts covered by other sources
  - Referral and linkage to care of HIV-infected clients to Outpatient/Ambulatory Health Services, Medical Case Management, Substance Abuse Care, and other services as part of a comprehensive care system including a system for tracking and monitoring referrals
  - Other clinical and diagnostic services related to HIV diagnosis

# Medical Case Management, including Treatment Adherence Services

## *Description:*

- Provision of a range of client-centered activities focused on improving health outcomes in support of the HIV care continuum
- May also provide benefits counseling by assisting eligible clients in obtaining access to other public and private programs for which they may be eligible

## *Program Guidance:*

- MCM services objective: improving health care outcomes whereas Non-Medical Case Management Services objective is to provide guidance and assistance in improving access to needed services
- Visits to ensure readiness for, and adherence to, complex HIV treatments shall be considered MCM or OAHS services

## • **Key activities include:**

- Initial assessment of service needs
- Development of a comprehensive, individualized care plan
- Timely and coordinated access to medically appropriate levels of health and support services and continuity of care
- Continuous client monitoring to assess the efficacy of the care plan
- Re-evaluation of the care plan at least every 6 months with adaptations as necessary
- Ongoing assessment of the client's and other key family members' needs and personal support systems
- Treatment adherence counseling to ensure readiness for and adherence to complex HIV treatments
- Client-specific advocacy and/or review of utilization of services

# AIDS Drug Assistance Program Treatments

## *Description:*

- State-administered program authorized under Part B of the RWHAP to provide FDA-approved medications to low-income clients with HIV disease who have no coverage or limited coverage from private insurance, Medicaid, or Medicare
- Can be used to purchase health insurance for eligible clients and for services that enhance access to, adherence to, and monitoring of antiretroviral therapy. RWHAP ADAP recipients must conduct a cost effectiveness analysis to ensure that purchasing health insurance is cost effective compared to the cost of medications in the aggregate
- Eligible ADAP clients must be living with HIV and meet income and other eligibility criteria as established by the state

## *Program Guidance:*

- See PCN 07-03: The Use of Ryan White HIV/AIDS Program, Part B (formerly Title II), AIDS Drug Assistance Program (ADAP) Funds for Access, Adherence, and Monitoring Services;
- PCN 13-05: Clarifications Regarding Use of Ryan White HIV/AIDS Program Funds for Premium and Cost-Sharing Assistance for Private Health Insurance; and
- PCN 13-06: Clarifications Regarding Use of Ryan White HIV/AIDS Program Funds for Premium and Cost-Sharing Assistance for Medicaid

# AIDS Pharmaceutical Assistance

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Divided into 2 categories, based on RWHAP Part funding:

- **Local Pharmaceutical Assistance Program (LPAP) is operated by a RWHAP Part A or B recipient or subrecipient**
- **Community Pharmaceutical Assistance Program provided by a RWHAP Part C or D recipient**

# AIDS Pharmaceutical Assistance - LPAP

## *Description:*

- Local Pharmaceutical Assistance Program (LPAP) is operated by a RWHAP Part A or B recipient or subrecipient
- A supplemental means of providing medication assistance when an ADAP has a restricted formulary, waiting list and/or restricted financial eligibility criteria

## *Program Guidance:*

- For LPAPs: Only RWHAP Part A grant award funds or Part B Base award funds may be used to support an LPAP. ADAP funds may not be used for LPAP support.
- LPAP funds are not to be used for Emergency Financial Assistance. Emergency Financial Assistance may assist with medications not covered by the LPAP.

- **RWHAP Part A or B recipients** using the LPAP service category must establish the following:
  - Uniform benefits for all enrolled clients throughout the service area
  - A recordkeeping system for distributed medications
  - An LPAP advisory board
  - A drug distribution system
  - A drug formulary approved by the local advisory committee/board
  - A client enrollment and eligibility determination process that includes screening for ADAP and LPAP eligibility with rescreening at minimum of every six months
  - Coordination with the state's RWHAP Part B ADAP
    - A statement of need should specify restrictions of the state ADAP and the need for the LPAP
  - Implementation in accordance with requirements of the 340B Drug Pricing Program and the Prime Vendor Program

# AIDS Pharmaceutical Assistance – CPAP

## ***Description:***

- Community Pharmaceutical Assistance Program is provided by a RWHAP Part C or D recipient
- The provision of long-term medication assistance to eligible clients in the absence of any other resources
- The medication assistance must be greater than 90 days

## ***Program Guidance:***

- For Community Pharmaceutical Assistance: This service category should be used when RWHAP Part C or D funding is expended to routinely refill medications.
- RWHAP Part C or D recipients should use the Outpatient Ambulatory Health Services or Emergency Financial Assistance service for non-routine, short-term medication assistance.

- **RWHAP Part C or D recipients** using this service category must establish the following:
  - A financial eligibility criteria and determination process for this specific service category
  - A drug formulary consisting of HIV primary care medications not otherwise available to the client
  - Implementation in accordance with the requirements of the 340B Drug Pricing Program and the Prime Vendor Program

# Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals

## *Description:*

Provides financial assistance for eligible clients living with HIV to maintain continuity of health insurance or to receive medical and pharmacy benefits under a health care coverage program

- **To use RWHAP funds for health insurance premium and cost-sharing assistance, a RWHAP Part recipient must implement a methodology that incorporates the following requirements:**
  - Must ensure that clients are buying health coverage that, at a minimum, includes at least one drug in each class of core antiretroviral therapeutics from the [Department of Health and Human Services \(HHS\) treatment guidelines](#) along with appropriate HIV outpatient/ambulatory health services
  - Must assess and compare the aggregate cost of paying for the health coverage option versus paying for the aggregate full cost for medications and other appropriate HIV outpatient/ambulatory health services, and allocate funding to Health Insurance Premium and Cost Sharing Assistance only when determined to be cost effective
- **The service provision consists of either or both of the following:**
  - Paying health insurance premiums to provide comprehensive HIV Outpatient/Ambulatory Health Services and pharmacy benefits that provide a full range of HIV medications for eligible clients
  - Paying cost-sharing on behalf of the client

## ***Program Guidance:***

Traditionally, RWHAP Parts A and B funding support health insurance premiums and cost-sharing assistance. If a RWHAP Part C or D recipient has the resources to provide this service, an equitable enrollment policy must be in place and it must be cost-effective and sustainable.

# Support Services

- **Non-Medical Case Management Services**
- **Emergency Financial Assistance**
- **Health Education/Risk Reduction**
- **Other Professional Services**
- Medical Transportation
- Psychosocial Support Services
- Rehabilitation Services
- **Referral for Health Care and Support Services**
- Child Care Services
- Food Bank/Home Delivered Meals
- Housing
- Linguistic Services
- **Outreach Services**
- Respite Care
- Substance Abuse Services (residential)

# Non-Medical Case Management

## *Description:*

- Provide guidance and assistance in accessing medical, social, community, legal, financial, and other needed services
- Assist eligible clients to obtain access to other public and private programs for which they may be eligible, such as Medicaid, Medicare Part D, and others
- **Key activities include:**
  - Initial assessment of service needs
  - Development of a comprehensive, individualized care plan
  - Continuous client monitoring to assess the efficacy of the care plan
  - Re-evaluation of the care plan at least every 6 months with adaptations as necessary
  - Ongoing assessment of the client's and other key family members' needs and personal support systems

## *Program Guidance:*

- Non-Medical Case Management (NMCM) have as their objective to provide guidance and assistance in improving access to needed services whereas Medical Case Management services have as their objective improving health care outcomes.

# Emergency Financial Assistance

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## *Description:*

- Provides limited one-time or short-term payments to assist the RWHAP client with an emergent need for paying for essential utilities, housing, food (including groceries and food vouchers), transportation, and medication
- Can occur as a direct payment to an agency or through a voucher program

## *Program Guidance:*

- Direct cash payments to clients are not permitted
- Continuous provision of an allowable service to a client should not be funded through emergency financial assistance

# Health Education/Risk Reduction

## ***Description:***

- Includes sharing information about medical and psychosocial support services and counseling with clients to improve their health status

## **Topics covered may include:**

- Education on risk reduction strategies to reduce transmission such as pre-exposure prophylaxis (PrEP) for clients' partners and treatment as prevention
- Education on healthcare coverage options (e.g., qualified health plans through the Marketplace, Medicaid coverage, Medicare coverage)
- Health literacy
- Treatment adherence education

## ***Program Guidance:***

- Health Education/Risk Reduction services cannot be delivered anonymously.

# Outreach Services

## *Description:*

### **Provision of the following 3 activities:**

- Identification of people who do not know their HIV status and linkage into OAHS
- Provision of additional information and education on health care coverage options
- Reengagement of people who know their status into OAHS

## *Program Guidance:*

### **Outreach programs must be:**

- Conducted at times and in places where there is a high probability of individuals with HIV infection and/or exhibiting high-risk behavior
- Designed to provide quantified program reporting of activities and outcomes to accommodate local evaluation of effectiveness
- Planned and delivered in coordination with local and state HIV prevention outreach programs to avoid duplication of effort
- Targeted to populations known, through local epidemiologic data or review of service utilization data or strategic planning processes, to be at disproportionate risk for HIV infection

**Funds may not be used to pay for HIV counseling or testing under this service category.**

# Other Support Services

## Other Professional Services

- Provision of professional and consultant services rendered by members of particular professions licensed and/or qualified to offer such services by local governing authorities
- Such services may include and are not limited to:
  - Legal services
  - Permanency planning
  - Income tax preparation services

## Referral for health care and support services

- Directs a client to needed core medical or support services in person or through telephone, written, or other type of communication
- Includes referrals to assist eligible clients to obtain access to other public and private programs for which they may be eligible

# Recap

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- **Policy Clarification Notice #16-02 Eligible Individuals & Allowable Uses of Funds**  
[http://hab.hrsa.gov/affordablecareact/service\\_category\\_pcn\\_16-02\\_final.pdf](http://hab.hrsa.gov/affordablecareact/service_category_pcn_16-02_final.pdf)
- **Effective with Fiscal Year 2017 funding**
- **Resources**
  - Frequently Asked Questions
  - Contact your Project Officer

# Questions

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# Thank you!

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