

# **Georgia Ryan White Parts A, B, C, & D CAREWare Sub-Services and Definitions**

**Effective April 1, 2008  
Revised March 2017**

## **Background**

Over the last few years, the Health Resources and Services Administration (HRSA) has placed increasing emphasis on the importance of Ryan White grantees' quality management plans, especially stressing the significance of documenting the quality of programs. HRSA requires all Ryan White grantees to submit annual Ryan White Service Reports (RSR) composed of a grantee report, provider reports for all providers, and client-level data reports for those providers that provide core medical and/or support services.

## **Purpose**

The purpose of collaborating on the standardization of sub-services that will be entered into CAREWare by the providers is to adhere to the federal reporting requirements described above, but also to improve service utilization data for program planning and quality management by Ryan White grantees and funded providers in Georgia. In addition, multiply funded providers will receive more consistent messages about data requirements and grantees will not duplicate work regarding adherence to federal data submission, reporting, and quality management requirements.

The HIV/AIDS Bureau's (HAB) goal is to have a client-level data reporting system that provides data on the characteristics of the funded grantees, their providers, and the clients served with program funds. The data you submit will be used to do the following:

- Monitor the outcomes achieved on behalf of HIV/AIDS clients and their affected families receiving care and treatment through RWHAP grantees and/or providers;
- Address the disproportionate impact of HIV in communities of color by assessing organizational capacity and service utilization in minority communities;
- Monitor the use of RWHAP funds for appropriately addressing the HIV/AIDS epidemic in the United States;
- Address the needs and concerns of Congress and the Department of Health and Human Services (HHS) concerning the HIV/AIDS epidemic and the RWHAP; and
- Monitor progress toward achieving the goals identified in the National HIV/AIDS Strategy.

## User Guide

Items listed below correspond to *Ryan White HIV/AIDS Program Services Report (RSR)* service categories as follows:

<p><b>RYAN WHITE CORE MEDICAL SERVICES</b></p> <p>Outpatient Ambulatory Health Services</p> <p>Oral Health</p> <p>Health Insurance Program</p> <p>Mental Health Services</p> <p>Medical Nutrition Therapy including nutritional supplements</p> <p>Medical Case Management (including treatment adherence)</p> <p>Substance abuse services (outpatient)</p> <p><b>RYAN WHITE SUPPORT SERVICES</b></p> <p>Case Management (non-medical)</p> <p>Child Care Services</p> <p>Emergency Financial Assistance</p> <p>Food bank/Home-Delivered Meals</p> <p>Health Education/Risk Reduction</p> <p>Housing Services</p> <p>Legal Services</p> <p>Linguistics Services</p> <p>Medical Transportation Services</p> <p>Outreach Services</p> <p>Psychosocial Support Services</p> <p>Referral for Health Care and Support Services</p> <p>Treatment Adherence Counseling</p>
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Items listed under gray rows with black lettering correspond to *Parts A, B, C, D and Other Non-CARE Act funding service data requirements* as follows:

<b>Sub-service name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Name of sub-service that corresponds to HRSA RSR service category and definitions.	Description of sub-service that corresponds with scope of service funded by Georgia Ryan White Parts A, B, C, and D grantees. Unless indicated otherwise, definitions refer to activity rather than specific personnel.	Discrete measure of 1 service. Units may be in terms of visits, sessions, time increments, etc.	Ryan White funding sources allowable in Georgia for the sub-service.

## Data Rules

### **Eligible Scope Requirement for 2015 Data**

Starting with the 2015 calendar year data collection period, providers will report data on all clients who received services *eligible for Ryan White HIV/AIDS Program (RWHAP) funding regardless of the actual funding used to pay for those services*. This is a change from previous RSR reporting periods for which providers reported data on only clients who received services paid for by Ryan White funding.

### **Why the change?**

The RWHAP has always been a payer of last resort, covering care for individuals who are uninsured or under insured. The RWHAP also increases the capacity and quality of care for *all* HIV positive clients receiving services at RWHAP funded sites. At this time, HAB is shifting to eligible scope (defined below) in order to better capture the impact the RWHAP has for all people living with HIV in the country receiving services at RWHAP funded sites.

Eligible Scope reporting allows HAB to better understand the full scope of services that people seeking care from Ryan White providers receive. Eligible scope also supports the continued collection of clinical data, which is essential for measuring client healthcare outcomes and progress toward achieving the National HIV/AIDS Strategy.

### **Who is included in RSR reporting under Eligible Scope?**

To be included in the RSR, the client must:

- (1) Meet the grantee's eligibility requirements for Ryan White Program participation (grantee-defined and includes HIV status, income, residency).
- AND
- (2) Have received at least one of the core medical or support services for which the provider receives Ryan White funding.

## Services

Client level service data must be reported in the CAREWare Service tab for all of your Ryan White eligible clients who receive services from your agency under a category for which your agency is funded by Ryan White even those who had the services paid for by another funding source.

When your agency refers a client to another agency for a service and **your agency pays** for that service with Ryan White funds, those services should be entered in the CAREWare Service tab by your agency.

Mental Health Services provided to HIV-affected clients should be reported as psychosocial support services.

All Ryan White services that your agency is funded to provide should appear in the service drop down list found in the CAREWare Service tab. If you are missing any of your Ryan White funded services, contact your CAREWare Administrator.

Further, if service names appear in the drop down list that do not correspond to the subservice names listed in this manual, please notify your CAREWare Administrator.

The default unit in CAREWare is always one, so for those subservices whose units are *15 minutes*, bundle time spent into 15 minute units. For example, if the time spent providing the service was 45 minutes, then the unit value entered into CAREWare would be three units.

For those subservices whose units are a *one way trip*, enter the dollar amount in the price field in CAREWare.

The RDR counts one service per client per day per service category.

The RSR captures all demographic, clinical, and service data specific to each client as a component of each client record.

### **Referrals**

When your agency refers a client to another agency for a service, but does not pay for that service, your agency should enter those services in the CAREWare Referrals tab.

**RYAN WHITE CORE MEDICAL SERVICES**

**Outpatient/ambulatory medical care**

<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Initial Primary Care Visit	Intensive initial HIV primary care visit for a new client provided by a physician, physician's assistant, or advanced practice registered nurse. Includes chief complaint; history of present illness (HPI); past medical, family, and social history; complete review of systems (ROS); comprehensive physical exam; diagnosis/treatment plan; counseling and referrals as appropriate.	Visit	A,B,C,D, Other
Comprehensive Primary Care Visit	Intensive HIV primary care visit provided by a physician, physician's assistant, or advanced practice registered nurse. Includes re-enrollment client visit with detailed and updated history; extended or complete ROS; detailed or comprehensive physical exam; diagnosis/treatment plan; counseling and referrals as appropriate. Takes more time than routine interim visit.	Visit	A,B,C,D, Other
Interim Primary Care Visit	Routine HIV primary care visit provided by a physician, physician's assistant, or advanced practice registered nurse. Includes routine follow-up of chief complaint and history or problem focused history; review of HIV-related symptoms; routine physical exam; update treatment plan; and counseling and referrals as appropriate.	Visit	A,B,C,D, Other
Acute Primary Care Visit	"Sick visit." Client requires prompt evaluation because of new symptoms, acute illness, medication side effects or adverse reaction, or other urgent reason. Usually seen within 24 hours of contacting clinic and seen by the physician, physician's assistant, or advanced practice registered nurse.	Visit	A,B,C,D, Other
Limited Service Visit	"Nurse visit." Limited service visits may include immunizations, STI treatments, birth control, blood pressure checks, injections, and TB skin test readings.	Visit	A,B,C,D, Other
Lab Reviews	Phone or face-to-face lab review with provider. Letters to clients are not included.	15 Minutes	A,B,C,D, Other
Lab Visit	Lab draws only, no visit with provider.	Visit	A,B,C,D, Other
Medication Pick Up	Either a pharmacist or other trained healthcare provider may hand out dispensed medications to the client (only those authorized by Georgia law may dispense dangerous drugs). Medication pick-up visit must include brief adherence discussion and/or brief medication counseling. Includes routine pick-up of medications and refilling pill boxes as part of adherence program.	Visit	A,B,C, Other

Enrollment/Intake/Re-enrollment	Includes education and lab components of intake for new or re-enrolling clients into primary medical care once they are determined eligible. Clients must be re-screened for eligibility if they have not been seen in 6 months.	Visit	A,B,C,D, Other
Routine HIV/TB Primary Care Visit	Visits to TB clinic by HIV/TB co-infected clients.	Visit	A,B,C, Other
Specialty Care Visit	Visit with specialty care health provider. Specialties may include Cardiology, Dermatology, Gastroenterology, Hepatitis C Clinic, Infectious Disease, Nephrology, Neurology, Oncology, Obstetrics/Gynecology, Optometry/Ophthalmology, Pharmacist, Radiology, Surgery, or Urology.	Visit	A,B,C, Other
TB Direct Observed Therapy (DOT) - Medical	TB DOT - direct observation of the client ingesting the correct dose of anti-tuberculosis medications by a public health nurse or trained healthcare professional.	Visit	A, Other
ADAP Stop Gap Prescription	Provision of HIV/AIDS medication to patients, while awaiting ADAP or PAP approval.	Prescription	A
Primary Care Client Education	Provision of education/risk reduction in a primary care setting.	Session	A,C, Other
Primary Care Prescription (non-HIV)	Provision of primary care medication (non-HIV) to patients.	Prescription	A,C, Other
<b>Oral health care</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Initial Dental Visit	Intensive initial HIV oral health care visit for a new client provided by a dentist. Includes a review of past dental, medical, and social history; a comprehensive dental exam consisting of an oral cancer screening where indicated; evaluation of the extraoral and intraoral hard and soft tissues, dental caries, missing or un-erupted teeth, restorations, existing prosthesis, and periodontal conditions; and diagnosis, treatment plan, and referrals as appropriate.	Visit	A,B,C, Other
Emergency Dental Visit	Care related to the treatment of pain or infection, including, but not limited to: emergency examinations, diagnostic dental radiographs, caries control, endodontic access, extractions and subgingival curettage and trauma.	Visit	A,B,C, Other
Endodontic Care	For severely decayed or abscessed teeth that can be maintained if the patient so chooses. When the decay process has proceeded to the vital portions of the tooth (pulp), fillings alone are no longer possible; root canals which save severely decayed or necrotic (abscessed) teeth.	Visit	A,B,C, Other
Oral Pathology Management	Management of oral pathology including biopsy associated with HIV disease such as oropharyngeal candidiasis (thrush), ulcerations, abscesses, Kaposi's sarcoma, and oral warts due to human papillomavirus (HPV).	Visit	A,B,C, Other

Oral Surgery	Includes extraction of severely decayed teeth or periodontal involved teeth, routine extraction of erupted tooth or exposed root, surgical removal of teeth and bone, and biopsies of suspect lesions.	Visit	A,B,C, Other
Periodontal Care	Care for clients with heavy calculus (tartar) buildup above and below the gum line, infected or inflamed gingival gums, or periodontal disease. Maintenance therapy for clients who have previously undergone periodontal therapy is also included in this category.	Visit	A,B,C, Other
Preventive Care	Care that includes but is not limited to dental exams, diagnostic dental x-rays, dental cleanings, office fluoride therapies, and sealants.	Visit	A,B,C, Other
Prosthetic Care	Replaces multiple missing teeth and enables clients to maintain proper nutrition, function, speech, and esthetics. Also covered in this category are single unit crowns, crown build-ups, single unit fixed anterior bridges, and dentures.	Visit	A,B,C, Other
Restorative Dental Care	Includes amalgam (silver) fillings for posterior teeth and tooth colored fillings for anterior teeth to replace dental caries.	Visit	A,B,C, Other
<b>Health insurance program - health insurance premium and cost sharing assistance</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Premium Payments	Provision of payments of health care insurance premiums.	Payment	B,C, Other
Co-payments	Assistance with health insurance co-payments or co-insurance payments for medications..	Payment	A,B,C, Other
Deductibles	Assistance with health insurance deductibles.	Payment	B,C, Other
<b>Mental health services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Family Mental Health Counseling	Provision of counseling services by a licensed mental health provider to clients and their HIV+ family members.	Session	A,B,C, Other
Group Mental Health Counseling	Provision of psychotherapeutic group sessions by a licensed mental health provider.	Session	A,B, Other
Individual Mental Health Counseling	Provision of counseling services by a licensed mental health provider to address a psychological diagnosis and/or individual concerns in living.	Session	A,B,C, Other
Mental Health Intake/Re- enrollment	Includes education components of intake for new or re-enrolling clients into mental health services once they are determined eligible. Clients must be re-screened for eligibility if they have not been seen in 6 months.	Session	A

Mental Health Assessment	Mental health assessment by licensed mental health provider to assess psychological difficulties, and develop a clinical/diagnostic formulation. Includes a review of bio-psycho-social history, mental health history (including hospitalizations), medication history; and appropriate referrals.	Assessment	A
Mental Health Intake/Assessment	Initial mental health evaluation conducted by a licensed mental health provider to assess psychological difficulties, develop a clinical/diagnostic formulation, and create an initial mental health services treatment plan. Includes a review of bio-psycho-social history, mental health history (including hospitalizations), medication history; and appropriate referrals.	Session	B,C, Other
Psychiatric Consultation	Consultation with a licensed clinical mental health provider to assist in guiding clinical care.	Session	A,C, Other
Psychological Testing	The use of standardized instruments for formal evaluation of personality and abilities, psychodiagnosis, and/or assessment of neuropsychological functioning. Must be performed by licensed mental health provider.	Session	A, Other
Psychotropic Medication Management	The prescription and management of psychiatric medications for treatment of psychiatric disorders. Must be performed by a licensed clinical mental health provider.	Session	A,B,C, Other
Initial Mental Health Treatment Plan	Creation of an initial mental health services treatment plan. Including setting treatment goals conducted by a licensed mental health provider.	Session	A
Update Mental Health Treatment Plan	Evaluation and revision of mental health treatment plan including a reviewing progress and updating treatment goals conducted by a licensed mental health provider.	Session	A,B,C, Other
<b>Medical nutrition therapy including nutritional supplements</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Group Nutritional Counseling - RD	Basic nutrition education provided in a group session. Topics to be addressed at a minimum include: basic nutrition needs, food and water safety, and simple drug food interactions. Must be provided by Registered Dietitian (RD).	Session	A,B, Other
Individual Nutritional Intervention - RD	Individualized nutritional intervention based on nutritional assessment. Interventions include developing a nutritional plan and one-on-one nutritional counseling and referrals. Must be provided by Registered Dietitian (RD).	Session	A,B,C, Other

Nutritional Assessment - RD	Nutritional assessment by a Registered Dietitian (RD). Includes review of nutrition history, clinical information, laboratory data, biochemical parameters, diet, calculated intake compared to nutrition needs, weight, anthropometric measurements, and lifestyle, financial, education and other psycho-social data.	Assessment	A,B,C, Other
Nutritional Supplement - RD	Provision of nutritional supplement such as Glucerna, Ensure, etc. by a Registered Dietitian (RD).	Can/Bar/Bottle	A,B,C, Other
<b>Medical case management (including treatment adherence)</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Medication Adherence Assessment	Determines readiness for treatment naïve clients or experienced clients who are changing regimens. Assess lifestyle and other factors that will promote or hinder adherence. Determine willingness to adhere by reviewing prior adherence to other medications. Must be provided by RN in clinical setting outside of a primary care visit.	Assessment	A,B,C,D, Other
Individual Medication Adherence Counseling	Provision of educational sessions for treatment naïve clients or experienced clients who are changing regimens; and ongoing counseling for clients currently taking antiretroviral therapy. Discussion of ARV treatment, dosing schedules, medication adherence/resistance, techniques and resources for success, indication/expectation of ARVs, and toxicity. Must be provided by RN in clinical setting outside of a primary care visit. Visits with Pharmacist should be classified as Specialty Care Visit.	Session	A,B,C,D, Other
Initial Enrollment	Intensive enrollment visit. Includes initial intake, assessment, and initiation of the comprehensive individual service plan (ISP). Includes residency and income verification, social history, review of medical records, and signing of consents. Must include the coordination and follow-up of medical treatments and treatment adherence.	15 minutes	A,B,C,D, Other
Update Service Plan	Comprehensive ISP reevaluated and updated in face-to-face interviews. Review client progress on goals, identify additional needs, determine next steps, and set new goals. Must include the coordination and follow-up of medical treatments and treatment adherence.	15 minutes	A,B,C,D, Other
Face-to-Face Interim Contact	The client has direct, face-to-face contact with his/her case manager. Includes follow up with client on the comprehensive ISP goals and current needs. May include assisting client with applications for financial assistance, ADAP, PAP, HICP and other entitlement programs. Must include the coordination and follow-up of medical treatments and treatment adherence.	15 minutes	A,B,C,D, Other

Non Face-to-Face Interim Contact	Non-face-to-face contact with client or other providers on behalf of the client. Includes contact in the form of phone, email, fax, or letter. Must include the coordination and follow-up of medical treatments and treatment adherence.	15 minutes	A,B,C,D, Other
Discharge Linkage	Coordination of care for clients being discharged from hospital. Includes linking clients to clinic, assisting clients in accessing services and medications, and providing education about enrollment. Must be provided by RN or medical case manager.	Visit	A,B,C, Other
<b>Substance abuse services (outpatient)</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Maintenance Group Substance Abuse Counseling	Therapeutic groups provided to substance abusing clients who have received treatment services and require support to stabilize and maintain recovery; includes continuing care program.	Hour	A,B, Other
Intensive Group Substance Abuse Counseling	Therapeutic groups to address substance abuse issues and/or individual concerns in living related to recovery provided by a licensed mental health or certified substance abuse professional; includes day program.	Hour	A,B, Other
Individual Substance Abuse Counseling	Provision of individual counseling services by a licensed mental health or certified substance abuse provider to address substance abuse issues and/or individual concerns in living related to recovery.	Session	A,B,C, Other
Substance Abuse Intake/Re- enrollment	Includes education components of intake for new or re-enrolling clients into substance abuse services once they are determined eligible. Clients must be re-screened for eligibility if they have not been seen in 6 months.	Session	A
Substance Abuse Assessment	Substance abuse evaluation conducted by a licensed mental health or certified substance abuse professional to assess substance use and dependence, develop a clinical/diagnostic formulation, and create a substance abuse services treatment plan. Includes a review of bio-psycho-social history, substance use/abuse history (including hospitalizations), medication history; and appropriate referrals.	Assessment	A
Substance Abuse Intake/Assessment	Initial substance abuse evaluation conducted by a licensed mental health or certified substance abuse professional to assess substance use and dependence, develop a clinical/diagnostic formulation, and create a substance abuse services treatment plan. Includes a review of bio-psycho-social history, substance use/abuse history (including hospitalizations), medication history; and appropriate referrals.	Session	B,C, Other
Initial Substance Abuse Treatment Plan	Creation of an initial substance abuse treatment plan. Including setting treatment goals conducted by a licensed mental health or certified substance abuse professional.	Session	A
Update Substance Abuse Treatment Plan	Evaluation and revision of substance abuse treatment plan including reviewing progress and updating treatment goals conducted by a licensed mental health or certified substance abuse professional.	Session	A,B,C, Other

## RYAN WHITE SUPPORT SERVICES

### Case management (non-medical)

Subservice Name	Definition	Unit	Funding Sources
Initial Enrollment - Non-Medical	Intensive enrollment visit. Includes initial intake and assessment. Includes explanation of program, education on navigating health care system, discussion of needs, and collection of eligibility information (income, etc.). May include assistance in obtaining medical, social, community, legal, financial, and other needed services.	15 minutes	A,B,C, Other
Face-to-Face Interim Contact - Non-Medical	Direct face-to-face contact with client. Includes obtaining updates on needs and income. May include assistance in obtaining medical, social, community, legal, financial, and other needed services.	15 minutes	A,B,C, Other
Non Face-to-Face Interim Contact - Non-Medical	Non-face-to-face contact with client. Includes obtaining updates on needs and income. May include assistance in obtaining medical, social, community, legal, financial, and other needed services..	15 minutes	A,B,C, Other
Face-to-Face Contact – Pre-release Program	Direct face-to-face contact with a client in a correctional setting to help achieve immediate linkages to community-based care and treatment upon release from custody.	15 minutes	
Benefits/Financial Counseling	Assistance enrolling clients onto ADAP, PAP, HICP and other entitlement programs; and determining eligibility for Medicaid, Medicare and other payers, regardless of credentials of staff performing activity.	Session	B,C, Other
Face-to-Face Peer Encounter	Direct face-to-face contact with a client by a peer advocate/educator. Includes explanation of program and/or navigating health care system, discussion of needs, and provision of other assistance. Does not include benefits/financial counseling or client education.	15 minutes	B, Other
Non Face-to-Face Peer Encounter	Non face-to-face contact with client by a peer advocate/educator. Includes telephone contact with clients who are lost to care and other follow-up contact.	15 minutes	B, Other
Update Service Plan	Comprehensive ISP reevaluated and updated in face-to-face interviews. Review client progress on goals, identify additional needs, determine next steps, and set new goals. Must include the coordination and follow-up of medical treatments and treatment adherence.	15 minutes	A
Linkage to Care	Coordination of care for clients. Includes linking clients to medical care through referrals, assisting clients in accessing services and medications, and providing education about enrollment.	Session	A
<b>Child care services</b>			
Subservice Name	Definition	Unit	Funding Sources
Child Care	Provision of child care per unique patient per agency per day. On-site only.	Child	A,D, Other

<b>Emergency financial assistance</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Housing	Short-term payments for assistance with housing emergencies (e.g., one-time rental assistance). Cannot include mortgage payments.	Payment	B, Other
Medications	Short-term assistance with obtaining medications when other resources are unavailable. Medications are obtained at an external pharmacy.	Prescription	B,C, Other
Grocery/Food	Provision of voucher/gift card to purchase groceries.	Voucher	B,D, Other
Utilities	Short-term payments for assistance with essential utilities (e.g., water, electricity, and fuel for heating). Check is written directly to utility company. _____	Payment	B, Other
<b>Foodbank/home-delivered meals</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Delivery of Home-Delivered Meal	Delivery of meal only, no preparation of meal.	Meal	A, Other
Food Pantry	Provision of food pantry items regardless of dietary needs.	Meal	A,B, Other
Group Meal	Provision of meal in group setting. Number of meals served to clients, not number of purchased meals for group.	Meal	A, Other
Home-Delivered Meal	Preparation and delivery of meal.	Meal	A, Other
Mechanical Soft Meal	Provision of soft food following dental visit.	Meal	A, Other
Meal Voucher	Provision of voucher to purchase meal during extended medical visits.	Voucher	A, Other
Food Voucher	Provision of voucher/gift card to purchase groceries.	Voucher	A, Other
Nutritional Supplement Non-RD	Provision of nutritional supplement by someone other than a Registered Dietitian (RD).	Can/Bar	A,B,C, Other
Snack	Provision of snack packs at medical sites when clients have a significant amount of wait time.	Snack	A, Other
<b>Health education/risk reduction</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Client Education	Provision of education/risk reduction outside of primary care and medical case management visits by peer advocate/educator or health educator.	Session	B,D, Other
<b>Housing services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Housing Assistance	Rental assistance for longer than one-time or episodic emergency need, not to exceed cumulative period of 24 months. Cannot include mortgage payments.	Payment	B, Other
Residential Housing	Housing facility for homeless or people at risk for homeless living with HIV/AIDS. Not to exceed cumulative period of 24 months.	Payment	B, Other
<b>Legal services</b>			

<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Access to Eligible Benefits	Provide legal counsel or referral regarding pharmacy assistance programs, patient assistance programs, Social Security and SSI, FMLA, Short-Term Disability and Long-Term Disability, SNAP, TANF, utility assistance, and Unemployment Benefits.	15 minutes	A, Other
Bankruptcy and Debt Relief	Provide legal counsel or referral regarding bankruptcy and other debt relief issues.	15 minutes	A, Other
Discrimination	Provide legal counsel or referral regarding denial of health care, services, unemployment, or rights due to HIV/AIDS.	15 minutes	A, Other
Breach of Confidentiality	Provide legal counsel or referral when a person's HIV/AIDS status is disclosed without the person's consent.	15 minutes	A, Other
Health Insurance	Provide legal counsel or referral regarding access to health care through health insurance including Medicaid, Medicare, COBRA, COBRA subsidy, Ryan White Part B Insurance Assistance, HIPAA, and Health Care Reform.	15 minutes	A, Other
Will and Advance Directives	Provide legal counsel or referral regarding preparation of Wills and Advance Directive documents such as Powers of Attorney, Trusts, Nomination of Guardian and Do Not Resuscitate Orders.	15 minutes	A, Other
<b>Linguistics services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
American Sign Language (ASL)	Provision of ASL interpreter.	15 minutes	A,B, Other
Other Language	Provision of interpreter other than ASL and Spanish. Interpretation services available via language line.	15 minutes	A,B, Other
Spanish Language	Provision of Spanish-language interpreter/translator.	15 minutes	A,B, Other
<b>Medical transportation services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Public Transportation	Payment of a one way public transportation (mass transit) trip for purposes of receiving a healthcare service.	One-way trip	A,B,C,D, Other
Taxi	Payment of a one way taxi trip for purposes of receiving a healthcare service.	One-way trip	A,B, Other
Gas voucher	Provision of gas voucher for purposes of receiving a healthcare visit.	Voucher	A,B, Other
<b>On demand car service</b>	<b>Payment of a one way trip for purposes of receiving a core medical or support service.</b>	<b>One-way trip</b>	<b>A</b>
Van	Provision of ride in van for purposes of receiving a healthcare service.	One-way trip	A,B, Other
Parking	Provision of a parking voucher for purposes of receiving a healthcare visit.	Voucher	A,C, Other

<b>Outreach services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Outreach Services	Focused and cultural competent outreach activities/services provided by a peer advocate that increase access and retention to Ryan White care, including ADAP.	Session	D, Other
<b>Psychosocial support services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
HIV Support Group	Support group for persons living with HIV/AIDS provided by district staff or volunteers or staff of a community based Organization.	Session	A,B, Other
Group Peer Counseling	Face-to-face peer-led group counseling.	Session	A, Other
Individual Peer Counseling	Face-to-face one-on-one peer counseling. Does not include treatment adherence counseling or phone referrals.	Session	A, Other
Family Mental Health Counseling	Provision of counseling services by a licensed mental health provider to HIV- family members and support network	Session	A,B, Other
Patient Navigation	Provision of patient navigation services to clients	Session	A, Other
<b>Referral for Health Care and Support Services</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Benefits/Financial Counseling	Assistance enrolling clients onto ADAP, HICP, PAP and other entitlement programs; and determining eligibility for Medicaid, Medicare and other payers, regardless of credentials of staff performing activity	Session	A
Enrollment/Intake/Re-enrollment	Includes education components of intake for new or re-enrolling clients into Ryan White services once they are determined eligible. Clients must be re-screened for eligibility if they have not been seen in 6 months	Session	A
Face-to-Face Interim Contact	Direct face-to-face contact with client. Includes obtaining updates on needs and income. May include assistance in obtaining medical, social, community, legal, financial, and other needed services.	15 minutes	A
Non Face-to-Face Interim Contact	Non-face-to-face contact with client. Includes obtaining updates on needs and income. May include assistance in obtaining medical, social, community, legal, financial, and other needed services.	15 minutes	A
Enrolled in ADAP	Client received application approval for the enrollment into Georgia's AIDS Drug Assistance Program	Enrollment	A
Enrolled in PAP	Client received application approval for the enrollment into Pharmaceutical Manufacturer's Patient Assistance Program	Enrollment	A
Enrolled in ACA	Client received application approval for the enrollment into Affordable Care Act Marketplace Exchange for an individual	Enrollment	A

Insurance Navigation-Group	Provision of education and assistance for enrollment into Affordable Care Act Marketplace Exchange to a group	Session	A
Insurance Navigation-Individual	Provision of education and assistance for enrollment into Affordable Care Act Marketplace Exchange to an individual	Session	A
<b>Treatment adherence counseling</b>			
<b>Subservice Name</b>	<b>Definition</b>	<b>Unit</b>	<b>Funding Sources</b>
Individual Treatment Adherence Counseling	One-on-one treatment adherence counseling provided by non-healthcare professionals outside of the primary care or medical case management setting.	Session	B, Other
Group Treatment Adherence Counseling	Group treatment adherence counseling provided by non-healthcare professionals outside of the primary care or medical case management setting.	Session	B, Other