

RYAN WHITE PART B UPDATES

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1. Changes to PCN #16-02

2. Update on the New Eligibility Changes

3. Update on the Upcoming 2020 RFP

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**Policy Clarification Notice
(PCN) #16-02**

Revised 10/22/2018

Unallowable Costs (in general)



USE OF CASH

HRSA RWHAP funds may not be used to make cash payments to intended clients



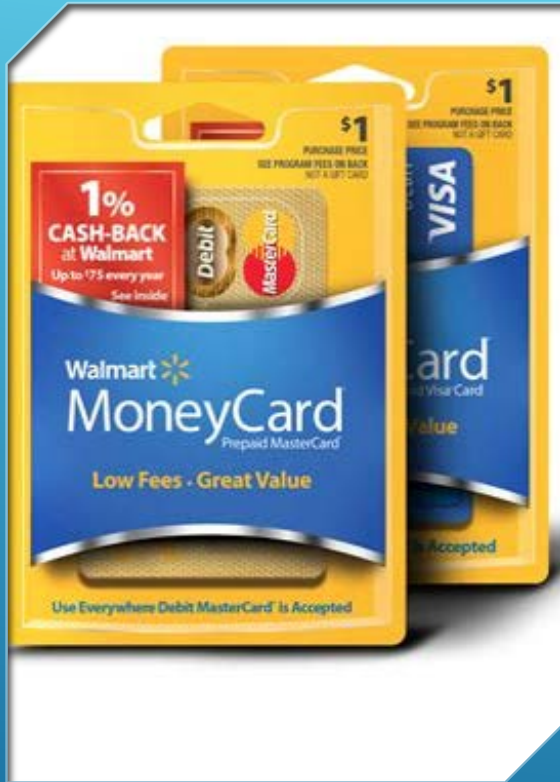
BUT

Where direct provision of the service is not possible or effective; store gift cards, vouchers, coupons, or tickets that can be exchanged for specific services or commodities can be used.

Allowable “Store Gift Card”

Cards that can be redeemed at one merchant or an affiliated group of merchants for specific goods or services that further the goals and objectives of the HRSA RWHAP. (Example Food & Transportation)





NON-ALLOWABLE

General-use prepaid cards are considered “cash equivalent”. If they have a logo of a payment network (Visa, MasterCard, American Express) or are cobranded with the logo of a payment network.



OTHER UNALLOWABLE USE OF FUNDS

- Clothing
- Employment and Employment-Readiness Services*
- Funeral and Burial Expenses
- Property Taxes
- Pre-Exposure Prophylaxis (PrEP)
- Non-Occupational Post-Exposure Prophylaxis (nPEP)
- Develop materials, designed to promote or encourage, directly, intravenous drug use or sexual activity, whether homosexual or heterosexual.
- The purchase of vehicles without approval.
- International Travel
- The purchase or improvement of land
- The purchase, construction, or permanent improvement of any building or other facility.

Service Category Changes



Core Medical Services

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

RWHAP Support Services


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

Core Medical Services



AIDS Drug Assistance Program (ADAP)

Provides an approved formulary of medications to HIV-infected individuals for the treatment of HIV disease or the prevention of opportunistic infections, based on eligibility determination criteria, income guidelines and Federal Poverty Level threshold set by the state

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Updates/Changes

Added: “ADAP formularies must include at least one FDA-approved medicine in each drug class of core antiretroviral medicines from the U.S. Department of Health and Human Services/ Clinical Guidelines for the Treatment of HIV”

“ADAPs may use a limited amount of program funds for activities that enhance access to, adherence to, and monitoring of antiretroviral therapy with prior approval. “

Removed: PCN 13-05 and PCN 13-06, replaced by PCN 18-01: Clarifications Regarding the Use of Ryan White HIV/AIDS Program Funds for Health Care Coverage Premium and Cost Sharing Assistance.

AIDS Pharmaceutical Assistance

For the purpose of providing AIDS Pharmaceutical Assistance through one of two programs:

- 1. A Local Pharmaceutical Assistance Program (LPAP) – Operated by Part A or B (non-ADAP) recipient, as a supplemental means of providing ongoing medication assistance when ADAP has a restricted formulary, waiting list and/or restricted financial eligibility criteria.**
- 2. A community Pharmaceutical Assistance Program (CPAP) – Provided by Part C or D recipient for the provision of ongoing medication assistance to eligible clients in the absence of any other resources.**

Changes to LPAP

- 1. Parts A & B must establish: A drug formulary that is approved by the local advisory committee/board and consists of HIV-related medications not otherwise available to the clients due to the elements mentioned above.**
- 2. LPAP funds are not to be used for emergency or short-term assistance.**

Removed from CPAP

- 1. The medication assistance must be greater than 90 days.**

**Health Insurance Premium and Cost Sharing
Assistance for Low-Income People living with HIV**



HP CS 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 cover program. For purposes of this service category, health insurance also includes standalone dental insurance. The service provision consist of the following :

- Paying Health insurance premiums to provide comprehensive HIV Outpatient/Ambulatory Health Services, and pharmacy benefits tht provide a full range of HIV medications for eligible clients;**
- Paying standalone dental insurance premiums to provide comprehensive or health care services for eligible clients;**
- Paying cost sharing on behalf of the client.**

An HRSA RWHAP Part Recipient must implement a methodology that incorporates the following requirements:

- Clients obtain health care cover coverage that at a minimum, includes at least one U.S. Food Drug and Administration (FDA) approved medicine in each drug class of core antiretroviral medicines outlined in the U.S. Department of Health and Human Service Clinic Guidelines for treatment of HIV, as well as appropriate HIV outpatient/Ambulatory health services;

AND

- The cost of paying for the health care coverage (including all other sources of premium and cost sharing assistance) is cost-effective in the aggregate versus paying for the full cost for medications and other appropriate HIV outpatient/ambulatory health services.

Added in Program Guidance:

HRSA RWHAP Part A, B, C, and D recipients may consider providing their health insurance premiums and cost sharing resources allocation to their state HRSA RWHAP ADAP, particularly where the ADAP has the infrastructure to verify health care coverage status and process payments for public or private health care coverage status and process payments for public or private health care coverage premiums and medication costs sharing.

PCN 07-05, PCN 13-05, & PCN 13-06 were replaced with PCN 18-01.

Outpatient/Ambulatory Health Services

Quick Definition:

Provide diagnostic and therapeutic-related activities directly to a client by a licensed healthcare provider in an outpatient medical setting.

Outpatient medical setting may include:

- Clinics;
- Medical offices;
- Mobile Vans;
- Using Telehealth Technology;
- Urgent Care Facilities for HIV-Related Visits.

Allowable activities include:

- **Medical History Taking;**
- **Physical examination;**
- **Diagnostic testing (including HIV confirmatory and viral load testing), as well as laboratory testing;**
- **Treatment and management of physical and behavioral health conditions;**
- **Behavior risk Assessment, subsequent counselling and referral;**
- **Preventive care and screening;**
- **Pediatric developmental assessment;**
- **Prescription and management of medication therapy;**
- **Treatment adherence;**
- **Education and counseling on health and prevention issues;**
- **Referral to and provision of specialty care related to HIV diagnosis including audiology and ophthalmology.**

Non-Allowable Costs Include:

- **Non-HIV related visits to urgent care**
- **Emergency room visits**

SUPPORT SERVICES



Emergency Financial Assistance

Rewritten Definition:


Emergency Financial Assistance provides limited **one-time or short-term payments** to assist an HRSA RWHAP client with an urgent need or essential items or services necessary to improve health outcomes, including: utilities, housing, food (including groceries and food vouchers), transportation, medication not covered by an AIDS Drug Assistance Program or AIDS Pharmaceutical Assistance, or another HRSA RWHAP-allowable cost needed to improve health outcomes. Emergency Financial Assistance must occur as a direct payment to an agency or through a voucher program.

- Direct cash payments to clients are not permitted.
- Continuous provision of an allowable service to a client must not be funded through Emergency Financial assistance.

Housing

Quick Definition:

Provides transitional, short-term, or emergency housing assistance to enable a client or family to gain or maintain outpatient/ambulatory health services and treatment, including temporary assistance necessary to prevent homelessness and to gain or maintain access to medical care.

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(as before)

Requires an individualized housing plan (updated annually)

Change:

May provide some types of core medical (e.g. mental health) or support services (e.g. substance abuse).

Cannot be used for Mortgage or rental deposits, although these may be allowable costs under the HUD Housing Opportunities for Persons with AIDS grant awards.

Non-Medical Case Management

Quick Definition:

Non-Medical Case Management Services (NMCM) is the provision of a range of client-centered activities focused on improving access to and retention in needed core medical and support services.

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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 service and continuity of care.**
- **Client-specific advocacy and/or review of utilization of services.**
- **Continuous client monitoring to assess the efficiency 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.**

Added:

.....provides coordination, guidance, and assistance in accessing

- Employment (Services)**
- Vocational (Services),**
- Children's Health Insurance Program,**
- Department of Labor or Education-funded services,**

Program Guidance:

.....improving access to, and retention in, needed medical and support services to mitigate and eliminate barriers to HIV care services.....

Outreach

Definition:

The Outreach Services category has as its principal purpose identifying PLWH who either do not know their HIV status, or who know their status but are not currently in care. As such, Outreach Services provide the following activities:

- 1) Identification of people who do not know their HIV status and/or
- 2) linkage or re-engagement of PLWH who know their status into HRSA RWHAP services, including provision of information about health care coverage options.

Outreach Services must:

1. **use data** to target populations and places that have a high probability of reaching PLWH who
 - a. have never been tested and are undiagnosed
 - b. have been tested, diagnosed as HIV positive, but have not received their test results, or
 - c. have been tested, know their HIV positive status, but are not in medical care;
2. be conducted at times and in places where there is a high probability that PLWH will be identified; and
3. be delivered in coordination with local and state HIV prevention outreach programs to avoid duplication of effort.

Outreach may be provided through community and public awareness activities that meet the requirements above and include explicit and clear links to and information about available HRSA RWHAP services.

Program Guidance:

Outreach Services provided to an individual or in small group settings **cannot be** delivered anonymously, as some information is needed to facilitate any necessary follow-up and care.

Outreach **must not** include outreach activities that exclusively promote HIV prevention education.

Recipients and subrecipients **may use** Outreach Services funds for HIV testing **when** HRSA RWHAP resources are available and where the testing would not supplant other existing funding.

Rehabilitation Services

Quick Definition:

Rehabilitation Services provide HIV-related therapies intended to improve or maintain a client's quality of life and optimal capacity for self-care on an outpatient basis, and in accordance with an individualized plan of HIV care.

Guidance:

Allowable activities under this category include

- **Physical**
- **Occupational**
- **Speech**
- **Vocational Therapy**

Rehabilitation services provided as part of inpatient hospital services, nursing homes, and other long-term care facilities are not allowable.

Eligibility Update



Eligibility Has Not Changed:

- **Nevada residency**
- **Confirmed HIV diagnosis**
- **Proof of existing insurance coverage or the lack of insurance coverage**
- **Household income not to exceed 400% of the Federal Poverty Level**

Effective on November 5, 2018

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What Has Changed?

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- **No more Provisional/Pending Status.**
- **Labs are no longer required for eligibility.**
- **Photo ID Is no longer required.**
- **Only one proof of residency is required.**
- **Proof of Diagnosis is required at eligibility.**
- **Birthday/Half-Birthday Alignment**

NEW APPLICATIONS

- **Universal Eligibility Application – New Clients (18-04a)**
- **Universal Eligibility Application – Annual (18-05a)**
- **Universal Eligibility Application – 6-Month Self-Attestation (18-06a)**
- **4 - Supplemental Documents**

END HIV Nevada

<https://endhivnevada.org>

2020 RFP UPDATE





MONEY

MONEY EVERYWHERE


quickmeme.com



Competitive

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There Will Be:

- 1. A New RFP.**
 - 2. A Bidders Conference.**
 - 3. A Q&A .**
 - 4. More Agencies Involved.**
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QUESTIONS?

