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## Alabama Ryan White Part B Service Standards

### Oral Health Care

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#### Purpose

This Service Standard was prepared by the Alabama Department of Public Health (ADPH) Office of HIV Prevention and Care (OHPC) and the United Way of Central Alabama (UWCA) in consultation with Organizational Ideas (a technical assistance provider), with stakeholder input to guide the delivery of high-quality services for people with HIV (PWH). This document contains the minimum requirements Ryan White Part B (RWPB) providers are expected to meet when delivering HIV care and support services funded by RWPB. Providers may exceed these standards. These standards will also provide a basis to evaluate the RWPB services. Please note that all RWPB Service Standards expectations also apply to Health Resources and Services Administration (HRSA) Ending the HIV Epidemic in the U.S. (EHE)-funded services unless exceptions are noted.

#### Definitions and Descriptions

The description under the “Standard” column outlines the required activities that must be provided to the client receiving the RWPB service. The “Documentation” column provides the documents that must be maintained by the provider delivering the service. The Service Standards contain the following major elements:

- **Agency & Personnel Requirements:** The minimum required education, certification, experience, and facility requirements that are needed to provide the

RWPB service.

- **Eligibility & Intake:** Eligibility refers to the current statewide criteria for receiving services through RWPB as outlined in the RWPB Universal Standard. The agency must determine or confirm RWPB eligibility for the client prior to provision of services. Eligibility may occur during intake or through a stand-alone process. Intake is the process of collecting information to determine the client's immediate service needs.
- **Assessment:** The Assessment is an evaluation of need conducted by qualified personnel to determine if there is a need for the RWPB service. The evaluation must render the determination for referral or provision of service. It must include the elements listed in the standard. The documentation of the evaluation of need is determined by the agency.
- **Provision of Services:** The provision of services are the activities or services that are provided to the client. Where appropriate, a Service Plan should address the client's assessed needs with a timeline to resolve the need(s).
- **Transition/Discharge:** Transition/Discharge refers to the release or cessation of the RWPB service. Transition or Discharge may occur in conjunction with the transition or discharge from the agency's program, when the client no longer needs or meets the criteria for the service, when the client is transitioned to another care provider, or when a client is deceased.
- **Case Closure:** When a client is discharged or transitioned to another care provider, the services will cease and the case is closed.

## I. HRSA Service Category Definition

Oral Health Care activities include outpatient diagnosis, prevention, and therapy provided by dental health care professionals, including general dental practitioners, dental specialists, dental hygienists, and licensed dental assistants.

## II. Program Guidance

Oral Health Care Services should conform to nationally recognized standards such as the American Dental Association Clinical Practice Guidelines.

## III. Key Service Components and Activities

### Allowable activities include:

An oral health treatment plan is developed for each eligible client. Services are based on this plan and should include the following:

- Prevention of oral and/or systemic disease where the oral cavity serves as an entry point
- Elimination of presenting symptoms
- Elimination of infection
- Preservation of dentition and restoration of functioning (dentures)

### Not Allowable:

- Cosmetic dentistry for cosmetic purposes only

For common components required for all RWPB services, please see the RWPB Universal Service Standard. Key service components and activities are noted in the Service Standards below.

### ADPH Service Standards:

Standard	Documentation
<b>1. Agency &amp; Personnel Requirements</b>	
1.1) Ensure all services are provided by qualified dental professionals, including general dental practitioners, dental specialists, and dental hygienists licensed through the Board of Dental Examiners of Alabama. All practitioners and licensees are responsible for operating within the scope of practice for which they are licensed.	1.1) Current licensure to practice in the State of Alabama or a multi-state license, which is recognized by the State of Alabama with proof of licensure on file at the agency.
1.2) Two hours of HIV related training required per year.	1.2) Documentation of required HIV-related Continuing Education Units (CEUs) in employee training records.
1.3) Staff must continue to fulfill the requirements of their individual disciplines to maintain their license, if applicable.	1.3) Copies of continuing education and related licensure or certification renewals with license/certificate number.

<b>2. Eligibility &amp; Intake</b>	
2.1) Subrecipient must conduct or confirm eligibility consistent with statewide eligibility requirements. All clients must have an active eligibility at the time of service.	2.1) Active eligibility for RWPB in client's record during the service delivery period.
2.2) Complete intake within 15 business days of referral.	2.2) Intake completed within 15 business days of referral.
<b>3. Assessment</b>	
<p>3.1) A medical history and limited physical evaluation should be obtained and reviewed at the initial appointment and updated annually. This information may include, but not be limited to, the following:</p> <ul style="list-style-type: none"> <li>• The client's HIV-prescribing primary medical care provider name and contact information</li> <li>• Pregnancy status as applicable</li> <li>• Patient's chief complaint</li> <li>• Current medications, including any osteoporotic medications</li> <li>• Drug and food allergies</li> <li>• Recreational and/or illicit drug use</li> <li>• Tobacco use</li> <li>• Neurological diseases</li> <li>• Oral hygiene regime</li> <li>• Date of last dental examination</li> <li>• Caries charting</li> </ul> <p>Radiographs or panoramic and bitewings and selected periapical films</p>	3.1) Client's record includes all elements of comprehensive medical history, physical examination and/or dental history.
<p>3.2) Patients with lesions suspected to be oral manifestations of HIV disease should be referred to a dental health expert with experience in treating oral lesions associated with HIV/AIDS. These providers include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Periodontists</li> <li>• Endodontists</li> <li>• Oral surgeons</li> </ul> <p>Oral pathologists</p>	3.2) Client record includes where client was referred, date, and status of referral.

<b>4. Provision of Services</b>	
<p>4.1) A dental treatment plan that includes preventive care, maintenance, and elimination of oral pathology shall be developed and discussed with the client. Various treatment options shall be discussed and developed in collaboration with the client. A treatment plan appropriate for the client's health status, payor information and individual preference must include as clinically indicated:</p> <ul style="list-style-type: none"> <li>• Provision for the relief of pain</li> <li>• Elimination of infection</li> <li>• Preventive plan component</li> <li>• Periodontal treatment plan if necessary</li> <li>• Elimination of caries</li> <li>• Replacement or maintenance of tooth space or function</li> <li>• Consultation or referral for conditions where treatment is beyond the scope of services offered</li> <li>• Determination of adequate recall interval</li> <li>• Invasive Procedure Risk Assessment (prior to oral surgery, extraction, or other invasive procedure)</li> </ul>	<p>4.1) Client's record includes all elements of treatment plan and evidence of client's participation. Client's record includes evidence of completed service.</p>
<p>4.2) For dental emergencies, an appointment will be made within 1 business day.</p>	<p>4.2) Client's record indicates when emergency is identified and appointment is scheduled.</p>
<p>4.3) A medical history and limited physical evaluation should be updated annually.</p>	<p>4.3) Client record reflects annual update of medical and limited physical evaluation.</p>
<b>5. Transition/Discharge</b>	
5.1) See Universal Standard	
<b>6. Case Closure</b>	
6.1) See Universal Standard	

**Resources**

1. Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) Policy Clarification Notice (PCN) #16-02: Ryan White HIV/AIDS Program Services: Eligible Individuals and Allowable Uses of Funds:

<https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/service-category-pcn-16-02-final.pdf>

2. Ryan White HIV/AIDS Program (RWHAP) National Monitoring Standards for RWHAP Part B Recipients:  
<https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/2023-rwhap-nms-part-b.pdf>
3. American Dental Association Clinical Practice Guidelines. Accessed online at <https://www.ada.org/en/resources/research/science-and-research-institute/evidence-based-dental-research>.
4. American Dental Association. Human Immunodeficiency Virus (HIV), Accessed online at <https://www.ada.org/en/resources/research/science-and-research-institute/oral-health-topics/hiv#:~:text=Nearly%20all%20patients%20with%20HIV,and%20procedures%2C%20including%20oral%20surgery.&text=Still%2C%20dental%20treatment%20planning%20must,and%20their%20physician%20as%20appropriate>