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Alabama Ryan White Part B Service Standards

Referral for Health Care and Supportive Services

Effective Date: January 1, 2025

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

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. Activities provided under this service category may include referrals to assist HRSA RWHAP-eligible clients to obtain access to other public and private programs for which they may be eligible (e.g., Medicaid, Medicare Part D, State Pharmacy Assistance Programs, Pharmaceutical Manufacturer’s Patient Assistance Programs, and other state or local health care and supportive services, or health insurance Marketplace plans.)

II. Program Guidance

Referrals for Health Care and Support Services provided by outpatient/ambulatory healthcare professionals should be reported under Outpatient/Ambulatory Health Services (OAHS) category.

Referrals for health care and support services provided by case managers (medical and non-medical) should be reported in the appropriate case management service category.

III. Key Service Components and Activities

Allowable activities include:

- Coordination of referrals to core medical and support services provided through agencies or other contracted providers.

Not allowable:

- Funds cannot be used to duplicate referral services provided through other service categories.

For common components required for all RWPB services, please see the RWPB Universal Service Standard. Key service components and activities specific to this service are outlined below:

ADPH Service Standards:

| Standard | Documentation |
|---|--|
| 1. Agency & Personnel Requirements | |
| 1.1) Staff providing Referral Services may have a wide range of education and lived experiences relevant to the services being provided. At minimum, staff should receive the following training and information: <ul style="list-style-type: none">• HIV 101• Cultural Competency• HIV Counseling/Testing• General information of community resources | 1.1) Completed trainings in personnel files. |

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| 2. Eligibility & Intake | |
| 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 5 business days of referral. | 2.2) Intake completed within 5 business days of referral. |
| 3. Assessment | |
| 3.1) Determine client's need of referral to needed core medical or support services within 5 business days of intake. | 3.1) Referral needs identified and included in client's file within 5 business days of intake. |
| 4. Provision of Services | |
| 4.1) Once need is determined, a referral for services will be made within 5 business days of assessment. | 4.1) Referral completed within 5 business days of assessment noted in client's file. |
| 4.2) Follow-up with client within 30 days of referral to health care and supportive services to ensure needs have been met and assess for other referral needs. | 4.2) Follow up noted in client's file indicating referral was completed and additional needs assessed within 30 days. |
| 5. Transition/Discharge | |
| 5.1) See Universal Standard | |
| 6. Case Closure | |
| 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>