

## **Program Element #08: Ryan White Program, Part B HIV/ AIDS Services**

1. **General Description.** Funds provided under this Agreement for this Program Element must only be used, in accordance with and subject to the requirements and limitations set forth below, to deliver to eligible individuals with HIV and their families one or more of the services described in the Program, Part B of the XXVI of the PHS Act as amended by the Ryan White HIV/AIDS Treatment Modernization Act of 2006 (Ryan White Program), referred to hereafter as “Ryan White Program” and the Oregon Ryan White Program, Part B HIV Care & Treatment Program Manual (July 2008), referred to hereafter as the “Program Manual.” Expenditure of these funds must be directly related to an individual’s HIV positive status and is necessary to help him/her remain in HIV care or to the removal of barriers to his/her receipt of appropriate medical care and treatment. All Ryan White Program, Part B HIV/AIDS Services that are supported in whole or in part with funds provided under this Agreement must be delivered in accordance with the Program Manual.
  
2. **Definitions specific to Ryan White Program, Part B HIV/AIDS Services.**
  - a. **Case Management or Case Management Services.** Case management is a range of client-centered services that link clients with health care, psychosocial and other services. The coordination and follow-up of medical treatments is a component of medical case management. These services ensure timely and coordinated access to medically appropriate levels of health and support services and continuity of care through ongoing assessment of the client’s and other key family members’ needs and personal support systems. Medical case management includes the provision of medical treatment adherence counseling to ensure readiness for, and adherence to, complex HIV/AIDS treatments. Key activities include (1) initial assessment of service needs, (2) development of a comprehensive, individualized service plan, (3) coordination and referral follow-up of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic re-evaluation and adaptation of the plan as necessary over the life of the client. Case management includes client-specific advocacy and review of the client’s utilization of services. Case management includes, but is not limited to face-to-face coordination, phone contact, and other appropriate forms of communication.
  
  - b. **Oregon Program, Part B Ryan White Program, Part B HIV Case Management Standards of Service:** A written document dated as of July 2007 and incorporated herein by this reference that outlines or defines the set of standards and provides directions for HIV/AIDS Case Management in the State of Oregon. These standards are also intended to provide a framework for evaluating HIV/AIDS Case Management Services and to define a professional case manager’s accountability to the public and to the individuals receiving Ryan White Program, Part B Program, Part B HIV/AIDS Services. These standards are available at [www.healthoregon.org/hiv](http://www.healthoregon.org/hiv).
  
  - c. **HRSA/HAB or Health Resources and Services Administration/HIV/AIDS Bureau:** The agency of the U.S. Department of Health and Human Services that is responsible for administering the Ryan White Program. Information about HRSA is available at [www.hab.hrsa.gov](http://www.hab.hrsa.gov)

- d. **Oregon HIV Care Coalition (OHCC):** A state-wide planning and advisory body convened by the Department to provide input and recommendations to assist the State of Oregon in meeting federal requirements applicable to grants received under the Ryan White Program.
  - e. **Portland TGA:** The Portland Transitional Grant Area consisting of Clackamas, Columbia, Multnomah, Washington, and Yamhill counties.
  - f. **XXVI of the PHS Act as amended by the Ryan White HIV/AIDS Treatment Modernization Act of 2006 (Ryan White Program):** Public Law 109-415, enacted in 1990 and reauthorized in 1996, 2000 and 2006, which is the federal legislation enacted to address the health care and support service needs of individuals living with the HIV disease and their families in the United States and its territories.
  - g. **Program, Part B HIV Care and Treatment Program:** The State program, funded predominately under Program, Part B of the Ryan White Program, for improving the quality, availability, and organization of health care and support services to individuals with HIV and their families, with the goal of improved health outcomes for individuals with HIV.
  - h. **Oregon Ryan White Program, Part B HIV Care & Treatment Program Manual (July 2008):** The Program Manual, incorporated herein by this reference, that defines the range of services that may be supported with funds awarded under this Agreement for Ryan White Program, Part B HIV/AIDS Services, the standards for these services, eligibility for these services, the program monetary caps and levels of service, and the priorities for the use of funds made available for Ryan White Program, Part B HIV/AIDS Services under this Agreement. This manual can be found online at [www.healthoregon.org/hiv](http://www.healthoregon.org/hiv).
3. **Procedural and Operational Requirements.** All Ryan White Program, Part B HIV/AIDS Services supported in whole or in part with funds provided under this Agreement must be delivered in accordance with the following procedural and operational requirements:
- a. **Eligibility.** Ryan White Program, Part B HIV/AIDS Services may only be delivered to HIV-infected individuals in LPHA's service area who are active participants in Case Management Services that comply with the requirements of the Oregon Program, Part B HIV Case Management Standards of Service, and to their affected families of origin or choice. HIV verification must be obtained and a payer for HIV primary care medical services must be identified within 30 working days from the date of Intake. Verification of HIV status may be undertaken only after LPHA obtains the required consent of that individual to the release of HIV-specific information. This documentation may not be released to a third party without further consent of that individual.
  - b. **Certain Limitations on Use of Financial Assistance.**
    - i. Financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services may not be used to cover the costs for any item or service covered by other state, federal, or private benefits or service programs. The financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services must be used as dollars of last resort. LPHA must document in the records of the individual

receiving the Ryan White Program, Part B HIV/AIDS services that the funds are being used in a manner that complies with this paragraph.

- ii. Financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services may only be used for services necessary to facilitate a person living with HIV/AIDS to access HIV medical care and treatment. Financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services may only be used for support services that directly benefits the health of, or is related to the HIV positive status of an individual.
  - iii. Only clients at or below 250% of federal poverty level are eligible for financial assistance.
  - iv. Under no circumstances may the financial assistance be used to provide direct reimbursement to an individual receiving Ryan White Program, Part B HIV/AIDS Services.
  - v. Financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services may only be used in accordance with the Program Policies, Services Definitions and Guidance for the Ryan White Program, Part B HIV Care and Treatment Program, as submitted with the Oregon application for Ryan White Program, Part B funding, which document is incorporated by this reference and is available for review at [www.healthoregon.org/hiv](http://www.healthoregon.org/hiv).
  - vi. LPHA, as the first-tier contractor, may use up to 10% of the aggregate financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services to cover LPHA's costs of administering its Ryan White Program, Part B HIV/AIDS Services. LPHA may permit any of its Providers of Ryan White Program, Part B HIV/AIDS Services, as second-tier contractor, to use up to 10% of the funds paid to that Provider by LPHA for Ryan White Program, Part B HIV/AIDS Services for Provider administrative costs. The aggregate of funds provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services that are used to cover administrative costs beyond the first line entity may not exceed 10% of the total Ryan White Program, Part B HIV/AIDS Services funds expended by LPHA under this Agreement. For purposes of this limitation, the costs of administration, including expenses such as overhead and indirect charges, are those related to the administration of this Agreement and the financial assistance provided for Ryan White Program, Part B HIV/AIDS Services hereunder, the awarding of agreements to Providers through requests for proposals, agreement monitoring procedures, and completion of Ryan White Program data reports and other required reports, to the extent such costs are allowable under applicable OMB cost principles.
- c. **General Requirements Applicable to all Ryan White Program, Part B HIV/AIDS Services.**
- i. Financial assistance provided under the Agreement for Ryan White Program, Part B HIV/AIDS Services must be budgeted by LPHA in a manner that would reasonably be expected to assure funding availability throughout the contract period; and with a priority to "Core" services as defined within the program guidance. Financial assistance to specific clients must be prioritized based on a client's level of need and in accordance with the Program Manual, (Program Policies, Services Definitions, and Guidance). , which is available for download and review at [www.healthoregon.org/hiv](http://www.healthoregon.org/hiv).

- ii. All Ryan White Program, Part B HIV/AIDS Services supported in whole or in part with funds provided under this Agreement must be delivered consistent with the service priorities set forth in the Program Manual (Program Policies, Services Definitions and Guidance), LPHA must use the funds awarded to LPHA under this Agreement for Ryan White Program, Part B HIV/AIDS Services only in accordance with the care services budget which is attached to this Program Element Description as Attachment 1 and incorporated herein by this reference (the “Care Services Budget”). Modifications of this budget may only be made with Department approval, as reflected in an amendment to this Agreement, duly executed by all parties.
  - iii. In the event of any conflict or inconsistency between LPHA’s Care Services Budget and the provisions of this Program Element Description (excluding any attachments), the provisions of this Program Element Description (excluding any attachments) shall control.
  - iv. All Ryan White Program, Part B HIV/AIDS Services must be available and delivered in a culturally and linguistically appropriate manner.
- d. Case Management.**
- i. Case Management services must be provided to all eligible individuals within LPHA’s service area who seek such services and must be delivered consistently throughout the period for which financial assistance is awarded under this Agreement for Ryan White Program, Part B HIV/AIDS Services.
  - ii. All Case Management services must be delivered in accordance with the Oregon Program, Part B HIV Case Management Standards of Service.
  - iii. LPHA shall establish a grievance policy for recipients of Ryan White Program, Part B HIV/AIDS Services supported in whole or in part with funds provided under this Agreement and shall make this policy known to and available to individuals receiving the services, as requested.
  - iv. All Providers of Ryan White Program, Part B HIV/AIDS Services must obtain, and maintain in the file of the individual receiving the services, appropriately signed and dated releases of information and consents to care for each such individual prior to commencement of services. Signed consents must include, at a minimum, the HIV Care and Treatment Program Client Consent Form.
- e. Confidentiality.** In addition to the requirements set forth in section 6 of Exhibit E of this Agreement, all Providers of Ryan White Program, Part B HIV/AIDS Services must comply with the following confidentiality requirements:
- i. No information regarding the existence of an individual’s HIV-positive status may be kept or retained on file by a Provider of Ryan White Program, Part B HIV/AIDS Services without the existence of an established “client with service provider” relationship between the Provider and the individual. This relationship is established when a Provider of Ryan White Program, Part B HIV/AIDS Services, at a minimum, engages in an interview or

dialog with the individual that results in a specific record being developed relative to prospective services available to that individual.

- ii. All materials related to the delivery of Ryan White Program, Part B HIV/AIDS Services that contain names or other identifying information of individuals receiving services must be kept in a locked and secure area/cabinet, which allows access only to authorized personnel, and all computers and data programs that contain such information must have restricted access. Staff computers must be in a secure area not accessible by the public, and computer systems must be password protected. Providers of Ryan White Program, Part B HIV/AIDS Services must comply with all county, state and federal confidentiality requirements applicable to the delivery of Ryan White Program, Part B HIV/AIDS Services.
  - iii. Breaches of confidentiality are serious and require immediate action. Therefore, the supervisory or administrative staff of a Ryan White Program, Part B HIV/AIDS Services funded Provider must immediately investigate, evaluate and, if necessary, correct any alleged breaches by its staff of the confidentiality requirements of this Program Element; further, Provider must document the steps it takes to resolve any breaches of confidentiality. All confirmed breaches of the confidentiality requirements of this Program Element must result in appropriate sanctions in accordance with Provider policy and procedure and applicable law. Each Provider of Ryan White Program, Part B HIV/AIDS Services must report to Department in sufficient detail any confirmed breaches by its staff of the confidentiality requirements of this Program Element within 14 days of Provider's evaluation of such breaches as described above.
  - iv. Providers of Ryan White Program, Part B HIV/AIDS Services must establish and comply with a written policy and procedure regarding breach of the confidentiality requirements of this Program Element. Such policy must describe the consequences to the employee or volunteer for a verified breach of the confidentiality requirements of this Program Element.
  - v. Providers of Ryan White Program, Part B HIV/AIDS Services must conduct an annual review, and maintain documentation of that annual review, of county, state, and federal requirements regarding the confidentiality of information related to individuals receiving Ryan White Program, Part B HIV/AIDS Services. Providers of Ryan White Program, Part B HIV/AIDS Services must require employees and volunteers who, in the course of performing their job, have access to such information to have an annual review of the confidentiality requirements and to acknowledge in writing his/her understanding of such requirements governing this information.
  - vi. Providers of Ryan White Program, Part B HIV/AIDS Services must provide an on-site private room for individuals providing Case Management services to counsel or interview individuals receiving Ryan White Program, Part B HIV/AIDS Services.
- f. LPHA Staffing Requirements and Staff Qualifications.**

LPHA must employ a Registered Nurse trained in the use of the Oregon Program, Part B HIV Case Management Standards of Service for the delivery of Ryan White Program, Part B HIV/AIDS Services. Any additional staff must also be trained in the use of the Oregon Program, Part B HIV Case Management Standards of Service.

- vii. LPHA shall provide staffing for Case Management services as identified in the Care Services Budget and in accordance with the Oregon Program, Part B HIV Case Management Standards of Service.
- viii. All LPHA and Provider staff who provide Ryan White Program, Part B HIV/AIDS Services must attend training sessions and be appropriately trained on the delivery of such services, as reasonably designated by Department. Department will inform LPHA of the schedule and locations for the training sessions.
- ix. LPHA shall provide an Information Technology (IT) contact to execute the RW CAREWare Client Tier Installation Instructions, which are available from Department upon request.

**g. LPHA Fiscal Controls and General Administration.**

- i. LPHA must have appropriate fiscal controls in place for the use and disbursement of financial assistance provided under this Agreement for Ryan White Program, Part B HIV/AIDS Services. LPHA must document in its files the types of agreement monitoring activities that LPHA will perform with respect to Provider Agreements for the delivery of Ryan White Program, Part B HIV/AIDS Services and the projected schedule of such monitoring activities during the term of this Agreement. Required monitoring activities include but are not limited to determining whether the basic elements of the Program, Part B Program Manual (July 2007) are being met and taking appropriate action if they are not. LPHA must submit to Department copies of all Provider Agreements for the delivery of Ryan White Program, Part B HIV/AIDS Services during the term of this Agreement. LPHA may not pay the Provider with funds received under this Agreement for this Program Element until Department has received a copy of the Provider Agreement. Department's obligation to disburse financial assistance provided under this Agreement for this Program Element to cover payments on a Provider Agreement is conditioned on Department's receipt of a copy of that Provider Agreement. LPHA must notify Department in writing of LPHA's process for selecting Providers to provide Ryan White Program, Part B HIV/AIDS Services supported in whole or in part with the financial assistance provided under this Agreement for this Program Element (e.g., competitive request for proposals or sole source award) prior to commencing the selection process.
- ii. LPHA must notify Department within 10 business days and in writing, of proposed changes, during the term of this Agreement, in the availability of Ryan White Program, Part B HIV/AIDS Services funded through this Agreement, i.e. service hours, staffing, professional qualifications of staff, and fiscal management.

**4. Reporting Obligations and Periodic Reporting Requirements.** In addition to the reporting requirements set forth in Section 8 of Exhibit E of the Agreement, LPHA shall submit the following reports and information to Department:

- a. Quarterly Progress Reports must be submitted no later than October 31, January 31, April 30 and July 31 for the quarters ending September 30, December 31, March 31 and June 30. Quarterly Progress Reports include a narrative report and Administrative Fiscal Form. Reporting forms are found in the Program Manual (July 2008).

- b. LPHA must conduct a local chart review utilizing the approved program review tool found in the Program Manual. The results of this review will be compiled into the Client Chart Review Summary report, as described in Program Manual (July 2008) and submitted to the Program not later than October 31.
- c. With respect to each individual receiving Ryan White Program, Part B HIV/AIDS Services with funds provided under this Agreement, demographic, service and clinical data must be collected and reported to the Department as described in the Program, Part B Program Manual (July 2008). This manual may be obtained from [www.healthoregon.org/hiv](http://www.healthoregon.org/hiv). LPHA must utilize the HRSA developed software package, RW CAREWare, to enter the data obtained by LPHA and as described in the Oregon RW CAREware 4.1 User Guide found in the Program Manual (July 2008). Users are required to enter all demographic, service and clinical data fields within 30 days of the date of service. Use of RW CAREWare software and reporting system requires high-speed internet connectivity) and must be compliant with the minimum requirements outlined in the “Oregon DHS RW CAREWare Client Tier Installation Instructions” available from Department upon request. The software configuration that will be used includes a client tier at the local level that connects to a business and data tier at Department, requiring LPHA to connect to the centralized database for data entry purposes.

5. **Performance Goals.** Department will conduct a comprehensive review of LPHA’s performance every three years as a part of the state triennial review process. The results of the review, including commendations, compliance findings, and recommendations are communicated to the Local Public Health Authority and the County Health Administrator. For a successful review, the LPHA must demonstrate (among other things) that it is satisfying at least 80% of the elements reviewed. (The performance goal for the site review is an overall site average of 80% compliance with all elements reviewed.) The review tool and review schedule can be found at the following link: <http://egov.oregon.gov/DHS/ph/lhd/lhd-trt.shtml>.

**Attachment 1**  
**Oregon Ryan White Program, Part B**  
**HIV Case Management Quality Improvement Program**  
**Care Services Budget**