Welcome to Ryan White Summer Camp!

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Camp Clarifications

- Facilities Location (s)
- Lunch will be served at noon
- If you have questions, ask a camp counselor (wearing red bandanas or colorful lei's)
- We have a photo booth!! During breaks, please take advantage and use the hashtag #IndyRWSummerCamp19
- Have fun!

#IndyRWSummerCamp19

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What is the Care Continuum?

- A model used to assess health outcomes of persons living with HIV (PLWH), and has often been referred to as the Treatment Cascade.
- This tool helps to evaluate program effectiveness, identify possible service gaps, monitors how successfully PLWH engage in and receive continuous care, and how well PLWH achieve viral suppression.
- Key areas include people who: were diagnosed with HIV, were diagnosed within the past year and linked to care, had a care marker, were retained in care, and were virally suppressed.
- HSP uses the care continuum to plan and evaluate services.

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The Ryan White HIV/AIDS Program

- The Ryan White HIV/AIDS Program (RWHAP) funds a comprehensive system of care that includes primary medical care and essential support services for people living with HIV who are uninsured or underinsured. The RWAP is managed through the HIV/AIDS Bureau (HAB) of the Health Resources and Services Administration (HRSA).

- The Program works with cities, states and local community-based organizations to provide HIV care and treatment services.

- The RWHAP is divided into several Parts, defined the authorizing legislation.
  - HSP administers Part B funds (which includes funds for the AIDS Drug Assistance Program, or ADAP and Part B Supplemental funds). Part B funds are granted to U.S. states and territories.

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The Ryan White HIV/AIDS Program

- Ryan White Part B funds must be used for HIV-related services

- Services that may be provided are noted in the Ryan White law.
  - HRSA further defines what those services are and how they may be provided through policy
  - Policy Clarification Notice 16-02 is the ultimate resource!

Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds

Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18)
Replaces Policy #10-02

- Of all services funded:
  - At least 75% must be "core" services.
  - No more than 25% can be spent on "support" services.

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Ryan White Core and Support Services

Some core services are:

- Outpatient ambulatory health services (such as doctor visits and labs)
- AIDS Drug Assistance Program (ADAP)
- Health insurance premium and cost-sharing assistance for low-income individuals
- Medical nutrition therapy
- Mental health services
- Substance abuse outpatient care
- Medical case management, including treatment adherence services.

Support services must be linked to medical outcomes and may include:

- Outreach
- Medical transportation
- Linguistic services
- Referrals for health care and other support services
- Non-medical case management
- Substance abuse residential services

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Ryan White Requirements

Ryan White Part B funds must be:

- Used for HIV-related services.
- Provided to low-income people, but states can define “low-income”
- Used for specific services
  - Reflect back on PCN 16-02 for these services!
  - Remember that at least 75% of service dollars must be “core” services, and no more than 25% “support” services
- Applied and Used with certain Administrative caps

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Ryan White Eligibility

- Clients must be HIV positive
- Clients must be HIV positive and meet state program income eligibility requirements
- Clients must live in the State of Indiana and be able to provide current residency

<u>Eligibility must be recertified every 6 months</u>
<u>Annual recertifications must involve obtaining updated documents</u>
<u>Six-month recertifications may be done through "self-attestation"</u>

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Payor of Last Resort and Allowability

- By statute, RWHAP grant funds ***may not*** be used for any item or service for which payment has been made, or can reasonably be expected to be made by any other payer.
- Every effort should be made to have other payers cover services.
  - Clients must be screened for eligibility for other coverage, like Medicaid.
  - Providers must attempt preauthorization or exception processes required by insurers before relying upon RW funds
- Recipients must assess whether services paid for and provided are allowable under law and policy, and are HIV-related
  - **If steps are not taken to ensure allowability, penalties can be issued including: recouping funds that may have already been paid, contractors may have to pay the state back, and the state may have to pay the federal government back.**

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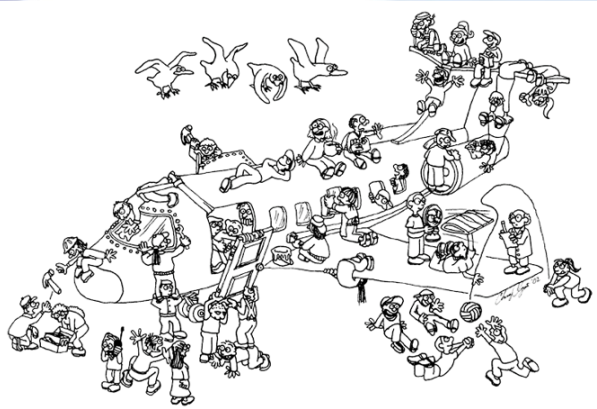
Where We Are Now!



- We would be NO WHERE without you!
- Through this process we have and continue to:
  - Provide Divisionwide Integration with HIV Services, Prevention, ADAP, and STD Operations
  - Provide Statewide Integration with Services Standards, Data Systems, and Quality Initiatives
  - Provide Financial and Budgeting TA to agencies
  - Continue TA Webinars
  - Create a better website for easy resources
  - Provide onsite TA meetings!

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Website Demo

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Break

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Panel Time

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Networking Nine

Each round of the Networking Nine is to allow you to mingle with other people in the room.

We Encourage:

- Finding someone you may not know who has your same dot color and introducing yourself
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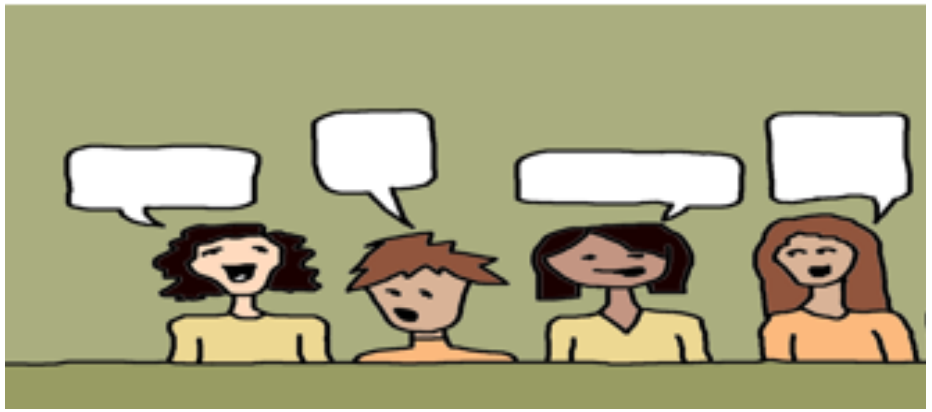

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Ryan White Service Standards

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Service Standards

- Ryan White HIV/AIDS Program (RWHAP) recipients must develop Service Standards for every funded service category, to be followed by every funded subrecipient.

Service Standards establish minimal expectations that any provider must meet when providing a service.

•Foundation of a clinical quality management (QM) program and subrecipient monitoring

•Provide a framework from which processes and outcomes are measured

•Define the core components and activities of a service category

•Used by the recipient to define expectations for service procurements.

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Service Standard Development

- Service standards establish the minimal level of service or care that a HRSA RWHAP funded agency or provider may offer within a state, territory or jurisdiction.

- Service standards related to HRSA RWHAP Core Medical Services must be consistent with U.S. Department of Health and Human Services' Clinical Guidelines for the Treatment of HIV, as well as other pertinent clinical and professional standards.

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Universal Standard

A Universal Standard is one overarching Standard that addresses common elements to all Service Standards.

A Universal Standard includes elements such as:

- General Eligibility and Recertification
  - Some Service Categories may require specific criteria for service eligibility above and beyond common eligibility
- Client Rights and Responsibilities
- Grievance Process
- Cultural and Linguistic Competency
- Privacy and Confidentiality

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Uses of Standards

- **Subrecipient monitoring**
  - •Recipients are responsible for ensuring the development, distribution, and use of the service standards (i.e., site visits and chart reviews). Service Standards are important to ensure that services are provided to clients in a consistent manner across service providers.
- **Quality Management**
  - •Service standards are the foundation for the clinical quality management program, and provide the framework and service provision from which processes and outcomes are measured.
- **RFP and Contracts**
  - •Service standards define the core components of a service category to be included in the model of service delivery for each funded service category, and should be included in RFPs.
- **Consumer Information**

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Coordination with other RWHAP Recipients

- Currently working to align with Marion County and their RW funding to align service standards.

- Coordination with RW funding being distributed by the Health Foundation of Greater Indianapolis

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ISDH Service Standards

- Format
  - Service Definition
  - Program Guidance
  - Key Services Components and Activities
  - HSP Service Standards
    - Standard and Documentation
  - Subservices
  - Service Unit Definition

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Next Steps

- ISDH working to finalize standards prior to new round of contracts

- Feedback- inform us of any programmatic conflicts
  - Deadline: June 28th to hivquality@isdh.in.gov

- Annual Review
  - Advisory Council subcommittee facilitating the review and revisions
- Service Standards will be active for all Ryan White, including Rebates, funded contracts starting the fall of 2019.

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Questions?

- Please feel free to contact hivquality@isdh.in.gov
- Please contact prior to June 28th with any programmatic issues with the service standards provided to you today.

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Lunch!

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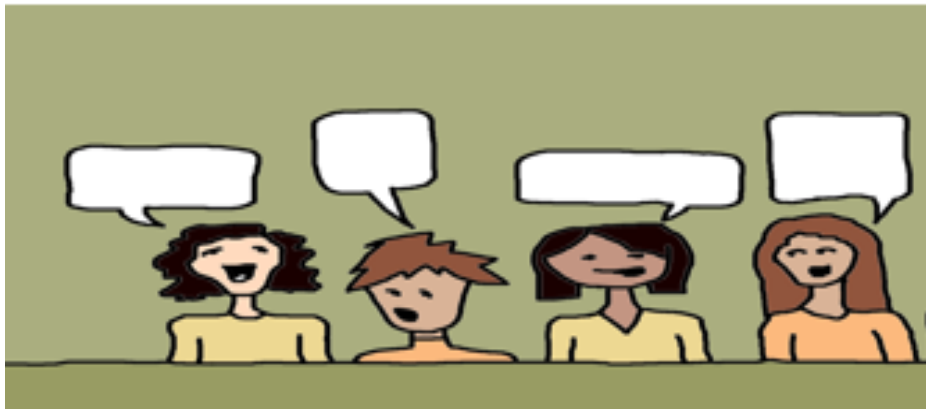

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Survey Results

Main Findings:

- We sent out about 98 surveys across HIV services, Prevention, and STD teams
- Our response rate was about 38%
- Overall the responses were better than expected with comfort level and program expectations

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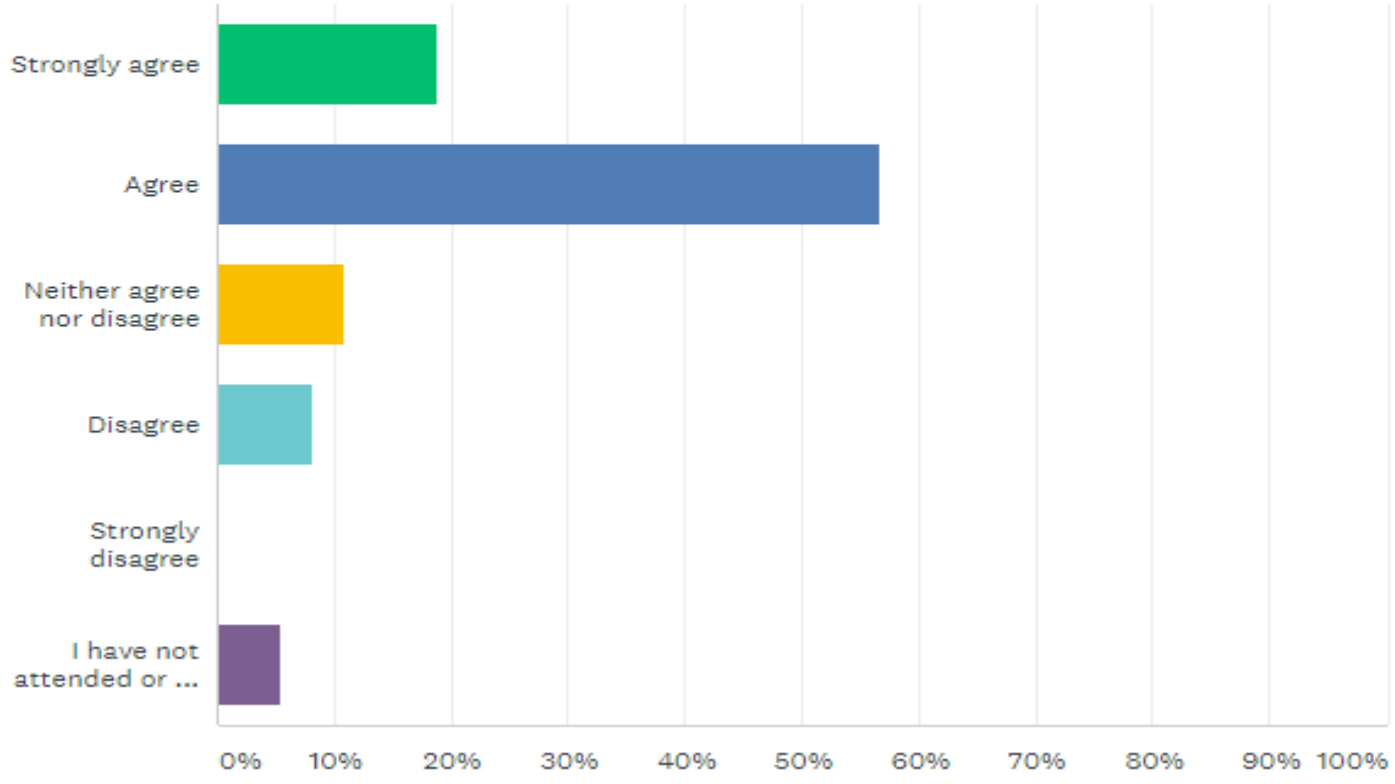
The materials and training which I have attended so far have helped me understand my position and it's requirements

Answered: 37 Skipped: 0



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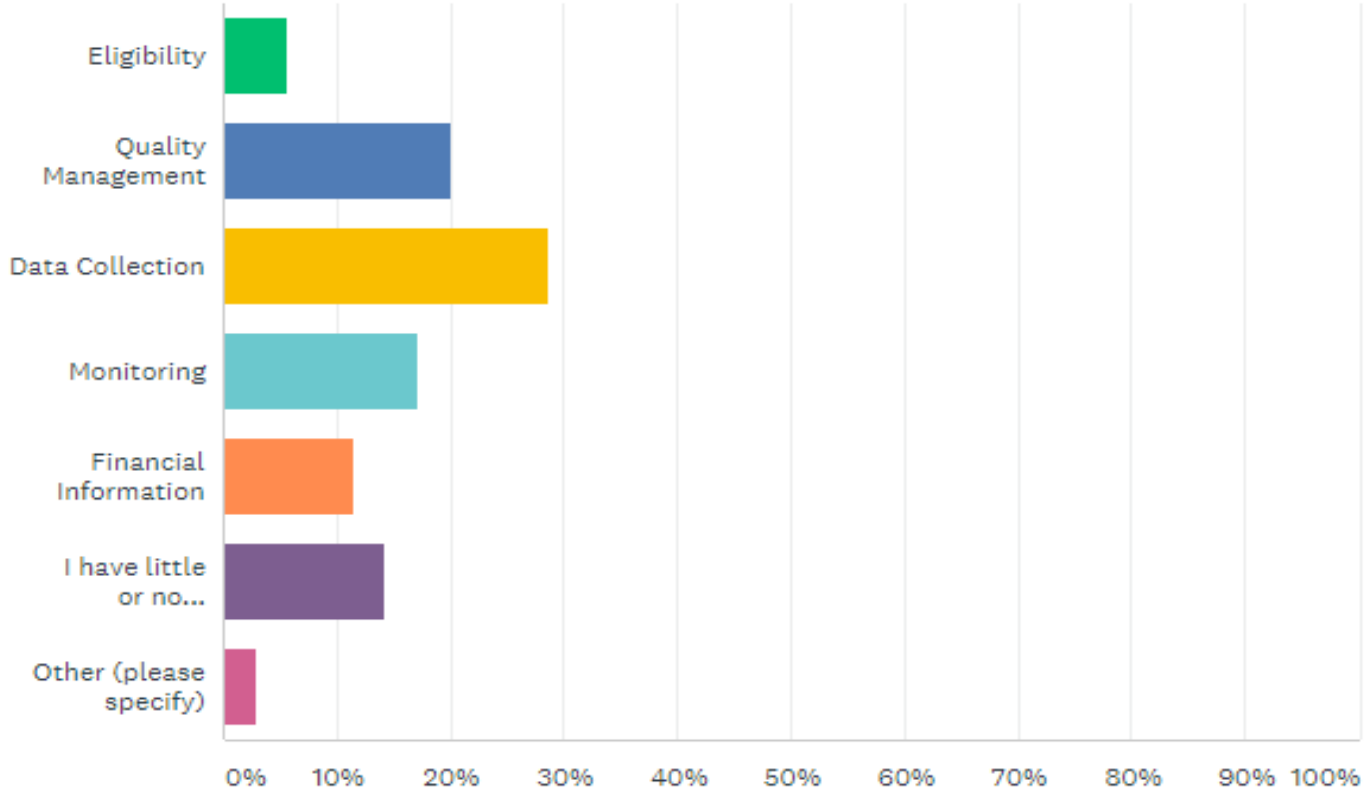
In regards to Ryan White Federal Funding, I feel I need more information or topical training on:

Answered: 35 Skipped: 2



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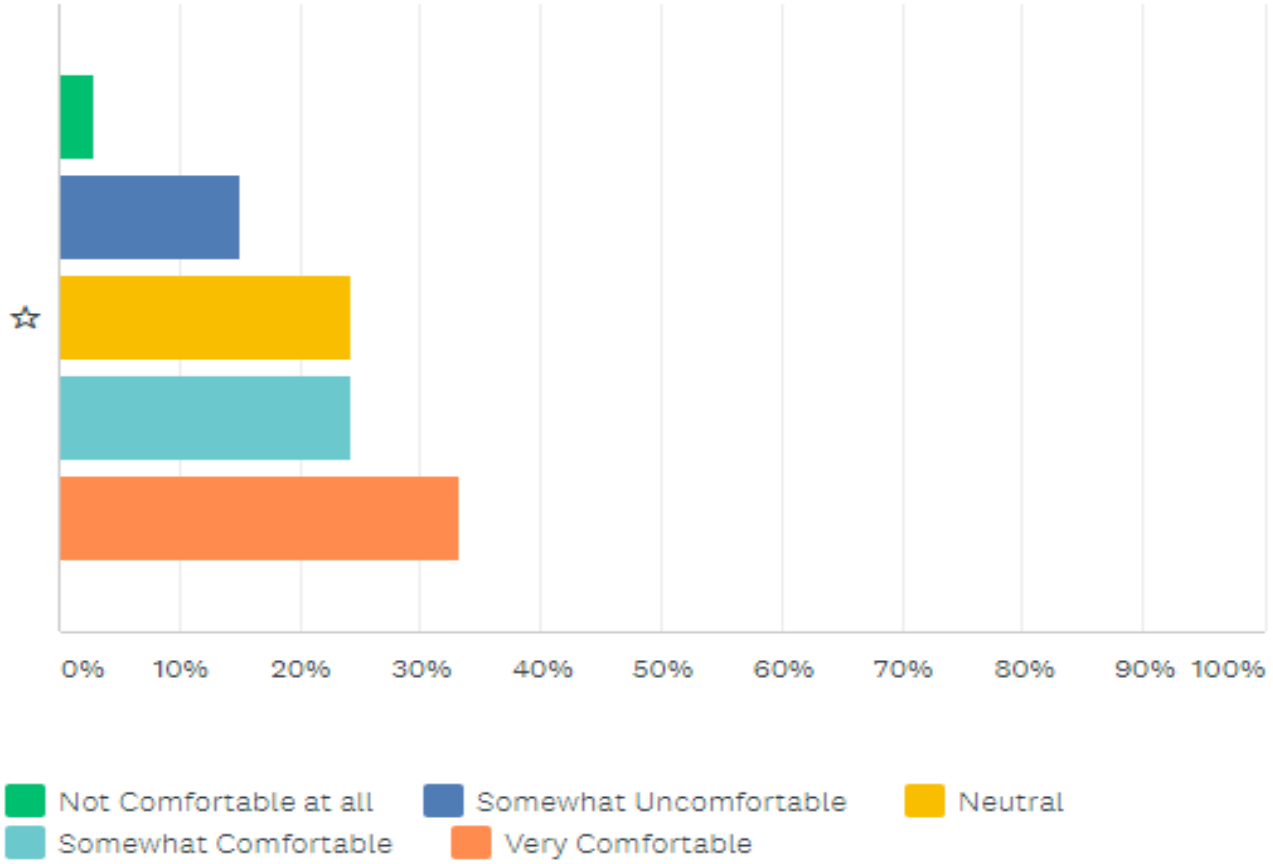
On the star scale, how comfortable are you invoicing ISDH?

Answered: 33 Skipped: 4



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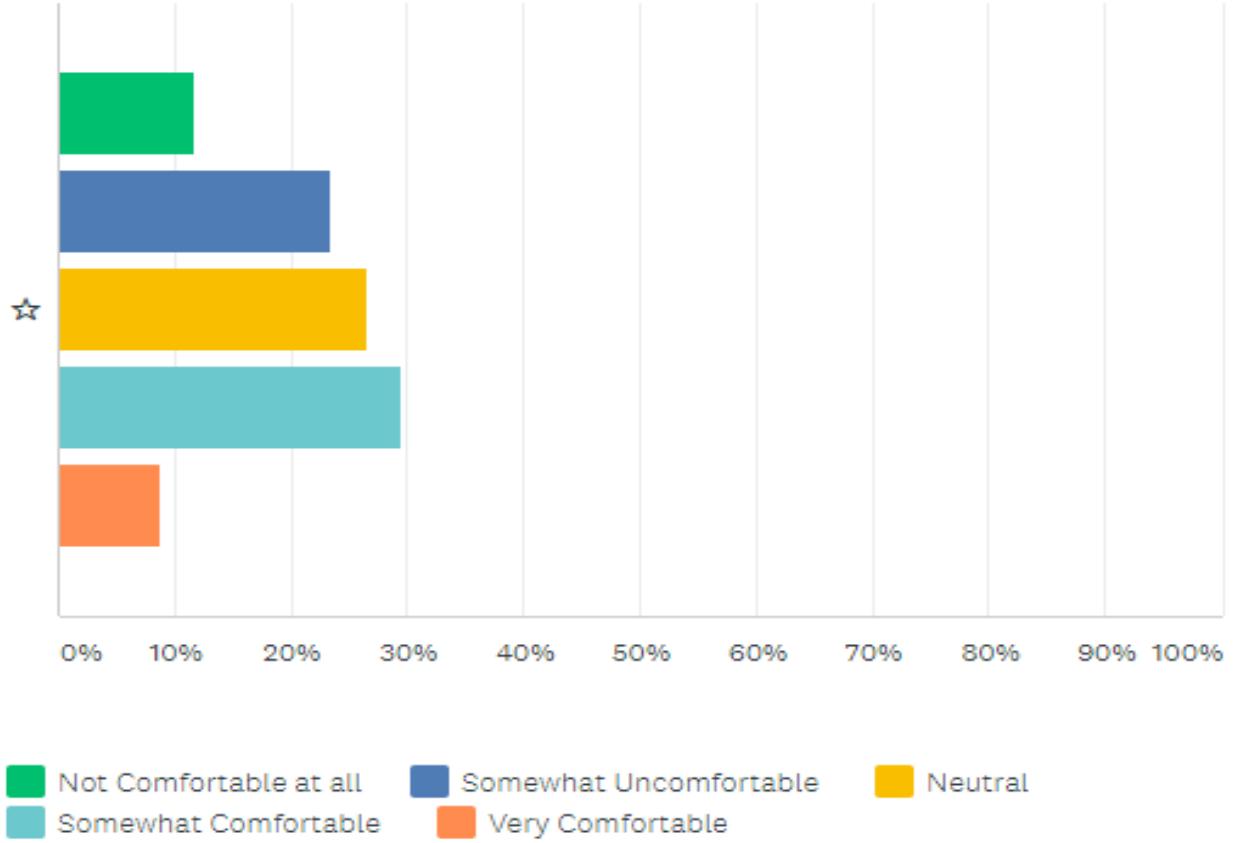
On the star scale, how comfortable are you with understanding the monitoring requirements that come with Ryan White Federal Funding?

Answered: 34 Skipped: 3



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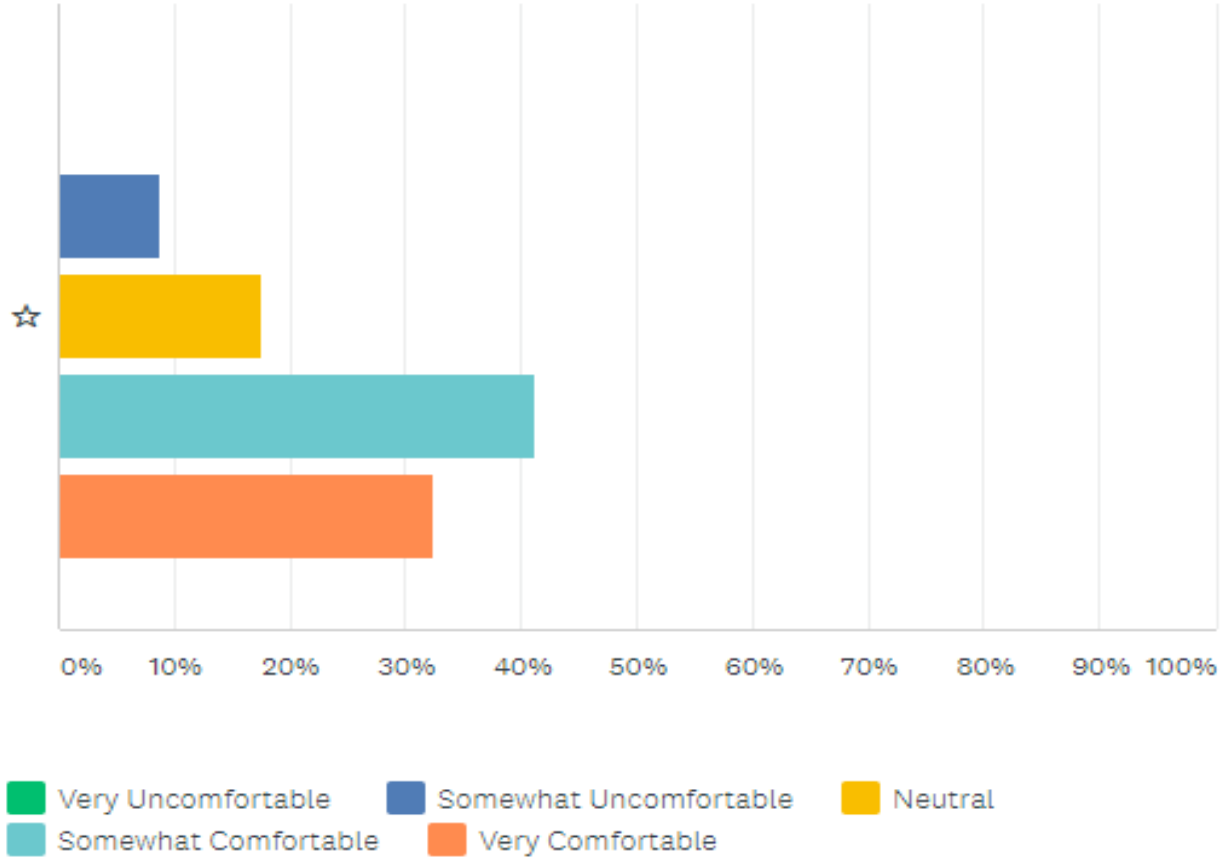
On the star scale, how would you rate your understanding of your position and role as it relates to your funding?

Answered: 34 Skipped: 3



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Open Ended Questions from the Survey

- Is there a place to find specific definitions for funded services?
  - For a broad overview all service category definitions can be found under PCN 16-02 (slide 5) but for specifics, please refer to the services standards that can be found on the website after this meeting!

- What will the data requirements be going forward with the addition of CAREWare?
  - Since we have a rollout date coming very soon, all data is encouraged to be entered straight into CW once all training is provided. Until then please keep using the data collection spreadsheets.

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Open Ended Questions from the Survey

- We do not feel prepared for a site visit, how do we best prepare?
  - All fiscal and programmatic monitoring tools are on the ISDH website. Once ISDH identifies a date for a site visit, we will work with you 30 days out to identify logistics, present an agenda, and go over the list of required materials.

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Top Themes

1. Data Collection
2. Monitoring
3. Quality Management

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Round Robin Activity

Breakout Groups:

- Orange Group will start in the Lawrence Room
- Blue Group will start in half of the Blue Heron Ballroom (side with the dance floor)
- Green and Purple will start in the other half of the Blue Heron Ballroom (side with photo booth)

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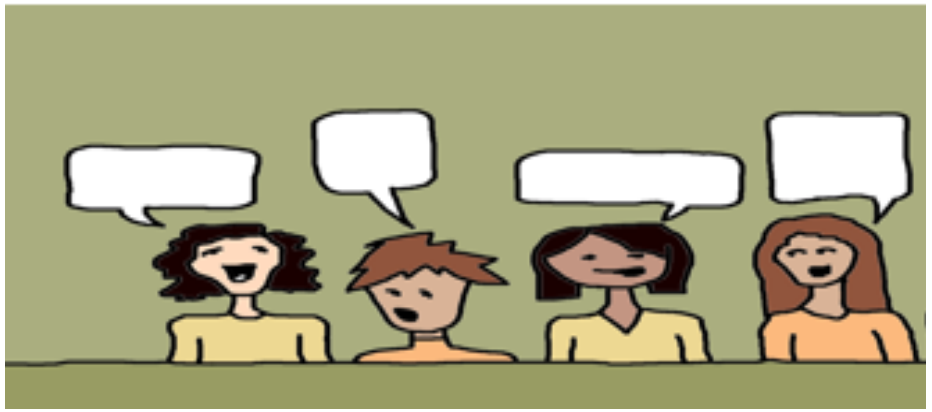

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