



Get on Board

SPECIAL MEETING PREPARATION SESSION

UNDERSTANDING RYAN WHITE PROGRAM SERVICE DEFINITIONS, SERVICE STANDARDS, AND OTHER ACTION ITEMS

MARCH 11, 2024



Introduction

Your presenters today are Marlen Meizoso and Christina Bontempo, Partnership Staff who have more than 20 years combined experience with the Partnership and the Ryan White Program.

If you have questions or comments along the way, please chat or come off mute throughout the presentation.

This presentation will be posted with Get on Board Training at www.aidsnet.org/the-partnership#getonboard1 and with meeting reference documents at www.aidsnet.org/the-partnership#partnership1.



Why We're Here

Your time is valuable! Let's put it to good use!

We recognize the volume of materials Partnership members are asked to review prior to a meeting can be overwhelming.

Today's training is designed to prepare you for the March 18, 2024, Partnership meeting.

We hope today's presentation will enhance your membership experience by giving you a clear understanding of the motions you will be asked to vote on at the Partnership meeting.



Today's Topics

Why understanding motions matters.

What is PCN# 16-02 and why is it important?

What are Service Definitions and why are they important?

What are the Miami-Dade County Ryan White Program Minimum Primary Medical Care Standards?

Overview of:

- **Care and Treatment Committee** recommendations.
- **Community Coalition Roundtable** recommendations of new Partnership Members.
- Directives to staff from the **Strategic Planning Committee**.



Why Understanding Motions Matters

Members are asked to vote on a *really* wide range of topics, many of which you wouldn't encounter in your regular professional or personal life.

When was the last time you talked about Service Definitions over dinner?

When you vote on a motion at a meeting, your vote is recorded and becomes part of the public record.

This means, you are on record as agreeing (or disagreeing) with an action taken by the board.

It's *really* important that you're comfortable in your understanding of how you're voting on each motion.

Please ask questions if you're not sure!



Tools: AIDSNET

Miami-Dade HIV/AIDS Partnership

Next Meeting: March 18, 2024 at 10:00 a.m.

Miami-Dade County Main Library, 101 West Flagler Street, Auditorium, Miami, FL 33130



AGENDA

March 18, 2024



MINUTES

December 18, 2023



COMMITTEE REPORTS

Report of proposed motions



RETURN TO MENU



TOP LINE SUMMARY

Recipient and Grantee Expenditure and Utilization Report Summary



MEETING DOCUMENTS

[Committee Motions Report and Attachments](#)

[Committee Motions Report \(simplified\)](#)



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Tools: Committee Report

#	Motion	Details
1	Motion to accept the changes to the AIDS Pharmaceutical Service Definition, as discussed.	<p>The FY 2024 AIDS Pharmaceutical Service Definition was reviewed, edited for content, and updated.</p> <p>Updates are highlighted in Attachment #4, below.</p>

FY 2024 Service Definitions
Attachment #4

The general topic of discussion.

The Attachment reference, if any, which will immediately follow the motion.

The motion as proposed by the Committee.

Usually read by the Committee Officer who is a Partnership member.

The Committee's justification or explanation for bringing the motion to the Partnership.



What is PCN# 16-02?

A “PCN” is a **P**olicy **C**larification **N**otice from the Health Services and Resources Administration (HRSA) to inform Ryan White Program service delivery and program compliance.

PCN #16-02 details the Ryan White HIV/AIDS Program (RWHAP):

- Allowable Core Medical Services and Support Services;
- Eligible individuals;
- Allowable uses of funds;
- Individual service descriptions; and
- Program guidance.

Definitions within PCN #16-02 form the minimum basis of our local Part A/MAI Service Definitions.



What are Service Definitions?

Service definitions are the guiding documents for Ryan White Program subrecipients (service providers) in delivering contracted services. They contain:

- Detailed service explanation **incorporating PCN #16-02 guidance**;
- Priority Ranking as determined in the Annual Needs Assessment;
- Program operation requirements;
- Rules for reimbursement;
- Eligibility criteria;
- Restrictions and/or limitations on eligibility or frequency of use;
- Rules for reporting; and
- Other guidance, such as Letters of Medical Necessity, links to additional resources, etc.



Why are Service Definitions Important?

Service definitions “define” the standards for care across the Ryan White Program Part A/MAI service system.

If you are a provider of services, you are expected to operate under the guidance of these definitions.

If you are a Ryan White Program client, this is what you can expect as your service experience.

If you are a Partnership member, you will be asked to vote on updates to the Service Definitions every year.

Attachment #5

MENTAL HEALTH SERVICES

(Year 34 Service Priorities: #3 for Part A and #3 for MAI)

Mental Health Services are a set of core medical services that consist of counseling and treatment for diagnosed behavioral health disorders. These services are designed to reduce harmful behaviors and episodes of instability and improve mental status and client health outcomes. These Mental Health Services include the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to people with HIV. Services are based on an individualized treatment plan and are conducted in group and individual sessions. All services are provided by mental health professionals licensed or otherwise authorized within the State of Florida to render such services. All clients receiving this service must have at least one mental or behavioral health diagnosis specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) or International Classification of Disease, Tenth Revision, Clinical Modification (ICD-10-CM; Codes F01-F99, excluding “Mental and behavioral disorders due to psychoactive substance use” – codes F10-F19).

Mental Health Services require an individualized treatment plan, as noted above. Treatment plans incorporate the findings of assessment and diagnostic tools and specify the goals and objectives to be achieved during the treatment episode. The treatment plan also specifies the recommended clinical interventions and frequency with which these interventions shall be delivered. Mental health providers may use this service category to conduct the assessment and diagnostic steps for the development of a treatment plan. If ongoing mental health services are being provided to a client, it is expected that the client receives a mental health treatment plan at least every six months.

Psychiatric treatment with medication management and evaluation should be billed and recorded under Outpatient/Ambulatory Health Services. Additional mental health services may be billed under Outpatient/Ambulatory Health Services when provided by a licensed psychiatrist or other doctor, clinical psychologist, clinical social worker, clinical nurse specialist, nurse practitioner or physician assistant/associate.

Mental Health Services are allowable only for program-eligible clients. This service is not available to family members without HIV. Ryan White Program funds may not be used for bereavement support for uninfected family members or friends.

Mental Health Services reimbursed under Part A or MAI of the Ryan White Program are limited to conditions impacting the treatment of the client’s underlying HIV disease (e.g., assessing, diagnosing, and treating a mental health condition that hinders HIV treatment adherence) and treated within the context of the client’s HIV or AIDS diagnosis. This service is intended to address issues that impact a person’s ability to remain engaged in HIV care, strengthen coping skills and self-care, and promote engagement in ongoing



Overview of Recommendations

The **Care and Treatment Committee** has reviewed 10 FY 2024 Service Definitions for the **Partnership's** consideration on March 18:

- AIDS Pharmaceutical Assistance;
- Mental Health Services;
- Outpatient Ambulatory Health Services (OAHS);
- Other Professional Services: Legal Services and Permanency Planning;
- Outreach Services;
- Emergency Financial Assistance;
- Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (Health Insurance Assistance);
- Medical Case Management, Including Treatment Adherence Services;
- Medical Transportation; and
- Food Bank.



Overview of Recommendations

Recommended changes from the **Care and Treatment Committee** are redlined or **highlighted** in the attachments and include:

- Updates to priority rankings;
- Updates on language, e.g. changing “physician” to “licensed medical provider”;
- Additional updates on language for clarity;
- Addition of Letters of Medical Necessity references (AIDS Pharmaceutical);
- Updates to programmatic language (Food Bank);
- Updates on eligible plans (Health Insurance); and
- Some updates are pending publication of references, and these are highlighted in the document (Outpatient Ambulatory Health Services).



B. Outreach to People Lost to Care or at Risk of Being Lost to Care

1. Outreach Workers must work with service providers, including Medical Case Managers, to locate people lost to medical care or Medical Case Management and bring them back to care. The Medical Case Manager, or pharmacy staff, after three (3) repeated attempts to contact the client by phone and/or mail without success, may refer the case through a Ryan White Program In Network Referral in the Provide® Enterprise Miami data management system to an Outreach Worker. Jail linkage and prison re-entry coordinators may refer a client to an Outreach Worker if they have a signed document with permission for a Ryan White Program Part A or MAI Outreach Worker to contact them; such documents must be included with the OON referral and the supporting documentation being sent to the outreach provider. There must be clear documentation in the client chart at the referring agency and recorded in the Ryan White Program In Network Referral, of at least three (3) repeated attempts by the Medical Case Manager, pharmacy staff, or jail linkage/prison re-entry coordinator to contact the client and the reason why the case is being referred to an Outreach Worker. A Ryan White Program In Network Referral with last known contact information on the client indicating the reason for the outreach referral must be provided to the Outreach Worker and be maintained in both the Medical Case Management and outreach client charts. In instances where it is clearly documented that a client has a history of non-compliance or clear documentation of extenuating circumstances, such as homelessness, repeated non-compliance with their treatment regimen, mental health issues, and/or a history of substance abuse, referrals to an Outreach Worker may be made after one or two attempts at contacting the client.

2. A Physician, Physician Assistant/Associate, or Advanced Practice Registered Nurse may immediately and directly request outreach assistance for a client who meets any of the conditions listed directly below in Section B.3., or for similar circumstances (e.g., abnormal lab results, significant

Motions on Updates

Here is an example of redlined changes.

When a motion is brought to the Partnership to accept changes, you can just look for the redlined or highlighted sections.



Standards of Care

The **Minimum Primary Medical Care Standards** are the ‘minimum’ standards all local Ryan White Program funded practitioners should follow.

The **Minimum Primary Medical Care Standards** are reviewed and updated annually and include:

- US Department of Health and Human Services (DHHS) Guidelines and other standards of care, referenced with links to the complete texts;
- The schedule of health assessments, e.g. colonoscopies, vaccinations, etc.; and
- Requirements for practitioners providing the services.

Minimum Primary Medical Care and Oral Health Care Standards are reviewed by the **Medical Care Subcommittee**. Their recommendations are brought to the **Care and Treatment Committee** and then to the **Partnership** for final consideration.

If you are a **Partnership** member, you will be asked to vote on those recommendations on March 18.



New Partnership Applicants

The **Community Coalition Roundtable** is responsible for recommending new applicants to the Partnership for appointment by the Mayor of Miami-Dade County.

Partnership members should expect to vote on recommended new applicants for the next several months!

Applicants brought to the **Partnership** for consideration have completed:

- The Online Interested Form;
- A personal interview with one or more Roundtable members and staff;
- A full Roundtable member interview; and
- All required application paperwork.

Please make our new applicants feel welcome!



Directives to Staff

The **Strategic Planning Committee** is responsible for administering the annual Assessment of the Administrative Mechanism survey which is a HRSA requirement of Planning Councils (The **Partnership**).

This year, **Strategic Planning Committee** members have directed staff to ask our HRSA Project Officer for clarification on the Administrative Mechanism process and timeline.

Partnership members will be asked to consider their motion. A full explanation will be provided in the Committee Report.



Reminder

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Thank You!

Contact us for more information!

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