

## **Columbus Ohio Transitional Grant Area Outpatient/Ambulatory Health Services Service Standards**

### **Application of Service Standards:**

The service standards outlined below apply to any agency receiving Ryan White Part A funding to provide Outpatient/Ambulatory Health Services within the Columbus TGA.

### **Service Category Definition:**

Outpatient/Ambulatory Health Services are the provision of diagnostic and therapeutic services, consistent with the most current published U.S. Department of Health and Human Services (DHHS) treatment guidelines, to a client by a licensed healthcare provider in an outpatient medical setting. Outpatient medical settings include clinics, medical offices, and mobile vans where clients do not stay overnight. Key activities include:

- Medical history taking
- Physical examination
- Diagnostic testing, including laboratory testing
- Treatment and management of physical and behavioral health conditions
- Behavioral risk assessment, subsequent counseling, and referral
- Preventive care and screening
- Prescription and management of medication therapy
- Treatment adherence
- Education and counseling on health and prevention issues
- Referral to and provision of specialty care related to HIV diagnosis

### **Client Eligibility Requirements:**

Ryan White Part A funded services are available to any individual who meets the following guidelines:

- Diagnosis of HIV/AIDS;
- Resides within the Columbus TGA (Delaware, Fairfield, Franklin, Licking, Madison, Morrow, Pickaway, or Union county); and
- Low-income as defined as less than 500% of federal poverty level (FPL).

Eligible clients may have health insurance through public and private sources. Ryan White services are available to meet unmet medical and support service needs, as payer of last resort.

### **Forms:**

All agencies receiving Ryan White Part A funding to provide Mental Health Services are required to utilize standardized forms provided by Columbus Public Health:

- RWA Patient Approval Form

	Standard	Measure
<b>1.0</b>	<b>Agency Policies</b>	
1.1	Licensure: Outpatient/Ambulatory Health Services agencies have licenses from appropriate licensing agencies	Proof of licenses and accreditations on file with agency
1.2	Hours of Operation: Outpatient/Ambulatory Health Services agencies have operating hours	Documentation of hours of operation along with protocol for client emergency needs outside of operating hours on file with agency
1.3	Special Service Needs: Outpatient/Ambulatory Health Services agencies comply with the Americans with Disabilities Act (ADA)	Policy on responding to clients with special needs on file with agency
1.4	Cultural and Linguistic Competency: Outpatient/Ambulatory Health Services agencies adhere to the national standards on Culturally and Linguistically Appropriate Services (CLAS)	Policy on responding to clients with cultural and linguistic diversity, including interpretation and translation services, on file with the agency
1.5	Privacy and Confidentiality: Outpatient/Ambulatory Health Services agencies have a structure in place to allow for the sharing and/or exchanging of client information in a confidential manner and complies with the Health Insurance Portability and Accountability Act (HIPAA)	Policy on protecting client information on file with the agency
1.6	Client Rights and Responsibilities: Outpatient/Ambulatory Health Services agencies assure services are provided within the client's rights	Statement of client rights and responsibilities posted and/or accessible to clients within the agency
1.7	Health and Safety: Outpatient/Ambulatory Health Services agencies have established health and safety procedures	Policy on health and safety procedures on file with the agency
1.8	Data Collection: Outpatient/Ambulatory Health Services agencies have procedures in place to assure the timely submission of data into CAREWare	Agencies report mandated individual client level data for each Ryan White Part A eligible visit/contact in CAREWare by the 15 <sup>th</sup> of the following month
1.9	Grievance: Outpatient/Ambulatory Health Services agencies have an established system for grievances about the operation of the service program	Policy on grievance procedures on file with the agency
1.10	File Retention: Outpatient/Ambulatory Health Services agencies will assure active and inactive client files will be maintained in a locked location	Policy on retention procedures on file with the agency
<b>2.0</b>	<b>Outpatient/Ambulatory Health Services Personnel</b>	
2.1	Staff Qualifications: Outpatient/Ambulatory Health Services personnel providing clinical care will have licensure in the State of Ohio in at least one of the following: <ul style="list-style-type: none"> <li>• MD</li> <li>• APN</li> <li>• DO</li> <li>• LSW</li> <li>• LISW</li> <li>• RN</li> <li>• MA</li> <li>• PA</li> </ul>	Documentation in personnel files

	Standard	Measure
<b>2.0</b>	<b>Outpatient/Ambulatory Health Services Personnel, continued</b>	
2.2	<p>Training: Outpatient/Ambulatory Health Services personnel will annually participate in training that is available and relevant to their position and working with individuals living with HIV/AIDS and the affected community, and at a minimum attend at least one training on topics related to their position:</p> <ul style="list-style-type: none"> <li>• HIV-specific training, including disease process, co-morbidities, and psychosocial effects of the disease;</li> <li>• Cultural sensitivity;</li> <li>• Entitlement programs, benefits to clients, and community resources/support services; and/or</li> <li>• Client confidentiality, client rights, agency grievance procedures</li> </ul>	Training documentation in personnel files
2.3	Supervision: Outpatient/Ambulatory Health Services personnel will receive supervision, as required by their licensing board and/or agency policy	Documentation in personnel file
<b>3.0</b>	<b>Client Referral for Outpatient/Ambulatory Health Services</b>	
3.1	Referral for Outpatient/Ambulatory Health Services: Clients in need of outpatient/ambulatory health services will be referred by Ryan White Medical Case Manager, Non-Medical Case Manager—Support, or Linkage to Care Coordinator to a Ryan White Part A Outpatient/Ambulatory Health Services provider	<p>Completed Ryan White Part A Patient Approval Form in client file that includes:</p> <ul style="list-style-type: none"> <li>• Client information</li> <li>• Referral source information</li> <li>• Ryan White Part A approval</li> </ul>
3.2	Communication: Outpatient/Ambulatory Health Services providers will provide timely communication to clients and referral sources, e.g. Medical Case Managers, Non-Medical Case Manager—Supports, and/or Linkage to Care Coordinators	Documentation of date and description of communication to client and/or referral source
<b>4.0</b>	<b>Client Eligibility</b>	
4.1	Eligibility Verification: Documentation of client's eligibility information being properly reviewed and documented per the Columbus TGA eligibility policy and indication that the client is approved to access Ryan White Part A services documented by Ryan White Medical Case Manager, Non-Medical Case Manager—Support, or Linkage to Care Coordinator,	Completed Ryan White Part A Patient Approval Form in client file
4.2	Eligibility Re-certification Verification: Documentation of client's eligibility re-certification information being properly reviewed and documented per the Columbus TGA eligibility policy and indication that the client is approved to access Ryan White Part A services documented by Ryan White Medical Case Manager, Non-Medical Case Manager—Support, or Linkage to Care Coordinator	Completed Ryan White Part A Patient Approval Form in client file
4.3	Payer of Last Resort: Outpatient/Ambulatory Health Services providers will make reasonable efforts to identify and secure other funding sources outside of Ryan White funds whenever possible	Documentation of efforts to secure other funding sources in client file

	Standard	Measure
<b>5.0</b>	<b>Client Rights and Privacy</b>	
5.1	<p>Expectations of Care/Client Rights and Responsibilities: Clients will be provided with information about the Ryan White Part A Outpatient/Ambulatory Health Services program upon entrance into the program that define:</p> <ul style="list-style-type: none"> <li>• Client participation;</li> <li>• Payer of last resort;</li> <li>• Payment policy;</li> <li>• Service limits and exceptions;</li> <li>• HIPAA;</li> <li>• Grievance; and</li> </ul>	Completed Expectations of Care Form in client file
5.2	Release of Information: Clients will be informed of how their information will be accessed and/or released/shared by the Central Ohio Network	Completed agency release of information in client file
5.3	Privacy and Confidentiality: Clients will be informed of the Outpatient/Ambulatory Health Services agency's privacy and confidentiality policies	Documentation in client file
5.4	Grievance: Clients will be informed of the Outpatient/Ambulatory Health Services agency's grievance policy including information about submitting unresolved grievances related to Ryan White Part A grant-supported services to 614.645.2273 (CARE)	Documentation in client file
<b>6.0</b>	<b>Assessment and Service Plan</b>	
6.1	<p>Medical Evaluation/Assessment: Clients will have an initial comprehensive medical evaluation/assessment, in accordance with professional and established HIV practice guidelines, to determine need for and type of service to be provided through Ryan White Part A Outpatient/Ambulatory Health Services and will include:</p> <ul style="list-style-type: none"> <li>• Psychosocial history</li> <li>• Medical history</li> <li>• HIV treatment history and staging</li> <li>• CD4 counts and Viral Load test results</li> <li>• Medication adherence history</li> </ul>	<p>Completed assessment in client file</p> <ul style="list-style-type: none"> <li>• Documentation of efforts by Outpatient/Ambulatory Health Services provider to schedule initial medical evaluation/assessment to occur within three weeks of initial contact with newly assigned client</li> </ul>
6.2	Medical Evaluation/Reassessment: Clients will have a comprehensive medical re-evaluation annually, or when clinically indicated, to re-determine need for and type of service to be provided through Ryan White Part A outpatient/ambulatory health services	Completed re-assessment in client file
6.3	Surveillance Monitoring and Vaccinations: Clients will receive annual surveillance monitoring and vaccinations, in accordance with professional and established HIV practice guidelines	Documentation of surveillance monitoring and vaccinations in client file
6.4	Medical Problems List: Outpatient/Ambulatory Health Services providers will identify and document any medical and/or psychosocial needs of the client	Documentation of medical problems list in client file
6.5	Plan of Care - Annual: Clients will have an individualized plan of care to address each problem listed on the medical problems list	Completed plan of care - annual in client file

	Standard	Measure
<b>6.0</b>	<b>Assessment and Service Plan, continued</b>	
6.6	Plan of Care – Review and Update: Clients re-certified for Ryan White Part A services and determined in need of Ryan White Part A outpatient/ambulatory health services will have an individualized plan of care reviewed and updated at least annually, or when clinically necessary	Completed plan of care - review and update in client file
6.7	Evaluation of Plan of Care: Outpatient/Ambulatory Health Services providers will review and evaluate, at each appointment, client's ongoing and presenting needs and modify the plan of care accordingly	Documentation including medical record notes and goal attainment in client file
6.8	Referral for Services: Clients will be referred to community resources for support with additional needs, e.g. specialty care, mental health services, alcohol and drug treatment, psychiatry, etc.	Completed release of information form and medical record note documentation in client file
6.9	Client Contact: Clients will have appointments with outpatient/ambulatory health services providers at least every three – six months or as clinically indicated for treatment monitoring as outlined by the plan of care, including appointment reminders and follow-up for missed appointments	Documentation of dates and purpose of contact with client in client file
6.10	Medical Record Documentation: All contact with and/or on behalf of the client will be documented in medical record	Medical record documentation in client file including information: <ul style="list-style-type: none"> <li>• Medical need</li> <li>• Service provided</li> <li>• Outcome</li> </ul>
<b>7.0</b>	<b>Client Transfer and Case Closure</b>	
7.1	Client Transfer: Clients may transfer to another outpatient/ambulatory health services provider at the request of the client or due to the medical needs of the client	Documentation of date and reason for client transfer along with description of activities provided by outpatient/ambulatory health services provider to support client transition
7.2	Case Closure: Clients will be closed from Outpatient/Ambulatory Health Services for the following circumstances: <ul style="list-style-type: none"> <li>• Client achieves outpatient/ambulatory health services goals and no other health related needs are present;</li> <li>• Client moves outside of the service area;</li> <li>• Client is/will be incarcerated for more than six months;</li> <li>• Client request;</li> <li>• Client is no longer eligible based upon Ryan White Part A criteria;</li> <li>• Client does not reply after a combination of three attempts; and/or</li> <li>• Client death</li> </ul>	Documentation in in client file of: <ul style="list-style-type: none"> <li>• Discharge summary</li> <li>• Allowable circumstances for case closure;</li> <li>• Three attempts to contact clients and outcome of attempts</li> <li>• Indication of goal attainment;</li> <li>• Date of case closure</li> </ul>

## SIGNATURES

I have reviewed this document and endorse it as the Outpatient/Ambulatory Health Services Service Standards for the Columbus TGA:

Not appointed at this time

Name

Planning Council Chair

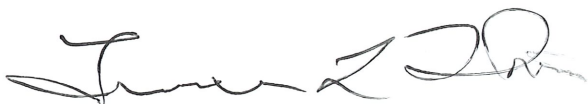
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Date



Lynn Kidd

Planning Council Chair

4, 26, 19  
Date



Terence Theis

Planning Council Chair

04, 23, 19  
Date



Sean Hubert

Ryan White Director

4, 23, 19  
Date