



Nevada Office of HIV/AIDS Ryan White Part B Program Standard of Care Health Education

I. HRSA Service Definition

Health education and risk reduction activities educate clients living with HIV about how HIV is transmitted and how to reduce the risk of transmission. Topics covered may include:

- Counseling to help clients living with HIV improve their health status and reduction of risk to others
- Education on health care coverage options (e.g., qualified health plans through the Marketplace, Medicaid coverage, Medicare coverage)
- Education on risk reduction strategies to reduce transmission such as pre-exposure prophylaxis (PrEP) for clients' partners and treatment as prevention
- Health literacy
- Information about medical and psychosocial support services
- Treatment adherence education and reengagement of people who know their status but who are out of care into Outpatient/Ambulatory Health Services

Program Guidance: Health Education/Risk Reduction services cannot be delivered anonymously.

The State of Nevada recommends that all agencies utilize validated best practices for the execution of their service category. If an agency needs resources or recommendations to locate or implement best practice tools please contact the Grantee Office and we will provide necessary guidance. It is an expectation that all agencies implement a program that can have measurable positive effects on for clients.

II. Service Goals

To provide education on health and risk reduction services to people living with HIV/AIDS to encourage healthy behavior, to improve health outcomes, to increase the number of individuals who are connected and retained in care, to improve health literacy and service-area information, and to promote client self-management.

III. Currently Funded Health Education and Risk Reduction Services

- A. Health Education Session (Group)
- B. Health Education Counseling (Individual)
- C. Chronic Disease Self-Management Program
- D. Positive Self-Management Program Session
- E. Health & Wellness Engagement/Reengagement (RiC)



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IV. Health Education and Risk Reduction Eligibility

Before services are provided under this Service Category for items A through D, Provider Agency staff must ensure current Ryan White Part B enrollment by using the client's Member ID Card with valid dates or through CAREWare's Eligibility and Enrollment Fields tab.

The following eligibility criteria are specific to Health Education and Risk Reduction services: for items A through D, the client has been referred to a RWPB Health Education and Risk Reduction Provider from another RWPB funded program, has sought out assistance of the agency through self-referral, or has received a referral from an outside RWPB provider. If the client is referred to the Health Education and Risk Reduction Services Provider from a non-RWPB provider, the Health Education and Risk Reduction Services Provider is responsible for notifying the originating non-RWPB provider that the client is now accessing services and the Health Education and Risk Reduction Services Provider is responsible for logging the referral in CAREWare.

The following eligibility criteria are specific to the Health Education & Risk Reduction Services of Health and Wellness Reengagement services (item E):

- A. Unaware of Diagnosis: individuals who test positive in coordination with a HIV Prevention/Testing program with an EIS/Outreach worker present to assist in client navigation. *Health & Wellness Engagement (Unaware)* can only be delivered on the same day of a positive HIV test.
- B. Newly Diagnosed: individuals who are within the first three months of their initial HIV diagnosis. *Health & Wellness Engagement (Newly Diagnosed)* can only be delivered between the day after and three months after their diagnosis.
- C. Out of Care Individuals: *Health & Wellness Reengagement* are for: (1) individuals who have not picked up their prescribed medication(s) through their enrolled program at day 45 after their last pick-up; (2) have not received a HIV related service within six months of prior contact; (3) individuals who have not received a service greater than 3 months after diagnosis; or (4) individual who has lapsed in RWPB Enrollment.
- D. New to Nevada: individuals who have recently moved to Nevada or the service area and are not connected with a medical home. *Health & Wellness Engagement (New to Nevada)* services can only be used if the client is a recent resident of Nevada without having established care (less than six months).

In order to assist in delivering essential services to individuals living with HIV in the most effective manner, the Nevada Office of HIV/AIDS – Ryan White Part B program is authorizing under its granted responsibility the ability for the subgranted Eligibility and Enrollment Providers to allow retroactive eligibility for up to 30 days for certain Health Education Services (item E).



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V. Service Delivery

Health Education Sessions (Item A)

Health Education Sessions must be designed to include any of the following components: (1) Counseling to help clients living with HIV improve their health status and reduction of risk to others; (2) Education on health care coverage options (e.g., qualified health plans through the Marketplace, Medicaid coverage, Medicare coverage); (3) Education on risk reduction strategies to reduce transmission such as pre-exposure prophylaxis (PrEP) for clients' partners and treatment as prevention; (4) Health literacy; (5) Information about medical and psychosocial support services; or (6) Treatment adherence education. If an agency is unsure that their topic might may or may not be allowable, please contact the Care Services Specialist for the Ryan White Part B Program.

Health Education Counseling (Item B)

Health Education Individual Counseling will assist in the: (1) development of a client individualized health education or self-management improvement plan, in collaboration with the client that addresses and increases the client's capacity in the curriculum's components; (2) tracking of client's progress through the use of assessment tools; and (3) adjustment in the improvement plan, as necessary.

Chronic Disease Self-Management Program and Positive Self-Management Program (Items C-D)

This six-week chronic disease self-management program teaches techniques to deal with frustration, fatigue, pain and isolation, exercise strategies, healthy eating, among other topics.

The PSMP Workshop is a highly interactive mutual support and success build the confidence you need to manage your health and health care and maintain an active and fulfilling life living with HIV.

The PSMP Workshop covers:

- Techniques to deal with problems such as frustration, fatigue, pain and isolation
- Appropriate exercises for maintaining and improving strength, flexibility and endurance
- Appropriate use of medications
- Communicating effectively with family, friends and health care professionals
- Techniques for healthy eating
- How to make an action plan
- Learning problem-solving and decision-making skills



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Health & Wellness Engagement/Reengagement (Retention in Care Contact) (Items E)

Contacts are made through the Retention in Care Project for clients who might be marginally connected to care by having an alternate payer source other than the Nevada ADAP for their medications or who have lapsed in their Nevada Ryan White HAP enrollment. These can be via telephone, digital, in-person, etc. At least one contact or two attempts to contact must be made with each client in the Retention in Care Project with the result of that contact being captured in the RiC Subform in CAREWare.

Staff will complete a standardized contact and short assessment with all clients to determine readiness and need for services, taking into account the following factors: (1) barriers to enrollment in RWPB and adherence to medications and medical care; (2) history of adherence, treatment, and opportunistic infections; and (3) the sufficiency of self-management and to provide referrals, when appropriate, to prevent lapses in care.

Case Closure

HERR programs will develop criteria and procedures for case closure. Whenever possible, all clients whose cases are being closed must be notified or such action. All attempts to contact the client and notifications about case closure will be documented in the client file or CAREWare, along with the reason for case closure.

Cases maybe closed when the client:

- Has linked to medical care or met the established milestones and is being transferred to another service provider for Outpatient/Ambulatory Medical Care
- Is deceased
- Has relocated out of the service area
- No longer requires the services
- Decides to discontinue the service
- Is improperly utilizing HERR
- Client expresses desire to end RWPB services
- Client is not responsive within 90 days of last contact

Referrals

HERR programs must develop policies and procedures for referral to all health and social service providers in the HIV/AIDS continuum of care. All referrals must be tracked in CAREWare and documented in the client's chart/file.

VI. Licensing, Knowledge, Skills, and Experience

The minimum educational experience for service items A through E shall be:



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1. a B.A. or B.S. degree in any of the following disciplines; psychology, social work, counseling, sociology, community health, nursing and public health; or,
2. an associate's degree in any of the fields above with two years of experience working in a job related to public health, outreach work, community services, supportive work with children, families, or a different targeted population; or,
3. Four years of experience working in a job related to public health.

If qualified individuals do not have HIV related work experience they must receive HIV specific training within six months of hire.

Any outside individuals (not RWPB funded personnel) must have appropriate licensing or credentials in their profession.

Items C-D must be provided by an appropriately licensed, certified, and trained individual of the Stanford Self-Management Programs.

VII. Summary

These service specific standards shall be followed by all funded providers that provide Part B funded Health Education & Risk Reduction. It is expected that all providers follow these standards as well as the universal programmatic and administrative standards of care. Provider organizations and staff may exceed any of these standards as part of the program delivery.

VIII. Recommendations

All Part B funded providers are to adhere to these service category specific standards, program standards, the primary program standards and ensure that they are familiar with their individual Part B subgrant to meet the expectations of their deliverables.

IX. References and further reading

All Part B funded providers should read their individual subgrants including but not limited to the Quality Management Plan and all local policies and guidelines set forth by the Office of HIV Prevention and Care regarding the Nevada Ryan White Part B Program.

[AETC National Resource Center for Case Finding for Persons Living with HIV](#)

[AETC National Resource Center for Retention in Care for Persons Living with HIV](#)

[AETC National Resource Center for Rural Populations Living with HIV](#)

[AETC National Resource Center for Teaching Methods for Persons Living with HIV](#)

[HIV/AIDS Bureau – National Monitoring Standards for Ryan White Part B Grantees: Program – Part B; April 2013.](#)



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[HIV/AIDS Bureau – Policy Clarification Notice 16-02: Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Use of Funds, January 2016.](#)

[Las Vegas TGA – Ryan White Part A HIV/AIDS Program, Standards of Care, 2014-2015.](#)

[Nevada Office of HIV/AIDS Policy 15-15 Standard of Care for Referral to Health Care and Supportive Services: Eligibility & Enrollment for Ryan White Part B, February 2016.](#)

[Ryan White HIV/AIDS Program Service Report Instruction Manual, September 2015.](#)

X. Revision Schedule

Published	February 9, 2017	Located at dphh.nv.gov
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XI. Contact

For further information or clarification please contact the Nevada Office of HIV Prevention and Care, Ryan White Part B Program Care Services Specialist at (702) 486-5665.