

## **PUBLIC COMMENT – AS OF 04-15-20**

From: Steven Vargas

This is something I was thinking an emergency response fund could address and help alleviate.

I hope to be proven wrong, but I don't think HOPWA's STRUMA or TBRA programs would be able to assist in such cases.

Back in in 2006-2008, the Ryan White Program did fund temporary stays in motels for those returning to society from incarceration. This made it easier to assist with accessing medical care and more stable housing. At the time, PC members thought HOPWA would be able to do something similar and supplant those funds and recreate something similar.

I see similar functions for such funds for:

1. PWH returning from incarceration,
2. PWH needing temporary stay away from home due to something like COVID, whether the PWH needs isolating or need to be somewhere away from home where someone in their home has COVID or something similar
3. PWH needing a temporary stay if home is unlivable due to a fire or other disaster (hurricane, tornado, flood, infestation)

I have worked at two Houston ASOs and both have had to fund such stays for PWH during my tenure with them. Sometimes the agency had to use general funds to do so to address the need in a timely and useful fashion.

## **Coronavirus Eviction Rules Don't Always Help People in Motels**

Stateline Article April 15, 2020

By: [Teresa Wiltz](#)



A man stands outside of his Reno, Nevada, motel room before the pandemic. Many families and individuals living in extended-stay motels are facing eviction during the pandemic.

John Locher/The Associated Press

For the past few months, Stefanie Craft, her five kids and two pets, a cat and a dog, have been camped out in the Economy Inn and Suites in North Charleston, South Carolina. It wasn't her first choice: Black mold crawling up the walls of their rental house forced her hand.

Still, it's home, for now, so they're riding out the pandemic in one room with a "sink-sized kitchen."

Now Craft, 44, who says she has always paid her \$325 weekly motel rent on time, is facing eviction. She lost her job supervising a local car wash when the coronavirus shuttered her city. A local church paid her rent this week, she said, but she's terrified about what will happen next. The motel's manager could not be reached for comment about Craft's case.

"I have no clue what I'm going to do," Craft told *Stateline* in a telephone interview. "We have nowhere to go. That's why we're here."

Most renters are protected from eviction by coronavirus emergency orders. But the new rules don't always apply to people who are paying for motel rooms, a major loophole that could affect thousands of families.

The [federal eviction moratorium](#) is limited and applies to only certain rentals, such as landlords who have federally backed mortgages. And some states adopted laws before the pandemic that don't consider motel dwellers tenants — and therefore don't apply rental protections to them should they lose their jobs.

"The question is, for families who are paying to stay in a motel, are they considered tenants? And if so, under what conditions? And if you have protection, do the motel owners know?" said Barbara Duffield, executive director of SchoolHouse Connection, a Washington, D.C.-based nonprofit that focuses on the early care and education of homeless children and young adults.

## HRSA Website

### Questions and Answers from 04-15-20 Conference Call

# Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions

*Updated 4/15/2020*

The answers on this page are organized into the following categories:

[CARES Act Funding](#)

[Telehealth, Food Insecurity and Pre-Paid Phones for Clients](#)

## CARES Act Funding

**NEW** Will Ryan White HIV/AIDS Program recipients be eligible for federal funding from the COVID-19 response legislation signed into law? (*Updated: 4/15/2020*)

On April 15, 2020, the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), awarded \$90 million for Ryan White HIV/AIDS Program recipients across the country to prevent, prepare for, and respond to coronavirus disease 2019 (COVID-19). This funding is provided by the fiscal year 2020 Coronavirus Aid, Relief and Economic Security (CARES) Act, which President Trump signed into law on Friday, March 27, 2020.

**NEW** What is the purpose of the COVID-19 funding for Ryan White HIV/AIDS Program recipients? (*Added: 4/15/2020*)

The fiscal year (FY) 2020 Coronavirus Aid, Relief and Economic Security Act -P.L. 116- 136 (CARES Act) provides one-time funding for eligible health care providers, including current Health Resources and Services Administration (HRSA) Ryan White HIV/AIDS Program (RWHAP) recipients to prevent, prepare for, and respond to coronavirus disease 2019 (COVID-19).

For Ryan White HIV/AIDS Program recipients, the funding is directed to clinics and community based organizations, city/county health departments, state health departments, the AIDS Education and Training Centers, and the AIDS Drug Assistance Program Technical Assistance and Training Program for preventing, preparing for, and responding to COVID-19 for RWHAP clients, including expenses related to extended operating hours, increased staffing hours (overtime), additional equipment, workforce training and capacity development, and services to support social distancing, such as home delivered meals and transportation. All activities and purchases supported with RWHAP COVID-19 awards must be used for services, activities, and supplies needed to prevent or minimize the impact of COVID-19 on RWHAP clients.

**NEW** Can Ryan White HIV/AIDS Program recipients use FY 2020 Coronavirus Aid, Relief, and Economic Security (CARES) Act funding to pay providers who are not working on COVID-19 related activities? *(Added: 4/15/2020)*

No. If RWHAP recipients are isolating providers in order to minimize spread, the supplemental COVID-19 funds may not be used to pay the salaries of providers that are not involved in the COVID-19 response.

**NEW** How was the amount of COVID-19 funding determined for each Ryan White HIV/AIDS Program award recipient? *(Added: 4/15/2020)*

Ryan White HIV/AIDS Program Parts A, B, C, and D recipients received awards based on a data-driven funding methodology for each Part that focuses on the number of clients served (Parts A-C) or base award amount (Part D). The awards are proportionate to current funding for RWHAP recipients.

**NEW** Do Ryan White HIV/AIDS Program recipients need to apply for the COVID-19 funding? *(Added: 4/15/2020)*

To expedite distribution of this critical funding, HRSA plans to make funds immediately available and subsequently collect budget plans. Recipients will receive reporting instructions for the project narrative and budget information that must be provided within 30 days of receiving the award.

**NEW** When can Ryan White HIV/AIDS Program recipients begin using the COVID-19 funding? *(Added: 4/15/2020)*

Upon receipt of the award.

**NEW** Why was the COVID-19 funding issued through a supplemental award? *(Added: 4/15/2020)*

The CARES Act authorized supplements to existing grants and cooperative agreements. To support tracking of CARES Act spending across different parts of the government, COVID-19 awards were issued separately from a Ryan White HIV/AIDS Program recipient's grant award. Ryan White HIV/AIDS Program recipients will need to separately track and account for their COVID-19 prevention, preparedness, and response-related activities supported through this funding.

**NEW** What is the period of performance for the use of the COVID-19 funding? *(Added: 4/15/2020)*

The period of performance for this funding is 12 months. Funding is available for immediate use, and pre-award costs are permitted for COVID-19 prevention, preparedness, and response-related expenses dating back to January 20, 2020.

**NEW** What are allowable uses of the COVID-19 funding? *(Added: 4/15/2020)*

All Ryan White HIV/AIDS Program COVID-19 activities and purchases supported with FY 2020 CARES Act funding must be used for services, activities, and supplies needed to prevent or minimize the impact of COVID-19 on RWHAP clients.

The CARES Act provision for the Ryan White HIV/AIDS Program offers recipients some flexibility to address COVID-19 related health and support needs of clients by removing the 75 percent core medical services requirement. Removing this requirement allows recipients to allocate more funding for necessary support services for RWHAP clients as a result of COVID-19. Without the 75 percent core medical services requirement, recipients may expend all not otherwise earmarked COVID-19 award funds (for administrative costs, clinical quality management, and planning and evaluation) for support services.

The COVID-19 funding will primarily support core medical and support services for RWHAP clients. Funds also are being allocated to technical assistance programs to ensure that HIV healthcare organizations and professionals have timely access to the most current training and technical assistance needed to address COVID-19 related issues impacting people with or at risk for HIV. These funds are being awarded to the following RWHAP technical assistance programs to address the surge in workforce development needs as a result of challenges presented by COVID-19:

- AIDS Education and Training Centers (AETC), National Clinician Consultation Center (NCCC)
- AETC, Enhancement and Update of the National HIV Curriculum (NHC) e-Learning Platform
- AETC, National Coordination and Resource Center
- AETC, Regional Centers
- Ryan White HIV/AIDS Program- AIDS Drug Assistance Program (ADAP) Training and Technical Assistance Program

**NEW** Are the Ryan White HIV/AIDS Program administrative caps applicable to the COVID-19 awards? *(Added: 4/15/2020)*

Yes, recipients are required to comply with RWHAP administrative cost caps.

Administration/Planning and Evaluation - Administration costs are costs associated with the administration of the grant. No more than 10 percent of the budget can be spent on administrative costs. Recipients should allocate staff activities that are administrative in nature to administrative costs. The aggregate total of administrative expenditures for Parts A and B subrecipients, including all indirect costs, may not exceed 10 percent of the aggregate amount of all subawards.

For RWHAP Parts A and B administration and planning and evaluation costs combined should not exceed 15 percent of the total award.

For RWHAP Parts C and D total administrative costs should not exceed 10 percent of the total award. Indirect expenses must be considered administrative expenses subject to the 10 percent cap under Part D.

## **Telehealth, Food Insecurity and Pre-Paid Phones for Clients**

**Should RWHAP recipients revise protocols for their outpatient clinics in response to COVID-19 and move patients for whom it is appropriate to telehealth or phone appointments, encourage states to waive in-person recertification requirements during this period or encourage AIDS Drug Assistance Programs (ADAPs) to provide 90-day drug supplies? (Updated: 3/31/2020)**

HRSA HAB encourages the use of telehealth to promote access to and continuity of care in a safe way during social distancing. [HRSA's HIV/AIDS Bureau \(HAB\) Policy Clarification Notice \(PCN\) #13-02](#) (PDF - 174 KB) provides guidance and flexibility for RWHAP client certification and recertification, including the ability to conduct these processes electronically and through self-attestation. PCN #13-02 does not require that such processes occur in-person, although many recipients have imposed this as an additional requirement.

In this time of public health emergency, HRSA HAB recommends flexibility in annual certification and recertification processes which support social distancing. This includes conducting these processes electronically and through self-attestation to protect the health of RWHAP clients and service providers. HRSA HAB expects RWHAP recipients will ensure that all certification and recertification processes are conducted and documented within a reasonable timeframe. Recipients and subrecipients assume the risk of recouping any HRSA RWHAP funds utilized for clients ultimately determined to be ineligible, and instead charge an alternate payment source, or otherwise ensure that funds are returned to the HRSA RWHAP.

HRSA HAB recommends that AIDS Drug Assistance Programs allow for longer than 30 day dispensing, at the discretion of the prescribing provider. We will be monitoring the RWHAP recipients for any challenges that may occur in terms of access to their medication as a result of COVID-19.

**Many RWHAP outreach activities in our metropolitan area have been put on hold for the time being due to developments with Coronavirus (COVID-19). Do you have any recommendations for our Prevention Outreach Counselor who is not currently in the community setting conducting HIV screenings? What are other RWHAP recipients doing with this type of scope of work? (Added: 3/25/2020)**

As part of their ongoing health education services, Ryan White HIV/AIDS Program recipients can and should inform and raise awareness among their patients and the community of COVID-19 preventive measures; how to recognize symptoms of COVID-19 infection; and what to do if and when they or a member of their family gets sick. For conducting allowable outreach activities in the community, HAB defers to state and local government for guidance on community and public contact during the COVID-19 pandemic. CDC guidance for healthcare facilities and healthcare workers can be found at the [CDC's COVID-19 website](#).

**Will there be any guidance issued from HRSA HAB regarding: a. precautions for clients and case managers regarding home visits and information regarding COVID-19 for our specific HIV positive population; b. homeless or clients residing in shelters/transitional housing; c. food insecurities/household goods; d. response and support if/when a client test positive for COVID-19? (Updated: 3/26/2020)**

HRSA's HIV/AIDS Bureau understands that this is a public health emergency and that some services may be more needed than others. RWHAP recipients should consult the [CDC Coronavirus website](#) and the compendium of resources on [COVID-19 for people with HIV](#) on HIV.gov, which has guidance and resources for specific populations, such as the homeless. RWHAP recipients should develop their own protocols for home visits or other service provider interactions that are responsive to their local jurisdiction needs.

**Does HRSA have any updates regarding COVID-19 and the ability to use RWHAP Part A funds for clients that present with symptoms as transmission increases across the U.S.? Many of our consumers are uninsured and underinsured and may not be able to afford commercial testing. (Added: 3/20/2020)**

To the extent that RWHAP clients are being impacted by COVID-19 and the receipt of such services are reasonably expected to impact their HIV health outcomes, RWHAP funds can be utilized.



**Are RWHAP recipients allowed to use RWHAP funds to purchase pre-paid cell phones for clients who may need them to support remote service provision? (Added: 3/25/2020)**

Emergency Financial Assistance (EFA) is the RWHAP service category that may be used to provide pre-paid cell phones for RWHAP clients. To leverage scarce resources, the recipient should also coordinate with existing partners at the state, regional, and local level in advance to identify and define appropriate roles and responsibilities in the event of an emergency. This includes establishing relationships with local hospitals, health departments, and other large community health care providers.

**We've heard from several Ryan White HIV/AIDS Program providers that food on shelves at grocery stores is low, and they would like to be able to support clients' meals using RWHAP emergency financial assistance (EFA) funding. Would our case management agency in eastern Idaho be allowed to use EFA to support meals through Grub Hub and local restaurants that are offering take out options? (Added: 3/31/2020)**

[PCN #16-02](#) (PDF - 173 KB) allows for Emergency Financial Assistance to be used as one-time or short-term payments to assist an HRSA RWHAP client with an urgent need for essential items or services necessary to improve health outcomes, including: utilities, housing, food (including groceries and food vouchers), transportation, medication not covered by an AIDS Drug Assistance Program or AIDS Pharmaceutical Assistance, or another HRSA RWHAP-allowable cost needed to improve health outcomes. Emergency Financial Assistance must occur as a direct payment to an agency or through a voucher program. Standards are determined by RWHAP recipients, however, they must be equitably applied.

**Can Ryan White HIV/AIDS Program Part A Planning Councils (PC) buy phones, electronic devices help PC members with connectivity during this emergency so members can attend meetings? Also, can consumers who are not voting members of the PC, but on the consumer committee be provided with electronic devices so they will be able to fully participate in meetings? (Added: 3/31/2020)**

Emergency Financial Assistance (EFA) is the RWHAP service category that may be used to provide pre-paid cell phones for RWHAP clients. To leverage scarce resources, the recipient should also coordinate with existing partners at the state, regional, and local level in advance to identify and define appropriate roles and responsibilities in the event of an emergency. This includes establishing relationships with local hospitals, health departments, and other large community health care providers.

**Can a Ryan White HIV/AIDS Program Part A funded Food Bank Program pay for grocery delivery? Prior to the COVID-19 emergency, this provider had done distributed food vouchers, which they plan to go back to after the emergency is over. (Added: 3/31/2020)**

HRSA HAB encourages promoting access to and continuity of care in a safe way during social distancing [PCN #16-02](#) (PDF - 173 KB) allows for Emergency Financial Assistance to be used as one-time or short-term payments to assist an HRSA RWHAP client with an urgent need for essential items or services necessary to improve health outcomes, including: utilities, housing, food (including groceries and food vouchers), transportation, medication not covered by an AIDS Drug Assistance Program or AIDS Pharmaceutical Assistance, or another HRSA RWHAP-allowable cost needed to improve health outcomes. Emergency Financial Assistance must occur as a direct payment to an agency or through a voucher program. Standards are determined by RWHAP recipients, however, they must be equitably applied.

**Does RWHAP Part B allow recipients to make some exceptions to our Standards of Care that would permit us to respond to clients who experience need based on COVID-19 employment/income issues? We are not looking to ease our standards for everyone since most of our SSI and SSDI recipients will be unaffected by COVID-19 in regards to their income. However, can RWHAP recipients make case-by-case decisions that are variations on our usual Standards of Care? (Added: 3/25/2020)**

HRSA's HIV/AIDS Bureau understands that this is a public health emergency and that some grant activities may be postponed, modified, or extended. PCN #16-02 allows for Emergency Financial Assistance to be used as one-time or short-term payments to assist an HRSA RWHAP client with an

urgent need for essential items or services necessary to improve health outcomes, including: utilities, housing, food (including groceries and food vouchers), transportation, medication not covered by an AIDS Drug Assistance Program or AIDS Pharmaceutical Assistance, or another HRSA RWHAP-allowable cost needed to improve health outcomes. Emergency Financial Assistance must occur as a direct payment to an agency or through a voucher program. Standards are determined by RWHAP recipients, however, they must be equitably applied.

**The closure of restaurants and many other businesses has impacted many of our RWHAP patients financially, and many patients are worried about their ability to meet basic needs including food and housing. Can RWHAP Part C funding be used to help patients in these situations, such as provision of food vouchers? (Added: 3/25/2020)**

[HRSA's HIV/AIDS Bureau \(HAB\) Policy Clarification Notice \(PCN\) #16-02](#) (PDF - 173 KB) provides information on allowable services for RWHAP recipients and subrecipients. Recipients are permitted to provide allowable support services, including emergency financial assistance, to their eligible RWHAP clients. Recipients are expected to comply with the "Uniform Guidance" stated in the Background section of PCN #16-02 in addition to the legislative and programmatic requirements of RWHAP. For more specific guidance on changes to your approved budget and scope of services, please contact your project officer to discuss any proposed changes.



## **Fiscal Year (FY) 2020 Coronavirus Aid, Relief, and Economic Security (CARES) Act Supplemental Funding for Ryan White HIV/AIDS Program recipients Examples of Allowable Uses of Funds**

Funding has been appropriated under the Coronavirus Aid, Relief and Economic Security (CARES) Act (P.L. 116- 136) to help Ryan White HIV/AIDS Program (RWHAP) recipients prepare for, prevent, and respond to the COVID-19 pandemic. This funding has been appropriated to support recipients as they respond to COVID-19 related health service needs. With the exception of the 75 percent core medical services requirement, the requirements for all other RWHAP provisions and funding limitations still apply to these awards. All activities and purchases supported with RWHAP CARES funding must be used for services, activities, and supplies needed to prepare for, prevent, and respond to COVID-19 with respect to RWHAP clients.

This list of activities is not exhaustive, as there may be other allowable uses of funds consistent with the terms and conditions of the award. The list is organized into three categories that correspond to the purpose of the award, with a description of each to provide general guidance. Many CARES activities and uses of funds could fit within more than one category.

Testing, including temporary drive- or walk-up testing and laboratory services, is a paramount need in many communities. HRSA encourages RWHAP recipients to leverage this funding to expand COVID-19 screening and testing capacity, consistent with any applicable [CDC guidance](#).


All activities supported by CARES funding must align with the RWHAP and focus on COVID-19 prevention, preparedness, and/or response.

### **Prevent—Promote individual and community-wide prevention practices and/or administer countermeasures to reduce risk of COVID-19**

- Perform outreach and provide RWHAP clients with information on [hand hygiene](#), [cough etiquette](#), and [COVID-19 transmission](#), using existing materials where available.
- Deliver culturally appropriate training and education on:
  - General COVID-19 preventive practices for people with HIV, such as [hand hygiene](#), [cough etiquette](#), and [transmission](#), using existing materials where available.
  - Infection control for health workers caring for people with HIV.
  - Behavioral health and [coping strategies](#) for people with HIV during the COVID-19 pandemic.
- Disseminate [educational materials](#) on precautions to [prevent](#), contain, or mitigate COVID-19 and other respiratory illnesses for people with HIV.
- Convene, coordinate, and disseminate training and technical assistance resources developed for healthcare professionals on preventive practices and/or countermeasures to reduce risk of COVID-19 on RWHAP clients and organizations.

- Administer COVID-19 therapeutics and vaccines when available for people with HIV.
- Purchase cleaning supplies to disinfect patient contact areas and contract with cleaning services if needed.

### **Prepare—Enhance readiness, training, and services to respond to COVID-19**

- Review, update, and/or implement your emergency operations plan, including plans to address surge capacity and potential provider and other staff absenteeism.
- Hire and/or contract with additional providers and/or other personnel to support increased service demand due to COVID-19.
- Provide training for all staff on [infection control procedures](#), including administrative rules and engineering controls, environmental hygiene, and appropriate use of personal protective equipment. RWHAP recipients may consider using the Centers for Disease Control and Prevention's (CDC) [pre-pandemic training](#)  for influenza, which is recommended for COVID-19.
- Strengthen partnerships with local and state public health authorities, and clinical and community-based organizations.
- Review your infection control plan and make necessary adjustments to align with [CDC Guidelines for Environmental Infection Control in Health-Care Facilities](#) (PDF - 1.1 MB).
- Create new and enhance existing preparedness and response workflows to embed [CDC guidelines](#) and [recommendations](#), which may require role/task reassignment.
- Train staff, establish workflows, and designate separate space to screen RWHAP clients prior to entering communal areas of facilities so that those who may have COVID-19 can be isolated.
- Train staff, establish workflows, and designate separate space for clinical and administrative services for RWHAP clients under investigation and those testing positive, including temporary and non-fixed barriers.
- Enhance partnerships with organizations delivering services to RWHAP clients without housing and/or prepare for expansion of or increased need for reliance on RWHAP-supported housing and related services.
- Embed [CDC guidance](#) into electronic health records (EHRs) clinical decision support tools.
- Enhance website and social media feeds to include patient self-assessment tools and facilitate access to telemedicine visits.
- Develop or enhance telemedicine infrastructure to optimize virtual care, including increased capacity to assess RWHAP clients with symptoms.

## FY2020 CARES RWHAP Example Uses of Funding

- Enhance health information exchange capacity to support communications with public health partners, centralized assessment locations, and other health care providers, and/or to support transitions in care (e.g., to and from hospitals).
- Enhance technology to support tracking, sharing, and reporting capacity.
- Provide increased technical assistance to address changes in RWHAP client eligibility and recertification processes and formulary/medication management in response to the pandemic.
- Provide technical assistance, workforce development, training, consultation, and capacity development for RWHAP recipients and personnel.
- Strengthen partnerships with regional and national AETC recipients, RWHAP Part A and B recipients, local and state public health authorities, HRSA-funded health centers and community-based organizations.
- Provide clinical consultation on the management of occupational exposure to COVID-19 for healthcare workers treating people with HIV, including but not limited to:
  - [Infection Control](#). Note: RWHAP recipients may consider using the Centers for Disease Control and Prevention's (CDC) [pre-pandemic training](#) for influenza, which is recommended for COVID-19.
  - [Personal Protective Equipment](#) (PPE);
  - how to properly [don, use, and doff PPE](#);
  - Performing aerosol-generating procedures;
  - [Standard and Transmission-Based Precautions](#); and
  - When to contact Occupational Health Services.
- Promote resources for healthcare professionals preparing for patients with suspected or confirmed COVID-19.
- Purchase additional medical supplies (e.g., thermometers, pulse oximeter) needed for triage and testing areas.

## **Respond—Assess, test, diagnose, treat, and limit spread of COVID-19**

- Support increased capacity for RWHAP client triage, testing (including drive- or walk-up testing) and laboratory services, and assessment of symptoms, including by telephone, text monitoring systems, or videoconference through extended operating hours, enhanced telephone triage capacity, digital applications, and additional providers and other personnel.
- Support the enhancement of telehealth infrastructure at clinical sites to perform triage, care, and follow-up via telehealth, including with RWHAP clients in community settings, with unstable or no housing, in homes, public housing, and other locations.

## FY2020 CARES RWHAP Example Uses of Funding

- Enhance staffing and purchase equipment and supplies as necessary to deploy walk-up testing and laboratory services locations and in-scope mobile units to provide testing and/or to deliver care to RWHAP clients.
- Purchase a vehicle to transport RWHAP clients to assessment and testing locations, and/or to transport RWHAP recipient personnel to deliver COVID-19 assessment and treatment.
- Provide training and technical assistance for enhanced medical respite/recuperative care services.
- Purchase supplies for respiratory hygiene and cough etiquette, including alcohol-based hand sanitizer that contains 60-95% alcohol, tissues, and no-touch receptacles for disposal.
- Purchase personal protective equipment (PPE) for RWHAP recipient personnel and RWHAP clients, including National Institute for Occupational Safety and Health (NIOSH)-approved N95 respirators for RWHAP recipient personnel.
- Support COVID-19 testing and laboratory costs, including purchasing [COVID-19 tests](#), specimen handling and collection, storage, and processing equipment, as appropriate.
- Purchase and administer medical countermeasures that may be identified to lessen severity of COVID-19 illness.
- Support social distancing by providing home-delivered meals and medications to RWHAP clients.
- Support increased demands for emergency housing for RWHAP clients.
- Make minor alterations and renovations such as safety barriers to support social distancing for RWHAP clients.
- Utilize partnerships, i.e., regional and national AETC recipients; RWHAP Part A and B recipients; local and state public health authorities, and clinical and community-based organizations to address evolving training and technical assistance needs to prevent, prepare for, and respond to COVID-19 within your regions.
- Promote behavioral health strategies to address well-being of healthcare workers caring for people with HIV in response to COVID-19.
- Provide clinical consultation on HIV care and treatment for people with HIV with COVID-19.
- Provide expert consultation on clinical care, including therapeutic options, disposition of hospitalized patients with COVID-19, and inpatient obstetric healthcare guidance for RWHAP clients.
- Provide expert consultation on home care for people with HIV not requiring hospitalization, preventing COVID-19 spread in homes and communities for people with HIV, and disposition of non-hospitalized RWHAP patients with COVID-19.

Date Last Reviewed: April 2020