

Houston Area HIV Services Ryan White Planning Council

FY 2025 How to Best Meet the Need Quality Improvement Committee Service Category Recommendation Summary (as of 05/15/24)

Those services for which no change is recommended include:

Ambulatory Outpatient Medical Care - CBO and Public Clinic (which includes Emergency Financial Assistance - Pharmacy Assistance, Local Pharmacy Assistance Program, and Outreach)
Case Management (Non-Medical Targeting Substance Use Disorders)
Health Insurance Premium and Cost Sharing Assistance
Hospice Services
Linguistic Services
Mental Health Services (Untargeted and Targeting Special Populations)
Oral Health (Untargeted and Targeting the Northern Rural Area)
Referral for Health Care - ADAP Enrollment Workers
Substance Use Disorder Treatment
Vision Care

Services with recommended changes include the following:

*****New ideas recommended for services currently not funded (see page 2)***

Ambulatory Outpatient Medical Care - Rural (which includes Emergency Financial Assistance - Pharmacy Assistance, and Local Pharmacy Assistance Program)

- 🚫 Keep the service definition as is. Increase the financial eligibility for PriCare to 400% and keep the financial eligibility the same for EFA=500%, Outreach=none, LPAP= 500%.

Case Management (Medical and Clinical)

- 🚫 Keep the service definition as is and the financial eligibility the same: none. Recommend that the Priority and Allocations Committee increase the allocation to Medical Case Management and ask the Recipient to encourage agencies to use it to increase salaries to improve staff retention.

Case Management (Non-Medical Service Linkage)

- 🚫 In the service definition under Staff Requirements, remove the bachelor's degree requirement, change paid working experience to one-year experience working with people living with HIV (PLWH) or a community health worker. Keep the financial eligibility the same: none.

Emergency Financial Assistance – Other

- 🚫 Keep the service definition and financial eligibility the same: 400%.
- 🚫 Add durable medical equipment to the service definition, ask the Priority and Allocations Committee to assign it to Part B or State Services and ask the Houston area Part B Recipient to bring information to the Quality Improvement Committee on how the mechanics of delivering the service will work.

****Food Bank/Home Delivered Meals**

- ⓧ Revive the Food Bank/Home Delivered Meals service definition for the purpose of possibly providing Medically Tailored Meals.

****Housing**

- ⓧ Revive the Housing service definition for the purpose of providing temporary assisted living, and ask staff to conduct a resource inventory of facility based medical respite programs and underutilized hospice services.

Medical Nutritional Therapy/Supplements

- ⓧ Keep the service definition and financial eligibility the same: 400%. Request that the provider increase awareness about the availability of supplemental nutrition drinks.

Referral for Health Care – Incarcerated

- ⓧ Eliminate the portion of the service category that addresses the needs of incarcerated individuals due to the availability of alternative resources and to avoid a duplication of services.

Transportation

- ⓧ Add text to the service definition to ensure all clients with mobility issues have access to appropriate transportation and increase the financial eligibility for all transportation services to 500%. Ask the Recipient to make it possible for clients to receive a bus pass from any Ryan White funded agency where they are a client, not just their CPCDMS record holder.