

# **RSR In Focus: Understanding the Policy** Clarification Notice (PCN) #16-02

### Introduction

Policy Clarification Notice (PCN) #16-02 provides regarding HIV/AIDS information Ryan White Program (RWHAP) client eligibility and program guidance for allowable service categories. It clarifies service category definitions, aligning them across HRSA HAB documents and activities. This document summarizes the changes that may affect your data management and reporting practices and is relevant to all recipients and providers funded by RWHAP.

# **Eligible Individuals**

Clients must meet income and other eligibility criteria as established by the recipient. PCN #16-02 states that recipients may define eligibility for certain services more precisely, but they cannot broaden the definition of who is eligible for services. The PCN also outlines the circumstances in which individuals who are not HIV-positive may be eligible for RWHAP services.

#### Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds

Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18) Replaces Policy #10-02

Scope of Coverage: Health Resources and Services Administration (HRSA) Ryan White HIV/AIDS Program (RWHAP) Parts A, B, C, and D, and Part F where funding supports direct care and treatment services.

This policy clarification notice (PCN) replaces the HRSA HIV/AIDS Bureau (HAB) PCN 10-02: Eligible Individuals & Allowable Uses of Funds. This PCN defines and provides program guidance for each of the Core Medical and Support Services named in statute and defines individuals who are eligible to receive these HRSA RWHAP services.

RWHAP services.

Background
The Office of Management and Budget (OMB) has consolidated, in 2 CFR Part 200,
the uniform grants administrative requirements, cost principles, and audit
requirements for all organization types (state and local governments, non-profit and
educational insultutions, and hospitals) receiving federal awards. These
requirements, known as the "Uniform Guidance," are applicable to recipients and
subrecipients of federal funds. The OMB Uniform Guidance has been codified by the
Department of Health and Human Services (HHS) in 45 CFR Part 75—Uniform
Administrative Requirements, Cost Principles, and Audit Recuirements for HHS.
Admissis, HRSA RWHAP grant and cooperative agreement recipients and
states of the substance of the subrecipient to ensure the subaward is used
for authorized purposes in compliance with applicable statute, regulations, policies,
program requirements and the terms and conditions of the award (see 45 CFR SS.
75.351-352).

45 CFR Part 75, Subpart E—Cost Principles must be used in determining allowable costs that may be charged to a HRSA RWHAP award. Costs must be necessary and reasonable to carry out approved project activities, allocable to the funded project, and allowable under the Cost Principles, or otherwise authorized by the RWHAP and anomatic under the Cost Principles, or otherwise authorized by the RWHAP statute. The treatment of costs must be consistent with recipient or subrecipient policies and procedures that apply uniformly to both federally-financed and other non-federally funded activities.

HRSA HAB has developed program policies that incorporate both HHS regulations

HIV/AIDS BUREAU POLICY 16-02

# **Allowable Costs**

The PCN also outlines allowable and unallowable costs for RWHAP funding. In order to be an allowable cost, all services must:

- 1. Relate to HIV diagnosis, care, and support
- 2. Adhere to established HIV clinical practice standards
- 3. Comply with state and local regulations, and be provided by licensed or authorized providers as applicable

# **Ending the HIV Epidemic (EHE) Services**

Recipients of Ending the HIV Epidemic (EHE) Initiative funding should reference PCN #16-02 when completing the RSR to determine which service categories their EHE Initiative-funded activities align with. Services that are funded with by an EHE grant that align with one of the service categories in PCN #16-02 should be reported as that service category. "EHE Initiative Services" should only be used for services which do not fit in to an existing service category in PCN #16-02.

This resource was prepared by CAI and their partners Abt Associates and Mission Analytics under Cooperative Agreement #U69HA39084 from the Health Resources and Services Administration's HIV/AIDS Bureau. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the HIV/AIDS Bureau.











# **Service Category Descriptions & Program Guidance**

The PCN includes comprehensive descriptions and program guidance for each of the following RSR service categories:

#### **RWHAP Core Medical Services:**

- AIDS Drug Assistance Program Treatments
- AIDS Pharmaceutical Assistance
- Early Intervention Services (EIS)
- Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals
- Home and Community-Based Health Services
- Home Health Care
- Hospice
- Medical Case Management, including Treatment Adherent Services\*
- Medical Nutrition Therapy
- Mental Health Services
- Oral Health Care
- Outpatient/Ambulatory Health Services\*
- Substance Use Outpatient Care

### **RWHAP Support Services**

- Child Care Services
- Emergency Financial Assistance
- Food Bank/Home Delivered Meals
- Health Education/Risk Reduction
- Housing
- Linguistic Services
- Medical Transportation
- Non-Medical Case Management
- Other Professional Services
- Outreach Services
- Psychosocial Support Services
- Referral for Health Care and Support Services
- Rehabilitation Services
- Respite Care
- Substance Abuse Services (residential)

## **Need help with your RSR?**

- Contact Ryan White Data Support at <u>ryanwhitedatasupport@wrma.com</u> or 888-640-9356 if you have questions about how to report specific services in the RSR
- Contact the DISQ Team at data.ta@caiglobal.org for assistance with data quality.

Remember - there is no wrong door for TA!

Reach out to DISQ and we can help you get the support you need.

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<sup>\*</sup>Treatment Adherence Services provided during an OAHS visit should be reported under the OAHS service category, whereas Treatment Adherence Services provided during a Medical Case Management visit should be reported as Medical Case Management.