



# Comprehensive Coordinated System of Care Program Requirements

Ryan White HIV/AIDS Program (RWHAP) Part D WICY Training

*November 10, 2022*

**Division of Community HIV/AIDS Programs**  
HIV/AIDS Bureau (HAB)

**Vision: Healthy Communities, Healthy People**



# Session Objectives

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- Discuss Ryan White HIV/AIDS Program (RWHAP) Part D requirements and expectations related to a comprehensive, coordinated system of care
- Become knowledgeable about approaches implemented by RWHAP Part D recipients as it relates to the comprehensive, coordinated system of care
- Identify common challenges faced and potential solutions
- Explore resources available to RWHAP Part D recipients



# Introductions

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- HRSA Division of Community HIV/AIDS Programs
- HRSA Maternal and Child Health Bureau
- Facilitators
  - Lori DeLorenzo
  - Cheryl Nesbitt
- Recipients
  - New Jersey Department of Health
  - Valleywise Health (Maricopa County Special Healthcare District)



# RWHAP Part D Requirements and Expectations

- Develop **comprehensive** and **coordinated** system of **family-centered** care and support services for low income **women, infants, children, and youth (WICY)** with HIV in **entire** service area
- Focus on:
  - Hardest to reach
  - Greatest unmet need
  - Greatest gaps in HIV care continuum



# RWHAP Part D Requirements and Expectations

- Provide:
  - family-centered health care services in an outpatient or ambulatory care setting
  - specialty care
  - support services
    - ✓ family-centered care services, including case management
    - ✓ referrals
    - ✓ additional services necessary to enable the patient and family to participate in program
    - ✓ inform and educate on opportunities to participate in HIV/AIDS related research
- **Culturally and linguistically** competent care
- Services provided directly, through contract or memoranda of understanding (MOU)



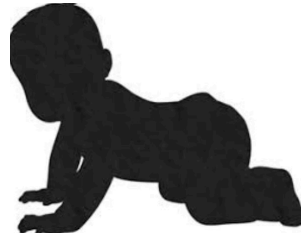
# RWHAP Part D Requirements and Expectations

- Ensure progress of WICY populations along HIV care continuum
- Goal of optimizing health outcomes demonstrated by:
  - Testing and linkage to care
  - Retention in medical care
  - Viral suppression
  - Decreases in new HIV infections in the community
- Implement evidence-based interventions with disproportionately affected populations
- For programs awarded Minority AIDS Initiative (MAI) funds, provide culturally and linguistically appropriate care and services to racial and ethnic minorities

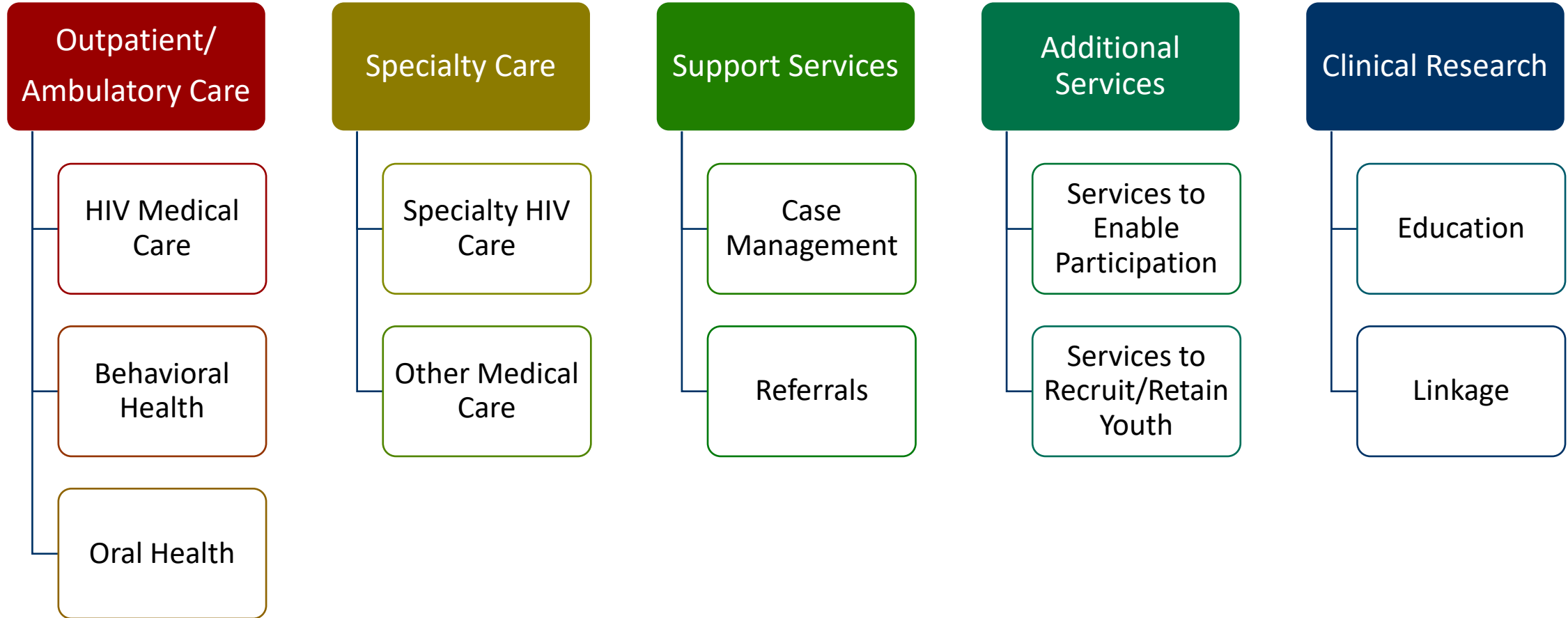


# Priority WICY Populations

- Provide family-centered care in outpatient or ambulatory care settings to low income:
  - women (aged 25 years and older) with HIV;
  - infants (up to two years of age) exposed to or with HIV;
  - children (aged two to 12) with HIV; and
  - youth (aged 13 to 24) with HIV.



# Services Provided via Family-Centered Care







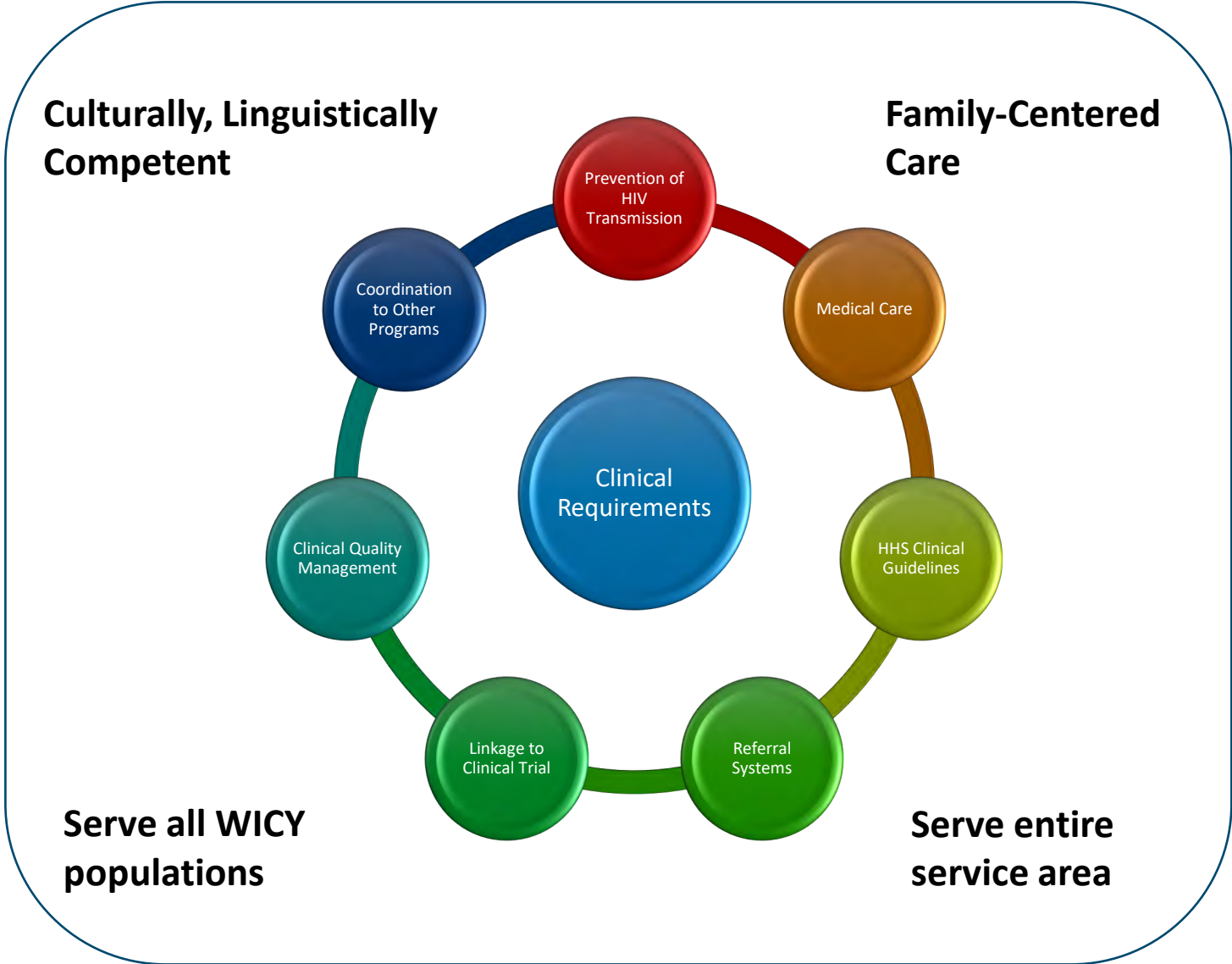
# Chatter-fall

## What does Family-Centered Care mean to you?

Drop the response into the chat room but **don't post just yet**

- On the count of “3” everyone will post at the same time

# Clinical Services Framework



# What is a Comprehensive Coordinated System of Care?

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- Provides patient/family-centered services
- Maintains continuity of medical and support services
- Coordinates referrals for any clinical care needs
- Identifies problems and intervenes early
- Transitions patients to new providers as necessary
- Facilitates communication between providers
- Utilizes culturally and linguistically competent staff
- Improves health outcomes



# Common Challenges

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- Population-specific care or services, such as:
  - pre-conception counseling,
  - cervical cancer screening or
  - pregnancy testing
- Limited access for specific services, i.e. dental, mental health, housing, substance use treatment
- Collaboration with Title V
- Clinical research



# Title V

## Maternal and Child Health (MCH)

### Services Block Grant Program



Division of State and Community Health (DSCH)  
Maternal and Child Health Bureau (MCHB)  
Health Resources and Services Administration (HRSA)

# Title V of the Social Security Act



## Maternal and Child Health (MCH) Services Block Grant

# Title V MCH Services Block Grant

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**Overview** **Formula grant** under which funds are awarded to 59 States and jurisdictions.

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Purpose is to create **Federal/State partnerships** that support service systems for addressing the needs of maternal and child health populations.

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Title V is the nation's **oldest** federal-state partnership.

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# Title V MCH Services Block Grant

Title V, Sec. 501 (a) (1) (A-D)

**Title V authorizes appropriations to States “to improve the health of all mothers and children”.**

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“To provide and assure mothers and children...access to quality maternal and child health services”

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“To reduce infant mortality and the incidence of preventable diseases and handicapping conditions among children...”

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“To increase the number of children... appropriately immunized against disease and the number of low-income children receiving health assessments and follow-up diagnostic and treatment services...”

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“To promote the health of mothers and infants by providing prenatal, delivery and postpartum care for low-income, at-risk pregnant women”

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# Title V MCH Services Block Grant

Title V, Sec. 501 (a) (1) (A-D)

**Title V authorizes appropriations to States “to improve the health of all mothers and children”.**

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“To promote the health of children by providing preventive and primary care services...”

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“To provide rehabilitation services for blind and disabled individuals under the age of 16 receiving benefits under Title XVI, to the extent medical assistance for such services is not provided under Title XIX”

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“To provide and to promote family-centered, community-based, coordinated care...for children with special health care needs [CSHCN] and to facilitate the development of community-based systems of services for such children and their families.”

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# Title V MCH Services Block Grant

## Legislative Requirements

### Federal Title V Funds:

- State Formula Block Grants (85%)
  - Discretionary Set-Aside Funding (15%)
    - Special Projects of Regional and National Significance
    - Community Integrated Service System
- 

### Match Requirement:

- For every \$4 in federal Title V funding received, States/jurisdictions are required to match \$3 in non-federal funds.
  - States/jurisdictions must also meet the 1989 Maintenance of Effort Requirement
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### Block Grant:

- Each State/jurisdiction directs its Title V program investments to address the unique priority needs that are identified through a comprehensive, Statewide Five-Year Needs Assessment.
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# Title V MCH Services Block Grant

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## Grants to 59 States and Jurisdictions

Every five years, states conduct a comprehensive **Needs Assessment**

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Determine seven-ten **priorities** to address for its MCH population

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Work an **State Action Plan**, building objectives and strategies to address priorities.

**Measures** are identified to track progress and assess impact on priorities.

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# Title V MCH Services Block Grant

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## Grants to 59 States and Jurisdictions

Each year, States/jurisdictions submit to HRSA/MCHB an **Application** for MCH Block Grant funding, along with an **Annual Report** for the grant period that is ending.

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Project period for MCH Block Grants is **two years**.

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Funds are awarded to states/jurisdictions upon submission of an **acceptable plan** that addresses the health services needs within a state for the target population of mothers, infants and children, which includes CSHCN, and their families.

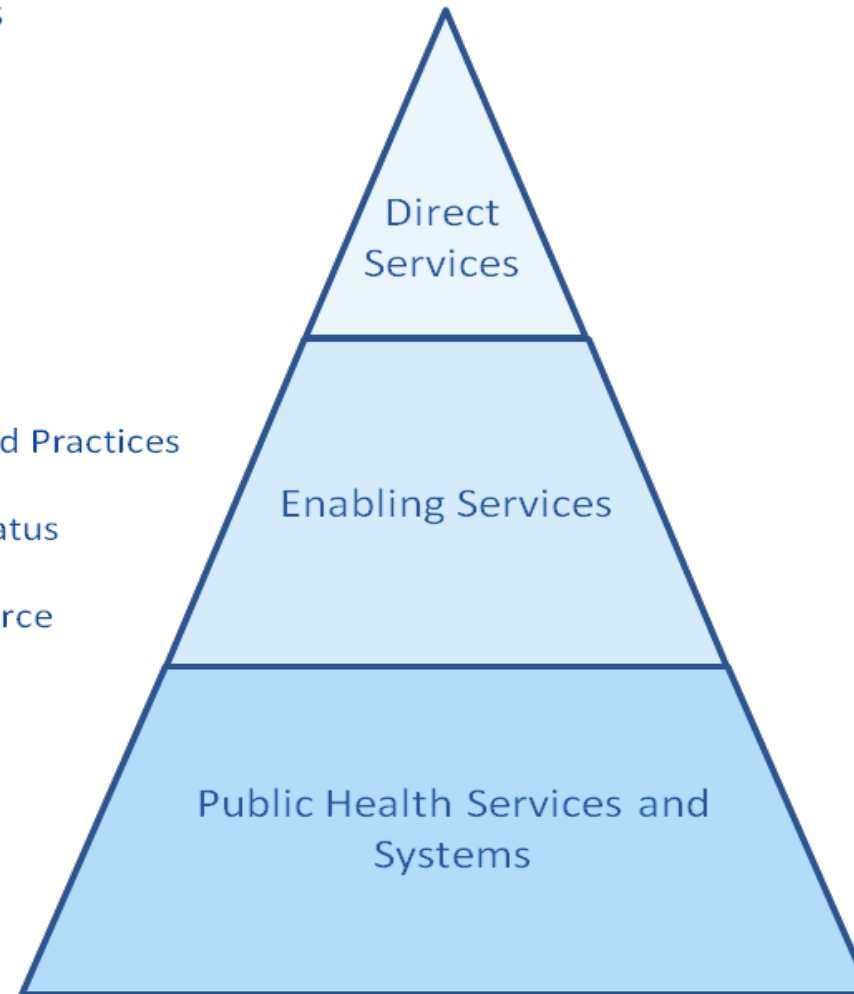
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## Public Health Services for MCH Populations: The Title V MCH Services Block Grant

### MCH Essential Services

1. Provide Access to Care
2. Investigate Health Problems
3. Inform and Educate the Public
4. Engage Community Partners
5. Promote/Implement Evidence-Based Practices
6. Assess and Monitor MCH Health Status
7. Maintain the Public Health Work Force
8. Develop Public Policies and Plans
9. Enforce Public Health Laws
10. Ensure Quality Improvement



# Title V MCH Services Block Grant



Family engagement and leadership are longstanding priorities in MCHB programs.

# Title V MCH Services Block Grant

U.S. Department of Health and Human Services www.hrsa.gov

**HRSA**  
Maternal & Child Health

Search TVIS  Search Tips Multi-Year Narrative Text Search

Home Reporting Domains Priorities and Measures Financial Data Access/Linkage State Archive Glossary

## Explore the Title V Federal-State Partnership

As one of the largest Federal block grant programs, Title V is a key source of support for promoting and improving the health of the Nation's mothers and children. The purpose of the Title V Maternal and Child Health Services Block Grant Program is to create Federal/State partnerships that enable each state/jurisdiction (**hereafter referred to as state**) to address the health services needs of its mothers, infants and children, which includes children with special health care needs, and their families.

National

National Data  
FY 2020 Expenditures: \$2,558,358,810

FY 2020 Expenditures  
National: \$2,558,358,810

FY 2020 Percentage Served

<https://mchb.tvisdata.hrsa.gov/>



→ LET'S ←  
*Explore*





## What about...

Transgender men?

Males over 25 years?

All but 1 county in service area?

Transgender women?

Affected Family Members?

# Lessons from the Field

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How has your organization changed over time to ensure that all WICY populations are served?

- Which population(s) was added over time?
- What challenges did you face and how were they overcome?

# Lessons from the Field

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How do you coordinate services across your sites or network?

- How do you ensure that referring agencies have the expertise to provide the requested service to your population? Additionally, how do you ensure that services are culturally and linguistically appropriate?
- How do you track and document referrals and outcomes?
  - What happens if the referring agency does not provide the necessary information?



# Lessons from the Field

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How is your system set up to ensure it is family centered?

- What services do you provide to affected members?

# Lessons from the Field

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How have you coordinated with the Title V Program?

- What challenges have you faced and how did you overcome them?

# Lessons from the Field

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How do you keep informed about research opportunities?

- How do you educate clients of available research?
- How is this documented?

# Lessons from the Field

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What services must be sought outside of your program?

- How does your program ensure access to the services?
- Do you have formal contracts or MOUs?

# Questions





# Use of Information

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- Sharing the information with your internal and external stakeholders to enhance their understanding and knowledge about the RWHAP Part D
  - Expand your network and partners
- Identify areas for improvement and quality improvement projects
- In preparation for a site visit

# Resources

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- [AIDS Education and Training Center Program National Coordinating Resource Center](#)
- [HHS Clinical Guidelines](#)
  - Adult and Adolescent ARV
  - Adult and Adolescent Opportunistic Infections
  - Pediatric ARV
  - Pediatric Opportunistic Infections
  - Perinatal HIV Clinical Guidelines
- [HRSA Ryan White HIV/AIDS Program website](#)
- [HRSA Maternal and Child Health Bureau Title V Program website](#)
- [National HIV/AIDS Strategy](#)
- [National HIV Curriculum](#)
- Notice of Funding Opportunity
  - HRSA-22-037
  - HRSA-22-156
- [TargetHIV](#)



# Next WICY Training

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**When:** Spring 2023

**What:** Fiscal Requirements



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# Contact Us

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# See you in the next session!

