

**HIV Health Services Planning Council
Sacramento EMA**

SERVICE STANDARDS

Policy No.	SSC 06
Date Approved:	7/26/00
Dates Revised:	7/23/03

**Subject: CHEMICAL DEPENDENCY TREATMENT SERVICES
(Substance Abuse Treatment Service Category)**

Reference: Ryan White CARE Act Title I Manual SEC. 1, pg. I-26

1. Ryan White Title I & II funding is to be used for HIV/AIDS medical services and for psycho-social and support services which significantly improve access and adherence to such medical services. As such, any Substance Abuse Treatment services which are provided with Ryan White Title I & II funding will be fully integrated with each client's medical care. For purposes of this Standard, the term Substance Abuse Treatment services shall include treatment and/or counseling to address substance abuse (including alcohol, prescription and illicit drugs) problems provided in an outpatient or residential health service setting. Such services must be considered eligible for funding by both the Sacramento EMA HIV Health Services Planning Council ("HIV Planning Council") and the Health Resources Services Administration (HRSA).
2. Ryan White Title I & II funding is to be expended in a cost effective, equitable manner which is based upon verified client need and encourages self-empowerment of clients. Due to the time-sensitive nature of substance abuse treatment and the fact that these services are best delivered during a narrow window allowed by self-referral, patients presenting through self-referral will be permitted. Services paid for with Ryan White Title I & II funds shall be delivered only after verification of client eligibility and payer of last resort. Substance Abuse treatment services which are not initiated through self-referral shall be administered or referred through Case Management services or medical providers. All services shall be provided in accordance with the allocation priorities and directives adopted by the HIV Planning Council. Ryan White Title I & II funds shall not be expended or set-aside on a prospective basis for services not yet actually provided.
3. In accordance with the above, the following care and treatment guidelines apply:
 - A. The HIV Health Services Planning Council makes no endorsement of any one substance abuse treatment strategy or program model. It does,

- however, require the following issues to be considered in any treatment intervention for Ryan White eligible clients:
- i. HIV related medical issues must always take precedent over substance abuse treatment program protocol.
 - ii. The therapeutic treatment model must be made available to clients with extreme HIV related medical issues (as determined by a medical provider) not appropriate for social model intervention.
- B. Agencies receiving Ryan White funding for substance abuse treatment services shall be licensed by the State Department of Alcohol and Drug Programs. Counseling services will be administered by a Certified Alcohol and Drug Abuse Counselor, an individual in the process of becoming a Certified Alcohol and Drug Abuse Counselor, or an individual with comparable experience and educational qualifications.
- C. The following substance abuse treatment services will be made available to PLWH within the Sacramento EMA as funding allows and in accordance with: 1) the client's individual plan of care; 2) Planning Council guidelines; and 3) Health Resources and Services Administration guidelines:
- i. **Outpatient counseling**, including support groups, will be administered in accordance with the client's individual plan of care and Public Health Services (PHS) best practice guidelines. Ryan White funds may be used to cover cost for these services only if the client is determined ineligible to participate in other federal, state or local substance abuse treatment programs.
 - ii. **Residential treatment services** will be administered in accordance with the client's individual plan of care and PHS best practice guidelines. Ryan White funds may be used to cover cost for these services:
 - a) If the client is determined ineligible to participate in other federal, state or local substance abuse treatment programs, or if those services are unavailable; or
 - b) Provided funding is available, to extend patient care up to an additional 90 continuous days beyond coverage authorized by other federal, state or local substance abuse treatment programs, if determined to be clinically necessary by the patient's treatment team.
 - iii. **Detoxification services** will be administered in accordance with the client's individual plan of care and PHS best practice guidelines. Ryan White funds may be used to cover cost for these services:

- a) If the client is determined ineligible to participate in other federal, state or local substance abuse treatment programs or if those services are unavailable; or
 - b) Provided funding is available, to extend patient care up to an additional 14 continuous days beyond coverage authorized by other federal, state or local substance abuse treatment programs, if determined to be clinically necessary by the patient's treatment team.
- iv. **Residential/Transitional aftercare treatment** will be made available to patients who have graduated from either a residential or detoxification program and have personal issues (i.e., pervasive violence or substance abuse in the home, homelessness, chronic mental illness, etc.) which place the patient at high risk for immediate relapse. The patient's treatment team will determine eligibility for this program component.

Residential/Transitional aftercare treatment services will be administered in accordance with the client's individual plan of care and PHS best practice guidelines. Ryan White funds may be used to cover cost for these services:

- a) If the client is determined ineligible to participate in other federal, state or local substance abuse treatment programs or if those services are unavailable; or
 - b) Provided funding is available, to extend patient care up to an additional six months beyond coverage authorized by other federal, state or local substance abuse treatment programs, if determined to be clinically necessary by the patient's treatment team.
4. Providers of Substance Abuse Treatment services will continually improve the quality of care provided by engaging in activities outlined in USDHS PHS guidelines, such as a system of peer reviews, etc.
5. Case Managers at RW Agencies may at any time submit to the RW Fiscal Agent requests for interpretation of these or any other Services Standards adopted by the HIV Health Services Planning Council, based on the unique healthcare needs of a client or on unique barriers to accessing healthcare services which may be experienced by a client.
6. RW Agencies shall provide a means by which Case Managers can obtain inservicing and on-call advice related to client medical and other healthcare needs.

7. Clients shall have the right to request a review of any service denials under this or any other Services Standards adopted by the HIV Health Services Planning Council. The most recent review / grievance policies and procedures for the RW Agency shall be made available to each client upon intake. Such policies and procedures shall include an explanation of the criteria and process for accessing any available advocacy or ombudsman services.

8. All Ryan White providers of substance abuse treatment services must have a quality assurance program and plan in place that is in compliance with the EMA Quality Management / Continuous Quality Improvement Plan and requirements set forth by the Quality Management Manager of the Fiscal Administrative Agent.

Adopted: _____
Craig Spatola, Chair