

Emergency Financial Assistance Service Standard

Health Resources & Services Administration (HRSA) Description: Emergency Financial Assistance (EFA) provides limited one-time or short-term payments to assist a HRSA Ryan White HIV/AIDS Program (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 (ADAP) or AIDS Pharmaceutical Assistance Program (LPAP), 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.

Program Guidance: It is expected that all other sources of funding in the community for EFA will be effectively used and that any allocation of RWHAP funds for these purposes will be as the payer-of-last-resort, and for limited amounts, uses, and periods of time. EFA funds used to pay for otherwise allowable HRSA RWHAP services must be accounted for under the EFA category.

Language assistance must be provided to individuals who have limited English proficiency and/or other communication needs at no cost to them in order to facilitate timely access to all health care and services.

Subrecipients must provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area to inform all individuals of the availability of language assistance services.

All AAs and subrecipients must establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organizations' planning and operations.

Limitations: Direct cash payments to clients are not permitted. Continuous provision of an allowable service to a client must not be funded through EFA.

Services: RWHAP Part B/State Services funds may be used to provide services in the following categories:

1. ADAP eligibility determination period; and
2. Emergency Financial Assistance (EFA).

EFA can be used during the ADAP eligibility determination period. Initial medications purchased for this use are not subject to the \$800/client/year cap.

EFA can be used to reimburse dispensing fees associated with purchased medications. Dispensing fees are not subject to the \$800/client/year cap.

EFA is an allowable support service with an \$800/year/client cap.

- The agency must set priorities, delineate, and monitor what part of the overall allocation for emergency assistance is obligated for each subcategory. Careful monitoring of expenditures within a subcategory of "emergency assistance" is necessary to assure that planned amounts for specific services are being implemented, and to determine when reallocations may be necessary.
- Limitations on the provision of emergency assistance to eligible individuals/households should be delineated and consistently applied to all clients. It is expected that all other sources of funding in the community for emergency assistance will be effectively used and that any allocation of EFA funding for these purposes will be the payer-of-last-resort, and for limited amounts, limited use, and limited periods of time.

EFA provides funding through:

- Short-term payments to agencies
- Establishment of voucher programs

EFA to individual clients is provided with limited frequency and for a limited period of time, with specified frequency and duration of assistance. Emergent need must be documented each time funds are used.

EFA funds used to pay for otherwise allowable RWHAP services must be accounted for under the EFA category.

EFA funds may be used on the following essential items or services:

- Utilities (may include household utilities such as gas, electricity, propane, water, and all required fees)
- Housing (may include as rent or temporary shelter. EFA can only be used if HOPWA assistance is not available or if client is not eligible for HOPWA services)
- Food (groceries or food vouchers)
- Transportation
- Prescription medication assistance such as short term, one-time assistance for any medication and associated dispensing fee as a result or component of a primary medical visit (not to exceed a 30-day supply)
- Other RWHAP allowable costs needed to improve health outcomes.

Telehealth and Telemedicine is an alternative modality to provide most Ryan White Part B and State Services funded services. For the Ryan White Part B/SS funded providers and Administrative Agencies, telehealth & telemedicine services are to be provided in real-time via audio and video communication technology which can include videoconferencing software.

DSHS HIV Care Services requires that for Ryan White Part B or SS funded services providers must use features to protect ePHI transmission between client and providers. RW Providers must use a telehealth vendor that provides assurances to protect ePHI that includes the vendor signing a business associate agreement (BAA). Ryan White Providers using telehealth must also follow DSHS HIV Care Services guidelines for telehealth and telemedicine outlined in *DSHS Telemedicine Guidance*.

Service Standard and Measure

The following Standards and Measures are guides to improving healthcare outcomes for people living with HIV throughout the State of Texas within the Ryan White Part B and State Services Program.

Standard	Measure
<p>Assisting Clients during ADAP eligibility determination period: RWHAP-eligible clients with documented evidence of emergency need of HIV medications are able to receive short-term medication assistance (30- day supply) with limited use of EFA for no more than 60 days (2 months or less).</p> <p>Assisting Clients with Short-Term Medications: RWHAP-eligible clients with documented evidence of pending health insurance medication plan approval are able to receive short-term HIV medication assistance through EFA.</p>	<p>Percentage of clients that have documented evidence in the client primary record of short- term HIV medication assistance provided during ADAP application period.</p> <p>Percentage of clients that have documented evidence in the client primary record of short- term HIV medication assistance provided during health insurance application period.</p>
<p>Client Determination for Emergency Financial Assistance: Applicants must demonstrate an urgent need resulting in their inability to pay their utility bills or prescriptions without financial assistance for essential items or services necessary to improve health outcomes. For example, demonstrated need may be demonstrated by, but not limited to, the following:</p> <ul style="list-style-type: none"> • A significant increase in bills • A recent decrease in income • High unexpected expenses on essential items • They are unable to provide for basic needs and/or shelter • A failure to provide EFA will result in danger to the physical health of client or dependent children • Other emergency needs as deemed appropriate by the agency <p>Agency staff will conduct an assessment of the presenting problems/needs of the client with the emergency financial issue.</p> <p>A service plan will be developed documenting client’s emergent need resulting in their inability to pay bills/prescriptions without assistance, and other resources pursued noted prior to using EFA funding for assistance.</p>	<p>Percentage of clients with documented evidence of determination of EFA need noted in client’s primary record.</p> <p>Percentage of clients with documented service plan for EFA in the client’s primary record that indicates emergent need, other resources pursued, and outcome of EFA provided.</p> <p>Percentage of clients with documented evidence of resolution of the emergency status and referrals made (as applicable) with outcome results in client’s primary record.</p>

<p>Client Determination for Emergency Financial Assistance (continued)</p> <p>Client will be assessed for ongoing status and outcome of the emergency assistance. Referrals for services, as applicable, will be documented in the client file.</p> <p>Resolution of the emergency status will be documented in the client record.</p>	
<p>Emergency Financial Assistance Provided: Short-term assistance will be provided for:</p> <ul style="list-style-type: none"> • Utilities • Housing • Food (groceries and food vouchers) Transportation • Prescription medication assistance • Other RWHAP-allowable costs needed to improve health outcomes <p>All completed requests for assistance shall be approved or denied within three (3) business days.</p> <p>Assistance shall be issued in response to an essential need (as identified by the staff person providing EFA) within three (3) business days of approval of request.</p> <p>Payment for assistance made to service providers will protect client confidentiality.</p> <ul style="list-style-type: none"> • Use of checks and envelopes that de-identify agency as an HIV/AIDS provider to protect client confidentiality. 	<p>Percentage of clients with documented evidence of payments made by agency for resolution of emergency status. <i>(Copies of checks/vouchers available)</i></p>

References

HRSA/HAB Division of Service Systems Program Monitoring Standards – Part A April 2013, page 29-30. Accessed on October 12, 2020 at: <https://hab.hrsa.gov/sites/default/files/hab/Global/programmonitoringparta.pdf>

HRSA/HAB Division of State HIV/AIDS Programs National Monitoring Standards – Program Part B April 2013, page 29-30. Accessed October 12, 2020 at: <https://hab.hrsa.gov/sites/default/files/hab/Global/programmonitoringpartb.pdf>

HRSA/HAB Ryan White Program & Grants Management, Recipient Resources. Policy Notices and Program Letters, Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18), https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf

Texas Department of State Health Services HIV/STD Program Policies: DSHS Funds as Payment of Last Resort (Policy 590.001). Located at: <http://www.dshs.texas.gov/hivstd/policy/policies/590-001.shtm>

Interim Guidance for the Use of Telemedicine and Telehealth for HIV Core and Support Services, March 2020. Available at: <https://www.dshs.state.tx.us/hivstd/taxonomy/telemedguidance.shtm>

Interim Guidance for the Use of Telemedicine and Telehealth for HIV Core and Support Services – Users Guide and FAQs, March 2020. Available at: <https://www.dshs.state.tx.us/hivstd/taxonomy/telemedguidance-faq.shtm>