



Riverside/San Bernardino, CA TGA Policy and Procedure Policy #6 EIS Reporting	Effective.....March 1, 2011
	Revised.....March 1, 2012
	APPROVED  <hr/> Scott Rigsby, Public Health Program Coordinator

- PURPOSE** This policy is intended to inform providers of the specific reporting requirements for Early Intervention Services (EIS).
- POLICY** RWP-funded providers are required to develop and implement policies/procedures to ensure timely and accurate EIS data tracking and reporting.
- SCOPE** This applies to all providers contracted to provide RWP EIS services to eligible clients in the Riverside/San Bernardino, CA TGA. This includes both Part A EIS and Minority AIDS Initiative (MAI) EIS.

PROCEDURE A. Background
 CDC estimates that of the 1.1 million adults and adolescents at the end of 2006 living with HIV, 21% of infected persons do not know their HIV status. The ultimate US Public Health goal is to inform all HIV+ persons of their status and bring them into care in order to improve their health status, prolong their lives and slow the spread of the epidemic in the United States through enhanced prevention efforts. A new legislative requirement focuses on specific requirements and expectations for identifying the unaware and bringing them into care. Ryan White (RW) jurisdictions are required to develop and implement a strategy and plan for reaching this goal within their jurisdiction.

The Inland Empire HIV Planning Council allocated both Part A and MAI funding to the Early Intervention Services (EIS) category to address this new legislative requirement. The primary purpose of EIS is to identify those that are unaware of their HIV+ status and those that are HIV+ that have fallen out of care, inform them of their status (i.e. testing) and service options, refer them to testing and medical services, and ensure they are linked to medical services.

B. Documentation Requirements
 Documentation for EIS must demonstrate a continuum of client health improvement from initial outreach/identification to testing and counseling to entry and maintenance in care. Each agency is required to collect, track, and report all required data elements as specified in the contract, RWP policies, and IEHPC Standards of Care. In addition, EIS service providers must record the following that are applicable for each client receiving EIS-funded services:

1. **EIS Contract:** Part A EIS or Minority AIDS Initiative (MAI) EIS
2. # of "outreach"/EIS **encounters** provided to the client
3. # of **tests administered** by the EIS program
4. # of **referrals to testing** for the client (*not administered by agency's EIS*)
5. Whether the client tested **positive or negative**
6. # of **referrals to Medical Services** (*Outpatient/Ambulatory only*)
7. # of **referrals to All Other Services** (*not Out/Amb*)
8. # of actual **linkages to Medical Services** (*kept appointments*)
9. # of actual **linkages to All Other Services** (*kept appointments*)
10. Per *ARIES Policy #5: Minimum ARIES Data Requirements*, all RW-funded providers are required to collect, track, and report **CD4 and Viral Load test results** (at least 2 annually, 90 days apart) when possible.

C. Reporting Methods

ARIES: Whenever all 6 ARIES keys can be obtained (first name, last name, middle initial, mother's maiden name, date of birth, gender), client data should be entered into ARIES to better facilitate data collection, tracking, and reporting. All of the required elements listed above can be captured in ARIES (see Attachment A and Attachment B for guidance).

Logs: For individuals that cannot be entered into ARIES, including those that test negative or are lost to follow-up, providers must develop some other mechanism to collect, track, and report the required elements. The Ryan White Program developed a log that captures most of the required elements (*Attachment 23 of Policy #4 – Forms and Tools: Required and Recommended*). Providers may use this log and/or adapt the log to meet the agency's data reporting needs.

D. Expectations:

To properly implement this policy, providers are required to:

1. Develop and implement a policy and procedure to ensure the collection, maintenance, and reporting of EIS required elements and submit this policy to the RWP.
2. Submit any revisions of the policy/procedure to the RWP for review.
3. Train EIS workers and ARIES data entry staff on the policy and requirements to ensure compliance and accurate documentation.
4. Submit reports upon request (mid-year and year-end at a minimum).
5. Consider the following in the development of the policy and procedure:
 - Contract requirements related to EIS service provision
 - IEHPC EIS Standards of Care requirements
 - IEHPC directives requirements related to EIS service provision
 - How best to capture data out in the field (forms, staff training)
 - How best to document the required elements for each individual encountered by an EIS worker (ARIES, log, etc.)
 - How often records will be updated/monitored to ensure report-readiness
 - How to maintain/improve communication with both RW and non-RW service providers to facilitate complete data collection
 - "Linkage" is defined as follows:
 - *Unaware:* When linking the Unaware, a "linkage" to care has occurred after the individual has been tested, received their positive result (informed), and been connected to both medical care and case management (either non-medical or medical case management, depending on the clients' needs) for continuing follow-up.
 - *Unmet Need:* When linking those that have fallen out of care back into care, a "linkage" back into care has occurred when the individual has kept at least two medical appointments and has been reconnected to a case manager (either medical or non-medical, depending on the clients' needs). A successful "re-link" should be agreed upon by all service providers involved in the individual's care.
 - Although it is at the EIS worker's and other service providers' discretion to determine when a client is truly linked/re-linked to the care system, it is expected that the individual will "graduate" from EIS and that the coordination of the individual's care will be assumed/resumed by a case manager (either medical or non-medical, depending on the clients' needs) after a reasonable amount of time.

- Ideally, “linkage to care” (kept appointments) should be verified through direct communication with the service provider (medical provider, case manager, etc.). However, if reasonable attempts have been made and direct communication with the service provider cannot be achieved, self-report from the client is also acceptable for verification of “linkage.”

E. Compliance:

Providers are encouraged to request assistance from the RWP if necessary. RWP staff will monitor compliance with this policy on a regular basis:

1. Ryan White Program staff will conduct periodic Quality Assurance checks in ARIES.
2. Ryan White Program staff will request and review periodic data reports from funded providers.
3. Ryan White Program staff will visit provider sites as necessary to ensure compliance with this P&P.
4. Ryan White Program-funded providers found to be in violation of this P&P will be contacted and required to submit a plan to correct any deficiencies. Any continuing deficiencies may result in delay or denial of payment.

EIS DATA REQUIREMENTS (Part A and MAI)

See also ARIES Screen Shots - Attachment B

# on Policy	Variable	Data Collection Suggestions
Service Provision		
1	Contract	ARIES - Services: Services (Contract = either <i>Ryan White Part A</i> or <i>Ryan White MAI</i>)
2	Encounters	ARIES - Services: Services (Primary = EIS; Secondary = EIS; Subservice = Encounter)
3	Tests Administered	ARIES - Services: Services (Primary = EIS; Secondary = EIS; Subservice = Test)
Test Results		
5	Agency Administered	ARIES - Medical: Basic Medical: Basic Medical: HIV Tests
5	Administered at another	ARIES - Medical: Basic Medical: Basic Medical: HIV Tests (obtain from outside agencies when possible. Enter in ARIES)
Referrals		
6 & 7	Number	ARIES - Care Plan: Referral: Referrals (enter each referral separately)
6 & 7	What services	ARIES - Care Plan: Referral: Referrals (Primary Service = service client is being referred to.)
6 & 7	What agencies	ARIES - Care Plan: Referral: Referrals (Refer To)
4	Referrals to Testing	ARIES - Care Plan: Referral: Referrals (Refer To = Other...enter "Testing" into the free-text box...see instructions on Attachment B)
Linkages		
8 & 9	Number of Complete	ARIES - Care Plan: Referral: Referrals (Outcome Date and Outcome) <i>Linkage = Kept Appointment</i>
Outcomes Tracking (Minimum two of each test during the program year...at least 90 days apart)		
10	CD4 Test Date	ARIES - Medical: Medical History: Medical History: Tests / CD4 and Viral (CD4 Date)
10	CD4 Count	ARIES - Medical: Medical History: Medical History: Tests / CD4 and Viral (T Cell Count)
10	Viral Load Date	ARIES - Medical: Medical History: Medical History: Tests / CD4 and Viral (Viral Load Date)
10	Viral Load Value	ARIES - Medical: Medical History: Medical History: Tests / CD4 and Viral (Value)

Note: Most of the elements required for EIS reporting are already required per the Minimum Data Requirements policy (see ARIES Policy #5). The few EIS required elements that are not required per ARIES Policy #5 (such as referral and linkage data) can be collected outside of ARIES. However, the Ryan White Program (RWP) office recommends that agencies enter as much data as possible into ARIES to facilitate complete data collection and ease of reporting. If an agency collects all of the required data in ARIES, the RWP can access the data directly and the agency will not have to “submit” a separate report. The RWP office understands, however, that this may not always be possible for services such as EIS that often involve only brief contacts with individuals receiving service. The RWP expects agencies to do their best to meet the data requirements for all clients.

REMINDER: ALL applicable, required elements referred to in the Minimum Data Requirements policy are also required for EIS clients.

Elements required specifically for EIS clients are highlighted with an orange oval.

Services: Services (#s 1, 2, and 3 – Program, Encounters, Tests)

Staff * Site

Date of Service * Days to Next Service date

Contract Name * Created Date

Program *

Primary Service *

Secondary Service *

Agency Subservice *

Units of Service * @ \$ per = \$ Total

Client Payment CARE/HIPP Co-Payment *

Actual Minutes Spent

Service Notes

Select either *Ryan White Part A* or *Ryan White MAI*

ARIES currently records EIS service provision as a “visit”. The RWP considers one of these EIS “visits” to be equivalent to one 15-minute “unit” of an encounter or one “transaction” of a test. Examples: A 30 minute Encounter = 2 visits/ units. One Test = one visit/transaction.

Medical: Basic Medical: Basic Medical: HIV Tests (#5 - Test Results...administered by agency or by another organization)



HIV TESTS

HIV Test Date *	Result	County	State	Source	Pre-test Counseling *	Post-test Counseling *
<input type="text"/>	Offered / Not Offered <input type="text"/>	Offered / Not Offered <input type="text"/>				
<input type="text"/>	<input type="text"/>					

Positive
Negative
Indeterminate

Save
Cancel
Deactivate

Care Plan: Referral: Referrals (#s 4, 6, 7, 8, and 9 – Referrals and Linkages)

Referral Date	<input type="text"/>	Outcome Date	<input type="text"/>
Program	<input type="text" value="Ryan White"/>	Outcome	<input type="text" value="Kept appointment"/>
Primary Service	<input type="text" value="Care Services Program (RW Part B)"/>		<input type="text" value="No show"/>
Secondary Service	<input type="text" value="Bridge Project"/>		<input type="text" value="Rescheduled appointment"/>
Refer To	<input type="text" value="MCWP"/>	Notes	<input type="text"/>
(other)	<input type="text" value="CARE-HIPP"/>		
Target/Appt. Date	<input type="text"/>		
Follow-up Date	<input type="text"/>		
PSC Code	<input type="text"/>		
Reason	<input type="text" value="HOPWA"/>		

For Referrals to Testing (#4):

1. Input referral date
2. Leave Program line blank
3. Leave service lines blank
4. Refer To = "Other"
5. (other) = "Testing"
6. Input Target/Appt. Date

Note: Can add additional information after "Testing" such as "Testing at SB Clinic" as long as the entry begins with the word "Testing". Be certain to follow up (Outcome) to document whether the client actually got tested.

Medical: Medical History: Medical History: Tests / CD4 and Viral (#10 - Outcomes Tracking – CD4 and Viral Load Progress)

CD4 Date *	T Cell Count *	%	Viral Load Date *	<=>	Value *	Test Type	Log
<input type="text"/>	<ul style="list-style-type: none"> Roche PCR St Roche PCR UI Bayer bDNA BioMerieux Nu 						

At least 2 CD4 and 2 viral load test results at least 90 days apart are required to be able to report “progress” to HRSA. Every effort should be made to collect at least two of each of these test results for all clients during the program year.