The Orange County Health Care Agency serves as the Grant Recipient for Ryan White Part A funds. The Orange County HIV Planning Council (Council) is legislatively mandated to determine service category priorities and allocations for Ryan White Part A/Minority AIDS Initiative (MAI) funding. Unless otherwise indicated, all allocations are Ryan White Act Part A funds. The Council may make recommendations regarding Directives for the use of other funding sources for Ryan White Part A/MAI allowable service categories. Directives will be revised at least one year prior to procurement of services.

For the purpose of this document, “General” population refers to HIV-positive individuals. Unless otherwise indicated, all inferences to populations refer to HIV-positive individuals.

I. FOUNDATIONAL INSTRUCTIONS

1. Enhanced Planning
   a. The Grant Recipient will work with the Planning Council to maintain an annual work plan to include priority setting, allocations, and reallocation activities. Planning Council training shall be included in work plan.
   b. The Grant Recipient will work with the Priority Setting, Allocations, and Planning (PSAP) Committee to develop a plan to conduct a resource analysis on all prioritized services prior to the next planning process.
   c. The Grant Recipient to provide quarterly utilization and expenditure reports to the Council for review.
   d. The Grant Recipient will conduct ongoing needs assessments focusing on unmet need estimates and service gap analysis.
   e. The Grant Recipient will promote efficiency on the service delivery system by minimizing paperwork and administrative requirements as appropriate.
   f. The Grant Recipient will reduce barriers to service access by utilizing centralized eligibility screening and the elimination of the requirement to be case managed to access services, unless case management is specifically indicated as a service qualifications (e.g., transitional housing, Housing Plus Project).
   g. The Grant Recipient will explore and implement appropriate changes in procuring services to ensure that services are provided in the most cost efficient and effective manner.
   h. The Grant Recipient will work with service providers to explore, assess, and apply prior resources to support the continuum of HIV care in Orange County.

2. Special Populations
   a. Assess findings and recommendations from needs assessments and incorporate them into service requirements as appropriate.
   b. Increase outreach efforts to bring HIV-positive people into care through enhanced specific outreach requirements in case management.
c. A list of special populations in Orange County includes: African Americans, Asians and Pacific Islanders, Hispanics/Latinos, homeless individuals, immigrants, incarcerated or recently released individuals, individuals with mental health issues, men of color who have sex with men, sex workers, substance users including injection drug users (IDU), transgender individuals, White/Anglo men who have sex with men, and women of child bearing age (13 years and older).

3. Clinical Quality Management (CQM)
   a. Integrate system-wide client satisfaction measurements and standards into CQM Plan.
   b. Review, and revise as needed, current CQM measurements.
   c. Develop, revise, and finalize Standards of Care for services.
   d. Develop training on program and resource fundamentals.
   e. Grant Recipient to provide, at minimum, quarterly forums or trainings open to all service providers.
   f. Grant Recipient will encourage providers to assure that all clients are educated about and referred to other available resources (e.g., Supplemental Nutrition Assistance Program also known as CalFresh formerly known as food stamps, food banks, medical services, mental health services) to ensure that Ryan White is used as payer of last resort.

4. Fiscal Management
   a. In the event of time constraints, the Grant Recipient may reallocate (decrease/increase) up to $20,000 per approved service categories (or subcategories) consistent with intent of the Planning Council without prior authorization of the Planning Council in order to appropriately expend all Part A funds. The Grant Recipient must report any and all adjustments to the Planning Council.
   b. If a service can be provided by a community provider, the community provider will be prioritized for funding over a county provider. All providers will be held to the same program and fiscal accountability.

5. Payer of Last Resort
   a. Planning should be coordinated with all other public funding for HIV to: 1) ensure that Ryan White Programs are the payer of last resort, 2) maximize the number and accessibility of services available, and 3) reduce any duplication [of services].
   b. With the implementation of the Affordable Care Act (ACA), efforts to screen individuals for eligibility into other payer sources must be standardized and in accordance with Health Resources Services Administration guidance and expectations.

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c. Individuals who are eligible for standard Medi-Cal or expanded Medi-Cal (Medi-Cal MAGI) must be enrolled in Medi-Cal. Individuals who qualify for Covered California (California’s Healthcare Exchange) shall be encouraged to enroll in health insurance under Covered California but may choose to utilize Ryan White instead of purchasing insurance. Individuals who are veterans may choose to use Ryan White instead of Veterans Administration coverage; however, active military personnel must utilize insurance coverage not Ryan White.

d. The Grant Recipient is responsible for ensuring proper documentation of efforts to ensure that Ryan White is the payer of last resort.

II. SERVICES INSTRUCTIONS

_Services listed below must be provided in accordance with the Common Standards of Care as well as service specific Standards of Care where indicated. Data used such as Area Median Income and Federal Poverty Level is updated as revised data is received._

1. HOUSING SERVICES
   
   1.1. Short-term or emergency financial assistance for housing

_**Definition:**_ Financial aid provided on behalf of clients who need assistance with rent, mortgage, and utilities. This assistance is subject to specific caps on amount of assistance available, and not to be used as an on-going payment to the client. There are three levels of assistance: (1) Emergency Financial Assistance (EFA) for Rent, Mortgage, or Utility Payment is to be up to 21 weeks in a 12-month period and available up to $100 per year for utilities and $1,000 per year for rent/mortgage; (2) Clients receiving STAR may receive assistance up to 21 weeks in a 52-week period and assistance is subject to a five year lifetime limit, with an exception for clients who have no other sources of assistance that without STAR would become homeless. Payment shall be up to three hundred dollars ($300) for up to two (2) individuals in a household and up to five hundred dollars ($500) for three (3) or more individuals in a household available every three (3) months; and (3) Housing Plus Project is limited to a 24-month period and is available for rent payments up to 50% of individual’s rent or limits set by State Office of AIDS Guidance.

_**Allocation:**_ TBD

_**Special Instructions:**_

- **Population:** General.
- **Service Qualification:**
  - For EFA and STAR, persons with incomes at or below 80% (see below)\(^2\) of area median income.
  - Recipients of Tenant-Based Rental Assistance Programs (RAP, Housing Choice Vouchers/Section 8, Shelter Plus Care Services, Permanent Supportive Housing, etc.) who otherwise meet the criteria as described above are not eligible to receive rent and/or utility assistance.
- **Geographic Area:** Entire County.

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\(^2\) Area Median Income is determined by the U.S. Department of Housing and Urban Development; these guidelines are available at [http://www.huduser.org](http://www.huduser.org). Based on 2017 guidelines, 80% of area median income based on the low income limit for a single person in Orange County is $58,450.
• **Service Procurement**: Competitive.

• **Other**: Payments cannot be made directly to clients. Payments for mortgage cannot be charged to Ryan White but are allowable under HOPWA. If a client is case managed, a referral from the case manager is required.

**Other Instructions**: Instructions are subject to change, for Housing Plus Project, without notice based on Ryan White Part B restrictions. Income services qualification may be decreased, with Executive Committee approval, to ensure those at most need receive the service.

### 1.1a Emergency financial assistance for rent and utility deposits

**Definition**: Financial aid provided on behalf of clients who need assistance with deposits for rent and/or utilities. Deposit assistance for rent and utilities are limited to $1,500 in a five year time period.

**Allocation**: TBD

**Special Instructions**:

- **Population**: General.
- **Service Qualification**:
  - Persons with incomes at or below 80% (see below) of area median income.
  - Recipients of Tenant-Based Rental Assistance Programs (RAP, Housing Choice Vouchers/Section 8, Shelter Plus Care Services, Permanent Supportive Housing, etc.) who otherwise meet the criteria as described above may receive deposit assistance with rent and/or utilities.
- **Geographic Area**: Entire County.
- **Service Procurement**: Competitive.
- **Other**: Payments cannot be made directly to clients. If a client is case managed, a referral from the case manager is required.

**Other Instructions**: None.

### 1.2. Housing Coordination

**Definition**: Coordination of the Tenant-Based Rental Assistance Program (RAP) waitlist and the provision of referrals for short-term housing assistance. This program also fosters the development and maintenance of linkages to housing authorities and social service agencies. Coordination services also include serving as a point of contact for Shelter Plus Care services. Housing Coordination also includes housing advocacy services, such as identifying housing resources, including maintaining and updating a Housing Resource Guide; facilitation of Housing Committee; developing positive relationships with landlords; and providing direct, one-on-one assistance to clients seeking housing.

**Allocation**: TBD

**Special Instructions**:

- **Population**: General.
- **Service Qualification**: None.

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3 Area Median Income is determined by the U.S. Department of Housing and Urban Development; these guidelines are available at [http://www.huduser.org](http://www.huduser.org). Based on 2017 guidelines, 80% of area median income based on the low income limit for a single person in Orange County is $58,450.
1.3. Short-Term Supportive Housing

Definition: Based on client’s assessed need for supportive housing, the provision of interim housing in a hotel or motel, sober collaborative setting for up to 180 days in a 24 month period for persons who (1) are homeless or at risk of becoming homeless; (2) are coming from emergency housing, mental health and/or drug treatment programs; or (3) were recently released from incarceration. As part of the supportive housing, clients will be assisted in developing a plan to facilitate their successful transition to an independent permanent housing situation. Short-term supportive housing is intended to provide temporary shelter to eligible individuals to prevent homelessness and allow an opportunity to develop an individualized housing and service plan to guide the client’s linkage to permanent housing.

Allocation: TBD

Special Instructions:
- Population: General.
- Service Qualification: An individual’s income cannot exceed 50% (see below) of area median income. Persons are not required to pay towards rent.
- Geographic Area: Entire County.
- Service Procurement: Competitive.
- Other: The first 60 days of housing services will be covered under HOPWA-funding. The remaining length of stay, up to 180 days, will be covered under Ryan White-funding. Individuals are limited to a total of 180 days within a 24 month period regardless of agency providing the housing service. Participants receiving this service must be case managed by a Ryan White or HOPWA-funded provider.

Other Instructions: None.

2. SUBSTANCE ABUSE SERVICES

2.1. Narcotic Replacement Program

Definition: The provision of opiate replacement treatment. Services may include recovery readiness programs, opiate assisted therapy, relapse prevention, and harm reduction strategies. Services to be provided by or under the supervision of a physician or other qualified personnel with appropriate and valid licensure and certified by the California Department of Health Care Services.

Allocation: Service category funding eliminated in FY 2014

Special Instructions:
- Population: Co-occurring Diagnosis (HIV and Opiate Dependence).
- Service Qualification: None.
- Geographic Area: Entire County.
- Service Procurement: County-retained funding up to full allocation.
- Other: None.

Other Instructions: None.
2.2. **Substance Abuse Services: Outpatient Counseling**

*Definition*: The provision of treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting by qualified personnel. Services are intended to provide ongoing support to maintain sobriety.

*Allocation*: TBD

*Special Instructions*:
- **Population**: Co-occurring Diagnosis (HIV and Substance Use).
- **Service Qualification**: None.
- **Geographic Area**: Entire County.
- **Service Procurement**: Competitive.
- **Other**: None.

*Other Instructions*: None.

2.3 **Residential Services**

*Definition*: Provision of up to ninety (90) days of residential drug treatment. Extension to the 90-day limit may be provided with prior written approval by County Program Administrator. Includes 24-hour supervision, intensive one-on-one educational and psychosocial support and group counseling by trained professionals and/or certified drug counselors. All clients will receive referrals to aftercare services and programs as requested. Services must meet the minimum requirement as outlined by the California Department of Health Care Services (DHCS) for residential treatment. Residential treatment programs must be licensed and certified by the DHCS.

*Allocation*: TBD

*Special Instructions*:
- **Population**: Co-occurring Diagnosis (HIV and Substance Use).
- **Service Qualification**: An individual’s income cannot exceed 50% (see below)\(^4\) of area median income. Persons with incomes below 20% of area median income (see below)\(^5\) will receive full benefit. Persons between 20-50% of area median income will pay 30% of their adjusted gross income toward rent.
- **Geographic Area**: Entire County.
- **Service Procurement**: Competitive.
- **Other**: None.

*Other Instructions*: The total income paid toward rent must be adjusted to Ryan White fee schedule limitations when this service category is funded by Ryan White.

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\(^4\) Area Median Income is determined by the U.S. Department of Housing and Urban Development; these guidelines are available at [http://www.huduser.org](http://www.huduser.org). Based on 2017 guidelines, 50% of area median income based on the low income limit for a single person in Orange County is $36,550.

\(^5\) Area Median Income is determined by the U.S. Department of Housing and Urban Development; these guidelines are available at [http://www.huduser.org](http://www.huduser.org). Based on 2017 guidelines, 20% of area median income based on the very low income limit for a single person in Orange County is $14,620.
2.4 Medical and Social Model Detoxification

**Definition:** The provision of detoxification from substances in a residential environment. These services can be provided in a medical (hospital) or social model (non-medical/no medication) facility. Residential detox programs must be licensed and certified by the California Department of Health Care Services.

**Allocation:** Service category funding eliminated in FY 2017

**Special Instructions:**
- **Population:** Co-occurring Diagnosis (HIV and Substance Use).
- **Service Qualification:** None.
- **Geographic Area:** Entire County.
- **Service Procurement:** County-retained funding up to full allocation.
- **Other:** None.

**Other Instructions:** None.

3. INDEPENDENT LIVING SKILLS

**Definition:** The coordination and/or provision of services that focus on the development of practical living skills, functional communication, and community integration. Services include, but are not limited to group education, treatment adherence, nutritional counseling and skill-building exercises that foster development of personal management skills that strengthen the ability of clients to be successful in an independent, permanent housing situation.

**Allocation:** TBD

**Special Instructions:**
- **Population:** General.
- **Service Qualification:** None.
- **Geographic Area:** Entire County.
- **Service Procurement:** Competitive.
- **Other:** None