

**TEXAS DEPARTMENT OF STATE HEALTH SERVICES (DSHS)**  
**GLOSSARY OF HIV SERVICES**  
**July 2008**

This taxonomy reflects service categories fundable through Ryan White Program Part B, DSHS State Services and HOPWA formula funds awarded to the State only. It may not reflect fully services fundable through other Ryan White Program Parts, direct HOPWA or other funding source. Certain services listed in Section 2 and all services listed in Section 3 are fundable only through DSHS State Service funds.

Shaded rows indicate the level of reporting required for the 2007 Ryan White HIV/AIDS Program Data Report. Each service at the subcategory level will allow entry of a total cost amount that is the result of the agency's unit cost calculation outside the AIDS Regional Information and Evaluation System (ARIES) data system.

This taxonomy is subject to revision as new information and guidance is received from the Health Resources and Services Administration (HRSA).

**Section 1. Core Medical Services**

<b>Service Category</b>	<b>SUBCATEGORIES</b>	<b>ARIES SERVICE UNIT</b>
<p><b>AIDS Pharmaceutical Assistance (local)</b>  AIDS pharmaceutical assistance includes local pharmacy assistance programs implemented by Part A or Part B grantees to provide HIV/AIDS medications to clients. This assistance can be funded with Part A grant funds and/or Part B base award funds. Local pharmacy assistance programs are NOT funded with ADAP earmark funding.</p>	Local Drug Reimbursement	Per prescription (not pill or dose)
<p><b>Early Intervention Services (Parts A and B)</b>  The provision of counseling to individuals with respect to HIV/AIDS; testing (including tests to confirm the presence of the disease, tests to diagnose the extent of immune deficiency, tests to provide information on appropriate therapeutic measures); referrals other clinical and diagnostic services regarding HIV/AIDS; periodic medical evaluations for individuals with HIV/AIDS; and providing therapeutic measures.</p> <p><b>EIS provided by Ryan White Part B or State Services funds may include counseling, testing and referral services only.</b></p> <p><b>EIS provided by Ryan White Part C and Part D Programs should NOT be reported here. Part C and Part D EIS should be included under <i>Outpatient/Ambulatory Medical Care</i>.</b></p>	Early Intervention Service	Per encounter with client previously unlinked to care
<p><b>Health Insurance Premium and Cost Sharing Assistance</b>  The provision of financial assistance for eligible individuals living with HIV to maintain a continuity of health insurance or to receive medical benefits under a health insurance program. This includes premium payments, co-payments and deductibles.</p>	All health insurance payments should be reported in ARIES under the CARE/HIPP or SS/HIPP Programs. See Section 3.	

Service Category	SUBCATEGORIES	ARIES SERVICE UNIT
<p><b>Home and Community Based Health Services (formerly Home Health – Professional and Para Professional)</b>            Provision of skilled health services furnished to the individual in the individual's home based on a written plan of care established by a case management team that includes appropriate health care professionals. Services include durable medical equipment; home health aide services and personal care services in the home; day treatment or other partial hospitalization services; home intravenous and aerosolized drug therapy (including prescription drugs administered as part of such therapy); routine diagnostics testing administered in the home; and appropriate mental health, developmental, and rehabilitation services. Inpatient hospitals services, nursing home and other long term care facilities are NOT included</p>	Professional	Per visit
	Para Professional	Per visit
	Durable Medical Equipment	Per unit
<p><b>Home Health Care (formerly Home Health – Specialized)</b>            Provision of services in the home by licensed health care workers such as nurses and the administration of intravenous and aerosolized treatment, parenteral feeding, diagnostic testing, and other medical therapies.</p>	Home Health Care	Per visit
<p><b>Hospice Services</b>            The provision of room, board, nursing care, counseling, physician services, and palliative therapeutics provided to clients in the terminal stages of illness in a residential setting, including a non-acute-care section of a hospital that has been designated and staffed to provide hospice services for terminal clients.</p>	Hospice Care – Facility-based	Per Day
	Hospice Care – Home-based	Per Day
<p><b>Medical Case Management (including treatment adherence)</b>            Provision of services focused on maintaining HIV-infected persons in systems of primary medical care to improve HIV-related health outcomes. Medical Case Managers act as part of a multidisciplinary medical team, with a specific role of assisting clients in following their medical treatment plan. Medical Case Managers should not serve as gatekeepers or access points into medical care as the goal of this service is the development of knowledge and skills that allow clients to adhere to the medical treatment plan without the support and assistance of the Medical Case Manager.            The Medical Case Manager should be a licensed professional (e.g., RN, LMSW). Programs providing MCM that meet the requirements of this definition with experienced unlicensed staff may apply for a limited waiver of this provision.            Medical Case Management must include a comprehensive assessment of need, the development of a service plan to address client needs, client referral to appropriate providers based on need and service plan, interventions to address client issues such as medication compliance, adherence and risk reduction as well as patient education.</p>	Medical Case Management	Per 15 minutes

Service Category	SUBCATEGORIES	ARIES SERVICE UNIT
<b>Medical Nutritional Therapy</b> Medical nutrition therapy is provided by a licensed registered dietitian outside of a primary care visit and includes the provision of nutritional supplements. Medical nutrition therapy provided by someone other than a licensed/registered dietitian should be recorded under psychosocial support services.	Medical Nutrition Therapy - Counseling	Per 15 minutes
	Medical Nutrition Therapy - Supplements <sup>1</sup>	Per transaction
<b>Mental Health Services</b> Psychological and psychiatric treatment and counseling services offered to individuals with a diagnosed mental illness, conducted in a group or individual setting, and provided by a mental health professional licensed or authorized within the State to render such services. This typically includes psychiatrists, psychologists, and licensed clinical social workers.	Mental Health Services – Individual	Per visit
	Mental Health Services - Group	Per visit
	Mental Health Services – Psychiatric Evaluation	Per visit
	Mental Health Services – Psychiatric Follow-up	Per visit
<b>Oral Health Care</b> Diagnostic, preventive, and therapeutic services provided by general dental practitioners, dental specialists, dental hygienists and auxiliaries, and other trained primary care providers.	Oral Health Care - Routine Treatment	Per visit
	Oral Health Care - Prophylaxis	Per visit
	Oral Health Care - Specialty	Per visit
<b>Outpatient / Ambulatory Medical Care</b> The provision of professional diagnostic and therapeutic services rendered by a physician, physician's assistant, clinical nurse specialist, or nurse practitioner in an outpatient setting. Settings include clinics, medical offices, and mobile vans where patients generally do not stay overnight. Emergency room services are not outpatient settings. Services include diagnostic testing, early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental conditions, prescribing and managing medication therapy, education and counseling on health issues, well-baby care, continuing care and management of chronic conditions, and referral to and provision of specialty care (includes all medical subspecialties). Primary medical care for the treatment of HIV infection includes the provision of care that is consistent with the Public Health Service's guidelines. Such care must include access to antiretroviral and other drug therapies, including prophylaxis and treatment of opportunistic infections and combination antiretroviral therapies.	Outpatient / Ambulatory Medical Care	Per Visit
	Dermatology	Per Visit
	Infectious Disease	Per Visit
	Neurology	Per Visit
	Ob/Gyn	Per Visit
	Oncology	Per Visit
	Ophthalmology	Per Visit
	Other Specialty	Per Visit
	Radiology	Per Visit
	Laboratory - Service (and test except CD4 and VRLD)	Per Test
<b>Early Intervention Services provided by Ryan White Part C and Part D programs should be included here under <i>Outpatient/Ambulatory Medical Care</i>.</b>	CD-4 T-Cell Count	Per Test
	Viral Load Test	Per Test

<sup>1</sup> Supplements recommended by someone other than a licensed dietitian should be funded and recorded under Food Pantry/Voucher with Nutritional Supplements.

<b>Service Category</b>	<b>SUBCATEGORIES</b>	<b>ARIES SERVICE UNIT</b>
<b>Substance Abuse Services – Outpatient</b> Provision of medical treatment or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting, rendered by a physician or under the supervision of a physician, or by other qualified personnel.	Substance Abuse Services –Outpatient-Individual Counseling	Per visit
	Substance Abuse Services-Outpatient-Group Counseling	Per visit
	Substance Abuse – Intake <i>Includes but not limited to intake into methadone or other medication-assisted treatment. May include substance abuse assessments (SASSI) by appropriately qualified personnel, although technically, a person is not in outpatient or any form of treatment at the time of the assessment.</i>	Per visit
	Medication-Assisted Detox <i>Includes medications such as Methadone, Subut (buprenorphine hydrochloride) and Suboxone (buprenorphine hydrochloride and naloxone hydrochloride), ORLAAM, etc.</i>	Per visit
	Substance Abuse Medication Maintenance	Per visit

## Section 2. Support Services

**Some services listed here may not be funded with Ryan White Part B funds.**

<b>Service Category</b>	<b>SUBCATEGORIES</b>	<b>ARIES SERVICE UNIT</b>
<b>Case Management (non-medical) (formerly Social Case Management)</b> Non Medical Case Management is a collaborative process that assesses, educates, plans, implements, coordinated, monitors and evaluates the options and services required to meet the client's health and human service needs. Case Management is seen as an encounter that involves assessment and care planning with the goal of independence for the client.	Case Management – Non Medical	Per 15 minutes
<b>Child Care Services</b> The provision of care for the children of clients who are HIV-positive while the clients attend medical or other appointments or Ryan White HIV/AIDS Program-related meetings, groups, or trainings. <sup>2</sup>	Child Care Services <sup>3</sup>	Per hour
<b>Emergency Financial Assistance</b> The provision of short-term payments to agencies or establishment of voucher programs to assist with emergency expenses related to essential utilities, food (including groceries, food vouchers, and food stamps), and medication when other resources are not available.	Emergency Assistance - Medication	Per prescription
	Emergency Assistance – Utilities	Per Transaction
	Emergency Assistance – Food	Per Visit

<sup>2</sup> This does not include child care while a client is at work.

<sup>3</sup> Ongoing daycare is provided and funded under Respite Care.

Service Category	SUBCATEGORIES	ARIES SERVICE UNIT
<b>Food Bank / Home-Delivered Meals</b> The provision of actual food or meals. It does not include finances to purchase food or meals. The provision of essential household supplies such as hygiene items and household cleaning supplies should be included in this item. Includes vouchers to purchase food.	Food Pantry/Voucher Visit Without Nutritional Supplements	Per visit
	Food Pantry/Voucher Visit with Nutritional Supplements <sup>4</sup>	Per visit
	Meals - Home-Delivered	Per person per meal
	Meals - Congregate	Per person per meal
<b>Health Education / Risk Reduction (HE/RR)</b> The provision of services that educate clients with HIV about HIV transmission and how to reduce the risk of HIV transmission. It includes the provision of information, including information dissemination about medical and psychosocial support services and counseling to help clients with HIV improve their health status.	HE/RR - Prevention Case Management for HIV positives – Individual Intervention	Per 15 minutes
	HE/RR – Group-level Intervention	Per 15 minutes
<b>Housing Services</b> The provision of short-term assistance to support emergency, temporary or transitional housing to enable an individual or family to gain or maintain medical care. Housing related referral services included assessment, search, placement, advocacy, and the fees associated with them. Eligible housing can include both housing that does not provide direct medical or supportive services and housing that provides some type of medical or supportive services such as residential mental health services, foster care, or assisted living residential services.  Effective March 27, 2008 there is a 24 month cumulative period of eligibility per household for housing services. HRSA HAB Policy 99-02	Housing Assistance– Short-Term <i>Housing assistance is limited to short-term assistance to support temporary and/or transitional housing to enable the individual or family to gain and/or maintain medical care. Use of Ryan White Program funds for short-term or emergency housing must be linked to medical and/or healthcare or be certified as essential to a client's ability to gain or maintain access to HIV-related medical care or treatment.</i>	Per day
	Housing Assistance – Emergency <i>Housing assistance is limited to emergency financial assistance to support temporary and/or transitional housing to enable the individual or family to gain and/or maintain medical care. Use of Ryan White Program funds for short-term or emergency housing must be linked to medical and/or healthcare or be certified as essential to a client's ability to gain or maintain access to HIV-related medical care or treatment.</i>	Per day
	Housing Referral/Housing Related Services – <i>Housing related services include assessment, search, placement, and advocacy services provided by professionals who possess an extensive knowledge of local, State and Federal housing programs and how they can be accessed.</i>	Per 15 minutes

<sup>4</sup> Supplements ordered by a licensed dietician should be funded and recorded under Medical Nutritional Therapy.

Service Category	SUBCATEGORIES	ARIES SERVICE UNIT
<p><b>Legal Services</b> The provision of services to individuals with respect to powers of attorney, do not resuscitate orders, and interventions necessary to ensure access to eligible benefits, including discrimination or breach of confidentiality litigation as it relates to services eligible for funding under the Ryan White HIV/AIDS Program. It does not include any legal services that arrange for guardianship or adoption of children after the death of their normal caregiver.</p>	Legal Services	Per hour
<p><b>Linguistics Services</b> The provision of interpretation and translation services</p>	Translation/Interpretation - Interpersonal	Per 15 minutes
	Translation/Interpretation - Document	Per transaction
<p><b>Medical Transportation Services</b> Medical transportation services include the conveyance services provided, directly or through voucher, to a client so that he or she may access health care services.</p>	Medical Transportation Services	Per one way trip
<p><b>Outreach Services</b> Programs that have as their principal purpose identification of people with unknown HIV disease or those who know their status (i.e., case finding) so that they may become aware of, and may be enrolled in, care and treatment services. Outreach services do not include HIV counseling and testing or HIV prevention education. These services may target high-risk communities or individuals. Outreach programs must be planned and delivered in coordination with local HIV prevention outreach programs to avoid duplication of effort; be targeted to populations known through local epidemiologic data to be at disproportionate risk for HIV infection; be conducted at times and in places where there is a high probability that individuals with HIV infection will be reached; and be designed with quantified program reporting that will accommodate local effectiveness evaluation.</p>	Outreach Services (Outreach for linkage to services)	Per encounter with client previously unlinked to care
<p><b>Pediatric Developmental Assessment and Early Intervention Services</b> <b>(This service may not be funded with Ryan White Part B funds)</b> The provision of professional early interventions by physicians, developmental psychologists, educators, and others in the psychosocial and intellectual development of infants and children. These services involve assessment of an infant's or child's developmental status and needs in relation to the involvement with the education system, including assessment of educational early intervention services. It includes comprehensive assessment of infants and children, taking into account the effects of chronic conditions associated with HIV, drug exposure, and other factors. Provision of information about access to Head Start services, appropriate educational settings for HIV affected clients, and education/assistance to schools should also be reported in this category.</p>	Developmental Assessment for Infants and Children	Per visit
	Developmental Intervention Services for Infants and Children	Per visit
<p><b>Permanency Planning</b> <b>(This service may not be funded with Ryan White Part B funds)</b> The provision of services to help clients or families make decisions about placement and care of minor children after the parents/caregivers are deceased or are no longer able to care for them.</p>	Permanency Planning	Per hour

Service Category	SUBCATEGORIES	ARIES SERVICE UNIT
<b>Psychosocial Support Services</b> The provision of support and counseling activities, child abuse and neglect counseling, HIV support groups, pastoral care, caregiver support, and bereavement counseling. Includes nutrition counseling provided by a non-registered dietitian but excludes the provision of nutritional supplements.	Other Counseling – Individual	Per 15 minutes
	Other Counseling - Support Group	Per 15 minutes
	Other Counseling - Nutritional <sup>5</sup>	Per 15 minutes
<b>Referral For Health Care / Support Services</b> Referral for health care/supportive services is the act of directing a client to a service in person or through telephone, written, or other type of communication. Referrals may be made within the non-medical case management system by professional case managers, informally through support staff, or as part of an outreach program.	Referral to health care/supportive services	Per referral
<b>Rehabilitation Services</b> Includes services provided by a licensed or authorized professional in accordance with an individualized plan of care intended to improve or maintain a client's quality of life and optimal capacity for self-care. Services include physical and occupational therapy, speech pathology, and low-vision training.	Rehabilitative Services – Physical Therapy	Per visit
	Rehabilitative Services – Occupational Therapy	Per visit
	Rehabilitative Services – Speech Therapy	Per visit
	Rehabilitative Services – Low vision training services	Per visit
<b>Respite Care</b> The provision of community or home-based, non-medical assistance designed to relieve the primary caregiver responsible for providing day-to-day care of a client with HIV/AIDS	Day Care – Infected Child (<13)	Per hour
	Day Care – Infected Adult	Per hour
	Respite Care <i>Sporadic relief of the caregiver of any aged, infected client.</i>	Per hour
<b>Substance Abuse Services – Residential</b> Provision of treatment to address substance abuse problems (including alcohol and/or legal and illegal drugs) in a residential health service setting (short-term).	Substance Abuse Services – Residential - Detox	Per day
	Substance Abuse Services – Residential - Treatment	Per day
<b>Treatment Adherence Counseling (Non Medical)</b> Treatment adherence counseling is the provision of counseling or special programs to ensure readiness for, and adherence to, complex HIV/AIDS treatments by non-medical personnel outside of the medical case management and clinical settings.	Treatment Adherence Counseling	Per 15 minutes

<sup>5</sup> Nutritional counseling done by a licensed dietician should be funded and recorded under Medical Nutritional Therapy. Supplements ordered from a nutritional counseling visit with someone other than a licensed dietician should be funded and recorded under Food Pantry/Voucher Visit with Nutritional Supplements

**Section 3. Support Services (State Services Funds Only)**

**These services may not be funded with Ryan White Part B funds.**

Service Category	SUBCATEGORIES	ARIES SERVICE UNIT
<p><b>Buddy / Companion Services</b> An activity provided by volunteers/peers to assist the client with performing household or personal tasks and providing mental and social support to combat the negative effects of loneliness and isolation.</p>	Buddy/Companion Services	Per hour
<p><b>Child Welfare Services</b> The provision of family preservation/unification, foster care, parenting education, and other child welfare services. Services may be designed to prevent break-up of a family and to reunite family members. Also includes foster care assistance to place children under the age of 21 years, whose parents are unable to care for them, in temporary or permanent homes and to sponsor programs for foster families. This category includes other services related to juvenile court proceedings, liaison to child protective services, involvement with child abuse and neglect investigations and proceedings, or actions to terminate parents' rights. Presentation or distribution of information to biological, foster, and adoptive parents, future parents and/or caretakers of children who are HIV positive about risks and complications, care giving needs, and developmental and emotional needs of children is also included.</p>	Child Welfare Services	Per hour
<p><b>Client Advocacy</b> The provision of advice &amp; assistance in obtaining medical, social, community, legal, financial &amp; other needed services. Advocacy does not involve coordination &amp; follow-up on medical treatments, as case management does.</p>	Client Advocacy	15 minutes
<p><b>Transportation Services</b> Transportation services include conveyance services provided, directly or through voucher, to a client so that he or she may access support services.</p>	Transportation Services - Medical	Per One Way Trip
	Transportation Services – Non Medical	Per One Way Trip
<p><b>Respite Care</b> The provision of community or home-based, non-medical assistance designed to relieve the primary caregiver responsible for providing day-to-day care of a client with HIV/AIDS</p>	Day Care – Affected Child (<13)	Per hour
<p><b>Referral to Clinical Research</b> Referral to clinical research is the provision of education about and linkages to clinical research services through academic research institutions or other research service providers. Clinical research are studies in which new treatments—drugs, diagnostics, procedures, vaccines, and other therapies—are tested in people to see if they are safe and effective. All institutions that conduct or support biomedical research involving people must, by Federal regulation, have an institutional review board that initially approves and periodically reviews the research.</p>	Referral to clinical research	Per referral
<p><b>Other Services</b> The provision of services not found in other service categories (e.g., Household Items, Eyewear, Employment Assistance) Services to be provided under this service category must be approved by DSHS.</p>	Must be established with DSHS	Must be established with DSHS

## Section 4. Health Insurance Programs (HIP)

Health insurance payments made with Ryan White CARE Act funds should be reported under the CARE/HIPP; health insurance payments made with State Services funds should be reported under the State Services - Insurance.

Service Category	CARE/HIPP & State Services - Insurance	ARIES SERVICE UNIT
<b>Outpatient / Ambulatory Medical Care</b> Co-payments for Outpatient / Ambulatory Medical Care Services when a client has private insurance.	Ambulatory/Outpatient Medical Care	Per Payment
	Dermatology	Per Payment
	Infectious Disease	Per Payment
	Neurology	Per Payment
	Ob/Gyn	Per Payment
	Oncology	Per Payment
	Ophthalmology	Per Payment
	Other Specialty	Per Payment
	Radiology	Per Payment
	Laboratory - Service	Per Payment
	CD-4 T-Cell Count	Per Payment
Viral Load Test	Per Payment	
<b>Insurance – Medical</b> Premium and deductible payments for a client’s medical insurance with a private insurance provider. Do not report payments to public payers (e.g. Medicare/Medicaid) here.	Deductible Payment	Per Payment
	Premium Payment	Per Month
<b>Oral Health Care</b> Co-payments for Oral Health Care when a client has private dental insurance.	Routine Treatment	Per Payment
	Prophylaxis	Per Payment
	Specialty	Per Payment
<b>Insurance – Oral Health Care</b> Premium and deductible payments to a private insurer for dental insurance.	Deductible Payment	Per Payment
	Premium Payment	Per Month
<b>AIDS Pharmaceutical Assistance (Local) (not Medicare, Medicaid or Part D)</b> Co-payments for a client’s medications when a client has drug coverage from a private insurer.	Co-Payment	Per Prescription
<b>Insurance - Prescription Drugs (not Medicare, Medicaid or Part D)</b> Premium and deductible payments for prescription drug benefits with a private insurer.	Deductible Payment	Per Payment
	Premium Payment	Per Month
<b>Medicare/Medicaid Supplement</b> Premium, deductible or co-payments to Medicare/Medicaid.	Deductible Payment	Per Payment
	Co-Payment	Per Payment
	Premium Payment	Per Month
	Deductible Payment – Part D	Per Payment
	Co-Payment – Part D	Per Payment
	Premium Payment – Part D	Per Month
<b>Other Health Insurance</b> Premium, deductible or co-payments to other health insurers.	Deductible Payment	Per Payment
	Co-Payment	Per Payment
	Premium Payment	Per Month

**Section 5. HOPWA**

<b>Service Category</b>	<b>SUBCATEGORIES</b>	<b>ARIES SERVICE UNIT</b>
<p><b>Permanent Housing Placement (PHP)</b>                      Assistance for reasonable security deposits, not to exceed the amount equal to 2 months of rent, and related application fees and credit checks.</p>	Permanent Housing Placement	Per Payment
<p><b>Short-Term Rent, Mortgage and Utility Assistance (STRMU)</b>                      Housing subsidy for short-term rent, mortgage and utility payments to prevent homelessness of the tenant or mortgagor of a dwelling. This program provides assistance for a period not to exceed 21 weeks (147days) worth of assistance in any 52 week period. These payments are for eligible individuals and their household beneficiaries who are already in housing and who are at risk of becoming homeless. STRUM was previously known as Emergency Assistance.</p>	Short Term Rental Assistance	Per Payment
	Mortgage Assistance	Per Payment
	Utility Assistance	Per Payment
<p><b>Supportive Services</b>                      Assistance for case management, basic telephone service and provision of smoke detectors. May be provided in conjunction with HOPWA housing assistance or as a stand alone service (Supportive Services Only).</p>	Case Management	Per 15 Minutes
	Smoke Detectors	Per Payment
	Telephone Service	Per Payment
<p><b>Tenant Based Rental Assistance (TBRA)</b>                      Housing subsidy for tenant based rental assistance, including assistance for shared housing arrangements. It assists income eligible clients and their beneficiaries with rent and utilities until they are able to secure affordable, stable housing. TBRA was previously known as Rental Assistance.</p>	Tenant Based Rental Assistance	Per Payment