



Office of Planning Council Support
 United Way of Greater Union County
 33 West Grand Street Elizabeth, NJ 07202
 Phone Number: 908-353-7171 Fax: 908-353-6310
www.nemaplanningcouncil.org



SERVICE STANDARDS FOR OUTPATIENT/ AMBULATORY HEALTH SERVICES

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Approved by the Planning Council	June 17, 2020	August 18, 2021	August 16, 2023	May 15, 2024	

In addition to the Universal Standards, you are also expected to follow the following guidelines.

I. GOAL

The goal of this service category is to provide or make available the full continuum of primary care as well as HIV care to people living with HIV/AIDS. This includes diagnostic and therapeutic services rendered by a licensed physician, physician assistant, nurse practitioner or clinical nurse specialist in an outpatient setting.

II. DESCRIPTION [HRSA PCN 16-02 Rev. 10/22/18]

Outpatient/Ambulatory Health Services provide diagnostic and therapeutic-related activities directly to a client by a licensed healthcare provider in an outpatient medical setting. Outpatient medical settings may include: clinics, medical offices, mobile vans, urgent care facilities, and/or telehealth for HIV-related visits.

Allowable activities include:

- Medical history taking
- Physical examination
- Diagnostic testing (including HIV confirmatory and viral load testing), as well as routine laboratory testing
- Treatment and management of physical and behavioral health conditions
- Behavioral risk assessment, subsequent counseling, and referral
- Preventive care and screening
- Pediatric developmental assessment
- Prescription and management of medication therapy
- Treatment adherence
- Education and counseling on health and prevention issues
- Referral to and provision of specialty care related to HIV diagnosis, including audiology and ophthalmology

Treatment adherence activities provided during an Outpatient/Ambulatory Health Service visit are considered Outpatient/Ambulatory Health Services, whereas treatment adherence activities provided during a Medical Case Management visit are considered Medical Case Management services.

III. KEY SERVICE COMPONENTS AND ACTIVITIES

“To plan for the development, implementation and continual improvement of the health care and treatment services for People Living With and Affected by HIV & AIDS who reside in the five New Jersey Counties of Essex, Morris, Sussex, Union and Warren.”

The Healthcare provider is ultimately responsible for ensuring that the client understands all information exchanged in the clinical setting, including their rights and responsibilities.

- Medical history taking
- Physical examination
- Diagnostic testing including laboratory testing
- Treatment and management of physical and behavioral health conditions
- Behavioral risk assessment, subsequent counseling, and referral
- Preventive care and screening
- Pediatric developmental assessment (Well-baby care)
- Prescription, and management of medication therapy
- Treatment Adherence
- Education and counseling on health and prevention methods including PrEP and PEP for partner counseling as appropriate
- Preconception counseling as indicated.
- Referral to and provision of specialty care related to HIV diagnosis
- Continuing care and management of chronic conditions
- Early Intervention and risk assessment
- Oral health screening

IV. SERVICE LIMITATIONS/REQUIREMENTS

Parameters for service category spending are determined by the recipient's office and communicated directly to funded organizations by the recipient.

V. ASSESSMENT AND SERVICE PLAN

A. Initial Evaluation– Collection of health history

a. Baseline medical examination (this may take multiple visits) which may include but not limited to the following:

- Initial Laboratory testing: IDSA Primary Care Guidelines for Persons with HIV, Nov. 6, 2020
 - CD4 T-Cell count & CBC blood count
 - HIV Viral Load (RNA PCR)
 - Comprehensive panel – (including liver function test)
 - Urinalysis
 - Serologies for Hepatitis A, B, & C
 - If previously HCV antibody positive, annual Hep C viral load (if Hep C viral load is detected, refer for treatment as appropriate); if positive for HBsAg or HBV Core antibody and HBV Surface antibody negative, test for Hep B DNA PCR
 - Fasting blood glucose and serum lipids
 - HIV Genotypic resistance testing
 - STI screening (Syphilis, Gonorrhea, and Chlamydia)—three site screening
 - TB test and/or history of TB treatment
 - MMR and Varicella titers as indicated.
 - HLAB5701, must be performed before the initiation of abacavir, otherwise not routine
 - Tropism testing (if considering (CCR5 antagonist)
 - G6PD (if indicated)
 - Toxoplasmosis
 - Cryptococcus Antigen
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- Medical/Surgical History, including chronic disease history
- Date of initial HIV Test & result and previous ART therapy and resistance history

- Mode of transmission
- Previous hospitalizations and surgeries
- Sexual history, including sexually transmitted infection history
- Immunization history
- Allergies and medication intolerance
- Family medical history
- Reconcile prescribed, OTC and alternative medications
- Mental Health status and/or previous psychiatric hospitalizations
- Substance Abuse (including alcohol, tobacco and detox history)
- Nutritional status
- Oral Health
- Health Education/Risk Reduction
- Age appropriate screenings as indicated
- Vaccinations:
 - Influenza
 - Pneumococcal (Follow clinical guidelines)
 - Hepatitis A & B
 - HPV, if applicable
 - Tdap
 - Meningococcal
 - Herpes Zoster
 - MMR provided CD4 >200
 - COVID-19 vaccine recommended
 - Modified Vaccinia Ankara (MVA) / Orthopox Vaccine
- Female clients (In addition to the above) Pregnancy or pregnancy potential.
- Clinicians should refer to the latest Perinatal Guidelines for more detailed recommendations on the safety and effectiveness of ARV meds during pregnancy.

Detailed reproductive history

- Pregnancy test as indicated
- Pregnancy history
- Receipt of antiretroviral therapy during pregnancies
- Pap smear
- Pelvic exam, if indicated
- Preconception counseling
- Mammography
- Contraceptive history

B. Develop and Implement Individualized Plan of Service

- Develop a plan that is agreed upon by client and agency, which outlines service goals and the services provided to meet these objectives
 - Complete laboratory tests
 - Prescribe necessary vaccinations
 - Refer for needed social services
 - Refer for Specialty Care if needed
 - Prescribe ART
 - Education (Adherence, risk reduction, PrEP, PEP, safe sex practices and family planning)

C. Follow Up Visits for Re-evaluation

- In compliance with HRSA requirements and best practices, additional laboratory testing as recommended by the provider.

VI. ENGAGEMENT AND RETENTION OF CLIENTS

Refer to Universal Service Standards.

VII. PERSONNEL QUALIFICATIONS AND TRAINING

Qualifications/Training

- HIV experience preferred
- Obtain and maintain appropriate licenses and/or certifications for all providers of Healthcare Services and as appropriate, must be licensed to practice in the State of New Jersey
- All personnel should participate in continuing education to stay abreast with current developments.
- The Agency will provide new hires with training: HIPAA privacy and confidentiality, client rights and the agency's grievance procedure.
- Annual staff evaluation/review