

Subservice Definitions

July 2019

Use this document to look up the definitions for the subservices your agency is funded for.

 indicate changes since the last version.



| OHA Subservice | Unit (if applicable) | Subservice Definition |
|---|----------------------|--|
| MEDICAL CASE MANAGEMENT | | |
| Intake/initial assessment | 1 unit = Completed | Enter "1" unit when the intake or initial assessment has been completed. The intake/initial assessment is a program specific document to be completed when a client first enrolls or re-enrolls (after a period of inactivity) into medical case management. |
| Initial acuity assessment | 1 unit = Completed | Enter "1" unit when an acuity assessment has been completed for the first time. The Acuity Assessment Tool will be completed in conjunction with the intake/initial assessment and helps to establish a baseline acuity score. |
| MCM acuity reassessment | 1 unit = Completed | Enter "1" unit when the acuity reassessment tool has been completed for Medical Case Management clients. Active clients must be reassessed every six months at a minimum and the Acuity Assessment Tool must be used. Client acuity scores must be recorded in CAREWare. |
| Care Access acuity reassessment | 1 unit = Completed | Enter "1" unit when the acuity reassessment tool has been completed for Care Access clients. Active Care Access clients must be reassessed using the Acuity Assessment tool every six months at a minimum. For more information about Care Access eligibility, please see the "MDPH OHA Acuity Assessment Guidance" document. Note: complete the "Care Access" check box on the custom fields tab to identify the client as Care Access. |
| ISP/Care Plan | 1 unit = Completed | Enter "1" unit when individual service plan/care plan is completed. Active clients must have an updated ISP/care plan every six months at a minimum. This is done in conjunction with the initial acuity assessment and every time an acuity reassessment is completed. |
| Communication with medical provider | 1 unit = 15 minutes | Document time spent communicating (face to face, phone, email, etc.) with client's medical provider (e.g., 45 minutes = 3 units). |
| Communication with non-medical provider | 1 unit = 15 minutes | Document time spent communicating (face to face, phone, email, etc.) with a non-medical provider on behalf of a client (e.g., 45 minutes = 3 |

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| | | units). |
| Face-to-face session | 1 unit = 15 minutes | Document time spent in a face-to-face encounter between a medical case manager and client (e.g., 45 minutes = 3 units). |
| Client communication (not face-to-face) | 1 unit = 15 minutes | Any other communication with client (phone, email, text, etc.) that is not in-person. |
| Referrals (non-medical) | 1 unit = Completed | Enter "1" unit" when any referral is made for the client that is not related to the client's medical care. To confirm the linkage was made, indicate the date the client attended the appointment. Note: choose from the drop-down menu to specify "referral type". |
| Linkage to medical care | 1 unit = Completed | Enter "1" unit only when a client has been connected to a medical provider for care (activities relating to this linkage, such as communication with medical provider or client communication should be captured under those corresponding subservices). To confirm the linkage was made, indicate the date the client attended the appointment. Note: choose from the drop down menu to specify "linkage type". Document referral to a dental provider through the Ryan White Dental Program here. |
| Linkage to health insurance | 1 unit = Completed | Enter "1" unit when a client has been connected to health insurance (activities relating to this linkage such as communication with the client should be captured under other those corresponding subservices). |
| HDAP linkage and recertification | 1 unit = Completed | Enter "1" unit when a client has been connected to HDAP or when the HDAP recertification has been completed (activities relating to this linkage such as communication with medical provider or client should be captured under those corresponding subservices). |
| Referrals to Partner Services | 1 unit = Completed | Enter "1" unit when a referral to Partner Services has been made (activities relating to this referral such as communication with a non-medical provider or client communication should be captured with those corresponding subservice categories). To confirm the linkage was |

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| | | made, indicate the date the client attended the appointment. |
| ARCH | | |
| Intake/Initial ARCH Assessment | 1 unit = Completed | Enter "1" unit when an intake or initial assessment has been completed. The intake/initial assessment is a program specific document to be completed when a client first enrolls or re-enrolls (after a period of inactivity) into ARCH services. |
| Initial ARCH acuity assessment | 1 unit = Completed | Enter "1" unit when an initial acuity assessment has been completed for the first time. The Acuity Assessment Tool will be completed in conjunction with the intake/initial assessment. This will establish a baseline acuity score for the client. |
| ARCH acuity reassessment | 1 unit = Completed | Enter "1" unit when the acuity reassessment has been completed for ARCH clients. Active clients must be reassessed every three months at a minimum and the Acuity Assessment Tool must be used. Client acuity scores must be recorded in CAREWare. |
| ARCH ISP/Care Plan | 1 unit = Completed | Enter "1" unit when an individual service plan/care plan is completed for ARCH clients. Active clients must have an updated ISP/care plan every six months at a minimum. This is done in conjunction with the initial acuity assessment and every time an acuity reassessment is completed. |
| ARCH adherence support (face to face) | 1 unit = 15 minutes | Document time spent on any face-to-face adherence support (medical appointments or medication) encounter between ARCH provider and client (e.g., 45 minutes = 3 units). |
| ARCH adherence support (not face to face) | 1 unit = 15 minutes | Document any time spent on adherence support provided to the client (phone, email, text, etc.) that is not in-person (e.g., 45 minutes = 3 units). |
| ARCH Communication with medical provider | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with client's medical provider (e.g., 45 minutes = 3 units). |

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| ARCH Communication with non-medical provider | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with a non-medical provider on behalf of a client (e.g., 45 minutes = 3 units). |
| ARCH client communication (face to face) | 1 unit = 15 minutes | Document any time spent in a face-to-face encounter between ARCH provider and client that is not related to adherence to medication or medical appointment (e.g., 45 minutes = 3 units). |
| ARCH client communication (not face-to-face) | 1 unit = 15 minutes | Document any time spent in communication with client (phone, email, text, etc.) that is not in person (e.g., 45 minutes = 3 units). |
| Referrals (non-medical) | 1 unit = Completed | Enter "1" unit" when any referral is made for the client that is not related to the client's medical care. To confirm the linkage was made, indicate the date the client attended the appointment. Note: choose from the drop-down menu to specify "referral type." |
| Linkage to medical care | 1 unit = Completed | Enter "1" unit only when a client has been connected to a medical provider for care (activities relating to this linkage, such as communication with medical provider or client communication should be captured under those corresponding subservices.) Note: choose from the drop-down menu to specify "linkage type." |
| Linkage to health insurance | 1 unit = Completed | Enter "1" unit when a client has been connected to health insurance (activities relating to this linkage such as communication with the client should be captured under those corresponding subservices). |
| HDAP linkage and recertification | 1 unit = Completed | Enter "1" unit when a client has been connected to HDAP or when the HDAP recertification has been completed (activities relating to this linkage such as communication with medical provider or client should be captured under those corresponding subservices). |
| Referrals to Partner Services | 1 unit = Completed | Enter "1" unit when a referral to Partner Services has been made (activities relating to this referral such as communication with a non-medical provider or client communication should be captured with those corresponding communication subservice categories). |

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| Transition out of ARCH services | 1 unit = Completed | Enter "1" when the client has transitioned out of ARCH services. Note: Once a client has been transitioned out of ARCH services no other services should be reported under the ARCH service category. |
| MEDICAL TRANSPORTATION SERVICES | | |
| Taxi/Transportation | 1 unit = 1 way ride 2 units = Round trip | One-way ride by taxi, commercial transportation, or ride-share company (lyft, uber, etc.) for the purposes of accessing care services. |
| Mileage reimbursement | 1 unit = Completed | One-way ride for which a client is directly reimbursed for mileage traveled in client's own vehicle. To be used only when all other transportation options have been exhausted. |
| Public transportation ride | 1 unit = 1 way ride | One way transportation by public transport system (tokens or bus/train ticket) for client for the purposes of accessing care services. |
| Public transportation pass | 1 unit = Pass given | Pass given for transportation by public transport system for client for the purposes of accessing care services. |
| PSYCHOSOCIAL SUPPORT | | |
| Individual-Level peer support session | 1 unit = 15 minutes | Document any time spent in an encounter (face-to-face, phone, email, or text) between a peer who is living with HIV and an individual client (e.g., 45 minutes = 3 units). |
| Group-Level peer support session | 1 unit = Completed | Enter "1" when the client has attended 1 group facilitated by a peer who is living with HIV. |
| FOOD BANK/HOME-DELIVERED MEALS | | |
| Home-delivered meals | 1 unit = Meal given | Number of meals delivered by a professional to the home for clients. |
| Congregate meals | 1 unit = Attended meal | Number of meals client received in a group setting that is not the client's home. |
| HOUSING SERVICES | | |

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| HS&A assessment | 1 unit = Completed | Enter "1" when the assessment is completed. |
| HS&A face-to-face session | 1 unit = 15 minutes | Document any time spent on a face-to-face encounter between HS&A provider and client (e.g., 45 minutes = 3 units). |
| HS&A phone session | 1 unit = 15 minutes | Document any time spent on a phone encounter between HS&A provider and client (e.g., 45 minutes = 3 units). |
| Temporary placement secured | 1 unit = Completed | Enter "1" when the temporary placement is secured. |
| Permanent placement secured | 1 unit = Completed | Enter "1" when the permanent placement is secured. |
| Communication on behalf of client | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with another service provider on behalf of a client (e.g., 45 minutes = 3 units). |
| EMERGENCY FINANCIAL ASSISTANCE | | |
| Rental start-up | 1 unit = Completed | Enter "1" when the claim is completed. |
| Homelessness prevention | 1 unit = Completed | Enter "1" when the claim is completed. |
| Utilities assistance | 1 unit = Completed | Enter "1" when the claim is completed. |
| LEGAL SERVICES | | |
| Legal services assessment | Activity completed | Enter "1" when the legal services assessment is completed. |
| Individual-level legal services | 1 unit = 15 minutes | Document any time spent on a face-to-face or telephone encounter between provider and client during which legal services are provided (e.g., 45 minutes = 3 units). |
| Group-level legal services | 1 unit = Completed | Enter "1" when the client has attended 1 group. |
| Legal case work | 1 unit = 15 minutes | Document any time spent on an activity related to client's case, including research and document preparation (e.g., 45 minutes = 3 units). |

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| Legal representation | 1 unit = 15 minutes | Document any time spent by provider representing client in court or at hearings (e.g., 45 minutes = 3 units). |
| Communication on behalf of client | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with another service provider on behalf of a client (e.g., 45 minutes = 3 units). |
| ORAL HEALTH CARE | | |
| Initial intake | 1 unit = Completed | Enter "1" when the initial intake is completed. |
| Treatment committed | 1 unit = Completed | Enter "1" when the treatment is completed. |
| Treatment claim | 1 unit = Completed | Enter "1" when the claim is completed. |
| Communication with client | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with a client (e.g., 45 minutes = 3 units). |
| Communication on behalf of client | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with another service provider on behalf of a client (e.g., 45 minutes = 3 units). |
| NON CARE ACT SERVICE (STATE FUNDED) - CORRECTIONAL LINKAGE-TO-CARE | | |
| CLTC Intake/initial assessment | 1 unit = Completed | Enter "1" unit when the intake or initial assessment has been completed. |
| Pre-release visits | 1 unit = 15 minutes | Document any time spent in face-to-face visits with client in a correctional setting (pre-release) (e.g., 45 minutes = 3 units). |
| Communication with medical provider | 1 unit = 15 minutes | Document any time spent in communication (face-to-face, phone, email, etc.) with client's medical provider (e.g., 45 minutes = 3 units). |
| Communication with non-medical provider | 1 unit = 15 minutes | Document any time spent in communication (face-to-face, phone, email, etc.) with a non-medical provider on behalf of client (e.g., 45 minutes = 3 units). |

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| Client communication (not face-to-face) | 1 unit = 15 minutes | Document any time spent in communication with client (phone, email, text, etc.) that is not in-person (pre or post-release) (e.g., 45 minutes = 3 units). |
| Client communication (face-to-face) | 1 unit = 15 minutes | Document any time spent in communication with client (phone, email, text, etc.) that is in-person (post-release) (e.g., 45 minutes = 3 units). |
| Referrals (non-medical) | 1 unit = Completed | Enter "1" unit" when any referral made for the client is not related to the client's medical care. Note: Transportation services provided as part of the correctional linkage-to-care program should be reported under this subservice. Select "Transportation" under the "Referral Type" drop down. |
| Linkage to MCM (HIV+ only) | 1 unit = Completed | Enter "1" unit" when a referral is made for an HIV+ client to medical case management. |
| Linkage to medical care | 1 unit = Completed | Enter "1" unit when a client has been connected to a medical provider for care (activities relating to this linkage should be captured under other subservices like communication with medical provider or client). Note: choose from the drop-down menu to specify "linkage type." |
| Linkage to MAT | 1 unit = Completed | Enter "1" unit when a client has been connected to a provider who prescribes medication-assisted treatment for substance use disorders (activities relating to this linkage should be captured under other subservices like communication with medical provider or client). |
| Linkage to HCV Short-Term Health Navigation | 1 unit = Completed | Enter "1" unit when a client has been connected to HCV short-term health navigation (activities relating to this linkage should be captured under other subservices like communication with medical provider or client). |
| Released from incarceration | 1 unit = Completed | Enter "1" unit for the day a client is released from incarceration. Record the date of release as the service date. |
| Linkage to health insurance | 1 unit = Completed | Enter "1" unit when a client has been connected to health insurance (activities relating to this linkage should be captured under other |

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| | | subservices like communication with medical provider or client). |
| Linkage to drug assistance | 1 unit = Completed | Enter "1" unit when a client has been connected to HDAP or another drug assistance program has been completed (activities relating to this linkage should be captured under other subservices like communication with medical provider or client). |
| Referrals to Partner Services | 1 unit = Completed | Enter "1" unit when a referral to Partner Services has been made (activities relating to this referral should be captured with other communication subservice categories). |
| NON CARE ACT SERVICE (STATE FUNDED) – PACT (JRI only) | | |
| Intake/Initial PACT assessment | 1 unit = Completed | Enter "1" unit when an initial intake and/or assessment is completed for a new PACT client. The intake/initial assessment is a program specific document to be completed when a client first enrolls or re-enrolls (after a period of inactivity) into medical case management. |
| PACT initial acuity assessment | 1 unit = Completed | Enter "1" unit when an acuity assessment is completed for a new PACT clients (not receiving MCM at other agencies). The Acuity Assessment Tool will be completed in conjunction with the intake/initial assessment and helps to establish a baseline acuity score.. |
| PACT acuity reassessment | 1 unit = Completed | Enter "1" unit when an acuity reassessment is completed for PACT clients (not receiving MCM at other agencies). Active clients must be reassessed every six months at a minimum and the Acuity Assessment Tool must be used. Client acuity scores must be recorded in CAREWare. |
| PACT ISP/Care Plan | 1 unit = Completed | Enter "1" unit when an individual service plan/care plan is completed for PACT clients. Active clients must have an updated ISP/care plan every six months at a minimum. This is done in conjunction with the initial acuity assessment and every time an acuity reassessment is completed. |
| PACT adherence support | 1 unit = Completed | Enter "1" unit when client is provided with adherence support choose from dropdown options: DOT, pill box, or pharmacy. |

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| PACT communication with medical provider | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with client's medical provider (e.g., 45 minutes = 3 units). |
| PACT medical accompaniment | 1 unit = Completed | Enter "1" when a client has been accompanied to a medical appointment by a PACT staff member. |
| PACT communication with non-medical provider | 1 unit = 15 minutes | Document any time spent in communication (face to face, phone, email, etc.) with a non-medical provider on behalf of a client (e.g., 45 minutes = 3 units). |
| PACT face to face session | 1 unit = 15 minutes | Document any time spent in face-to-face communication with client (e.g., 45 minutes = 3 units). |
| PACT client communication (not face-to-face) | 1 unit = 15 minutes | Document any time spent in communication with client not face to face: phone calls, texts, emails (e.g., 45 minutes = 3 units). |
| Referrals (non-medical) | 1 unit = Completed | Enter "1" unit" when any referral is made for the client that is not related to the client's medical care. To confirm the linkage was made, indicate the date the client attended the appointment. Note: choose from the drop-down menu to specify "referral type." |
| Linkage to medical care | 1 unit = Completed | Enter "1" unit only when a client has been connected to a medical provider for care (activities relating to this linkage, such as communication with medical provider or client communication should be captured under those corresponding subservices). Note: choose from the drop-down menu to specify "linkage type." |
| HDAP linkage and recertification | 1 unit = Completed | Enter "1" unit when a client has been connected to health insurance (activities relating to this linkage such as communication with the client should be captured under those corresponding subservices). |