

## Subservice Definitions

March 2022

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**Yellow highlights** indicate changes since the last version.



OHA Subservice	Unit (if applicable)	Subservice Definition
<b>MEDICAL CASE MANAGEMENT</b>		
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 <b>every six months</b> 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 <b>every six months</b> at a minimum. For more information about Care Access eligibility, please see the "MDPH OHA Acuity Assessment Guidance" document. <b>Note:</b> 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 units).

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In-person session	1 unit = 15 minutes	Document time spent in an in-person encounter between a medical case manager and client (e.g., 45 minutes = 3 units).
Telehealth session	1 unit = 15 minutes	Document time spent in a telehealth session in place of what would ordinarily be conducted as an in-person, face-to-face session but due to COVID-19 is being conducted remotely (e.g., by telephone, Zoom, FaceTime, Doxy.me) between a medical case manager and client (e.g., 1 unit = 15 minutes, 3 units = 45 minutes).
Client communication (not in-person)	1 unit = 15 minutes	Any other communication with client (phone, email, text, etc.) that is not in-person or telehealth.
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. <b>Note:</b> 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. <b>Note:</b> 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).

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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 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 <b>every three months</b> 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 <b>every six months</b> at a minimum. This is done in conjunction with the initial acuity assessment and every time an acuity reassessment is completed.
ARCH adherence support (in-person)	1 unit = 15 minutes	Document time spent on any in-person adherence support (medical appointments or medication) encounter between ARCH provider and client (e.g., 45 minutes = 3 units).

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ARCH adherence support (telehealth)	1 unit = 15 minutes	Document time spent in an adherence support telehealth session in place of what would ordinarily be conducted as an in-person, face-to-face session but due to COVID-19 is being conducted remotely (e.g., by telephone, Zoom, FaceTime, Doxy.me) between an ARCH provider and client (e.g., 1 unit = 15 minutes, 3 units = 45 minutes).
ARCH adherence support (not in-person)	1 unit = 15 minutes	Document any time spent on adherence support provided to the client (phone, email, text, etc.) that is not in-person or telehealth (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).
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 (in-person)	1 unit = 15 minutes	Document any time spent in an in-person 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 (telehealth)	1 unit = 15 minutes	Document time spent in a telehealth session in place of what would ordinarily be conducted as an in-person, face-to-face session but due to COVID-19 is being conducted remotely (e.g., by telephone, Zoom, FaceTime, Doxy.me) between an ARCH provider and client (e.g., 1 unit = 15 minutes, 3 units = 45 minutes).
ARCH client communication (not in-person)	1 unit = 15 minutes	Document any time spent in communication with client (phone, email, text, etc.) that is not in person or telehealth (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. <b>Note:</b> choose from the drop-down menu to specify "referral type."

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OHA Subservice	Unit (if applicable)	Subservice Definition
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.) <b>Note:</b> 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).
Transition out of ARCH services	1 unit = Completed	Enter "1" when the client has transitioned out of ARCH services. <b>Note:</b> Once a client has been transitioned out of ARCH services no other services should be reported under the ARCH service category.
<b>MEDICAL TRANSPORTATION SERVICES</b>		
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.

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OHA Subservice	Unit (if applicable)	Subservice Definition
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.
<b>PSYCHOSOCIAL SUPPORT</b>		
Individual-Level peer support session (in-person)	1 unit = 15 minutes	Document any time spent in an in-person encounter between a peer who is living with HIV or peer at-risk for HIV and an individual client (e.g., 45 minutes = 3 units).
Individual-Level peer support session (not in-person)	1 unit = 15 minutes	Document any time spent in an encounter that is not in-person (video, phone, email, or text) between a peer who is living with HIV or a peer at-risk for 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 and/or a peer at-risk for HIV.
Initial peer wellness/risk assessment	1 unit = Completed	Enter "1" when the peer has completed the initial peer wellness/risk assessment
Follow up peer wellness/risk assessment	1 unit = Completed	Enter "1" when the peer has completed the follow up peer wellness/risk assessment
Linkage to medical care	1 unit = Completed	Enter "1" unit only when a client has been connected to a medical provider for care. To confirm the linkage was made, indicate the date the client attended the appointment. <b>Note:</b> choose from the drop down menu to specify "linkage type".
Referral (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. <b>Note:</b> choose from the drop-down menu to specify "referral type".

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OHA Subservice	Unit (if applicable)	Subservice Definition
Medical accompaniments	1 unit = Completed	Enter "1" when a client has been accompanied to a medical appointment.
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		
HS&A assessment	1 unit = Completed	Enter "1" when the assessment is completed.
HS&A in-person session	1 unit = 15 minutes	Document any time spent on an in-person encounter between HS&A provider and client (e.g., 45 minutes = 3 units).
HS&A phone or video session	1 unit = 15 minutes	Document any time spent on a phone or video 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.
Food assistance	1 unit = Completed	Enter "1" when the claim is completed.

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<b>LEGAL SERVICES</b>		
Legal services assessment	Activity completed	Enter "1" when the legal services assessment is completed.
Individual-level legal services (in-person)	1 unit = 15 minutes	Document any time spent on an in-person encounter between provider and client during which legal services are provided (e.g., 45 minutes = 3 units).
Individual-level legal services (not in-person)	1 unit = 15 minutes	Document any time spent on a video/phone/text/email 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).
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).
<b>ORAL HEALTH CARE</b>		
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 (in-person)	1 unit = 15 minutes	Document any time spent in in-person communication with a client (e.g., 45 minutes = 3 units).



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Communication with client (telehealth)	1 unit = 15 minutes	Document time spent in a telehealth session in place of what would ordinarily be conducted as an in-person, face-to-face session but due to COVID-19 is being conducted remotely (e.g., by telephone, Zoom, FaceTime, Doxy.me) between a medical case manager and client (e.g., 1 unit = 15 minutes, 3 units = 45 minutes).
Communication with client (not in-person)	1 unit = 15 minutes	Any other communication with client (phone, email, text, etc.) that is not in-person or telehealth.
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).
<b>NON CARE ACT SERVICE (STATE FUNDED) - CORRECTIONAL LINKAGE-TO-CARE</b>		
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).
Client communication (in-person)	1 unit = 15 minutes	Document any time spent in in-person communication with client that is not in-person (pre or post-release) (e.g., 45 minutes = 3 units).
Client communication (not in-person)	1 unit = 15 minutes	Document any time spent in communication with client (video, phone, email, text, etc.) that is in-person (post-release) (e.g., 45 minutes = 3 units).

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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. <b>Note:</b> 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.
Referral to medical care	1 unit = Completed	Enter "1" unit" when a referral is made for the client's first appointment with a medical provider. If the client doesn't attend, this service can be provided multiple times. <b>Note:</b> choose from the drop-down menu to specify "linkage type."
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). <b>Note:</b> choose from the drop-down menu to specify "linkage type."
Referral to MAT/MOUD	1 unit = Completed	Enter "1" unit" when a referral is made for a provider who prescribes medication for addiction treatment for substance use disorders (also called "medication for opioid use disorder (MOUD)").
Linkage to MAT/MOUD	1 unit = Completed	Enter "1" unit when a client has been connected to a provider who prescribes medication for addiction treatment for substance use disorders (also called "medication for opioid use disorder (MOUD)"). 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).

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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 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) – CORRECTIONAL LINKAGE-TO-CARE		
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.

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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.
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 in-person session	1 unit = 15 minutes	Document any time spent in in-person communication with client (e.g., 45 minutes = 3 units).
PACT telehealth session	1 unit = 15 minutes	Document time spent in a telehealth session in place of what would ordinarily be conducted as an in-person, face-to-face session but due to COVID-19 is being conducted remotely (e.g., by telephone, Zoom, FaceTime, Doxy.me) between a PACT provider and client (e.g., 1 unit = 15 minutes, 3 units = 45 minutes).
PACT client communication (not in-person)	1 unit = 15 minutes	Document any time spent in communication with client not in-person or telehealth: 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. <b>Note:</b> choose from the drop-down menu to specify "referral type."

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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). <b>Note:</b> 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).