Ryan White Part B Program
Policy
Early Intervention Services
06/2013

Federal Policy References: - Ryan White Modernization Act of 2006, Sect. 2604(c)(3)(E); 2604(e); 2612(d)
-Ryan White CARE Act (PL 104-146), Sect. 2612(a)(1)(2)(B), Sect. 2614
-HRSA/HAB Policy Notice 97-02.21

The Nebraska Ryan White Program has waived all requirements for subgrant entities regarding imposition of charges for services, pursuant to Section 2617(c)(4)(A) of the Ryan White Modernization Act of 2006.

The HRSA/HAB Fiscal and Program Monitoring Standards for Ryan White Part B Grantees (Monitoring Standards) will guide the oversight of Supportive Services by the NDHHS. The Monitoring Standards are attached to this document by reference. Annual fiscal and programmatic monitoring is required by regulation, both internally and by the NDHHS.
https://careacttarget.org/category/topics/program-monitoring

Purpose: The purpose of the Ryan White Part B Policy on Early Intervention Services (EIS) is to ensure compliance with applicable Federal Policies for the appropriate use of Part B funding for early intervention services assistance for eligible clients. This policy identifies client eligibility, the appropriate uses of EIS, and limitations.

1. Ryan White Part B funds may be utilized for EIS to include services for ***outpatient*** medical visits and laboratory services performed outside of the UNMC Part C consortium of care providers

2. Clients eligible for EIS must meet eligibility criteria per the Nebraska Ryan White Part B Policy "Client Eligibility" and the HRSA National Monitoring Standards (see link above).

3. Early intervention services must be provided by a provider licensed to provide medical care services in Nebraska.

4. The services authorized under the EIS policy shall be limited to office visits and approved laboratory services. All costs for these services must be billed and/or paid at the Medicaid reimbursable rate, and must be negotiated and approved by RW Program administration or appropriate staff.

5. Prior to requesting Ryan White Part B funding *all other resources*, public or private that provide EIS covered services, must be exhausted ensuring Ryan White Part B funding as payer of last resort.

6. Pre-authorization of provision of covered services between the Ryan White Part B Program and the provider is required.

7. Funding for EIS does not include services provided during inpatient hospitalization, nursing homes, or long term care facilities.

8. In no case may CARE Act funds be used to make direct payments of cash to recipients of home health care assistance.