

# OUTPATIENT/AMBULATORY HEALTH SERVICES

## Service Category Definition

Outpatient/Ambulatory Health Services are diagnostic and therapeutic services provided directly to a client by a licensed healthcare provider in an outpatient medical setting. Outpatient medical settings include clinics, medical offices, and mobile vans where clients do not stay overnight. Emergency room or urgent care services are not considered outpatient settings.

Allowable activities include:

- 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
- 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

Local Limitation: The IEHPC Standards of Care limit pharmaceutical assistance to:

1. One 30-day or less supply of medication
2. Prescriptions signed by a licensed clinician
3. Medications that meet current guidelines of the U.S. Public Health Service (USPHS), National Institutes of Health (NIH), and the American Academy of HIV Medicine (AAHIVM) guidelines
4. Medications that are in accordance with the most recently established Riv/SB TGA Formulary Policy established by the RWP Office in collaboration with community stakeholders

## Analysis and Updates

Outpatient/Ambulatory Medical Care program has seen an approximately 66% decrease in overall clients during the past several years due to implementation of the ACA. No additional reductions in overall client numbers are anticipated to occur as the vast majority of clients have transitioned to other funding sources. The remaining clients include certain population groups that are unable to obtain health care coverage (i.e. undocumented), those that have a lapse in insurance coverage, and those that require procedures/service not reimbursable by other funding sources. All of these groups will continue to need RW funded medical care.

If changes to ACA/Medi-Cal Expansion occur, Ryan White may once again need to support the vast majority of HIV+ individual's medical care. However, the exact effect of future legislation is still uncertain and any changes are unlikely to take effect in the next grant year.

Pharmaceutical assistance (now folded in with Outpatient/Ambulatory Medical Care) is sparsely used due to the California ADAP which is robust enough to support most needs (no waiting lists, rapid enrollment, and temporary medication assistance during enrollment). Therefore, the need for locally funded assistance is limited to infrequent, special circumstances.

## 2014 Needs Assessment Core Services Ranking - #1