

Proposed: Annual Service Description Review Protocol

Purpose

To establish a standardized, annual process for reviewing, updating, and approving all service descriptions to ensure alignment with program and legislative requirements, clinical standards, funding guidance, and local service delivery needs.

Review Frequency

Service descriptions shall be reviewed **annually**.

Reviews should start within Quarter 3 of the fiscal year, or more frequently as needed.

Responsible Parties and Key Functions

Recipient:

- Ensures compliance with federal and local requirements.
- Updates **service category priority numbers (as applicable), billing structures, reimbursement methodologies, and contract language.**
- Disseminates documents approved by the Partnership, including timely posting on the County web site.
- Executes implementation of service descriptions.
- Formatting of the document is at the discretion of the recipient office.

Partnership Staff:

- Coordinates the review process.
- Assists with document editing.
- Posts and distributes drafts for review.
- Provides the approved final document to the Recipient for dissemination and implementation.

Medical Care Subcommittee: Reviews clinical/service-related content for accuracy and relevance.

Care and Treatment Committee: Reviews all service descriptions and recommends approval.

Planning Council (Partnership): Reviews and approves the final document.

Review Process

Step 1: Create the Review Form

Staff support will prepare Review Forms. Formatting will be removed from review documents. The Review Forms will indicate the reference year of evaluation and the options to recommend approval with or without changes. Those items will be removed from the approved document following Partnership approval (Step 5).

Sample Review Form

Year: FY 2027-2028 Recommend Approval: ___ with changes ___ with no changes

EMERGENCY FINANCIAL ASSISTANCE

Emergency Financial Assistance is a support service. Under the local Ryan White Part A and MAI Programs, Emergency Financial Assistance provides limited one-time or short-term provision of approved formulary HIV/AIDS-related medications only, either directly or through a voucher program, while a client's eligibility for medication assistance is pending with a third-party payer. Subrecipients must be a Ryan White Part A or MAI Program-funded subrecipient also receiving AIDS Pharmaceutical Assistance (Local Pharmaceutical Assistance Program) funding and must have a current Public Health Service 340B certification from the federal Office of Pharmacy Affairs. It is expected that all other sources of funding in the community for emergency assistance will be effectively used and that any allocation of Ryan White Part A or MAI Program funds for these purposes will be as the payer of last resort, and for limited amounts, use and periods of time.

Currently, these funds are limited to three components: 1) limited, short-term medication support for Test and Treat Rapid Access (TTRA), 2) electric utility assistance, and 3) rental/emergency rental assistance. Funding under this service category is **limited**.

Step 2: Distribution and Content Review

- Service description posted at www.PartnershipMiami.org for review.
- Each service description is evaluated for:
 - Alignment with current federal guidance and legislation.
 - Accuracy of service definitions and allowable activities.
 - Consistency with local standards of care and best practices.
 - Clarity of language.

Step 3: Committee Review

- The appropriate committee/subcommittee reviews proposed revisions.
- Edits may include clarification, removal of outdated language, or incorporation of new requirements.

Step 4: Recommendation

- The Medical Care Subcommittee recommend revisions will be forwarded to the Care and Treatment Committee forwards for further review and recommendation
- The Care and Treatment Committee forwards the recommended final documents to the Partnership for approval.
- If the recommendations are forwarded without additional changes that will be indicated on the Review Form as noted in Step 1.

Step 5: Final Approval

- The Partnership reviews the revised service descriptions and gives final approval of the document(s).
 - BSR Partnership Staff provides the approved final document to the Recipient for dissemination and implementation.
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Contingency for Delays

If the review or approval process is delayed, the **most recently approved service description remains in effect without interruption**. No changes are implemented until formal approval is completed.