

Ambulatory/Outpatient Medical
Care
Service Delivery Model

SERVICE CATEGORY: AMBULATORY/OUTPATIENT MEDICAL CARE SERVICES

Goal: To provide primary medical health services to eligible individuals living with HIV/AIDS.

Definition: Provision of professional, diagnostic and therapeutic services rendered by a physician, physician’s assistant, clinical nurse specialist, or nurse practitioner in an outpatient, community-based, and/or office-based setting. This includes diagnostic testing, early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental conditions, prescribing and managing medication therapy, care of minor injuries, education and counseling on health and nutritional issues, minor surgery and assisting at surgery, well-baby care, continuing care and management of chronic conditions, and referral to and provision of specialty care. *Primary Medical Care for the Treatment of HIV Infection* includes the provision of care that is consistent with Public Health Service guidelines. Such care must include access to antiretrovirals and other drug therapies, including prophylaxis and treatment of opportunistic infections and combination antiretroviral therapies.

The objectives of the Standards of Care for Ambulatory/Outpatient Medical Care services are to ensure that:

- HIV related primary medical care services are accessible to eligible individuals living with HIV/AIDS;
- Consumers have access to services consistent with current U.S. Public Health Services (USPHS)/Department of Health and Human Services (DHHS) guidelines that are provided by trained and experienced staff;
- Services are rendered in a manner that complies with the Commonwealth of Virginia regulations including licensing requirements for medical providers of outpatient primary medical care; and
- Programs are coordinated and administered by qualified persons.

Primary Medical Care providers are expected to comply with the Universal Standards of Care, U.S. Public Health Services (USPHS)/Department of Health and Human Services (DHHS) guidelines, as well as these additional standards. The service specific Standards of Care for Primary Medical Care services provide additional requirements on the following components of service provision:

STANDARDS	INDICATOR	DATA SOURCE	MEASURES
1. Agency employs/contracts with licensed staff with the skills and experience appropriate to the specified Primary Medical Care treatment modality	1.1 Primary Medical Care providers will have the following qualifications: <ul style="list-style-type: none"> • Appropriately licensed by the State of Virginia. • Adequate malpractice insurance coverage on file 	<ul style="list-style-type: none"> • Personnel files: <ul style="list-style-type: none"> • Copy of current license from Virginia Department of Health Professionals • Documentation of employment/contract status • Malpractice Coverage meets state mandated minimum 	Percent of achievement.

STANDARDS	INDICATOR	DATA SOURCE	MEASURES
2. Provider will have evidence of Continuing Medical Education as appropriate for the professional discipline and service modality	2.1. At least 10 hours of HIV specific Continuing Medical Education (CME) on an annual basis. 2.2. At least one (1) hour of annual training on cultural diversity sensitivity.	<ul style="list-style-type: none"> Documentation of CME in each provider's personnel file 	Percent of achievement.
3. Client will have a comprehensive health assessment	3.1 100% of clients will receive a health assessment and comprehensive Physical Exam including an oral exam on initial visit and then annually, and will include mental health and substance abuse histories.	<ul style="list-style-type: none"> Documentation in medical record 	<u># of clients with assessment & PE</u> Total # of clients
4. Client will have follow-up medical care	4.1 90% of clients will have a minimum of 2 medical visit per year at least 3 months apart	<ul style="list-style-type: none"> Documentation in medical record 	<u># of clients with 2 medical visits at least 3 month apart</u> Total # of clients
5. Clients are educated/counseled as part of the initial assessment	5.1 An assessment documents counseling components at some point throughout the year. <ul style="list-style-type: none"> Basic HIV disease state Nutrition Universal Precautions Health maintenance HIV risk reduction counseling 	<ul style="list-style-type: none"> Documentation in medical record 	<u># of clients assessed for disease state, nutrition, universal pre-cautions & health maintenance</u> Total # of clients

STANDARDS	INDICATOR	DATA SOURCE	MEASURES
<p>6. Basic laboratory tests per DHHS Guidelines will be obtained</p> <p>*High-risk clients = incarcerated, homeless, and active IV drug use.</p>	<p>Client medical record has the following screens documented:</p> <p>6.1 90% of clients receive yearly lipid screens</p> <p>6.2 90% of clients receive yearly syphilis screens (VDRL/RPR)</p> <p>6.3 95% of clients receive yearly hepatitis B screens if not immune</p> <p>6.4 95% of clients receive yearly hepatitis C screens</p> <p>6.5 90% of clients receive TB screens initially and then annually for high-risk* clients</p> <p>6.6 85% of female clients receive yearly pap smears</p>	<ul style="list-style-type: none"> Documentation in medical record 	<p><u># clients with yearly lipid screen</u> Total # of clients</p> <p><u># clients with yearly syphilis screen</u> Total # of clients</p> <p><u># clients with yearly Hep B screen</u> Total # of clients</p> <p><u># clients with yearly Hep C screen</u> Total # of clients</p> <p><u># clients with TB screen initial/yrly*</u> Total # of clients</p> <p><u># female clients with yearly pap</u> Total # of clients</p>
7. Client medical record contains a current comprehensive Medication List	7.1 100% of client medical records include an updated/ current Medication List	<ul style="list-style-type: none"> Medication List 	<u># client charts with medication list</u> Total # of client charts
8. Clients are offered and prescribed ART according to DHHS guidelines	8.1 100 % of clients that meet guidelines are offered ART	<ul style="list-style-type: none"> Documentation in medical record 	<u># of clients that meet guidelines are offered ART</u> <u># clients that meet ART guidelines</u>
9. Clients are educated about medication adherence	9.1 80% of medical records document adherence counseling every 6 months for clients on ART	<ul style="list-style-type: none"> Documentation of counseling in medical record 	<u># of clients on ART with adherence counseling every 6 months</u> Total # of clients on ART
10. Clients' CD4 count and viral load are monitored	10.1 90% of clients will have a minimum of 2 CD4 and Viral Load tests per year at least 3 months apart	<ul style="list-style-type: none"> Lab results in medical record 	<u># of clients with 2 CD4s and VLs at least 3 month apart</u> Total # of clients

STANDARDS	INDICATOR	DATA SOURCE	MEASURES
11. Clients with CD4 counts below 200 are prescribed PCP prophylaxis and MAC prophylaxis for CD4 counts below 50	11.1 100% of clients with a CD4 count below 200 are prescribed PCP prophylaxis 11.2 100% of clients with a CD4 count below 50 are prescribed MAC prophylaxis	<ul style="list-style-type: none"> Documentation in medical record 	<u># of clients with CD4 < 200 prescribed PCP prophylaxis</u> Total # of clients <u># of clients with CD4 < 50 prescribed MAC prophylaxis</u> Total # of clients
12. Clients are offered immunizations or have documented that they decline	12.1 80% of clients receive (or document decline): <ul style="list-style-type: none"> influenza vaccines yearly pneumococcal vaccines every 5 years tetanus every 10 years Initiation of Hepatitis B vaccines series if not immune 	<ul style="list-style-type: none"> Documentation in medical record 	<u># clients w/ yearly influenza vaccine</u> Total # of clients <u># clients with pneumococcal vaccine</u> Total # of clients <u># clients with tetanus vaccine</u> Total # of clients <u># clients start Hep B vaccine series</u> Total # of clients
13. Clients are referred to specialist(s) as clinically indicated with appropriate exchange of information	13.1 100% of client medical records show documentation of referrals to specialist(s) as appropriate	<ul style="list-style-type: none"> Documentation in medical record 	<u># of clients are referred to specialist with info exchange</u> # of clients needing referrals