

EARLY INTERVENTION SERVICES

HRSA Description (10-22-2018)

The RWHAP legislation defines EIS for Parts A, B, and C. See § 2651(e) of the Public service act.

HRSA Program Guidance

The elements of EIS often overlap with other service category descriptions; however, EIS is the combination of such services rather than a stand-alone service. HRSA RWHAP Part recipients should be aware of programmatic expectations that stipulate the allocation of funds into specific service categories.

- HRSA RWHAP Parts A and B EIS services must include the following four components:
 - Targeted HIV testing to help the unaware learn of their HIV status and receive referral to HIV care and treatment services if found to be HIV-infected
 - Recipients must coordinate these testing services with other HIV prevention and testing programs to avoid duplication of efforts
 - HIV testing paid for by EIS cannot supplant testing efforts paid for by other sources
 - Referral services to improve HIV care and treatment services at key points of entry
 - Access and linkage to HIV care and treatment services such as HIV Outpatient/Ambulatory Health Services, Medical Case Management, and Substance Abuse Care
 - Outreach Services and Health Education/Risk Reduction related to HIV diagnosis.
- HRSA RWHAP Part C EIS services must include the following four components:
 - Counseling individuals with respect to HIV
 - High risk targeted HIV testing (confirmation and diagnosis of the extent of immune deficiency)
 - Recipients must coordinate these testing services under HRSA RWHAP Part C EIS with other HIV prevention and testing programs to avoid duplication of efforts
 - The HIV testing services supported by HRSA RWHAP Part C EIS funds cannot supplant testing efforts covered by other sources
 - Referral and linkage to care of PLWH to Outpatient/Ambulatory Health Services, Medical Case Management, Substance Abuse Care, and other services as part of a comprehensive care system including a system for tracking and monitoring referrals
 - Other clinical and diagnostic services related to HIV diagnosis

Baltimore EMA/Maryland Department of Health Guidance

The length of services must not exceed 3-6 months.

Upstream PrEP:

Last updated February 7, 2023 by L. Wagner

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Upstream EIS can be funded in a program that provides PrEP diagnostics/medication/treatment (funded through another source). Upstream EIS funding will cover staffing and supplies to provide outreach, HIV testing, linkage to care and HERR for status neutral individuals. Clinical care, including diagnostic labs associated with PrEP initiation or maintenance, and medications are not allowable costs under EIS.

Upstream STI:

Upstream EIS can be funded in a program that provides STI testing/treatment (funded through another source). Upstream EIS funding will cover staffing and supplies to provide outreach, HIV testing, linkage to care and HERR for status neutral individuals and HIV positive individuals. STI testing and treatment are not allowable costs under EIS. HIV treatment and viral load testing are not allowable costs under EIS.

Upstream HCV:

Upstream EIS funding will cover staffing and supplies to provide outreach, HIV/HCV rapid testing, linkage to care and HERR for status neutral individuals and HIV positive individuals. Clinical care, diagnostics, and medications for HIV/HCV treatment are not allowable cost under EIS.

Upstream SSP:

Upstream EIS can be funded in a program that provides Harm Reduction Syringe Services (through another source). Upstream EIS funding will cover staffing and supplies to provide outreach, HIV testing, linkage to care and HERR for status neutral individuals and HIV positive individuals. Purchase of safer injection, safer smoking, and any medical supplies not directly related to rapid HIV testing are not allowable costs under EIS.

Activities that do not lead to HIV testing or fail to diagnose previously undiagnosed individuals do not meet the objectives of EIS. EIS must be offered with the purpose of reducing barriers to care but may not fund direct patient care of any kind. Examples of enhancements to existing service delivery include:

- Expanded office hours outside of traditional practice hours
- External to clinical settings – mobile units, pop-up events, community settings
- Population specific clinics such as a Rainbow Clinic, a Men’s Clinic, a Trans Clinic
- Outside of the confines of general or HIV specific health services
- EIS MAY NOT FUND ROUTINE MEDICAL APPOINTMENTS OR ONGOING TREATMENT.

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Qualifications

Competencies, Knowledge, and Skills	Evaluation/Documentation
<p>Staff persons should demonstrate competency, knowledge and skills in the following areas:</p> <ul style="list-style-type: none">• HIV prevention interventions, including Treatment As Prevention, PrEP/nPEP• Rapid HIV counseling and testing;• Maryland state laws related to HIV testing and reporting;• Utilizing relevant data sources to appropriately target interventions (e.g. HIV zip code maps, HIV testing program data, census data, police department data, etc.);• Referral workflow, particularly for HIV medical care and Medical Case Management; and• Competency in the delivery of behavioral change models (e.g. Harm Reduction, Motivational Interviewing, Stages of Change, etc.)• Current CLIA Waiver and Public Health Testing License (HIV Testing certifications (evaluations))	<p>Demonstrated competencies, knowledge and skills must be available upon request (e.g. participation in training, formal supervisory review, direct observation, case review, etc.)</p> <p>HIV Testing Certifications (evaluations)</p>

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**The cohort of services may be provided by multiple staff who provide a discrete service. However, individuals providing each service must be able to demonstrate competency in that area (e.g. HIV testing, HIV education, etc.).*