

FY2022-FY2024 Atlanta EMA Standards of Care Executive Summary

Purpose

The purpose of this summary is to guide the delivery and implementation of HIV Care services in the Atlanta Eligible Metropolitan Area (EMA). These standards and measures aim to ensure that uniformity of service exists in the Atlanta EMA such that the consumers of a service receive the same quality of service regardless of where the service is provided. This document provides an overview of the standards that each funded agency (Subrecipient) must meet by funded service category.

The standards of care are the minimum requirements that the subrecipient are expected to meet when providing HIV services funded by the Department for HIV Elimination (Recipient). Therefore, all EMA funded service categories standards has been combined into one document to reduce the repetitive language throughout a multitude of individually standard documents.

The following section/pages reflect updates

- Universal Standards
 - o Subrecipient Policies and Procedures p.7 – Measures A. 3rd bullet and B. 2nd bullet
 - o Grievance Procedures p.9 – Measures A. 2nd bullet and B. 3rd bullet
 - o Client Rights and Responsibilities p.10 – Measures A. 1st bullet, B. 2nd bullet and D. 3rd bullet
- Eligibility Determination and Screening PPPN-001
 - o Ryan White HIV/AIDS Program Part A p.13 Measures A. 5th bullet, B. 2nd bullet, p14 Measures G. 2nd bullet,
 - o Ending the HIV Epidemic (EHE) p.15 Measures A. 5th bullet
- Atlanta EMA Screening Tool p.15 Measures A. 2nd bullet
- Outpatient/Ambulatory Health Service
 - o Clients Rights and Responsibilities (additional) p.28 Measures C. 3rd bullet

Conclusion

In addition to being adherent to these service standards, subrecipients must also adhere to Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB) [National Monitoring Standards](#), and the current [Atlanta EMA Part A Policies and Procedures Manual](#). Subrecipients may exceed these standards. Standards are monitored by programmatic, fiscal, and quality management Recipient staff through site visits, chart reviews, and program monitoring activities.