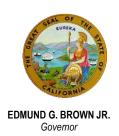


# State of California—Health and Human Services Agency California Department of Public Health



## Office of AIDS HIV Care Program

Management Memorandum Memorandum # 15-06

July 28, 2015

TO: HIV CARE PROGRAM (HCP) CONTRACTORS

SUBJECT: PARTNER SERVICES FOR HCP CLIENTS

#### I. Purpose

The purpose of this Management Memo is to clarify the requirements for the provision of Partner Services to HCP clients.

#### II. Background

HIV Partner Services is recognized by the Centers for Disease Control as a valuable intervention to support early identification of HIV and offers opportunities to identify individuals who have fallen out of medical care and link them to care. HIV Partner Services (PS) is a free, confidential service, supporting persons living with HIV in navigating disclosure around their HIV status to past, present or future partners. It includes confidential counseling and a comprehensive discussion with the HIV positive individual about the options for partner notification and provides assistance in notifying sexual and/or needle sharing partners of possible exposure to HIV. Previous policy required contractors to ensure that service providers inform clients of the availability of PS.

#### III. Policy

OA has expanded the PS requirement for contractors and service providers to work collaboratively with the <u>Partner Services Coordinator (PSC)</u> in their local health department and develop procedures to ensure that PS is available for the appropriate HCP clients.

Effective November 1, 2015, HCP providers who are funded for the following service categories are required to establish a process for PS referral and counseling:

- Outpatient/Ambulatory Medical Care (OAMC);
- Early Intervention Services (EIS);
- Case Management (Medical and Non-Medical);
- Mental Health;
- Substance Abuse Treatment (Outpatient and Residential);
- Health Education/Risk Reduction; and
- Outreach.

HCP providers should prioritize PS for HIV-positive HCP clients when clinical and behavioral factors indicate a higher risk of transmission. These risk factors include:

- Acute or recent HIV infection (infection acquired within the last 6 months);
- Any new diagnosis of HIV infection, regardless of duration of infection;
- Uncontrolled HIV viral load;
- Concurrent syphilis or gonorrhea diagnosis

In order to facilitate timely intervention in disease transmission, HCP providers should offer PS to clients with HIV during:

- Disclosure of initial HIV positive test result;
- Initial HIV care visits;
- · Re-engagement to care encounters; and
- Syphilis or gonorrhea diagnoses in an HIV care setting, or any STI diagnosis in the setting of an uncontrolled HIV viral load.

Service providers should inform appropriate clients about the availability of PS and then complete <u>one</u> of the following steps:

- 1. Actively refer the client to the local PSC for health department follow up, or
- Conduct a comprehensive PS counseling session, discussing different options for PS notification and eliciting sexual and/or needle sharing partner(s) names and locating information for their local PSC to follow up, or
- 3. Document refusal of PS.

### **Required Monitoring and Documentation**

- Policies and procedures must be updated to reflect PS requirements.
- Contractors must develop a methodology to monitor the availability and utilization
  of PS at service provider sites (e.g. subcontractor monitoring includes assessing
  the frequency of referral to PS for HIV+ clients with STI).
- Partner Services for prioritized clients should be documented in client records.
- When referring an HIV-positive client to the local PSC, the HCP provider must securely communicate that client's contact information as well as the client's nine-digit ARIES ID number.
- If conducting PS counseling with their clients and eliciting sexual and/or needle sharing partner(s) names and locating information, the HCP provider must complete one Partner Information Form (CDPH 8458) for each partner to be

notified anonymously by the local health department and securely submit the form(s) to their local PSC. Forms can be obtained by e-mailing a request to <a href="mailto:LEOSreq@cdph.ca.gov">LEOSreq@cdph.ca.gov</a>.

ARIES users must document referral or provision of PS in ARIES by accessing
the Basic Medical Services tab in ARIES, selecting "Yes" for Partner Notification
Offered field, and entering the date in the Partner Notification Offered Date field.
If there is already a date in the field, overwrite it with the date of the most recent
service. Offers that do not result in either a referral or a PS counseling session,
should not be documented in ARIES.

Pursuant to California Health and Safety Code Section 38077(b)(2), CDPH/OA contractors shall implement the above referenced modifications to the HIV Care Program Scope of Work.

For local Partner Services Coordinators contacts, technical assistance, or additional resources, please visit:

http://www.cdph.ca.gov/programs/aids/Pages/tOAHIVPartnerServicesSP.aspx

Questions regarding PS requirements for HCP contractors should be directed to Aileen Barandas, MSN, NP, Quality Management Nurse at (916) 445-9221; or aileen.barandas@cdph.ca.gov.

Sincerely,

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Anna Fybria

California Department of Public Health