**Cleveland TGA Service Definition**

For each funded service, a Cleveland TGA definition has been developed based on guidelines provided by HRSA, the intent of the local Planning Council and standards of practice determined by the grantee.

Please note: The Ryan White Part A Program is the “payer of last resort.” This means providers must make reasonable efforts to identify and secure other funding sources outside of Ryan White legislation funds, whenever possible. Part A funds are intended to be “the payer of last resort” for the provision of care. Providers are responsible for verifying an individual’s eligibility by investigating and eliminating all other potential billing sources for each service, including public insurance programs, or private insurance. Part A funds may not be used to supplant partial reimbursements from other sources to make up any un-reimbursed portion of the cost of such services.

**CORE SERVICE:**

**Service: Home Health Care**

The provision of services in the home by licensed health care workers, such as nurses, including the administration of intravenous and aerosolized treatment,parenteral feeding, diagnostic testing, and other medical therapies. Services require a medical referral stating the need for home health services and the expected length of care.

Unit of Service: 1 unit = 60 minute visit

