**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: Mental Health Services**

Provision of psychological and psychiatric treatment and counseling services offered to individuals with a diagnosed mental illness, conducted in a group or individual setting, and provided by a mental health professional licensed or authorized within Ohio to render such services. Services must be provided by a mental health professional, licensed by and practicing under the guidelines and standards established by the Ohio Counselor and Social Work Board and/or the Ohio Department of Mental Health at an agency certified by the Ohio Department of Mental Health or Medicaid.

Unit of Service: 1 unit = 60 minute individual or group encounter

