**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.

**SUPPORT SERVICES:**

**Service: Case Management Services (non-medical)**

Includes advice and assistance in obtaining medical, social, community, legal, financial, and other needed services. Non-medical case management does not involve coordination and follow-up of medical treatments.

Services may be focused on housing information and referrals to eligible PLWH/A to enable an individual to gain or maintain access to and compliance with HIV-related medical care and treatment.

Services may be focused on health insurance benefits and enrollment information, assistance and referrals to eligible PLWH/A to enable an individual to gain or maintain access to and compliance with HIV-related medical care and treatment.

Unit of Service: 1 unit = 15 minute client encounter

