

FOOD SERVICES
(Year 20 Service Priorities #10 and #12)

Food services include **Food Bank** and **Home-Delivered Meals**. Providers must offer nutritional counseling to all food service clients through qualified staff supervised by a licensed dietitian or nutritionist. Clients may not be enrolled in more than one Ryan White Part A-funded food service program simultaneously, except if the client needs to access food bank services only for the purpose of obtaining personal hygiene products while enrolled in the home-delivered meals program.

I. Food Bank (Priority #10)

This program is a central distribution center providing groceries, including personal hygiene products when available, for indigent HIV+ clients. The food is distributed in cartons or bags of assorted products to eligible Ryan White Program clients.

A. Program Operation Requirements:

Standard Provisions

Food bank services may be provided only on an **emergency basis**. An emergency is defined as an extreme change of circumstance: loss of income (i.e., job loss or departure of person providing support), loss of housing, or release from institutional care (substance abuse treatment facility, hospital, jail, or prison) within the last two weeks. Duration of food bank service provision is to be **temporary**. Other emergencies, as defined by the client's medical case manager, must be documented in the client's chart as they arise. A severe change to the client's medical condition, as defined below under the provision for additional occurrences, may also be considered an emergency.

Medical case managers must conduct initial and on-going assessment of each client to determine if the client is eligible for food-related services under any other public and/or private funding source, including food stamps or other charity care food banks.

The provision of this service will be limited to twelve (12) occurrences within the Ryan White Part A Fiscal Year (March 1, 2010 through February 28, 2011). One (1) occurrence is defined as all food bank services provided within one (1) calendar week. For example, a client could receive food bank services once a week every week for three (3) months, or one week per month for 12 months, in the Fiscal Year or any variation thereof, with the absolute limit of 12 occurrences in a Fiscal Year.

Groceries, including personal hygiene products when available, can be picked up on a weekly or monthly basis. If groceries will be picked up on a **weekly** basis, the client will be limited to groceries valued at \$50.00 per week at each pick-up. A client accessing food bank services on a weekly basis may not pick up groceries sooner than seven (7) days from the prior pick-up day.

If the client chooses to pick up his/her groceries on a **monthly** basis, the client will be limited to \$50.00 per week multiplied by the number of times the original day of pick-up occurs in the month. A client accessing food bank services on a monthly basis may not pick up groceries in a new month prior to the same pick-up day from the previous month.

Providers must make every effort to obtain matching funds, donations, or any supplemental assistance for the program and these efforts should be documented. Providers must also be familiar with and capable of referring clients to other community, faith-based, and/or neighborhood food bank sites when the client is not in an emergency situation and/or has reached their food bank allowance limit.

Additional Occurrences

A **severe** change to the person's medical condition (i.e., new HIV-related diagnosis/symptom, wasting syndrome, protein imbalance, recent chemotherapy, etc.) may warrant additional occurrences of food bank services. However, additional occurrences require certification in the form of a completed **Ryan White Program Nutritional Assessment Letter for Food Bank Services**. This Letter of Nutritional Assessment must be completed by an independent physician or registered dietitian not associated with the Part A-funded food bank provider. The client must be reassessed for the "warranting" medical condition every three (3) months. The physician or registered dietitian must specify the frequency and number of additional food bank visits (occurrences) that should be allowed for the client (maximum of twelve).

Provision for Families

In addition to the maximum amount defined above for groceries available per month to eligible clients, each additional adult who is HIV+ and lives in the same household is eligible to receive \$50.00 per week in groceries subject to the same service guidelines. Each dependent (i.e., minors under 18 years of age and living in the same household as the client who is HIV+) is also eligible to receive \$20.00 per week in groceries, subject to the same service guidelines above. The client must provide documentation to prove the dependent's age and place of residence.

Providers must demonstrate their capacity to provide ethnic foods and foods suited to special client dietary needs.

- B. Rules for Reimbursement:** Providers will be reimbursed based on properly documented invoices reflecting the distribution of weekly bags of groceries, including personal hygiene products, plus a dispensing charge to be agreed upon between the provider and the Office of Grants Coordination. The cost of the weekly bag of groceries will not exceed \$50.00. Providers will also submit a quarterly reconciliation of actual expenditures for food costs, staffing expenses, and other line items as listed on the approved budget.
- C. Additional Rules for Reporting:** Providers must report monthly activities according to client visits (i.e., weekly occurrences).
- D. Special Client Eligibility Criteria:** A Ryan White Program Certified Referral or an Out-of-Network referral (accompanied by all appropriate supporting documentation) is required for this service. Referrals expire on February 28th of each Fiscal Year. Each medical case management referral must document the number of eligible dependents (i.e., minors). For additional occurrences, the client must be reassessed for the “warranting” medical condition every three (3) months. Providers must document that HIV+ clients who receive Ryan White Part A-funded food bank services have a gross household income that does not exceed 250% of the 2010 Federal Poverty Level (FPL).

Clients receiving food bank services must be documented as having been properly screened for Food Stamps, Medicaid Waiver, or other public sector funding as appropriate. Medical case managers must document a client’s need for food services in the client’s Plan of Care (POC), and indicate if the client is eligible to access food services under other various available programs, with the understanding that the Ryan White Program-funded food bank services are provided on an emergency basis. If the client is eligible to receive food service benefits from another source, the medical case manager will assist the client in applying to such program(s). If the client already receives food stamp benefits at the time he/she applies for Ryan White Program-funded food bank services, the client must submit a copy of his/her Food Stamp program award/benefit letter as documentation that the award is \$25.00 or less per month in food stamp benefits. If the client applied for Food Stamp benefits and was denied, a copy of the denial letter must be filed in the client’s chart and a copy should accompany the referral for food bank services.

While clients reside in institutional settings (i.e., nursing home or a substance abuse residential treatment facility) they will not qualify for Part A-funded food bank services. Similarly, while clients qualify for and can access other public funding for food services, they will not be eligible for Ryan White Part A-funded food bank services, unless the provider is able to document that the client has an emergency need, has applied for such benefits and eligibility determination is pending (a copy of benefit application must be kept in the client's chart).

In addition, referrals for food bank services must clearly state that the client is not currently receiving Part A-funded home delivered meals.

II. Home-Delivered Meals (Priority #12)

This service provides nutritionally balanced home-delivered meals for persons living with AIDS, or under certain circumstances persons who are HIV+ , are indigent, disabled, and homebound, as defined by Medicaid Project AIDS Care (PAC Waiver) and as certified by a physician. PAC Waiver defines a homebound individual as one who is "confined to his or her home for any period of time and is unable to leave the residence without assistance from another person. The homebound person must have no other means of obtaining meals." In addition, clients accessing this service must be functionally impaired. A functional impairment means difficulty performing one or more activities of daily living (i.e., bathing, dressing, walking, eating), and are not capable of preparing meals. Additionally, it must be documented that no other person in the client's household is able to prepare meals, or the person who usually prepares meals is temporarily absent or unable to manage meal preparation. **A physician's certification of a client's homebound status is required and must be updated every three (3) months. This certification must be kept on-site in the client chart at the home-delivered meal provider agency.**

- A. Program Operation Requirements:** This service includes the provision of both frozen and hot meals. Providers must demonstrate their capacity to provide ethnic foods and food suited to special client dietary needs. A meal must be defined according to current American Dietary Association (ADA) guidelines (minimum daily requirements).
- B. Rules for Reimbursement:** Providers will be reimbursed on the basis of a delivered meal that meets commonly accepted nutritional guidelines, at a rate not to exceed \$6.25 per meal (frozen or hot) with a maximum of three (3) meals per day per client. The projected cost per meal must include the cost of nutritional counseling.

- C. **Additional Rules for Reporting:** Providers must report monthly activity on the basis of a delivered meal meeting the nutritional guidelines indicated above under program operations requirements.
- D. **Special Client Eligibility Criteria:** A Ryan White Program Certified Referral or an Out-of-Network Referral (accompanied by all appropriate supporting documentation) is required for this service. Every three (3) months, client eligibility for this service must be re-certified by a medical case manager and the physician's certification of homebound status must be re-confirmed and updated. Providers must document that persons receiving Part A-funded home-delivered meal services: (1) are homebound as defined by Medicaid Project AIDS Care (PAC) Waiver and as certified by a physician. (PAC Waiver defines a homebound individual as one who is "confined to his or her home for any period of time and is unable to leave the residence without assistance from another person. The homebound person must have no other means of obtaining meals."); (2) clients accessing this service must be functionally impaired. A functional impairment means difficulty performing one or more activities of daily living (i.e., bathing, dressing, walking, eating), and are not capable of preparing meals. Additionally, it must be documented that no other person in the client's household is able to prepare meals, or the person who usually prepares meals is temporarily absent or unable to manage meal preparation; (3) are current permanent residents of Miami-Dade County; (4) have AIDS (as defined by the CDC) or are HIV+ with a condition (certified by a physician) that makes home-delivered meals necessary; and (5) have a gross household income that does not exceed 300% of the 2010 Federal Poverty Level. While clients reside in institutional settings (i.e., nursing home or a substance abuse residential treatment facility) they will not qualify for Part A-funded home delivered meals.

PLEASE NOTE: A complete referral for this service includes either the Ryan White Program Certified Referral or an Out-of-Network Referral (including appropriate supporting documentation) AND the physician's certification of homebound status. No referral for home-delivered meals may be for longer than three (3) months duration and all supporting documentation must be kept in the client chart on-site at the home-delivered meal provider agency.

Clients receiving home-delivered meals must be documented as having been properly screened for other public sector funding as appropriate. While clients qualify for and can access Medicaid Waiver, or other public or faith-based funding for home delivered meals, they will not be eligible for Ryan White Part A-funded home-delivered meals. In addition, referrals for home-delivered meals must clearly state that the client is not

currently receiving Part A-funded food bank services, except for personal hygiene products.

ALSO NOTE: Where the HIV positive status of the client and a medical condition renders the client homebound, physicians must indicate whether the condition is temporary or permanent, and if temporary, the period of time that home-delivered meal service is authorized. If no such time indication is provided, such certification will last for a maximum of thirty (30) days.