

# **GUIDE TO HIV/AIDS SERVICE PROVIDERS supported by Title I, Ryan White CARE Act**

## **INTRODUCTION**

### **BACKGROUND ON CARE ACT**

In 1990, Congress passed P.L. 101-381, the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, to improve the quality and availability of care for individuals and families with HIV disease who have no other access to such care. This includes people living with HIV/AIDS who are low income, and uninsured or underinsured. The CARE Act is administered by the Health Resources and Services Administration (HRSA).

The four Titles of the Act direct grant support as follows:

- \* Title I supports emergency service needs of Eligible Metropolitan Areas (EMAs) with the largest number of reported cases of AIDS;
- \* Title II supports States to improve the quality, availability, and organization of health care and support services. It also supports a separate competitive grant program of Special Projects of National Significance (SPNS) to advance knowledge and skills in the delivery of health and support services to persons with HIV infection;
- \* Title III(b) funds early intervention services through national competitive grant awards; and
- \* Title IV, funded for the first time in fiscal year 1994, supports research and service demonstrations for pediatric HIV patients.

### **DEVELOPMENT OF GUIDE**

This Guide was developed for medical and support service providers, and people

living with HIV/AIDS. It lists services and providers supported by Ryan White Title I funding in EMAs with large HIV/AIDS caseloads and, for each provider, gives addresses, phone numbers, contacts and a brief description of available services.

At the end of 1993, each of the 25 EMAs receiving Title I grants that year reported on the providers they had contracted with to serve people living with HIV. These lists were verified, data were entered, and early in 1994, HRSA contacted each EMA, including the nine cities receiving Ryan White grants for the first time in 1994, asking them to revise their provider listing, or, in the case of the new EMAs, to provide a listing of service providers.

This Guide lists EMAs alphabetically by City, and service providers alphabetically within each EMA. Each EMA's section starts with the name, address, and contact person for the grant, a brief background the EMA's demographics, and history of the HIV epidemic in the EMA.

Appendix A is a listing of the service category definitions provided by HRSA to guide EMA reporting. When a directory entry describes a service very briefly, referring to these definitions may be helpful. Some EMAs went well beyond these definitions to include broader descriptions of services provided by subcontractors.

## **HOW EMAs WORK**

Metropolitan areas are eligible for Title I grants when they report 2,000 or more cumulative cases of AIDS to the Centers for Disease Control and Prevention (CDC), or a per capita incidence of .0025. Title I grants are based on reports made by March 31 of the most recent fiscal year (thus, 1994 grants are based on cases reported by March 31, 1993).

Grants are awarded to the Chief Elected Official (CEO) of the EMA, who must

establish an HIV Health Services Planning Council. That Council establishes priorities for awarding Title I grants in the area, develops a plan for organizing and delivering HIV health services, and assesses how efficiently the city allocates funds to areas of greatest need. Council membership must represent the community of HIV/AIDS providers and people affected and infected by HIV.

The EMAs use various procedures to contract with public and non-profit entities that then provide outpatient and ambulatory health and support services, determined by the Planning Council as priorities for area residents living with HIV. These can cover a wide range of services, from primary medical care to transportation, food, in-home services and hospice care.

## **USING THE GUIDE**

HRSA developed this Guide to assist providers of HIV/AIDS care and people seeking such care. Though HIV service providers within one city are usually knowledgeable about other area resources to whom they can refer patients, they are not as familiar with resources in other cities. So, when a patient is moving to another city listed here, the provider can make referral suggestions. For people with HIV who are seeking additional resources and care providers, or their friends and relations, this Guide can be a valuable resource.

A comprehensive, alphabetical index of service providers by EMA currently is being developed, and will be sent to all Title I grantees as soon as it is completed.

Every effort has been made to ensure accuracy of the listings. However, changes do occur and people using this Guide may find that addresses, phone numbers, personnel, and even services may not be as listed here. In those cases, we would appreciate hearing from you. We would also appreciate receiving your

comments and  
suggestions on ways to improve this document.

Please send suggestions, additions and corrections to:  
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