

Ryan White Part B Support Services Exceeding Service Cap Documentation

Exceptions to the “Maximum Allowable” service caps can be made locally for clients who meet the following eligibility requirements:

- Client is actively enrolled in case management services.
- The service cap waiver will facilitate the client’s access to one of the core medical services listed in Section 1.
- The client has a current plan (Care Plan or documentation in progress notes) to help the client meet the service need, without utilizing Ryan White funds, on an ongoing basis.
- The client has been assessed Acuity level 3 or 4 in the acuity life area that corresponds to the intended need. This eligibility requirement is waived for women, infants, children and youth.

Documentation Requirement:

Download and complete the “Exceeding Service Cap Documentation” form from the program website at www.healthoregon.org/hiv. The form includes the following required information that must be included in the client chart when exceeding the service cap:

- ✓ Total amount that is being requested to be waived;
- ✓ Acuity level and date acuity worksheet was completed;
- ✓ The reason for the requested waiver;
- ✓ How the requested service funding will facilitate the client’s access to core medical services (to be completed by the RN Case Manager); and
- ✓ The signature of the RN Case Manager.

A copy of this completed form and any supporting documentation must be included in the client record.

Exceeding Service Cap Documentation Form

Date:	Client Name:
Service Requested:	Amount in excess of cap requested: \$
Client Acuity Level:	Date Acuity Worksheet Completed:

REASON for exceeding service cap:

**DESCRIPTION of how service facilitates client's access to HIV core medical services:
(MUST be completed by the Nurse Case Manager):**

Nurse Case Manager's Signature/Credentials: _____ **Date:** _____