**Phoenix EMA’s Implementation Activities**

**HRSA’s Part A Program Standards**

1. **Reformatting of HRSA Documents:** Each document provided by HRSA was reformatted verbatim, but with revised page breaks and information grouping for better clarity (attachments 1-3). Additionally, blank columns were added that allowed for the inclusion issues that needed to be addressed by the EMA, who would tasked regarding these issues, and notes/comments. *(See attachments 1-3)*
2. **Initial Review of Part A Program Standards and FAQs:** The review process began with the new Part A Program Standards being distributed to the Administrative Agent’s team members, Planning Council Support staff and the Planning Council Chair and Vice Chair. Each individual was tasked to review the Part A standards and develop a personal list of questions. The Quality Management team was tasked with also comparing the Part A standards to existing EMA standards of care.
3. **Documents Made Available to the Community:** The reformatted documents were posted to the Publications page of the Phoenix EMA Planning Council’s Information & Announcements web page for review and download ([www.PhoenixPlanningCouncil.com](http://www.PhoenixPlanningCouncil.com)). An email was sent by the Administrative Agent asking providers to review the documents and submit questions and comments. A similar email was broadcast to the email distribution list of the Planning Council. Current standards of care for all Part A funded services were also available for download on the Council’s Publications web page.
4. **Joint Review of all Part A Program Standards:** A review team compromised of the entire Administrative Agent’s staff, Planning Council Support staff, and a (non-HRSA) consultant for the EMA completed a day-long review of the entire set of Part A standards. The outcome of this review was the identification of:

* Changes in the AA’s policies & procedures that were required for compliance
* Changes in Maricopa County Ryan White provider contracts
* Changes in annual site visit monitoring requirements and protocols
* Revisions/additions that would need to be incorporated into the Planning Council’s standards of care for compliance
* Action item assignments
* Identification of newly allowable service delivery for some service categories, and/or allowable service delivery not currently provided in the EMA
* Questions to forward to the EMA’s Project Officer

1. **Development of an Implementation Plan:** The review team met for a second time to discuss the completion of action items and develop an implementation plan.
2. **All-Provider Meeting:** A high-level presentation was provided to introduce providers to the Part A Program Standards present and detail the implementation plan.
3. **Presentation of Part A Program Standards to the Planning Council:** The Quality Management team provided a high-level overview of the Part A Program Standards at a Community Health Planning & Strategies Committee meeting, and a full Planning Council meeting. The implementation plan was discussed at both sessions.
4. **Collaboration with the Planning Council Regarding Allowable Services:** The Quality Management team met with the Council’s Community Health Planning & Strategies Committee regarding services that are allowable but not currently offered in the EMA (such as the provision of household cleaning supplies in food boxes). The committee developed recommendations for full Planning Council approval.
5. **Incorporation of Approved Revisions to Allowable Services:** Approved revisions were incorporated into Part A service delivery.
6. **Revisions to the Planning Council’s Standards of Care:** The Quality Management team collaborated with the Council’s Standards committee to integrate necessary revisions. Collaboration with PC Standards of Care committee to integrate revisions into Part A standards. The modified Standards were presented to the full Planning Council for approval.
7. **Policy and Procedure Revisions:** These revisions were completed by the Administrative Agent’s team.
8. **Revisions to Contracts/Task Orders:** These documents were amended, as required, to reflect changes necessary to comply with the Part A Program Standards.
9. **Revisions to Site Visit Documents:** Documents used during site visits for fiscal, programmatic, and quality monitoring were revised. (See attachments 4 and 5).
10. **Service Category-Specific Provider Meetings:** Meetings with providers, by service category, were conducted to review changes to standards of care, contracts/task orders, and monitoring tools. Concerns were addressed and input was gathered related to components of service delivery that were allowable by the new Part A Program Standards but not currently being delivered in the EMA.
11. **Revised Documents Made Publicly Available:** Revised Standards of Care, policies and procedures, monitoring tools and other documents were uploaded to the Planning Council’s website for access by the public.