

**STATE OF NEW YORK - DEPARTMENT OF HEALTH  
AIDS INSTITUTE**

**Policy and Procedure Manual Outline**

**- PURPOSE & GOALS OF THE CFP**

**- TABLE OF ORGANIZATION: AGENCY & THE CFP**

**- ELIGIBILITY & ENROLLMENT PROCEDURES**

- \* Admissions Process (i.e. HRA enrollment)
- \* Eligibility Criteria for the CFP
- \* Enrollment of Collaterals as Primary Index Clients
- \* Transfer of Clients
  - Inter-agency
  - Intra-agency
- \* Client Enrollment Categories
  - High-risk/serostatus unknown clients
  - Intensive needs

**- HIV CONFIDENTIALITY ISSUES**

- \* Disclosure of Information
- \* "Need to Know" List
- \* Legal Request for Information in Client Case Records
- \* Proper Use of Confidential HIV Related Information Forms  
(DOH Form# 2557 & 3507)

**- CLIENT'S RIGHTS & RESPONSIBILITIES**

- \* Bill of Rights
- \* CFP Consent Forms
- \* Grievance/Complaint Process
- \* Client Accessibility to Case Records

**- CFP STANDARDS & CMCM REGULATIONS**

- \* Request for Qualifications
- \* Federal Regs & AI Program Standards
- \* Technical Assistance Bulletins

#### **- DOCUMENTATION REQUIREMENTS**

- \* Inter/Intra-agency Referral Protocol
- \* Inter/Intra-agency Case Conferencing
- \* Documentation of Sensitive/Illegal Activities of Clients

#### **- QUALITY ASSURANCE**

- \* CFP Administrative Review/Staff Supervision
- \* Case specific reviews
- \* Quarterly random sampling review of case records
- \* Peer Review
- \* Client Satisfaction Survey
- \* CFP Administrative Review/Staff
- \* Staff Orientation & Training

#### **- CFP STAFF STRUCTURE**

- \* Team Definition
- \* Staff Boundaries

#### **- CRISIS INTERVENTION**

- \* 24-Hour On-Call Coverage
- \* Assessment of Suicidal Behavior

#### **- MEDICAL ASSESSMENT**

- \* Verification of HIV Status

- \* Hospital/CBO Referral Form

- \* TB Protocol

**- CASE CLOSURE/EXIT PLANNING**

- \* Policy on Case Closures

- \* Disenrollment Process

- \* Retention of Case Records

- \* Storage of Case Records

**- BILLING**

- \* Procedures for Submitting Claims

- \* CFP Guidelines for Billable Activities (RFQ)

- \* Resubmission of Denied Claims

- \* Internal Billing Audit

**- APPENDIX**

- \* CFP Forms

- \* Job Description/Responsibilities

- \* NYSDOH AI Sponsorship Agreement

- \* Other Materials to be made available to Program Staff:

  - Billing Manual

  - RFQ/Program Standards