



Public Comment Period for the draft **Universal Service Standards and Client Bill of Rights and Responsibilities**

Posted: June 30, 2026

The Los Angeles County Commission on HIV (COH) announces an opportunity for the public to submit comments for the draft **Universal Service Standards and Client Bill of Rights and Responsibilities** revised by the Standards and Best Practices Committee. Comments from consumers, providers, HIV prevention and care stakeholders, and the public are welcome.

A draft of the document is posted to the COH website and can be found at:
<https://hiv.lacounty.gov/standards-and-best-practices-committee/>.

Comments can be submitted via email to HIVCOMM@LACHIV.ORG.

Additionally, consumers of Ryan White Services can request that a physical copy of the service standards be mailed to their home address. For more information, please contact Jose Rangel-Garibay at jgaribay@lachiv.org or (213) 738-2816.

After reading the document, consider responding to the following questions when providing public comment:

1. Are the Universal Service Standards and Client Bill of Rights and Responsibilities reasonable and achievable for providers? Why or why not?
2. Do the Universal Service Standards and Client Bill of Rights and Responsibilities meet consumer needs? Why or why not? Give examples of what is working/not working.
3. Is there anything missing from the Universal Service Standards and Client Bill of Rights and Responsibilities related to HIV prevention and care?
4. Do you have any additional comments related to the Universal Service Standards and Client Bill of Rights and Responsibilities or Ryan White services?

Public comments are due by **August 14, 2026.**



LOS ANGELES COUNTY
COMMISSION ON HIV



UNIVERSAL SERVICE STANDARDS AND CLIENT BILL OF RIGHTS AND RESPONSIBILITIES

SERVICE STANDARDS FOR RYAN WHITE HIV/AIDS PROGRAM CARE
AND TREATMENT SERVICES

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IMPORTANT: Service standards must adhere to requirements and restrictions from the federal agency, Health Resources and Services Administration (HRSA). The key documents used in developing standards are as follows:

[Human Resource Services Administration \(HRSA\) HIV/AIDS Bureau \(HAB\) Policy Clarification Notice \(PCN\) # 16-02 \(Revised 10/22/18\): Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds](#)

[HRSA HAB Policy Clarification Notice \(PCN\) # 16-02: The use of Ryan White HIV/AIDS Program Funds for Core Medical Services and Support Services for People Living with HIV Who Are Incarcerated and Justice Involved](#)

[HRSA HAB, Division of Metropolitan HIV/AIDS Programs: National Monitoring Standards for Ryan White Part A Grantees: Program – Part A](#)

[Service Standards: Ryan White HIV/AIDS Programs](#)

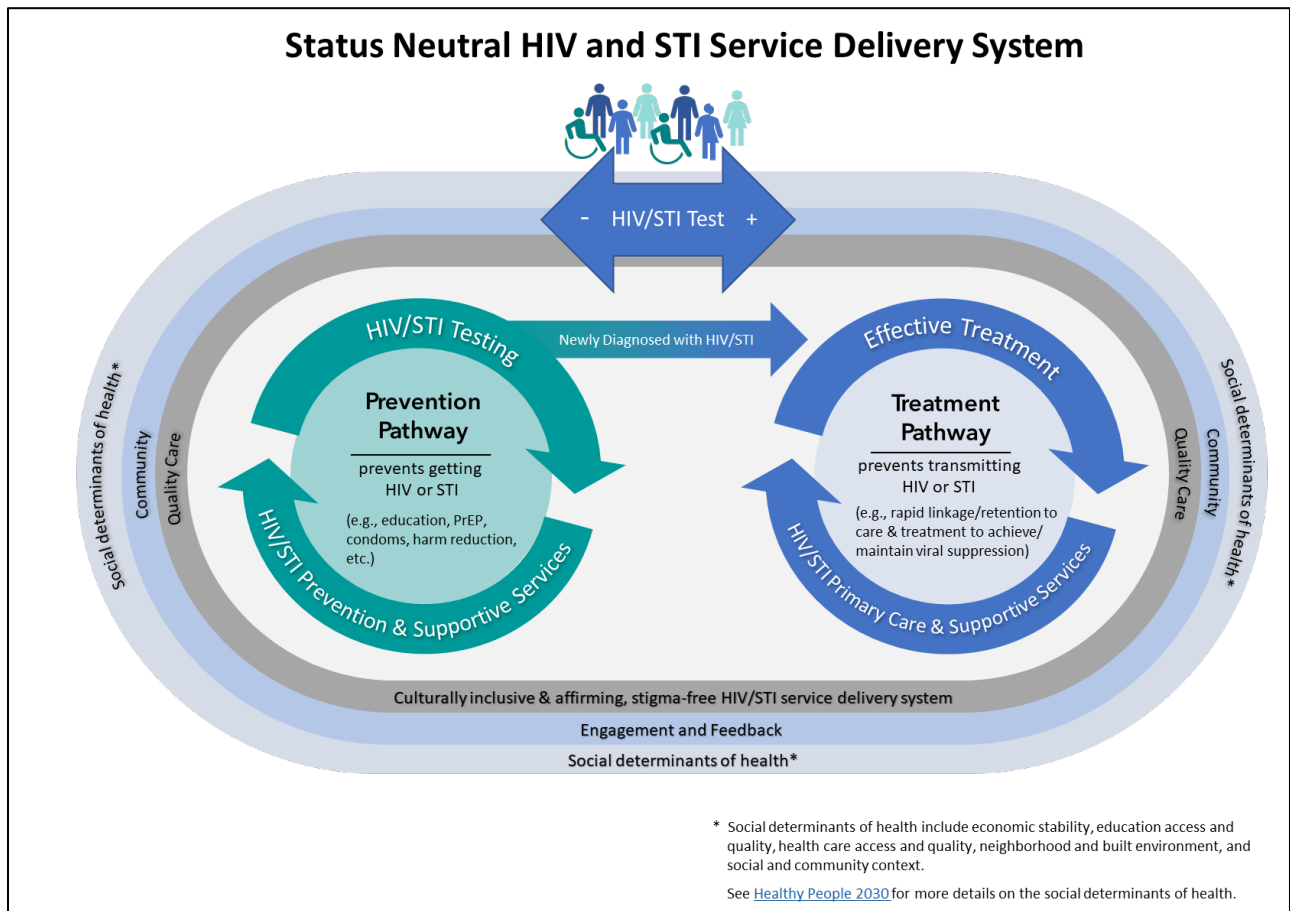
Introduction

Ryan White HIV/AIDS Part A Program (RWHAP) service standards define the minimum expectations for how RWHAP service providers in Los Angeles County must deliver each service category, ensuring consistent, high-quality care across all funded agencies. Service providers are encouraged to exceed these minimums. The Universal Service Standards and the Client Bill of Rights Responsibilities were developed by the Los Angeles County Commission on HIV, incorporating input from service providers, consumers, and the Standards and Best Practices Committee, and reflect current national and federal HIV care guidelines to support optimal health for living with HIV (PLWH).

Service providers are encouraged to use a status-neutral framework that treats all clients the same, regardless of HIV or STI status, and connects them to appropriate prevention, care, and support services. This approach address social determinants of health, reduces disparities, and helps ensure rapid linkage to treatment for newly diagnosed clients and ongoing prevention for those who test negative. See Figure 1 for an example. More information on the status-neutral HIV and STI service delivery framework and related prevention standards is available here <https://hiv.lacounty.gov/our-work> under the “Ryan White Program Service Standards” tab.

Figure 1—Status Neutral HIV and STI Service Delivery System Framework

(Adapted from the Centers for Disease Control and Prevention Status Neutral HIV Prevention and Care Framework)



General Eligibility Requirements for Ryan White Services

- Be diagnosed with HIV or AIDS with verifiable documentation;
- Be a resident of Los Angeles County;
- Have an income at or below 500% of Federal Poverty Level;
- Provide documentation to verify eligibility, including HIV diagnosis, income level, and residency.

Given the barriers with attaining documentation, service provider agencies are expected to follow the Los Angeles County, Department of Public Health, Division of HIV and STD Programs (DHSP) guidance for using self-attestation forms for documentation eligibility for Ryan White services.

Universal Service Standards Overview

The purpose of the Universal Service Standards is to ensure service providers:

- Provide accessible, nondiscriminatory services to all PLWH in Los Angeles County
- Educate staff and clients on the importance of maintaining an undetectable viral load
- Protect client rights and ensure quality of care
- Safeguard client confidentiality, support client autonomy, and maintain a fair grievance process

- Deliver client-centered, age-appropriate, culturally and linguistically competent services
- Accurately assess client needs and support active involvement in treatment planning
- Ensure high quality services through trained and experienced staff
- Ensure telehealth services match the quality of in-person care
- Comply with all federal, state, and local safety, sanitation, and public health requirements
- Prevent IT security risks and protect client data and records
- Inform clients about services, determine eligibility and collect necessary information during intake
- Coordinate care and provide referrals to meet client needs

Section 1.0—General Service Provider Agency Policies

GENERAL SERVICE PROVIDER AGENCY POLICIES	
STANDARD	DOCUMENTATION
Service provider agencies must have a client confidentiality policy that follows all local, state, and federal laws to protect client’s HIV status, behavioral risk information, and use of services. The policy must also explain how confidentiality and patient information are protected when using telehealth, including required technology safeguards.	Written client confidentiality policy on file at service provider agency.
Service provider agencies must provide their service eligibility requirements upon request, and those requirements must follow DHSP guidance and HRSA’s Policy Clarification Notice #16-02.	Written eligibility requirements on file at service provider agency.
Service provider agencies must have a Release of Information form that specifies the receiving party, the information shared, the duration of consent, and the client’s signature. The form must meet HIPAA disclosure requirements and comply with the California Medi-Cal telehealth policy.	Completed Release of Information form on client file at service provider agency.
Service provider agencies must have a grievance policy that gives clients a way to address concerns about unfair treatment or poor service. The policy must outline how clients can file a grievance and include information about the Los	Written grievance policy on file at service provider agency.

Angeles County DHSP Customer Support Program (1-800-260-8787). This information must be visibly posted onsite or provided at the start of a telehealth visit.	
Client files must be securely stored—physically locked or password protected—and accessible only to authorized staff.	Written IT policies that outline how client information is protected on file at service provider agency.
Service provider agencies must keep clear, legible progress notes for each client that document every communication or service provided, including the date and the service delivered. Notes should also include any recommended referrals to needed services.	Progress notes maintained in individual client files at service provider agency.
Service provider agencies must have a crisis management policy that address how to respond to mental health crises and dangerous behaviors from clients or staff.	Written crisis management policy on file at service provider agency.
Service provider agencies must have a policy on Universal Precautions Procedures and maintain documentation that staff have been trained in these precautions.	Documentation of staff training in personnel files at service provider agency.
Service provider agencies must follow all relevant state and federal workplace and safety laws and all sites must meet ADA accessibility requirements.	Signed confirmation of compliance with applicable regulations on file at service provider agency.

Section 2.0—Client Rights and Responsibilities

CLIENT RIGHTS AND RESPONSIBILITIES	
STANDARD	DOCUMENTATION
Service provider agencies ensure services are accessible to all individuals who meet the service-specific eligibility criteria.	Written eligibility requirements on file at service provider agency.
Service provider agencies collect and incorporate input from PLWH to ensure services are client-centered.	Written documentation showing how client input is collected and used in service planning and evaluation.

Clients have the right to choose whether to use telehealth or in-person services (as applicable), and appointments must follow the client’s preferred mode of care. Service provider agencies ensure clients receive the IT support and training needed to use telehealth services effectively.	Written checklists or “how-to” guides before telehealth visits, delivered by email or posted on the service provider agency website.
Service provider agencies provide clients with a copy of the Client Bill of Rights and Responsibilities (Appendix B).	Signed Client Bill of Rights and Responsibilities document on client file at service provider agency.

Section 3.0—Staff Requirements and Qualifications

STAFF REQUIREMENTS AND QUALIFICATIONS	
STANDARD	DOCUMENTATION
Staff meet the minimum qualifications for their positions and have the knowledge, skills, and abilities needed to effectively serve their communities. If a position requires a license, staff must hold the appropriate license to provide services. Service provider agencies must adopt policies that support hiring people living with HIV in all appropriate areas of service delivery.	Hiring policy, staff resumes and copy of license (as appropriate) on file at service provider agency.
Staff participate in training relevant to their job duties, program needs, and the Ryan White Program service category.	Documentation of completed training on file at service provider agency.
Staff must coordinate with both Ryan White-funded and non-funded programs to ensure all client needs are met.	Documentation of staff efforts to coordinate client services across systems kept on file at service provider agency.

Section 4.0—Cultural and Linguistic Competence

CULTURAL AND LINGUISTIC COMPETENCE	
STANDARD	DOCUMENTATION
Recruit, promote, and support a culturally and linguistically diverse workforce that reflects and responds to the population served.	Written policy and documentation at service provider agency.
Service provider agencies develop or use existing culturally and linguistically appropriate policies	Written policy and documentation at service provider agency.

and practices and provide ongoing training to ensure staff consistently apply them.	
Clearly inform clients—verbally and in writing, and in their preferred language—about available language assistance services. Ensure interpreters are competent; avoid using untrained individuals or minors.	Written policy and documentation at service provider agency.
Offer easy-to-understand print and multimedia materials and signage in the primary languages of the service population at all clinic entry points and client service areas.	Written policy and documentation at service provider agency.

Section 5.0—Intake and Eligibility

INTAKE AND ELIGIBILITY	
STANDARD	DOCUMENTATION
Service provider agencies must have an intake procedure for determining client eligibility.	Written procedure describing intake workflow on file at service provider agency. Documentation must verify residency in Los Angeles County, Income at or below the Federal Poverty Level (FPL) set by the Division on HIV & STD Programs and confirmed HIV diagnosis.
Service provider agencies must complete an intake for clients which includes a review of client rights and responsibilities, explanation of available services, covers confidentiality and grievance policies, assess immediate needs, and obtains permission to release information as appropriate. Service provider agencies must begin intake process within 5 days of initial contact and be completed within 30 days. If the client does not complete intake within 30 days, document all contact attempts and the methods used in the client file.	Complete intake in client file at service provider agency.
Client intake forms must allow clients to indicate their preferred name and pronouns, and they must also explain the situations in which a legal name is required.	Written policy and documentation at Service Provider Agency.

Section 6.0—Referrals

REFERRALS AND CASE CLOSURE	
STANDARD	DOCUMENTATION
Service provider agencies will maintain a comprehensive list of providers for HIV-related and other service referrals. Staff will make referrals based on client assessments and reassessments, using identified agency resources.	All recommended referrals must be documented in client files at service provider agency.
Service provider agencies will follow-up with referrals made to ensure services were delivered as appropriate.	Documentation that the service provider agency follow-up with referrals.

Section 7.0—Case Closure

REFERRALS AND CASE CLOSURE	
STANDARD	DOCUMENTATION
Service provider agencies must establish a case closure procedure that includes documented justification and, when appropriate, a transition plan to other services or providers.	Written case closure procedure on file at service provider agency.
Cases may be closed if the client: • Relocates outside the service area • Is no longer eligible for RWHAP services • Discontinued services • No longer needs services • Poses a risk to the service provider agency, staff, or other clients • Misuses services or violates the service agreement • Is deceased • Has had no direct contact with the service provider agency for 12 months despite repeated outreach attempts	All contact attempts and communication methods must be documented, along with the justification for case closure.

Service provider agencies must have a transition procedure to support clients leaving services and ensure a smooth handoff.	Completed transition summary should be placed in the client file and signed by the client and supervisor when possible.
Service provider agencies will establish or use an existing due process policy for involuntary client removal, including a sequence of verbal and writer warnings before final notice and case closure.	Due Process policy kept on file at service provider agency.

Appendix A: Ryan White Part A Service Categories

The Ryan White HIV/AIDS Program Part A provides a comprehensive system of care for people living with HIV through two service categories:

- Core Medical services which are essential for the diagnosis, treatment, and management of HIV
- Support services which help clients achieve medical outcomes by addressing social, financial, and logistical barriers to care

Policy Clarification Notice (PCN) 16-02 provides program guidance for services categories for RWHAP services.

Core Medical Services	Supportive Services
• AIDS Drug Assistance Program (ADAP) • Local AIDS Pharmaceutical Assistance Program (LDAP) • Early Intervention services (EIS) • Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals • Home and Community-based Health Services • Home Health Care • Hospice Services • Medical Case Management, including Treatment Adherence Services • Medical Nutrition Therapy • Oral Health Care • Outpatient/Ambulatory Health Services • Substance Use Outpatient Care	• Childcare Services • Emergency Financial Assistance • Food Bank/Home Delivered Meals • Housing • Linguistic Services • Medical Transportation • Non-Medical Case Management Services • Other Professional Services, including Legal Services and Permanency Planning • Outreach Services • Psychosocial Support Services • Referral for Healthcare and Support Services • Rehabilitation Services • Respite Care • Substance Use Services (Residential)

Appendix B: Client Bill of Rights and Responsibilities

Service provider agencies are responsible to provide clients with a copy of the “Client Bill of Rights and Responsibilities” in all service settings, including telehealth. The purpose of this document is to empower clients to advocate for themselves and work in partnership with their service providers to achieve the best possible HIV/AIDS care and treatment.

Developed by people living with HIV in Los Angeles County, this Bill of Rights and Responsibilities affirms that individuals entering or receiving HIV/AIDS care, treatment, or support services have the right to:

1. Respective Treatment and Preventive Services
 - a. Receive considerate, respectful, professional, confidential, and timely care and preventive services (including screenings and vaccinations) in a safe, client-centered, trauma informed environment without bias.
 - b. Receive equal, unbiased care appropriate to your age and needs, in compliance with federal and state laws and regulations.
 - c. Receive information about your providers’ qualifications, including their experience with HIV/AIDS care.
 - d. Be informed of the names and work phone numbers of the staff responsible for your care.
 - e. Have safe accommodations to protect personal property while receiving services.
 - f. Receive culturally and linguistically appropriate services, including clear explanations in your preferred language and dialect.
 - g. Review your medical records and obtain copies upon request, subject to reasonable service provider agency policies and applicable fees.
2. Competent, High-Quality Care
 - a. Have your care provided by competent, qualified professionals who follow HIV treatment stands as set forth by the U.S. Department of Health and Human Services, the Centers for Disease Control and Prevention, the California Department of Health Services, and the County of Los Angeles Department of Public Health.
 - b. Have access to these professionals at convenient times and locations.
 - c. Receive appropriate referrals to other medical, mental health, or care services.
 - d. Have their phone calls and/or emails answered within 1-5 business days based on the urgency of the matter.
3. Participate in Treatment Decision-Making Process
 - a. Receive clear, up-to-date information in understandable terms about your diagnosis, treatment options, medications (including common side effects), and expected outcomes.
 - b. Actively participate with your providers in discussing treatment choices.
 - c. Make the final treatment decision after receiving all relevant information and your provider’s recommendations.
 - d. Access patient-specific education and reliable self-management resources.

- e. Refuse any recommended treatment, be informed of potential health impacts, and consequences, and retain the right to change your mind later.
 - f. Be informed about and offered the chance to participate in eligible clinical research studies.
 - g. Refuse to participate in research without any penalty.
 - h. Decline services or end participation in any program without bias or negative impact on your care.
 - i. Be informed of service provider agency procedures for addressing misunderstandings, complaints, or grievances.
 - j. Receive a response to any complaint or grievance within 45 days.
 - k. Be informed about external ombudsman or advocacy resources, including how to reach relevant federal complaint centers (CMS).
4. Confidentiality and Privacy
- a. Receive a copy of the service provider agency's Notice of Privacy Policies and Procedures.
 - b. Have your HIV status kept confidential and receive an explanation of confidentiality policies and any exceptions.
 - c. Request restricted access to specific parts of your medical record.
 - d. Authorize or withdraw permission for others to access your medical record, except for providers and billing.
 - e. Question information in your medical record and request written corrections (your provider may accept or decline with explanation).
5. Billing Information and Assistance
- a. Receive clear information about all potential charges and provider payment policies.
 - b. Receive information about financial assistance programs and help accessing any benefits for which you may qualify.
6. Client Responsibilities
- To support your care, you are responsible for:
- a. Participating in creating and following your treatment or service plan to the best of your ability.
 - b. Providing accurate, complete information about your health history, medications, and other treatments; reporting changes promptly.
 - c. Telling your provider when you do not understand information given to you.
 - d. Following the agreed-upon treatment plan and understanding the consequences of non-adherence or using alternative treatments.
 - e. Understanding that cases may be closed if the client:
 - i. Moves out of the service area
 - ii. Is no longer eligible for RWHAP services
 - iii. Discontinue services
 - iv. No longer need services
 - v. Pose a risk to the service provider agency, staff, or other clients
 - vi. Misuse services or violate the service agreement

- vii. Is deceased
- viii. Has no direct contact with the agency for 12 months despite repeated outreach
- f. Keeping appointments or notifying the agency promptly if unable to attend.
- g. Keeping the service provider agency informed of how to reach you confidentially.
- h. Following service provider agency rules and conduct guidelines.
- i. Treating providers and other clients with respect.
- j. Avoiding profanity, abusive language, threats, violence, weapons, theft, vandalism, and any form of sexual harassment or misconduct.
- k. If living with substance use disorder, being open with your provider about your substance use so appropriate support can be provided.

For more help or information:

Start by discussing any complaint or grievance with your provider or the service provider agency's client services representative or patient advocate. If the issue is not resolved in a reasonable timeframe, or if you prefer to speak with someone outside the service provider agency, you may call the number below for confidential, independent assistance.

Division on HIV and STD Programs, Customer Support Program 1-800-260-8787, 8am-5pm, Monday—Friday

Appendix C: Division on HIV and STD Programs Customer Support Program

The Division of HIV and STD Programs (DHSP) Customer Support Program helps clients who experience difficulty accessing services from DHSP-funded providers in Los Angeles County. If you or someone you know is having trouble obtaining HIV or STD services or has concerns about service quality, the program can assist.

Contact the Customer Support Program by email at dhspsupport@ph.lacounty.gov, online at <http://publichealth.lacounty.gov/dhsp/QuestionServices.htm>, or by phone at 1-800-260-8787. Reaching out will not affect your access to services, and your name and personal information can be kept confidential.

Appendix D: Get Protected LA and I'M+ LA Online Resources

The Division of HIV and STD Programs (DHSP) offers Get Protected LA and I'M+ LA, online resources with information about free or low-cost HIV care and support services available through the Ryan White Program for eligible people living with HIV in Los Angeles County regardless of insurance status. Visit: <https://getprotectedla.com/impositvela/>

