

RW Part A & EHE Taxonomy -Effective Oct 1, 2022

Service Category	Service Name	Quantity	Price	RSR Eligible Category	Definition	Access to HC Network	AIDS HC Foundation	Aid for AIDS of NV	Community Counseling Ctr	Community Outreach Medical Center	Dignity	Golden Rainbow	Huntridge	Impact Exchange	Nye County	North Country Healthcare	Southern Nevada Health District	UWCWellness	UNLV School of Dental Medicine
General Contact	General Contact	1 Unit = 1 Contact	N/A	No	Front office encounters and general coordination not related to a specific service category.	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Early Intervention Service	Early Intervention Services (EIS)	1 Unit = 1 Visit	N/A	Yes	Used for all EIS services provided during a single visit.		X	X					X				X	X	
Emergency Financial Assistance	Rent (EFA)	1 Unit = 1 Payment	Actual Cost	Yes	Used for making a short-term payment for rent/mortgage.							X			X	X			
	Utility Assistance (EFA)	1 Unit = 1 Payment	Actual Cost	Yes	Used for making a short term payment for utilities.							X			X	X			
	Food (EFA)	1 Unit = 1 Payment	Actual Cost	Yes	Used for making a short term payment for food, including groceries and food vouchers.							X			X	X			
	Medication Assistance (EFA)	1 Unit = 1 Payment	Actual Cost	Yes	Used for making a short term payment for medications.							X			X	X			
	Transportation (EFA)	1 Unit = 1 Payment	Actual Cost	Yes	Used for making a short term payment for transportation.							X			X	X			
	Vision (EFA)	1 Unit = 1 Payment	Actual Cost	Yes	Used for making a payment for prescription glasses.							X			X	X			
Food Bank/Home Delivered Meals	Food Bank/Pantry (FB/HDM)	1 Unit = 1 Visit	Actual Cost	Yes	Used for activities related to providing food bank/pantry item(s).	X					X				X	X			
	Food Voucher (FB/HDM)	1 Unit = 1 Voucher	Actual Cost	Yes	Used for activities related to providing a food voucher.	X					X				X	X			
	Home Delivered Meals (FB/HDM)	1 Unit = 1 Meal	Actual Cost	Yes	Used for activities related to providing prepared or semi-prepared delivered meal.	X					X				X	X			
	Household Cleaning Supplies (FB/HDM)	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for activities related to providing household cleaning supplies.	X					X				X	X			
	Personal Hygiene Products (FB/HDM)	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for activities related to providing a personal hygiene products.	X					X				X	X			
	Water Filtration System/Filter (FB/HDM)	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for activities related to providing water filtration system in areas where issues with water purity exist.	X					X				X	X			
Health Education/Risk Reduction	Health Education/Risk Reduction (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for activities related to education and addressing risk reduction needs in a group or individual setting, which do not fit into another service name.	X		X			X	X							
	U=U Game Night (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for U=U Game Night activities in group or individual setting.						X								
	A Better U (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for A Better U activities in group or individual setting.						X								
	Health Benefits Take Charge (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for Health Benefits Take Charge activities in group or individual setting.						X								
	Pathways (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for Pathways activities in group or individual setting.						X								
	Chronic Disease Self-Management Program (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for CDSMP activities in group or individual setting. Only for Certified CDSMP Providers						X								

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	Positive Self-Management Program (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for PSMP activities in group or individual setting. Only for Certified PSMP Providers						X								
Health Insurance Premium and Cost Sharing	HIP-CS Assistance (HIP-CS)	1 Unit = 1 Payment	Actual Cost	Yes	Used for activities related to providing financial assistance to cover the costs related to health insurance premiums, medical visit co-pays, co-insurances and deductibles.											X	X	X	
Linguistic Services	Oral, Written, Sign Language Interpretation/Translation (LS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to facilitating linguistically appropriate communication between a provider and client and/or support delivery of HRSA RWHP-eligible services.	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Medical Case Management	Assessment (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related assessment or reassessment of service needs including completing MCM Screening Tool and Acuity Tool. Also includes ongoing assessment of the client's and other key family members' needs and personal support systems.	X	X	X	X		X				X	X	X	X	
	Individualized Care Planning (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to development of a comprehensive, individualized service plan or re-evaluation of the care plan at least every 6 months with adaptations as needed.	X	X	X	X		X				X	X	X	X	
	Linkage, Referral & Related Activity (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to timely and coordinated access to medically appropriate levels of health and support services and continuity of care.	X	X	X	X		X				X	X	X	X	
	Client Monitoring (MCM)	1 Unit= 1 Service	N/A	Yes	Used for continuous client monitoring to assess the efficacy of the care plan.	X	X	X	X		X				X	X	X	X	
	Benefits Counseling (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to assisting clients in obtaining access to other public and private programs for which they may be eligible (e.g., Medicaid, Medicare Part D, State Pharmacy Assistance Programs, Pharmaceutical Manufacturer's Patient Assistance Programs, other state or local health care and supportive services, and insurance plans through the health insurance Marketplaces/Exchanges).	X	X	X	X		X				X	X	X	X	
	Treatment Adherence Counseling (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to treatment adherence counseling to ensure readiness for and adherence to complex HIV treatments	X	X	X	X		X				X	X	X	X	
	Eligibility Activity (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related to contact/interaction related establishing eligibility, including initial eligibility, annual review and 6-month recertification.	X	X	X	X		X				X	X	X	X	
	Discharge Summary (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related to case closure for services.	X	X	X	X		X				X	X	X	X	
Medical Transportation Services	24-Hour Bus Pass (MT)	1 Unit = 1 Pass	Actual Cost	Yes	Used for the issuance of a 24 hour bus pass.			X		X					X				
	Fuel Voucher (MT)	1 Unit = 1 Voucher	Actual Cost	Yes	Used for the issuance of a fuel voucher.			X		X					X				
	Ridesharing (MT)	1 Unit = 1 Ride	Actual Cost	Yes	Used for activities related to a one-way rideshare trip.			X		X					X				
	Ridesharing Missed (MT)	1 Unit = 1 Ride	Actual Cost	Yes	Used for activities related to a one-way rideshare trip that was missed.			X		X					X				
	Taxi Ride (MT)	1 Unit = 1 Ride or Voucher	Actual Cost	Yes	Used for activities related to a one-way taxi ride.			X		X					X				
	Van Ride (MT)	1 Unit = 1 Ride	N/A	Yes	Used for activities related to a one-way or roundtrip van ride.			X		X					X				
	Screening (MNT)	1 Unit = 1 Service	N/A	Yes	Used for activities related to a nutrition screening (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X						X		
	Assessment (MNT)	1 Unit = 1 Service	N/A	Yes	Used for activities related to completing a nutrition assessment or reassessment (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X						X		

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Medical Nutrition Therapy	Nutrition Planning (MNT)	1 Unit = 1 Service	N/A	Yes	Used for activities related to completing the service plan at assessment or reassessment (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X						X			
	Nutrition Education/Counseling (MNT)	1 Unit = 1 Service	N/A	Yes	Used for activities related to education and counseling addressing patient/client's medical nutrition needs in a group or individual setting (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X						X			
	Supplements (MNT)	1 Unit = 1 Payment	Actual Cost	Yes	Used for activities related to providing a supply of medical nutritional supplements (ordered by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X						X			
	Food or Food Voucher (MNT)	1 Unit = 1 Payment	Actual Cost	Yes	Used for activities related to providing a food or a food voucher, including produce through voucher, farmer's market program, etc. (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X							X		
	Client Monitoring (MNT)	1 Unit = 1 Service	N/A	Yes	Used for activities related to monitoring patient/client's service needs which do not fit into another service name (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X							X		
	Discharge Summary (MNT)	1 Unit = 1 Service	N/A	Yes	Used for activities related to closing client's medical nutrition therapy services (by a registered dietitian or other licensed nutrition professional, pursuant to medical provider referral).			X			X							X		
Mental Health Services	Screening (MHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to mental health screening.				X								X			
	Assessment (MHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to completing a mental health assessment or reassessment.				X								X			
	Treatment Planning (MHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to development, review and/or redevelopment of the mental health treatment plan.				X								X			
	Treatment Services (MHS)	1 Unit = 1 Service	Actual Cost		Used for the delivery of outpatient psychological and psychiatric treatment services to clients living with HIV - including group and individual counseling/therapy, medication management, crisis intervention and client monitoring.				X								X			
	Discharge Summary (MHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to closing patient/client's case for mental health services.				X								X			
Oral Healthcare	Dental Visit (OHC)	1 Unit = 1 Payment	Actual Cost	Yes	Used for activities related to dental visits and associated dental services.													X	X	
Outpatient Ambulatory Health Services	Office Visit (OAHS)	1 Unit = 1 Visit	Actual Cost	Yes	Used for all OAHS services provided during a single visit, including specialty care services.		X			X			X			X	X	X		
	Labs (OAHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for lab draws.		X			X			X			X	X	X		
	Treatment Adherence Consultation (OAHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to treatment adherence consultation by a licensed healthcare professional.		X			X			X			X	X	X		
Psychosocial Support Services	HIV Support Group (PSS)	1 Unit = 1 Service	N/A	Yes	Used for activities related to HIV support in a group setting.				X	X						X				
	Psychosocial Support (PSS)	1 Unit = 1 Service	N/A	Yes	Used for activities related to any other psychosocial support services in a group or individual setting, including peer navigation services.				X	X						X				
	Screening (SA-OP)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to substance use screening.				X								X			
	Assessment (SA-OP)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to completing a substance use assessment or reassessment.				X								X			

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Substance Abuse Outpatient Care	Treatment Planning (SA-OP)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to development, review and/or redevelopment of the substance use disorder (SUD) treatment plan.				X								X		
	Treatment Services (SA-OP)	1 Unit = 1 Service	Actual Cost	Yes	Used for the delivery of services needed for the treatment of a substance use disorder (SUD) indicated in the treatment plan - including group and individual counseling, relapse prevention, harm reduction, behavioral health counseling associated with SUD, medication-assisted therapy, neuro-psychiatric pharmaceuticals, acupuncture, crisis intervention and client monitoring.				X								X		
	Discharge Summary (SA-OP)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to closing patient/client's case for substance use services.				X								X		

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Service Category	Service Name	Quantity	Price	RSR Eligible Category	Definition	Access to HC Network	AIDS HC Foundation	Community Outreach Medical Center	Dignity	Golden Rainbow
General Contact	General Contact	1 Unit = 1 Contact	N/A	No	Front office encounters and general coordination not related to a specific service category.	X	X	X	X	X
Health Education/Risk Reduction	Health Education/Risk Reduction (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for activities related to education and addressing risk reduction needs in a group or individual setting, which do not fit into another service name.	X			X	X
	U=U Game Night (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for U=U Game Night activities in group or individual setting.				X	
	A Better U (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for A Better U activities in group or individual setting.				X	
	Health Benefits Take Charge (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for Health Benefits Take Charge activities in group or individual setting.				X	
	Pathways (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for Pathways activities in group or individual setting.				X	
	Chronic Disease Self-Management Program (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for CDSMP activities in group or individual setting. Only for Certified CDSMP Providers				X	
	Positive Self-Management Program (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for PSMP activities in group or individual setting. Only for Certified PSMP Providers				X	
Medical Case Management	Assessment (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related assessment or reassessment of service needs including completing MCM Screening Tool and Acuity Tool. Also includes ongoing assessment of the client's and other key family members' needs and personal support systems.	X	X	X		
	Individualized Service Planning (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to development of a comprehensive, individualized service plan or re-evaluation of the care plan at least every 6 months with adaptations as needed.	X	X	X		
	Linkage, Referral & Related Activity (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to timely and coordinated access to medically appropriate levels of health and support services and continuity of care.	X	X	X		
	Client Monitoring (MCM)	1 Unit= 1 Service	N/A	Yes	Used for continuous client monitoring to assess the efficacy of the care plan.	X	X	X		
	Benefits Counseling (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to assisting clients in obtaining access to other public and private programs for which they may be eligible (e.g., Medicaid, Medicare Part D, State Pharmacy Assistance Programs, Pharmaceutical Manufacturer's Patient Assistance Programs, other state or local health care and supportive services, and insurance plans through the health insurance Marketplaces/Exchanges).	X	X	X		

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Service Category	Service Name	Quantity	Price	RSR Eligible Category	Definition	Access to HC Network	AIDS HC Foundation	Community Outreach Medical Center	Dignity	Golden Rainbow
	Treatment Adherence Counseling (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to treatment adherence counseling to ensure readiness for and adherence to complex HIV treatments	X	X	X		
	Eligibility Activity (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related to contact/interaction related establishing eligibility, including initial eligibility, annual review and 6-month recertification.	X	X	X		
	Discharge Summary (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related to case closure for services.	X	X	X		
Outpatient Ambulatory Health Services	Office Visit (OAHS)	1 Unit = 1 Visit	Actual Cost	Yes	Used for all OAHS services provided during a single visit, including specialty care services.		X	X		
	Labs (OAHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for lab draws.		X	X		
	Treatment Adherence Consultation (OAHS)	1 Unit = 1 Service	Actual Cost	Yes	Used for activities related to treatment adherence consultation by a licensed healthcare professional.		X	X		
Psychosocial Support Services	HIV Support Group (PSS)	1 Unit = 1 Service	N/A	Yes	Used for activities related to HIV support in a group setting.			X		
	Psychosocial Support (PSS)	1 Unit = 1 Service	N/A	Yes	Used for activities related to any other psychosocial support services in a group or individual setting, including peer navigation services.			X		

Project Home Taxonomy

Service Category	Service Name	Quantity	Price	RSR Eligible Category	Definition
General Contact	General Contact	1 Unit = 1 Contact	N/A	No	Front office encounters and general coordination not related to a specific service category.
Food Bank/Home Delivered Meals	Food Bank/Pantry (FB/HDM)	1 Unit = 1 Visit	Actual Cost	Yes	Used for activities related to providing food bank/pantry item(s).
	Food Voucher (FB/HDM)	1 Unit = 1 Voucher	Actual Cost	Yes	Used for activities related to providing a food voucher.
	Home Delivered Meals (FB/HDM)	1 Unit = 1 Meal	Actual Cost	Yes	Used for activities related to providing prepared or semi-prepared delivered meal.
	Household Cleaning Supplies (FB/HDM)	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for activities related to providing household cleaning supplies.
	Personal Hygiene Products (FB/HDM)	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for activities related to providing a personal hygiene products.
	Water Filtration System/Filter (FB/HDM)	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for activities related to providing water filtration system in areas where issues with water purity exist.
Health Education/Risk Reduction	Health Education/Risk Reduction (HE/RR)	1 Unit = 1 Service	N/A	Yes	Used for activities related to education and addressing risk reduction needs in a group or individual setting, which do not fit into another service name.
Housing	Assessment (Housing)	1 Unit = 1 Service	N/A	Yes	Used for activities related housing assessment or reassessment.
	Individualized Housing Planning (Housing)	1 Unit = 1 Service	N/A	Yes	Used for activities related to development of an individualized housing plan or re-evaluation of the plan at least every 12 months with adaptations as needed. Plan must include activities that guide linkage to permanent housing.
	Housing Assistance Payment (Housing)	1 Unit = 1 Payment	Actual Cost	Yes	Used for paying the cost of transitional, short-term or emergency housing assistance to enable a client or family to gain or maintain outpatient/ambulatory health services and treatment, including temporary assistance necessary to prevent homelessness and to gain or maintain access to medical care. May NOT include mortgage payments or rental deposits.
	Housing-Related Activities (Housing)	1 Unit = 1 Service	N/A	Yes	Used for activities related to housing referral, search, placement and advocacy.

Project Home Taxonomy

Service Category	Service Name	Quantity	Price	RSR Eligible Category	Definition
	Discharge Summary (Housing)	1 Unit = 1 Service	N/A	Yes	Used for activities related to case closure for housing services.
Initiative Services	Move-In Kits	1 Unit = 1 Kit	Actual Cost	Yes	Used for move-in kits for clients being housed through Project Home
	School Supplies	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for school supplies for Project Home clients attending educational programs.
	Childcare Supplies	1 Unit = 1 Payment or Voucher	Actual Cost	Yes	Used for childcare supplies for pregnant/parenting clients of Project Home (i.e. diapers, bottles, wipes).
Medical Case Management	Assessment (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related assessment or reassessment of service needs including completing MCM Screening Tool and Acuity Tool. Also includes ongoing assessment of the client's and other key family members' needs and personal support systems.
	Individualized Service Planning (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to development of a comprehensive, individualized service plan or re-evaluation of the care plan at least every 6 months with adaptations as needed.
	Linkage, Referral & Related Activity (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to timely and coordinated access to medically appropriate levels of health and support services and continuity of care.
	Client Monitoring (MCM)	1 Unit= 1 Service	N/A	Yes	Used for continuous client monitoring to assess the efficacy of the care plan.
	Benefits Counseling (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to assisting clients in obtaining access to other public and private programs for which they may be eligible (e.g., Medicaid, Medicare Part D, State Pharmacy Assistance Programs, Pharmaceutical Manufacturer's Patient Assistance Programs, other state or local health care and supportive services, and insurance plans through the health insurance Marketplaces/Exchanges).
	Treatment Adherence Counseling (MCM)	1 Unit= 1 Service	N/A	Yes	Used for activities related to treatment adherence counseling to ensure readiness for and adherence to complex HIV treatments
	Eligibility Activity (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related to contact/interaction related establishing eligibility, including initial eligibility, annual review and 6-month recertification.

Project Home Taxonomy

Service Category	Service Name	Quantity	Price	RSR Eligible Category	Definition
	Discharge Summary (MCM)	1 Unit = 1 Service	N/A	Yes	Used for activities related to case closure for services.
Medical Transportation Services	24-Hour Bus Pass (MT)	1 Unit = 1 Pass	Actual Cost	Yes	Used for the issuance of a 24 hour bus pass.
	Fuel Voucher (MT)	1 Unit = 1 Voucher	Actual Cost	Yes	Used for the issuance of a fuel voucher.
	Ridesharing (MT)	1 Unit = 1 Ride	Actual Cost	Yes	Used for activities related to a one-way rideshare trip.
	Ridesharing Missed (MT)	1 Unit = 1 Ride	Actual Cost	Yes	Used for activities related to a one-way rideshare trip that was missed.
	Taxi Ride (MT)	1 Unit = 1 Ride or Voucher	Actual Cost	Yes	Used for activities related to a one-way taxi ride.
	Van Ride (MT)	1 Unit = 1 Ride	N/A	Yes	Used for activities related to a one-way or roundtrip van ride.
Psychosocial Support Services	HIV Support Group (PSS)	1 Unit = 1 Service	N/A	Yes	Used for activities related to HIV support in a group setting.
	Psychosocial Support (PSS)	1 Unit = 1 Service	N/A	Yes	Used for activities related to any other psychosocial support services in a group or individual setting, including peer navigation services.