



D. Early Intervention Services

Service Definition

Early Intervention Services (EIS) are a combination of four components that aim to find and link to services individuals who are newly diagnosed, individuals returning to care after a prolonged treatment interruptions of six months or more, and individuals who are new to the area, or HIV medical care.

The four components of EIS are:

- Targeted HIV testing provided through Counseling, Testing and Referral (CTR) services.
- Referral services provided through Partner Services (PS).
- Access to care provided through Linkage to Care (LTC).
- Outreach, health education, and risk reduction provided through Peer Navigation services.

The goals of EIS are to assist clients to:

- Develop acceptance of HIV status.
- Identify personal strengths to overcome barriers to enter or re-enter into HIV medical care.
- Identify both individual and system barriers to entry or re-entry into HIV medical care.
- Develop and carry out a plan for overcoming barriers to entry or re-entry into HIV medical care.
- Progress into the next level of support, ranging from:
 - Independent engagement in care.
 - Brief support to maintain engagement in care.
 - Medical or non-medical case management to maintain engagement in care.

Recipients providing Life Care and Early Intervention Services (LCEIS) Early Intervention Services are expected to comply with the [LCEIS Universal Standards of Care](#), as well as the standards outlined below.

Standard 1: EIS providers ensure services are delivered in accordance with the Wisconsin LCEIS Eligibility and Recertification Policy and Procedures.

Providers are responsible for determining eligibility at enrollment and to confirm eligibility annually.

Documentation

Client records must document that the client is living with HIV or is not living with HIV and using pre-exposure prophylaxis (PrEP) and resides in Wisconsin at initial enrollment in accordance with the [Wisconsin LCEIS Eligibility Policy](#).

Standard 2: Targeted HIV testing provided through EIS must be delivered in accordance with the Counseling, Testing, and Referral (CTR) Protocol.

Providers are responsible for being familiar with and meeting the requirements of CTR services outlined in the [HIV Counseling, Testing, and Referral Protocol](#).

Documentation

The client record must follow documentation expectations outlined in the CTR Protocol, linked above.

Standard 3: Referral services provided through EIS must be delivered in accordance with the Wisconsin HIV Partner Services (PS) Practice Standards and Policy Manual.

Providers are responsible for being familiar with and meeting the requirements of PS outlined in the Wisconsin HIV PS Practice Standards and Policy Manual.

Documentation

The client record must follow documentation expectations outlined in the Wisconsin HIV PS Practice Standards and Policy Manual.

Standard 4: Access and linkage to care provided through EIS must be delivered in accordance with the Linkage to Care (LTC) Standards and LTC Specialist Program Manual.

Providers are responsible for being familiar with and meeting the requirements of LTC services outlined in the [LTC Standards](#) and [LTC Specialist Program Manual](#).

Documentation

The client record must follow documentation expectations outlined in the LTC Standards and LTC Specialist Program Manual, linked above.

Standard 5: Outreach, health education, and risk reduction provided through EIS must be delivered in accordance with the Peer Navigator for People Living with HIV Manual.

Providers are responsible for being familiar with and meeting the requirements of peer navigation services outlined in the [Peer Navigator for People Living with HIV Manual](#).

Documentation

The client record must follow documentation expectations outlined in the Peer Navigator for People Living with HIV Manual, linked above.

Standard 6: EIS providers must make referrals for other services as needed.

Referrals must be made to other needed services at key points of entry that are accessible and acceptable to the client.

Other needed services might include:

- Medical Case Management.
- Non-Medical Case Management.
- Partner Services.
- Medication adherence services.
- Partner or couple's HIV testing.
- Screening and treatment for STIs, hepatitis, or TB.
- Reproductive health services.
- Counseling and services for mental health, substance use and/or domestic violence.
- Housing services.
- Insurance benefit services.
- Any other social and behavioral services.

Documentation

The client record must include documentation of referrals to other needed services, follow up, and result(s) of all referrals.