

APPENDIX	NAME	STATUS	REVISION DATE	PAGE NO.	NO. OF PAGES	CONTAINS REQUIRED INFORMATION
A	Common Acronyms in HIV/AIDS Services	NO CHANGE	5/22/2013	64	3	NO
B	Definitions Referenced in the Program Manual	NO CHANGE	5/22/2013	67	6	NO
C	Access-A-Ride	NO CHANGE	10/7/2011	72	1	NO
D	Childcare Services	NO CHANGE	10/7/2011	73	1	NO
E	Benefits Programs Listed through AccessNYC	NO CHANGE	10/7/2011	74	1	NO
F	NYC Harm Reduction Syringe Access Programs	UPDATED	January 2014	75	1	NO
G	Criteria for Transition between Service Levels	NO CHANGE	5/22/2013	78	2	NO
H	Health Promotion Topics Included in Curriculum	NO CHANGE	10/7/2011	80	2	NO
I	Recommended Staffing Plan	NO CHANGE	5/22/2013	82	2	NO
J	Training Resources	NO CHANGE	5/22/2013	84	2	NO
K	City, State and National Resource List	NO CHANGE	5/22/2013	86	1	NO
L	Pre-Referral to CC Program Form	NO CHANGE	2/24/2011	87	2	IF APPLICABLE
M	PCP Referral Disposition Form	NO CHANGE	2/24/2011	90	2	YES
N	Ryan White Part A Care Coordination Program Agreement (English)	NO CHANGE	1/25/2009	93	4	YES
O	Ryan White Part A Care Coordination Program Agreement (Spanish)	NO CHANGE	10/22/2010	98	4	YES
P	HIPAA Compliant Authorization for Release of Medical Information and Confidential HIV Related Information (English)	NO CHANGE	1/21/2010	103	4	IF APPLICABLE
Q	HIPAA Compliant Authorization for Release of Medical Information and Confidential HIV Related Information (Spanish)	NO CHANGE	1/21/2010	108	4	IF APPLICABLE
R	Contact Information Form	NO CHANGE	12/28/2009	113	2	NO
S	Logistics for Navigator Form	NO CHANGE	12/28/2009	116	2	NO
T	Common Demographics Form	UPDATED	1/3/2014	119	1	YES
U	Intake Assessment Form	UPDATED	4/16/2014	121	10	YES
V	SF-12v2™ General Health and Wellbeing Survey (Spanish)	NO CHANGE	5/22/2013	132	2	YES
W	Adherence Assessment (ART Daily Regimens Only)	NO CHANGE	9/20/2012	135	2	IF APPLICABLE
X	Adherence Assessment (ART Non-Daily Regimens Only)	NO CHANGE	9/20/2012	138	2	IF APPLICABLE
Y	Comprehensive Care Plan	NO CHANGE	9/29/2011	141	5	NO
Z	Referrals/Appointments Tracking Log	NO CHANGE	9/28/2011	147	2	NO
AA	PCSM Update	NO CHANGE	9/28/2011	150	2	YES
BB	Curriculum Coverage Log	NO CHANGE	1/15/2010	153	2	NO
CC	Pill Box Log (ART Only) - For Daily Regimens	NO CHANGE	9/23/2011	156	2	IF APPLICABLE
DD	Pill Box Log (ART Only) - For Non-Daily Regimens	NO CHANGE	9/23/2011	159	2	IF APPLICABLE
EE	Monthly DOT Log (ART Only)	NO CHANGE	2/11/2011	162	2	IF APPLICABLE
FF	Care Coordination Case Conference Form	NO CHANGE	2/11/2011	165	2	YES
GG	Reassessment Form	UPDATED	1/16/2014	168	9	YES
HH	Status Change Information Form (Track and Treatment Status)	NO CHANGE	9/28/2011	178	1	YES
II	Status Change Information Form (Case Closure/Suspension)	NO CHANGE	9/27/2011	180	1	YES
JJ	Services Tracking Log	UPDATED	4/17/2014	182	4	YES
KK	Care Coordination eSHARE Mapping	UPDATED	4/28/2014	187	1	NO
LL	Guide to Care Coordination Forms	UPDATED	5/23/2014	189	24	NO

**NOTE: Appendix V [SF-12v2™ General Health and Wellbeing Survey (Spanish)]** may be used to supplement Spanish transmissions of the Intake Assessment Form and the Reassessment Form.