

**Houston Area HIV Services Ryan White Planning Council**  
**Office of Support**  
2223 West Loop South, Suite 240, Houston, Texas 77027  
713 572-3724 telephone; 713 572-3740 fax  
[www.rwpchouston.org](http://www.rwpchouston.org)

**Memorandum**

To: Members, Priority and Allocations Committee:  
Peta-gay Ledbetter, Co-Chair   Angela F. Hawkins  
C. Bruce Turner, Co-Chair     J. Hoxi Jones  
Rodriga Avila                   John Lazo  
Melody Barr                     Isis Torrente  
Ella Collins-Nelson  
Paul Grunenwald

Copy: Carin Martin                   Rodney Goodie  
Heather Keizman                 Ann Robison  
Amber Harbolt                   Johnetta Evans-Thomas  
Tasha Traylor                   Katy Caldwell  
Yvette Garvin                   Levonnie Harrell  
Joe Fuentes, Jr.                 Nancy Miertschin

From: Tori Williams

Date: Monday, June 6, 2016

Re: Meeting Announcement

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This memo is a reminder that there will be a number of Priority and Allocations Committee meetings in June 2016. Enclosed you will find agendas and other materials which you will need to bring to the meetings. To support you in your efforts, lunch will be provided at each of the meetings. Do not hesitate to call our office if you have questions. Otherwise, we look forward to seeing you at:

**Special Priority & Allocations Committee Meetings (see enclosed agendas)**

To develop the FY 2017 allocations for Part A, B & State Services

- 11 am – 3 pm, Monday, June 13, 2016
- 11 am – 3 pm, Tuesday, June 14, 2016
- IF NECESSARY: 11 am – 3 pm, Wednesday, June 15, 2016

**Regularly Scheduled Committee Meeting (agenda will be sent at a later date)**

The whole Committee will vote on the FY 2017 allocations developed at the special meetings.

- 11 a.m., **Wednesday**, June 22, 2016

**Final Special Meeting (see enclosed agenda):**

To review public comment and possibly amend the recommended FY 2017 priorities and allocations before they receive final approval at the July Steering Committee and Council meetings.

- 11 a.m., Tuesday, June 28, 2016

We appreciate your valuable time and look forward to seeing a lot of you in June!

**Houston Area HIV Services Ryan White Planning Council      DRAFT**  
**Priority & Allocations Committee Meeting**

11 a.m., Monday, June 13, 2016

Meeting Location: 2223 West Loop South, Room 240  
Houston, TX 77027

**AGENDA**

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- I. Call to Order Peta-gay Ledbetter and  
Bruce Turner, Co-Chairs
- A. Moment of Reflection
- B. Approval of Agenda
- C. Review Meeting Goals Tori Williams, Manager  
Office of Support
- II. Public Comment
- (NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up on the clipboard at the front of the room. No one is required to give his or her name or HIV/AIDS status. All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV/AIDS status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: "I am a person with HIV/AIDS", before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization. If you work for an organization, but are representing your self, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting. The Chair of the Council has the authority to limit public comment to 1 minute per person. All information from the public must be provided in this portion of the meeting. Council members please remember that this is a time to hear from the community. It is not a time for dialogue. Committee members and staff are asked to refrain from asking questions of the person giving public comment.)
- III. Review Other Ryan White Planning Committee Recommendations Tori Williams
- A. FY 2017 Service Definitions
- IV. Updates from the Administrative Agents
- A. Ryan White Part A/MAI Carin Martin, RWGA
- B. Ryan White Part B and State Services Funding Yvette Martin, TRG
- V. Draft Allocations for FY 2017 Part A/MAI, Part B & State Services Funding
- A. Determine the overall philosophy for allocating FY 2017 monies
- B. Review how MAI funding works Carin Martin
- C. Create the FY 2017 Level Funding Scenario
- 1) Part A and MAI
- 2) Part B and State Services
- D. Create the FY 2017 Increase Funding Scenario
- E. Create the FY 2017 Decrease Funding Scenario
- VI. Announcements
- A. IMPORTANT: Priority and Allocation Committee Meeting Dates and Times:
- 11 am – 3 pm, Tues., June 14, 2016 – Continue drafting FY 2017 Allocations
  - 11 am – 3 pm, Wed., June 15, 2016 – Finish drafting FY 2017 Allocations
  - 11 am, **Wed.**, June 22, 2016 - Committee votes on FY17 Allocations
  - 7 pm, Mon., June 27, 2016 – Public Hearing for the FY 2017 Priorities & Allocations
  - 11 am, Tues., June 28, 2016 – Review comments from Public Hearing
- VII. Adjourn

**Houston Area HIV Services Ryan White Planning Council  
Priority & Allocations Committee Meeting**

11:00 a.m., Tuesday, June 14, 2016

Meeting Location: 2223 West Loop South, Room 240  
Houston, TX 77027

**AGENDA**

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- I. Call to Order Peta-gay Ledbetter and  
Bruce Turner, Co-Chairs
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- III. Draft Allocations for FY 2017 Part A/MAI, Part B & State Services Funding
- A. Review the overall philosophy for allocating FY 2017 monies
- B. Create the FY 2017 Level Funding Scenario
- 1) Part A and MAI
- 2) Part B and State Services
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**Houston Area HIV Services Ryan White Planning Council  
Priority & Allocations Committee Meeting**

11:00 a.m., Wednesday, June 15, 2016

Meeting Location: 2223 West Loop South, Room 240  
Houston, TX 77027

**AGENDA**

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- Tori Williams, Manager  
Office of Support
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- III. Draft Allocations for FY 2017 Part A/MAI, Part B & State Services Funding
- A. Review the overall philosophy for allocating FY 2017 monies
  - B. Create the FY 2017 Level Funding Scenario
    - 1) Part A and MAI
    - 2) Part B and State Services
  - C. Create the FY 2017 Increase Funding Scenario
  - D. Create the FY 2017 Decrease Funding Scenario
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- A. IMPORTANT: Priority and Allocation Committee Meeting Dates and Times:
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**FY 2017 How to Best Meet the Need**  
**Steering Committee**  
**Service Category Recommendations Summary (as of 06/03/16)**

***Those services for which no change is recommended include:***



Ambulatory Outpatient Medical Care	Local Pharmacy Assistance
Case Management - Non-Medical (service linkage at testing sites)	Medical Nutritional Therapy/Supplements
Early Intervention Services targeting the Incarcerated	Mental Health Services
Home and Community Based Health Services	Oral Health (Untargeted and Targeting the Northern Rural Area)
Hospice Services	Substance Abuse Treatment
Linguistic Services	Vision Care

***Services with recommended changes include the following:***



**Case Management (Medical and Clinical)**

-  Instruct the AA to work with MCM to be more active at finding those who are specifically lost to care and work closely with DIS workers to find.






**Health Insurance Premium and Cost Sharing Assistance**

-  Update the service category definition to reflect the new HRSA definition
-  ACA/Marketplace Plan clients must have documentation showing they receive IRS subsidy.


**Legal Assistance**

-  Update the name of the service category to Other Professional Services.
-  Set the financial eligibility for Other Professional Services at 400% and provide Tax Preparation Services.

**Outreach Services/Primary Care Re-Engagement**

-  Update the name of the service category to Primary Care Retention in Care.
-  Under Target Population add “youth transitioning to adult care”
-  Keep Staff Requirements broad so that it is not a licensed position.
-  Set the financial eligibility at 0% of the federal poverty guidelines.
-  Replace the words “individual with HIV infection” with the words “people living with HIV”.

**Transportation**

-  Increase the financial eligibility for all transportation services (bus passes, van service and gas vouchers) to 400% of the federal poverty guidelines.

## 2016 HHS Federal Poverty Guidelines

Effective Date: January 25, 2016

Poverty Level	Size of Family Unit							
	1	2	3	4	5	6	7	8
100%	11,880	16,020	20,160	24,300	28,440	32,580	36,730	40,880
133%	15,800	21,307	26,813	32,319	37,825	43,331	48,851	54,370
150%	17,820	24,030	30,240	36,450	42,660	48,870	55,095	61,320
200%	23,760	32,040	40,320	48,600	56,880	65,160	73,460	81,760
250%	29,700	40,050	50,400	60,750	71,100	81,450	91,825	102,200
300%	35,640	48,060	60,480	72,900	85,320	97,740	110,190	122,640
350%	41,580	56,070	70,560	85,050	99,540	114,030	128,555	143,080
400%	47,520	64,080	80,640	97,200	113,760	130,320	146,920	163,520
450%	53,460	72,090	90,720	109,350	127,980	146,610	165,285	183,960
500%	59,400	80,100	100,800	121,500	142,200	162,900	183,650	204,400

For family units with more than 8 members, add \$4,160 for each additional member. (The same increment applies to smaller family sizes also, as can be seen in the figures above.)

SUR - 4th Quarter Cumulative (3/1-2/28)																	
Priority	Service Category	Goal	Unduplicated Clients Served YTD	Male	Female	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6,467	7,216	73%	27%	50%	15%	2%	32%	0%	1%	7%	24%	28%	14%	25%	2%
1.a	Primary Care--Public Clinic (a)	2,350	3,623	69%	31%	54%	10%	2%	34%	0%	0%	4%	18%	27%	15%	33%	2%
1.b	Primary Care--CBO-Targeted to AA (a) (g)	1,060	1,568	69%	31%	99%	0%	1%	0%	0%	1%	2%	34%	28%	10%	14%	1%
1.c	Primary Care--CBO-Targeted to Hispanic (a) (g)	960	981	84%	16%	0%	0%	0%	100%	0%	0%	6%	29%	35%	13%	15%	1%
1.d	Primary Care--CBO-Targeted to White and/or MSM (a)	690	692	88%	12%	0%	90%	10%	0%	0%	0%	5%	25%	25%	16%	26%	2%
1.e	Primary Care--CBO-Targeted to Rural (a)	400	506	70%	30%	41%	26%	2%	30%	0%	1%	9%	25%	29%	15%	19%	1%
1.f	Primary Care--Women at Public Clinic (a)	1,000	1,112	0%	100%	65%	7%	1%	28%	0%	0%	3%	16%	31%	17%	31%	2%
1.g	Primary Care - Pediatric (a)	7	13	69%	31%	54%	8%	0%	38%	15%	46%	38%	0%	0%	0%	0%	0%
1.h	Vision	1,800	2,152	75%	25%	48%	17%	2%	34%	0%	0%	6%	22%	25%	15%	30%	3%
2	Local Drug Reimbursement Program (a)	2,845	3,931	78%	22%	47%	18%	2%	33%	0%	0%	7%	29%	30%	15%	18%	1%
3	Medical Case Management (f)	3,075	5,261														
3.a	Clinical Case Management	600	1,018	73%	27%	54%	29%	2%	15%	0%	0%	5%	21%	24%	13%	34%	2%
3.b	Med CM - Targeted to Public Clinic (a)	280	528	98%	2%	53%	12%	2%	33%	0%	2%	15%	18%	20%	12%	32%	3%
3.c	Med CM - Targeted to AA (a)	550	1,987	69%	31%	99%	0%	1%	0%	0%	1%	11%	31%	25%	12%	19%	1%
3.d	Med CM - Targeted to H/L (a)	550	811	86%	14%	0%	0%	0%	100%	0%	1%	9%	32%	30%	13%	15%	1%
3.e	Med CM - Targeted to White and/or MSM (a)	260	560	85%	15%	0%	92%	8%	0%	0%	0%	4%	25%	22%	17%	29%	4%
3.f	Med CM - Targeted to Rural (a)	150	695	69%	31%	44%	28%	2%	26%	0%	1%	7%	20%	26%	15%	29%	3%
3.g	Med CM - Targeted to Women at Public Clinic (a)	240	301	0%	100%	69%	7%	1%	23%	0%	0%	11%	15%	28%	14%	29%	2%
3.h	Med CM - Targeted to Pedr (a)	125	113	53%	47%	81%	4%	0%	15%	60%	27%	12%	0%	0%	0%	0%	0%
3.i	Med CM - Targeted to Veterans	200	178	94%	6%	67%	21%	1%	11%	0%	0%	0%	3%	3%	5%	68%	20%
3.j	Med CM - Targeted to Youth	120	88	98%	2%	59%	7%	1%	33%	0%	10%	90%	0%	0%	0%	0%	0%
4	Oral Health	200	302	69%	31%	37%	35%	1%	26%	0%	0%	7%	21%	32%	13%	25%	3%
4.a	Oral Health - Untargeted (d)	NA	NA	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
4.b	Oral Health - Rural Target	200	302	69%	31%	37%	35%	1%	26%	0%	0%	7%	21%	32%	13%	25%	3%
5	Medical Nutritional Therapy/Nutritional Supplements	650	521	78%	22%	40%	26%	3%	30%	0%	0%	3%	13%	21%	18%	40%	5%
6	Mental Health Services (d)	NA	NA														
7	Health Insurance	1,700	1,393	83%	17%	41%	30%	3%	26%	0%	0%	3%	19%	23%	16%	36%	3%
8	Substance Abuse Treatment - Outpatient	40	24	96%	4%	21%	63%	0%	17%	0%	0%	13%	29%	38%	8%	13%	0%
9	Hospice Services (d)	NA	NA														
10	Home and Community Based Services (d)	NA	NA														
11	Early Medical Intervention Services (d)	NA	NA														
12	Non-Medical Case Management	7,045	6,805														
12.a	Service Linkage Targeted to Youth	320	234	77%	23%	63%	5%	1%	30%	0%	12%	88%	0%	0%	0%	0%	0%
12.b	Service Linkage at Testing Sites	260	206	67%	33%	69%	10%	2%	19%	0%	0%	0%	29%	26%	13%	32%	0%
12.c	Service Linkage at Public Clinic Primary Care Program (a)	3,700	2,942	67%	33%	61%	11%	1%	27%	0%	0%	0%	18%	26%	15%	38%	3%
12.d	Service Linkage at CBO Primary Care Programs (a)	2,765	3,423	75%	25%	55%	15%	2%	29%	2%	1%	8%	27%	26%	13%	22%	2%
13	Food Pantry (funded by State Services)	NA	NA														
14	Transportation	2,850	3,374														
14.a	Transportation Services - Urban	170	509	73%	27%	58%	12%	2%	28%	0%	1%	10%	28%	29%	9%	20%	3%
14.b	Transportation Services - Rural	130	165	70%	30%	39%	38%	2%	21%	0%	1%	10%	19%	19%	19%	27%	4%
14.c.1	Transportation vouchers (bus passes)	2,500	2,612														
14.c.2	Transportation vouchers (gas vouchers)	50	88														
15	Legal Assistance	390	221	62%	38%	49%	23%	1%	27%	0%	0%	1%	7%	26%	19%	43%	5%
16	Linguistic Services (d)	NA	NA														
Net unduplicated clients served - all categories*		10,200	11,966	74%	26%	53%	17%	2%	29%	1%	1%	6%	22%	25%	14%	29%	3%
Living AIDS cases + estimated Living HIV non-AIDS (from FY 14 App) (b)		NA	22,830	74%	26%	49%	23%	3%	25%	0%	6%	6%	18%	27%	30%	18%	
*10,200 clients to be served is based on the number of unduplicated clients served in FY 2014 (update per CPCDMS)																	

RW MAI Service Utilization Report																	
Priority	Service Category	Goal	Unduplicated MAI Clients Served YTD	Male	Female	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
	MAI unduplicated served includes clients also served under Part A																
1.b	Primary Care - MAI CBO Targeted to AA (g)	1,060	1,571	72%	28%	99%	0%	1%	0%	0%	1%	12%	37%	26%	10%	13%	0%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	960	1,162	87%	13%	0%	0%	0%	100%	0%	1%	7%	31%	34%	13%	12%	1%
RW Part A New Client Service Utilization Report																	
Report reflects the number & demographics of clients served during the report period who did not receive services during previous 12 months (3/1/15 - 2/29/16)																	
Priority	Service Category	Goal	Unduplicated New Clients Served YTD	Male	Female	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	Primary Medical Care	2,100	1,721	78%	22%	55%	14%	2%	29%	0%	2%	12%	33%	24%	11%	18%	1%
2	LPAP	1,200	721	82%	18%	52%	17%	2%	29%	0%	2%	10%	38%	23%	13%	13%	1%
3.a	Clinical Case Management	400	167	80%	20%	54%	26%	2%	19%	0%	2%	9%	29%	20%	13%	26%	1%
3.b-3.h	Medical Case Management	1,600	1,161	77%	23%	57%	16%	2%	25%	3%	3%	14%	30%	22%	11%	17%	1%
3.i	Medical Case Management - Targeted to Veterans	60	54	96%	4%	63%	26%	2%	9%	0%	0%	0%	6%	4%	7%	67%	17%
4	Oral Health	40	38	82%	18%	39%	39%	0%	21%	0%	0%	13%	32%	21%	11%	24%	0%
12.a. 12.c. 12.d.	Non-Medical Case Management (Service Linkage)	3,700	1,729	75%	25%	58%	14%	2%	27%	2%	2%	9%	28%	24%	12%	22%	2%
12.b	Service Linkage at Testing Sites	260	146	72%	28%	70%	4%	1%	25%	0%	5%	15%	29%	20%	10%	21%	1%
Footnotes:																	
(a)	Bundled Category																
(b)	Age groups 13-19 and 20-24 combined together; Age groups 55-64 and 65+ combined together																
(d)	Funded by Part B and/or State Services																
(f)	Total MCM served does not include Clinical Case Management																
(g)	CBO Pcare targeted to AA (1.b) and HL (1.c) goals represent combined Part A and MAI clients served																



Working Draft

DRAFT  
Houston Ryan White Planning Council  
FY 2017 Council Support Budget  
Includes FY 2016 3% Cost of Living Increase  
(Prepared 05-10-16)

		Subtotal	Total
<b>PERSONNEL</b>			
<b>RWPC Manager (V. Williams)</b>		\$79,446	\$258,002
(\$66205/mo. X 12 mos. X 100%)			
Responsible for overall functioning of planning council, supervises all support staff.			
<b>RWPC Health Planner (A. Alvarez)</b>	6068	\$72,820	
Responsible for coordinating Comprehensive Planning and Needs Assessment activities. Analyzing and presenting data.			
<b>RWPC Coordinator (D. Beck)</b>		\$56,611	
(\$4,718/mo x 12 mos. X 100%)			
Coordinates support activities for the RW Planning Council and committees. Provides routine administrative duties (minutes, scheduling of meetings, mailouts, etc.).			
<b>Assistant Coordinator (E. Moreno)</b>		\$49,125	
(\$4094/mo x 12 mos. X 100%)			
Coordinates support activities for assigned committees. Provides routine administrative duties (minutes, scheduling of meetings, mailouts, etc.)			
<b>FRINGE</b>		\$102,201	
Social Security @ 7.65%		\$19,737	
Health Insurance (4 x \$11,116/FTE)		\$47,200	
Retirement @ 10.75%		\$27,735	
Workers Compensation @ 0.83%		\$2,141	
Supplemental Death Insurance @ 0.50		\$1,290	
Unemployment Insurance @ 0.60%		\$1,548	
Incentives/allowances		\$2,550	
			+ \$ 1,879
			+ \$ 381

**DRAFT**  
**Houston Ryan White Planning Council**  
**FY 2017 Council Support Budget**  
**Includes FY 2016 3% Cost of Living Increase**  
(Prepared 05-10-16)

		Subtotal	Total
<b>EQUIPMENT</b>	\$3,000	<b>\$3,000</b>	+ \$653
Replacement computers to replace obsolete units			
<b>TRAVEL</b>		<b>\$5,800</b>	- \$4,840
Local travel @ \$0.575/mile for Planning Council Support Staff	\$800		
Out of EMA travel:	\$5,000		
One out of state trip for Office of Support staff for HIV planning meeting and five in State trips for staff and/or volunteer Council members for statewide HIV Planning meetings			
<b>SUPPLIES</b>	\$6,000	<b>\$6,000</b>	
General consumable office supplies including materials for Council Members and Public Meetings			
<b>CONTRACTUAL</b>	\$0	<b>\$0</b>	
<b>OTHER</b>		<b>\$137,436</b>	
Resource Guide	\$60,000		+ \$43,047
Needs Assessment Activities	\$3,000		
Reimbursement for PC member expenses: Reimbursement for travel, childcare, meals and other eligible expenses resulting from participation in Council approved/ HRSA grant required activities.	\$23,686		
Advertising for PC Activities: For publication of meeting announcements in community papers; invitations to participate in needs assessment activities and focus groups; advertisements for additional volunteers.	\$6,000		
Communications (phone, pagers): For local and long distance phone expenses and internet charges.	\$3,500		
Web Page Technical Assistance Costs: For additional training/consultation to staff in order to update/improve web site.	\$500		

**DRAFT**  
**Houston Ryan White Planning Council**  
**FY 2017 Council Support Budget**  
**Includes FY 2016 3% Cost of Living Increase**  
(Prepared 05-10-16)

	Subtotal	Total
Council Education: For speakers & training costs primarily for Council member orientation, room rentals & the cost of speakers for ongoing training to insure that key decision-makers receive necessary and relevant information. This includes the Sept. & Nov. 2015 Council meetings & the Jan. 2016 training/orientation meeting, all to be held off-site at locations within Harris County, Texas.	\$3,500	
Project LEAP Student Reimbursement: 30 participants for 17 week course including travel, childcare and other eligible expenses resulting from participation in Council approved training activities related to the HRSA grant.	\$5,500	
Project LEAP Education: Training costs for 17 weeks including speaker fees, room rental for off-site meetings & educational materials.	\$9,500	
Interpreter Services For Spanish-speaking and sign-language interpretation services during public meetings, focus groups, etc.	\$1,500	
Fees and Dues Registration costs for attending meetings, trainings and conferences related to HIV/AIDS health planning.	\$500	
English/Spanish Translation (written): For professional translation of Council materials into Spanish.	\$1,000	
Postal Machine Rental & Postage: For mailouts of Committee and Council agendas, minutes and attachments; HIV/AIDS Resource Guides for those who are unable to pickup in person; other office of support communications.	\$10,000	+\$ 5,000
Copier Rental: For rental, service agreement of high-use Xerox machine used for Council and Office of Support.	\$9,250	
<b>TOTAL</b>		<b>\$512,439</b>

Priority and Allocations Committee

Ryan White Reallocations as of 05-26-16: **RYAN WHITE PART A FUNDING**

Funds Available for Reallocation: \$319,607

<b>Request Control Number</b>	<b>FY16 Priority</b>	<b>Local Service Category</b>	<b>Amount of Request</b>	<b>Recommended Part A Allocation Increase</b>	<b>Justification</b>
1	1.b – 1.d	Community-based Primary Medical Care targeted to African American, Hispanic, and White	\$268,446	Split proportionally w/ Control #2: \$188,913	To decrease wait time; #1 service priority.
2	1.b – 1.d	Community-based Primary Medical Care targeted to African American, Hispanic, and White	\$150,150	Split proportionally w/ Control #1 \$105,734	To decrease wait time; #1 service priority.
3	1.h	Vision	\$24,960	\$24,960	To decrease wait time
Total			<b>\$443,556</b>	<b>\$319,607</b>	

## **Priority and Allocations**

### **FY 2017 Guiding Principles and Decision Making Criteria**

(Priority and Allocations Committee approved 02-25-16)

Priority setting and allocations must be based on clearly stated and consistently applied principles and criteria. These principles are the basic ideals for action and are based on Health Resources and Services Administration (HRSA) and Department of State Health Services (DSHS) directives. All committee decisions will be made with the understanding that **the Ryan White Program is unable to completely meet all identified needs** and following legislative mandate **the Ryan White Program will be considered funding of last resort**. Priorities are just one of many factors which help determine allocations. All Part A and Part B service categories are considered to be important in the care of people living with HIV/AIDS. Decisions will address at least one or more of the following principles **and** criteria.

*Principles are the standards **guiding the discussion** of all service categories to be prioritized and to which resources are to be allocated. Documentation of these guiding principles in the form of printed materials such as needs assessments, focus group results, surveys, public reports, journals, legal documents, etc. will be used in highlighting and describing service categories (individual agencies are not to be considered). Therefore decisions will be based on service categories that address the following principles, in no particular order:*

#### **Principles**

- A. Ensuring ongoing client access to a comprehensive system of core services as defined by HRSA
- B. Eliminating barriers to core services among affected sub-populations (racial, ethnic and behavioral) and low income, unserved, underserved and severe need populations (rural and urban)
- C. Meeting the needs of diverse populations as addressed by the epidemiology of HIV
- D. Identify individuals unaware of their status and link them to care and address the needs of those that are aware of their status and not in care.
- E. Expressing the needs of the communities with HIV for whom the services are intended

#### **Allocations only**

- F. Documented or demonstrated cost-effectiveness of services and minimization of duplication
- G. Availability of other government and non-governmental resources, including Medicaid, Medicare, CHIP, private insurance and Affordable Care Act related insurance options, local foundations and non-governmental social service agencies

*Criteria are the standards on which the committee's decisions will be based. Positive decisions will only be made on service categories that satisfy at least one of the criteria in Step 1 and all criteria in Step 2. Satisfaction will be measured by printed information that address service categories such as needs assessments, focus group results, surveys, reports, public reports, journals, legal documents, etc.*

(Continued)

## **DECISION MAKING CRITERIA STEP 1:**

- A. Documented service need with consumer perspectives as a primary consideration
- B. Documented effectiveness of services with a high level of benefit to people and families living with HIV infection, including quality, cost, and outcome measures when applicable
- C. Documented response to the epidemiology of HIV/AIDS in the EMA and HSDA
- D. Documented response to emerging needs reflecting the changing local epidemiology of HIV/AIDS while maintaining services to those who have relied upon Ryan White funded services.
- E. When allocating unspent and carryover funds, services are of documented sustainability across fiscal years in order to avoid a disruption/discontinuation of services
- F. Documented consistency with the current Houston Area Comprehensive HIV Prevention and Care Services Plan and the Continuum of Care and their underlying principles to the extent allowable under the Ryan White Program: to build public support for HIV services; to inform people of their serostatus and, if they test positive, get them into care; to help people maintain their negative status; to help people with HIV improve their health status and quality of life and prevent the progression to AIDS; to help reduce the risk of transmission; and to help people with AIDS improve their health status and quality of life and, if necessary, support the conditions that will allow for death with dignity

## **DECISION MAKING CRITERIA STEP 2:**

- A. Services are effective with a high level of benefit to people and families living with HIV, including cost and outcome measures when applicable
- B. Services are accessible to all populations infected, affected, or at risk, allowing for differences in need between urban, suburban, and rural consumers as applicable under Part A and B guidelines
- C. The Council will minimize duplication of both service provision and administration and services will be coordinated with other systems, including but not limited to HIV prevention, substance use, mental health, and Sexually Transmitted Infections (STIs).
- D. Services emphasize access to and use of primary medical and other essential HRSA defined core services
- E. Services are appropriate for different cultural and socioeconomic populations, as well as care needs
- F. Services are available to meet the needs of all people and families living with or at risk for HIV infection as applicable under Part A and B guidelines
- G. Services meet or exceed standards of care
- H. Services reflect latest medical advances, when appropriate
- I. Services meet a documented need that is not fully supported through other funding streams

**PRIORITY SETTING AND ALLOCATIONS ARE SEPARATE DECISIONS.  
All decisions are expected to address needs of the overall community affected by the epidemic.**

		Part A	MAI	Part B	State Services	Total	FY 2016 Allocations & Justification
Remaining Funds to Allocate		\$26,201	\$0	\$0	\$0	\$26,201	
		Part A	MAI	Part B	State Services	Total	FY 2016 Allocations & Justification
<b>1</b>	<b>Ambulatory/Outpatient Primary Care</b>	\$9,942,999	\$2,057,949	\$0	\$0	\$12,000,948	<b>FY16: Increase \$190,000 in Part A distributed proportionally across 1.a-1.g due to increased enrollment</b>
1.a	PC-Public Clinic	\$3,643,839				\$3,643,839	FY16: Increase \$73,790 in Part A (Increase Scenario)
1.b	PC-AA	\$1,088,597	\$1,040,245			\$2,128,842	Part A: Allocate total (RW/A+MAI) CBO funds as follows: <b>Update for FY 15: AA = 42.5%; HL = 37.0%; WHT = 20.5%.</b> FY16: Increase \$22,045 in Part A and \$23,627 in MAI (Increase Scenarios)
1.c	PC-Hisp - see 1.b above	\$948,421	\$1,017,704			\$1,966,125	Part A: Allocate total (RW/A+MAI) CBO funds as follows: <b>Update for FY 15: AA = 42.5%; HL = 37.0%; WHT = 20.5%.</b> FY16: Increase \$19,206 in Part A and \$23,116 in MAI (Increase Scenarios)
1.d	PC-White - see 1.b above	\$945,440				\$945,440	Part A: Allocate total (RW/A+MAI) CBO funds as follows: <b>Update for FY 15: AA = 42.5%; HL = 37.0%; WHT = 20.5%.</b> FY16: Increase \$19,146 in Part A (Increase Scenario)
1.e	PC-Rural	\$1,166,658				\$1,166,658	FY16: Increase \$23,626 in Part A (Increase Scenario)
1.f	PC-Women	\$1,902,089				\$1,902,089	FY16: Increase \$38,519 in Part A (Increase Scenario)
1.g	PC-Pedi	\$15,437				\$15,437	FY16: Increase \$313 in Part A (Increase Scenario)
1.h	Vision Care	\$232,518				\$232,518	
<b>2</b>	<b>Medical Case Management</b>	\$2,215,702	\$0	\$0	\$0	\$2,215,702	
2.a	CCM-Mental/Substance	\$488,656	\$0		\$0	\$488,656	
2.b	MCM-Public Clinic	\$162,622				\$162,622	
2.c	MCM-AA	\$321,070				\$321,070	
2.d	MCM-Hisp	\$321,072				\$321,072	
2.e	MCM-White	\$107,247				\$107,247	
2.f	MCM-Rural	\$348,760				\$348,760	
2.g	MCM-Women	\$180,311				\$180,311	
2.h	MCM-Pedi	\$160,051				\$160,051	
2.i	MCM-Veterans	\$80,025				\$80,025	
2.j	MCM-Youth	\$45,888				\$45,888	
<b>3</b>	<b>Local Pharmacy Assistance Program</b>	\$2,634,796	\$0	\$0	\$0	\$2,634,796	FY16: Increase \$53,356 in Part A (Increase Scenario)
<b>4</b>	<b>Oral Health</b>	\$166,404	\$0	\$2,120,346	\$0	\$2,286,750	
	Untargeted	\$0		\$2,120,346	\$0	\$2,120,346	FY16: Increase \$200,000 (\$140,000 for dental services; \$60,000 for prosthodontics) in Part B due to provider plans to increase capacity and consistent reports of wait times as a barrier.
	Rural Dental	\$166,404				\$166,404	
<b>5</b>	<b>Mental Health Services</b>	\$0	\$0	\$0	\$300,000	\$300,000	

		Part A	MAI	Part B	State Services	Total	FY 2016 Allocations & Justification
Remaining Funds to Allocate		\$26,201	\$0	\$0	\$0	\$26,201	
6	Health Insurance Co-Pays & Co-Ins	\$1,029,422	\$0	\$976,885	\$1,043,312	\$3,049,619	FY16: Decrease \$200,000 in Part B to accommodate increase in Oral Health - Untargeted; decrease \$13,000 in State Services to accommodate increase in Linguistics; Decrease \$190,000 in Part A to accommodate increase in Primary Care
7	Home & Community Based Health Services	\$0	\$0	\$232,000	\$0	\$232,000	
7.a	In-Home (skilled nursing & health aide)	\$0				\$0	
7.b	Facility-based (adult day care)	\$0		\$232,000		\$232,000	
8	Substance Abuse Treatment - Outpatient	\$45,677	\$0	\$0	\$0	\$45,677	
9	Early Intervention Services	\$0	\$0	\$0	\$166,211	\$166,211	
10	Medical Nutritional Therapy	\$341,395	\$0	\$0	\$0	\$341,395	
11	Hospice	\$0	\$0	\$0	\$414,832	\$414,832	
12	Non-Medical Case Management	\$1,440,384	\$0	\$0	\$0	\$1,440,384	
12.a	SLW-Youth	\$110,793				\$110,793	
12.b	SLW-Testing	\$245,497				\$245,497	
12.c	SLW-Public	\$490,886				\$490,886	
12.d	SLW-CBO, includes some Rural	\$593,209				\$593,209	
13	Transportation	\$527,362	\$0	\$0	\$0	\$527,362	
13.a	Van Based - Urban	\$252,680				\$252,680	
13.b	Van Based - Rural	\$97,185		\$0		\$97,185	
13.c	Bus Passes & Gas Vouchers	\$177,497				\$177,497	
14	Linguistic Services	\$0	\$0	\$0	\$48,000	\$48,000	FY16: Increase \$13,000 - History of reallocations from other HSDAs to fully fund service
15	Legal Assistance	\$293,406	\$0	\$0	\$0	\$293,406	
<b>Total Service Allocation</b>		<b>\$18,637,546</b>	<b>\$2,057,949</b>	<b>\$3,329,231</b>	<b>\$1,972,355</b>	<b>\$25,997,081</b>	
NA	Quality Management	\$495,000	\$0			\$495,000	Part A: FY16: Increase \$10,000 - Increase in amount for client satisfaction survey gift cards (from \$5/card to \$10/card)
NA	Administration	\$1,612,704	\$0			\$1,612,704	Part A: No changes
<b>Total Non-Service Allocation</b>		<b>\$2,107,704</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,107,704</b>	
<b>Total Grant Funds</b>		<b>\$20,745,250</b>	<b>\$2,057,949</b>	<b>\$3,329,231</b>	<b>\$1,972,355</b>	<b>\$28,104,785</b>	



	Part A	MAI	Part B	State Services	Total	FY 2016 Allocations & Justification
<b>Remaining Funds to Allocate</b>	<b>\$26,201</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$26,201</b>	
<b>Remaining Funds to Allocate (exact same as the yellow row on top)</b>	<b>\$26,201</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$26,201</b>	

Tips:  
 \* Do not make changes to any cells that are underlined. These cells represent running totals. If you make a change to these cells, then the formulas throughout the sheet will become "broken" and the totals will be incorrect.  
 \* It is useful to keep a running track of the changes made to any service allocation. For example, if you want to change an allocation from \$42,000 to \$40,000, don't just delete the cell contents and type in a new number. Instead, type in "=42000-2000". This shows that you subtracted \$2,000 from a service, so you recall later how you reached a certain amount. If you want to make another change, just add it to the end of the formula. For example, if you want to add back in \$1,500, then the cell should look like "=42000-2000+1500". Make sure you put the "=" in front so Excel reads it as a formula.

[For Staff Only]					
If needed, use this space to enter base amounts to be used for calculations					
	Actual RW/A Amount	Actual MAI Amount	Part B estimated	State Service est.	
Total Grant Funds	\$20,771,451	\$2,057,949	\$3,329,231	\$1,972,355	\$28,130,986

Houston Ryan White Planning Council  
Priority and Allocations Committee

**Proposed Ryan White Part A, MAI, Part B and State Services Funding  
FY 2016 Allocations**

(Priority and Allocations Committee approved 06-15-15)

**All Funding Streams – Level Funding Scenario**

**Motion 1: Level Funding Scenario for Ryan White Part A, MAI, Part B and State Services Funding.**

Approve the attached Ryan White Part A, MAI, Part B and State Services Funding FY 2016 Level Funding Scenario.

**MAI Increase / Decrease Scenarios**

**Motion 2: Decrease Funding Scenario for Ryan White Minority AIDS Initiative (MAI).**

All service categories will be decreased by the same percent. This applies to the total amount of service dollars available. Every service category is treated equally under this scenario.

**Motion 3: Increase Funding Scenario for Ryan White Minority AIDS Initiative (MAI).**

All service categories will be increased by the same percent. This applies to the total amount of service dollars available. Every service category is treated equally under this scenario.

**Part A Increase / Decrease Scenarios**

**Motion 4: Decrease Funding Scenario for Ryan White Part A Funding.**

All service categories will be decreased by the same percent. This applies to the total amount of service dollars available. Every service category is treated equally under this scenario.

**Motion 5: Increase Funding Scenario for Ryan White Part A Funding.**

Step	Instructions
<b>Step 1</b>	The first \$250,000 of the increase will be allocated proportionately across service priorities 1.a. -1.g. and 3.
<b>Step 2</b>	An increase in funds of \$250,001 or more will be allocated by the Ryan White Planning Council after the notice of grant award is received.

(Continued)

## **Part B and State Services Increase Scenario**

### **Motion 6: Increase Funding Scenario for Ryan White Part B and State Services Funding.**

<b>Step</b>	<b>Instructions</b>
<b>Step 1</b>	Determine the net increase scenario by combining Part B and State Services funding.
<b>Step 2</b>	Any increase will be reallocated by the Ryan White Planning Council.

## **Part B and State Services Decrease Scenario**

### **Motion 7: Decrease Funding Scenario for Ryan White Part B and State Services Funding.**

<b>Step</b>	<b>Instructions</b>
<b>Step 1</b>	Determine the net decrease scenario by combining Part B and State Services funding.
<b>Step 2</b>	All service categories will be decreased by the same percent. This applies to the total amount of service dollars available. Every service category, except Health Insurance which will be held harmless at 95% of the overall expenditures between 09/01/13 and 08/31/14, will be treated equally under this scenario.
<b>Step 3</b>	The impact of the decrease in Part B and/or State Services will be implemented to minimize, to the extent feasible, the impact on all remaining Part B and State Services service categories (see step 1).

		Part A	MAI	Part B	State Services	Total	FY 2015 Allocations & Justification
Remaining Funds to Allocate		\$0	\$0	\$0	\$0	\$0	
		Part A	MAI	Part B	State Services	Total	FY 2015 Allocations & Justification
<b>1</b>	<b>Ambulatory/Outpatient Primary Care</b>	<b>\$9,556,355</b>	<b>\$2,011,206</b>	<b>\$0</b>	<b>\$0</b>	<b>\$11,567,561</b>	ACA enrollment of 450 clients (300 currently enrolled clients + additional 150 clients anticipated) in FY14 resulting in anticipated Primary Care cost savings. PC cost per UDC in 2013=\$1,176. \$1,176/UDCx450 clients=\$529,200. Shift \$529,200 from Part A Primary Care cost savings to Health Insurance. <b>Suggested increase based on FY15 actual award: Add \$150,000 (1.a-1.g) due to an increase of approximately 570 clients in FY14.</b>
1.a	PC-Public Clinic	\$3,498,752				\$3,498,752	
1.b	PC-AA	\$1,045,252	\$1,016,618			\$2,061,870	Part A: Allocate total (RW/A+MAI) CBO funds as follows: <b>Update for FY 15: AA = 42.5%; HL = 37.0%; WHT = 20.5%.</b>
1.c	PC-Hisp - see 1.b above	\$910,658	\$994,588			\$1,905,246	Part A: Allocate total (RW/A+MAI) CBO funds as follows: <b>Update for FY 15: AA = 42.5%; HL = 37.0%; WHT = 20.5%.</b>
1.d	PC-White - see 1.b above	\$907,795				\$907,795	Part A: Allocate total (RW/A+MAI) CBO funds as follows: <b>Update for FY 15: AA = 42.5%; HL = 37.0%; WHT = 20.5%.</b>
1.e	PC-Rural	\$1,120,205				\$1,120,205	Increase Part A by <b>\$191,000</b> to accommodate shift from Part B to Part A.
1.f	PC-Women	\$1,826,353				\$1,826,353	
1.g	PC-Pedi	\$14,821				\$14,821	
1.h	Vision Care	\$232,518				\$232,518	
<b>2</b>	<b>Medical Case Management</b>	<b>\$2,215,702</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,215,702</b>	<b>Suggested increase based on FY15 actual award: Add \$150,000 (2.a-2.i) due to proportional increase in need and increased requests for assistance.</b>
2.a	CCM-Mental/Substance	\$488,656	\$0		\$0	\$488,656	
2.b	MCM-Public Clinic	\$162,622				\$162,622	
2.c	MCM-AA	\$321,070				\$321,070	
2.d	MCM-Hisp	\$321,072				\$321,072	
2.e	MCM-White	\$107,247				\$107,247	
2.f	MCM-Rural	\$348,760				\$348,760	Increase Part A by <b>\$54,000</b> to accommodate shift from Part B to Part A per FY14 instructions.
2.g	MCM-Women	\$180,311				\$180,311	
2.h	MCM-Pedi	\$160,051				\$160,051	
2.i	MCM-Veterans	\$80,025				\$80,025	
2.j	MCM-Youth	\$45,888				\$45,888	
<b>3</b>	<b>Local Pharmacy Assistance Program</b>	<b>\$2,581,440</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,581,440</b>	<b>Suggested increase based on FY15 actual award: Add \$324,864 due to FY14 expenditures.</b>
<b>4</b>	<b>Oral Health</b>	<b>\$166,404</b>	<b>\$0</b>	<b>\$1,920,346</b>	<b>\$0</b>	<b>\$2,086,750</b>	

FY 2015 Allocations - Increase Funding Scenario and Allocations (\$955,532) - as of 06/04/15

**DRAFT**

		Part A	MAI	Part B	State Services	Total	FY 2015 Allocations & Justification
Remaining Funds to Allocate		\$0	\$0	\$0	\$0	\$0	
	Untargeted	\$0		\$1,920,346	\$0	\$1,920,346	Shift \$100,000 of FY14 allocation from Part A to Part B to fund service category under a single AA.
	Rural Dental	\$166,404				\$166,404	
5	<b>Mental Health Services</b>	\$0	\$0	\$0	\$300,000	\$300,000	Increase SS by \$47,800 to accomodate increase in utilization.
6	<b>Health Insurance Co-Pays &amp; Co-Ins</b>	\$1,229,422	\$0	\$1,176,885	\$1,056,312	\$3,462,619	Increase Part A Health Insurance by \$569,400 and \$39,700 due to spending patterns after implimentation of the ACA.
7	<b>Home &amp; Community Based Health Services</b>	\$0	\$0	\$232,000	\$0	\$232,000	
7.a	In-Home (skilled nursing & health aide)	\$0				\$0	
7.b	Facility-based (adult day care)	\$0		\$232,000		\$232,000	
8	<b>Substance Abuse Treatment - Outpatient</b>	\$45,677	\$0	\$0	\$0	\$45,677	
9	<b>Early Intervention Services</b>	\$0	\$0	\$0	\$166,211	\$166,211	
10	<b>Medical Nutritional Therapy</b>	\$341,395	\$0	\$0	\$0	\$341,395	
11	<b>Hospice</b>	\$0	\$0	\$0	\$414,832	\$414,832	
12	<b>Non-Medical Case Management</b>	\$1,440,384	\$0	\$0	\$0	\$1,440,384	
12.a	SLW-Youth	\$110,793				\$110,793	
12.b	SLW-Testing	\$245,497				\$245,497	
12.c	SLW-Public	\$490,886				\$490,886	
12.d	SLW-CBO, includes some Rural	\$593,209				\$593,209	
13	<b>Transportation</b>	\$527,362	\$0	\$0	\$0	\$527,362	
13.a	Van Based - Urban	\$252,680				\$252,680	
13.b	Van Based - Rural	\$97,185		\$0		\$97,185	
13.c	Bus Passes & Gas Vouchers	\$177,497				\$177,497	
14	<b>Linguistic Services</b>	\$0	\$0	\$0	\$35,000	\$35,000	
15	<b>Legal Assistance</b>	\$293,406	\$0	\$0	\$0	\$293,406	
<b>Total Service Allocation</b>		<b>\$18,397,546</b>	<b>\$2,011,206</b>	<b>\$3,329,231</b>	<b>\$1,972,355</b>	<b>\$25,710,338</b>	
NA	Quality Management	\$485,000	\$0			\$485,000	Part A: No changes

		Part A	MAI	Part B	State Services	Total	FY 2015 Allocations & Justification
<b>Remaining Funds to Allocate</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
NA	Administration	\$1,612,704	\$0			\$1,612,704	Part A: No changes
<b>Total Non-Service Allocation</b>		<b>\$2,097,704</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,097,704</b>	
<b>Total Grant Funds</b>		<b>\$20,495,250</b>	<b>\$2,011,206</b>	<b>\$3,329,231</b>	<b>\$1,972,355</b>	<b>\$27,808,042</b>	

<b>Remaining Funds to Allocate (exact same as the yellow row on top)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
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Tips:  
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 \* It is useful to keep a running track of the changes made to any service allocation. For example, if you want to change an allocation from \$42,000 to \$40,000, don't just delete the cell contents and type in a new number. Instead, type in "=42000-2000". This shows that you subtracted \$2,000 from a service, so you recall later how you reached a certain amount. If you want to make another change, just add it to the end of the formula. For example, if you want to add back in \$1,500, then the cell should look like "=42000-2000+1500" Make sure you put the "=" in front so Excel reads it as a formula.

[For Staff Only]					
If needed, use this space to enter base amounts to be used for calculations					
	Actual RW/A Amount	Actual MAI Amount	Part B estimated	State Service est.	
Total Grant Funds	\$20,495,250	\$2,011,206	\$3,329,231	\$1,972,355	\$27,808,042



Priority	Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
		Original Allocation	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent	Total Expended on Services	Percent				
	Core (must not be less than 75% of total service)	15,261,530	874,864	478,474	31,060	43,021	16,645,928	88.19%	16,688,949	88.56%				
	Non-Core (may not exceed 25% of total service)	2,261,154	0	0	-31,060	-43,021	2,230,094	11.81%	2,156,013	11.44%				
	<b>Total Service Dollars (does not include Admin a)</b>	<b>17,522,684</b>	<b>874,864</b>	<b>478,474</b>	<b>0</b>	<b>0</b>	<b>18,876,022</b>		<b>18,844,962</b>					
	<b>Total Admin (must be ≤ 10% of total Part A + MAI)</b>	<b>1,612,704</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1,612,704</b>	<b>7.69%</b>						
	<b>Total QM (must be ≤ 5% of total Part A + MAI)</b>	<b>485,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>485,000</b>	<b>2.31%</b>						
<b>MAI Procurement Report</b>														
Priority	Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Date of Procurement	Expended YTD	Percent YTD	Percent Expected YTD
1	Outpatient/Ambulatory Primary Care	1,930,538	80,668	440	0	0	2,011,646	100.00%	2,011,646	0		1,434,125	71%	83%
1.b (MAI)	Primary Care - CBO Targeted to African America	975,842	40,776	220	0	0	1,016,838	50.55%	1,016,838	0	3/1/2015	\$749,925	74%	83%
1.c (MAI)	Primary Care - CBO Targeted to Hispanic	954,696	39,892	220	0	0	994,808	49.45%	994,808	0	3/1/2015	\$684,200	69%	83%
	<b>Total MAI Service Funds</b>	<b>1,930,538</b>	<b>80,668</b>	<b>440</b>	<b>0</b>	<b>0</b>	<b>2,011,646</b>	<b>100.00%</b>	<b>2,011,646</b>	<b>0</b>		<b>1,434,125</b>	<b>71%</b>	<b>83%</b>
	Grant Administration	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	Quality Management	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	<b>Total MAI Non-service Funds</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0%</b>	<b>0%</b>
	<b>Total MAI Funds</b>	<b>1,930,538</b>	<b>80,668</b>	<b>440</b>	<b>0</b>	<b>0</b>	<b>2,011,646</b>	<b>100.00%</b>	<b>2,011,646</b>	<b>0</b>		<b>1,434,125</b>	<b>71%</b>	<b>83%</b>
	<b>MAI Grant Award</b>	<b>2,011,206</b>	<b>Carry Over:</b>	<b>441</b>		<b>Total MAI:</b>	<b>2,011,647</b>							
	<b>Combined Part A and MAI Total</b>	<b>21,550,926</b>												
<b>Footnotes:</b>														
All	When reviewing bundled categories expenditures must be evaluated both by individual service category and by combined categories. One category may exceed 100% of available funding so long as other category offsets this overage.													
(a)	Single local service definition is four (4) HRSA service categories (Pcare, LPAP, MCM, Non Med CM). Expenditures must be evaluated both by individual service category and by combined service categories.													
(a.1)	Single local service definition is three (3) HRSA service categories (does not include LPAP). Expenditures must be evaluated both by individual service category and by combined service categories.													
(b)	Adjustments to reflect actual award based on Increase funding scenario.													
(c)	Funded under Part B and/or SS													
(d)	Not used at this time													
(e)	10% rule reallocations													
(f)	Include MAI funds when reviewing 10% rule reallocations													



**SUR - 4th Quarter Cumulative (3/1-2/28)**

Priority	Service Category	Goal	Unduplicated Clients Served YTD	Male	Female	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6,467	7,216	73%	27%	50%	15%	2%	32%	0%	1%	7%	24%	28%	14%	25%	2%
1.a	Primary Care - Public Clinic (a)	2,350	3,623	69%	31%	54%	10%	2%	34%	0%	0%	4%	18%	27%	15%	33%	2%
1.b	Primary Care - CBO Targeted to AA (a) (g)	1,060	1,568	69%	31%	99%	0%	1%	0%	0%	1%	12%	34%	28%	10%	14%	1%
1.c	Primary Care - CBO Targeted to Hispanic (a) (g)	960	981	84%	16%	0%	0%	0%	100%	0%	0%	6%	29%	35%	13%	15%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	690	692	88%	12%	0%	90%	10%	0%	0%	0%	5%	25%	25%	16%	26%	2%
1.e	Primary Care - CBO Targeted to Rural (a)	400	506	70%	30%	41%	26%	2%	30%	0%	1%	9%	25%	29%	15%	19%	1%
1.f	Primary Care - Women at Public Clinic (a)	1,000	1,112	0%	100%	65%	7%	1%	28%	0%	0%	3%	16%	31%	17%	31%	2%
1.g	Primary Care - Pediatric (a)	7	13	69%	31%	54%	8%	0%	38%	15%	46%	38%	0%	0%	0%	0%	0%
1.h	Vision	1,600	2,152	75%	25%	48%	17%	2%	34%	0%	0%	6%	22%	25%	15%	30%	3%
2	Local Drug Reimbursement Program (a)	2,845	3,931	78%	22%	47%	18%	2%	33%	0%	0%	7%	29%	30%	15%	18%	1%
3	Medical Case Management (f)	3,075	5,261														
3.a	Clinical Case Management	600	1,018	73%	27%	54%	29%	2%	15%	0%	0%	5%	21%	24%	13%	34%	2%
3.b	Med CM - Targeted to Public Clinic (a)	280	528	98%	2%	53%	12%	2%	33%	0%	2%	15%	18%	20%	12%	32%	3%
3.c	Med CM - Targeted to AA (a)	550	1,987	69%	31%	99%	0%	1%	0%	0%	1%	11%	31%	25%	12%	19%	1%
3.d	Med CM - Targeted to H/L(a)	550	811	86%	14%	0%	0%	0%	100%	0%	1%	9%	32%	30%	13%	15%	1%
3.e	Med CM - Targeted to White and/or MSM (a)	260	560	85%	15%	0%	92%	8%	0%	0%	0%	4%	25%	22%	17%	29%	4%
3.f	Med CM - Targeted to Rural (a)	150	695	69%	31%	44%	28%	2%	26%	0%	1%	7%	20%	26%	15%	29%	3%
3.g	Med CM - Targeted to Women at Public Clinic (a)	240	301	0%	100%	69%	7%	1%	23%	0%	0%	11%	15%	28%	14%	29%	2%
3.h	Med CM - Targeted to Pedi (a)	125	113	53%	47%	81%	4%	0%	15%	60%	27%	12%	0%	0%	0%	0%	0%
3.i	Med CM - Targeted to Veterans	200	178	94%	6%	67%	21%	1%	11%	0%	0%	0%	3%	3%	5%	68%	20%
3.j	Med CM - Targeted to Youth	120	88	98%	2%	59%	7%	1%	33%	0%	10%	90%	0%	0%	0%	0%	0%
4	Oral Health	200	302	69%	31%	37%	35%	1%	26%	0%	0%	7%	21%	32%	13%	25%	3%
4.a	Oral Health - Untargeted (d)	NA	NA	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
4.b	Oral Health - Rural Target	200	302	69%	31%	37%	35%	1%	26%	0%	0%	7%	21%	32%	13%	25%	3%
5	Medical Nutritional Therapy/Nutritional Supplements	650	521	78%	22%	40%	26%	3%	30%	0%	0%	3%	13%	21%	18%	40%	5%
6	Mental Health Services (d)	NA	NA														
7	Health Insurance	1,700	1,393	83%	17%	41%	30%	3%	26%	0%	0%	3%	19%	23%	16%	36%	3%
8	Substance Abuse Treatment - Outpatient	40	24	96%	4%	21%	63%	0%	17%	0%	0%	13%	29%	38%	8%	13%	0%
9	Hospice Services (d)	NA	NA														
10	Home and Community Based Services (d)	NA	NA														
11	Early Medical Intervention Services (d)	NA	NA														
12	Non-Medical Case Management	7,045	6,805														
12.a	Service Linkage Targeted to Youth	320	234	77%	23%	63%	5%	1%	30%	0%	12%	88%	0%	0%	0%	0%	0%
12.b	Service Linkage at Testing Sites	260	206	67%	33%	69%	10%	2%	19%	0%	0%	0%	29%	26%	13%	32%	0%
12.c	Service Linkage at Public Clinic Primary Care Program (a)	3,700	2,942	67%	33%	61%	11%	1%	27%	0%	0%	0%	18%	26%	15%	38%	3%
12.d	Service Linkage at CBO Primary Care Programs (a)	2,765	3,423	75%	25%	55%	15%	2%	29%	2%	1%	8%	27%	26%	13%	22%	2%
13	Food Pantry (funded by State Services)	NA	NA														
14	Transportation	2,850	3,374														
14.a	Transportation Services - Urban	170	509	73%	27%	58%	12%	2%	28%	0%	1%	10%	28%	29%	9%	20%	3%
14.b	Transportation Services - Rural	130	165	70%	30%	39%	38%	2%	21%	0%	1%	10%	19%	19%	19%	27%	4%
14.c.1	Transportation vouchers (bus passes)	2,500	2,612														
14.c.2	Transportation vouchers (gas vouchers)	50	88														
15	Legal Assistance	390	221	62%	38%	49%	23%	1%	27%	0%	0%	1%	7%	26%	19%	43%	5%
16	Linguistic Services (d)	NA	NA														
<b>Net unduplicated clients served - all categories*</b>		10,200	11,966	74%	26%	53%	17%	2%	29%	1%	1%	6%	22%	25%	14%	29%	3%
<b>Living AIDS cases + estimated Living HIV non-AIDS (from FY 14 App) (b)</b>		NA	22,830	74%	26%	49%	23%	3%	25%	0%	6%	18%	27%	30%	18%		

RW MAI Service Utilization Report																	
Priority	Service Category	Goal	Unduplicated MAI Clients Served YTD	Male	Female	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
	MAI unduplicated served includes clients also served under Part A																
1.b	Primary Care - MAI CBO Targeted to AA (g)	1,060	1,571	72%	28%	99%	0%	1%	0%	0%	1%	12%	37%	26%	10%	13%	0%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	960	1,162	87%	13%	0%	0%	0%	100%	0%	1%	7%	31%	34%	13%	12%	1%
RW Part A New Client Service Utilization Report																	
Report reflects the number & demographics of clients served during the report period who did not receive services during previous 12 months (3/1/12 - 2/28/13)																	
Priority	Service Category	Goal	Unduplicated New Clients Served YTD	Male	Female	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	Primary Medical Care	2,100	1,721	78%	22%	55%	14%	2%	29%	0%	2%	12%	33%	24%	11%	18%	1%
2	LPAP	1,200	721	82%	18%	52%	17%	2%	29%	0%	2%	10%	38%	23%	13%	13%	1%
3.a	Clinical Case Management	400	167	80%	20%	54%	26%	2%	19%	0%	2%	9%	29%	20%	13%	26%	1%
3.b-3.h	Medical Case Management	1,600	1161	77%	23%	57%	16%	2%	25%	3%	3%	14%	30%	22%	11%	17%	1%
3.i	Medical Case Management - Targeted to Veterans	60	54	96%	4%	63%	26%	2%	9%	0%	0%	0%	6%	4%	7%	67%	17%
4	Oral Health	40	38	82%	18%	39%	39%	0%	21%	0%	0%	13%	32%	21%	11%	24%	0%
12.a. 12.c. 12.d.	Non-Medical Case Management (Service Linkage)	3,700	1,729	75%	25%	58%	14%	2%	27%	2%	2%	9%	28%	24%	12%	22%	2%
12.b	Service Linkage at Testing Sites	260	146	72%	28%	70%	4%	1%	25%	0%	5%	15%	29%	20%	10%	21%	1%
Footnotes:																	
(a) Bundled Category																	
(b) Age groups 13-19 and 20-24 combined together; Age groups 55-64 and 65+ combined together.																	
(d) Funded by Part B and/or State Services																	
(e) Not funded in FY 2014																	
(f) Total MCM served does not include Clinical Case Management																	
(g) CBO Pcare targeted to AA (1.b) and HL (1.c) goals represent combined Part A and MAI clients served																	