

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

12 noon, Thursday, June 27, 2019  
Meeting Location: 2223 West Loop South, Room 416  
Houston, TX 77027

### AGENDA

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- I. Call to Order Peta-gay Ledbetter and  
Bobby Cruz, Co-Chairs
- A. Moment of Reflection
- B. Approval of Agenda
- C. Approval of the May 23, 2019 Minutes
- D. Review Meeting Goals Tori Williams, Director  
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 status. **When signing in, guests are not required to provide their correct or complete names.** 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 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 living with HIV", 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. Updates from the Administrative Agents Carin Martin, RWGA  
Yvette Garvin, TRG
- A. Ryan White Part A/MAI
- B. Ryan White Part B and State Services Funding
- IV. Allocations for FY 2020 Part A/MAI, Part B & State Services Funding
- A. Review the Proposed FY 2020 Level Funding Scenario
- 1) Is the allocation for SLW–Substance Use for 6 or 12 months?
- 2) Pay for Performance
- 3) Other
- B. Review the FY 2020 Increase Funding Scenario
- C. Review the FY 2020 Decrease Funding Scenario
- V. Announcements
- A. IMPORTANT: Priority and Allocation Committee Meeting Dates and Times:
- 7 pm, Mon., July 1, 2019 – Public Hearing for the FY 2020 Priorities & Allocations
  - 12 noon, Tues., July 2, 2019 – Review comments from Public Hearing
  - 12 noon, Thurs., July 25, 2019 – Reallocate funds
- VI. Adjourn

## New **Houston Area HIV Services Ryan White Planning Council**

### **Priority & Allocations Committee Meeting**

12:00 p.m., Thursday, May 23, 2019

Meeting Location: 2223 West Loop South, Room 416; Houston, Texas 77027

### **MINUTES**

<b>MEMBERS PRESENT</b>	<b>OTHERS PRESENT</b>	<b>STAFF PRESENT</b>
Bobby Cruz, Co-Chair	Bruce Turner, RWPC Chair	<i>The Resource Group</i>
Peta-gay Ledbetter, Co-Chair		Yvette Garvin
Allison Hesterman		
J. Hoxi Jones		<i>Ryan White Grant Admin</i>
Mel Joseph		Carin Martin
Niquita Moret		
Allen Murray		<i>Office of Support</i>
		Tori Williams
		Amber Harbolt
		Diane Beck

See the attached chart at the end of the minutes for individual voting information.

**Call to Order:** Bobby Cruz, Co-Chair, called the meeting to order at 12:16 p.m. and asked for a moment of reflection.

**Adoption of the Agenda:** **Motion #1:** *it was moved and seconded (Jones, Ledbetter) to adopt the agenda. Motion carried.*

**Approval of the Minutes:** **Motion #2:** *it was moved and seconded (Ledbetter, Hesterman) to approve the February 28, 2019 minutes. Motion carried.* Abstention: Murray

**Public Comment:** None.

**Training: Houston Council Priority Setting Process:** Ledbetter presented the attached PowerPoint slides.

#### **Old Business**

#### **Reports from Administrative Agents**

**Ryan White Part A/MAI:** Martin presented the following reports:

- FY 2018 Part A and MAI Procurement Report dated 05/02/19.
- FY 2018 Part A and MAI Service Utilization Report dated 05/23/19.

**Ryan White Part B/State Services:** Garvin presented the following reports:

- FY18/19 Part B Procurement, dated 05/14/19

- FY18/19 DSHS State Services Procurement, dated 05/01/19
- FY18/19 Part B Service Utilization, dated 05/08/19
- Health Insurance Assist. Service Utilization Report, dated 03/29/19

**Determine FY 2020 Service Priorities:** The committee reviewed the Policy for the FY 2020 Priorities Setting Process; there is no new needs assessment data to justify changes in the priorities. **Motion #3:** *it was moved and seconded (Ledbetter, Jones) to keep the FY 2020 Ryan White Part A/Minority AIDS Initiative (MAI), Part B, and State Services funded service priorities the same as those in FY 2019. Motion carried unanimously. (See page 4 of the minutes for priorities.)*

**New Business**

**Proposed Idea Form:** See attached. **Motion #4:** *it was moved and seconded (Ledbetter, Hesterman) to approve page 2 of the Proposed Idea Form with no changes. Motion carried.*

**Announcements:** Important Priority & Allocations Committee meetings: Special Meetings: 11:00 am – 4:00 pm on Monday, June 10 and Tuesday, and also 3:00 pm – 7:00 pm on Wednesday June 11 if needed. The committee will vote on the FY 2020 Allocations 12:00 pm, Thursday, June 27, 2019. The Public Hearing will be Monday, July 1, 2019 at the City Council Annex and if significant public comment is received, the committee will meet on Tuesday, July 2<sup>nd</sup> at 10:00 am.

**Adjournment:** The meeting adjourned at 1:14 p.m.

Submitted by:

Approved by:

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Tori Williams, Director

Date

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Committee Chair

Date

Scribe: Beck

C = chaired the meeting; VP = participated via telephone; JA = just arrived; LM = left meeting

**2018 Priority & Allocations Committee Voting Record for 05/24/18**

MEMBERS	Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 Approve FY 2020 Priorities Carried				Motion #4 Proposed Idea Form Carried			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
Bobby Cruz, Co-Chair				C				C				C				C
Peta-gay Ledbetter, Co-Chair		X				X			X				X			
Allison Hesterman		X				X			X				X			
J. Hoxi Jones		X				X			X				X			
Mel Joseph		X				X			X				X			
Niquita Moret		X				X			X				X			
Allen Murray		X					X		X				X			

**Worksheet for Determining FY 2020 Service Priorities**

<b>Core Services</b>	<b>HL Scores</b>	<b>HL Rank</b>	<b>Approved FY 2019 Priorities</b>	<b>Proposed FY 2020 Priorities</b>	<b>Justification</b>
<b>Ambulatory/Outpatient Medical Care</b>	HHH	2	1	1	There is no new needs assessment data in 2019. Therefore, keep the priority rankings the same as in FY 2019.
<b>Medical Case Management</b>	HHH	2	2	2	
<b>Local Pharmacy Assistance Program</b>	HHH	2	3	3	
<b>Oral Health Services</b>	HLL	3	4	4	
<b>Health Insurance</b>	HLH	4	5	5	
<b>Mental Health Services</b>	HLH	4	6	6	
<b>Early Intervention Services (jail)</b>	LLH	7	7	7	
<b>Day Treatment</b>	LLH	7	8	8	
<b>Substance Abuse Treatment</b>	LLH	7	9	9	
<b>Medical Nutritional Therapy</b>	LLL	8	10	10	
<b>Hospice*</b>	-	-	11	11	

<b>Support Services</b>	<b>HL Scores</b>	<b>HL Rank</b>	<b>Approved FY 2019 Priorities</b>	<b>Proposed FY 2020 Priorities</b>	<b>Justification</b>
<b>Outreach*</b>	--	--	12	12	
<b>Emergency Financial Assistance</b>	--	--	13	13	
<b>Referral for Health Care &amp; Support Services</b>	--	--	14	14	
<b>Non-medical Case Management</b>	HHL	1	15	15	
<b>Medical Transportation</b>	LLH	7	16	16	
<b>Linguistics Services</b>	LLH	7	17	17	

\*Hospice, Emergency Financial Assistance, Referral for Health Care and Outreach do not have HL Score or HL Rank as they were not included in the 2016 Needs Assessment service category need and accessibility rankings.

# Priority and Allocations

## FY 2020 Guiding Principles and Decision Making Criteria

(Priority and Allocations Committee approved 02-28-19)

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. Ensure ongoing client access to a comprehensive system of core services as defined by HRSA
- B. Eliminate 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. Meet the needs of diverse populations as addressed by the epidemiology of HIV
- D. Identify individuals newly aware of their status and link them to care. Address the needs of those that are aware of their status and not in care.

### Allocations only

- E. Document or demonstrate cost-effectiveness of services and minimization of duplication
- F. Consider the 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
- G. Reduce the time period between diagnosis and entry into HIV medical care to facilitate timely linkage.

*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, including quality, cost, and outcome measures when applicable
- C. Documented response to the epidemiology of HIV in the EMA and HSDA
- D. Documented response to emerging needs reflecting the changing local epidemiology of HIV 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, the Continuum of Care, the National HIV/AIDS Strategy, the Texas HIV Plan and their underlying principles to the extent allowable under the Ryan White Program to:
  - build public support for HIV services;
  - inform people of their serostatus and, if they test positive, get them into care;
  - help people living with HIV improve their health status and quality of life and prevent the progression of HIV;
  - help reduce the risk of transmission; and
  - help people with advanced HIV 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 have 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 people living with or affected by HIV, 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 living with HIV and families, 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.**

**Houston Area HIV Services Ryan White Planning Council**

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**FY 2020 How to Best Meet the Need Quality Improvement Committee  
Service Category Recommendations Summary** (as of 05/15/19)

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

Ambulatory Outpatient Medical Care (including Medical Case Management and Service Linkage)  
Case Management (Clinical, Non-Medical Service Linkage, and Non-Medical Targeting Substance Use Disorders)  
Early Intervention Services (targeting the Incarcerated)  
Emergency Financial Assistance - Pharmacy Assistance  
Health Insurance Premium and Cost Sharing Assistance  
Hospice Services  
Linguistic Services  
Medical Nutritional Therapy/Supplements  
Oral Health (Untargeted and Targeting the Northern Rural Area)  
Outreach Services - Primary Care Re-Engagement  
Referral for Health Care and Support Services  
Substance Abuse Treatment  
Vision Care

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

**Home and Community Based Health Services (Adult Day Treatment)**

- ⓧ Accept the service definition as presented and keep the financial eligibility the same at 300%. Ask the Office of Support to work with the grant recipients to promote this service.

**Local Pharmacy Assistance**

- ⓧ Accept the service definition with the understanding that the financial eligibility for non-HIV medications may increase to 400% pending additional information from the grant recipient.

**Mental Health Services**

- ⓧ Accept the service definition with one change: allow 90 minutes for family/couples session with the understanding that the financial eligibility may increase to 400% pending additional information from the grant recipient.

**Transportation**

- ⓧ Accept the service definition as presented and keep the financial eligibility the same at 400%. Ask the Office of Support to check into the availability of alternative bus providers.



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
BES27521	Quality Management	495,000	0	0	0	0	495,000	2.24%	495,000	0	N/A	\$0	0%	100%
		20,656,176	742,768	703,670	-234	0	22,102,380	97.92%	22,102,380	0		18,574,390	84%	100%
								Unallocated	Unobligated					
	<b>Part A Grant Award:</b>	<b>21,398,944</b>	<b>Carry Over:</b>	<b>703,670</b>		<b>Total Part A:</b>	<b>22,102,614</b>	<b>234</b>	<b>0</b>					
		<b>Original Allocation</b>	<b>Award Reconciliation (b)</b>	<b>July Adjustments (carryover)</b>	<b>October Adjustments</b>	<b>Final Quarter Adjustments</b>	<b>Total Allocation</b>	<b>Percent</b>	<b>Total Expended on Services</b>	<b>Percent</b>				
	Core (must not be less than 75% of total service dollars)	15,903,040	677,017	703,670	-100,834	0	17,182,893	86.38%	17,182,893	85.94%				
	Non-Core (may not exceed 25% of total service dollars)	2,583,089	25,824	0	100,600	0	2,709,513	13.62%	2,810,113	14.06%				
	<b>Total Service Dollars (does not include Admin and QM)</b>	<b>18,486,129</b>	<b>702,841</b>	<b>703,670</b>	<b>-234</b>	<b>0</b>	<b>19,892,406</b>		<b>19,993,006</b>					
	Total Admin (must be ≤ 10% of total Part A + MAI)	1,675,047	0	0	0	0	1,675,047	7.58%						
	Total QM (must be ≤ 5% of total Part A + MAI)	495,000	0	0	0	0	495,000	2.24%						

MAI Procurement Report														
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	1,797,785	49,060	90,830	86,270	0	2,023,945	88.08%	2,023,945	0		1,980,550	98%	92%
1.b (MAI)	Primary Care - CBO Targeted to African American	910,163	24,530	45,415	43,135	0	1,023,243	44.53%	1,023,243	0	3/1/2018	\$1,153,900	113%	92%
1.c (MAI)	Primary Care - CBO Targeted to Hispanic	887,622	24,530	45,415	43,135	0	1,000,702	43.55%	1,000,702	0	3/1/2018	\$826,650	83%	92%
2	Medical Case Management	320,100	0	40,000	-86,270	0	273,830	11.92%	320,100	-46,270		\$298,363	93%	92%
2.c (MAI)	MCM - Targeted to African American	160,050		20,000	-43,135		136,915	5.96%	136,915	0	3/1/2018	\$193,786	142%	92%
2.d (MAI)	MCM - Targeted to Hispanic	160,050		20,000	-43,135		136,915	5.96%	136,915	0	3/1/2018	\$104,577	76%	92%
	<b>Total MAI Service Funds</b>	<b>2,117,885</b>	<b>49,060</b>	<b>130,830</b>	<b>0</b>	<b>0</b>	<b>2,297,775</b>	<b>100.00%</b>	<b>2,023,945</b>	<b>273,830</b>		<b>1,980,550</b>	<b>98%</b>	<b>92%</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>
BEO 27516	<b>Total MAI Funds</b>	<b>2,117,885</b>	<b>49,060</b>	<b>130,830</b>	<b>0</b>	<b>0</b>	<b>2,297,775</b>	<b>100.00%</b>	<b>2,023,945</b>	<b>273,830</b>		<b>1,980,550</b>	<b>98%</b>	<b>92%</b>
	<b>MAI Grant Award</b>	<b>2,166,944</b>	<b>Carry Over:</b>	<b>0</b>		<b>Total MAI:</b>	<b>2,166,944</b>							
	<b>Combined Part A and MAI Original Allocation Total</b>	<b>22,774,061</b>												

Footnotes:

- 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 or Decrease funding scenario.
- (c) Funded under Part B and/or SS
- (d) Not used at this time
- (e) 10% rule reallocations

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
<b>1</b>	<b>Outpatient/Ambulatory Primary Care</b>	<b>9,634,415</b>	<b>391,824</b>	<b>703,670</b>	<b>30,517</b>	<b>-120,000</b>	<b>10,640,426</b>	<b>48.14%</b>	<b>10,640,426</b>	<b>0</b>		<b>10,306,288</b>	<b>97%</b>	<b>100%</b>
1.a	Primary Care - Public Clinic (a)	3,520,995	70,069	378,670	0		3,969,734	17.96%	3,969,734	0	3/1/2018	\$3,815,916	96%	100%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	940,447	80,923	100,000	1,839	-40,000	1,083,209	4.90%	1,083,209	0	3/1/2018	\$1,448,945	134%	100%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	786,424	80,923	100,000	1,839	-40,000	929,186	4.20%	929,186	0	3/1/2018	\$1,082,115	116%	100%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	1,003,821	100,899	100,000	1,839	-40,000	1,166,559	5.28%	1,166,559	0	3/1/2018	\$716,374	61%	100%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,127,327	22,434	0	0		1,149,761	5.20%	1,149,761	0	3/1/2018	\$1,031,422	90%	100%
1.f	Primary Care - Women at Public Clinic (a)	1,837,964	36,576	0			1,874,540	8.48%	1,874,540	0	3/1/2018	\$1,767,966	94%	100%
1.g	Primary Care - Pediatric (a.1)	15,437	0				15,437	0.07%	15,437	0	3/1/2018	\$9,900	64%	100%
1.h	Vision	402,000	0	25,000	25,000		452,000	2.05%	452,000	0	3/1/2018	\$433,650	96%	100%
<b>2</b>	<b>Medical Case Management</b>	<b>2,535,802</b>	<b>0</b>	<b>0</b>	<b>-200,714</b>	<b>-30,000</b>	<b>2,305,088</b>	<b>10.43%</b>	<b>2,305,088</b>	<b>0</b>		<b>2,015,520</b>	<b>87%</b>	<b>100%</b>
2.a	Clinical Case Management	488,656	0	0	-30,000		458,656	2.08%	458,656	0	3/1/2018	\$456,310	99%	100%
2.b	Med CM - Public Clinic (a)	482,722	0	0	0		482,722	2.18%	482,722	0	3/1/2018	\$246,992	51%	100%
2.c	Med CM - Targeted to AA (a) (e)	321,070	0	0	-50,038		271,032	1.23%	271,032	0	3/1/2018	\$351,650	130%	100%
2.d	Med CM - Targeted to H/L (a) (e)	321,072	0	0	-50,038		271,034	1.23%	271,034	0	3/1/2018	\$190,975	70%	100%
2.e	Med CM - Targeted to W/MSM (a) (e)	107,247	0	0	-50,038		57,209	0.26%	57,209	0	3/1/2018	\$151,466	265%	100%
2.f	Med CM - Targeted to Rural (a)	348,760	0	0			348,760	1.58%	348,760	0	3/1/2018	\$271,090	78%	100%
2.g	Med CM - Women at Public Clinic (a)	180,311	0	0			180,311	0.82%	180,311	0	3/1/2018	\$120,163	67%	100%
2.h	Med CM - Targeted to Pedi (a.1)	160,051	0	0	-20,600	-30,000	109,451	0.50%	109,451	0	3/1/2018	\$112,745	103%	100%
2.i	Med CM - Targeted to Veterans	80,025	0	0	0		80,025	0.36%	80,025	0	3/1/2018	\$67,084	84%	100%
2.j	Med CM - Targeted to Youth	45,888	0	0			45,888	0.21%	45,888	0	3/1/2018	\$47,046	103%	100%
<b>3</b>	<b>Local Pharmacy Assistance Program (a) (e)</b>	<b>1,934,796</b>	<b>256,674</b>	<b>0</b>	<b>69,363</b>	<b>0</b>	<b>2,260,833</b>	<b>10.23%</b>	<b>2,260,833</b>	<b>0</b>		<b>\$2,558,119</b>	<b>113%</b>	<b>100%</b>
<b>4</b>	<b>Oral Health</b>	<b>166,404</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>166,404</b>	<b>0.75%</b>	<b>166,404</b>	<b>0</b>		<b>166,400</b>	<b>100%</b>	<b>100%</b>
4.a	Oral Health - Untargeted (c)	0					0	0.00%	0	0	N/A	\$0	0%	0%
4.b	Oral Health - Targeted to Rural	166,404	0	0			166,404	0.75%	166,404	0	3/1/2018	\$166,400	100%	100%
<b>5</b>	<b>Mental Health Services (c)</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>6</b>	<b>Health Insurance (c)</b>	<b>1,244,551</b>	<b>28,519</b>	<b>0</b>	<b>0</b>	<b>150,000</b>	<b>1,423,070</b>	<b>6.44%</b>	<b>1,423,070</b>	<b>0</b>		<b>\$1,442,569</b>	<b>101%</b>	<b>100%</b>
<b>7</b>	<b>Home and Community-Based Services (c)</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>8</b>	<b>Substance Abuse Services - Outpatient</b>	<b>45,677</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>45,677</b>	<b>0.21%</b>	<b>45,677</b>	<b>0</b>		<b>\$32,306</b>	<b>71%</b>	<b>100%</b>
<b>9</b>	<b>Early Intervention Services (c)</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>10</b>	<b>Medical Nutritional Therapy (supplements)</b>	<b>341,395</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>341,395</b>	<b>1.54%</b>	<b>341,395</b>	<b>0</b>		<b>\$327,976</b>	<b>96%</b>	<b>100%</b>
<b>11</b>	<b>Hospice Services</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>12</b>	<b>Outreach Services</b>	<b>420,000</b>	<b>39,927</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>459,927</b>	<b>2.08%</b>	<b>459,927</b>	<b>0</b>		<b>\$294,500</b>	<b>64%</b>	<b>100%</b>
<b>13</b>	<b>Non-Medical Case Management</b>	<b>1,231,002</b>	<b>0</b>	<b>0</b>	<b>-49,400</b>	<b>0</b>	<b>1,181,602</b>	<b>5.35%</b>	<b>1,181,602</b>	<b>0</b>		<b>1,375,349</b>	<b>116%</b>	<b>100%</b>
13.a	Service Linkage targeted to Youth	110,793		0			110,793	0.50%	110,793	0	3/1/2018	\$99,700	90%	100%
13.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000		0	-29,400		70,600	0.32%	70,600	0	3/1/2018	\$81,269	115%	100%
13.c	Service Linkage at Public Clinic (a)	427,000		0	0		427,000	1.93%	427,000	0	3/1/2018	\$446,037	104%	100%
13.d	Service Linkage embedded in CBO Pcare (a) (e)	593,209		0	-20,000		573,209	2.59%	573,209	0	3/1/2018	\$748,342	131%	100%
<b>14</b>	<b>Medical Transportation</b>	<b>482,087</b>	<b>25,824</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>507,911</b>	<b>2.30%</b>	<b>507,911</b>	<b>0</b>		<b>349,864</b>	<b>69%</b>	<b>100%</b>
14.a	Medical Transportation services targeted to Urban	252,680	0	0	0		252,680	1.14%	252,680	0	3/1/2018	\$265,776	105%	100%
14.b	Medical Transportation services targeted to Rural	97,185	0	0	0		97,185	0.44%	97,185	0	3/1/2018	\$84,088	87%	100%
14.c	Transportation vouchers (bus passes & gas cards)	132,222	25,824	0	0		158,046	0.72%	158,046	0	3/1/2018	\$0	0%	0%
<b>15</b>	<b>Linguistic Services (c)</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>16</b>	<b>Emergency Financial Assistance</b>	<b>450,000</b>	<b>0</b>	<b>0</b>	<b>150,000</b>	<b>0</b>	<b>600,000</b>	<b>2.71%</b>	<b>600,000</b>	<b>0</b>		<b>\$654,904</b>	<b>109%</b>	<b>100%</b>
<b>17</b>	<b>Referral for Health Care and Support Services (c)</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>BES27518</b>	<b>Total Service Dollars</b>	<b>18,486,129</b>	<b>742,768</b>	<b>703,670</b>	<b>-234</b>	<b>0</b>	<b>19,932,333</b>	<b>88.10%</b>	<b>19,932,333</b>	<b>0</b>		<b>18,574,390</b>	<b>93%</b>	<b>100%</b>
	<b>Grant Administration</b>	<b>1,675,047</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1,675,047</b>	<b>7.58%</b>	<b>1,675,047</b>	<b>0</b>		<b>0</b>	<b>0%</b>	<b>100%</b>
<b>BES27517</b>	<b>HCPHES/RWGA Section</b>	<b>1,146,388</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1,146,388</b>	<b>5.19%</b>	<b>1,146,388</b>	<b>0</b>		<b>\$0</b>	<b>0%</b>	<b>100%</b>
<b>PC</b>	<b>RWPC Support*</b>	<b>528,659</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>528,659</b>	<b>2.39%</b>	<b>528,659</b>	<b>0</b>		<b>0</b>	<b>0%</b>	<b>100%</b>

Final Quarter Reallocations

Service Category

Priority

<b>1</b>	<b>Outpatient/Ambulatory Primary Care</b>	
1.a	Primary Care - Public Clinic (a)	-\$80,170.00
1.b-d	Primary Care - CBO	\$450,895.58
1.e	Primary Care - CBO Targeted to Rural	-\$114,785.98
<b>2</b>	<b>Medical Case Management</b>	
2.b	Med CM - Public Clinic	-\$135,246.00
2.c	Med CM - CBO	-\$89,591.25
2.f	Med CM - Targeted to Rural (a)	-\$75,328.00
2.h	Med CM - Targeted to Pedi (a.1)	\$13,000.00
<b>3</b>	<b>Local Pharmacy Assistance Program (a) (e)</b>	<b>\$2,646.85</b>
<b>12</b>	<b>Outreach Services</b>	<b>-\$190,352.30</b>
<b>13</b>	<b>Non-Medical Case Management</b>	
13.c	Service Linkage at Public Clinic (a)	\$36,260.00
13.d	Service Linkage embedded in CBO Pcare (Pedi and Rural)	\$92,945.70
<b>16</b>	<b>Emergency Financial Assistance</b>	<b>\$90,323.40</b>

**The Houston Regional HIV/AIDS Resource Group, Inc.**  
**FY 1819 Ryan White Part B (FINAL)**  
**Procurement Report**  
**April 1, 2018 - March 31, 2019**



Reflects spending through March 2019

Spending Target: 100 %

Revised

6/3/2019

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendments (a)	Contracted Amount	% of Grant Award	Date of Original Procurement	4th Quarter Amendments	Final Amount Expended	Percent YTD
6	Oral Health Care (1)	\$2,085,565	69%		\$2,085,565	62%	4/1/2018	(\$155,328)	\$1,930,237	93%
7	Health Insurance Premiums and Cost Sharing	\$726,885	24%	\$325,806	\$1,052,691	32%	4/1/2018	\$160,944	\$1,213,635	115%
9	Home and Community Based Health Services (2)	\$202,315	7%		\$202,315	6%	4/1/2018	(\$55,835)	\$146,480	72%
	Increased Award Amount (a)		0%	-\$325,806						
<b>Total Houston HSDA</b>		3,014,765	100%	\$0	\$3,340,571	100%		(\$50,219)	\$3,290,352	98%

NOTE TRG has a required spending goal of 95% of its total award. Thus, final quarter amendments are necessary to achieve such goal.

(1) OHS-Initially there was some staff turnover; service delays but ended strong

Note: TRG is currently reviewing reimbursement rates which will impact future spending

(2) HCBHS- Reduction in future award to reflect spending level

**Final Spending for All 6 HSDA's**

	HSDA Original Amounts	Amendments	Amended Amounts	Total Expended	% Expended
Houston 16	\$ 3,340,571	\$ (50,500)	\$ 3,290,071	\$ 3,289,919	98%
Beaumont 15	\$ 540,009	\$ (81,000)	\$ 459,009	\$ 381,999	71%
Galveston 25	\$ 647,327	\$ 54,000	\$ 701,327	\$ 700,300	108%
Lufkin 14	\$ 376,599	\$ 12,500	\$ 389,099	\$ 389,164	103%
Longview 6	\$ 691,593	\$ 65,000	\$ 756,593	\$ 756,703	109%
Texarkana Paris 5	\$ 312,274	\$ -	\$ 312,274	\$ 275,938	88%
All	\$ 5,908,373	\$ -	\$ 5,908,373	\$ 5,794,023	98%

**The Houston Regional HIV/AIDS Resource Group, Inc.**  
**FY 1920 Ryan White Part B**  
**Procurement Report**  
**April 1, 2019 - March 31, 2020**



Reflects spending through April 2019

Spending Target: 8 %

Revised 6/3/19

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendment*	Contractual Amount	% of Grant Award	Date of Original Procurement	Expended YTD	Percent YTD
4	Oral Health Care	\$2,186,905	65%	\$31,973	\$2,218,878	66%	4/1/2019	\$180,917	8%
5	Health Insurance Premiums and Cost Sharing (1)	\$1,040,351	31%	\$0	\$1,040,351	31%	4/1/2019	\$0	0%
8	Home and Community Based Health Services	\$113,315	3%	\$0	\$113,315	3%	4/1/2019	\$10,400	9%
	Increased RWB Award added to OHS per Increase Scenario*	\$0	0%	-\$31,973	\$0				
<b>Total Houston HSDA</b>		3,340,571	100%	0	3,372,544	100%		191,317	6%

Note: Spending variances of 10% of target will be addressed:

- 1 HIP - Funded by Part A, B and State Services. Provider spends grant funds by ending dates Part A- 2/28; B-3/31; SS-8/31.  
 No expenditures submitted - Focusing on spending State Services funds.

**The Houston Regional HIV/AIDS Resource Group, Inc.**  
**FY 1819 DSHS State Services**  
**Procurement Report**  
**September 1, 2018- August 31, 2019**



Chart reflects spending through April 2019

Spending Target: 66.67%

Revised 6/3/2019

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendments	Contractual Amount	% of Grant Award	Date of Original Procurement	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing	\$979,694	52%	\$142,285	\$1,121,979	56%	9/1/2018	\$725,248	65%
6	Mental Health Services (1)	\$300,000	16%	\$0	\$300,000	15%	9/1/2018	\$98,420	33%
7	EIS - Incarcerated	\$166,211	9%	\$0	\$166,211	8%	9/1/2018	\$104,157	63%
11	Hospice (2)	\$359,832	19%		\$359,832	18%	9/1/2018	\$129,800	36%
15	Linguistic Services (3)	\$68,000	4%		\$68,000	3%	9/1/2018	\$24,375	36%
	Increased award amount -Approved by RWPC for Health Insurance (a)	\$0	0%	-\$142,285					
<b>Total Houston HSDA</b>		<b>1,873,737</b>	<b>100%</b>	<b>\$0</b>	<b>\$2,016,022</b>	<b>100%</b>		<b>1,082,000</b>	<b>54%</b>

- (1) Mental Health Services are under utilized. Need to reduce for reallocation -
- (2) Hospice care has had lower than expected client turn out and agency has other grant funding. TRG will reduce contract for reallocations - amount TBD.
- (3) Linguistic is one month behind on reporting due to slow invoicing by provider, additionally there has been lower than expected client turn out.
- (a) Reflect increase in State Services award and RWPC approval of increasing HIP category

# Houston Ryan White Health Insurance Assistance Service Utilization Report



Period Reported:

09/01/2018-4/30/19

Revised: 5/24/2019

Request by Type	Assisted			NOT Assisted		
	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)
Medical Co-Payment	1264	\$130,375.75				0
Medical Deductible	316	\$139,335.80				0
Medical Premium	4904	\$1,924,842.46				0
Pharmacy Co-Payment	4419	\$449,890.18				0
APTC Tax Liability	0	\$0.00	0			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	10	\$3,484.00	8	NA	NA	NA
Totals:	10913	\$2,640,960.19	8	0	\$0.00	

Comments: This report represents services provided under all grants.

		Part A	MAI	Part B	State Services	SS-R	Total	FY 2020 Allocations & Justification
Remaining Funds to Allocate		\$0	\$0	\$0	\$0	\$0	\$0	
		Part A	MAI	Part B	State Services	SS-R	Total	FY 2020 Allocations & Justification
<b>1</b>	<b>Ambulatory/Outpatient Primary Care</b>	<b>\$9,869,619</b>	<b>\$1,887,283</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$11,756,902</b>	
1.a	PC-Public Clinic	\$3,591,064					\$3,591,064	
1.b	PC-AA	\$952,498	\$954,912				\$1,907,410	FY20: Part A: Increase \$12,051 in Part due to increased CBO spending MAI: FY19 Increased Scenario applied \$20,219 to 1.b
1.c	PC-Hisp - see 1.b above	\$798,473	\$932,372				\$1,730,845	FY20: Part A: Increase \$12,049 in Part due to increased CBO spending MAI: FY19 Increased Scenario applied \$20,220 to 1.c
1.d	PC-White - see 1.b above	\$1,035,846					\$1,035,846	FY20: Increase \$12,049 in Part A due to increased CBO spending
1.e	PC-Rural	\$1,149,761					\$1,149,761	
1.f	PC-Women	\$1,874,540					\$1,874,540	
1.g	PC-Pedi	\$15,437					\$15,437	
1.h	Vision Care	\$452,000					\$452,000	FY20: Increase \$50k in Part A by due to FY18 expenditures
<b>2</b>	<b>Medical Case Management</b>	<b>\$2,185,802</b>	<b>\$320,100</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,505,902</b>	
2.a	CCM-Mental/Substance	\$488,656					\$488,656	
2.b	MCM-Public Clinic	\$427,722					\$427,722	FY20: Decrease \$55k in Part A due to underspending, and to fund increases in SLW, Vision, and EFA
2.c	MCM-AA	\$266,070	\$160,050				\$426,120	FY20: Decrease \$55k in Part A due to underspending, and to fund increases in SLW, Vision, and EFA
2.d	MCM-Hisp	\$266,072	\$160,050				\$426,122	FY20: Decrease \$55k in Part A due to underspending, and to fund increases in SLW, Vision, and EFA
2.e	MCM-White	\$52,247					\$52,247	FY20: Decrease \$55k in Part A due to underspending, and to fund increases in SLW, Vision, and EFA
2.f	MCM-Rural	\$273,760					\$273,760	FY20: Decrease \$75k in Part A MCM-Rural due to underspending in FY18
2.g	MCM-Women	\$125,311					\$125,311	FY20: Decrease \$55k in Part A due to underspending, and to fund increases in SLW, Vision, and EFA
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>\$3,157,166</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,157,166</b>	FY20: Create two subcategories for LPAP: 3.a for LPAP - Public Clinic, and 3.b LPAP-Untargeted. FY19 Increased Scenario applied \$500k to LPAP
3.a	LPAP-Public Clinic	\$610,360					\$610,360	FY20: Fund level to FY18 LPAP expenditures at public clinic



		Part A	MAI	Part B	State Services	SS-R	Total	FY 2020 Allocations & Justification
Remaining Funds to Allocate		\$0	\$0	\$0	\$0	\$0	\$0	
3.b	LPAP-Untargeted	\$2,546,806					\$2,546,806	FY20: Subtract FY18 public clinic LPAP expenditures from FY19 Increased Funding Scenario applied to LPAP to create LPAP-Untargeted amount
<b>4</b>	<b>Oral Health</b>	<b>\$166,404</b>	<b>\$0</b>	<b>\$2,211,405</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,377,809</b>	
4.a	Untargeted			\$2,211,405			\$2,211,405	FY20: Increase \$24,500 in Part B to reflect increase in cost of services (i.e., increase in prosthodontics reimbursements)
4.b	Rural Dental	\$166,404					\$166,404	
<b>5</b>	<b>Health Insurance Co-Pays &amp; Co-Ins</b>	<b>\$1,339,239</b>	<b>\$0</b>	<b>\$1,047,824</b>	<b>\$989,506</b>	<b>\$0</b>	<b>\$3,376,569</b>	FY20: SS: Decrease \$7,473 in SS to balance EIS cost of living increase; Part B: Increase \$7,473 Part B by to balance decrease in SS HIAP Part A: FY19 Increased Scenario applied \$166,169 to HIA
<b>6</b>	<b>Mental Health Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$300,000</b>	<b>\$0</b>	<b>\$300,000</b>	
<b>7</b>	<b>Early Intervention Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$175,000</b>	<b>\$0</b>	<b>\$175,000</b>	06-10-19 TRG Note: SS \$8,789 cost of living raise for EIS staff
<b>8</b>	<b>Home &amp; Community Based Health Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$113,315</b>	<b>\$0</b>	<b>\$0</b>	<b>\$113,315</b>	
8.a	In-Home (skilled nursing & health aide)						\$0	
8.b	Facility-based (adult day care)			\$113,315			\$113,315	
<b>9</b>	<b>Substance Abuse Treatment - Outpatient</b>	<b>\$45,677</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$45,677</b>	
<b>10</b>	<b>Medical Nutritional Therapy</b>	<b>\$341,395</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$341,395</b>	
<b>11</b>	<b>Hospice</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$259,832</b>	<b>\$0</b>	<b>\$259,832</b>	
<b>12</b>	<b>Outreach Services</b>	<b>\$420,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$420,000</b>	
<b>13</b>	<b>Emergency Financial Assistance</b>	<b>\$525,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$525,000</b>	FY20: Increase \$75k in Part A due FY18 expenditures
<b>14</b>	<b>Referral for Health Care &amp; Support Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$375,000</b>	<b>\$375,000</b>	
<b>15</b>	<b>Non-Medical Case Management</b>	<b>\$1,381,002</b>	<b>\$0</b>	<b>\$0</b>	<b>\$225,000</b>	<b>\$0</b>	<b>\$1,606,002</b>	
15.a	SLW-Youth	\$110,793					\$110,793	
15.b	SLW-Testing	\$100,000					\$100,000	
15.c	SLW-Public	\$427,000					\$427,000	
15.d	SLW-CBO, includes some Rural	\$743,209					\$743,209	FY20: Increase \$150k in Part A due to FY18 expenditures
15.e	SLW-Substance Use	\$0			\$225,000		\$225,000	
<b>16</b>	<b>Transportation</b>	<b>\$424,911</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$424,911</b>	
16.a	Van Based - Urban	\$252,680					\$252,680	

		Part A	MAI	Part B	State Services	SS-R	Total	FY 2020 Allocations & Justification
<b>Remaining Funds to Allocate</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
16.b	Van Based - Rural	\$97,185		\$0			\$97,185	
16.c	Bus Passes & Gas Vouchers	\$75,046					\$75,046	
17	<b>Linguistic Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$68,000</b>	<b>\$0</b>	<b>\$68,000</b>	
<b>Total Service Allocation</b>		<b>\$19,856,215</b>	<b>\$2,207,383</b>	<b>\$3,372,544</b>	<b>\$2,017,338</b>	<b>\$375,000</b>	<b>\$27,828,480</b>	
NA	Quality Management	\$412,940					\$412,940	06-10-19 RWGA Note: 50% CPCDMS cost moved under admin
NA	Administration	\$1,795,958					\$1,795,958	06-10-19 RWGA Note: 50% CPCDMS cost moved under admin
NA	Compassionate Care Program					\$600,000	\$600,000	
<b>Total Non-Service Allocation</b>		<b>\$2,208,898</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$600,000</b>	<b>\$2,808,898</b>	
<b>Total Grant Funds</b>		<b>\$22,065,113</b>	<b>\$2,207,383</b>	<b>\$3,372,544</b>	<b>\$2,017,338</b>	<b>\$975,000</b>	<b>\$30,637,378</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>	<b>\$0</b>
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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.

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<b>[For Staff Only]</b>						
If needed, use this space to enter base amounts to be used for calculations						
	<b>RW/A Amount Actual</b>	<b>MAI Amount Actual</b>	<b>Part B actual</b>	<b>State Service est.</b>	<b>SS-R estimated</b>	
Total Grant Funds	<b>\$22,065,113</b>	<b>\$2,207,383</b>	<b>\$3,372,544</b>	<b>\$2,017,338</b>	<b>\$975,000</b>	<b>\$30,637,378</b>

Houston Ryan White Planning Council  
Priority and Allocations Committee

**Proposed Ryan White Part A, MAI, Part B and State Services Funding  
FY 2020 Allocations**

(Priority and Allocations Committee approved 06-10-19)

**MOTION A: All Funding Streams – Level Funding Scenario**

**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 2020 Level Funding Scenario.

**MOTION B: MAI Increase / Decrease Scenarios**

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

Primary care subcategories will be decreased by the same percent. This applies to the total amount of service dollars available.

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

Primary care subcategories will be increased by the same percent. This applies to the total amount of service dollars available.

**MOTION C: Part A Increase / Decrease Scenarios**

**Decrease Funding Scenario for Ryan White Part A Funding.**

All service categories except subcategories 1.g, 2.h, 2.i, 2.j, and 9 will be decreased by the same percent. This applies to the total amount of service dollars available.

**Increase Funding Scenario for Ryan White Part A Funding.**

Step 1: Allocate first \$200,000 to pilot programs in Primary Care (category 1).

Step 2: Allocate next \$300,000 to Health Insurance Assistance Program (category 5).

Step 3: Any remaining increase in funds following application of Steps 1 and 2 will be allocated by the Ryan White Planning Council.

**MOTION D: Part B and State Services Increase/Decrease Scenario**

**Decrease Funding Scenario for Ryan White Part B and State Services Funding.**

A decrease in funds of any amount will be allocated by the Ryan White Planning Council after the notice of grant award is received.

**Increase Funding Scenario for Ryan White Part B and State Services Funding.**

Step 1: Allocate first \$200,000 to Oral Health Untargeted (category 4a).

Step 2: Allocate next \$200,000 to Health Insurance Assistance Program (category 5).

Step 3: Any remaining increase in funds following application of Steps 1 and 2 will be allocated by the Ryan White Planning Council after the notice of grant award is received.

		Part A	MAI	Part B	State Services	SS-R	Total	FY 2019 Allocations & Justification
Remaining Funds to Allocate		\$0	\$0	\$0	\$0	\$0	\$0	
		Part A	MAI	Part B	State Services	SS-R	Total	FY 2019 Allocations & Justification
<b>1</b>	<b>Ambulatory/Outpatient Primary Care</b>	<b>\$9,783,470</b>	<b>\$1,846,844</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$11,630,314</b>	
1.a	PC-Public Clinic	\$3,591,064					\$3,591,064	
1.b	PC-AA	\$940,447	\$934,693				\$1,875,140	
1.c	PC-Hisp - see 1.b above	\$786,424	\$912,152				\$1,698,576	
1.d	PC-White - see 1.b above	\$1,023,797					\$1,023,797	
1.e	PC-Rural	\$1,149,761					\$1,149,761	
1.f	PC-Women	\$1,874,540					\$1,874,540	
1.g	PC-Pedi	\$15,437					\$15,437	
1.h	Vision Care	\$402,000					\$402,000	
<b>2</b>	<b>Medical Case Management</b>	<b>\$2,535,802</b>	<b>\$320,100</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,855,902</b>	
2.a	CCM-Mental/Substance	\$488,656					\$488,656	
2.b	MCM-Public Clinic	\$482,722					\$482,722	
2.c	MCM-AA	\$321,070	\$160,050				\$481,120	
2.d	MCM-Hisp	\$321,072	\$160,050				\$481,122	
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>	<b>\$2,657,166</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,657,166</b>	<b>FY19: Increase \$465,696 in Part A due to increased expenditures in FY17.</b>
<b>4</b>	<b>Oral Health</b>	<b>\$166,404</b>	<b>\$0</b>	<b>\$2,186,905</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,353,309</b>	
4.a	Untargeted			\$2,186,905			\$2,186,905	<b>FY19: Increase \$101,340 in Part B to reflect FY17 expenditures.</b>
4.b	Rural Dental	\$166,404					\$166,404	
<b>5</b>	<b>Health Insurance Co-Pays &amp; Co-Ins</b>	<b>\$1,173,070</b>	<b>\$0</b>	<b>\$1,040,351</b>	<b>\$996,979</b>	<b>\$0</b>	<b>\$3,210,400</b>	<b>FY19: Part A - Decrease \$100,000 in Part A, move to LPAP. SS - Decrease \$82,715 in SS to balance funding five SLW targeted to substance use (sub-category 15e). Increase \$100,000 in SS to make \$100,000 available under Part A to move to LPAP. Part B - Increase \$313,466 in Part B (\$82,715 to offset funding SLW-Substance Use + \$230,751 to reflect FY17 expenditures).</b>

	Part A	MAI	Part B	State Services	SS-R	Total	FY 2019 Allocations & Justification
<b>Remaining Funds to Allocate</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
<b>6 Mental Health Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$300,000</b>	<b>\$0</b>	<b>\$300,000</b>	
<b>7 Early Intervention Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$166,211</b>	<b>\$0</b>	<b>\$166,211</b>	
<b>8 Home &amp; Community Based Health Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$113,315</b>	<b>\$0</b>	<b>\$0</b>	<b>\$113,315</b>	
8.a In-Home (skilled nursing & health aide)						\$0	
8.b Facility-based (adult day care)			\$113,315			\$113,315	FY19: Decrease \$90,000 in Part B to reflect FY17 expenditures.
<b>9 Substance Abuse Treatment - Outpatient</b>	<b>\$45,677</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$45,677</b>	
<b>10 Medical Nutritional Therapy</b>	<b>\$341,395</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$341,395</b>	
<b>11 Hospice</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$259,832</b>	<b>\$0</b>	<b>\$259,832</b>	FY19: Decrease \$100,000 in SS due to underspending and to move to LPAP through toggling between SS and Part A under Health Insurance Assistance.
<b>12 Outreach Services</b>	<b>\$420,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>		<b>\$420,000</b>	FY19: Decrease \$39,927 in Part A to restore to original FY18 allocation amount (prior to application of the FY18 Increase Scenario).
<b>13 Emergency Financial Assistance</b>	<b>\$450,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$450,000</b>	
<b>14 Referral for Health Care &amp; Support Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$375,000</b>	<b>\$375,000</b>	
<b>15 Non-Medical Case Management</b>	<b>\$1,231,002</b>	<b>\$0</b>	<b>\$0</b>	<b>\$225,000</b>	<b>\$0</b>	<b>\$1,456,002</b>	
15.a SLW-Youth	\$110,793					\$110,793	
15.b SLW-Testing	\$100,000					\$100,000	
15.c SLW-Public	\$427,000					\$427,000	
15.d SLW-CBO, includes some Rural	\$593,209					\$593,209	
15.e SLW-Substance Use	\$0			\$225,000		\$225,000	FY19: Fund \$225,000 under SS to support five SLWs targeted to substance use.
<b>16 Transportation</b>	<b>\$424,911</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$424,911</b>	
16.a Van Based - Urban	\$252,680					\$252,680	
16.b Van Based - Rural	\$97,185		\$0			\$97,185	
16.c Bus Passes & Gas Vouchers	\$75,046					\$75,046	FY19: Decrease \$83,000 in Part A as current inventory can support the reduction in funding for one year.
<b>17 Linguistic Services</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$68,000</b>	<b>\$0</b>	<b>\$68,000</b>	
<b>Total Service Allocation</b>	<b>\$19,228,897</b>	<b>\$2,166,944</b>	<b>\$3,340,571</b>	<b>\$2,016,022</b>	<b>\$375,000</b>	<b>\$27,127,434</b>	

		Part A	MAI	Part B	State Services	SS-R	Total	FY 2019 Allocations & Justification
<b>Remaining Funds to Allocate</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
NA	Quality Management	\$495,000					\$495,000	
NA	Administration	\$1,675,047					\$1,675,047	
NA	Compassionate Care Program					\$600,000	\$600,000	
<b>Total Non-Service Allocation</b>		<b>\$2,170,047</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$600,000</b>	<b>\$2,770,047</b>	
<b>Total Grant Funds</b>		<b>\$21,398,944</b>	<b>\$2,166,944</b>	<b>\$3,340,571</b>	<b>\$2,016,022</b>	<b>\$975,000</b>	<b>\$29,897,481</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>	<b>\$0</b>
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If needed, use this space to enter base amounts to be used for calculations						
	<b>RW/A Amount Actual</b>	<b>MAI Amount Actual</b>	<b>Part B actual</b>	<b>State Service est.</b>	<b>SS-R estimated</b>	
Total Grant Funds	<b>\$21,398,944</b>	<b>\$2,166,944</b>	<b>\$3,340,571</b>	<b>\$2,016,022</b>	<b>\$975,000</b>	<b>\$29,897,481</b>