Houston Area HIV Services Ryan White Planning Council Office of Support

2223 West Loop South, Suite 240, Houston, Texas 77027 832 927-7926 telephone; 713 572-3740 fax

www.rwpchouston.org

Memorandum

To: Members, Priority and Allocations Committee:

Bobby Cruz, Co-Chair Niquita Moret Allen Murray, Co-Chair Carol Suazo

Mauricia Chatman Rashel Richardson
Mel Joseph Bruce Turner

Josh Mica Peta-Gay Ledbetter

Copy: Carin Martin Ann Robison

Heather Keizman Johnetta Evans-Thomas

Yvette Garvin
Amber Harbolt
Diane Beck
Bruce Turner

Katy Caldwell
Nancy Miertschin
Charlene Flash, MD
Rodney Goodie

From: Tori Williams

Date: Thursday, June 18, 2020

Re: Meeting Announcement

Please note the following July 2020 meetings of the Priority and Allocations Committee. Enclosed you will find an agenda for the first meeting. Please see the top of the agenda for the Zoom meeting id number and password. We look forward to seeing you at:

Final Special Meeting (see enclosed meeting packet)

To allocate funds to a possible new recommendation from the Quality Improvement Committee, review any new public comment and possibly amend the recommended FY 2021 priorities and allocations before they receive final approval at the July Steering Committee and Council meetings.

• 2 pm, Wednesday, July 1, 2020

Regularly Scheduled Committee Meeting (the meeting packet will be sent in mid-July)

To reallocate carryover funds from FY 2019.

• 12 noon, Thursday, July 23, 2020

Please contact Rod Avila to let her know if you will or will not be in attendance at the meetings. Rod can be reached via email at: Rodriga.Avila@cjo.hctx.net or by telephone at: 832 927-7926.

We send much appreciation and look forward to meeting with you soon.

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

2:00 pm, Wednesday, July 1, 2020

Click the following link to join the Zoom meeting:
https://us02web.zoom.us/j/8899837982?pwd=anE5RjczelRhT0RFcTlxTmlsQXZBZz09
Meeting ID: 889 983 7982
Password: Ryanwhite

AGENDA

I. Call to Order

A. Moment of Reflection

B. Approval of Agenda

C. Review Meeting Goals

Bobby Cruz and Allen Murray, Co-Chairs

Tori Williams, Director RW 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 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 yourself, 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. Old Business

- A. Review public comment
- B. Review proposed FY 2021 service priorities
- C. Review proposed FY 2021 allocations:
 - 1. MAI funding
 - 2. Level funding scenario
 - 3. Increase funding scenario
 - 4. Decrease funding scenario
- IV. New Business
- V. Announcements
- VI. Adjourn

Williams, Victoria (County Judge's Office)

From: Charlene Flash <cflash@avenue360.org>

Sent: Tuesday, June 16, 2020 9:37 AM

To: Williams, Victoria (County Judge's Office) **Cc:** Eric James; Diane Arms; Oscar Perez; Greg Pate

Subject: Allocations commentary

Dear Tori,

Please see below comments from Avenue 360.

With the understanding that the planning council often uses historical spending under each service category to allocate future funds, I would urge them to consider a few key challenges unique to this funding cycle.

Dental: For dental, the reimbursement rate will be changing from a fee per unit to a fee per service cost. This will increase expenditures of the Ryan White dollars while also allowing possible expansion of services with a more reasonable cost reimbursement based on the true cost of providing dental services. We also have plans to expand to other locations in the City to expand access. While spending has been flat or low, an increase in capacity and providers should see a jump in numbers and would require more dental dollars be allocated. There has always been a need for more dental capacity. And looking ahead, when the RWPC looks back next year, remember that 2020 expenditures have been impacted greatly by COVID-19 precautions over a several month period. For two months, emergency only care caused a dramatic decrease in numbers while following social distancing and other CDC/TDA guidelines under routine care continues to hinder production.

Disparities: Allocation of funding should support the implementation of innovative models of service delivery that results in improvements in the HIV care continuum for minority populations. In order to effectively implement a treatment as prevention model in a clinical setting, additional support for designated staff is needed who can address the national HIV goals. Facilitating access to care and optimizing health outcomes for people living with HIV will contribute to the development of seamless systems that support retention in care to achieve viral suppress in order to maximize the benefits of early treatment and reduce transmission risk. Case management staff are often overwhelmed by the number of clients they have and are often not being able to adequately address all their needs. This support staff would provide clients more individualized, intensive services, while building a trusting relationship that would lead to improvement in health outcomes. Support for transportation is also needed. Bus vouchers often cause more of an inconvenience to patients as they have to take multiple bus routes, or don't have a bus stop near their home. Funding should be allocated to support transportation assistance through ride-hailing companies such as Uber and Lyft.

Housing: Housing remains a critically important service need for PLWH. Stable housing and respite support for those in need of that service is accentuated given the mass loss of employment in the context of the COVID-related economic downturn.

Thank you for your thoughtful advocacy for people living with HIV.

Warm regards,

Dr. Charlene Flash

Charlene A. Flash, MD MPH President and CEO

Avenue 360 Health & Wellness 2150 W. 18th Street, Suite 300 | Houston, Texas 77008 keep the financial eligibility the same at 0 - 400%, ACA plans must have a subsidy.

Housing

X SEE BELOW. Refer the discussion on Housing to a workgroup for further research.

Medical Nutritional Therapy/Supplements

Accept the service definition as presented, update the justification chart, and increase the financial eligibility to 400%.

Mental Health Services

Add the allowability of telehealth to the service definition, update the justification chart, and keep the financial eligibility the same at 400%.

Substance Abuse Treatment

Add the allowability of telehealth to the service definition, update the justification chart, and keep the financial eligibility the same at 300%.

On 05/27/20 the Housing Workgroup met and made the following recommendation which may or may not be approved by the Quality Improvement Committee on -06/02/20. O6/30/20.

Emergency Financial Assistance

Add housing to the FY 2021 Emergency Financial Assistance — Other service definition and limit it to people who are displaced from their home due to a temporary, acute housing need. Also, the Office of Support is to educate people living with HIV and appropriate staff to Houston EMA/HSDA housing resources. The financial eligibility is 400%, per the above motion.

Houston Area HIV Services Ryan White Planning Council

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FY 2021 How to Best Meet the Need Quality Improvement Committee Service Category Recommendations Summary (as of 05/28/20)

Those services for which <u>no change</u> is recommended include:

Case Management (Non-Medical Service Linkage)

Early Intervention Services (targeting the Incarcerated)

Home and Community Based Health Services (Adult Day Treatment)

Hospice Services

Linguistic Services

Oral Health (Untargeted and Targeting the Northern Rural Area)

Referral for Health Care and Support Services

Transportation

Vision Care

Services with recommended changes include the following:

Ambulatory Outpatient Medical Care (includes Medical Case Management, Local Pharmacy Assistance, Emergency Financial Assistance - Pharmacy Assistance, Outreach Services - Primary Care Re-Engagement, and Service Linkage)

Add the allowability of telehealth and telemedicine to the service definition, update the justification chart, and keep the financial eligibility the same at PriCare=300%, MCM=none, LPAP=400%+500%, EFA=500%, Outreach=none SLW=none.

Case Management (Clinical)

Add the allowability of telehealth to the service definition, update the justification chart, and keep the financial eligibility the same at none.

Case Management (Non-Medical Targeting Substance Use Disorders)

Add the allowability of telehealth to the service definition, update the justification chart, and keep the financial eligibility the same at none.

Emergency Financial Assistance

Accept the service category definition for Emergency Financial Assistance-Other which will provide a rapid response to personal emergencies, and set the financial eligibility at 400%. The committee recommends that the subcategory begin immediately using CARES Act (COVID-19) funds. After March 1, 2021, use Ryan White or State Services funding. SEE NEXT PAGE.

Health Insurance Premium and Cost Sharing Assistance

Add text to the service definition that states clients should receive notification that payments have been made to and received by their insurance provider, update the justification chart, and

Houston Ryan White Planning Council Priority and Allocations Committee

Proposed Ryan White Part A, MAI, Part B and State Services Funding FY 2021 Allocations

(Priority and Allocations Committee approved 06-16-20)

MOTION 1: 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 2021 Level Funding Scenario.

MOTION 2: 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 3: 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 10 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 Medical Case Management (category 2). Subcategory to be determined by the Administrative Agent, with consideration to MAI allocations under MCM and final quarter adjustments.
- Step 2: Allocate the next \$100,000 to Health Insurance Assistance Program (category 5).
- Step 3: Allocate the next \$100,000 to Local Pharmacy Assistance Program Untargeted (category 3.b).
- Step 4: Any remaining increase in funds following application of Steps 1, 2, and 3 will be allocated by the Ryan White Planning Council, with prioritization given to new programs.

MOTION 4: 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 the first \$200,000 to be divided evenly between Oral Health General Oral Health (category 4.a.) and Oral Health Prosthodontics (category 4.b.).
- Step 2: Allocate the 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	State Rebate	Total	FY 2021 Allocations & Justification
	Remaining Funds to Allocate	\$0	\$0	\$0	\$0	\$0	\$0	
		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2021 Allocations & Justification
1	Ambulatory/Outpatient Primary Care	\$10,965,788	\$2,002,859	\$0	\$0	\$0	\$12,968,647	FY21 Part A: Increase Part A by \$879,962. Breakdown and justification across subcategories is shown below.
1.a	PC-Public Clinic	\$3,927,300					\$3,927,300	FY21 Part A: Increase Part A \$336,236 to accommodate projected increase due to COVID-19 related unemployment.
1.b	PC-AA	\$1,064,576	\$1,012,700				\$2,077,276	Added \$57,788 per FY20 Part A Increase Scenario FY21 Part A: Increase Part A \$112,078 to accommodate projected increase due to COVID-19 related unemployment.
1.c	PC-Hisp - see 1.b above	\$910,551	\$990,160				\$1,900,711	Added \$57,788 per FY20 Part A Increase Scenario FY21 Part A: Increase Part A \$112,078 to accommodate projected increase due to COVID-19 related unemployment.
1.d	PC-White - see 1.b above	\$1,147,924					\$1,147,924	FY21 Part A: Increase Part A \$112,078 to accommodate projected increase due to COVID-19 related unemployment.
1.e	PC-Rural	\$1,100,000					\$1,100,000	FY21 Part A: Decrease \$49,761 due to underspending.
1.f	PC-Women	\$2,100,000					\$2,100,000	FY21 Part A: Increase \$225,460 due to FY19 expenditures.
1.g	PC-Pedi	\$15,437					\$15,437	oxportation.
1.h	Vision Care	\$500,000					\$500,000	FY21 Part A: Increase \$48,000 due to repeated requests for increase.
1.j	PC-Pay for Performance Pilot Project	\$200,000					\$200,000	Established at \$200,000 per FY20 Part A Increase Scenario
2	Medical Case Management	\$1,730,000	\$320,100	\$0	\$0	\$0	\$2,050,100	FY21 Part A: Decrease Part A by \$385,802 due to underspending in FY19. Subcategory to be determined by the AA, with consideration to MAI allocations under MCM and final quarter adjustments.
2.a	CCM-Mental/Substance	\$488,656					\$488,656	
2.b	MCM-Public Clinic	\$427,722					\$427,722	F
2.c	MCM-AA	\$266,070	\$160,050				\$426,120	
2.d	MCM-Hisp	\$266,072	\$160,050				\$426,122	
2.e	MCM-White	\$52,247		0-			\$52,247	
2.f	MCM-Rural	\$273,760					\$273,760	
2.g	MCM-Women	\$125,311					\$125,311	EVOLD A A DATE OF THE STATE OF
2.h	MCM-Pedi	\$90,051					\$90,051	FY21 Part A: Decrease Part A by \$70,000 (1 FTE) which Part D will fund.
2.i	MCM-Veterans	\$80,025					\$80,025	

		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2021 Allocations & Justification
	Remaining Funds to Allocate	\$0	\$0	\$0	\$0	\$0	\$0	
2.j	MCM-Youth	\$45,888					\$45,888	
3	Local Pharmacy Assistance Program	\$1,810,360	\$0	\$0	\$0	\$0	\$1,810,360	
3.a	LPAP-Public Clinic	\$310,360					\$310,360	FY21 Part A: Decrease Part A by \$300,000 due to underspending in FY19
3.b	LPAP-Untargeted	\$1,500,000					\$1,500,000	FY21 Part A: Decrease Part A by \$1,046,806 due to underspending in FY19
4	Oral Health	\$166,404	\$0	\$2,218,878	\$0		\$2,385,282	
4.a	General Oral Health			\$1,658,878				FY21 Part B: Divided Oral Health Untargeted subcategory into General Oral Health (4.a) and Prosthodontics (4.b); decreased \$100,000 in General Oral Health to provide increase in Prosthodonics.
4.b	Prosthodontics			\$560,000				FY21 Part B: Divided Oral Health Untargeted subcategory into General Oral Health (4.a) and Prosthodontics (4.b); increased \$100,000 for Prosthodonics.
4.c	Rural Dental	\$166,404					\$166,404	
5	Health Insurance Co-Pays & Co-Ins	\$1,383,137	\$0	\$1,028,433	\$853,137	\$136,918	\$3,401,625	Added \$43,898 per FY20 Part A Increase Scenario Note from TRG: Increased State Rebate by \$11,918 and decreased Part B by \$11,918 due to decrease in Part B FY20 award amount. FY21 SS: Decrease \$11,369 in SS due to decrease in SS FY20 award amount.
6	Mental Health Services	\$0	\$0	\$0	\$300,000	\$0	\$300,000	
7	Early Intervention Services	\$0	\$0	\$0	\$175,000	\$0	\$175,000	
8	Medical Nutritional Therapy	\$341,395	\$0	\$0	\$0	\$0	\$341,395	
9	Home & Community Based Health Services	\$0	\$0	\$113,315	\$0	\$0	\$113,315	
9.a	In-Home (skilled nursing & health aide)						\$0	
9.b	Facility-based (adult day care)			\$113,315			\$113,315	
10	Substance Abuse Treatment - Outpatient	\$45,677	\$0	\$0	\$0	\$0	\$45,677	
11	Hospice	\$0	\$0	\$0	\$259,832	\$0	\$259,832	
12	Referral for Health Care & Support Services	\$0	\$0	\$0	\$0	\$450,000	\$450,000	Note from TRG: Increased State Rebate by \$75,000 to support an AEW at each clinic (1 additional FTE).
13	Non-Medical Case Management	\$1,267,002	\$0	\$0	\$350,000	\$0	\$1,617,002	
13.a		\$110,793					\$110,793	
13.b	SLW-Testing	\$100,000					\$100,000	
13.c	SLW-Public	\$370,000					\$370,000	FY21 Part A: Decrease Part A by \$57,000 (1 FTE) due to budget shortfalls.

	Part A	MAI	Part B	State Services	State Rebate	Total	FY 2021 Allocations & Justification
Remaining Funds to Allocate	\$0	\$0	\$0	\$0	\$0	\$0	
13.d SLW-CBO, includes some Rural	\$686,209					\$686,209	FY21 Part A: Decrease Part A by \$57,000 (1 FTE) due to budget shortfalls.
13.e SLW-Substance Use	\$0			\$350,000		\$350,000	
14 Transportation	\$424,911	\$0	\$0	\$0	\$0	\$424,911	
14.a Van Based - Urban	\$252,680					\$252,680	
14.b Van Based - Rural	\$97,185		\$0			\$97,185	
14.c Bus Passes & Gas Vouchers	\$75,046					\$75,046	
15 Emergency Financial Assistance	\$1,545,439	\$0	\$0	\$0	\$0	\$1,545,439	
15.a EFA - Pharmacy Assistance	\$1,305,439					\$1,305,439	FY21 Part A: Increase Part A by \$780,439 to fund at the amount expended in FY19, and in light of unemployment resulting from the COVID-19 pandemic.
15.b EFA - Other	\$240,000					\$240,000	FY21 Part A: Fund at \$240,000 (new subcategory in FY21
16 Linguistic Services	\$0	\$0	\$0	\$68,000	\$0	\$68,000	
17 Outreach Services	\$420,000	\$0	\$0	\$0	\$0	\$420,000	
Total Service Allocation	\$20,100,113	\$2,322,959	\$3,360,626	\$2,005,969	\$586,918	\$28,376,585	
NA Quality Management	\$412,940					\$412,940	
NA Administration	\$1,795,958					\$1,795,958	
NA Compassionate Care Program	100				\$388,082	\$388,082	Note from TRG: Decrease State Rebate by \$11,918
Total Non-Service Allocation	\$2,208,898	\$0	\$0	\$0	\$388,082	\$2,596,980	
Total Grant Funds	\$22,309,011	\$2,322,959	\$3,360,626	\$2,005,969	\$975,000	\$30,973,565	
Remaining Funds to Allocate (exact same as						12	
the yellow row on top)	\$0	\$0	\$0	\$0	\$0	\$0	

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

Core medical

\$16,442,761

82%

[For Staff Only]

FY2021 - Level Funding Scenario - Draft 5 - 06-17-20

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	Part A	MAI	Part B	State Services	State Rebate	Total	FY 2021 Allocations & Justification
Remaining Funds to Allocate	\$0	\$0	\$0	\$0	\$0	\$0	
If needed, use this space to enter base amounts to be	used for calculations						
	RW/A Amount Actual	MAI Amount Actual	Part B actual	State Service est.	State Rebate est.		

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





Spending Target: 100.0

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0	Library and Community Based Health Services	\$112.215	700	1			0000		\$1,004,825	100%
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	Miles ascu RWB Award added to OHS per Increase Scenario*	0.0	/00/				200,000	41170119	\$138,960	100%
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Note: Spending variances of 10% of target will be addressed:

* Result of Increased Scenario for RWB award

** TRG reallocated funds in final quarter to meet its required spending threshold of 95% and to avoid returning funds to DSHS. Thus, HCBHS was increased by \$ 25,645, HIP was increased by \$ 24,474 and \$134,000 was reallocated to another HSDA

2019-2020 Ryan White Part B Service Utilization Report 4/1/2019- 03/31/2020 Houston HSDA (4816) 4th Quarter

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Spending Target: 58.33

28%

473,098

\$1,667,338

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The Houston Regional HIV/AIDS Resource Group, Inc. September 1, 2019- August 31, 2020 FY 1920 DSHS State Services Procurement Report

Chart reflects spending through March 2020

A	Original	Jo %						Revised	5/21/2020
Service Category	Allocation	Grant	Amendments per RWPC	Contractual	Amendment	Contractual	Date of	Expended	Percent
Health Insurance Premium.	7	Award				Amount	Procurement	OLLY	ATT.
Cost Sharing (1)	\$864,506	43%	0 \$	\$864,506	\$0	\$864.506	0/1/2010	G	
Mental Health Services (2)	\$300 000	1507	6				C107/1/	2	<u>~</u>
EIS - Incarcement		B/C*	7	\$300,000	20	\$300,000	9/1/2019	CR9 409	,000
	\$175,000	% 6	20	\$175 000	υ φ			\$00,400	0%67
Hospice	\$250 027	138/		000,67.50	au	\$175,000	9/1/2019	\$95,747	85%
Non Madina	700,007	1370	20	\$259,832	20	\$259.832	0/1/2010	0100	
Tron Interioral Case Management (3)	\$350,000	17%	5	6250 000			71 X1 Z U I J	\$132,88U	51%
Linguistic Services (4)	649 000	700	3	ODO, OCCO	20	\$350,000	9/1/2019	\$128,013	37%
Ynorossod	9	370	0.S	\$68,000	\$0	\$68,000	0100/1/0	0.000	
Health Insurance (a)	0\$	%0	-\$142,285			October 1	2/1/2019	\$28,050	41%
Loral Houston HSDA	A 2,017,338	700%	-\$142,285	\$2.017.338	60	0.00 100	and the state of t		
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Priority

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Note

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- (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
 - (2) Mental Health reporting services utilization is down and additional back billing has not been submitted.
 - (3) N-Medical Case Management a new agency is behind 2 months of reporting spending. (4) Linguistic is behind with 1 month of reporting spending.

Houston Ryan White Health Insurance Assistance Service Utilization Report

Period Reported:

09/01/2019-3/31/20

4/29/2020 Revised:

		Assisted			NOT Assisted	
Request by Type	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	1180	\$102,206.12	578			0
Medical Deductible	139	\$20,904.36	111			0
Medical Premium	4044	\$1,481,440.99	757			0
Pharmacy Co-Payment	11210	\$395,329.57	1225			0
APTC Tax Liability	T	\$500.00	1			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	17	\$1,614.02	6	AM	NA	NA
Totals:	16591	\$1,998,767.02	2681	0	\$0.00	

Comments: This report represents services provided under all grants.

Part A Reflects "Increase" Funding Scenario MAI Reflects "Increase" Funding Scenario

FY 2019 Ryan White Part A and MAI Procurement Report

Priority	Service Category	Original	Award	July	October	Final Quarter	Total	Percent of	Amount	Procure-	Original Date	Expended	Percent	Percent
		Allocation	Reconcilation	Adjustments	Adjustments	Adjustments	Allocation	Grant Award	Procured	ment	Procured	YTD	YTD	Expected
1		RWPC Approved	(b)	(carryover)		,			(a)	Balance				YTD
1		Level Funding	\ - ,	(,					1	_ " '-				
ļ		Sconario		400.000				40.700/	40.040.472			40 040 000	4008/	
11	Outpatient/Ambulatory Primary Care	9,783,470			55,000		10,942,175	48.76%	10,942,175	0		10,946,926	100%	100% 100%
1.a	Primary Care - Public Clinic (a)	3,591,064	Ŏ		30,000		3,875,003	17.27%	3,875,003	0		\$3,602,340	93% 86%	100%
	Primary Care - CBO Targeted to AA (a) (e) (f)	940,447	ق و د من سر د د د د د مید د د د د می د می د می د م		25,000	}	1,817,967	8.10%	1,817,967	0		\$1,556,441 \$1,474,133	182%	100%
	Primary Care - CBO Targeted to Hispanic (a) (e)	786,424	0		0	<u> </u>	811,456	3.62% 4.67%	811,456	0		\$757.590	72%	100%
	Primary Care - CBO Targeted to White/MSM (a) (e)	1,023,797	0		0	·	1,048,829	4.67%	1,048,829	0	·		98%	100%
	Primary Care - CBO Targeted to Rural (a) (e)	1,149,761	0		U	-77,818	1,071,943	4.76% 8.35%	1,071,943	 0			111%	100%
1.f	Primary Care - Women at Public Clinic (a) Primary Care - Pediatric (a.1)	1,874,540 15,437	0		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1,874,540 15,437	0.07%	15,437	0	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\$9.000	58%	100%
*	Vision	402,000	0		0		427,000	1.90%	427,000	0	4::	\$414,500	97%	100%
	Medical Case Management	2,535,802	0		-120,000	-583,281	1,882,521	8.39%	1,882,521	Ö	Aurenter Commence Contract Commence Com	1,608,774	85%	100%
	Clinical Case Management	488,656	0		-120,000		488,656	2.18%	488.656	0	PARTITION OF THE PARTY OF THE P	\$488.627	100%	100%
	Med CM - Public Clinic (a)	482,722	0		0		101,801	0.45%	101,801	0		\$193,192	190%	100%
	Med CM - Pablic Clinic (a) Med CM - Targeted to AA (a) (e)	321,070	0		0		129,801	0.43%	129,801	0		\$265,920	205%	100%
	Med CM - Targeted to AA (a) (e) Med CM - Targeted to H/L (a) (e)	321,070	0		0	-201,030	337,738	1.51%	337,738	0		\$111,665	33%	100%
	Med CM - Targeted to TVL (a) (e)	107,247	0	16,668	0	»	123,915	0.55%	123,915	0	·	\$99,192	80%	100%
	Med CM - Targeted to Wildow (a) (e)	348,760	0		-60,000	37,575	326,335	1.45%	326,335	ŏ		\$226.844	70%	100%
	Med CM - Women at Public Clinic (a)	180,311	Ö	······································	-00,000	37,070	180,311	0.80%	180,311	Ö	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\$97.999	54%	100%
	Med CM - Targeted to Pedi (a.1)	160,051	0	Ö	-60,000	-32,000	68,051	0.30%	68.051	Ŏ		\$20,562	30%	100%
	Med CM - Targeted to Veterans	80,025	Ŏ	Ŏ	00,000		80.025	0.36%	80,025	ŏ		\$67,977	85%	100%
	Med CM - Targeted to Youth	45,888	0	0			45.888	0.20%	45.888	Ŏ		\$36,798	80%	100%
	Local Pharmacy Assistance Program (a) (e)	2,657,166	500,000	125,126	0	-1,443,535	1,838,757	8.19%	1,838,757	Ō		\$1,736,234	94%	100%
	Oral Health	166,404	000,000	0	ñ		166,404	0.74%	166,404	0		166,400	100%	100%
	Oral Health - Untargeted (c)	0					0	0.00%	0	Ō		\$0	0%	0%
	Oral Health - Targeted to Rural	166,404	. 0	0		,,,.,	166.404	0.74%	166,404	0		\$166,400	100%	100%
	Mental Health Services (c)	0	ň	ő	0	·····	0	0.00%	0	Ŏ		\$0	0%	0%
->->	Health Insurance (c)	1,173,070	166,000	0	100,000	<u></u>	1,439,070	6.41%	1,439,239	-169		\$1,439,239	100%	100%
	Home and Community-Based Services (c)	0		Ö	0	<u>ō</u> l	0	0.00%	0	0		\$0	0%	0%
**************************************	Substance Abuse Services - Outpatient	45,677	<u>0</u>	ŏ	-10,000	····	35,677	0.16%	35,677	0		\$35,344	99%	100%
	Early Intervention Services (c)			ō	0.000	<u>_</u>	0	0.00%	0	0		\$0	0%	0%
	Medical Nutritional Therapy (supplements)	341,395	Ŏ	<u></u>		<u>-</u>	341,395	1.52%	341,395	Ō		\$307,128	90%	100%
	Hospice Services	071,000			0			0.00%	0 71,000	ō		\$0	0%	0%
>->->->->>>>>	Outreach Services	420,000	······		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-131.351	288,649	1.29%	288,649	Ō		\$288.185	100%	100%
	Emergency Financial Assistance	450,000		······			1,308,980	5.83%	1,308,980	<u>.</u>		\$1,305,439	100%	100%
	Referral for Health Care and Support Services (c)	430,000	<u>0</u>	·······	v).,,,,,,,,,	000,000	1,300,800	0.00%	1,500,500	Ŏ		\$0	0%	0%
	Non-Medical Case Management	1,231,002	0	100.000	-25,000	295,578	1,601,580	7.14%	1,601,580	Ŏ		1,544,450	96%	100%
	Service Linkage targeted to Youth	110.793	0	100,000	-10,000		100,793	0.45%	100,793	0	STATE AS A STATE OF THE ASSAULT OF THE STATE	\$117,714	117%	100%
	Service Linkage targeted to Yourn Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,793	0		-15.000		85.000	0.38%	85,000	0		\$97,796	115%	100%
	Service Linkage at Public Clinic (a)	427,000	Ö	0	0	125,664	552,664	2.46%	552,664	0		\$522,850	95%	100%
	Service Linkage at Fubilic Clinic (a) Service Linkage embedded in CBO Pcare (a) (e)	593,209		100,000	0	169,914	863,123	3.85%	863,123	0		\$806,091	93%	100%
	Medical Transportation	424,911	0	0.000	ňň	0	424,911	1.89%	424,911	0		424,910	100%	100%
	Medical Transportation services targeted to Urban	252,680	Ö	0			252.680	1.13%	252.680	Ŏ	STATE OF THE SECOND SEC	\$281,980	112%	100%
16.b	Medical Transportation services targeted to Orban	97,185		Ö	0		97,185	0.43%	97,185	Ö		\$67.884	70%	100%
16.c	Transportation vouchering (bus passes & gas cards)	75,046			0		75,046	0.33%	75,046	0		\$75,046	100%	0%
	Linguistic Services (c)	13,040			0			0.00%	70,040	Ŏ	• • • • • • • • • • • • • • • • • • • •	\$0	0%	0%
	Total Service Dollars	19,228,897	666,000	375,222	0	·····	20,270,119	89.04%		-169		19,803,028	98%	100%
								~~~~~ <del>-</del>		,,,	12257272222727228727442805747280574728757575	,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	35%	100%
- ASSA (2014)	Grant Administration	1,675,047	119,600	0	0		1,794,647	8.00%	1,794,647	0	قمدمد مصدوم ورور	627,328	·	->->
HEZZANIA STANISTANIA STANISTANISTANIA STANISTANIA STANISTANIA STANISTANIA STANISTANIA STANISTANISTANIA STANISTANIA STANISTANIA STANISTANIA STANISTANIA STANISTANISTANIA STANISTANIA STANISTANISTANI STANISTANI STANISTANI STANISTANI STANISTANISTANI STANISTANI STAN	HCPHES/RWGA Section	1,183,084	119,600	0		0	1,302,684	5.81%	1,302,684	0		\$462,731	36%	100%
PC	RWPC Support*	491,963		-	0	0	491,963	2.19%	491,963	0	N/A	164,598	33%	100%

### Part A Reflects "Increase" Funding Scenario MAI Reflects "Increase" Funding Scenario

### FY 2019 Ryan White Part A and MAI Procurement Report

T						7			·\$23					
Priority	Service Category	Original	Award	July	October	Final Quarter	Total	Percent of	Amount	Procure-	Original Date	Expended	Percent	Percent
		Allocation	Reconcilation	Adjustments	Adjustments	Adjustments	Allocation	Grant Award	Procured	ment	Procured	YTD	YTD	Expected
		RWPC Approved	(b)	(carryover)					(a)	Balance				YTD
		Level Funding Scenario							'					.,_
	Quality Management	495.000	-119.600	n	^		075 100					*:====::==============================		
BE 52/021	Angus Mangfaurus		VANCO/AAAAAAAAAAAAAAAAAAAAAAAAAAA			1	375,400	**************************************	375,400		N/A	\$84,702	23%	100%
		21,398,944	666,000	375,222	0	0	22,440,166	98.71%	22,440,335	-169	}	20,515,058	91%	100%
ļ		<u></u>				<u> </u>						***		
ļ								Unallocated	4					
	Part A Grant Award:	22,439,871	Carry Over:	465		Total Part A:	22,440,336	170	-169					0602505
ļ									l j					
		Original	Award	July	October	Final Quarter	Total	Percent	Total	Percent				
		Allocation	Reconcilation	Adjusments	Adjustments	Adjustments	Allocation		Expended on					
			(b)	(carryover)					Services					
	Core (must not be less than 75% of total service dollars)	16,702,984	666,000	275.222	25.000	-1,023,207	17,669,206	87.17%	16,240,044	82.01%				
	Non-Core (may not exceed 25% of total service dollars)	2,525,913	0	100.000	-25,000		2,600,913		A district and a primitive with a second property of the second prop	17.99%				
	Total Service Dollars (does not include Admin and QM)	19,228,897		375,222	0		20,270,119		19,803,028	17.557	,			
				0,0,000			20,210,113		13,003,020					
	Total Admin (must be ≤ 10% of total Part A + MAI)	1,675,047	119,600	A			4 70 4 6 4 7	0.000/					MAGNET ST.	
	Total QM (must be ≤ 5% of total Part A + MAI)			0 			***************************************		***************************************			***************************************	//	
	Total Gin (must be \$ 378 of total Part A * WAI)	495,000	-119,600	U	U	0	375,400	1.67%						
				·	MAIN.				<u> </u>					
			***************************************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	MAI Procure	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~ <u>~</u>	·	ł					
Priority	Service Category	Original	Award	July	October	Final Quarter	Total	Percent of	Amount	Procure-	Date of	Expended	Percent	Percent
		Allocation	Reconcilation	Adjustments	Adjustments	Adjustments	Allocation	Grant Award	Procured	ment	Ргосиге-	YTD	YTD	Expected
		RWPC Approved	(b)	(carryover)					(a)	Balance	ment	1	a de	YTD I
1		Level Funding Scenario				***************************************					Assessed to the contract of th	Anthre		- , -
1	Outpatient/Ambulatory Primary Care	1,846,845	40,438	18,861	0	A	1,906,144	85.62%	1.906.144	·	ĭ	1.898.600	100%	100%
1.b (MAI)	Primary Care - CBO Targeted to African American	934,693	20,219	9,430	0	******	964.342	43.32%	964.342			\$1,109,900	115%	100%
	Primary Care - CBO Targeted to Hispanic	912.152	20,219	9,431	Ö	<u> </u>	941.802	42,30%	941,802	0		\$788,700		100%
	Medical Case Management	320,100			Ö	4->-(>->->	320,100	14.38%	320,100				84%	
	MCM - Targeted to African American	160.050	*******************************			·	160.050	7.19%	160,050			\$210,675	66%	100%
· newening-number	MCM - Targeted to Hispanic	160,050	***************************************				160,050	7.19% 7.19%	160,050			\$142,705	89%	100%
	Total MAI Service Funds	2,166,945	40,438	18.861			2,226,244	7.19% 100.00%		0		\$67,970	42%	100%
4 (A) 25 (A) 2 (A)	Grant Administration	2,100,540 0	40,430			(-)	·//^^*	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				2,109,275	95%	100%
<ul> <li>MOPREZANIZATION NEWSZOSI</li> </ul>	Quality Management	n	0	0 		4	0	0.00%	0	0	_3459469946989864693446		0%	0%
■ \$46000000000000000000000000000000000000	Total MAI Non-service Funds	n	<u>.</u>	>					0	0		0	0%	0%
**************************************	w)==)==0,000,000,000,000,000,000,000,000,		000000000000000000000000000000000000000	0	0		0	0.00%	0	0		0	0%	0%
BEO 27516	Total MAI Funds	2,166,945	40,438	18,861	0	0	2,226,244	100.00%	2,226,244	0		2,109,275	95%	100%
<b></b>	MAI Grant Award	2,226,244	Carry Over:	0		Total MAI:	2,226,244							
	Combined Part A and MAI Orginial Allocation Total	23,565,889												
Footnote	\$1					<u> </u>					<del> </del>			
	5. When reviewing bundled categories expenditures must be evaluated to	hoth by individual	under antaram and to	eambined sales	nn Onn art	Dispused 4000					<u> </u>			
(a)	Single local service definition is four (4) HRSA service categories (Pca	oon by mulvioual se	n vice category and by	compined categori	es. One category m	ay exceed 100% of a	ivaliable funding so	iong as other categ	ory offsets this o	verage.	<u> </u>			
(a.1)	Single local service definition is three (3) HRSA service categories (do	are, LEME, IVILIVI, NO	on vieu Civi). Expend	nures must be evail	ialeo poin by individ	rual service category	and by combined s	ervice categories.			<del> </del>			
	Single local service delimitor is three (3) HRSA service categories (or Adjustments to reflect actual award based on Increase or Decrease fu		r). Expenditures mus	i de evaluated both	uy maividuai servic	e category and by co	impined service cate	agories.			<u> </u>			
	Adjustments to reflect actual award based on increase or Decrease to Funded under Part B and/or SS	mony scenano.		b44							ļ			
	Not used at this time										ļ		<u>-</u>	
1	<del>*************************************</del>										ļ			
(e)	10% rule reallocations									<del></del>	ļļ			
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### FY 2019 Ryan White Part A and MAI Service Utilization Report

200200500				RW	PART A	SUR- 4t	h Quarter (	3/1-2/29)										
Priority	Service Category	Goal	Unduplicated	Male	Female		AA	White	Other	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
			Clients Served			gender	(non-	(non-Hispanic)	(non-									
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6,467	YTD 8,742	73%	25%	2%	Hispanic) 47%	13%	Hispanic) 2%	37%	0%	1%	5%	27%	27%	12%	26%	2%
1.a	Primary Care - Public Clinic (a)	2,350	3,606	68%			51%	9%		38%	0%	<u>.                                      </u>	2%	17%	26%	15%	36%	4%
1.b	Primary Care - CBO Targeted to AA (a)	1,060		68%	29%		99%	0%		0%	0%		7%	40%	26%	10%	16%	1%
1.c	Primary Care - CBO Targeted to Hispanic (a)	960		83%	14%		0%	0%		100%	0%		8%	31%	31%		17%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	690		88%	11%		0%	88%		0%	0%	0%	4%	30%	24%	12%	28%	2%
1.e	Primary Care - CBO Targeted to Rural (a)	400	693	70%	29%		44%	24%		30%	0%		6%	32%	27%	11%	22%	2%
1.f	Primary Care - Women at Public Clinic (a)	1,000	1,113	0%	100%		59%	8%	2%	31%	0%	0%	1%	11%	30%	17%	35%	5%
1.9	Primary Care - Pediatric (a)	7	8	100%	0%		38%	13%	0%	50%	25%	38%	38%	0%	0%	0%	0%	0%
1.h	Vision	1,600	2,777	74%	25%	1%	47%	14%	3%	37%	0%	0%	4%	23%	24%	13%	31%	4%
2	Medical Case Management (f)	3,075	6,013												2 (31 (2) )	6.66		1 400 (600)
2.a	Clinical Case Management	600	1,299	77%	21%		54%	13%	2%	31%	0%	0%	4%	29%	26%	9%	28%	4%
2.b 2.c	Med CM - Targeted to Public Clinic (a) Med CM - Targeted to AA (a)	280 550	631	92%	7%		62%	11%	1%	25%	0%	0%	2%	29%	22%	11%	33%	3%
	Med CM - Targeted to AA (a) Med CM - Targeted to H/L(a)	550 550	1,570 723	65% 80%	32% 16%		99% 0%	0% 0%	1% 0%	0% 100%	0% 0%	0% 1%	6% 7%	36% 29%	26% 33%	12% 10%	18% 17%	2% 2%
	Med CM - Targeted to PhiL(a) Med CM - Targeted to White and/or MSM (a)	260	723 518	86%	14%		0%	0% 88%	12%	100%	0%	0%	7% 2%	29% 24%	33% 21%	15%	33%	2% 5%
	Med CM - Targeted to Rural (a)	150	716	68%	32%		49%	27%	3%	22%	0%	0%	6%	23%	24%	12%	31%	4%
	Med CM - Targeted to Women at Public Clinic (a)	240	282	0%	100%		72%	8%	2%	18%	0%	0%	1%	12%	30%	14%	37%	5%
	Med CM - Targeted to Pedi (a)	125	72	58%	42%		68%	8%	1%	22%	60%	31%	10%	0%	0%	0%	0%	0%
	Med CM - Targeted to Veterans	200	190	96%	4%		67%	23%	1%	9%	0%	0%	0%	1%	6%	3%	59%	31%
2.	Med CM - Targeted to Youth	120	12	83%	17%		42%	8%	0%	50%	0%	8%	92%	0%	0%	0%	0%	0%
3	Local Drug Reimbursement Program (a)	2,845	5,080	74%	24%		48%	14%	2%	36%	0%	0%	5%	30%	28%	13%	23%	2%
4	Oral Health	200	326	67%	32%	1%	43%	31%	2%	24%	0%	0%	5%	22%	27%	10%	31%	4%
	Oral Health - Untargeted (d)	NA	NA															
	Oral Health - Rural Target	200	326	67%	32%	1%	43%	31%	2%	24%	0%	0%	5%	22%	27%	10%	31%	4%
	Mental Health Services (d)	NA	NA															
	Health Insurance	1,700	2,153	80%	19%	1%	46%	24%	3%	26%	0%	0%	2%	17%	19%	13%	39%	9%
	Home and Community Based Services (d)	NA	NA															
	Substance Abuse Treatment - Outpatient	40	24	96%	4%	0%	25%	42%	4%	29%	0%	0%	4%	33%	21%	25%	17%	0%
	Early Medical Intervention Services (d)	NA	NA															
	Medical Nutritional Therapy/Nutritional Supplements	650	479	78%	22%	0%	41%	22%	3%	34%	0%	0%	1%	12%	17%	15%	44%	12%
	Hospice Services (d)	NA	NA															
	Outreach	700	723	77%	22%	1%	59%	13%	1%	28%	0%	1%	8%	32%	24%	10%	23%	2%
	Non-Medical Case Management	7,045	9,239															
	Service Linkage Targeted to Youth	320	190	78%	20%		57%	5%	3%	35%	0%	15%	85%	0%	0%	0%	0%	0%
	Service Linkage at Testing Sites	260	150	74%	24%		57%	10%	3%	30%	0%	0%	0%	47%	28%	7%	14%	3%
	Service Linkage at Public Clinic Primary Care Program (a)	3,700	4,033	67%	32%		59%	9%	1%	30%	0%	0%	0%	17%	24%	13%	40%	6%
	Service Linkage at CBO Primary Care Programs (a) Transportation	2,765 <b>2,850</b>	4,866	73%	24%	3%	54%	14%	2%	30%	1%	1%	6%	29%	25%	10%	24%	3%
	Transportation Transportation Services - Urban	2,850 170	3,020 617	66%	32%	20/	608/	400/	307	260/	007	00/		2001	050/	4007		307
	Transportation Services - Organ  Transportation Services - Rural	130	131	68%	32% 31%	2% 1%	62% 31%	10% 41%	3% 2%	26% 25%	0% 0%	0% 0%	5% 2%	29% 18%	25% 27%	12% 10%	25% 40%	3% 3%
	Transportation vouchering	2,550	2,272	00%	31%	170	31%	4170	2%]	20%	U%	U%e	470	10%	2170	10%	4U%	<u> 3%</u> 8
	Linguistic Services (d)	2,550 NA	NA NA															
	Emergency Financial Assistance (e)	NA NA	1,605	76%	22%	2%	48%	11%	3%	38%	0%	0%	6%	30%	28%	13%	22%	1%
	Referral for Health Care - Non Core Service (d)	NA NA	NA NA	, u /a	££/0	2/0	40 /8	11/8	3 /0	30 /6	U /8	U /8	0 /0	30 /6	£0/0	(J/c	££/0	1 /0
	plicated clients served - all categories*	12.941	14.676	73%	25%	2%	52%	15%	2%	31%	0%	1%	4%	24%	24%	12%	30%	5%
	cases + estimated Living HIV non-AIDS (from FY 19 App) (b)	NA NA	17,010		a /0	* / *	- JE /0	10/0	£ /0	31/0	V /8	± /0	7 /0	#-77 /G	£-7 /0	1 & 70	20 /8]	- J /8
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