

Houston Area HIV Services Ryan White Planning Council

Priority & Allocations Committee Meeting

12 noon, Thursday, March 25, 2021

Please note that this is a virtual meeting. To join the Zoom meeting, click on the following link:

<https://us02web.zoom.us/j/89374713843?pwd=UDBqbGtGUk14d081eDRUSCtBdGltZ09>

Meeting ID: 893 7471 3843

Passcode: 339238

Or, use your telephone and dial in: 346 248 7799

AGENDA

- I. Call to Order Bobby Cruz and
Peta-gay Ledbetter,
Co-Chairs
- A. Moment of Reflection
- B. Adoption of the Agenda
- C. Approval of the Minutes
- II. Public Comment and Announcements
(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 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. All information from the public must be provided in this portion of the meeting.)
- III. Old Business Tori Williams
- A. 2021 Committee Goals
- B. 2021 Critical Timeline and Committee Meeting Dates and Time
- Sign up: How To Best Meet the Need Training & Workgroup Meetings
- C. Determine the FY 2022 Principles & Criteria
- D. Determine the FY 2022 Priority Setting Process
- E. Continue the Subcategory Review Process?
- F. Elect a Committee Vice Chair
- IV. Reports from the Administrative Agency – Part A/MAI* Carin Martin
- A. Updates on FY 2020 and 2021 HRSA Grant Awards
- B. Training in how to review Ryan White Part A/MAI reports
- V. Reports from the Administrative Agency – Part B/SS Sha'Terra Johnson
- A. Updates from The Resource Group
- B. Training in how to review Ryan White Part B/SS reports
- VI. Announcements
- VII. Adjourn Mauricia Chatman
- Optional: Meet with the Committee Mentor

Houston Area HIV Services Ryan White Planning Council

Priority & Allocations Committee Meeting

12:00 p.m., Thursday, February 25, 2021

Meeting Location: Zoom Teleconference

MINUTES

MEMBERS PRESENT	OTHERS PRESENT	STAFF PRESENT
Bobby Cruz, Co-Chair	Allen Murray, RWPC Chair	<i>The Resource Group</i>
Peta-gay Ledbetter, Co-Chair		Yvette Garvin
Ardry Skeet Boyle		Sha'Terra Johnson
Mauricia E. Chatman		Hailey Malcolm
Kimberley Collins		
Roxane May		<i>Ryan White Grant Admin</i>
Josh Mica		Carin Martin
Robert Sliepka		Heather Keizman
Bruce Turner		
		<i>Office of Support</i>
		Tori Williams
		Ricardo Mora
		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 12:09 p.m. and asked for a moment of reflection.

Adoption of the Agenda: **Motion #1:** *it was moved and seconded (Boyle, Chatman) to approve the agenda. Motion carried unanimously.*

Approval of the Minutes: **Motion #2:** *it was moved and seconded (Ledbetter, Mica) to approve the October 22, 2020 minutes. Motion carried.* Abstentions: Boyle, Chatman, Collins, Sliepka.

Presentation: Responding to the Impact of Potential THMP Changes & Solutions: Charles Henley, LCSW, Consultant presented the attached PowerPoint.

Public Comment: None.

Committee Orientation: Williams reviewed the attached documents: Nuts and Bolts for New Members, and memorandums regarding End of Year Petty Cash Procedures and the Open Meetings Act Training, Timeline of Critical 2021 Council Activities, Committee Meeting Schedule, Committee description and Conflict of Interest Policy.

Determine the FY 2021 Policy on Allocating Unspent Funds: ***Motion #3:** it was moved and seconded (Ledbetter, Mica) to approve the attached 2020 Policy for Addressing Unobligated and Carryover Funds. Motion carried unanimously.*

Updates on the FY 2020 and 2021 Grant Awards

Part A/MAI: Martin stated that a partial notice of grant award had been received for FY2021 - about 1/3 of the Part A formula and ¼ of Minority AIDS Initiative (MAI) funding. Ryan White Grant Administration (RWGA) began the contracting process at the end of 2020 so partial contracts will be in place to start the new grant year on Monday. RWGA has also received a partial award (1/4 of level funding) for the Ending the Epidemic funding; the Project Officer said to expect a small increase. No additional COVID funds are anticipated Harris County is eligible for a project term extension (the project end date is currently March 31). There is a substantial amount of COVID dollars remaining; a large amount of that award was put into the new Emergency Financial Assistance service and one provider was able to get the program off the ground but the other could not so Martin expects that funding to come back to her office for use in 2021.

Part B State Services: Johnson said that after careful review, it was determined that there may be a reduction on the HIV Care Services Contracts for the 04/01/21–03/31/22 contract term. At this time, the amount and impact have not been fully assessed. But the Texas Department of State Health Services (TDSHS) wanted to give ample notice of a potential shift in funding. Due to the upcoming start date of April 1st, TDSHS will issue contracts at level funding to ensure there is not a gap in services. Once the impact of the reduction is finalized, TDSHS will work on the revised amounts and initiate amendments immediately.

***Motion #4:** it was moved and seconded (Ledbetter, Chatman) to table the following items until the March 25, 20201 committee meeting:*

- Determine the FY 2022 Principles & Criteria
- Determine the FY 2022 Priority Setting Process
- Continuation of the Subcategory Review Process
- Training in How to Read Ryan White Part A/MAI Reports
- Training in How to Read Ryan White Part B/State Services Reports
- Elect a Committee Vice Chair
- 2020 Committee Goals

Motion carried unanimously.

Announcements: None.

Adjournment: ***Motion:** it was moved and seconded (Ledbetter, Mica) to adjourn the meeting at 2:08 p.m. Motion Carried.*

Submitted by:

Approved by:

Tori Williams, Director

Date

Committee Chair

Date

Scribe: Beck

C = chaired the meeting; JA = just arrived; LM = left meeting

2021 Priority & Allocations Committee Voting Record for 02/25/21

MEMBERS	Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 FY21 Policy on Unspent and Carryover Funds Carried				Motion #4 Table items until March 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		
Ardry Skeet Boyle		X						X		X			X			
Mauricia E. Chatman		X						X		X				X		
Kimberley Collins		X						X		X				X		
Roxane May		X				X				X				X		
Josh Mica		X				X				X				X		
Robert Sliepka		X						X		X				X		
Bruce Turner		X				X				X				X		

2020 QUARTERLY REPORT
PRIORITY AND ALLOCATIONS COMMITTEE
(Submitted October 2020)

Status of Committee Goals and Responsibilities (* means mandated by HRSA):

1. Conduct training to familiarize committee members with decision-making tools.
Status:

2. Review the final quarter allocations made by the administrative agents.
Status:

3. *Improve the processes for and strengthen accountability in the FY 2021 priority-setting, allocations and subcategory allocations processes for Ryan White Parts A and B and State Services funding.
Status:

4. When applicable, plan for specialty dollars like Minority AIDS Initiative (MAI) and special populations such as Women, Infants, Children and Youth (WICY) throughout the priority setting and allocation processes.
Status:

5. *Determine the FY 2021 priorities, allocations and subcategory allocations for Ryan White Parts A and B and State Services funding.
Status:

6. *Review the FY 2020 priorities as needed.
Status:

7. *Review the FY 2020 allocations as needed.
Status:

8. Evaluate the processes used.
Status:

9. Annually, review the status of Committee activities identified in the current Comprehensive Plan.
Status:

Status of Tasks on the Timeline:

Committee Chairperson

Date

DRAFT

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2021 Council Activities

(Revised 01-13-21)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location. The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 832 927-7926.

General Information: The following is a list of significant activities regarding the 2021 Houston Ryan White Planning Council. Consumers, providers and members of the general public are encouraged to attend and provide public comment at any of the meetings described below. For more information on Planning Council processes or to receive monthly calendars and/or review meeting agendas and support documents, please contact the Office of Support at 832 927-7926 or visit our website at: www.rwpchouston.org.

Routinely, the Steering Committee meets monthly at 12 noon on the first Thursday of the month. The Council meets monthly at 12 noon on the second Thursday of the month.

- Thurs. Jan. 21 Council Orientation. 2021 Committee meeting dates will be established at this meeting.
- Thurs. Feb. 4 12 noon. First Steering Committee meeting for the 2021 planning year.
- TBD in early Feb. Orientation for new 2021 Affiliate Committee Members.
- Thurs. Feb. 11 12 noon. First Council meeting for the 2021 planning year.

Mon. Feb. 15 5:00 pm. Deadline for submitting **Proposed Idea Forms** to the Office of Support. The Council is currently funding, or recommending funding, for 17 of the 28 allowable HRSA service categories. The Idea Form is used to ask the Council to make a change to a funded service or reconsider funding a service that is not currently being funded in the Greater Houston area with Ryan White Part A, Part B or State Services dollars. The form requires documentation for why dollars should be used to fund a particular service and why it is not a duplication of a service already being offered through another funding source. Anyone can submit an Idea Form. Contact the Office of Support at 832 927-7926 to request required forms

Thurs. Feb. 25 Time TBD. Priority & Allocations Committee meets to approve the **policy on allocating FY 2021 unspent funds, FY 2022 priority setting process** and more.

TBD in March EIIHA Workgroup meeting.

TBD in March Time TBD. Joint meeting of the Quality Improvement, Priority & Allocations and Affected Community Committees to determine the criteria to be used to select the **FY 2022 service categories** for Part A, Part B and *State Services* funding.

TBD in March **Consumer Training** on the How to Best Meet the Need process.

Thurs. April 1 12 noon. Steering Committee meets.

Thurs. April 8 12 noon. Planning Council meets.

1:30 – 4:30 pm. **Council and Community Training for the How to Best Meet the Need process.** Those encouraged to attend are community members as well as individuals from the Quality Improvement, Priority & Allocations and Affected Community Committees. Call 832 927-7926 for confirmation and additional information.

(Continued)

DRAFT

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2021 Council Activities

(Revised 01-13-21)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location. The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 832 927-7926.

Mon. April 12 10 am – 5 pm, Special workgroup meetings. Topics to be announced.

Tues. April 20
Room _____

10:30 am. **How To Best Meet the Need Workgroup #1** at which the following services for FY 2022 will be reviewed:

- Ambulatory/Outpatient Medical Care (including Emergency Financial Assistance – Pharmacy Assistance, Local Pharmacy Assistance, Medical Case Management, Outreach and Service Linkage – Adult and Rural)
- Ambulatory/Outpatient Medical Care (including Medical Case Management and Service Linkage – Pediatric)
- Referral for Health Care and Support Services
- Clinical Case Management
- Non-Medical Case Management (Service Linkage at Testing Sites)
- Vision Care

1:30 pm. **How To Best Meet the Need Workgroup #2** at which the following services for FY 2021 will be reviewed:

- Health Insurance Premium & Co-pay Assistance
- Medical Nutritional Therapy (including Nutritional Supplements)
- Mental Health
- Substance Abuse Treatment/Counseling
- Non-Medical Case Management (Substance Use)
- Oral Health – Untargeted & Rural

Call 832 927-7926 for confirmation and to receive meeting packets.

Wed. April 21
Room _____

3:00 pm – 5:00 pm. **How To Best Meet the Need Workgroup #3** at which the following services will be reviewed:

- Early Intervention Services
- Emergency Financial Assistance - Other
- Home & Community-based Health Services (Adult Day Treatment)
- Hospice
- Linguistic Services
- Transportation (van-based - Untargeted & Rural)

Call 832 927-7926 for confirmation and additional information.

Thurs. April 22

Time TBD. Priority & Allocations Committee meets to allocate **Part A unspent funds**.

Mon. May 3

5:00 pm. Deadline for submitting **Proposed Idea Forms** to the Office of Support. (See February 15 for a description of this process.) Please contact the Office of Support at 832 927-7926 to request a copy of the required forms.

TBD in May

Time TBD. **How to Best Meet the Need Workgroup** meets for recommendations on the **Blue Book**. The Operations Committee reviews the FY 2022 Council Support Budget.

TBD in May

Time TBD. Quality Improvement Committee meets to approve the **FY 2022 How to Best Meet the Need results** and review **subcategory allocation requests**. Draft copies are forwarded to the Priority & Allocations Committee.

DRAFT
Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2021 Council Activities

(Revised 01-13-21)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location.
The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 832 927-7926.

Tues. May 25	7:00 pm., Public Hearing on the FY 2022 How To Best Meet the Need results.
Wed. May 26	Time TBD. Special Quality Improvement Committee meeting to review public comments regarding FY 2022 How To Best Meet the Need results.
Thurs. May 27	Time TBD. Priority & Allocations Committee meets to recommend the FY 2022 service priorities for Ryan White Parts A and B and <i>State Services</i> funding.
Thurs. June 3	12 noon. Steering Committee meets to approve the FY 2022 How to Best Meet the Need results.
Thurs. June 10	12 noon. Council approves the FY 2022 How to Best Meet the Need results.
Week of June 14-18	Dates and times TBD. Special Priority & Allocations Committee meetings to draft the FY 2022 allocations for RW Part A and B and State Services funding.
In June or Aug.	Time TBD. Quality Improvement Committee reviews the results of the Assessment of the Administrative Mechanism and hosts Standards of Care training.
Thurs. June 24	Time TBD. Priority & Allocations Committee meets to approve the FY 2022 allocations for RW Part A and B and State Services funding.
Mon. June 28	7 pm. Public Hearing on the FY 2022 service priorities and allocations.
Tues. June 29	Time TBD. Special meeting of the Priority & Allocations Committee to review public comments regarding the FY 2022 service priorities and allocations.
July/Aug.	Workgroup meets to complete the proposed FY 2022 EIIHA Plan.
Thurs. July 1	12 noon. Steering Committee approves the FY 2022 service priorities and allocations.
Thurs. July 8	12 noon. Council approves the FY 2022 service priorities and allocations.
Fri. July 9	5 pm Deadline for submitting a Project LEAP application form. See July 28 for description of Project LEAP. Call 832 927-7926 for an application form.
Thurs. July 23	12 noon. If necessary, the Priority & Allocations Committee meets to address problems Council sends back regarding the FY 2021 priority & allocations. They also allocate FY 2020 carryover funds. (Allocate even though dollar amount will not be avail. until Aug.)
Wed. July 28	Project LEAP classes begin. Project LEAP is a free 17-week training course for individuals living with and affected by HIV to gain the knowledge and skills they need to help plan HIV prevention and care services in the Houston Area. To apply, call 832 927-7926.

(continued)

DRAFT

Houston Area HIV Services Ryan White Planning Council

Timeline of Critical 2021 Council Activities

(Revised 01-13-21)

A square around an item indicates an item of particular importance or something out of the ordinary regarding the date, time or meeting location.
The following meetings are subject to change. Please call the Office of Support to confirm a particular meeting time, date and/or location: 832 927-7926.

- Thurs. Aug. 5 12 noon. ALL ITEMS MUST BE REVIEWED BEFORE BEING SENT TO COUNCIL – THIS STEERING COMMITTEE MEETING IS THE **LAST CHANCE TO APPROVE ANYTHING NEEDED FOR THE FY 2022 GRANT**. (Mail out date for the August Steering Committee meeting is July 22, 2021.)
- TBD in Aug. Time TBD. **Consumer Training** on Standards of Care and Performance Measures.
- Fri. Sept. 3 5:00 pm. Deadline for submitting **Proposed Idea Forms** to the Office of Support. (See February 15 for a description of this process.) Please contact the Office of Support at 832 927-7926 to request a copy of the required forms.
- TBD in Sept. Time TBD. Joint meeting of the Quality Improvement, Priority & Allocations and all Committees to review data reports and make suggested changes.
- TBD in Sept. Time TBD. **Consumer-Only Workgroup** meeting to review FY 2022 Standards of Care and Performance Measures.
- TBD in Oct. Time TBD. Review and possibly update the Memorandum of Understanding between all Part A stakeholders and the Letter of Agreement between Part B stakeholders.
- October or
November Date & time TBD. Community Workgroup meeting to review **FY 2022 Standards of Care & Performance Measures** for all service categories.
- Thurs. Oct. 28 12 noon. Priority & Allocations Committee meets to allocate FY 2022 unspent funds.
- Tues. Nov. 9 or 30 9:30 am. Commissioners Court to receive the World AIDS Day Resolution.
- Thurs. Nov. 11 12 noon. Council recognizes all Affiliate Committee Members.
- Wed. Dec. 1 **World AIDS Day.**
- Thurs. Dec. 9 12 noon. Election of Officers for the 2022 Ryan White Planning Council.

2021 Ryan White Planning Council Committee Schedule - DRAFT

(as of 01/25/21)

AFFECTED COMMUNITY

TENTATIVE: Meetings are on the Monday after Council meets starting at 12 noon.

February 15	July 12
March 15	August 16
March 16*	September 13
April - no meeting	October 18
May 17**	November 15
June 14	December - no mtg

COMPREHENSIVE HIV PLANNING

Meetings are the second Thursday of the month starting at 2:00 pm:

February 11	August 12
March 11	September 9
April 8	October 14
May 13	November 11
June 10	December - no mtg
July 8	

OPERATIONS

Meetings are Tuesdays following the Council meeting starting at 11:00 am:

February 16	August 17
March 16	September 14
April 13	October 19
May 18	November 16
June 15	December 14
July 13	

PLANNING COUNCIL

Meetings are the second Thursday of the month starting at 12 noon:

February 11	August 12
March 11	September 9
April 8 - HRSA site visit	October 14
May 13	Nov 11 - LEAP presents
June 10	December 9
July 8	

PRIORITY & ALLOCATIONS

Meetings are the fourth Thursday of the month at 12 pm:

February 25	July 22
March 16*	August 26
March 25	September 23
April 22	October 28
May 27	November - no mtg
June 24	December - no mtg

QUALITY IMPROVEMENT

Meetings are on the Tuesdays following Council starting at 1:00 pm:

February 16	August 17
March 16*	September 14
April 13	October 19
May 18	November 16
June 15	December - no mtg
July 13	

STEERING

Meetings are the first Thursday of the month starting at 12 noon:

February 4	August 5
March 4	September 2
April 1	October 7
May 6	November 4
June 3	December 2
July 1	

***Joint meeting of the Affected Community, Priority and Allocations and Quality Improvement Committees.**

BOLD = Special meeting date, time or place

DRAFT
Priority and Allocations
FY 2021 Guiding Principles and Decision Making Criteria
(Priority and Allocations Committee approved 02-27-20)

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. 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)

DRAFT

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.

FY 2021 Priority Setting Process

(Council approved 03-12-20)

1. Agree on the priority-setting process.
2. Agree on the principles to be used in the decision making process.
3. Agree on the criteria to be used in the decision making process.
4. Agree on the process to be used to determine service categories that will be considered for allocations. (This is done at a joint meeting of members of the Quality Improvement, Priority and Allocations and Affected Community Committees and others, or in other manner agreed upon by the Planning Council).
5. Staff creates an information binder containing documents to be used in the Priority and Allocations Committee decision-making processes. The binder will be available at all committee meetings and copies will be made available upon request.
6. Committee members attend a training session to review the documents contained in the information binder and hear presentations from representatives of other funding sources such as HOPWA, Prevention, Medicaid and others.
7. Staff prepares a table that lists services that received an allocation from Part A or B or State Service funding in the current fiscal year. The table lists each service category by HRSA-defined core/non-core category, need, use and accessibility and includes a score for each of these five items. The utilization data is obtained from calendar year CPCDMS data. The medians of the scores are used as guides to create midpoints for the need of HRSA-defined core and non-core services. Then, each service is compared against the midpoint and ranked as equal or higher (H) or lower (L) than the midpoint.
8. The committee meets to do the following. This step occurs at a single meeting:
 - Review documentation not included in the binder described above.
 - Review and adjust the midpoint scores.
 - After the midpoint scores have been agreed upon by the committee, **public comment** is received.
 - During this same meeting, the midpoint scores are again reviewed and agreed upon, taking public comment into consideration.
 - Ties are broken by using the first non-tied ranking. If all rankings are tied, use independent data that confirms usage from CPCDMS or ARIES.
 - By matching the rankings to the template, a numerical listing of services is established.
 - Justification for ranking categories is denoted by listing principles and criteria.
 - Categories that are not justified are removed from ranking.
 - If a committee member suggests moving a priority more than five places from the previous year's ranking, this automatically prompts discussion and is challenged; any other category that has changed by three places may be challenged; any category that moves less than three places cannot be challenged unless documentation can be shown (not cited) why it should change.
 - The Committee votes upon all challenged categorical rankings.
 - At the end of challenges, the entire ranking is approved or rejected by the committee.

(Continued on next page)

9. At a subsequent meeting, the Priority and Allocations Committee goes through the allocations process.
10. Staff removes services from the priority list that are not included on the list of services recommended to receive an allocation from Part A or B or State Service funding. The priority numbers are adjusted upward to fill in the gaps left by services removed from the list.
11. The single list of recommended priorities is presented at a Public Hearing.
12. The committee meets to review public comment and possibly revise the recommended priorities.
13. Once the committee has made its final decision, the recommended single list of priorities is forwarded as the priority list of services for the following year.

2021 Ryan White Planning Council

STANDING COMMITTEE MEMBERSHIP

(Updated 01-21-21)

Yellow = Committee Mentor

Per Council policies, all Council members must be a member of at least one standing committee. The Chair of the Council will be an honorary member of all committees. Affiliate members are not Council members and are appointed for a one year term by the Chair of the Planning Council. The total number of Affiliate members on a committee must be less than 50%.

STEERING	
Allen Murray, RWPC Chair	
Denis Kelly, Vice Chair	Ronnie Galley, Co-Chair, Operations
Crystal Starr, Secretary	Veronica Ardoin , Co-Chair, Operations
Rosalind Belcher, Co-Chair, Affected Community	Bobby Cruz, Co-Chair, Priority and Allocations
Tony Crawford, Co-Chair, Affected Community	Peta-Gay Ledbetter, Co-Chair, Priority and Allocations
Daphne L. Jones, Co-Chair, Comprehensive HIV Planning	Kevin Aloysius, Co-Chair, Quality Improvement
Rodney Mills Co-Chair, Comprehensive HIV Planning	Steven Vargas , Co-Chair, Quality Improvement

AFFECTED COMMUNITY			
1. Rosalind Belcher, Co-Chair	6. Johnny Deal	<i>Affiliate Members:</i>	
2. Tony Crawford, Co-Chair	7. Ronnie Galley	1. Ashley Barnes	4. Beto Ramirez
3. Veronica Ardoin	8. Rodney Mills	2. Ms Dee Francis	5. Trina Wright
4. Ardry "Skeet" Boyle Jr.	9. Holly McLean	3. Josie Rodriguez	
5. Enrique Chavez	10. Diana Morgan		

COMPREHENSIVE HIV PLANNING			
1. Daphne L. Jones, Chair	6. Shital Patel	<i>Affiliate Members:</i>	
2. Rodney Mills, Chair	7. Faye Robinson	1. Dominique Brewster	4. Esther Ogunjimi
3. Dawn Jenkins	8. Imran Shaikh	2. Lisa Felix	5. Debra Reagans
4. Deondre Moore	9. Robert Sliepka	3. Herman Finley	
5. Tom Lindstrom	10. Steven Vargas		

OPERATIONS			
This committee does not allow Affiliate membership			
1. Ronnie Galley, Co-Chair	3. Bobby Cruz	5. Denis Kelly	7. Crystal Starr
2. Veronica Ardoin, Co-Chair	4. Johnny Deal	6. Matilda Padilla	

PRIORITY AND ALLOCATIONS			
1. Bobby Cruz, Co-Chair	4. Mauricia E. Chatman	7. Josh Mica	<i>Affiliate Members:</i>
2. Peta-Gay Ledbetter, Co-Chair	5. Kimberley Collins	8. Robert Sliepka	1.
3. Ardry "Skeet" Boyle Jr.	6. Roxane May	9. Bruce Turner	

QUALITY IMPROVEMENT			
1. Kevin Aloysius, Co-Chair	7. Oscar Perez	<i>Affiliate Members:</i>	
2. Steven Vargas, Co- Chair	8. Pete Rodriguez	1. Marcey Macias	4. Tana Pradia
3. Johanna Castillo	9. Gloria Sierra	2. Karla Mills	5. Deborah Somoye
4. Ahmier Gibson	10. Crystal Starr	3. Cecilia Oshingbade	
5. Josh Mica	11. Andrew Wilson		
6. Nkechi Onyewuenyi			

FY 2019 Ryan White Part A and MAI Service Utilization Report

RW PART A SUR-2nd Quarter (3/1-8/31)																		
Priority	Service Category	Goal	Unduplicated Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-54	55-64	65 plus
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6,467	5,978	73%	25%	2%	46%	12%	2%	39%	0%	0%	5%	27%	28%	12%	26%	2%
1.a	Primary Care - Public Clinic (a)	2,350	1,783	69%	30%	1%	47%	8%	2%	43%	0%	0%	2%	16%	27%	14%	38%	3%
1.b	Primary Care - CBO Targeted to AA (a)	1,060	1,473	66%	31%	3%	99%	0%	1%	0%	0%	0%	6%	36%	28%	11%	17%	1%
1.c	Primary Care - CBO Targeted to Hispanic (a)	960	1,197	81%	15%	4%	0%	0%	0%	100%	0%	1%	6%	32%	31%	12%	18%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	690	606	87%	11%	2%	0%	86%	14%	0%	0%	0%	3%	27%	24%	11%	32%	3%
1.e	Primary Care - CBO Targeted to Rural (a)	400	542	70%	29%	1%	44%	24%	2%	30%	0%	0%	6%	30%	26%	13%	23%	1%
1.f	Primary Care - Women at Public Clinic (a)	1,000	495	0%	100%	0%	55%	6%	1%	38%	0%	0%	1%	11%	28%	19%	36%	4%
1.g	Primary Care - Pediatric (a)	7	3	75%	25%	0%	38%	0%	0%	63%	13%	38%	50%	0%	0%	0%	0%	0%
1.h	Vision	1,600	1,443	73%	26%	2%	50%	12%	2%	35%	0%	0%	5%	24%	25%	13%	30%	3%
2	Medical Case Management (f)	3,075	3,216															
2.a	Clinical Case Management	600	601	76%	21%	2%	56%	14%	1%	29%	0%	0%	4%	23%	26%	12%	31%	4%
2.b	Med CM - Targeted to Public Clinic (a)	280	366	89%	10%	1%	54%	14%	1%	31%	0%	0%	2%	21%	27%	10%	36%	3%
2.c	Med CM - Targeted to AA (a)	550	1,139	68%	29%	3%	99%	0%	1%	0%	0%	1%	6%	35%	25%	11%	20%	2%
2.d	Med CM - Targeted to H/L(a)	550	545	79%	19%	5%	0%	0%	0%	100%	0%	1%	6%	30%	28%	12%	20%	3%
2.e	Med CM - Targeted to White and/or MSM (a)	260	358	89%	10%	2%	0%	90%	10%	0%	0%	0%	3%	25%	21%	11%	34%	6%
2.f	Med CM - Targeted to Rural (a)	150	300	68%	31%	1%	48%	27%	3%	23%	0%	0%	6%	22%	22%	12%	35%	4%
2.g	Med CM - Targeted to Women at Public Clinic (a)	240	106	0%	100%	0%	70%	8%	1%	21%	0%	0%	2%	16%	31%	10%	38%	4%
2.h	Med CM - Targeted to Pedi (a)	125	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
2.i	Med CM - Targeted to Veterans	200	137	93%	7%	0%	68%	20%	0%	12%	0%	0%	0%	1%	5%	1%	65%	28%
2.j	Med CM - Targeted to Youth	120	9	67%	33%	0%	78%	11%	0%	11%	0%	11%	89%	0%	0%	0%	0%	0%
3	Local Drug Reimbursement Program (a)	2,845	3,989	74%	23%	3%	47%	14%	2%	38%	0%	0%	4%	28%	28%	14%	24%	1%
4	Oral Health	200	140	62%	37%	1%	41%	28%	2%	29%	0%	0%	4%	20%	24%	14%	34%	5%
4.a	Oral Health - Untargeted (d)	NA																
4.b	Oral Health - Rural Target	200	134	62%	37%	1%	41%	28%	2%	29%	0%	0%	4%	20%	24%	14%	34%	5%
5	Mental Health Services (d)	NA																
6	Health Insurance	1,700	1,278	78%	20%	1%	46%	24%	3%	28%	0%	0%	2%	16%	18%	12%	42%	10%
7	Home and Community Based Services (d)	NA																
8	Substance Abuse Treatment - Outpatient	40	3	100%	0%	0%	17%	67%	0%	17%	0%	0%	0%	33%	17%	33%	17%	0%
9	Early Medical Intervention Services (d)	NA																
10	Medical Nutritional Therapy/Nutritional Supplements	650	345	75%	24%	1%	40%	22%	4%	35%	0%	0%	1%	11%	15%	12%	47%	14%
11	Hospice Services (d)	NA																
12	Outreach	700	476	77%	20%	3%	60%	12%	1%	27%	0%	1%	6%	34%	24%	11%	23%	2%
13	Non-Medical Case Management	7,045	1,492															
13.a	Service Linkage Targeted to Youth	320	100	72%	27%	1%	58%	3%	2%	38%	0%	14%	86%	0%	0%	0%	0%	0%
13.b	Service Linkage at Testing Sites	260	55	75%	22%	4%	64%	9%	0%	27%	0%	0%	0%	58%	20%	11%	11%	0%
13.c	Service Linkage at Public Clinic Primary Care Program (a)	3,700	2,966	66%	33%	1%	56%	9%	1%	34%	0%	0%	0%	16%	25%	14%	40%	4%
13.d	Service Linkage at CBO Primary Care Programs (a)	2,765	2,000	75%	22%	3%	53%	15%	2%	31%	1%	1%	5%	29%	23%	12%	25%	3%
14	Transportation	2,850	1,941															
14.a	Transportation Services - Urban	170	107	67%	30%	2%	58%	9%	2%	31%	0%	0%	4%	31%	27%	11%	22%	4%
14.b	Transportation Services - Rural	130	173	67%	31%	2%	36%	34%	2%	28%	0%	0%	5%	20%	24%	15%	31%	5%
14.c	Transportation vouchering	2,550	661															
15	Linguistic Services (d)	NA																
16	Emergency Financial Assistance (e)	NA	217	74%	24%	2%	50%	14%	0%	35%	0%	0%	3%	30%	23%	15%	27%	2%
17	Referral for Health Care - Non Core Service (d)	NA																
Net unduplicated clients served - all categories*		12,941	11,150	73%	25%	2%	51%	14%	2%	33%	0%	1%	4%	24%	24%	12%	30%	4%
Living AIDS cases + estimated Living HIV non-AIDS (from FY19 App) (b)		NA																

FY 2019 Ryan White Part A and MAI Service Utilization Report

RW MAI Service Utilization Report - 2nd Quarter (03/01 -08/31)																		
Priority	Service Category MAI unduplicated served includes clients also served under Part A	Goal	Unduplicated MAI Clients Served YTD	Male	Female	Trans gender	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
	Outpatient/Ambulatory Primary Care (excluding Vision)																	
1.b	Primary Care - MAI CBO Targeted to AA (g)	1,060		70%	28%	2%	99%	0%	1%	0%	0%	0%	6%	34%	31%	11%	17%	0%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	960		82%	15%	4%	0%	0%	0%	100%	0%	0%	6%	33%	32%	13%	15%	1%
2	Medical Case Management (f)																	
2.c	Med CM - Targeted to AA (a)	1,060	392	79%	18%	3%	47%	16%	2%	35%	0%	1%	9%	33%	23%	14%	18%	2%
2.d	Med CM - Targeted to H/L(a)	960	319	86%	11%	2%	61%	23%	2%	14%	0%	0%	14%	32%	18%	11%	18%	7%
RW Part A New Client Service Utilization Report - 2nd Quarter (03/01-08/31)																		
Report reflects the number & demographics of clients served during the report period who did not receive services during previous 12 months (3/1/20 - 2/28/21)																		
Priority	Service Category	Goal	Unduplicated New Clients Served YTD	Male	Female	Trans gender	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	654	76%	21%	3%	51%	13%	2%	34%	0%	1%	11%	36%	23%	11%	1%	18%
2	LPAP	1,200	350	79%	18%	3%	47%	16%	2%	35%	0%	1%	9%	33%	23%	14%	2%	18%
3.a	Clinical Case Management	400	44	86%	11%	2%	61%	23%	2%	14%	0%	0%	14%	32%	18%	11%	7%	18%
3.b-3.h	Medical Case Management	1,600	540	76%	21%	3%	51%	15%	2%	31%	0%	1%	11%	37%	21%	10%	1%	18%
3.i	Medical Case Management - Targeted to Veterans	60	19	89%	11%	0%	84%	11%	0%	5%	0%	0%	0%	5%	21%	0%	16%	58%
4	Oral Health	40	15	47%	53%	0%	40%	33%	7%	20%	0%	0%	13%	7%	20%	33%	0%	27%
12.a. 12.c. 12.d.	Non-Medical Case Management (Service Linkage)	3,700	798	72%	26%	2%	58%	13%	2%	27%	1%	2%	9%	29%	22%	12%	24%	2%
12.b	Service Linkage at Testing Sites	260	32	78%	19%	3%	69%	9%	0%	22%	0%	3%	19%	41%	19%	13%	6%	0%
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)	Total MCM served does not include Clinical Case Management																	
(f)	CBO Pcare targeted to AA (1.b) and HL (1.c) goals represent combined Part A and MAI clients served																	

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
1	Outpatient/Ambulatory Primary Care	9,869,619	201,116	413,485	0	0	10,484,220	45.77%	10,335,560	148,660		3,436,575	33%	67%
1.a	Primary Care - Public Clinic (a)	3,591,064					3,591,064	15.68%	3,591,064	0	3/1/2020	\$288,133	8%	67%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	952,498		121,162			1,073,660	4.69%	1,073,660	0	3/1/2020	\$924,802	86%	67%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	798,473		121,162			919,635	4.02%	919,635	0	3/1/2020	\$747,626	81%	67%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	1,035,846		121,162			1,157,008	5.05%	1,157,008	0	3/1/2020	\$302,703	26%	67%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,149,761		25,000			1,174,761	5.13%	1,174,761	0	3/1/2020	\$713,769	61%	67%
1.f	Primary Care - Women at Public Clinic (a)	1,874,540					1,874,540	8.18%	1,874,540	0	3/1/2020	\$209,667	11%	67%
1.g	Primary Care - Pediatric (a.1)	15,437	1,116				16,553	0.07%	16,553	0	3/1/2020	\$5,100	31%	67%
1.h	Vision	452,000		25,000			477,000	2.08%	477,000	0	3/1/2020	\$244,775	51%	67%
1.x	Primary Care Health Outcome Pilot	0	200,000				200,000	0.87%	51,340	148,660	7/14/2020	\$0	0%	67%
2	Medical Case Management	2,185,802	-160,051	25,000	0	0	2,050,751	8.95%	2,050,751	0		854,636	42%	67%
2.a	Clinical Case Management	488,656		25,000			513,656	2.24%	513,656	0	3/1/2020	\$269,270	52%	67%
2.b	Med CM - Public Clinic (a)	427,722					427,722	1.87%	427,722	0	3/1/2020	\$50,549	12%	67%
2.c	Med CM - Targeted to AA (a) (e)	266,070					266,070	1.16%	266,070	0	3/1/2020	\$197,127	74%	67%
2.d	Med CM - Targeted to H/L (a) (e)	266,072					266,072	1.16%	266,072	0	3/1/2020	\$97,691	37%	67%
2.e	Med CM - Targeted to W/MSM (a) (e)	52,247					52,247	0.23%	52,247	0	3/1/2020	\$60,255	115%	67%
2.f	Med CM - Targeted to Rural (a)	273,760					273,760	1.20%	273,760	0	3/1/2020	\$103,199	38%	67%
2.g	Med CM - Women at Public Clinic (a)	125,311					125,311	0.55%	125,311	0	3/1/2020	\$36,024	29%	67%
2.h	Med CM - Targeted to Pedi (a.1)	160,051	-160,051				0	0.00%	0	0	3/1/2020	\$0	#DIV/0!	67%
2.i	Med CM - Targeted to Veterans	80,025					80,025	0.35%	80,025	0	3/1/2020	\$30,891	39%	67%
2.j	Med CM - Targeted to Youth	45,888					45,888	0.20%	45,888	0	3/1/2020	\$9,628	21%	67%
3	Local Pharmacy Assistance Program	3,157,166	0	0	0	0	3,157,166	13.78%	3,157,166	0	3/1/2020	\$840,772	27%	67%
3.a	Local Pharmacy Assistance Program-Public Clinic (a) (e)	610,360					610,360	2.66%	610,360	0	3/1/2020	\$55,042	9%	67%
3.b	Local Pharmacy Assistance Program-Untargeted (a) (e)	2,546,806					2,546,806	11.12%	2,546,806	0	3/1/2020	\$785,730	31%	67%
4	Oral Health	166,404	0	0	0	0	166,404	0.73%	166,404	0	3/1/2020	75,200	45%	67%
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					166,404	0.73%	166,404	0	3/1/2020	\$75,200	45%	67%
5	Health Insurance (c)	1,339,239	43,898	0	0	0	1,383,137	6.04%	1,383,137	0	3/1/2020	\$534,644	39%	67%
6	Mental Health Services (c)	0					0	0.00%	0	0	NA	\$0	0%	0%
7	Early Intervention Services (c)	0					0	0.00%	0	0	NA	\$0	0%	0%
8	Home and Community-Based Services (c)	0					0	0.00%	0	0	NA	\$0	0%	0%
9	Substance Abuse Services - Outpatient	45,677	0	0	0	0	45,677	0.20%	45,677	0	3/1/2020	\$1,850	0%	67%
10	Medical Nutritional Therapy (supplements)	341,395	0	40,000	0	0	381,395	1.67%	381,395	0	3/1/2020	\$257,325	67%	67%
11	Hospice Services	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
12	Outreach Services	420,000	0				420,000	1.83%	420,000	0	3/1/2020	\$163,800	39%	67%
13	Emergency Financial Assistance	525,000	0	0	0	0	525,000	2.29%	525,000	0	3/1/2020	\$230,896	44%	67%
14	Referral for Health Care and Support Services (c)	0	0	0			0	0.00%	0	0	NA	\$0	0%	0%
15	Non-Medical Case Management	1,381,002	0	117,000	0	0	1,498,002	6.54%	1,498,002	0		604,063	40%	67%
15.a	Service Linkage targeted to Youth	110,793					110,793	0.48%	110,793	0	3/1/2020	\$24,088	22%	67%
15.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000					100,000	0.44%	100,000	0	3/1/2020	\$24,330	24%	67%
15.c	Service Linkage at Public Clinic (a)	427,000					427,000	1.86%	427,000	0	3/1/2020	\$98,147	23%	67%
15.d	Service Linkage embedded in CBO Pcare (a) (e)	743,209		117,000			860,209	3.76%	860,209	0	3/1/2020	\$457,498	53%	67%
16	Medical Transportation	424,911	0	0	0	0	424,911	1.86%	424,911	0		234,748	55%	67%
16.a	Medical Transportation services targeted to Urban	252,680					252,680	1.10%	252,680	0	3/1/2020	\$164,434	65%	67%
16.b	Medical Transportation services targeted to Rural	97,185					97,185	0.42%	97,185	0	3/1/2020	\$70,314	72%	67%
16.c	Transportation vouchers (bus passes & gas cards)	75,046					75,046	0.33%	75,046	0	3/1/2020	\$0	0%	0%
17	Linguistic Services (c)	0					0	0.00%	0	0	NA	\$0	0%	0%
	Total Service Dollars	19,856,215	84,963	595,485	0	0	20,536,663	87.83%	20,388,003	148,660		7,234,510	35%	67%
	Grant Administration	1,795,958	0	0	0	0	1,795,958	7.84%	1,795,958	0	N/A	0	0%	67%

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

FY 2020 Ryan White Part A and 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	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
	HCPHES/RWGA Section	1,271,050		0		0	1,271,050	5.55%	1,271,050	0	N/A		0%	67%
	RWPC Support*	524,908			0	0	524,908	2.29%	524,908	0	N/A		0%	67%
	Quality Management	412,940		0	0	0	412,940	1.80%	412,940	0	N/A		0%	67%
		22,065,113	84,963	595,485	0	0	22,745,561	97.47%	22,596,901	148,660		7,234,510	32%	67%
								Unallocated	Unobligated					
	Part A Grant Award:	22,309,011	Carry Over:	595,485		Total Part A:	22,904,496	158,935	148,660					
		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 dollars)	17,105,302	84,963	478,485	0	0	17,668,750	86.04%	5,464,508	81.58%				
	Non-Core (may not exceed 25% of total service dollars)	2,750,913	0	117,000	0	0	2,867,913	13.96%	1,233,508	18.42%				
	Total Service Dollars (does not include Admin and QM)	19,856,215	84,963	595,485	0	0	20,536,663		6,698,016					
	Total Admin (must be ≤ 10% of total Part A + MAI)	1,795,958	0	0	0	0	1,795,958	7.06%						
	Total QM (must be ≤ 5% of total Part A + MAI)	412,940	0	0	0	0	412,940	1.62%						

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	1,887,283	115,502	106,554	0	0	2,109,339	86.82%	2,109,339	0		831,875	39%	67%
1.b (MAI)	Primary Care - CBO Targeted to African American	954,912	58,441	53,277			1,066,630	43.90%	1,066,630	0	3/1/2020	\$482,625	45%	67%
1.c (MAI)	Primary Care - CBO Targeted to Hispanic	932,371	57,061	53,277			1,042,709	42.92%	1,042,709	0	3/1/2020	\$349,250	33%	67%
2	Medical Case Management	320,100	0	0	0	0	320,100	13.18%	320,100	0		\$96,618	30%	67%
2.c (MAI)	MCM - Targeted to African American	160,050					160,050	6.59%	160,050	0	3/1/2020	\$44,448	28%	67%
2.d (MAI)	MCM - Targeted to Hispanic	160,050					160,050	6.59%	160,050	0	3/1/2020	\$52,170	33%	67%
	Total MAI Service Funds	2,207,383	115,502	106,554	0	0	2,429,439	100.00%	2,429,439	0		928,493	38%	67%
	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%
	Total MAI Non-service Funds	0	0	0	0	0	0	0.00%	0	0		0	0%	0%
	Total MAI Funds	2,207,383	115,502	106,554	0	0	2,429,439	100.00%	2,429,439	0		928,493	38%	67%
	MAI Grant Award	2,429,513	Carry Over:	106,554		Total MAI:	2,536,067							
	Combined Part A and MAI Original Allocation Total	24,272,496												

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													



THE HOUSTON REGIONAL HIV/AIDS
RESOURCE GROUP, INC.

HOW TO READ
TRG REPORTS
2021

2021 TRG RWPC REPORT DUE

STATE SERVICES CONTRACT YEARS	RYAN WHITE PART B CONTRACT YEARS
Year 1: 9/1/20 - 8/31/21 Year 2: 9/1/21 - 8/31/22	Year 1: 4/1/20 - 3/31/21 Year 2: 4/1/21 - 3/31/22

ANNUAL REPORTS <i>(DELIVERED TO QI COMMITTEE)</i>	
2020 CONSUMER INVOLVEMENT REPORT March 2021**	2020 CHART REVIEW REPORTS March 2021**

***Limited Data Collection due COVID-19 Restrictions and DSHS Waiver of Monitoring*

All Monthly & Quarterly Reports delivered on a one-month delay to allow the finalization of data.

QUARTERLY REPORTS <i>(DELIVERED TO QI COMMITTEE)</i>			
STATE SERVICES SERVICE UTILIZATION REPORTS		RYAN WHITE PART B SERVICE UTILIZATION REPORTS	
MONTHS COVERED	REPORT DUE	MONTHS COVERED	MONTH DUE
September – November	January	April – June	August
September – February	April	April – September	November
September – May	July	April – December	February
September – August	October	April – March	May

MONTHLY REPORTS <i>(DELIVERED TO QI COMMITTEE)</i>	
PROCUREMENT REPORTS	HEALTH INSURANCE ASSISTANCE REPORTS

Quarterly Service Utilization Reports

Purpose:

Provide quarterly updates on the number of people living with HIV (PLWH) who are access services by service category.

2018-2019 Ryan White Part B Service Utilization Report A
 4/1/2018 - 3/31/2019 Houston HSDA (4816)
 3rd Quarter - 4/1/2018 to 12/31/2018

C.

D

B.

Revised 2/21/2019

Funded Service	UDC		Gender				Race				Age Group							
	Goal	YTD	Male	Female	FTM	MTF	AA	White	Hisp	Other	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65+
Health Insurance Premiums & Cost Sharing Assistance	1,250	3	100.00%	0.00%	0.00%	0.00%	75.00%	25.00%	0.00%	0.00%	0.00%	0.00%	8.82%	8.82%	23.53%	11.76%	44.12%	2.94%
Home & Community Based Health Services	30	34	70.59%	26.47%	0.00%	2.94%	58.82%	8.82%	32.35%	0.00%	0.00%	0.00%	0.00%	66.67%	0.00%	33.33%	0.00%	0.00%
Oral Health Care	3,100	856	72.90%	25.93%	0.00%	1.17%	49.65%	17.06%	31.43%	1.87%	0.00%	0.12%	1.75%	14.84%	18.69%	13.79%	43.46%	7.36%
Unduplicated Clients Served By RW Part B Funds:	NA	893	81.16%	17.47%	0.00%	1.37%	61.16%	16.96%	21.26%	0.62%	0.00%	0.11%	2.02%	14.78%	18.81%	13.77%	43.34%	7.17%

E.

COMMENT: The delay in Data Upload from CPCDMS into ARIES is the reason for the discrepancy in the HIP/HIA YTD Total. Please see HINS Report for review on HIP/HIA totals.

Items of Note:

- A. Header – this tells you three things:
 1. Which grant is being reported (either Ryan White Part B or State Services),
 2. What grant year is being reported, and
 3. What timeframe is being reported (the quarter and the dates of the quarter).
- B. Revision Date – this tells you the last time that the report has updated.
- C. Service Categories being reported
- D. The Unduplicated Clients (UDC)
 1. Goal shows the number of PLWH that have been targeted to be served in the contract year by all funded agencies.
 2. Year-To-Date (YTD) number of PLWH who have been served and the progress toward achieving the goal based on the contract year.
- E. Comments – This is where TRG will provide any notes that will help explain the information in the report.

Monthly Procurement Reports

Purpose:
Provide monthly updates on spending by service category.

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



B. Reflects spending through December 2018 E. F. G. Spending Target: 75% C.

Revised 2/19/2019

Priority	D. Service Category	Original Allocation per RWPC	% of Grant Award	Amendment*	Contractual Amount	% of Grant Award	Date of Original Procurement	Expended YTD	Percent YTD
6	Oral Health Care	\$2,085,565	62%	\$0	\$2,085,565	62%	4/1/2018	\$1,333,620	64%
7	Health Insurance Premiums and Cost Sharing (1)	\$726,885	22%	\$0	\$726,885	22%	4/1/2018	\$393,976	54%
9	Home and Community Based Health Services (2)	\$202,315	6%	\$325,806	\$528,121	16%	4/1/2018	\$103,920	51%
	Unallocated funds approved by RWPC for Health Insurance	\$325,806	10%	-\$325,806	\$0	0%	4/1/2018	\$0	0%
Total Houston HSDA		3,340,571	100%	\$0	\$3,340,571	100%		1,831,516	55%

J. Note: Spending variances of 10% 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. Agency usually expends all funds. H. I.

- Items of Note:
- A. Header – this tells you three things:
 1. Which grant is being reported (either Ryan White Part B or State Services),
 2. What grant year is being reported, and
 - B. What timeframe is being reported (the quarter and the dates of the quarter).
 - C. Revision Date – this tells you the last time that the report has updated.
 - D. Service Categories being reported
 - E. Original Allocation from the P&A Process
 - F. Amendment – Tracks any change in the allocation.

- G. Contractual Amount – the amount of money that has been contracted to service providers.
- H. Expended YTD – the amount of money that has been spend year-to-date based on the contract year.
- I. Percentage YTD – the percentage of money that has been spent based on the contract year. (TRG considers +/- 10% to be on target for spending.)
- J. Comments – This is where TRG will provide any notes that will help explain the information in the report.

Quarterly Service Utilization Reports

Purpose:

Provide quarterly updates on the number of people living with HIV (PLWH) who are access services by service category.

Houston Ryan White Health Insurance Assistance Service Utilization Report



A Period Reported: 09/01/2018-12/31/2018
B. Revised: 2/4/2019

C. 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	785	\$72,937.77	509			0
Medical Deductible	70	\$23,424.75	50			0
Medical Premium	2447	\$984,144.70	686			0
Pharmacy Co-Payment	1345	\$135,910.80	651			0
APTC Tax Liability	0	\$0.00	0			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	9	\$1,042.00	8	NA	NA	NA
G Totals:	4656	\$1,215,376.02	1904	0	\$0.00	

Comments: This report represents services **D.** under all g **E.** **F.**

Items of Note:

- A. Period Reported – What timeframe is being reported.
- B. Revision Date – this tells you the last time that the report has updated.
- C. Type of Request – tells you the sub-services that was provided
- D. The number of the request that received service.
- E. The amount spent to provide the service.
- F. The number of unduplicated people living with HIV that have received service.
- G. Comments – This is where TRG will provide any notes that will help explain the information in the report.

The Houston Regional HIV/AIDS Resource Group, Inc.
FY 2021 Ryan White Part B
Procurement Report
April 1, 2020 - March 31, 2021



Reflects spending through September 2020

Spending Target: 50%

Revised 11/24/20

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendment*	Contractual Amount	Amendment	Contractual Amount	Date of Original Procurement	Expended YTD	Percent YTD
4	Oral Health Care (1)	\$1,758,878	52%	\$0	\$1,758,878	\$0	\$1,758,878	4/1/2020	\$484,000	28%
	Oral Health Care -Prosthodontics	\$460,000	14%	\$0	\$460,000	\$0	\$460,000	4/1/2020	\$197,055	43%
5	Health Insurance Premiums and Cost Sharing (2)	\$1,028,433	31%	\$0	\$1,028,433	\$0	\$1,028,433	4/1/2020	\$325,390	32%
8	Home and Community Based Health Services (3)	\$113,315	3%	\$0	\$113,315	\$0	\$113,315	4/1/2020	\$36,880	33%
	Increased RWB Award added to OHS per Increase Scenario*	\$0	0%	\$0	\$0					
Total Houston HSDA		3,360,626	100%	0	3,360,626	\$0	\$2,900,626		1,043,325	36%

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

- (1) OHC- Service utilization has decreased due to the interruption of COVID-19.
- (2) 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
- (3) HCB- Service utilization has decreased due to the interruption of COVID-19.

The Houston Regional HIV/AIDS Resource Group, Inc.
FY 1920 DSHS State Services
Procurement Report
September 1, 2020- August 31, 2021



Chart reflects spending through September 2020

Spending Target: 8.33%

Revised 11/24/2020

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendments per RWPC	Contractual Amount	Amendment	Contractual Amount	Date of Original Procurement	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$864,506	43%	\$0	\$864,506	\$0	\$864,506	9/1/2020	\$0	0%
6	Mental Health Services	\$300,000	15%	\$0	\$300,000	\$0	\$300,000	9/1/2020	\$9,273	3%
7	EIS - Incarcerated	\$175,000	9%	\$0	\$175,000	\$0	\$175,000	9/1/2020	\$10,185	6%
11	Hospice	\$259,832	13%	\$0	\$259,832	\$0	\$259,832	9/1/2020	\$20,460	8%
	Non Medical Case Management (2)	\$350,000	17%	\$0	\$350,000	\$0	\$350,000	9/1/2020	\$4,153	1%
15	Linguistic Services (3)	\$68,000	3%	\$0	\$68,000	\$0	\$68,000	9/1/2020	\$1,838	3%
	Increased award amount -Approved by RWPC for Health Insurance (a)	\$0	0%	\$0						
Total Houston HSDA		2,017,338	100%	\$0	\$2,017,338	\$0	\$2,017,338		45,909	2%

Note

- (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) N-Medical Case Management servicee is behind one month of submitting billing.
- (3) Linguistic- Service utilization has decreased due to the interruption of COVID-19.

2020-2020 Ryan White Part B Service Utilization Report
4/1/2020 - 6/30/2020 Houston HSDA (4816)
1st Quarter

Funded Service	UDC		Gender				Race				Age Group							Revised	R/S/2020
	Goal	YTD	Male	Female	FTM	MTF	AA	White	Hisp	Other	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65+	
Health Insurance Premiums & Cost Sharing Assistance	1,000	209	84.68%	15.32%	0.00%	0.00%	31.10%	32.06%	33.02%	3.82%	0.00%	0.00%	1.44%	16.75%	14.35%	32.53%	33.49%	1.44%	
Home & Community Based Health Services	30	18	72.22%	27.78%	0.00%	0.00%	66.67%	11.11%	22.22%	0.00%	0.00%	0.00%	0.00%	0.00%	44.45%	44.44%	11.11%		
Oral Health Care	2,500	1,225	71.76%	26.69%	0.00%	1.55%	51.10%	13.38%	33.55%	1.97%	0.00%	0.00%	1.22%	15.34%	22.44%	27.34%	24.57%	9.09%	
Unduplicated Clients Served By RW Part B Funds:	NA	1,452	76.22%	23.26%	0.00%	0.52%	49.62%	18.85%	29.60%	1.93%	0.00%	0.00%	0.89%	10.70%	12.26%	34.77%	34.17%	7.21%	

Houston Ryan White Health Insurance Assistance Service Utilization Report



Period Reported:

09/01/2020-12/31/20

Revised: 2/5/2021

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	370	\$37,075.31	240			0
Medical Deductible	0	\$0.00	0			0
Medical Premium	2242	\$762,323.63	694			0
Pharmacy Co-Payment	3614	\$94,732.35	513			0
APTC Tax Liability	1	\$500.00	1			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	0	\$0.00	0	NA	NA	NA
Totals:	6227	\$894,631.29	1448	0	\$0.00	

Comments: This report represents services provided under all grants.

Houston Ryan White Health Insurance Assistance Service Utilization Report



Period Reported:

09/01/2020-1/31/21

Revised: 3/1/2021

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	512	\$52,988.22	297			0
Medical Deductible	0	\$0.00	0			0
Medical Premium	2897	\$992,929.29	737			0
Pharmacy Co-Payment	5609	\$173,561.98	865			0
APTC Tax Liability	1	\$500.00	1			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	10	\$9,057.00	0	NA	NA	NA
Totals:	9029	\$1,210,922.49	1900	0	\$0.00	

Comments: This report represents services provided under all grants.