

12 noon, Thursday, April 22, 2021

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

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. <u>When signing in, guests are not required to provide their correct or complete names.</u> 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	
	A. See attached follow up email from C. Henley	
	B. See the attached Client's Rights Cards in English and Spanish	
IV.	Report from the Administrative Agency – Part A/MAI	
	A. Updates on FY 2020 Grant Awards	Carin Martin
	B. Reports	
V.	Report from the Administrative Agency – Part B/State Services	
	A. Updates on FY 2020 Grant Awards	Sha'Terra Johnson
	B. Reports	
VI.	New Business	
	A. Reallocate Ryan White Part A funds	
	B. May 2021 Council meeting may be cancelled	
	C. Other	
VII.	Announcements	
VIII.	Adjourn	
	• Optional: Meet with the Committee Mentor	Mauricia Chatman

Houston Area HIV Services Ryan White Planning Council

Priority & Allocations Committee Meeting

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

Meeting Location: Zoom Teleconference

MINUTES

MEMBERS PRESENT	MEMBERS ABSENT	STAFF PRESENT
Bobby Cruz, Co-Chair	Ardry Skeet Boyle, Excused	<i>The Resource Group</i>
Peta-gay Ledbetter, Co-Chair	Kimberley Collins, Excused	Sha'Terra Johnson
Mauricia E. Chatman		
Roxane May		<i>Ryan White Grant Admin</i>
Josh Mica	OTHERS PRESENT	Carin Martin
Robert Sliepk	Allen Murray, RWPC Chair	Heather Keizman
Bruce Turner	Amy Leonard, HHD	
	Santos Vera, Avenue360	<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 (Mica, Chatman) to approve the agenda.* **Motion carried unanimously.**

Approval of the Minutes: **Motion #2:** *it was moved and seconded (Turner, Mica) to approve the February 25, 2021 minutes.* **Motion carried.**

Public Comment and Announcements: Cruz asked the visitors to introduce themselves. Amy Leonard is the new Ending the Epidemic Coordinator for the Houston Health Department. Santos Vera is the new Executive Vice President of Operations at Avenue360 Health and Wellness. Williams gave a brief recap of the recent issues with ADAP, stating that there was a town hall meeting yesterday and DSHS is rescinding the eligibility change. Fortunately, Houston has had a safety net in place for many years so the Houston Ryan White Program is in a good position to help consumers who are no longer eligible for ADAP services from the State. Because of the discussion around ADAP in February, many items were tabled at the last meeting and will need to be addressed at this meeting.

2021 Committee Goals: See attached. **Motion #3:** *it was moved and seconded (Ledbetter, Mica) to use the same committee goals in 2021 as were used in 2020.* **Motion carried unanimously.**

2021 Critical Timeline and Committee Meeting Dates and Time, How To Best Meet the Need Training & Workgroup Meetings: Williams reviewed the attached documents.

Determine the FY 2022 Principles & Criteria: **Motion #4:** *it was moved and seconded (Mica, Ledbetter) to use the attached FY 2021 Principles and Criteria in FY 2022.* **Motion carried unanimously.**

Determine the FY 2022 Priority Setting Process: **Motion #5:** *it was moved and seconded (Sliepka, Ledbetter) to use the attached FY 2021 Priority Setting Process for FY 2022.* **Motion carried unanimously.**

Continue the Subcategory Review Process? Williams said that there has been no response to this memo for many years now. The committee said the process seems redundant. **Motion #6:** *it was moved and seconded (Mica, Ledbetter) to discontinue the subcategory review process.* **Motion carried.**

Elect a Committee Vice Chair: Cruz and Ledbetter nominated Turner and he accepted. No other nominations were made so the committee thanked Turner for taking on this role.

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. She said the Houston Ryan White Program will definitely have carryover funds from FY2020. She then went over the various reports provided by the Ryan White Grant Administration.

Part B State Services: Johnson said that they thought there might be a reduction in funding for FY 2021 but now it appears they will receive level funding. She reviewed the attached presentation on How to Read reports from the Ryan White Grant Administration.

Announcements: None.

Adjournment: **Motion:** *it was moved and seconded (Turner, Mica) to adjourn the meeting at 1:09 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 03/25/21

	Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 Committee Goals Carried				Motion #4 Principles & Criteria Carried			
MEMBERS	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		

	Motion #5 Priority Setting Process Carried				Motion #6 Subcategory Review Process Carried			
MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
Bobby Cruz, Co-Chair				C				C
Peta-gay Ledbetter, Co-Chair		X				X		
Ardry Skeet Boyle	X				X			
Mauricia E. Chatman		X					X	
Kimberley Collins	X				X			
Roxane May		X				X		
Josh Mica		X				X		
Robert Sliepka		X				X		
Bruce Turner		X				X		

Williams, Victoria (County Judge's Office)

From: Charles Henley <charleshenley9@gmail.com>
Sent: Saturday, February 27, 2021 3:02 PM
To: Williams, Victoria (County Judge's Office)
Subject: Follow up to SPAP Question from P&A Committee Presentation

Follow Up Flag: Follow up
Flag Status: Flagged

During the *Responding to the impact of potential THMP Changes* presentation made to the February P&A Committee, a question was posed by a committee member concerning the impact to current SPAP clients who may in the future no longer be eligible for SPAP assistance from the Texas HIV Medication Program (THMP).

Per the THMP website, the following is true for SPAP enrollees (see [Texas THMP SPAP - 2021](#)):

"The THMP State Pharmacy Assistance Program assists THMP enrollees with their premiums (plans under \$25.00 in 2021) and copayments for prescription medications who have Medicare and an active Medicare part D prescription plan." The SPAP assists clients with the unpaid portion of their prescription cost (what would be the client's "out-of-pocket" cost) after the Part D plan has paid its portion towards the cost of the prescription. This unpaid portion may be covered by local HIA rather than Ramsell if the client is no longer eligible for SPAP.

Suggested guidance for impacted clients: A client with existing Medicare Part D coverage who is or becomes ineligible for the THMP SPAP should contact the local RWHAP-funded Health Insurance Assistance (HIA) provider for help with Medicare Part D premiums and co-payments.

Further discussion:

In the FY-21 Part A HIA service definition, assistance with Medicare Supplemental and Part D plan premiums and co-payments are not explicitly listed under client eligibility. The RW Part A client eligibility definition does state *"HIV-infected individuals residing in the Houston EMA meeting financial eligibility requirements and have insurance or be eligible to purchase a Qualified Health Plan through Marketplace."* The current Part B HIA service definition lists Client Eligibility as *"People living with HIV in the Houston HSDA and have insurance or be eligible (within local financial eligibility guidelines) to purchase a Qualified Health Plan through Marketplace."* Medicare Part B Supplemental and Part D plans are allowable insurance plans. Medicare Part D premiums are further noted in both the Part A HIA standards of care and the Part B HIA service definition under the requirement that HIA provider's must "...utilize the RWPC-approved prioritization of cost sharing assistance when limited funds warrant (premiums take precedence)." It may worthwhile for the RWPC to revisit its HIA service definition and HIA client eligibility text to ensure the Council's intent that Medicare Part B Supplemental and Part D prescription plan premiums are explicitly listed as allowable in addition to Qualified Health Plans available through the Marketplace. Also, review the service definition to express the Council's intent with regard to whether Medicare Part B Supplemental and Part D premiums take similar precedence as do QHP premiums. The current language is ambiguous in that regard (i.e. "premiums take precedence", however Medicare Part D premiums are listed as the 4th ranked priority for requests when funds are limited). Also, the Council may consider changing the "HIV-infected" terminology used in the Part A service definition client eligibility section to align with the corresponding text in the Part B service definition (e.g. "People living with HIV").

Thank you,

Charles Henley, MSW, LCSW

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
1	Outpatient/Ambulatory Primary Care	9,869,619	201,116	413,485	387,595	0	10,871,815	47.47%	10,723,155	148,660		6,151,454	57%	92%
1.a	Primary Care - Public Clinic (a)	3,591,064					3,591,064	15.68%	3,591,064	0	3/1/2020	\$1,088,970	30%	92%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	952,498		121,162	142,532		1,216,192	5.31%	1,216,192	0	3/1/2020	\$1,286,665	106%	92%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	798,473		121,162	142,532		1,062,167	4.64%	1,062,167	0	3/1/2020	\$1,065,798	100%	92%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	1,035,846		121,162	142,531		1,299,539	5.67%	1,299,539	0	3/1/2020	\$436,510	34%	92%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,149,761		25,000	-76,000		1,098,761	4.80%	1,098,761	0	3/1/2020	\$976,351	89%	92%
1.f	Primary Care - Women at Public Clinic (a)	1,874,540					1,874,540	8.18%	1,874,540	0	3/1/2020	\$925,380	49%	92%
1.g	Primary Care - Pediatric (a.1)	15,437	1,116				16,553	0.07%	16,553	0	3/1/2020	\$6,600	40%	92%
1.h	Vision	452,000		25,000	36,000		513,000	2.24%	513,000	0	3/1/2020	\$365,180	71%	92%
1.x	Primary Care Health Outcome Pilot	0	200,000				200,000	0.87%	51,340	148,660	7/14/2020	\$0	0%	92%
2	Medical Case Management	2,185,802	-160,051	25,000	-5,000	0	2,045,751	8.93%	2,050,751	-5,000		1,512,185	74%	92%
2.a	Clinical Case Management	488,656		25,000			513,656	2.24%	513,656	0	3/1/2020	\$389,337	76%	92%
2.b	Med CM - Public Clinic (a)	427,722					427,722	1.87%	427,722	0	3/1/2020	\$199,017	47%	92%
2.c	Med CM - Targeted to AA (a) (e)	266,070					266,070	1.16%	266,070	0	3/1/2020	\$297,222	112%	92%
2.d	Med CM - Targeted to H/L (a) (e)	266,072					266,072	1.16%	266,072	0	3/1/2020	\$145,074	55%	92%
2.e	Med CM - Targeted to W/MSM (a) (e)	52,247					52,247	0.23%	52,247	0	3/1/2020	\$88,231	169%	92%
2.f	Med CM - Targeted to Rural (a)	273,760					273,760	1.20%	273,760	0	3/1/2020	\$152,029	56%	92%
2.g	Med CM - Women at Public Clinic (a)	125,311					125,311	0.55%	125,311	0	3/1/2020	\$147,672	118%	92%
2.h	Med CM - Targeted to Pedl (a.1)	160,051	-160,051				0	0.00%	0	0	3/1/2020	\$0	#DIV/0!	92%
2.i	Med CM - Targeted to Veterans	80,025			-5,000		75,025	0.33%	80,025	-5,000	3/1/2020	\$55,696	70%	92%
2.j	Med CM - Targeted to Youth	45,888					45,888	0.20%	45,888	0	3/1/2020	\$37,908	83%	92%
3	Local Pharmacy Assistance Program	3,157,166	0	0	0	0	3,157,166	13.78%	3,157,166	0	3/1/2020	\$1,278,027	40%	92%
3.a	Local Pharmacy Assistance Program-Public Clinic (a) (e)	610,360					610,360	2.66%	610,360	0	3/1/2020	\$164,552	27%	92%
3.b	Local Pharmacy Assistance Program-Untargeted (a) (e)	2,546,806					2,546,806	11.12%	2,546,806	0	3/1/2020	\$1,113,474	44%	92%
4	Oral Health	166,404	0	0	-20,000	0	146,404	0.64%	146,404	0	3/1/2020	\$111,750	76%	92%
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			-20,000		146,404	0.64%	146,404	0	3/1/2020	\$111,750	76%	92%
5	Health Insurance (c)	1,339,239	43,898	0	0	0	1,383,137	6.04%	1,383,137	0	3/1/2020	\$897,673	65%	92%
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%	92%
10	Medical Nutritional Therapy (supplements)	341,395	0	40,000	0	0	381,395	1.67%	381,395	0	3/1/2020	\$348,227	91%	92%
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	\$289,007	69%	92%
13	Emergency Financial Assistance	525,000	0	0	0	0	525,000	2.29%	525,000	0	3/1/2020	\$597,273	114%	92%
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	-45,000	0	1,453,002	6.34%	1,453,002	0		1,168,452	80%	92%
15.a	Service Linkage targeted to Youth	110,793					110,793	0.48%	110,793	0	3/1/2020	\$71,824	65%	92%
15.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000			-45,000		55,000	0.24%	55,000	0	3/1/2020	\$30,734	56%	92%
15.c	Service Linkage at Public Clinic (a)	427,000					427,000	1.86%	427,000	0	3/1/2020	\$378,271	89%	92%
15.d	Service Linkage embedded in CBO Pcare (a) (e)	743,209		117,000			860,209	3.76%	860,209	0	3/1/2020	\$687,624	80%	92%
16	Medical Transportation	424,911	0	0	0	0	424,911	1.86%	424,911	0		389,848	92%	92%
16.a	Medical Transportation services targeted to Urban	252,680					252,680	1.10%	252,680	0	3/1/2020	\$222,014	88%	92%
16.b	Medical Transportation services targeted to Rural	97,185					97,185	0.42%	97,185	0	3/1/2020	\$92,788	95%	92%
16.c	Transportation vouchers (bus passes & gas cards)	75,046					75,046	0.33%	75,046	0	3/1/2020	\$75,046	100%	0%
17	Linguistic Services (c)	0					0	0.00%	0	0	NA	\$0	0%	0%
18	Total Service Dollars	19,856,215	84,963	595,485	317,595	0	20,854,258	89.22%	20,710,598	143,660		12,745,746	62%	92%
	Grant Administration	1,795,958	0	0	0	0	1,795,958	7.84%	1,795,958	0	N/A	1,457,975	81%	92%

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
BEU47517 PC BEU27521	HCPH/RWGA Section	1,271,050		0		0	1,271,050	5.55%	1,271,050	0	N/A	\$1,048,070	82%	92%
	RWPC Support*	524,908			0	0	524,908	2.29%	524,908	0	N/A	409,904	78%	92%
	Quality Management	412,940		0	0	0	412,940	1.80%	412,940	0	N/A	\$264,399	64%	92%
		22,065,113	84,963	595,485	317,595	0	23,063,156	98.86%	22,919,496	143,660		14,468,120	63%	92%
								Unallocated	Unobligated					
	Part A Grant Award:	22,309,011	Carry Over:	595,485		Total Part A:	22,904,496	-158,660	143,660					

	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	362,595	0	18,031,345	86.46%	9,401,642	79.36%
Non-Core (may not exceed 25% of total service dollars)	2,750,913	0	117,000	-45,000	0	2,822,913	13.54%	2,444,581	20.64%
Total Service Dollars (does not include Admin and QM)	19,856,215	84,963	595,485	317,595	0	20,854,258		11,846,223	
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		1,151,700	55%	92%
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	\$663,300	62%	92%
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	\$488,400	47%	92%
2	Medical Case Management	320,100	0	0	0	0	320,100	13.18%	320,100	0		\$159,938	50%	92%
2.c (MAI)	MCM - Targeted to African American	160,050					160,050	6.59%	160,050	0	3/1/2020	\$77,205	48%	92%
2.d (MAI)	MCM - Targeted to Hispanic	160,050					160,050	6.59%	160,050	0	3/1/2020	\$82,732	52%	92%
	Total MAI Service Funds	2,207,383	115,502	106,554	0	0	2,429,439	100.00%	2,429,439	0		1,311,638	54%	92%
	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		1,311,638	54%	92%
	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.
FY 2021 DSHS State Services
Procurement Report
September 1, 2020 - August 31, 2021



Chart reflects spending through January 2021

Spending Target: 41%

Revised 3/29/2021

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 (2)	\$300,000	15%	\$0	\$300,000	\$0	\$300,000	9/1/2020	\$50,958	17%
7	EIS - Incarcerated	\$175,000	9%	\$0	\$175,000	\$0	\$175,000	9/1/2020	\$69,547	40%
11	Hospice	\$259,832	13%	\$0	\$259,832	\$0	\$259,832	9/1/2020	\$91,080	35%
	Non Medical Case Management	\$350,000	17%	\$0	\$350,000	\$0	\$350,000	9/1/2020	\$107,043	31%
15	Linguistic Services (3)	\$68,000	3%	\$0	\$68,000	\$0	\$68,000	9/1/2020	\$18,413	27%
	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		337,041	17%

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) Mental Health - One month behind in reporting and service is under utilized.
- (3) Linguistic- Service utilization has decreased due to the interruption of COVID-19.

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 January 2021

Spending Target: 83%

Revised 3/29/21

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	\$858,000	49%
	Oral Health Care -Prosthodontics	\$460,000	14%	\$0	\$460,000	\$0	\$460,000	4/1/2020	\$362,400	79%
5	Health Insurance Premiums and Cost Sharing	\$1,028,433	31%	\$0	\$1,028,433	\$0	\$1,028,433	4/1/2020	\$767,238	75%
8	Home and Community Based Health Services (2)	\$113,315	3%	\$0	\$113,315	\$0	\$113,315	4/1/2020	\$50,240	44%
	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		2,037,878	70%

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

- (1) OHC- Service utilization has decreased due to the interruption of COVID-19. Expected increase in billing for final two months.
- (2) HCB- Service utilization has decreased due to the interruption of COVID-19.

*Note TRG may reallocated funds to avoid lapse in funds

Houston Ryan White Health Insurance Assistance Service Utilization Report



Period Reported:

09/01/2020-2/28/21

Revised: 3/30/2021

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	728	\$77,002.41	352			0
Medical Deductible	0	\$0.00	0			0
Medical Premium	3381	\$1,151,966.63	750			0
Pharmacy Co-Payment	7829	\$248,886.98	1024			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	\$9,129.00	0	NA	NA	NA
Totals:	11949	\$1,469,227.02	2127	0	\$0.00	

Comments: This report represents services provided under all grants.

REVISÉ: 4/14/2021

Page 1

Request for Service Category Increase
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)						
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	Health Insurance Premium & Cost Sharing Assistance			Control No.		
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
	Request Period (check one):	April: X	August:	Oct:	Final Qtr:		
E.	Amount of additional funding Requested:	\$90,051.00					
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)		
	1.				\$0.00		
	2.				\$0.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column a. and requested amount in column c.)	\$304,294.00	N/A	\$90,051.00	\$90,051.00		
	9. Total additional funding (must match E. above):	\$90,051.00					
G.	Number of new/additional clients to be served with requested increase.						
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	1. Number of clients that received this service under Part A (or MAI) in FY 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"	1976	44%	25%	31%	81%	19%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2021. a. April Request Period = Not Applicable b. August Request Period = 03/01/21 - 06/30/21 c. October Request Period = 03/01/21 - 09/30/21 d. 4th Qtr. Request Period = 03/01/21 - 11/30/21						

**Request for Service Category Increase
Ryan White Part A and MAI**

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):	
	1. Length of waiting time (in weeks) for an appointment for a new client:	4	3	The agency has a large number of Ryan White patients seeking services referenced in this Request for Service Category Increase Form. The agency is requesting funding in order to sufficiently meet the continued demands for new Ryan White patients.	
	2. Length of waiting time (in weeks) for an appointment for a current client:	3	2	The agency has a large number of Ryan White patients seeking services referenced in this Request for Service Category Increase Form. The agency is requesting funding in order to sufficiently meet the continued demands for existing Ryan White patients.	
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.	
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	The agency offers a limited number of same day appointment slots for patients.	
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	1. DSHS State Services		8/31/21	\$864,506	
	2. Ryan White Part B		3/31/22	\$1,028,433	
	3. Ryan White Part B - Rebate		3/31/22	\$136,918	
	4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):				
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).				
	This form must be submitted electronically via email by published deadline to Carin Martin: carin.martin@phs.hctx.net				

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: All [Service]: ALL [Service Performer]: 0

Services performed between 3/1/20 and 2/28/21

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]: [Sub Cats 1]: All [Contract 2]: [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

RACE	AGE ²	BIRTH GENDER							
		MALE			FEMALE			BOTH GENDERS	
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0
	13-19	2	0	2	0	0	0	2	0
	20-24	21	1	20	1	0	1	22	1
	25-34	142	4	138	26	1	25	168	5
	35-44	131	7	124	65	2	63	196	9
	45-54	131	5	126	107	0	107	238	5
	55-64	140	2	138	73	1	72	213	3
	65+	37	1	36	25	0	25	62	1
	SubTotals:	604	20	584	297	4	293	901	24
ASIAN	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0
	25-34	8	0	8	0	0	0	8	0
	35-44	9	1	8	2	0	2	11	1
	45-54	9	0	9	2	0	2	11	0
	55-64	7	0	7	0	0	0	7	0
	65+	3	0	3	0	0	0	3	0
	SubTotals:	37	1	36	4	0	4	41	1
MULTI-RACE	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	2	0	2	0	0	0	2	0
	25-34	5	2	3	0	0	0	5	2
	35-44	1	0	1	0	0	0	1	0
	45-54	2	0	2	1	0	1	3	0
	55-64	3	0	3	0	0	0	3	0
	65+	2	0	2	0	0	0	2	0
	SubTotals:	15	2	13	1	0	1	16	2
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0
	35-44	0	0	0	2	1	1	2	1
	45-54	1	0	1	1	1	0	2	1
	55-64	1	0	1	0	0	0	1	0
	65+	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	3	2	1	5	2
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0

RACE	AGE ²	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	1	0	1	0	0	0	1	0	1
	45-54	1	0	1	0	0	0	1	0	1
	55-64	1	1	0	0	0	0	1	1	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	3	1	2	0	0	0	3	1	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	1	1	1	1	0	3	2	1
	20-24	10	9	1	0	0	0	10	9	1
	25-34	145	97	48	7	6	1	152	103	49
	35-44	151	93	58	15	10	5	166	103	63
	45-54	253	145	108	17	11	6	270	156	114
	55-64	272	104	168	24	8	16	296	112	184
	65+	99	31	68	14	8	6	113	39	74
	SubTotals:	932	480	452	78	44	34	1,010	524	486
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	4	1	3	1	1	0	5	2	3
	20-24	34	10	24	1	0	1	35	10	25
	25-34	300	103	197	33	7	26	333	110	223
	35-44	293	101	192	84	13	71	377	114	263
	45-54	397	150	247	128	12	116	525	162	363
	55-64	424	107	317	97	9	88	521	116	405
	65+	141	32	109	39	8	31	180	40	140
	SubTotals:	1,593	504	1,089	383	50	333	1,976	554	1,422

Clients Served This Period

Unduplicated clients:	1976
Client visits: ³	9562
Spanish speaking (primary language at home) clients served:	189
Deaf/hard of hearing clients served:	6
Blind/sight impaired clients served:	3
Homeless clients served:	134
Transgender M to F clients served:	27
Transgender F to M clients served:	1
Clients served this period who live w/in Harris County:	1781
Clients served this period who live outside Harris County:	195
Active substance abuse clients served:	1
Active psychiatric illness clients served:	10

Methods of Exposure (not mutually exclusive)

Perinatal Transmission	12
Hemophilia Coagulation	3
Transfusion	11
Heterosexual Contact	434
MSM (not IDU)	896
IV Drug Use (not MSM)	27
MSM/IDU	4
Multiple Exposure Categories	45
Other risk	544
<u>Multi-Race Breakdown</u>	
ASN,HWN	1
ASN,WHT	1
BLK,NTV	3
BLK,NTV,WHT	1
BLK,WHT	9
NTV,WHT	1

Request for Service Category Increase
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)						
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	Adult Community-Based Comprehensive Primary Medical Care Targeted to AA, HISP, and White/MSM - MEDICAL CASE MANAGEMENT				Control No.	2
D.	Request for Increase under (check one):	Part A:	or	MAI:			
	Request Period (check one):	April:	August:	Oct:	Final Qtr:		
E.	Amount of additional funding Requested:						
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)		
	1. Medical Case Management	457.33	\$25.00	400	\$10,000.00		
	2. Emergency Financial Assistance	198	\$30.00	20	\$600.00		
	3. Primary Care MD/PE	155	\$275.00	100	\$27,500.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column a. and requested amount in column c.) EFA	\$17,810.00	N/A	\$30,000.00	\$30,000.00		
	9. Total additional funding (must match E. above):				\$68,100.00		
G.	Number of new/additional clients to be served with requested increase.						
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	1. Number of clients that received this service under Part A (or MAI) in FY 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"	708 650	56% 54%	13% 12%	29% 29%	68% 68%	32% 32%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2021. a. April Request Period = Not Applicable b. August Request Period = 03/01/21 - 06/30/21 c. October Request Period = 03/01/21 - 09/30/21 d. 4th Qtr. Request Period = 03/01/21 - 11/30/21	NA					

Request for Service Category Increase
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):	
	1. Length of waiting time (in weeks) for an appointment for a new client:	1	1		
	2. Length of waiting time (in weeks) for an appointment for a current client:	1	1		
	3. Number of clients on a "waiting list" for services (per Part A SOC):	35	3	Requested funding is essential to provide the much-needed services to PLWHA.	
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	10	3	Requested funding is essential to provide the much-needed services to PLWHA. The number of clients that need services will continue to grow throughout the remaining period	
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	1. None				
	2.				
	3.				
	4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):				
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).				
	This form must be submitted electronically via email by published deadline to Carin Martin: carin.martin@phs.hctx.net				

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency: RW1 [Service]: ALL [Service Performer]: 0

Services performed between 3/1/20 and 2/28/21

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE

[Contract 1]:

All [Contract 2]:

Cats 2): All

[Contract 3]: 20GEN0375NP [Sub Cats 3]: All

[Contract 4]:

4): All [Contract 5]:

Cats 5): All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

RACE	AGE ²	BIRTH GENDER							
		MALE			FEMALE			BOTH GENDERS	
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0
	13-19	3	0	3	2	1	1	5	4
	20-24	20	0	20	5	0	5	25	25
	25-34	129	3	126	45	0	45	174	171
	35-44	46	1	45	65	0	65	111	110
	45-54	19	0	19	23	0	23	42	42
	55-64	3	0	3	8	0	8	11	11
	65+	0	0	0	2	0	2	2	2
	SubTotals:	220	4	216	150	1	149	370	365
ASIAN	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	1
	25-34	2	0	2	0	0	0	2	2
	35-44	3	0	3	0	0	0	3	3
	45-54	0	0	0	0	0	0	0	0
	55-64	1	0	1	0	0	0	1	1
	65+	0	0	0	0	0	0	0	0
	SubTotals:	7	0	7	0	0	0	7	7
MULTI-RACE	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	1
	25-34	4	1	3	0	0	0	4	3
	35-44	3	1	2	1	0	1	4	3
	45-54	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0
	SubTotals:	8	2	6	1	0	1	9	7
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0
	25-34	1	0	1	0	0	0	1	1
	35-44	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0
	SubTotals:	1	0	1	0	0	0	1	1
WHITE	0-12	0	0	0	0	0	0	0	0
	13-19	4	4	0	1	1	0	5	0

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		BIRTH GENDER								
RACE	AGE ²	MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
WHITE	20-24	22	18	4	5	4	1	27	22	5
	25-34	70	53	17	17	12	5	87	65	22
	35-44	52	38	14	19	13	6	71	51	20
	45-54	32	21	11	8	4	4	40	25	15
	55-64	25	9	16	7	5	2	32	14	18
	65+	1	1	0	0	0	0	1	1	0
	SubTotals:	206	144	62	57	39	18	263	183	80
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	7	4	3	3	2	1	10	6	4
	20-24	44	18	26	10	4	6	54	22	32
	25-34	206	57	149	62	12	50	268	69	199
	35-44	104	40	64	85	13	72	189	53	136
	45-54	51	21	30	31	4	27	82	25	57
	55-64	29	9	20	15	5	10	44	14	30
	65+	1	1	0	2	0	2	3	1	2
	SubTotals:	442	150	292	208	40	168	650	190	460

Clients Served This Period

Unduplicated clients:	650
Client visits: ³	2408
Spanish speaking (primary language at home) clients served:	86
Deaf/hard of hearing clients served:	3
Blind/sight impaired clients served:	1
Homeless clients served:	57
Transgender M to F clients served:	15
Transgender F to M clients served:	2
Clients served this period who live w/in Harris County:	614
Clients served this period who live outside Harris County:	36
Active substance abuse clients served:	15
Active psychiatric illness clients served:	20

Methods of Exposure (not mutually exclusive)

Perinatal/Transmission	11
Hemophilia Coagulation	0
Transfusion	5
Heterosexual Contact	239
MSM (not IDU)	341
IV Drug Use (not MSM)	7
MSM/IDU	1
Multiple Exposure Categories	8
Other risk	52
Multi-Race Breakdown	
BLK,NTV	3
BLK,NTV,WHT	1
BLK,WHT	5

FOOTNOTES¹ Visit = time spent per client per agency per service per day² Age as of client max service date³ If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2020; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/19.

Request for Service Category Increase
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)						
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)		Outpatient/Ambulatory Primary Care			Control No. 3	
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
	Request Period (check one):	April: X	August:	Oct:	Final Qtr:		
E.	Amount of additional funding Requested:	\$95,700.00					
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in <u>current</u> contract:	b. Cost/unit	c. Number of <u>additional</u> units requested:	d. Total: (b x c)		
	1. INFEC/PHEXT				\$0.00		
	2.	472	\$275.00	348	\$95,700.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column a. and requested amount in column c.)		N/A		\$0.00		
	9. Total additional funding (must match E. above):	\$95,700.00					
G.	Number of new/additional clients to be served with requested increase.						
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)	c. Percent White (non-Hispanic)	d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	1. Number of clients that received this service under Part A (or MAI) in FY 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"	937 870	47% 46%	44% 42%	41%	75% 74%	25% 22%

Request for Service Category Increase
Ryan White Part A and MAI

	<p>2. Number of clients that have received this service <u>under Part A</u> (or MAI) in FY 2021.</p> <p>a. April Request Period = Not Applicable</p> <p>b. August Request Period = 03/01/21 - 06/30/21</p> <p>c. October Request Period = 03/01/21 - 09/30/21</p> <p>d. 4th Qtr. Request Period = 03/01/21 - 11/30/21</p>						
--	---	--	--	--	--	--	--

Request for Service Category Increase
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do not include agency name or identifying information):	
	1. Length of waiting time (in weeks) for an appointment for a new client:	9.8		This data is as of November 2020	
	2. Length of waiting time (in weeks) for an appointment for a current client:	9		This data is as of November 2020	
	3. Number of clients on a "waiting list" for services (per Part A SOC):				
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):				
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	1.				
	2.				
	3.				
	4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):				
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).				
	This form must be submitted electronically via email by published deadline to Carin Martin: carin.martin@phs.hctx.net				

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Age] [Grant]: RW1 [Service]: ALL [Service Performer]: 0
 Services performed between 3/1/20 and 2/28/21
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
 [Contract] Sub Cats 1: All [Contract] Sub Cats 2: All
 [Contract] Sub Cats 3: All
 [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No

RACE	AGE ²	BIRTH GENDER							
		MALE			FEMALE			BOTH GENDERS	
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	7	0	7	1	0	1	8	0
	25-34	107	5	102	29	0	29	136	5
	35-44	70	3	67	43	2	41	113	5
	45-54	59	3	56	39	2	37	98	5
	55-64	33	1	32	21	4	17	54	5
	65+	5	0	5	6	1	5	11	1
	SubTotals:	281	12	269	139	9	130	420	21
ASIAN	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0
	25-34	2	0	2	0	0	0	2	0
	35-44	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0
	55-64	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0
	SubTotals:	3	0	3	0	0	0	3	0
MULTI-RACE	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0
	25-34	2	0	2	0	0	0	2	0
	35-44	1	1	0	0	0	0	1	1
	45-54	0	0	0	1	0	1	1	0
	55-64	0	0	0	1	1	0	1	1
	65+	0	0	0	0	0	0	0	0
	SubTotals:	3	1	2	2	1	1	5	2
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0
	45-54	0	0	0	1	1	0	1	1
	55-64	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0
	SubTotals:	0	0	0	1	1	0	1	1
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0

RACE	AGE ²	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	1	0	1	0	0	0	1	0	1
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	1	0	1	0	0	0	1	0	1
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	1	0	0	0	0	1	1	0
	20-24	5	3	2	2	2	0	7	5	2
	25-34	77	62	15	9	7	2	86	69	17
	35-44	101	86	15	25	20	5	126	106	20
	45-54	106	78	28	28	23	5	134	101	33
	55-64	53	35	18	15	11	4	68	46	22
	65+	16	4	12	2	2	0	18	6	12
	SubTotals:	359	269	90	81	65	16	440	334	106
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	1	0	0	0	0	1	1	0
	20-24	12	3	9	3	2	1	15	5	10
	25-34	188	67	121	38	7	31	226	74	152
	35-44	173	90	83	68	22	46	241	112	129
	45-54	166	81	85	69	26	43	235	107	128
	55-64	86	36	50	37	16	21	123	52	71
	65+	21	4	17	8	3	5	29	7	22
	SubTotals:	647	282	365	223	76	147	870	358	512

Clients Served This Period

Unduplicated clients:	870
Client visits: ³	3986
Spanish speaking (primary language at home) clients served:	231
Deaf/hard of hearing clients served:	0
Blind/sight impaired clients served:	1
Homeless clients served:	197
Transgender M to F clients served:	48
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	831
Clients served this period who live outside Harris County:	39
Active substance abuse clients served:	2
Active psychiatric illness clients served:	3

Methods of Exposure (not mutually exclusive)

Perinatal Transmission	16
Hemophilia Coagulation	1
Transfusion	6
Heterosexual Contact	293
MSM (not IDU)	395
IV Drug Use (not MSM)	13
MSM/IDU	2
Multiple Exposure Categories	26
Other risk	164
<u>Multi-Race Breakdown</u>	
BLK,HWN	1
BLK,NTV	1
BLK,WHT	3

FOOTNOTES¹ Visit = time spent per client per agency per service per day² Age as of client max service date³ If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2020; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/19.

HOUSTON AREA HIV MEDICATION ASSISTANCE PROGRAMS

Every resource has their own eligibility and usage requirements.

Every Ryan White funded clinic has ADAP Enrollment Workers (AEW's) and Case Managers that can help with accessing all medication options.

1 HARBORPATH / COMPASSIONATE CARE PROGRAM

- A non-profit that provides medications assistance.
- <https://www.harborpath.org/>

2 GILEAD PATIENT ASSISTANCE PROGRAM

- A Gilead program that helps individuals with their medications, regardless of insurance status.
- <https://www.gileadadvancingaccess.com/>

3 LOCAL PHARMACY ASSISTANCE PROGRAM (LPAP)

- An LPAP is a program to ensure that clients obtain medications when other means to get medications are unavailable or insufficient.
- Contact your local Ryan White provider.

4 EMERGENCY FINANCIAL ASSISTANCE FOR MEDICATION

- Provides short-term medication assistance to individuals with an urgent need.
- Generally used while waiting on ADAP approval or denial.
- Contact your local Ryan White provider.

5 AIDS DRUG ASSISTANCE PROGRAM (ADAP)

- Texas HIV Medication Program that provides HIV medication long term for individuals with limited or no health insurance.
- Contact your local Ryan White provider.

6 HEALTH INSURANCE ASSISTANCE

- A Ryan White funded service that helps people living with HIV pay for costs associated with public and private health insurance.
- Contact: (832) 548-5111



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