

Houston Area HIV Services Ryan White Planning Council
Office of Support
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www.rwpchouston.org

Memorandum

To: Members, Priority and Allocations Committee:
Bobby Cruz, Co-Chair Roxane May
Peta-Gay Ledbetter, Co-Chair Josh Mica
Skeet Boyle Robert Sliepka
Mauricia Chatman Bruce Turner
Kimberley Collins

Copy: Carin Martin Ann Robison
Heather Keizman Johnetta Evans-Thomas
Yvette Garvin Katy Caldwell
Ricardo Mora Nancy Miertschin
Diane Beck Charlene Flash, MD
Allen Murray Rodney Goodie

From: Tori Williams

Date: Monday, June 7, 2021

Re: Meeting Announcement

This memo is a reminder that there will be a number of Priority and Allocations Committee meetings from June 16th until June 29th 2021. Enclosed you will find agendas and other materials which you will need to have at the meetings. All of the June meetings will be via Zoom. Do not hesitate to call our office if you have questions. Otherwise, we look forward to seeing you at the following meetings:

Special Priority & Allocations Committee Meetings (see enclosed agendas)

To develop the FY 2022 allocations for Part A, B & State Services

- 1 – 5 pm, Wednesday, June 16, 2021
- 1 – 5 pm, Thursday, June 17, 2021

Regularly Scheduled Committee Meeting

The whole Committee will vote on the FY 2022 allocations developed at the special meetings.

- 12 noon, Thursday, June 24, 2021

Final Special Meeting (see enclosed agenda)

To review public comment and possibly amend the recommended FY 2022 priorities and allocations before they receive final approval at the July Steering Committee and Council meetings.

- 2 pm, Tuesday, June 29, 2021 – look for an email from Rod as this meeting is often cancelled if we receive no public comment.

Please let Rod know if you will or will not be in attendance. We appreciate your valuable time and look forward to seeing you several times in June!

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

1 – 5 pm, Wednesday, June 16, 2021

Click on this link to join Zoom Meeting:

Join Zoom Meeting

<https://us02web.zoom.us/j/89695120417?pwd=NFU2ZHh2eVpXVW96SEZjbmtrSitSQTO9>

Meeting ID: 896 9512 0417

Passcode: 750542

Or call: 346 248 7799

AGENDA

- | | | |
|------|--|---|
| I. | Call to Order | |
| | A. Moment of Reflection | Bobby Cruz and
Peta-Gay Ledbetter, Co-Chairs |
| | B. Approval of Agenda | |
| | C. Review Meeting Goals | Tori Williams, Director, OoS |
| II. | Public Comment - (NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up in the Chat Box. Or, send a text to: 832 594-1929. 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 your self, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting. The Chair of the Council has the authority to limit public comment to 1 minute per person. All information from the public must be provided in this portion of the meeting. Council members please remember that this is a time to hear from the community. It is not a time for dialogue. Committee members and staff are asked to refrain from asking questions of the person giving public comment.) | |
| III. | Review Other Ryan White Planning Committee Recommendations | Tori Williams |
| | A. Changes Recommended for the FY 2022 Service Definitions | |
| IV. | Updates from the Administrative Agents | |
| | A. Ryan White Part A/MAI | Carin Martin, RWGA |
| | B. Ryan White Part B and State Services Funding | Yvette Garvin, TRG |
| V. | ADAP Updates and Possible Responses | Charles Henley, Consultant |
| VI. | Draft Allocations for FY 2022 Part A/MAI, Part B & State Services Funding | |
| | A. Any Staff Recommendations? | Carin or Yvette |
| | B. Optional: Determine the philosophy for allocating FY 2022 funds | |
| | C. Create the FY 2022 Level Funding Scenario | |
| | 1) Part A and MAI | |
| | 2) Part B, State Services and State Services-R | |
| | D. Create the FY 2022 Increase Funding Scenario | |
| | E. Create the FY 2022 Decrease Funding Scenario | |
| VII. | Announcements | |
| | A. IMPORTANT: June Priority and Allocation Committee Meeting Dates and Times: | |
| | • Tentative: 1 – 5 pm, Thursday, June 17, 2021 – Finish drafting FY 2022 allocations | |
| | • 12 noon, Thursday, June 24, 2021 - Committee votes on FY 2022 Allocations | |
| | • Tentative: 2 pm, Tuesday, June 29, 2021 – Review public comment | |

VIII. Adjourn

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

1 – 5 pm, Thursday, June 17, 2021

Join Zoom Meeting

<https://us02web.zoom.us/j/86749430321?pwd=TUN4cFZ3SWJkNUFpYldadHBRYndXdz09>

Meeting ID: 867 4943 0321

Passcode: 595134

Or call: 346 248 7799

AGENDA

- I. Call to Order Bobby Cruz and
Peta-Gay Ledbetter, Co-Chairs
- A. Moment of Reflection
- B. Approval of Agenda
- C. Review Meeting Goals Tori Williams, Director, OoS
- II. Public Comment - (NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up in the Chat Box. Or, send a text to: 832 594-1929. No one is required to give his or her name or HIV status. **When signing in, guests are not required to provide their correct or complete names.** All meetings are audio taped by the Office of Support for use in creating the meeting minutes. The audiotape and the minutes are public record. If you state your name or HIV status it will be on public record. If you would like your health status known, but do not wish to state your name, you can simply say: “I am a person living with HIV”, before stating your opinion. If you represent an organization, please state that you are representing an agency and give the name of the organization. If you work for an organization, but are representing your self, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting. The Chair of the Council has the authority to limit public comment to 1 minute per person. All information from the public must be provided in this portion of the meeting. Council members please remember that this is a time to hear from the community. It is not a time for dialogue. Committee members and staff are asked to refrain from asking questions of the person giving public comment.)
- III. Continue Drafting Allocations for FY 2022 Part A/MAI, Part B & State Services Funding Carin or Yvette
- A. Any Staff Recommendations?
- B. Finish the FY 2022 Level Funding Scenario
- 1) Part A and MAI
- 2) Part B, State Services and State Services-R
- C. Finish the FY 2022 Increase Funding Scenario
- D. Finish the FY 2022 Decrease Funding Scenario
- IV. Announcements
- A. IMPORTANT: June Priority and Allocation Committee Meeting Dates and Times:
- 12 noon, Thursday, June 24, 2021 - Committee votes on FY 2022 Allocations
 - Tentative: 2 pm, Tuesday, June 29, 2021 – Review public comment
- V. Adjourn

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

2 pm, Tuesday, June 29, 2021

Join Zoom Meeting
<https://us02web.zoom.us/j/84795269591?pwd=ZFhRNTU0Y0hZMjVjZWZFsSjIvUmEwQT09>
Meeting ID: 847 9526 9591
Passcode: 787615
Or call: 346 248 7799

AGENDA

- | | | |
|------|---|-------------------------------|
| I. | Call to Order | |
| | A. Moment of Reflection | Bobby Cruz and |
| | B. Approval of Agenda | Peta-Gay Ledbetter, Co-Chairs |
| | C. Review Meeting Goals | Tori Williams, Director, OoS |
| II. | <p>Public Comment - (NOTE: If you wish to speak during the Public Comment portion of the meeting, please sign up in the Chat Box. Or, send a text to: 832 594-1929. 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 your self, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting. The Chair of the Council has the authority to limit public comment to 1 minute per person. All information from the public must be provided in this portion of the meeting. Council members please remember that this is a time to hear from the community. It is not a time for dialogue. Committee members and staff are asked to refrain from asking questions of the person giving public comment.)</p> | |
| III. | Updates from the Administrative Agents | |
| | A. Ryan White Part A/MAI | Carin Martin, RWGA |
| | B. Ryan White Part B and State Services Funding | Yvette Garvin, TRG |
| IV. | Updates from ADAP and Possible Responses | Charles Henley, Consultant |
| V. | Allocations for FY 2022 Part A/MAI, Part B & State Services Funding | |
| | A. Review the FY 2022 Level Funding Scenario | |
| | B. Review the FY 2022 Increase Funding Scenario | |
| | C. Review the FY 2022 Decrease Funding Scenario | |
| VI. | Announcements | |
| VII. | Adjourn | |

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Priority and Allocations
FY 2022 Guiding Principles and Decision Making Criteria
(Council approved 04-08-21)

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)

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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.**

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

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

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

Remaining Funds to Allocate (exact same as the yellow row on top)	\$0	\$0	\$0	\$0	\$0	\$0
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Tips:

- * Do not make changes to any cells that are underlined. These cells represent running totals. If you make a change to these cells, then the formulas throughout the sheet will become "broken" and the totals will be incorrect.
- * It is useful to keep a running track of the changes made to any service allocation. For example, if you want to change an allocation from \$42,000 to \$40,000, don't just delete the cell contents and type in a new number. Instead, type in "=-42000-2000". This shows that you

Core medical \$16,442,761 82%

[For Staff Only]

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	238,935	0	10,723,155	46.82%	10,723,155	0		7,465,199	70%	100%
1.a	Primary Care - Public Clinic (a)	3,591,064					3,591,064	15.68%	3,591,064	0	3/1/2020	\$1,175,419	33%	100%
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	\$1,829,713	150%	100%
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	\$1,339,275	126%	100%
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	\$562,075	43%	100%
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	\$1,040,831	95%	100%
1.f	Primary Care - Women at Public Clinic (a)	1,874,540					1,874,540	8.18%	1,874,540	0	3/1/2020	\$1,007,831	54%	100%
1.g	Primary Care - Pediatric (a.1)	15,437	1,116				16,553	0.07%	16,553	0	3/1/2020	\$7,500	45%	100%
1.h	Vision	452,000		25,000	36,000		513,000	2.24%	513,000	0	3/1/2020	\$502,555	98%	100%
1.x	Primary Care Health Outcome Pilot	0	200,000		-148,660		51,340	0.22%	51,340	0	7/14/2020	\$0	0%	100%
2	Medical Case Management	2,185,802	-160,051	25,000	-5,000	0	2,045,751	8.93%	2,045,751	0		1,646,935	81%	100%
2.a	Clinical Case Management	488,656		25,000			513,656	2.24%	513,656	0	3/1/2020	\$427,857	83%	100%
2.b	Med CM - Public Clinic (a)	427,722					427,722	1.87%	427,722	0	3/1/2020	\$216,746	51%	100%
2.c	Med CM - Targeted to AA (a) (e)	266,070					266,070	1.16%	266,070	0	3/1/2020	\$311,358	117%	100%
2.d	Med CM - Targeted to H/L (a) (e)	266,072					266,072	1.16%	266,072	0	3/1/2020	\$159,440	60%	100%
2.e	Med CM - Targeted to W/MSM (a) (e)	52,247					52,247	0.23%	52,247	0	3/1/2020	\$100,516	192%	100%
2.f	Med CM - Targeted to Rural (a)	273,760					273,760	1.20%	273,760	0	3/1/2020	\$168,444	62%	100%
2.g	Med CM - Women at Public Clinic (a)	125,311					125,311	0.55%	125,311	0	3/1/2020	\$157,738	126%	100%
2.h	Med CM - Targeted to Pedi (a.1)	160,051	-160,051				0	0.00%	0	0	3/1/2020	\$0	#DIV/0!	100%
2.i	Med CM - Targeted to Veterans	80,025			-5,000		75,025	0.33%	75,025	0	3/1/2020	\$63,551	85%	100%
2.j	Med CM - Targeted to Youth	45,888					45,888	0.20%	45,888	0	3/1/2020	\$41,285	90%	100%
3	Local Pharmacy Assistance Program	3,157,166	0	0	0	0	3,157,166	13.78%	3,157,166	0		\$1,725,024	55%	100%
3.a	Local Pharmacy Assistance Program-Public Clinic (a) (e)	610,360					610,360	2.66%	610,360	0	3/1/2020	\$223,559	37%	100%
3.b	Local Pharmacy Assistance Program-Untargeted (a) (e)	2,546,806					2,546,806	11.12%	2,546,806	0	3/1/2020	\$1,501,465	59%	100%
4	Oral Health	166,404	0	0	-20,000	0	146,404	0.64%	146,404	0		146,350	100%	100%
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	\$146,350	100%	100%
5	Health Insurance (c)	1,339,239	43,898	0	0	0	1,383,137	6.04%	1,383,137	0		\$1,382,419	100%	100%
6	Mental Health Services (c)	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
7	Early Intervention Services (c)	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
8	Home and Community-Based Services (c)	0	0	0	0	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		\$1,850	0%	100%
10	Medical Nutritional Therapy (supplements)	341,395	0	40,000	0	0	381,395	1.67%	381,395	0		\$378,983	99%	100%
11	Hospice Services	0	0	0	0	0	0	0.00%	0	0	NA	\$0	0%	0%
12	Outreach Services	420,000	0	0	0	0	420,000	1.83%	420,000	0		\$312,555	74%	100%
13	Emergency Financial Assistance	525,000	0	0	0	0	525,000	2.29%	525,000	0		\$1,213,789	231%	100%
14	Referral for Health Care and Support Services (c)	0	0	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		1,317,009	91%	100%
15.a	Service Linkage targeted to Youth	110,793					110,793	0.48%	110,793	0	3/1/2020	\$79,929	72%	100%
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	\$36,902	67%	100%
15.c	Service Linkage at Public Clinic (a)	427,000					427,000	1.86%	427,000	0	3/1/2020	\$415,430	97%	100%
15.d	Service Linkage embedded in CBO Pcare (a) (e)	743,209		117,000			860,209	3.76%	860,209	0	3/1/2020	\$784,749	91%	100%
16	Medical Transportation	424,911	0	0	0	0	424,911	1.86%	424,911	0		424,910	100%	100%
16.a	Medical Transportation services targeted to Urban	252,680					252,680	1.10%	252,680	0	3/1/2020	\$248,606	98%	100%
16.b	Medical Transportation services targeted to Rural	97,185					97,185	0.42%	97,185	0	3/1/2020	\$101,258	104%	100%
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	0	0	0	0.00%	0	0	NA	\$0	0%	0%
	Total Service Dollars	19,856,215	84,963	595,485	168,935	0	20,705,598	88.57%	20,705,598	0		16,015,024	77%	100%

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
8E027617 PC 8E027621	Grant Administration	1,795,958	0	0	0	0	1,795,958	7.84%	1,795,958	0	N/A	1,457,975	81%	100%
	HCPH/RWGA Section	1,271,050		0		0	1,271,050	5.55%	1,271,050	0	N/A	\$1,048,070	82%	100%
	RWPC Support*	524,908			0	0	524,908	2.29%	524,908	0	N/A	409,904	78%	100%
	Quality Management	412,940		0	0	0	412,940	1.80%	412,940	0	N/A	\$264,399	64%	100%
		22,065,113	84,963	595,485	168,935	0	22,914,496	98.21%	22,914,496	0		17,737,398	77%	100%
								Unallocated	Unobligated					
	Part A Grant Award:	22,309,011	Carry Over:	595,485		Total Part A:	22,904,496	-10,000	0					
		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	213,935	0	17,882,685	86.37%	11,362,492	77.66%				
	Non-Core (may not exceed 25% of total service dollars)	2,750,913	0	117,000	-45,000	0	2,822,913	13.63%	3,268,263	22.34%				
	Total Service Dollars (does not include Admin and QM)	19,856,215	84,963	595,485	168,935	0	20,705,598		14,630,755					
	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		1,314,775	62%	100%
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	\$760,375	71%	100%
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	\$554,400	53%	100%
2	Medical Case Management	320,100	0	0	0	0	320,100	13.18%	320,100	0		\$209,219	65%	100%
2.a (MAI)	MCM - Targeted to African American	160,050					160,050	6.59%	160,050	0	3/1/2020	\$114,990	72%	100%
2.d (MAI)	MCM - Targeted to Hispanic	160,050					160,050	6.59%	160,050	0	3/1/2020	\$94,229	59%	100%
	Total MAI Service Funds	2,207,383	115,502	106,554	0	0	2,429,439	100.00%	2,429,439	0		1,523,994	63%	100%
	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%
8E027616	Total MAI Funds	2,207,383	115,502	106,554	0	0	2,429,439	100.00%	2,429,439	0		1,523,994	63%	100%
	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

FY 2020 Ryan White Part A and MAI Service Utilization Report

RW PART A SUR- 4th Quarter (3/1-2/29)																		
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	45-49	50-64	65 plus
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6,467	8,677	74%	24%	2%	48%	13%	2%	37%	0%	0%	5%	28%	27%	12%	25%	2%
1.a	Primary Care - Public Clinic (a)	2,350	3,116	70%	30%	1%	48%	9%	2%	41%	0%	0%	3%	17%	26%	14%	36%	4%
1.b	Primary Care - CBO Targeted to AA (a)	1,060	2,250	68%	29%	3%	99%	0%	1%	0%	0%	0%	6%	37%	28%	10%	17%	1%
1.c	Primary Care - CBO Targeted to Hispanic (a)	960	1,704	82%	15%	3%	0%	0%	0%	100%	0%	1%	6%	32%	31%	11%	18%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	690	725	88%	11%	2%	0%	87%	12%	0%	0%	0%	3%	27%	25%	12%	31%	2%
1.e	Primary Care - CBO Targeted to Rural (a)	400	680	70%	29%	1%	45%	25%	2%	28%	0%	0%	5%	32%	27%	11%	23%	2%
1.f	Primary Care - Women at Public Clinic (a)	1,000	822	0%	100%	0%	57%	6%	1%	36%	0%	0%	1%	11%	28%	17%	37%	5%
1.g	Primary Care - Pediatric (a)	7	8	75%	25%	0%	38%	0%	0%	63%	13%	38%	50%	0%	0%	0%	0%	0%
1.h	Vision	1,600	2,986	73%	26%	2%	50%	13%	2%	35%	0%	0%	4%	25%	25%	13%	29%	3%
2	Medical Case Management (f)	3,075	5,852															
2.a	Clinical Case Management	600	1,046	77%	21%	2%	55%	13%	1%	31%	0%	0%	4%	24%	26%	11%	31%	4%
2.b	Med CM - Targeted to Public Clinic (a)	280	554	87%	12%	1%	55%	13%	1%	31%	0%	1%	2%	23%	25%	12%	33%	3%
2.c	Med CM - Targeted to AA (a)	550	1,776	68%	30%	2%	99%	0%	1%	0%	0%	1%	6%	35%	25%	11%	21%	2%
2.d	Med CM - Targeted to H/L(a)	550	850	81%	14%	5%	0%	0%	0%	100%	0%	1%	6%	32%	30%	11%	17%	3%
2.e	Med CM - Targeted to White and/or MSM (a)	260	574	87%	11%	2%	0%	89%	11%	0%	0%	0%	2%	24%	20%	13%	34%	5%
2.f	Med CM - Targeted to Rural (a)	150	615	68%	31%	1%	46%	29%	2%	23%	0%	0%	5%	24%	23%	11%	32%	4%
2.g	Med CM - Targeted to Women at Public Clinic (a)	240	239	0%	100%	0%	72%	7%	1%	20%	0%	0%	3%	19%	30%	8%	35%	5%
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	182	94%	6%	0%	69%	21%	1%	10%	0%	0%	1%	1%	4%	2%	61%	31%
2.j	Med CM - Targeted to Youth	120	16	75%	25%	0%	69%	6%	0%	25%	0%	19%	81%	0%	0%	0%	0%	0%
3	Local Drug Reimbursement Program (a)	2,845	5,467	75%	22%	3%	47%	14%	2%	37%	0%	0%	4%	30%	28%	12%	24%	1%
4	Oral Health	200	367	67%	32%	1%	42%	29%	1%	28%	0%	0%	4%	22%	26%	13%	30%	5%
4.a	Oral Health - Untargeted (d)	NA	NA															
4.b	Oral Health - Rural Target	200	367	67%	32%	1%	42%	29%	1%	28%	0%	0%	4%	22%	26%	13%	30%	5%
5	Mental Health Services (d)	NA	NA															
6	Health Insurance	1,700	1,976	79%	19%	2%	44%	25%	3%	28%	0%	0%	2%	17%	19%	11%	41%	9%
7	Home and Community Based Services (d)	NA	NA															
8	Substance Abuse Treatment - Outpatient	40	18	100%	0%	0%	17%	67%	0%	17%	0%	0%	6%	22%	22%	17%	33%	0%
9	Early Medical Intervention Services (d)	NA	NA															
10	Medical Nutritional Therapy/Nutritional Supplements	650	589	77%	22%	1%	40%	21%	4%	35%	0%	0%	2%	12%	19%	11%	44%	11%
11	Hospice Services (d)	NA	NA															
12	Outreach	700	891	75%	21%	4%	57%	13%	1%	28%	0%	1%	6%	32%	26%	11%	23%	2%
13	Non-Medical Case Management	7,045	8,661															
13.a	Service Linkage Targeted to Youth	320	165	79%	20%	1%	58%	5%	1%	36%	0%	12%	88%	0%	0%	0%	0%	0%
13.b	Service Linkage at Testing Sites	260	106	75%	24%	2%	65%	9%	1%	25%	0%	0%	0%	56%	25%	7%	13%	0%
13.c	Service Linkage at Public Clinic Primary Care Program (a)	3,700	3,770	66%	33%	1%	56%	9%	1%	34%	0%	0%	0%	17%	25%	13%	39%	6%
13.d	Service Linkage at CBO Primary Care Programs (a)	2,765	4,620	74%	23%	3%	54%	14%	2%	29%	1%	1%	5%	29%	25%	11%	24%	3%
14	Transportation	2,850	2,541															
14.a	Transportation Services - Urban	170	989	71%	28%	2%	58%	8%	2%	32%	0%	0%	5%	29%	26%	11%	24%	4%
14.b	Transportation Services - Rural	130	299	69%	30%	1%	38%	36%	2%	23%	0%	0%	5%	20%	23%	13%	32%	7%
14.c	Transportation vouchering	2,550	1,253															
15	Linguistic Services (d)	NA	NA															
16	Emergency Financial Assistance (e)	NA	1,086	75%	23%	2%	48%	11%	1%	40%	0%	0%	6%	31%	26%	13%	23%	1%
17	Referral for Health Care - Non Core Service (d)	NA	NA															
Net unduplicated clients served - all categories*		12,941	14,301	73%	25%	2%	51%	15%	2%	32%	0%	1%	4%	25%	24%	11%	30%	5%
Living AIDS cases + estimated Living HIV non-AIDS (from FY18 App) (b)			29,078															

FY 2020 Ryan White Part A and MAI Service Utilization Report

RW MAI Service Utilization Report - 4th Quarter (03/01 -02/28)																		
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	1,228	70%	28%	2%	99%	0%	1%	0%	0%	0%	6%	36%	28%	11%	18%	1%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	960	880	82%	14%	4%	0%	0%	0%	100%	0%	1%	6%	32%	31%	13%	16%	1%
	2 Medical Case Management (f)																	
2.c	Med CM - Targeted to AA (a)	1,060	927	79%	17%	4%	48%	16%	2%	34%	0%	1%	9%	36%	24%	12%	17%	1%
2.d	Med CM - Targeted to H/L(a)	960	710	77%	17%	6%	60%	17%	2%	20%	0%	1%	10%	31%	27%	10%	16%	6%
RW Part A New Client Service Utilization Report - 4th Quarter (03/01-02/28)																		
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	1,592	77%	20%	3%	52%	14%	2%	32%	0%	1%	10%	37%	24%	10%	1%	17%
2	LPAP	1,200	877	79%	17%	4%	48%	16%	2%	34%	0%	1%	9%	36%	24%	12%	1%	17%
3.a	Clinical Case Management	400	83	77%	17%	6%	60%	17%	2%	20%	0%	1%	10%	31%	27%	10%	6%	16%
3.b-3.h	Medical Case Management	1,600	1039	76%	21%	3%	53%	15%	2%	30%	0%	1%	9%	38%	22%	12%	1%	17%
3.i	Medical Case Management - Targeted to Veterans	60	34	88%	12%	0%	79%	12%	0%	9%	0%	0%	3%	6%	12%	3%	21%	56%
4	Oral Health	40	43	67%	33%	0%	33%	40%	2%	26%	0%	0%	14%	19%	23%	16%	2%	26%
12.a.	Non-Medical Case Management (Service Linkage)	3,700	1,663	73%	24%	3%	58%	14%	2%	27%	1%	2%	9%	30%	24%	10%	22%	3%
12.c.																		
12.d.																		
12.b	Service Linkage at Testing Sites	260	93	76%	22%	2%	65%	8%	1%	27%	0%	2%	22%	41%	20%	5%	10%	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																	

Part A Reflects "Decrease" Funding Scenario
MAI Reflects "Decrease" Funding Scenario

FY 2021 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	10,965,788	-75,776	0	0	0	10,890,012	49.12%	10,691,396	198,616				8%
1.a	Primary Care - Public Clinic (a)	3,927,300	-27,177				3,900,123	17.59%	3,900,123	0	3/1/2020			8%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	1,064,576	-7,367				1,057,209	4.77%	1,057,209	0	3/1/2020			8%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	910,551	-6,301				904,250	4.08%	904,250	0	3/1/2020			8%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	1,147,924	-7,944				1,139,980	5.14%	1,139,980	0	3/1/2020			8%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,100,000	-7,612				1,092,388	4.93%	1,092,388	0	3/1/2020			8%
1.f	Primary Care - Women at Public Clinic (a)	2,100,000	-14,532				2,085,468	9.41%	2,085,468	0	3/1/2020			8%
1.g	Primary Care - Pediatric (a.1)	15,437					15,437	0.07%	15,437	0	3/1/2020			8%
1.h	Vision	500,000	-3,460				496,540	2.24%	496,540	0	3/1/2020			8%
1.x	Primary Care Health Outcome Pilot	200,000	-1,384				198,616	0.90%	0	198,616				8%
2	Medical Case Management	1,730,000	-10,477	0	0	0	1,719,523	7.76%	1,719,523	0				8%
2.a	Clinical Case Management	488,656	-3,381				485,275	2.19%	485,275	0	3/1/2020			8%
2.b	Med CM - Public Clinic (a)	303,920	-2,103				301,817	1.36%	301,817	0	3/1/2020			8%
2.c	Med CM - Targeted to AA (a) (e)	160,070	-1,108				158,962	0.72%	158,962	0	3/1/2020			8%
2.d	Med CM - Targeted to H/L (a) (e)	160,072	-1,108				158,964	0.72%	158,964	0	3/1/2020			8%
2.e	Med CM - Targeted to W/MSM (a) (e)	52,247	-362				51,885	0.23%	51,885	0	3/1/2020			8%
2.f	Med CM - Targeted to Rural (a)	273,760	-1,894				271,866	1.23%	271,866	0	3/1/2020			8%
2.g	Med CM - Women at Public Clinic (a)	75,311	-521				74,790	0.34%	74,790	0	3/1/2020			8%
2.h	Med CM - Targeted to Pedi (a.1)	90,051	0				90,051	0.41%	90,051	0	3/1/2020			8%
2.i	Med CM - Targeted to Veterans	80,025	0				80,025	0.36%	80,025	0	3/1/2020			8%
2.j	Med CM - Targeted to Youth	45,888	0				45,888	0.21%	45,888	0	3/1/2020			8%
3	Local Pharmacy Assistance Program	1,810,360	-12,528	0	0	0	1,797,832	8.11%	1,797,832	0				8%
3.a	Local Pharmacy Assistance Program-Public Clinic (a) (e)	310,360	-2,148				308,212	1.39%	308,212	0	3/1/2020			8%
3.b	Local Pharmacy Assistance Program-Untargeted (a) (e)	1,500,000	-10,380				1,489,620	6.72%	1,489,620	0	3/1/2020			8%
4	Oral Health	166,404	-1,152	0	0	0	165,252	0.75%	165,252	0				8%
4.a	Oral Health - Untargeted (c)	0					0	0.00%	0	0	N/A			0%
4.b	Oral Health - Targeted to Rural	166,404	-1,152				165,252	0.75%	165,252	0	3/1/2020			8%
5	Health Insurance (c)	1,383,137	-9,571	0	0	0	1,373,566	6.20%	1,373,566	0				8%
6	Mental Health Services (c)	0					0	0.00%	0	0				0%
7	Early Intervention Services (c)	0					0	0.00%	0	0				0%
8	Medical Nutritional Therapy (supplements)	341,395	-2,362				339,033	1.53%	339,033	0				0%
9	Home and Community-Based Services (c)	0	0	0	0	0	0	0.00%	0	0				8%
9.a	In-Home	0												
9.b	Facility Based	0												
10	Substance Abuse Services - Outpatient	45,677	0	0	0	0	45,677	0.21%	45,677	0				8%
11	Hospice Services	0	0	0	0	0	0	0.00%	0	0				0%
12	Referral for Health Care and Support Services (c)	0	0				0	0.00%	0	0				8%
13	Non-Medical Case Management	1,267,002	-8,768	0	0	0	1,258,234	5.67%	1,258,234	0				8%
13.a	Service Linkage targeted to Youth	110,793	-767				110,026	0.50%	110,026	0	3/1/2020			8%
13.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000	-692				99,308	0.45%	99,308	0	3/1/2020			8%
13.c	Service Linkage at Public Clinic (a)	370,000	-2,560				367,440	1.66%	367,440	0	3/1/2020			8%
13.d	Service Linkage embedded in CBO Pcare (a) (e)	686,209	-4,749				681,460	3.07%	681,460	0	3/1/2020			8%
13.e	SLW-Substance Use	0	0				0	0.00%	0	0	3/1/2020			8%
14	Medical Transportation	424,911	-2,940	0	0	0	421,971	1.90%	421,971	0				8%
14.a	Medical Transportation services targeted to Urban	252,680	-1,749				250,931	1.13%	250,931	0	3/1/2020			8%
14.b	Medical Transportation services targeted to Rural	97,185	-673				96,512	0.44%	96,512	0	3/1/2020			8%
14.c	Transportation vouchers (bus passes & gas cards)	75,046	-519				74,527	0.34%	74,527	0	3/1/2020			8%
15	Emergency Financial Assistance	1,545,439	-10,694	0	0	0	1,534,745	6.92%	1,534,745	0				8%
16.a	EFA - Pharmacy Assistance	1,305,439	-9,034				1,296,405	5.85%	1,296,405	0	3/1/2020			8%

Part A Reflects "Decrease" Funding Scenario
 MAI Reflects "Decrease" Funding Scenario

FY 2021 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
(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													

Houston Ryan White Planning Council
Priority and Allocations Committee

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

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

MOTION 1: All Funding Streams – Level Funding Scenario

Level Funding Scenario for Ryan White Part A, MAI, Part B and State Services Funding.

Approve the attached Ryan White Part A, MAI, Part B, and State Services Funding FY 2021 Level Funding Scenario.

MOTION 2: MAI Increase / Decrease Scenarios

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

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

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

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

MOTION 3: Part A Increase / Decrease Scenarios

Decrease Funding Scenario for Ryan White Part A Funding.

All service categories except subcategories 1.g, 2.h, 2.i, 2.j, and 10 will be decreased by the same percent. This applies to the total amount of service dollars available.

Increase Funding Scenario for Ryan White Part A Funding.

- Step 1: Allocate first \$200,000 to Medical Case Management (category 2). Subcategory to be determined by the Administrative Agent, with consideration to MAI allocations under MCM and final quarter adjustments.
- Step 2: Allocate the next \$100,000 to Health Insurance Assistance Program (category 5).
- Step 3: Allocate the next \$100,000 to Local Pharmacy Assistance Program - Untargeted (category 3.b).
- Step 4: Any remaining increase in funds following application of Steps 1, 2, and 3 will be allocated by the Ryan White Planning Council, with prioritization given to new programs.

MOTION 4: Part B and State Services Increase/Decrease Scenario

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

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

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

- Step 1: Allocate the first \$200,000 to be divided evenly between Oral Health – General Oral Health (category 4.a.) and Oral Health – Prosthodontics (category 4.b.).
- Step 2: Allocate the next \$200,000 to Health Insurance Assistance Program (category 5).
- Step 3: Any remaining increase in funds following application of Steps 1 and 2 will be allocated by the Ryan White Planning Council after the notice of grant award is received.