

**Houston Area HIV Services Ryan White Planning Council**  
**Office of Support**  
**1310 Prairie Street, Suite 800, Houston, Texas 77002**  
**832 927-7926 telephone; <http://rwpchouston.org>**

**MEMORANDUM**

To: Steering Committee Members:  
Josh Mica, he/him/él, Chair  
Skeet Boyle, Vice Chair  
Ryan Rose, Secretary  
Johnny Deal, Co-Chair, Affected Community Committee  
Carol Suazo, Co-Chair, Affected Community Committee  
Kenia Gallardo, Co-Chair, Comprehensive HIV Planning Committee  
Robert Sliepka, Co-Chair, Comprehensive HIV Planning Committee  
Cecilia Ligons, Co-Chair, Operations Committee  
Crystal R. Starr, Co-Chair, Operations Committee  
Peta-gay Ledbetter, Co-Chair, Priority and Allocations Committee  
Rodney Mills, Co-Chair, Priority and Allocations Committee  
Tana Pradia, Co-Chair, Quality Improvement Committee  
Pete Rodriguez, Co-Chair, Quality Improvement Committee

Copy: Glenn Urbach  
Eric James  
Mauricia Chatman  
Francisco Ruiz  
Tiffany Shepherd  
Patrick Martin

Diane Beck  
Jason Black

**EMAIL ONLY:**  
Sha'Terra Johnson  
David Williams

From: Tori Williams

Date: Tuesday, October 29, 2024

Re: Meeting Announcement

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Please contact Rod to RSVP, even if you cannot attend the following meeting, and let her know if you prefer to participate virtually or in person. Rod can be reached by telephone at: 832 927-7926 or by email at: [Rodriga.Avila@harriscountytexas.gov](mailto:Rodriga.Avila@harriscountytexas.gov). Thank you!

**Ryan White Steering Committee Meeting**  
12 noon, Thursday, November 7, 2024

**Join the Zoom meeting by clicking on:**

<https://us02web.zoom.us/j/85782189192?pwd=YmtrcktWcHY5SIV2RE50ZzYraEErQT09>

Meeting ID: 857 8218 9192      Passcode: 885832

Or, use your phone to dial in by calling 346 248-7799

**In-Person:** Please join us at Bering Church, 1440 Harold St., Houston, Texas 77006  
Please park and enter from behind the building on Hawthorne Street.

# HOUSTON AREA HIV SERVICES RYAN WHITE PLANNING COUNCIL



## STEERING COMMITTEE

### AGENDA

12 noon, Thursday, November 7, 2024

*Please note that the use of artificial intelligence (AI) is prohibited at Ryan White sponsored meetings.*

In Person Meeting Location: 1440 Harold Street, Houston, Texas 77006

Join Zoom Meeting by clicking onto:

<https://us02web.zoom.us/j/85782189192?pwd=YmtrcktWcHY5SIV2RE50ZzYraEErQT09>

Meeting ID: 857 8218 9192

Passcode: 885832

Or, dial in by calling 346 248-7799

- I. Call to Order Josh Mica, he/him/él, Chair  
RW\* Planning Council
  - A. Welcoming Remarks and Moment of Reflection
  - B. Select the Committee Co-Chair who will be voting today
  - C. Adoption of the Agenda
  - D. Adoption 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. 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. Reports from Committees
  - A. Comprehensive HIV Planning Committee Kenia Gallardo, she/her/hers &  
Robert Sliepka, he/him/they,

*Item:* 2024 Houston Area HIV Epidemiological Supplement  
*Recommended Action:* **Motion:** Endorse the attached, 2024 Houston Area HIV Epidemiological Supplement, which will include a few suggested edits.

*Item:* 2024 Houston Area HIV Epidemiological Supplement  
*Recommended Action:* FYI: The 2024 Epidemiological Supplement would not have been created without significant collaboration and the hard work of Bingjie Li, Alamou Sanoussi and Imran Shaikh from the Houston Health Department. As well as Nithya Lakshmi Mohan Dass from Ryan White Grant Administration and Beth Allen, the Interim Health Planner in the Ryan White Office of Support. And, thanks to Sha'Terra Johnson for providing HSDA data. Many thanks to all.

*Item:* Spanish Translation  
*Recommended Action:* **Motion:** Translate the 2024 Epidemiological Supplement into Spanish. (Note: The Committee prefers to make a decision about translation as each document is finalized.)

*Item:* 2024 HIV Prevention & Care Needs Assessment  
*Recommended Action:* FYI: The Interim Health Planner is working to complete the 2024 HIV Prevention and Care Needs Assessment which is scheduled to be reviewed at the November 14, 2024 Committee meeting.

Robert Sliepka, he/him/they,  
Co-Chairs

*Item:* Updates on the Joint Planning Body  
*Recommended Action:* Verbal updates on the 2022 – 2026 EHE\*/Integrated Prevention and Care Plan

Tori Williams

B. Affected Community Committee

*Item:* FY 2025 Standards of Care  
*Recommended Action:* FYI: Consumer-only members of the Committee and of two EHE/Integrated Planning workgroups met jointly to discuss and provide input into the FY 2025 Standards of Care. Staff from Ryan White Grant Administration and The Resource Group took notes and will report back to the group.

Johnny Deal, he/him/his &  
Carol Suazo, she/her/ella,

*Item:* Ryan White Information Table at City/County Joint Training  
*Recommended Action:* Members of the Committee hosted a table at the bi-annual, case management and disease intervention specialist joint training. Materials provided included information on Planning Council and Affiliate Committee membership, Project LEAP, Proyecto VIDA and more.

C. Quality Improvement Committee

*Item:* TDSHS\*\* Proposed FY 2025 Standards of Care  
*Recommended Action:* FYI: TDSHS\*\* welcomes input into the FY 2025 proposed changes to Part B funded standards of care. See the attached standards for:

- Mental Health
- Oral Health

Please submit all comments to Sha'Terra Johnson, The Resource Group, at: [sjohnson@hivtrg.org](mailto:sjohnson@hivtrg.org)

Tana Pradia, she/her/hers &  
Pete Rodriguez, he/him/él,  
Co-Chairs

*Item:* New FY 2025 Service Definitions  
*Recommended Action:* **Motion:** Approve the attached FY 2025 service definitions for:

- Home Delivered Meals
- Housing – Temporary Assisted Living
- Legal Assistance – Expungement of Criminal Record

*Item:* Updates on Distribution of Bus Passes & Translation Services  
*Recommended Action:* SUGGESTION: Please invite the Administrative Agency to provide updates related to the distribution of bus passes and translation services at Ryan White funded agencies.

D. Priority and Allocations Committee

Peta-gay Ledbetter, she/her/hers  
and Rodney Mills, he/him/his,  
Co-chairs

*Item:* Reports from the Administrative Agent – Part A/MAI\*\*\*

*Recommended Action:* FYI: See the attached reports from the Part A/Minority AIDS Initiative (MAI) Administrative Agent:

- FY24 Procurement Report – Part A/MAI, dated 10/09/24
- FY24 Service Utilization – Part A/MAI, dated 10/08/24

*Item:* Reports from the Administrative Agent – Part B/SS\*\*\*\*

*Recommended Action:* FYI: See the attached reports from the Part B/State Services (SS) Administrative Agent:

- FY24-25 Procurement Report – Part B, dated 10/03/24
- FY23-24 Procurement Report – SS\*\*\*\*, dated 10/03/24
- FY23-24 Service Utilization – SS\*\*\*\*, dated 01/10/24
- FY23-24 Health Insurance Assist Service Utilization, dated 09/23/24

*Item:* FY 2024 Ryan White Part A Allocation Increases

*Recommended Action:* **Motion:** Approve the recommendations for Ryan White Part A funding increases outlined on the attached chart.

*Item:* FY 2024 Ryan White MAI\*\*\* Allocation Increases

*Recommended Action:* **Motion:** Divide \$60,000 in unspent MAI dollars by allocating \$20,000 to each of the 3 MAI\*\*\* funded subrecipients who do not have unspent primary care or case management funds.

*Item:* FY 2024 Unspent Ryan White Part A Funds

*Recommended Action:* **Motion:** In the final quarter of the FY 2024 Ryan White Part A, Part B and State Services grant years, after implementing the year end Council-approved reallocation of unspent funds and utilizing the existing 10% reallocation rule to the extent feasible, Ryan White Grant Administration (RWGA) may reallocate any remaining unspent funds as necessary to ensure the Houston EMA has less than 5% unspent Formula funds and no unspent Supplemental funds. The Resource Group (TRG) may reallocate any remaining unspent funds as necessary to ensure no funds are returned to the Texas Department of State Health Services. RWGA and TRG must inform the Council of these shifts no later than the next scheduled Ryan White Planning Council Council Steering Committee meeting.

*Item:* FY 2024 Ryan White Part A Carryover Funds

*Recommended Action:* **Motion:** If there are FY 2024 Ryan White Part A carryover funds, it is the intent of the committee to recommend allocating the full amount to Outpatient/Ambulatory Primary Medical Care.

*Item:* Quarterly Committee Report

*Recommended Action:* See the attached Quarterly Committee Report

E. Operations Committee  
*Item:* Personnel Subcommittee  
*Recommended Action:* FYI: Verbal update.

Cecilia Ligons, she/her/hers &  
Crystal R. Starr, she/her/hers,  
Co-chairs

*Item:* Alternative Policy for Members Speaking at Meetings  
*Recommended Action:* **Motion:** Approve the revised, proposed procedure for members speaking at meetings, see attached.

*Item:* Inflation  
*Recommended Action:* **Motion:** In view of inflation, ask the Chair of the Planning Council to send a letter to the appropriate person in Harris County requesting them to increase the amount allowed for volunteers to be reimbursed for meals.

*Item:* Council and Committee Input  
*Recommended Action:* **Motion:** Allow current Planning Council and Affiliate Committee members to be included in committee discussions at meetings where they are not members. Allow these individuals to add their comments, with the exception of Steering Committee and Council meetings (affiliate members can add their comments at Council meetings.) But, these individuals will have no voting privileges at meetings where they are not an appointed member. **Justification:** Per public comment from a Council member, this will allow Ryan White volunteers to have more input into committee meeting decisions.

*Item:* Election of 2025 Council Officers  
*Recommended Action:* **Motion:** Accept the attached list of nominations for the election of the 2025 Council Officers. See the attached list of eligible nominees.

- V. Report from the Office of Support  
Tori Williams, she/her/hers,  
Director
- VI. Report from Ryan White Grant Administration  
Glenn Urbach, he/him/his,  
Manager
- VII. Report from The Resource Group  
Sha'Terra Johnson, she/her/hers,  
Health Planner
- VIII. Announcements
- IX. Adjournment

\* RW = Ryan White

\*\*DSHS = Texas Department of State Health Services

\*\*\*MAI = Minority AIDS Initiative

\*\*\*\* = State Services funding

# HOUSTON AREA HIV SERVICES RYAN WHITE PLANNING COUNCIL



## STEERING COMMITTEE

### MINUTES

12 noon, Thursday, October 3, 2024

Meeting Location: Bering Church 1440 Harold Street; Houston, TX and Zoom teleconference

MEMBERS PRESENT	MEMBERS ABSENT	STAFF PRESENT
Josh Mica, he/him/él, Chair	Kenia Gallardo	<i>Ryan White Grant Administration</i>
Skeet Boyle, Vice Chair		Glenn Urbach
Ryan Rose, Secretary		James Supak
Johnny Deal		
Carol Suazo	OTHERS PRESENT	<i>The Resource Group</i>
Robert Sliepka	Yvonne Arizpe, RWPC	Sha'Terra Johnson
Cecilia Ligons	Evelio Salinas Escamilla, RWPC	
Crystal R. Starr		<i>Office of Support</i>
Peta-gay Ledbetter		Diane Beck
Rodney Mills		Rod Avila
Tana Pradia		
Pete Rodriguez		

**Call to Order:** Josh Mica, he/him/él, Chair, called the meeting to order at 12:00 p.m. During opening remarks he thanked everyone for being in attendance and for being excellent committee co-chairs. He then called for a Moment of Reflection.

Those selected to represent their committee at the meeting were: Deal for Affected, Sliepka for Comprehensive HIV Planning, Starr for Operations, Ledbetter for Priority and Allocations, and Rodriguez for Quality Improvement.

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

**Approval of the Minutes:** **Motion #2:** *it was moved and seconded (Ligons, Pradia) to approve the September 5, 2024 minutes.* **Motion carried.** Abstentions: Sliepka.

**Public Comment and Announcements:** Pradia said that she is concerned that clients are still unable to access bus passes; clients are being turned away because the agencies don't have them.

#### Reports from Committees

**Comprehensive HIV Planning Committee:** Robert Sliepka, Co-Chair, reported on the following: 2024 HIV Prevention & Care Needs Assessment: The Interim Health Planner is working to complete the following documents:

- 2024 HIV Prevention and Care Needs Assessment
- 2024 Houston Area HIV Epi Supplement
- 2025 Houston Area HIV Epi Profile



Updates on the Joint Planning Body: Updates on the 2022 – 2026 EHE\*/Integrated Prevention and Care Plan. Beck said that there were a few Committee meetings in September and then again in November.

**Affected Community Committee:** Johnny Deal, Co-Chair, reported on the following:

Road 2 Success: Committee members continue to visit housing and other sites where they host Blue Book Jeopardy with the residents. In the last 8 months, they have hosted five Road 2 Success events.

College Survey re: HIV Resources on Campus: Members of the Committee continue to call colleges and universities to assess HIV resources on campuses throughout the EMA. They could use more volunteers to make calls. Contact Rod if you want to help.

Training: Standards of Care: Members of the Committee were invited to participate in training related to Standards of Care so that they will be prepared for the Consumer-only Meeting to review proposed changes to the FY 2024 Standards of Care at 11:00 am on Monday, October 21, 2024. All consumers are welcome to attend.

**Quality Improvement Committee:** Tana Pradia, Co-Chair, reported on the following:

DSHS\* Proposed FY 2025 Standards of Care: DSHS\* welcomes input into the FY 2025 proposed changes to Part B funded standards of care. See the attached standards for:

- Emergency Financial Assistance
- Local Pharmaceutical Assistance
- Medical Case Management
- Non-Medical Case Management
- Referral for Healthcare and Support Services

Please submit all comments to Sha'Terra Johnson, The Resource Group, at: [sjohnson@hivtrg.org](mailto:sjohnson@hivtrg.org)

Public Comments Related to Translation Services: The Administrative Agent was invited to provide updates related to recent public comments about translation services at Ryan White funded agencies. Urbach said that Chatman sent a request for feedback on this from case management and other agency staff. She is currently out of the office but expected to return in mid-October.

Updates on the Distribution of Bus Passes: When invited to provide updates related to the distribution of bus passes at Ryan White funded agencies, Urbach said that all RW funded agencies receive bus passes to distribute to clients. If an agency says they don't have any, his staff needs to know so they can follow up with the agency. Bus passes are to be used for medical and supportive services. Clients do not have to see the doctor to receive a bus pass but they do need to have been seen and had labs in the last 12 months. If a client wants to get a bus pass from a non-record holding agency, there is a strong possibility that they will need to go through that agency's eligibility process.

See the attached reports from the Part A/Minority AIDS Initiative (MAI) Administrative Agent:

- FY24 Procurement Report – Part A/MAI, dated 09/09/24
- FY24 Service Utilization – Part A/MAI, dated 09/03/24

See the attached reports from the Part B/State Services Administrative Agent:

- FY24-25 Procurement Report – Part B, dated 09/05/24
- FY23-24 Procurement Report – State Services, dated 09/05/24

**Priority and Allocations Committee:** Rodney Mills, Co-Chair, reported on the following:

As usual, this committee did not meet in September.

**Operations Committee:** Cecilia Ligon, Co-Chair, reported on the following:

Personnel Subcommittee: Ligon said that the committee has been meeting often and created a form to help determine which applicants are qualified for the position.

Alternative Policy for Members Speaking at Meetings: Pradia said that the language in the motion is confusing and needs to be clarified. **Motion #3:** *Approve the proposed, alternative procedure for members speaking at meetings, see attached for details.* **Motion Failed.** **Motion #4:** *it was moved and seconded (Ligon, Pradia) to send the policy back to Operations for revisions that make the language in the motion clear.* **Motion Carried.**

Open Forums for General Discussion at Council Meetings: **Concerns:** The Council will have difficulty making and keeping quorum and addressing required business if Council meetings get longer. **Justification:** Committee meetings are less formal. And, if enough comments are made at a Council meeting, the Chair has the authority to refer the issue to a committee, or form a workgroup to discuss the issue in detail. All are welcome to participate at workgroup meetings and public notice is required for committee and workgroup meetings so interested individuals who are not present at the Council meeting can attend the meeting. This allows for more transparency and more individuals having input into Council business. **Motion #5:** Provide more training on the structure and function of Council meetings so that more members understand that the committee level is where in-depth conversations take place. **Motion Carried.** Abstention: Boyle.

Election of 2025 Council Officers: Please submit nominations for the election of the 2025 Council Officers. See the attached list of eligible nominees.

**Report from Office of Support:** Diane Beck, Council Coordinator, said that the Director is on vacation. The County fiscal year starts in October, hence the Office of Support is waiting for the accounting system to be loaded and reopened for purchase orders. Right now, staff is not sure if there will be lunch at the Planning Council meeting next week. Also, the website is being transitioned to a new server and is not currently updated. If someone wants to download a meeting packet that they can't find on the website, please let staff know so that the packet can be emailed to the person making the request.

**Report from Ryan White Grant Administration:** Glenn Urbach, Manager, summarized the attached report.

**Report from The Resource Group:** Sha'Terra Johnson, Health Planner, summarized the attached report.

**Announcements:** None.

**Adjournment:** **Motion:** *it was moved and seconded (Starr, Boyle) to adjourn the meeting at 12:59 p.m.* **Motion Carried.**

Submitted by:

Approved by:

\_\_\_\_\_  
Tori Williams, Director                      Date

\_\_\_\_\_  
Committee Chair                                      Date



## 2024 Steering Committee Voting Record for Meeting Date 10/03/24

C = Chaired the meeting, ja = Just arrived, lm = Left the meeting

Aff-Affected Community Committee, Comp-Comprehensive HIV Planning Committee, Op-Operations Committee, PA-Priority and Allocations Committee, QI-Quality Improvement Committee

MEMBERS	Motion #1 Agenda Carried			Motion #2 Minutes Carried			Motion #3 Alt Policy for Speaking at Mtgs Failed			Motion #4 Send policy back to Operations for revision Carried			Motion #5 Open Forums for General Discussion Carried		
	Yes	No	Abstain	Yes	No	Abstain	Yes	No	Abstain	Yes	No	Abstain	Yes	No	Abstain
Josh Mica, he/him/él, Chair			C			C			C			C			C
Skeet Boyle, Vice Chair	X			X						X					X
Ryan Rose, Secretary	X			X			X			X			X		
Johnny Deal, Aff	X			X			X			X			X		
Robert Sliepka, Comp	X					X				X			X		
Crystal Starr, Op	X			X						X			X		
Peta-gay Ledbetter, PA	X			X			X			X			X		
Pete Rodriguez, QI	X			X						X			X		
<b>Non-voting members at the meeting:</b>															
Carol Suazo, Aff ja 12:03															
Cecilia Ligons, Op															
Rodney Mills, PA ja 12:04															
Tana Pradia, QI															
<b>Absent members:</b>															
Kenia Gallardo, Comp															

**Comprehensive HIV  
Planning Committee  
Report**



# HIV in the Houston Area

2024 Epidemiologic Supplement for  
HIV Prevention and Care Services Planning

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**Houston Area Ryan  
White Planning  
Council**



**Houston Health  
Department**

## **Disclaimer**

This document is a supplement to and should be used in conjunction with the *2019 Houston Area Integrated Epidemiologic Profile for HIV Prevention and Care Services Planning*. (December 2019). This document contains data on selected epidemiological measures of HIV disease for the jurisdictions of Houston/Harris County, the Houston Eligible Metropolitan Area (EMA) and the Houston Health Services Delivery Area (HSDA) for the reporting period of January 1 to December 31, 2022 (unless otherwise noted). It is intended for use in HIV prevention and care services planning conducted in years 2024-2025. The separation of jurisdictions in the data presentation is intended to enhance the utility of this document as a tool for planning both HIV prevention and HIV care services. The *2019 Epidemiologic Profile* should be referenced for a comprehensive discussion of data pertaining to the epidemiological questions outlined in joint guidance from the Centers for Disease Control and Prevention and the Health Resources and Services Administration. More recent data may have become available since the time of publication.

## **Funding acknowledgment**

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## **Suggested citation**

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## **Acknowledgments**

The development of this document was overseen by the Ryan White Planning Council and HIV Prevention Community Planning Group.

## **Contributors, reviewers, and staff**

Houston Health Department

- Bingjie Li, Biostatistician – Data Services Program
- Imran Shaikh, Manager – Data Services Program
- Alamou Sanoussi, Epidemiologist Supervisor – Data Services Program
- Marlene McNeese, Deputy Assistant Director – HIV/STD and Viral Hepatitis Prevention
- Kirstin Short, Bureau Chief – Epidemiology
- Roger Sealy, Assistant Director
- Salma Khuwaja, HIV Division Manager

Ryan White Planning Council Office of Support

- Beth W. Allen, Interim Health Planner
  - Victoria Williams, Director
- Ryan White Grant Administration, Harris County Public Health Department
- Nithya Lakshmi Mohan Dass, Data Analyst, Epidemiologist

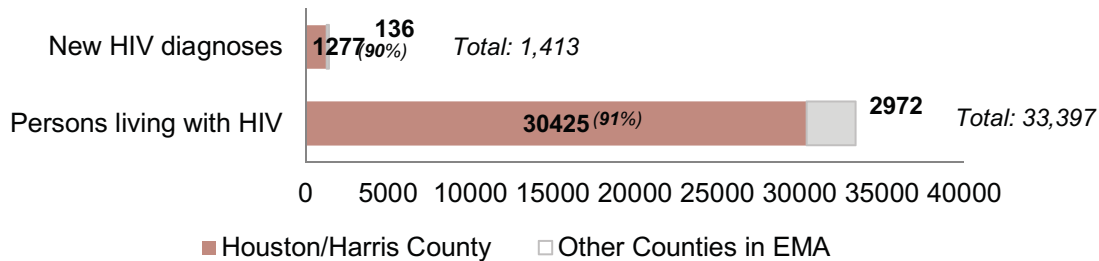
Special thanks to the HIV surveillance team at the Houston Health Department (HHD): Hafeez Rehman, Jeffrey Meyer, Maha Al-Selwadi, Safina Hsu, Paloma Ortega, Raoul Garcia, Veronica Anderson, Juan Gonzalez, Jr., Denise Guzman, Mayra Serrato, Andrea Diart

## EXECUTIVE SUMMARY

Local communities use data on patterns of HIV, or HIV epidemiology, to better understand the portion of the population diagnosed and living with HIV. Understanding this helps local communities make informed decisions about HIV funding, services, and quality.

This document is a supplement to *HIV in the Houston Area: The 2019 Houston Area Integrated Epidemiologic Profile for HIV Prevention and Care Services Planning* (2019) and provides updated data on core HIV indicators used in local planning. It includes data on 2022 HIV diagnoses and cumulative prevalence data for people living with HIV (PLWH), for three local geographic jurisdictions: (1) Harris County and Houston, its county seat; (2) the Houston Eligible Metropolitan Area (EMA), encompassing Harris, Chambers, Fort Bend, Liberty, Montgomery, and Waller counties; and (3) the Houston Health Services Delivery Area (HSDA), which adds Austin, Colorado, Walker, and Wharton counties. Each is represented in the report by the abbreviations H/HC, EMA, and HSDA, respectively, in the top left corner of each page. A summary of key data appears in the text and graph (Figure 1) below:

- In 2022, 1,413 new diagnoses of HIV were reported in the Houston EMA, a 5% decrease from 2021 (2021 total = 1,346). At the time of diagnosis, 90% resided in Houston/Harris County.
- At the end of calendar year 2022, there were 33,397 diagnosed people living with HIV in the Houston EMA, a 5% increase from 2021 (2021 total = 31,816). In 2022, 91% of PLWH resided in Houston/Harris County.



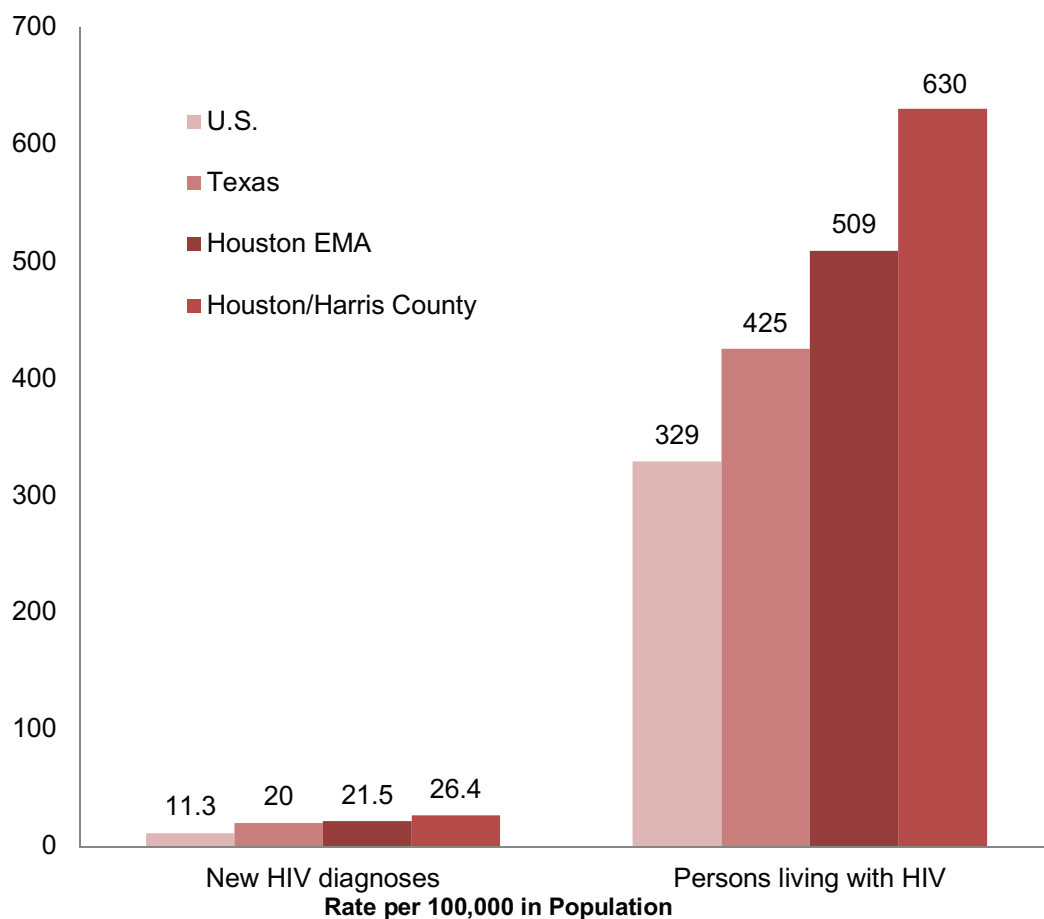
**Figure 1. Number of New HIV Diagnoses and People Living with HIV in the Houston EMA, by County, 2022** (Note. New HIV diagnoses were made in people living in the Houston EMA from January 1, 2022, through December 31, 2022. People living with HIV were counted at the end of the 2022 calendar year. Source. Texas Enhanced HIV and AIDS Reporting System [eHARS] data as of December 22, 2022.)

- In both Houston/Harris County and the Houston EMA, the rates of new HIV diagnoses and prevalence continue to exceed rates both for Texas and the United States. The rate of new HIV diagnoses in Houston/Harris County is more than twice the rate for the country.
- Compared to the general population in the Houston EMA, the PLWH population is disproportionately male, predominantly African American, and 35 to 44 years of age. Among new HIV diagnoses, the largest proportion by age group is younger, ages 25 to 34.
- Among 33,397 HIV-diagnosed individuals in the Houston EMA in 2022, 76.4% had received care (at least one CD4/viral load test in the year); 55.2% were retained in HIV care (at least two CD4/viral load tests in the year, at least three months apart); and 62.2% maintained or reached viral load suppression ( $\leq 200$  copies/mL).

## COMPARISON OF HIV RATES IN HOUSTON, TEXAS, AND THE U.S.

A comparison of core HIV epidemiological indicators between the two Houston area jurisdictions (Houston/Harris County and the Houston EMA), the State of Texas, and the U.S. provides context for the local HIV burden data described in this document (Figure 2).

Overall, both Houston/Harris County and the Houston EMA have higher rates of new HIV diagnoses and HIV prevalence (or PLWH per 100,000 population) than both Texas and the U.S. This indicates that the HIV burden in the Houston area is greater than the state and the nation, even when adjusted for population size. In 2022, the Houston EMA had the highest new HIV diagnoses of any EMA/Transitional Grant Areas in Texas, according to epidemiological data provided by the Texas Department of State Health Services (TDSHS).



**Figure 2. Rate of New HIV Diagnoses and of People Living with HIV for the U.S., Texas, and Houston Area Jurisdictions.** (Sources. United States—Centers for Disease Control and Prevention, *HIV Surveillance Report: Diagnoses, Deaths, and Prevalence of HIV in the United States and Six Territories and Freely Associated States*, 2022, Atlanta, 2024; Texas—AIDSvu, *Rates of New Diagnoses and Persons Living with HIV, 2022*, Emory University School of Public Health, 2024; Houston EMA— *HIV Prevalence, 2022*, Texas Department of State Health Services, Texas Enhanced HIV and AIDS Reporting System [eHARS], 2024; Houston/Harris County—*Diagnoses, 2022, and Prevalence, 2022*, eHARS, 2024.)



## NEW HIV DIAGNOSES IN HOUSTON/HARRIS COUNTY

In 2022, 1277 new diagnoses of HIV disease (including stage 3 HIV/formerly AIDS) were reported in Houston/Harris County (H/HC), an 8% increase from 2021 (2021 total = 1,182). The rate of new HIV and stage 3 HIV diagnoses in Houston/Harris County increased from 24.9 to 26.4, while the rate of stage 3 HIV was approximately 6 new diagnoses for every 100,000 residents. When compared to 2021, increases in new HIV rates occurred among both gender groups, white, Hispanic/Latinx, and people 25 to 44 years of age.

Proportionally, Hispanic/Latinx made up the majority of new HIV diagnoses in 2022 at 46%, followed by Black/African Americans at 37%. Male-to-male sexual contact or MSM accounted for the most transmission risk at 72%, followed by Sex with male/Sex with female (formerly heterosexual) at 20%.

**Table 1. New Diagnoses of HIV and Stage 3 HIV in Houston/Harris County by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2022**

Characteristics	New HIV <sup>a</sup>			New stage 3 HIV		
	Cases		Rate	Cases		Rate
	<i>n</i>	%		<i>n</i>	%	
<b>Total</b>	1,277	100.0	26.4	287	100.0	5.9
<b>Sex assigned at Birth</b>						
Male	1,045	81.8	43.5	235	81.9	9.8
Female	232	18.2	9.6	52	18.1	2.1
<b>Race/Ethnicity</b>						
Black/African American, not Hispanic	468	36.6	52.0	100	34.8	11.1
White, not Hispanic	166	13.0	13.1	37	12.9	2.9
Hispanic/Latino	585	45.8	27.2	141	49.1	6.6
Other/Multiracial	58	4.5	11.4	9	3.1	1.8
<b>Age at Diagnosis<sup>b</sup></b>						
0 - 24	246	19.3	14.4	27	9.4	1.6
25 - 34	536	42.0	72.5	101	35.2	13.7
35 - 44	260	20.4	37.1	68	23.7	9.7
45 - 54	129	10.1	21.5	43	15.0	7.2
55 - 64	84	6.6	16.5	36	12.5	7.1
65+	22	1.7	3.9	12	4.2	2.1
<b>Transmission Risk<sup>c</sup></b>						
Male-to-male sexual contact (MSM)	915.1	71.83	—	188.1	65.5	—
Person who injects drugs (PWID)	71.8	5.64	—	21	7.3	—
MSM/PWID	32.1	2.52	—	7.8	2.7	—
Sex with male/Sex with female	255	20.02	—	70.1	24.4	—

Note. Rates are per 100,000 population.

Sources. Case data collected from Texas eHARS and analyzed by the Houston Health Department. Population data for Harris County from U.S. Census Bureau, American Community Survey, 2022: ACS 1-Year Estimates, and data for the collection of blocks representing the area of Houston outside Harris County from U.S. Census Bureau, Decennial Census, 2020.

<sup>a</sup> People diagnosed with HIV, regardless of stage 3 HIV status, with residence at diagnosis in Houston/Harris County.

<sup>b</sup> Age group 0–12 years old was combined with group 13–24 years old because 0–12 years' category had fewer than five cases and could not be reported.

<sup>c</sup> People with no risk reported were recategorized into standard categories using the multiple imputation program of the Centers for Disease Control and Prevention. Population data are not available for risk groups; therefore, it is impossible to calculate rate by risk. A dash represents the absence of a rate. Data for "Perinatal," "Adult other," and "Pediatric other" transmission were not reported because some cells had fewer than five cases.

## PEOPLE LIVING WITH HIV IN HOUSTON/HARRIS COUNTY

Data on the total number of people living with HIV (PLWH) in Houston/Harris County is available as of the end of calendar year 2022. At that time, there were 30,425 PLWH (regardless of progression) in Houston/Harris County. This is a prevalence rate of 630 PLWH for every 100,000 people in the jurisdiction.

Of those living with HIV in Houston/Harris County, 77% are male, 47% are Black/African Americans, 76% are people ages 35 and older, and 62% report MSM as their primary transmission risk.

**Table 2. People Living with HIV in Houston/Harris County by Sex assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2022**

	Cases <sup>a</sup>		Rate
	<i>n</i>	%	
<b>Total</b>	30,425	100.0	629.9
<b>Sex assigned at Birth</b>			
Male	23,418	77.0	973.8
Female	7,007	23.0	288.9
<b>Race/Ethnicity</b>			
Black/African American, not Hispanic	14,389	47.3	1597.5
White, not Hispanic	4,429	14.6	348.6
Hispanic/Latino	9,885	32.5	459.9
Other/Multiracial	1,722	5.7	338.0
<b>Age<sup>b</sup></b>			
0 - 24	1,138	3.7	66.5
25 - 34	6,240	20.5	844.4
35 - 44	7,116	23.4	1014.4
45 - 54	6,798	22.3	1134.0
55 - 64	6,195	20.4	1213.3
65+	2,938	9.7	517.8
<b>Transmission Risk<sup>c</sup></b>			
Male-to-male sexual contact (MSM)	18,788.2	62.4	—
Person who injects drugs (PWID)	1,951	6.5	—
MSM/PWID	1,127	3.7	—
Sex with male/Sex with female	8,238.8	27.4	—
Perinatal transmission	256	0.8	—
Other adult risk	13	0.04	—

*Note.* Rates are per 100,000 population.

*Sources.* Case data collected from Texas eHARS and analyzed by the Houston Health Department. Population data for Harris County from U.S. Census Bureau, American Community Survey, 2022: ACS 1-Year Estimates, and data for the collection of blocks representing the area of Houston outside Harris County from U.S. Census Bureau, Decennial Census, 2020.

<sup>a</sup> People living with HIV, regardless of stage 3 HIV status.

<sup>b</sup> Age as of December 31, 2022.

<sup>c</sup> People with no risk reported were recategorized into standard categories using the multiple imputation or risk program of the Centers for Disease Control and Prevention. Perinatal transmission doesn't include perinatal exposure with HIV age 13+ years. Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk. A dash represents the absence of a rate.

## NEW HIV DIAGNOSES IN THE HOUSTON EMA

In 2022, 1,413 new HIV diagnoses were reported in the Houston EMA, a 5% increase from 2021 (Table 3). New HIV diagnoses for every 100,000 people in the Houston EMA increased from 20.9 in 2021 to 21.5 in 2022. Though in 2021 African Americans had the highest proportion of new HIV diagnoses (45.7%) in the EMA, in 2022 the Hispanic population took that position (43.5%), and African Americans ranked second (36.9%). In 2021 and 2022, transmission was most often attributed to male-to-male sexual contact, accounting for more than 70% of transmission in each year. Heterosexual contact accounted for about 20% in those same years.

**Table 3. New Diagnoses of HIV in the Six-County Houston EMA by Sex Assigned at Birth, Race/Ethnicity, Age at Diagnosis, and Transmission Risk, 2021 and 2022**

Characteristics	2021			2022		
	Cases		Rate	Cases		Rate
	<i>n</i>	%		<i>n</i>	%	
<b>Total</b>	1,346	100.0	20.9	1,413	100.0	21.5
<b>Sex Assigned at Birth</b>						
Female	253	18.8	7.8	271	19.2	8.2
Male	1,093	81.2	34.0	1,142	80.8	35.0
<b>Race/Ethnicity</b>						
Black/African American, not Hispanic	615	45.7	53.4	521	36.9	44.0
Hispanic/Latino	512	38.0	20.1	615	43.5	23.5
White, not Hispanic	153	11.4	7.3	211	14.9	10.2
Multiracial	43	3.2	44.3	34	2.4	33.4
Other	23	1.7	4.1	32	2.3	5.5
<b>Age at Diagnosis<sup>a</sup></b>						
0–24	316	23.5	13.8	276	19.5	11.9
25–34	503	37.4	53.7	584	41.3	61.6
35–44	240	17.8	25.6	281	19.9	29.4
45–54	153	11.4	18.7	152	10.8	18.2
55–64	94	7.0	13.4	93	6.6	13.2
65+	40	3.0	5.3	27	1.9	3.4
<b>Transmission Risk<sup>b</sup></b>						
Male-to-male sexual contact (MSM)	964	71.7	—	1,003	71.2	—
Person who injects drugs (PWID)	78	5.8	—	79	5.6	—
MSM/PWID	35	2.6	—	36	2.6	—
Sex with male/Sex with female	268	19.9	—	291	20.7	—

*Note.* Rates are per 100,000 population. Data are suppressed by TDSHS when cells have fewer than five cases. Because of the rounding of estimates, numbers and percentages may not equal column totals or 100%. EMA, Eligible Metropolitan Area; TDSHS, Texas Department of State Health Services.

*Source.* TDSHS, HIV/STD Surveillance Unit, July 2024. Rates were calculated using U.S. Census Bureau, American Community Survey, 2021 and 2022 five-year estimates for the EMA.

<sup>a</sup> Age groups 0–12 years and 13–24 years were combined because some cells had fewer than five cases.

<sup>b</sup> Data for “Perinatal,” “Adult other,” and “Pediatric other” transmission were not reported because some cells had fewer than five cases. Population data are not available for risk groups; therefore, it is impossible to calculate rate by risk. A dash represents the absence of a rate.

## PEOPLE LIVING WITH HIV IN THE HOUSTON EMA

At the end of calendar year 2022, 33,397 people were living with HIV (PLWH) in the Houston EMA, a 5% increase from 2021 (Table 4). HIV prevalence also rose in 2022 to 508.8 people living with HIV (PLWH) for every 100,000 people in the Houston EMA, up from 494.4 in 2021. In EMA race/ethnicity categories, African Americans were the group with the highest proportion of PLWH in 2022 (47.2%), followed by Hispanic PLWH (31.6%). In 2021 and 2022, male-to-male sexual contact accounted for more than 60% of transmission risk.

**Table 4. People Living with HIV in the Six-County Houston EMA by Sex Assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2021 and 2022**

Characteristics	2021			2022		
	Cases		Rate	Cases		Rate
	<i>n</i>	%		<i>n</i>	%	
<b>Total</b>	31,816	100.0	494.4	33,397	100.0	508.8
<b>Sex Assigned at Birth</b>						
Female	7,673	24.1	237.6	7,923	23.7	240.3
Male	24,143	75.9	752.8	25,474	76.3	779.7
<b>Race/Ethnicity</b>						
Black/African American, not Hispanic	15,214	47.8	1316.3	15,773	47.2	1332.4
Hispanic/Latina, Latino	9,809	30.8	387.0	10,539	31.6	403.1
White, not Hispanic	5,088	16.0	242.9	5,210	15.6	250.7
Multiracial	1,231	3.9	1376.0	1,376	4.1	1351.6
Other	474	1.5	81.1	499	1.5	85.2
<b>Age<sup>a</sup></b>						
0–24	1,255	3.9	55.2	1,267	3.8	54.4
25–34	6,445	20.3	693.3	6,779	20.3	714.5
35–44	7,311	23.0	781.1	7,754	23.2	810.6
45–54	7,317	23.0	894.0	7,491	22.4	898.6
55–64	6,670	21.0	948.5	6,853	20.5	971.4
65+	2,818	8.9	371.7	3,253	9.7	410.7
<b>Transmission Risk<sup>b</sup></b>						
Male-to-male sexual contact	19,127	62.7	—	20,439	63.8	—
Persons using injectable drugs	2,382	7.8	—	2,388	7.5	—
Sex with male/Sex with female	8,676	28.4	—	8,921	27.8	—
Pediatric	330	1.1	—	290	0.9	—

*Note.* Rate, or prevalence, is per 100,000 people in the EMA. Data are suppressed by TDSHS when cells have fewer than five cases. Because of rounding and suppression of small case sizes, numbers and percentages may not equal column totals or 100%. EMA, Eligible Metropolitan Area; TDSHS, Texas Department of State Health Services.

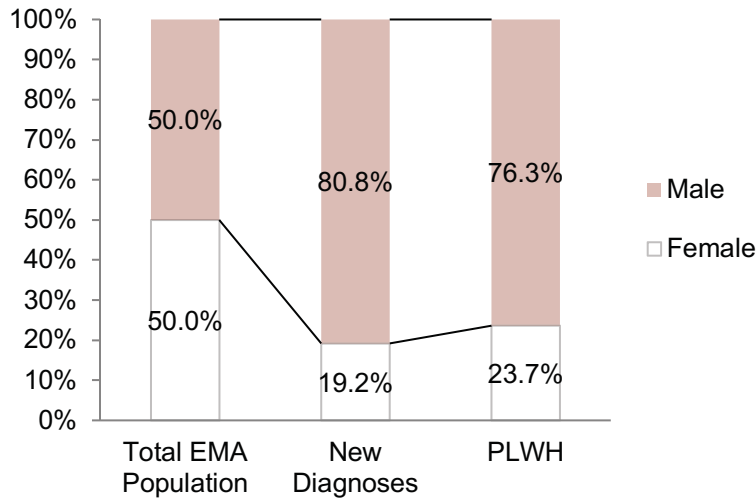
*Source.* HIV/STD Surveillance Unit, TDSHS, July 2024, and American Community Survey, 5-year Estimates for EMA counties.

<sup>a</sup> Age groups 0–12 years and 13–24 years were combined because some cells had fewer than five cases.

<sup>b</sup> Data not always available for all groups. Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk. A dash represents the absence of a rate.

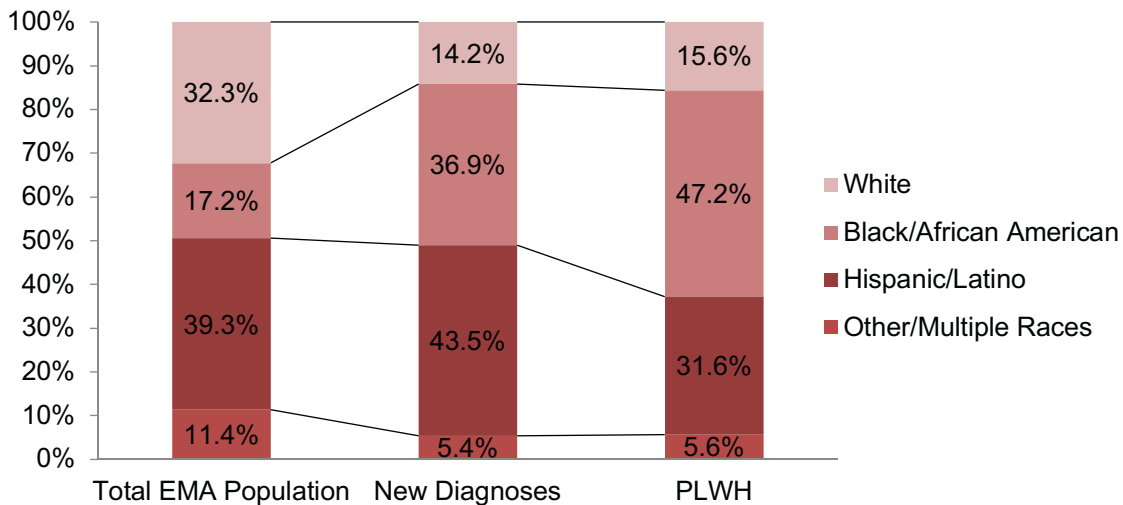
## COMPARISON OF THE HOUSTON EMA POPULATION TO THE POPULATION WITH HIV

**Sex Assigned at Birth.** In 2022, the Houston EMA population was divided equally between males and females measured by sex assigned at birth (Figure 3); however, males were more than four times more likely than females to be newly diagnosed with HIV (80.8% vs. 19.2%) and more than three times more likely to be living with HIV (76.3% vs. 23.7%). (See notes on p. 10 for Figures 3–5.)



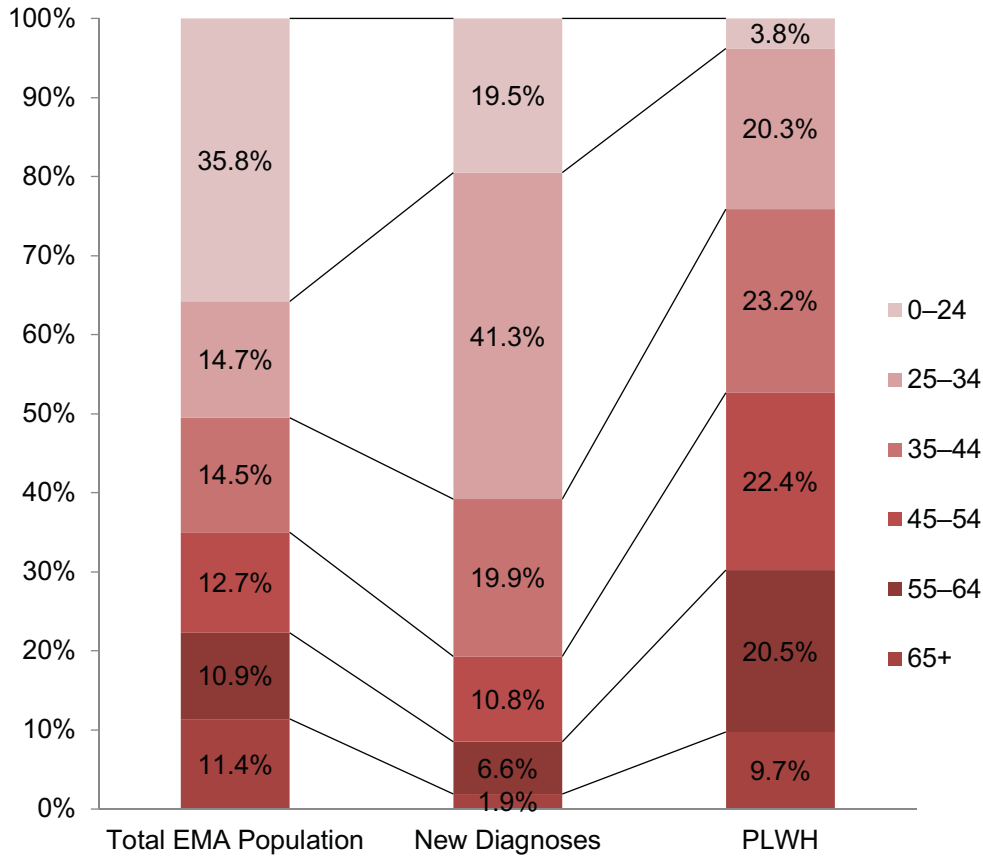
**Figure 3. Comparison of Total Population in the Houston EMA to People with HIV by Sex Assigned at Birth, 2022.** The general population of the six-county EMA was equally split between men and women, but men were four times more likely to be newly diagnosed and three times more likely to be living with HIV than were women.

**Race/Ethnicity.** In 2022, the Hispanic population outpaced all other groups in the New Diagnoses category by having 43.5% of new diagnoses (Figure 4), but African Americans maintained the largest contingent in the PLWH category (47.2%).



**Figure 4. Comparison of Total Population in the Houston EMA to People with HIV by Race and Ethnicity, 2022.** The general population of the six-county EMA was most likely to be Hispanic as was the newly diagnosed HIV population. However, in the PLWH category, African Americans were at 47.2% the largest subgroup.

**Age.** People ages 25 to 34 accounted for a much larger proportion of new HIV diagnoses in 2022 (41.3%) than their share of the Houston EMA population (14.7%) (Figure 5). Similarly, people ages 55 to 64 living with HIV (20.5%) represented almost twice the proportion of people their age living in the general population (10.9%).



**Figure 5. Comparison of Total Population in the Houston EMA to People with HIV by Age, 2022.** The general population of the six-county EMA was more likely to be young than the HIV groups: more than a third were 24 years old or younger (35.8%), and the median age for the six counties ranged from 28.7 to 37.4 years of age. More than 60% of new diagnoses were made in the two youngest age groups, which in the EMA made up only 50% of the general population. In contrast, the two oldest subgroups of the PLWH made up 30.2% of its population, whereas comparison values were 22.3% in the EMA and only 8.5% in the group newly diagnosed.

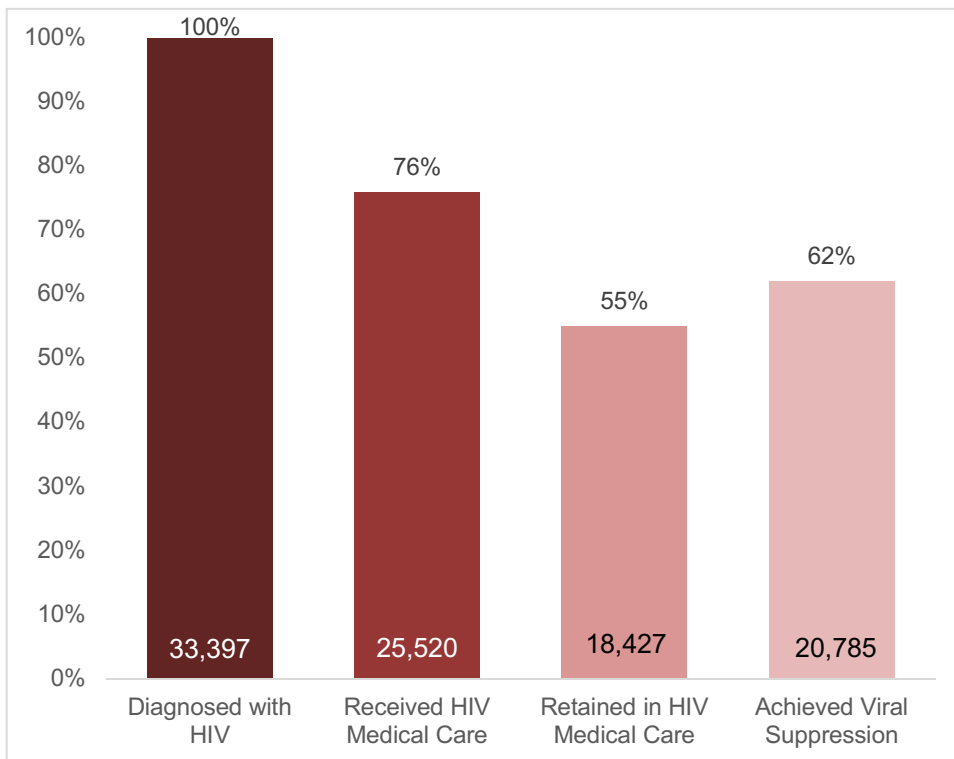
*Note.* New diagnoses were made January 1, 2022, through December 31, 2022. PLWH EMA data current as of December 31, 2022. Due to underreporting, transgender people are included in data by sex assigned at birth. Abbreviations: EMA, Eligible Metropolitan Area; PLWH, people living with HIV. *Source.* EMA population—U.S. Census Bureau, American Community Survey, 2022: ACS 5-Year Estimates Data Profiles; HIV populations—Texas Department of State Health Services, Texas Enhanced HIV and AIDS Reporting System data.



## THE HOUSTON EMA HIV CARE CONTINUUM

The Houston EMA HIV Care Continuum (Figure 6) depicts the number and percentage of PLWH in the six counties of the EMA at each stage of HIV care, from the total diagnosed with HIV to those whose disease is virally suppressed. Stakeholders in HIV care and education use this benchmark analysis to measure the extent to which PLWH have community-wide access to care and to identify potential service gaps. The methodology follows the Center for Disease Control and Prevention definition for a diagnosis-based HIV care continuum.

Among 33,397 HIV-diagnosed individuals in the Houston EMA in 2022, 76% had received care (at least one CD4 or viral load test in 2022); 55% were retained in HIV care (at least two CD4 or viral load tests in year, at least three months apart); and 62% reached viral load suppression (had  $\leq 200$  copies/mL at the most recent test during 2022). Overall, 69% were identified as being on antiretroviral therapy.



**Figure 6. The Six-County Houston EMA HIV Care Continuum, 2022.** Four essential measures in the methodology of the Centers for Disease Control and Prevention's HIV Care Continuum are based on being diagnosed, receiving HIV medical care, being retained in such care, and having clinical evidence of viral suppression. Diagnosed patients are identified as receiving care when they have a care visit documented by a CD4 or viral load measure in 2022 and having been retained in care by documented CD4 or viral load measures at two visits in 2022 that are 90 or more days apart. *Viral suppression* is defined as having a viral load value of  $\leq 200$  copies/mL at the most recent test in 2022. Data for linking to care, which measures those receiving an HIV diagnosis within 30 days having one or more documented CD4 or viral load tests, are not available. (Source: Texas Department of State Health Services [TDSHS] HIV Unmet Need Project, including data from the Texas Enhanced HIV AIDS Reporting System, TDSHS Electronic Laboratory Reporting, AIDS Regional Information and Evaluation System, AIDS Drug Assistance Program, and Medicaid and private payer data.)

## NEW HIV DIAGNOSES IN THE HOUSTON HSDA IN 2021 and 2022

New HIV diagnoses increased about 5% between 2021 and 2022 in the 10-county Houston HSDA (Table 5). Males constituted about 80% of the newly diagnosed population in both 2021 and 2022, and those diagnosed were in 2022 more likely to be Hispanic than any other race or ethnicity. Most often, those diagnosed were 25 to 34 years of age, and transmission was most likely to occur between men having sex with men.

**Table 5. New Diagnoses of HIV in the 10-County Houston HSDA by Sex Assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2021 and 2022**

Characteristics	2021			2022		
	Cases		Rate	Cases		Rate
	<i>n</i>	%		<i>n</i>	%	
<b>Total</b>	1,360	100.0	20.5	1,427	100.0	21.2
<b>Sex Assigned at Birth</b>						
Female	256	18.8	7.7	272	19.1	8.1
Male	1,104	81.2	33.4	1,155	80.9	34.4
<b>Race/Ethnicity</b>						
White, not Hispanic	160	11.8	7.4	217	15.2	10.0
Black/African American, not Hispanic	616	45.3	52.2	525	36.8	43.3
Hispanic/Latin	516	37.9	19.8	619	43.4	23.2
Multiracial	44	3.2	44.4	34	2.4	32.7
Other	24	1.8	4.2	32	2.2	5.4
<b>Age at Diagnosis<sup>a</sup></b>						
0–24	318	23.4	13.5	281	19.7	11.8
25–34	508	37.4	53.0	587	41.1	60.5
35–44	246	18.1	25.6	284	19.9	29.0
45–54	154	11.3	18.3	154	10.8	18.0
55–64	94	6.9	13.0	94	6.6	12.9
65+	40	2.9	5.1	27	1.9	3.3
<b>Transmission Risk<sup>b</sup></b>						
Male-to-male sexual contact (MSM)	974	71.7	—	1,014	71.3	—
Person who injects drugs (PWID)	79	5.8	—	79	5.6	—
MSM/PWID	35	2.6	—	37	2.6	—
Sex with male/Sex with female	271	19.9	—	293	20.6	—

*Note.* Rate, or prevalence, is per 100,000 people in the HSDA population. Data are suppressed by TDSHS when cells have fewer than five cases. Because of rounding and suppression of small case sizes, numbers and percentages may not equal column totals or 100%. HSDA, Health Service Delivery Area; TDSHS, Texas Department of State Health Services.

*Source.* TDSHS, HIV/STD Surveillance Unit, July 2024, and U.S. Census Bureau, American Community Survey, 2021, and 2022 5-year Estimates for HSDA counties.

<sup>a</sup> Age groups 0–12 years and 13–24 years were combined because in the 0–12 years category, some cells had fewer than five cases.

<sup>b</sup> Data for “Perinatal,” “Adult other,” and “Pediatric other” transmission were not reported because some cells had fewer than five cases. Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk. A dash represents absence of a rate.

## PEOPLE LIVING WITH HIV IN THE HOUSTON HSDA IN 2021 AND 2022

In 2021 and 2022, PLWH in the Houston HSDA were about three times more likely to be men than women and more likely to be African American (47%–48%) than Hispanic (31%–32%), White (16%), a member of any other racial or ethnic group, or multiracial. The largest age groups in the HSDA and EMA are the same—25–34 and 45–54 years—and the highest transmission risk—through male-to-male sexual contact—is the same. Prevalence rose in every category except in the multiracial group and in the youngest age group, which was also true in the Houston EMA for the same years.

**Table 6. People Living with a Diagnosis of HIV in the 10-County Houston HSDA by Sex Assigned at Birth, Race/Ethnicity, Age, and Transmission Risk, 2021 and 2022**

Characteristics	2021			2022		
	Cases		Rate	Cases		Rate
	<i>n</i>	%		<i>n</i>	%	
<b>Total</b>	32,118	100.0	486.2	33,705	100.0	500.4
<b>Sex Assigned at Birth</b>						
Female	7,772	24.2	234.9	8,019	23.8	237.5
Male	24,346	75.8	737.9	25,686	76.2	764.5
<b>Race/Ethnicity</b>						
Black/African American, not Hispanic	15,332	47.7	1294.8	15,890	47.1	1311.3
Hispanic/Latinx	9,878	30.8	382.5	10,609	31.5	398.4
White, not Hispanic	5,188	16.2	237.4	5,316	15.8	245.0
Multiracial	1,246	3.9	1364.0	1,391	4.1	1339.3
Other	474	1.5	80.8	499	1.5	84.9
<b>Age<sup>a</sup></b>						
0–24	1,268	3.9	54.4	1,283	3.8	53.8
25–34	6,501	20.2	683.2	6,833	20.3	704.1
35–44	7,376	23.0	770.6	7,817	23.2	798.9
45–54	7,397	23.0	881.5	7,574	22.5	886.6
55–64	6,731	21.0	929.3	6,916	20.5	951.9
65+	2,845	8.9	361.3	3,282	9.7	399.2
<b>Transmission Risk<sup>b</sup></b>						
Male-to-male sexual contact	19,270	62.6	—	20,591	63.7	—
People who Inject drugs	2,414	7.8	—	2,425	7.5	—
Men who have sex with women	2,371	7.7	—	2,389	7.4	—
Women who have sex with men	6,405	20.8	—	6,624	20.5	—
Pediatric	337	1.1	—	296	0.9	—

*Note.* Rate, or prevalence, is *n* per 100,000 people in the HSDA. Data are suppressed by TDSHS when cells have fewer than five cases. Because of rounding, numbers and percentages may not equal column totals or 100%. HSDA, Health Services Delivery Area; TDSHS, Texas Department of State Health Services.

*Source.* TDSHS, HIV/STD Surveillance Unit, July 2024, and U.S. Census Bureau, American Community Survey, 2021, and 2022 5-year Estimates for HSDA counties.

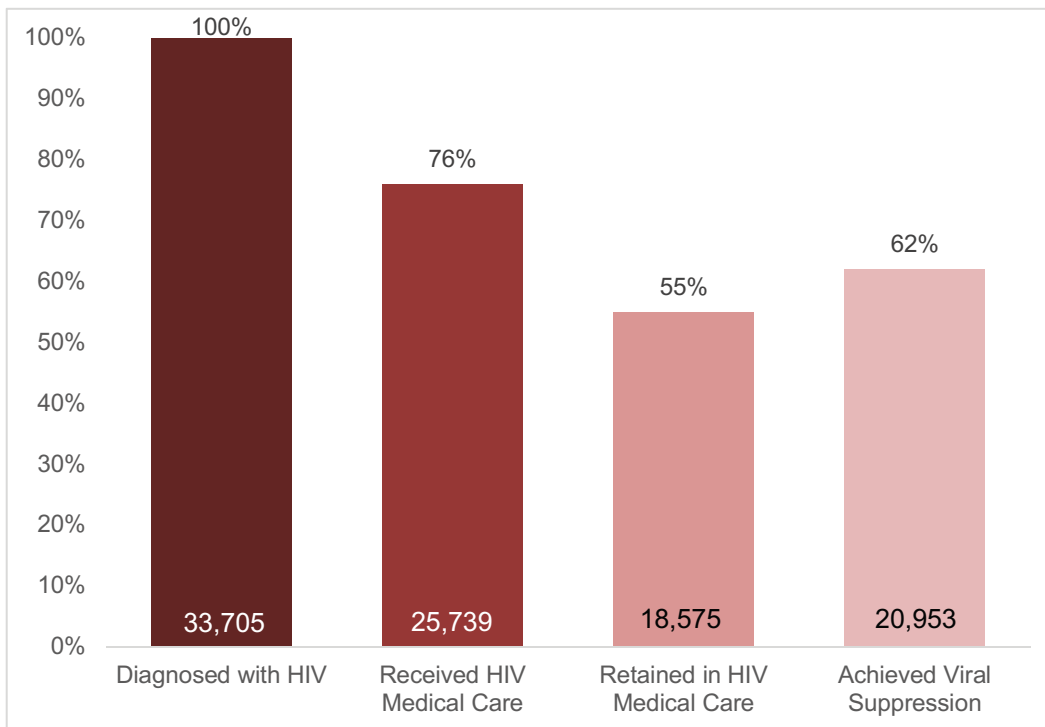
<sup>a</sup> Age groups 0–12 years and 13–24 years were combined because some cells in the 0–12 years category had fewer than five cases.

<sup>b</sup> Data for “Adult other” and “Pediatric other” were not reported because some cells had fewer than five cases. Population data are not available for risk groups; therefore, it is not possible to calculate rate by risk.

## THE HOUSTON HSDA HIV CARE CONTINUUM

The Houston HSDA HIV Care Continuum (Figure 7) depicts the number and percentage of PLWH in the 10 counties of the HSDA at each stage of HIV care during 2022, from being diagnosed with HIV to viral suppression. Stakeholders in HIV care, prevention, and education use this benchmark analysis to measure the extent to which PLWH have community-wide access to care and to identify potential service gaps.

Among 33,705 individuals with HIV living in the Houston HSDA in 2022, 76% had received care (at least one CD4 or viral load test in 2022); 55% were retained in HIV care (at least two CD4 or viral load tests in the year, at least three months apart); and 62% reached viral load suppression (had  $\leq 200$  copies/mL at the most recent test during 2022). The 2022 values for a subset—12,762 in care in Ryan White clinics—were higher: 93% received HIV care, 76% were retained in care, and 76.8% achieved viral suppression, according to the Ryan White Grant Administration in 2024.



**Figure 7. The 10-County Houston HSDA HIV Care Continuum, 2022.** Four essential measures in the methodology of the Centers for Disease Control and Prevention’s HIV Care Continuum are based on being diagnosed, receiving HIV medical care, being retained in such care, and having clinical evidence of viral suppression. Diagnosed patients are identified as receiving care when they have a care visit documented by a CD4 or viral load measure in 2022 and having been retained in care by documented CD4 or viral load measures at two visits in 2022 that are 90 or more days apart. *Viral suppression* is defined as having a viral load value of  $\leq 200$  copies/mL at the most recent test in 2022. Data for linking to care, which measures those receiving an HIV diagnosis within 30 days having one or more documented CD4 or viral load tests, are not available. (Source: Texas Department of State Health Services [TDSHS] HIV Unmet Need Project, including data from the Texas Enhanced HIV AIDS Reporting System, TDSHS Electronic Laboratory Reporting, AIDS Regional Information and Evaluation System, AIDS Drug Assistance Program, and Medicaid and private payer data.)

# **Quality Improvement Committee Report**



# Mental Health Services Service Standard

Texas Department of State Health Services, HIV Care Services Group—[HIV/STD Program](#) | [Texas DSHS](#)

Subcategories	Service Units
Group	Per visit
Individual	Per visit
Mental Health Services	Per visit
Psychiatric Evaluation	Per visit
Psychiatric Follow-Up	Per visit

## Health Resources and Services Administration (HRSA)

### Description:

Mental Health (MH) Services are the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to clients living with HIV. Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by a mental health professional licensed or authorized with the state to render such services. Such professionals typically include psychiatrists, advanced practice nurses, psychologists, licensed professional counselors, and licensed clinical social workers.

### Limitations:

Agencies may only provide Mental Health Services for people living with HIV who are eligible for HRSA Ryan White HIV/AIDS Program (RWHAP) services.

Only mental health practitioners licensed to practice in the State of Texas may provide services.



## Services:

Allowable services include outpatient mental health therapy and counseling, and may consist of:

- Mental health assessment
- Treatment planning
- Treatment provision
- Individual psychotherapy
- Conjoint psychotherapy
- Group psychotherapy
- Psychiatric medication assessment, prescription, and monitoring
- Psychotropic medication management
- Drop-in psychotherapy groups
- Emergency and crisis intervention

Providers must use mental health interventions based on proven clinical methods and provided in accordance with legal, licensing, and ethical standards. Client confidentiality is of critical importance and agencies must maintain confidentiality unless otherwise indicated based on federal, state, and local laws and guidelines. All programs must comply with the Health Insurance Portability and Accountability Act (HIPAA) standards for privacy practices and protected health information (PHI).

The State of Texas considers mental health services such as assessments or psychotherapy that providers deliver via electronic means to be telemedicine rather than telehealth. Agencies must provide these services in accordance with the State of Texas mental health provider practice requirements: [Texas Occupations Code, Title 3 Health Professions, chapter 111](#).

When a provider delivers psychiatry via electronic means, the State of Texas considers this telemedicine and the provider must follow guidelines for telemedicine as noted in Texas Medical Board (TMB) guidelines for providing telemedicine: [Texas Administrative Code, Texas Medical Board, Rules, Title 22, Part 9, Chapter 174](#).

## Universal Standards:

Service providers for Mental Health Services must follow [HRSA and DSHS Universal Standards](#) 1-## and ##-##.

## Service Standards and Measures:

The following standards and measures are guides to improving health outcomes for people living with HIV throughout the State of Texas within the Ryan White Part B and State Services Program.

Standard	Measure
<p><b>Client Orientation:</b> Agencies will provide orientation to all new clients to introduce them to program services, ensure their understanding of available treatment, and empower them in accessing services. Orientation includes written or verbal information provided to the client on the following:</p> <ul style="list-style-type: none"> <li>• Services available</li> <li>• Clinic hours and procedures for after-hours emergencies and non-life-threatening urgent situations</li> <li>• How to reach staff member(s) as appropriate</li> <li>• Scheduling appointments</li> <li>• Client responsibilities for receiving program services and the agency's responsibilities for delivering them</li> <li>• Client rights, including the grievance process</li> </ul>	<ol style="list-style-type: none"> <li>1. Percentage of new clients with documentation of client orientation. Orientation must include:               <ol style="list-style-type: none"> <li>1a: Services available</li> <li>1b: Clinic hours and procedures for after-hours emergencies and non-life-threatening urgent situations</li> <li>1c: How to contact the agency or provider and schedule appointments</li> <li>1d: Client rights and responsibilities</li> </ol> </li> </ol>

**Group Therapy:** A licensed mental health provider must conduct or supervise all group therapy sessions provided under the Mental Health service category. Agencies may provide non-clinical HIV support groups under the [Psychosocial Support Services](#) category.

The mental health provider must document a review of group rules with each client. Group rules may address the following:

- Confidentiality
- Privacy
- Respectful communication
- Attendance and participation
- Contact between members outside of the group setting

For each group therapy session, the provider must document the date of the session and the attendance and participation of each client.

2. Percentage of clients with documentation of attendance and participation in group therapy sessions.
3. Percentage of clients with documentation of group rules reviewed.

**Mental Health Assessment:** A licensed mental health professional shall conduct a mental health assessment for all clients receiving individual counseling or psychiatric services. Staff must complete this assessment no later than the third counseling session and should ensure the assessment includes, as applicable:

- Presenting problems
- Mental status evaluation
- Cognitive assessment
- Current risk of danger to self and others
- Client strengths and challenges, coping mechanisms, and self-help strategies
- Medical history
- Current medications
- Substance use history
- Psychosocial history, which may include:
  - Living situation
  - Social support and family relationships
  - Education and employment history, including military service
  - Sexual and relationship history and status
  - Physical, emotional, or sexual abuse history
  - Domestic violence assessment
  - Trauma assessment
  - Legal history
  - Leisure and recreational activities

Staff should assess clients for care coordination needs and make referrals to case management programs as indicated. If pressing mental health needs prevent the provider from finalizing the assessment by the third session, then the provider should document this in the client's primary record.

4. Percentage of clients with documentation of a completed mental health assessment by their third appointment.

<p><b>Treatment Plan and Services:</b> All client files should contain a detailed treatment plan and documentation of services provided. The provider must complete a treatment plan within 30 days of the mental health assessment and develop the plan in conjunction with the client. The treatment plan should include:</p> <ul style="list-style-type: none"> <li>• Diagnosed mental health issue(s)</li> <li>• Goals and objectives of treatment</li> <li>• Treatment type (individual, group)</li> <li>• Start date for mental health services</li> <li>• Recommended number of sessions</li> <li>• Date for reassessment</li> <li>• Projected treatment end date (estimated)</li> <li>• Any recommendations for follow up</li> </ul> <p>The mental health professional must sign the treatment plan; electronic signatures are acceptable. Staff should review and modify treatment plans midway through the number of determined sessions, or more frequently as clinically indicated.</p> <p>The professional must provide services according to the individual's treatment plan and document services in the client's primary record. Staff should complete progress notes according to the agency's standardized format for each session and notes should include:</p> <ul style="list-style-type: none"> <li>• Client name</li> <li>• Session date</li> <li>• Focus of the session</li> <li>• Interventions</li> <li>• Progress on treatment goals</li> <li>• Newly identified issues or goals</li> <li>• Counselor signature and authentication (credentials)</li> </ul>	<ol style="list-style-type: none"> <li>5. Percentage of clients with a treatment plan that includes:       <ol style="list-style-type: none"> <li>5a: Diagnosed mental health issue(s)</li> <li>5b: Goals and objectives of treatment</li> <li>5c: Treatment type (individual, group)</li> <li>5d: Start date for mental health services</li> <li>5e: Recommended number of sessions</li> <li>5f: Date for reassessment</li> <li>5g: Projected treatment end date (estimated)</li> <li>5h: Any recommendations for follow-up</li> <li>5i: Signature of professional rendering services</li> </ol> </li> <li>6. Percentage of clients with treatment plans reviewed or modified at least once, midway through the number of determined sessions.</li> <li>7. Percentage of clients with documentation for each unit of service that includes the date and type of services provided.</li> </ol>
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DSHS will not review progress notes for content to protect client privacy. However, agencies must maintain documentation of dates of service and types of service provided and must make these records available for subrecipient monitoring. Services provided should match the client's treatment plan.

Treatment should include counseling regarding the following, as clinically appropriate:

- Healthy behaviors and health promotion
- Substance use disorder
- Treatment adherence
- Development of social support systems
- Community resources
- Maximizing social and adaptive functioning
- The role of spirituality and religion in a client's life, health, and future goals

In urgent, non-life-threatening circumstances, agencies should make an appointment for the client within one business day. If an agency cannot provide the needed services, the agency will offer to refer the client to another organization that can provide the services and must make this referral within one business day.

<p><b>Psychotropic Medication Management:</b> Agencies should ensure psychotropic medication management services are available for all clients either directly or through referral. A physician, midlevel provider, or Doctor of Pharmacy (PharmD) can provide psychotropic medication management services.</p> <p>Providers who prescribe psychotropic medication should discuss any concerns about prescribed medication with the client (side effects, dosage, interactions with HIV medications, etc.).</p> <p>Mental health providers with prescriptive authority will follow all regulations required for prescribing psychoactive medications, as outlined by the <a href="#">Texas Administrative Code, Title 25, Part1, Chapter 415, Subchapter A, Rule 415.10</a></p>	<p>8. Percentage of clients accessing medication management services with documentation of education regarding their medications.</p>
<p><b>Coordination of Care:</b> Providers should coordinate care across the mental health team. Agencies should ensure the client is involved in all decision-making, including whether to initiate or defer treatments. The full care team should assist in educating the client, providing support, and monitoring mental health treatment adherence, when appropriate. Providers can use problem-solving strategies or referrals for clients facing adherence challenges (e.g., behavioral contracts). Providers should consult medical care providers, psychiatric care providers, and pharmacists as appropriate regarding medication management, interactions, and treatment adherence.</p> <p>Providers who prescribe psychotropic medication should also encourage the client to discuss concerns about medications with their HIV-prescribing clinician so that the provider can manage medications effectively. Prescribing providers or their staff should notify the client's HIV treatment provider of medication changes.</p>	<p>9. Percentage of clients with changes to psychotropic medications who have documentation that staff notified their HIV treatment providers of the change (as permitted by the client's signed consent to share information).</p>

<p><b>Referrals:</b> As needed, mental health providers should refer clients to a full range of medical and mental health services, including:</p> <ul style="list-style-type: none"> <li>• Pharmacist for psychotropic medication management</li> <li>• Neuropsychological testing</li> <li>• Day treatment programs</li> <li>• In-patient hospitalization</li> <li>• Family or couples therapy</li> </ul> <p>Counseling providers should evaluate clients to determine if there is a need for psychiatric intervention and should refer clients to psychiatric services as needed.</p> <p>Psychiatric providers should evaluate clients to determine if there is a need for counseling services and should refer clients to counseling as needed.</p>	<p>10. Percentage of clients with documentation of referrals, as applicable, for other medical or mental health services.</p>
<p><b>Discharge Planning:</b> Providers should conduct discharge planning with each client when the client has met treatment goals. When an agency discharges client after meeting treatment goals, discharge documentation must include:</p> <ul style="list-style-type: none"> <li>• Summary of needs at admission</li> <li>• Summary of services provided</li> <li>• Goals and objectives completed during treatment</li> <li>• Signature of provider</li> </ul> <p>Providers may initiate case closure for client non-attendance or if a client elects to discontinue services, in accordance with the agency discharge policy. Case closure documentation must include:</p> <ul style="list-style-type: none"> <li>• Circumstances of discharge</li> <li>• Summary of needs at admission</li> <li>• Summary of services provided</li> <li>• Goals and objectives completed during treatment</li> <li>• Signature of provider</li> </ul>	<p>11. Percentage of clients with documentation of discharge or case closure, as applicable.</p>



## References:

Division of Metropolitan HIV/AIDS Programs, HIV/AIDS Bureau (HAB). [Ryan White HIV/AIDS Program \(RWHAP\) National Monitoring Standards for RWHAP Part A Recipients](#). Health Resources and Services Administration, June 2023.

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Texas Department of State Health Services HIV/STD Program. [Guidance for the Use of Telemedicine, Teledentistry, and Telehealth for HIV Core and Support Services](#). *Texas Department of State Health Services*, Accessed May 7, 2024.

U.S. Department of Health and Human Services, Health Resources and Services Administration. [Guide for HIV/AIDS Clinical Care](#). 2014 Edition ed., Rockville, MD, U.S. Department of Health and Human Services, 2014.

Location of Change	Prior Version	New Version	Notes
Client Orientation	<p>Agencies provide orientation to all new clients to introduce them to program services, ensure their understanding of available treatment, and empower them in accessing services. Orientation includes written or verbal information provided to the client on the following:</p> <ul style="list-style-type: none"> <li>• Services available</li> <li>• Clinic hours and procedures for after-hours emergencies and non-life-threatening urgent situations</li> <li>• How to reach staff member(s) as appropriate</li> <li>• Scheduling appointments</li> <li>• Client responsibilities for receiving program services and the agency's responsibilities for delivering them</li> <li>• Client rights, including the grievance process</li> <li>• Behavior that is considered unacceptable and the agency's progressive action for suspension of services; see DSHS Policies 530.003 and 530.002</li> </ul> <p>Measure:  1. Percentage of new clients with documentation of client orientation.  Orientation must consist of:  1a: Services available  1b: Clinic hours and procedures for after-hours emergencies and non-life-threatening urgent situations  1c: How to reach staff member(s) as appropriate  1d: Scheduling appointments  1e: Client responsibilities for receiving program services and the agency's responsibilities for delivering them  1f: Client rights, including the grievance process  1g: Behavior that is considered unacceptable and the agency's progressive action for suspension of services.</p>	<p>Agencies will provide orientation to all new clients to introduce them to program services, ensure their understanding of available treatment, and empower them in accessing services. Orientation includes written or verbal information provided to the client on the following:</p> <ul style="list-style-type: none"> <li>• Services available</li> <li>• Clinic hours and procedures for after-hours emergencies and non-life-threatening urgent situations</li> <li>• How to reach staff member(s) as appropriate</li> <li>• Scheduling appointments</li> <li>• Client responsibilities for receiving program services and the agency's responsibilities for delivering them</li> <li>• Client rights, including the grievance process</li> </ul> <p>Measure 1. Percentage of new clients with documentation of client orientation. Orientation must include:  1a: Services available  1b: Clinic hours and procedures for after-hours emergencies and non-life-threatening urgent situations  1c: How to contact the agency or provider and schedule appointments  1d: Client rights and responsibilities</p>	<p>Removed language in standard/measure 1 regarding unacceptable behavior to avoid the risk of reinforcing stigmas about mental health and disruptive or dangerous behavior. In addition, policy requirements exist in Universal Standards for providers of MH services.</p>

Location of Change	Prior Version	New Version	Notes
Group Therapy	N/A	<p>A licensed mental health provider must conduct or supervise all group therapy sessions provided under the Mental Health service category. Agencies may provide non-clinical HIV support groups under the Psychosocial Support Services category.</p> <p>The mental health provider must document a review of group rules with each client. Group rules may address the following:</p> <ul style="list-style-type: none"> <li>•Confidentiality</li> <li>•Privacy</li> <li>•Respectful communication</li> <li>•Attendance and participation</li> <li>•Contact between members outside of the group setting</li> </ul> <p>For each group therapy session, the provider must document the date of the session and the attendance and participation of each client.</p> <p>New Measure: Percentage of clients with documentation of attendance and participation in group therapy sessions.</p> <p>New Measure: Percentage of clients with documentation of group rules reviewed.</p>	<p>New standard/measures added for group therapy to align with MH guidelines. Measure regarding review of group rules pertains to group member agreements to ground rules around confidentiality, communication between members outside of group, etc.</p>
Treatment Plan and Services	N/A	<p>New Measure 7. Percentage of clients with documentation for each unit of service that includes the date and type of services provided.</p>	<p>Added measure to align with NMS B.10.iii: "Documentation of services provided, dates, and consistency with RWHAP requirements and with individual client treatment plans."</p>

Location of Change	Prior Version	New Version	Notes
Psychiatric Referral	<p>Providers should evaluate clients to determine if there is a need for psychiatric intervention. Providers should refer clients with a need for psychiatric intervention to psychiatric services.</p> <p>Measure: 6. Percentage of clients with a documented need for psychiatric intervention who were referred to services.</p>	Removed.	Standard and measure 6 were removed as a separate section and added to the Referrals section, with specific reference to psychiatric referrals.
Psychotropic Medication Management	Measure 8. Percentage of clients with changes to psychotropic or psychoactive medications who have documented evidence that this change was shared with the HIV treatment provider (as permitted by the client's signed consent to share information).	Removed.	Measure 8 was removed and added to the Coordination of Care section.
Discharge Planning	<p>Providers should conduct discharge planning with each client when treatment goals are met or when the client has discontinued therapy, either by initiating closure or as evidenced by non-attendance of scheduled appointments. Documentation for discharge planning will include, as applicable:</p> <ul style="list-style-type: none"> <li>• Circumstances of discharge</li> <li>• Summary of needs at admission</li> <li>• Summary of services provided</li> <li>• Goals and objectives completed during counseling</li> <li>• Discharge plan</li> <li>• Counselor authentication, in accordance with current licensure requirements</li> </ul>	<p>Providers should conduct discharge planning with each client when the client has met treatment goals. When an agency discharges client after meeting treatment goals, discharge documentation must include:</p> <ul style="list-style-type: none"> <li>• Summary of needs at admission</li> <li>• Summary of services provided</li> <li>• Goals and objectives completed during treatment</li> <li>• Signature of provider</li> </ul> <p>Providers may initiate case closure for client non-attendance or if a client elects to discontinue services, in accordance with the agency discharge policy. Case closure documentation must include:</p> <ul style="list-style-type: none"> <li>• Circumstances of discharge</li> <li>• Summary of needs at admission</li> <li>• Summary of services provided</li> <li>• Goals and objectives completed during treatment</li> <li>• Signature of provider</li> </ul>	Edited list to provide better guidance about requirements of discharge documentation (discharge plan for planned discharge, case closure note for non-attendance or voluntary client discontinuation).



# Oral Health Care Service Standard

Texas Department of State Health Services, HIV Care Services Group — [HIV/STD Program | Texas DSHS](#)

Subcategories	Service Units
Dental History	Per visit
Oral Health Care	Per visit
Periodontal Screening	Per visit
Prophylaxis	Per visit
Routine Treatment	Per visit
Specialty	Per visit
X-rays	Per payment

## Health Resources & Services Administration (HRSA)

### Description:

Oral Health Care (OH) activities include outpatient diagnostics, prevention, and therapy provided by dental health care professionals, including general dental practitioners, dental specialists, dental hygienists, and licensed dental assistants.

### Limitations:

HRSA prohibits cosmetic dentistry for cosmetic purposes only.

### Services:

Services include routine dental examinations, prophylaxes, radiographs, restorative therapies, periodontal therapies, basic oral surgery (e.g., extractions and biopsy), endodontics, and prosthodontics. Agencies will complete referrals for specialized care if clinically indicated.

Providers will provide emergency procedures on a walk-in basis as availability and funding allow. Funded OH providers may provide necessary emergency care regardless of a client's annual benefit balance.

Oral health services are an allowable core service with an expenditure cap of \$3,000 per client per calendar year. Local service regions may set additional limitations on the type or number of procedures covered or may set a lower expenditure cap, so long as they apply such criteria equitably across the region and limitations do not restrict eligible individuals from receiving needed oral health services outlined in their individualized dental treatment plan.

In cases of emergency need or where a client needs extensive care, the maximum amount may exceed the cap. Dental providers must document the reason for exceeding the yearly maximum amount and must have documented approval from the local Administrative Agency (AA) for purposes of funds only, but not the appropriateness of the clinical procedure.

### **Universal Standards:**

Service providers for Oral Health Services must follow [HRSA and DSHS Universal Standards](#) 1-## and ##-##.

## Service Standards and Measures:

The following standards and measures are guides to improving health outcomes for people living with HIV throughout the State of Texas within the Ryan White Part B and State Services Program.

Standard	Measure
<p><b>Dental and Medical History:</b> To develop an appropriate treatment plan, the oral health care provider will obtain information about the client’s health and medication status. At a minimum, the provider will obtain and review medical history and conduct a limited physical evaluation at the initial appointment and update annually.</p> <p>This information may include the following:</p> <ul style="list-style-type: none"> <li>• Chief complaint</li> <li>• HIV-related history, including information on the client’s HIV-treating provider</li> <li>• Pregnancy and breastfeeding status</li> <li>• Current medications, including medications affecting coagulation and osteoporotic medications</li> <li>• Allergies and drug sensitivities</li> <li>• Alcohol and other drug use</li> <li>• Tobacco use</li> <li>• Physical and mental health diagnoses, including chronic conditions</li> <li>• Usual oral hygiene</li> <li>• Date of last dental examination</li> </ul>	<ol style="list-style-type: none"> <li>1. Percentage of clients who had a dental and medical health history (initial or updated) at least once in the measurement year.</li> </ol>

<p><b>Limited Physical Examination:</b> The oral health provider is responsible for completing an initial limited physical examination in accordance with the <a href="#">Texas Board of Dental Examiners</a>, which will include, at a minimum:</p> <ul style="list-style-type: none"> <li>• Blood pressure</li> <li>• Heart rate</li> </ul> <p>Dental practitioners will also record blood pressure and pulse heart rate prior to invasive procedures involving local anesthetics, sedation and/or anesthesia. If the dental practitioner cannot obtain a client’s vital signs, they will document in the client’s chart the reason the attempt was unsuccessful.</p>	<p>2. Percentage of clients who had a limited physical examination, consisting of blood pressure and heart rate check at a minimum, performed at least once in the measurement year.</p>
<p><b>Oral Examination:</b> Providers will conduct an initial comprehensive oral exam, a periodic recall oral evaluation, or a problem-focused oral exam once per year. This will consist of one of the following:</p> <ul style="list-style-type: none"> <li>• Problem-focused oral evaluation for clients with an acute concern</li> <li>• Comprehensive oral evaluation, to include x-rays (full mouth and panoramic), new client</li> <li>• Periodic oral evaluation to include bitewing x-rays, established client</li> </ul> <p>If x-rays are not indicated for a given client, providers should document the reason (e.g., recent x-rays were available from a previous dental provider).</p> <p>Oral examinations should include the following, as indicated:</p> <ul style="list-style-type: none"> <li>• Evaluation and recording of dental caries</li> <li>• Evaluation and recording of missing, misaligned, or unerupted teeth</li> </ul>	<p>3. Percentage of clients who had a documented oral examination completed within the measurement year.</p>



<ul style="list-style-type: none"> <li>• Evaluation and recording of restorations</li> <li>• Evaluation and recording of occlusal relationships</li> <li>• Evaluation and recording of dysplastic oral cancerous lesions</li> </ul>	
<p><b>Periodontal Screening or Examination:</b> Providers will conduct a periodontal screen or exam at least annually for clients. This may consist of either a comprehensive initial screen or an annual re-evaluation. Exclusions include:</p> <ul style="list-style-type: none"> <li>• Clients who had only an evaluation or treatment for a dental emergency in the measurement year</li> <li>• Edentulous clients (complete)</li> <li>• Clients who were &lt;13 years of age during the measurement year</li> </ul> <p>The initial periodontal screen will include the assessment of medical and dental histories, the quantity and quality of attached gingiva, bleeding, tooth mobility, and a radiological review of the status of the periodontium and dental implants.</p> <p>Annual re-evaluation will include follow-up on previously identified issues and evaluation for any new or emerging periodontal concerns.</p> <p>Some forms of periodontal disease may be more severe in individuals affected with immune system disorders. Clients with HIV may have especially severe forms of periodontal disease, and the incidence of necrotizing periodontal diseases may increase with clients with AIDS.</p>	<p>4. Percentage of clients who had a periodontal screen or examination at least once in the measurement year, unless exclusions apply.</p>

<p><b>Dental Treatment Plan:</b> The provider will develop a dental treatment plan that includes preventive care, maintenance, and elimination of oral pathology and will discuss this plan with the client. Oral health providers will select treatment options in collaboration with the client.</p> <p>Treatment plans will be appropriate for the client’s health status, financial status, and individual preference, and must include, as clinically indicated:</p> <ul style="list-style-type: none"> <li>• Provision for the relief of pain</li> <li>• Elimination of infection</li> <li>• Preventive care</li> <li>• Periodontal treatment</li> <li>• Elimination of caries</li> <li>• Replacement or maintenance of tooth space or function</li> <li>• Consultation or referral for conditions where treatment is beyond the scope of services offered</li> <li>• Determination of adequate recall interval</li> <li>• Invasive procedure risk assessment (prior to oral surgery, extraction, or other invasive procedure)</li> </ul> <p>The oral health care professional providing the services must sign the dental treatment plan (electronic signatures are acceptable).</p>	<p>5. Percentage of clients who had a dental treatment plan developed or updated at least once in the measurement year.</p>
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<p><b>Initial Treatment Plan:</b> New clients will receive a treatment plan that includes prevention, maintenance, and elimination of oral pathology resulting from dental caries or periodontal disease. The dental provider will complete this plan within the first year of services. The plan should include, as appropriate:</p> <ul style="list-style-type: none"> <li>• Restorative treatment</li> <li>• Basic periodontal therapy (nonsurgical)</li> <li>• Basic oral surgery that includes extractions and biopsy</li> <li>• Non-surgical endodontic therapy if the tooth is restorable</li> <li>• Space maintenance and tooth eruption guidance for transitional dentition.</li> </ul> <p>If providers complete care on schedule, they will complete the initial treatment within 12 months of initiating treatment. If the provider is unable to complete the initial treatment plan within 12 months, they should document the reasons in the client record.</p>	<p>6. Percentage of clients with an initial treatment plan completed within 12 months.</p>
<p><b>Oral Health Education:</b> A licensed dentist, dental hygienist, dental assistant, or dental case manager will provide and document oral health education. Education will address the following topics:</p> <ul style="list-style-type: none"> <li>• Oral hygiene instruction</li> <li>• Daily brushing and flossing (or other interproximal cleaning) or prosthetic care to remove plaque</li> <li>• Daily use of over-the-counter fluorides to prevent or reduce cavities when appropriate and applicable to the client</li> <li>• Smoking or tobacco cessation counseling as indicated</li> <li>• The impact of poor oral hygiene and periodontal disease on overall health (oral-systemic health)</li> </ul>	<p>7. Percentage of clients who received oral health education at least once in the measurement year. This includes all of the following:</p> <p>7a: Daily brushing and flossing (or other interproximal cleaning) or prosthetic care to remove plaque.</p> <p>7b: Daily use of over-the-counter fluorides to prevent or reduce cavities when appropriate and applicable to the client.</p> <p>7c: Smoking or tobacco cessation counseling as indicated.</p>

<p>Additional areas for instruction may include nutrition. For pediatric clients, staff will provide oral health education to parents and caregivers and will ensure information is age appropriate.</p>	
<p><b>Referrals:</b> Providers will place referrals for other services when specialized oral health care is indicated or when staff identify other medical issues during dental care. Staff will document the referral and follow-up in the client’s chart, including the outcomes of the referral.</p>	<p>8. Percentage of clients who received referrals with documentation of the outcomes of the referral in the oral health care record.</p>
<p><b>Expenditure Documentation:</b> In the cases of emergency need or where a client needs extensive care, the maximum cost may exceed the \$3000 per client per calendar year expenditure cap. Dental providers must document the reason for exceeding the yearly maximum amount and must have documented approval from the local AA for the purposes of funds only, but not the appropriateness of the clinical procedure.</p>	<p>9. If the cost of dental care exceeded the annual maximum amount for Ryan White and State Services funding, the provider documented the reason in the client's oral health care record and the AA approved a waiver.</p>

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Human Immunodeficiency Virus (HIV). <https://www.ada.org/resources/ada-library/oral-health-topics/hiv/>. ADA, August 29, 2023.

Location of Change	Prior Version	New Version	Notes
Oral Examination	<p>Clients must have an initial comprehensive oral exam, a periodic recall oral evaluation, or a problem-focused oral exam once per year. This should consist of one of the following:</p> <ul style="list-style-type: none"> <li>• Comprehensive oral evaluation, to include x-rays (full mouth and panoramic), new client</li> <li>• Periodic oral evaluation to include bitewing x-rays, established client</li> <li>• Problem-focused oral evaluation for clients with an acute concern</li> </ul>	<p>Providers will conduct an initial comprehensive oral exam, a periodic recall oral evaluation, or a problem-focused oral exam once per year. This will consist of one of the following:</p> <ul style="list-style-type: none"> <li>• Problem-focused oral evaluation for clients with an acute concern</li> <li>• Comprehensive oral evaluation, to include x-rays (full mouth and panoramic), new client</li> <li>• Periodic oral evaluation to include bitewing x-rays, established client</li> </ul> <p>If x-rays are not indicated for a given client, providers should document the reason (e.g., recent x-rays were available from a previous dental provider).</p> <p>Oral examinations should include the following, as indicated:</p> <ul style="list-style-type: none"> <li>• Evaluation and recording of dental caries</li> <li>• Evaluation and recording of missing, misaligned, or unerupted teeth</li> <li>• Evaluation and recording of restorations</li> <li>• Evaluation and recording of occlusal relationships</li> <li>• Evaluation and recording of dysplastic oral cancerous lesions</li> </ul>	<p>Language was added to this standard regarding documentation of the reason that x-rays are not indicated. Reason: It may not always be necessary to take a full set of x-rays AND a panoramic on new patients. (Maybe they brought recent x-rays with them from their previous dentist, etc.).</p> <p>Language listing the elements of the oral examination was moved to this standard from the "Periodontal Screening or Examination" standard below, as these elements are more appropriate for an oral examination.</p>
Periodontal Screening or Examination	<p>All clients should receive a periodontal screen or exam at least annually unless the client was only seen for evaluation or treatment of a dental emergency. This may consist of either a comprehensive initial screen or an annual re-evaluation.</p> <p>The initial periodontal screen should include the assessment of medical and dental histories, the quantity and quality of attached gingiva, bleeding, tooth mobility, and a radiological review of the status of the periodontium and dental implants. The comprehensive periodontal examination should include:</p> <ul style="list-style-type: none"> <li>• Evaluation and recording of periodontal conditions</li> <li>• Evaluation and recording of dental caries</li> <li>• Evaluation and recording of missing, misaligned or unerupted teeth</li> <li>• Evaluation and recording of restorations</li> <li>• Evaluation and recording of occlusal relationships</li> <li>• Evaluation and recording of dysplastic oral cancerous lesions</li> </ul> <p>Annual re-evaluation should include follow-up on previously identified issues and evaluation for any new or emerging periodontal concerns.</p> <p>Some forms of periodontal disease may be more severe in individuals affected with immune system disorders. Patients with HIV may have especially severe forms of periodontal disease, and the incidence of necrotizing periodontal diseases may increase with clients with AIDS.</p>	<p>Providers will conduct a periodontal screen or exam at least annually for clients. This may consist of either a comprehensive initial screen or an annual re-evaluation. Exclusions include:</p> <ul style="list-style-type: none"> <li>• Clients who had only an evaluation or treatment for a dental emergency in the measurement year</li> <li>• Edentulous clients (complete)</li> <li>• Clients who were &lt;13 years of age during the measurement year</li> </ul> <p>The initial periodontal screen will include the assessment of medical and dental histories, the quantity and quality of attached gingiva, bleeding, tooth mobility, and a radiological review of the status of the periodontium and dental implants.</p> <p>Annual re-evaluation will include follow-up on previously identified issues and evaluation for any new or emerging periodontal concerns.</p> <p>Some forms of periodontal disease may be more severe in individuals affected with immune system disorders. Clients with HIV may have especially severe forms of periodontal disease, and the incidence of necrotizing periodontal diseases may increase with clients with AIDS.</p>	<p>Changed standard/measure to provide guidance regarding exclusions and align with language of HRSA/HAB Performance Measure for Periodontal Screening or Examination at <a href="https://ryanwhite.hrsa.gov/grants/performance-measure-portfolio/oral-health-measures/periodontal-screening-or-examination">https://ryanwhite.hrsa.gov/grants/performance-measure-portfolio/oral-health-measures/periodontal-screening-or-examination</a></p> <p>Language listing the elements of the periodontal examination was moved from this standard to the "Oral Examination" standard above, as these elements are more appropriate for an oral examination.</p>

Initial Treatment Plan	<p>New clients should receive a treatment plan that includes prevention, maintenance, and elimination of oral pathology that results from dental caries or periodontal disease. This plan should be completed within the first year of services and should include:</p> <ul style="list-style-type: none"> <li>• Restorative treatment</li> <li>• Basic periodontal therapy (nonsurgical)</li> <li>• Basic oral surgery that includes extractions and biopsy</li> <li>• Non-surgical endodontic therapy if the tooth is restorable</li> <li>• Space maintenance and tooth eruption guidance for transitional dentition.</li> </ul> <p>The initial treatment plan, if the care was completed on schedule, should be completed within 12 months of initiating treatment.</p>	<p>New clients will receive a treatment plan that includes prevention, maintenance, and elimination of oral pathology resulting from dental caries or periodontal disease. The dental provider will complete this plan within the first year of services. The plan should include, as appropriate:</p> <ul style="list-style-type: none"> <li>• Restorative treatment</li> <li>• Basic periodontal therapy (nonsurgical)</li> <li>• Basic oral surgery that includes extractions and biopsy</li> <li>• Non-surgical endodontic therapy if the tooth is restorable</li> <li>• Space maintenance and tooth eruption guidance for transitional dentition.</li> </ul> <p>If providers complete care on schedule, they will complete the initial treatment within 12 months of initiating treatment. If the provider is unable to complete the initial treatment plan within 12 months, they should document the reasons in the client record.</p>	<p>Language was added to this standard to clarify that providers may document why the treatment plan was not able to be completed within the first year. ("If the provider is unable to complete the initial treatment plan within 12 months, they should document the reasons in the client record.")</p>
Oral Health Education	<p>A licensed dentist, dental hygienist, dental assistant, or dental case manager must provide and document oral health education. Education should address the following topics:</p> <ul style="list-style-type: none"> <li>• Oral hygiene instruction</li> <li>• Daily brushing and flossing (or other interproximal cleaning) or prosthetic care to remove plaque</li> <li>• Daily use of over-the-counter fluorides to prevent or reduce cavities when appropriate and applicable to the client.</li> <li>• Smoking or tobacco cessation counseling as indicated</li> </ul> <p>Additional areas for instruction may include nutrition. For pediatric clients, oral health education should be provided to parents and caregivers and must be age appropriate.</p>	<p>A licensed dentist, dental hygienist, dental assistant, or dental case manager will provide and document oral health education. Education will address the following topics:</p> <ul style="list-style-type: none"> <li>• Oral hygiene instruction</li> <li>• Daily brushing and flossing (or other interproximal cleaning) or prosthetic care to remove plaque</li> <li>• Daily use of over-the-counter fluorides to prevent or reduce cavities when appropriate and applicable to the client</li> <li>• Smoking or tobacco cessation counseling as indicated</li> <li>• The impact of poor oral hygiene and periodontal disease on overall health (oral-systemic health)</li> </ul> <p>Additional areas for instruction may include nutrition. For pediatric clients, staff will provide oral health education to parents and caregivers and will ensure information is age appropriate.</p>	<p>A bullet was added to this standard to include oral-systemic health as part of oral health education. (Education about how inflammation in the mouth caused by poor oral hygiene and/or periodontal disease travels through the bloodstream and impacts overall health.)</p>
Expenditure Documentation	<p>Measure 9. If the cost of dental care exceeded the annual maximum amount for Ryan White and State Services funding, the reason is documented in the client's oral health care record.</p>	<p>Measure 9. If the cost of dental care exceeded the annual maximum amount for Ryan White and State Services funding, the provider documented the reason in the client's oral health care record and the Administrative Agency approved a waiver.</p>	<p>Added language to this measure to address waiver approval.</p>

FY 2025 Houston EMA/HSDA Ryan White Part A Service Definition <b>Home Delivered Meals</b> Approval Date: October 2024	
HRSA Service Category Title: <b>RWGA Only</b>	<b>Food Bank/Home Delivered Meals</b>
Local Service Category Title:	<b>Home Delivered Meals</b>
Budget Type: <b>RWGA Only</b>	<b>Fee for Service</b>
Budget Requirements or Restrictions: <b>RWGA Only</b>	Unallowable costs include household appliances, pet foods, and other non-essential products.
HRSA Service Category Definition ( <b>do not change or alter</b> ): <b>RWGA Only</b>	<p><b>Food Bank/Home Delivered Meals</b> refers to the provision of actual food items, hot meals, or a voucher program to purchase food. This also includes the provision of essential non-food items that are limited to the following:</p> <ul style="list-style-type: none"> <li>• Personal hygiene products</li> <li>• Household cleaning items</li> <li>• Water filtration/purification systems in communities where issues of water safety exist</li> </ul>
Local Service Category Definition:	Home delivered meals are the provision of prepared meals or food vouchers for prepared meals to clients who are homebound or require special dietary support in meeting nutritional outcomes based on dietary needs to improve and enhance their HIV care. This service includes the provision of both frozen and hot meals.
Target Population (age, gender, geographic, race, ethnicity, etc.):	Persons with HIV living within the Houston Eligible Metropolitan Area (EMA) .

Services to be Provided:	<p>The provision of home delivered meals to eligible clients with a written referral from the client’s Primary Care provider registered, licensed dietician or nutritionist.</p> <p>Agencies will develop a client assessment that specifies frequency, duration, and amount; and includes a written nutritional plan prepared by a licensed, registered dietician or nutritionist. The client’s Primary Care provider’s licensed dietician or nutritionist will approve the client assessment and review it quarterly thereafter.</p> <p>Home-delivered meals should be culturally representative and best meet the eligible client’s traditional food options and have the ability to supply a variety of meal options with daily, weekly or on an as-needed basis delivery. The prepared meals should be nutritious and individualized to client’s dietary needs, and shall be based on current federal dietary guidelines (<a href="#">Dietary Guidelines for</a></p>
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	<p><a href="#">Americans, 2020-2025 and Online Materials   Dietary Guidelines for Americans</a>).</p> <p>The Agency must incorporate practices that honor clients’ beliefs, being sensitive to cultural diversity and diverse cultural and ethnic backgrounds, including supporting clients with limited English proficiency or disabilities, and regardless of gender, sexual orientation, or gender identity. This includes fostering attitudes and interpersonal communication styles in staff and providers which respect recipients’ cultural backgrounds.</p> <p>All meal plans must be reviewed and approved by a registered dietician.</p>
Service Unit Definition(s): <b>RWGA Only</b>	One (1) unit of service = One (1) home delivered meal and shall include costs of food, supplies, staffing, and delivery.
Financial Eligibility:	Refer to the RWPC’s approved <i>FY 2025 Financial Eligibility for Houston EMA Services</i> .
Client Eligibility:	<ul style="list-style-type: none"> <li>Persons with HIV living within the Houston Eligible Metropolitan Area (EMA) or HIV Service Delivery Area (HSDA) who are homebound or require special dietary support in meeting nutritional outcomes based on dietary needs to improve and enhance their HIV care including persons with compromised nutritional status and limited ability to prepare his/her own meals. The client is actively enrolled in primary medical care along with the referral from the client’s Primary Care provider’s registered dietician or nutritionist.</li> </ul>
Agency Requirements:	Agencies shall comply with local, state, and federal food safety, sanitization, and safety regulations.
Staff Requirements:	Agencies shall receive consultation from a registered and/or licensed dietitian regarding the nutrition, caloric needs, and other dietary issues of people with HIV. Agencies shall incorporate such guidance into its home-delivered meals program. Consultations should be done on quarterly basis and must be documented.
Special Requirements: <b>RWGA Only</b>	<p>Must comply with Houston EMA/HSDA Part A/B Standards of Care.</p> <p>Food vouchers/gift cards are to be restricted from the purchase of tobacco or alcohol products. No direct payments to clients are allowed.</p>

FY 2025 Houston EMA/HSDA Ryan White Part A/MAI Service Definition <b>Other Professional Services</b> Approval Date: October 2024	
HRSA Service Category Title: <b>RWGA Only</b>	<b>Other Professional Services (Legal Services/Permanency Planning)</b>
Local Service Category Title:	<b>Legal Assistance – Expungement of Criminal Record</b>
Budget Type: <b>RWGA Only</b>	<b>Fee for Service</b>
Budget Requirements or Restrictions: <b>RWGA Only</b>	Only time spent by the Attorney working on a client’s case may be billed under this contract. Travel time to and from a client’s residence is not billable.
HRSA Service Category Definition: <b>RWGA Only</b>	<p>Other Professional Services allow for the provision of professional and consultant services rendered by members of particular professions licensed and/or qualified to offer such services by local governing authorities. Such services may include:</p> <p><b>Legal services</b> provided to and/or on behalf of the HRSA RWHAP-eligible PLWH and involving legal matters related to or arising from their HIV disease, including:</p> <ul style="list-style-type: none"> <li>• Assistance with public benefits such as Social Security Disability Insurance (SSDI)</li> <li>• Interventions necessary to ensure access to eligible benefits, including discrimination or breach of confidentiality litigation as it relates to services eligible for funding under the HRSA RWHAP</li> <li>• Preparation of:               <ul style="list-style-type: none"> <li>○ Healthcare power of attorney</li> <li>○ Durable powers of attorney</li> <li>○ Living wills</li> </ul> </li> </ul> <p><b>Permanency planning</b> to help clients/families make decisions about the placement and care of minor children after their parents/caregivers are deceased or are no longer able to care for them, including:</p> <ul style="list-style-type: none"> <li>• Social service counseling or legal counsel regarding the drafting of wills or delegating powers of attorney</li> <li>• Preparation for custody options for legal dependents including standby guardianship, joint custody, or adoption</li> </ul>
Local Service Category Definition:	<p>Ryan White allowable legal assistance in expungement of criminal record by an Attorney licensed to practice in Texas in accordance with 55.02, Texas Code of Criminal Procedure.</p> <p><a href="https://statutes.capitol.texas.gov/Docs/CR/htm/CR.55.htm">https://statutes.capitol.texas.gov/Docs/CR/htm/CR.55.htm</a>. Services include an assessment to determine the client’s eligibility for expungement of criminal record.</p>
Target Population (age, gender, geographic, race, ethnicity, etc.):	Persons living with HIV within the Houston Eligible Metropolitan Area (EMA).

Services to be Provided:	Legal assistance with expungement of criminal record.
Service Unit Definition(s): <b>RWGA Only</b>	A unit of service is defined as one (1) hour of service provided by an Attorney licensed to practice law in the State of Texas.
Financial Eligibility:	Refer to the RWPC's approved <i>FY 2025 Financial Eligibility for Houston EMA Services</i> .
Client Eligibility:	Persons living with HIV in the Houston EMA/HSDA.
Agency Requirements:	Not applicable.
Staff Requirements:	Attorney must be licensed to practice law by the State of Texas.
Special Requirements: <b>RWGA Only</b>	To the extent that expunging a client's record is done to assist in obtaining access to services and benefits that will improve HIV-related health outcomes, Ryan White funds can be used to pay for the expungement of criminal records and associated costs.  Must comply with Houston EMA/HSDA Part A/B Standards of Care.  No direct payments to clients are allowed.

**NOTE:** It is advisable that RWHAP recipients and subrecipients partner with legal service professionals and consult their own state and local laws to determine eligibility for expungement assistance.

FY 2025 Houston EMA/HSDA Ryan White Part A Service Definition <b>Housing – Temporary Assisted Living</b> Approval Date: October 2024	
HRSA Service Category Title: <b>RWGA Only</b>	<b>Housing</b>
Local Service Category Title:	<b>Housing – Temporary Assisted Living</b>
Budget Type: <b>RWGA Only</b>	<b>Fee for Service</b>
Budget Requirements or Restrictions: <b>RWGA Only</b>	<p>Housing activities cannot be in the form of direct cash payments to clients.</p> <p>Funds may not be used for nutritional services, durable medical equipment and medical supplies or case management services.</p>
HRSA Service Category Definition ( <b>do not change or alter</b> ): <b>RWGA Only</b>	<p>Housing provides transitional, short-term, or emergency housing assistance to enable a client or family to gain or maintain outpatient/ambulatory health services and treatment, including temporary assistance necessary to prevent homelessness and to gain or maintain access to medical care. Activities within the Housing category must also include the development of an individualized housing plan, updated annually, to guide the client’s linkage to permanent housing. Housing may provide some type of core medical (e.g., mental health services) or support services (e.g., residential substance use disorder services).</p> <p>Housing activities also include housing referral services, including assessment, search, placement, and housing advocacy services on behalf of the eligible client, as well as fees associated with these activities.</p>
Local Service Category Definition:	<p>Housing - Temporary Assisted Living should provide room, board, and medical support for up to 15 days for individuals who have been discharged from a medical facility but are not medically able to return to a dwelling in which they do not have a current caregiver or support structure.</p> <p>The program should include physician-ordered nursing and supportive health services based on a written plan of care established by an interdisciplinary care team that includes appropriate healthcare professionals such as occupational and physical therapists.</p>
Target Population (age, gender, geographic, race, ethnicity, etc.):	Persons with HIV living within the Houston Eligible Metropolitan Area (EMA). Eligible person should enter temporary assisted living upon release from a medical facility following disruption in ongoing Ryan White care.
Services to be Provided:	Services to be provided should be designed to support ongoing HIV care, increased functioning, and the return to self-sufficiency for PLWH through the provision of treatment and activities of daily living.

	<p>Services must include:</p> <ul style="list-style-type: none"> <li>• Room and daily nutritious meals and snacks,</li> <li>• Skilled Nursing to include medication administration, medication supervision, medication ordering, filling pill box, wound dressing changes, ongoing monitoring of client’s physical condition and communication with attending physician(s) and personal care team</li> <li>• Other Therapeutic Services including physical and occupational therapies</li> </ul> <p>Patient Medication Education Services must adhere to the following requirements:</p> <ul style="list-style-type: none"> <li>• Medication Educators must be State Licensed Medical Doctor (MD), Nurse Practitioner (NP), Physician Assistant (PA), Nurse (RN, LVN), licensed Social Worker, or Pharmacist. Prior approval must be obtained prior to utilizing any other health care professional not listed above to provide medication education.</li> </ul>
<p>Service Unit Definition(s): <b>RWGA Only</b></p>	<p>One (1) unit of service = One (1) day</p>
<p>Financial Eligibility:</p>	<p>Refer to the RWPC’s approved <i>FY 2025 Financial Eligibility for Houston EMA Services</i>.</p>
<p>Client Eligibility:</p>	<ul style="list-style-type: none"> <li>• Persons with HIV living within the Houston Eligible Metropolitan Area (EMA).</li> <li>• Client must receive referral for service from an MD, NP, or PA.</li> <li>• Client must have a qualifying inpatient hospital stay of at least three (3) days in a row defined as the day of admission, but not counting the day of discharge.</li> <li>• Client must enter the facility within 30 days of discharge from a hospital.</li> </ul>
<p>Agency Requirements:</p>	<p>Facility must have all required federal, state and local licenses, certifications and permits and must comply with local, state, and federal regulations.</p>
<p>Staff Requirements:</p>	<p>Staff must have all required federal, state and local licensure, certifications, permits and must comply with local, state, and federal regulations.</p> <p>The contractor is responsible for ensuring that services are provided by State licensed MDs, NPs, PAs, RNs, LVNs, social workers, and pharmacists. In addition, Contractor must ensure the following staff requirements are met:</p>

	<b>Medication and Adherence Education:</b> The program must utilize an RN, LVN, PA, NP, pharmacist or MD licensed by the State of Texas, who has at least two (2) years paid experience in the preceding five (5) years in HIV care, to provide the educational services. Licensed social workers who have at least two (2) years paid experience in the preceding five (5) years in HIV care may also provide adherence education and counseling.
Special Requirements: <b>RWGA Only</b>	Must comply with Houston EMA/HSDA Part A/B Standards of Care. No direct payments to clients are allowed.

**Priority and  
Allocations  
Committee  
Report**

FY 2024 Ryan White Part A and MAI Procurement Report

"TBD" Funding Scenario  
"BD" Funding Scenario

Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD
Voluntary Primary Care	11,169,413	370,766	134,765	0	0	0	11,674,944	46.32%	11,674,944	0		\$4,651,848
Public Clinic (a)	4,109,697	144,599					4,254,296	16.88%	4,254,296	0	3/1/2024	\$1,956,253
BO Targeted to AA (a) (e) (f)	1,114,019	37,077	45,820				1,196,916	4.75%	1,196,916	0	3/1/2024	\$610,788
BO Targeted to Hispanic (a) (e)	952,840	33,369	39,082				1,025,291	4.07%	1,025,291	0	3/1/2024	\$614,036
BO Targeted to White/MSM (a) (e)	1,201,238	40,784	49,863				1,291,885	5.13%	1,291,885	0	3/1/2024	\$272,072
BO Targeted to Rural (a) (e)	1,151,088	40,784					1,191,872	4.73%	1,191,872	0	3/1/2024	\$438,979
Women at Public Clinic (a)	2,090,531	74,153					2,164,684	8.59%	2,164,684	0	3/1/2024	\$510,865
Public Clinic (a.1)												
Health Outcome Pilot	500,000	0					500,000	1.98%	500,000	0	3/1/2024	\$246,855
Management	2,183,040	0	0	0	0	0	2,183,040	8.66%	2,183,040	0	3/1/2024	\$0
Public Clinic (a)	531,025	0					531,025	2.11%	531,025	0	3/1/2024	\$242,433
BO Targeted to AA (a) (e)	301,129	0					301,129	1.19%	301,129	0	3/1/2024	\$133,659
BO Targeted to H/L (a) (e)	183,663	0					183,663	0.73%	183,663	0	3/1/2024	\$47,613
BO Targeted to W/MSM (a) (e)	66,491	0					66,491	0.26%	66,491	0	3/1/2024	\$11,401
BO Targeted to Rural (a)	297,496	0					297,496	1.18%	297,496	0	3/1/2024	\$67,826
BO Targeted to Public Clinic (a)	81,841	0					81,841	0.32%	81,841	0	3/1/2024	\$65,157
BO Targeted to Geriatrics	400,899	0					400,899	1.59%	400,899	0	3/1/2024	\$0
BO Targeted to Veterans	86,964	0					86,964	0.35%	86,964	0	3/1/2024	\$0
BO Targeted to Youth	49,867	0					49,867	0.20%	49,867	0	3/1/2024	\$25,459
Assistance Program	2,067,104	0	33,513	0	0	0	2,100,617	8.33%	2,100,617	0	3/1/2024	\$1,015,385
Assistance Program-Public Clinic (a) (e)	367,104	0					367,104	1.46%	367,104	0	3/1/2024	\$152,290
Assistance Program-Untargeted (a) (e)	1,700,000	0	33,513				1,733,513	6.88%	1,733,513	0	3/1/2024	\$863,094
BO Targeted to Rural (a)	166,404	0	0	0	0	0	166,404	0.66%	166,404	0	3/1/2024	\$3,900
BO Targeted to Rural (a.1)	166,404	0					166,404	0.66%	166,404	0	3/1/2024	\$83,900
BO Targeted to Rural (a.2)	1,583,137	0	311,204	0	0	0	1,894,341	7.52%	1,894,341	0	3/1/2024	\$789,055
BO Targeted to Rural (a.3)	341,395	0					341,395	1.35%	341,395	0	3/1/2024	\$165,717
BO Targeted to Rural (a.4)	25,000	0	0	0	0	0	25,000	0.10%	25,000	0	3/1/2024	\$7,410
BO Targeted to Rural (a.5)	2,139,136	0	11,722	0	0	0	2,150,858	8.53%	2,150,858	0	3/1/2022	\$795,656
BO Targeted to Rural (a.6)	2,039,136	0	11,722				2,050,858	8.14%	2,050,858	0	3/1/2024	\$771,875
BO Targeted to Rural (a.7)	100,000	0					100,000	0.40%	100,000	0	3/1/2024	\$23,781
BO Targeted to Rural (a.8)	1,267,002	0	0	0	0	0	1,267,002	5.03%	1,267,002	0	3/1/2024	\$630,198
BO Targeted to Rural (a.9)	110,793	0					110,793	0.44%	110,793	0	3/1/2024	\$41,404
BO Targeted to Rural (a.10)	100,000	0					100,000	0.40%	100,000	0	3/1/2024	\$27,430
BO Targeted to Rural (a.11)	370,000	0					370,000	1.47%	370,000	0	3/1/2024	\$198,173
BO Targeted to Rural (a.12)	686,209	0					686,209	2.72%	686,209	0	3/1/2024	\$363,192
BO Targeted to Rural (a.13)	424,911	0	0	0	0	0	424,911	1.69%	424,911	0	3/1/2024	\$176,092
BO Targeted to Rural (a.14)	252,680	0					252,680	1.00%	252,680	0	3/1/2024	\$113,668
BO Targeted to Rural (a.15)	97,185	0					97,185	0.39%	97,185	0	3/1/2024	\$62,424
BO Targeted to Rural (a.16)	75,046	0					75,046	0.30%	75,046	0	3/1/2024	\$0
BO Targeted to Rural (a.17)	320,000	0					320,000	1.27%	320,000	0	3/1/2024	\$76,724
BO Targeted to Rural (a.18)	21,686,542	370,766	491,204	0	0	0	22,548,512	89.46%	22,548,512	0	3/1/2024	\$9,008,280
Part A Grant Award:	25,204,121	Carryover:	491,204				25,204,121	Unallocated	Unobligated			
								1	0			
	Original Allocation	Award Reconciliation	July Adjustments (carryover)	August 10% Rule Adjustments	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent	Total Expended on Services	Percent	Award Category	Award Amount
BO Targeted to Rural (a.19)	17,535,493	370,766	479,482	0	0	0	18,385,741	81.54%	6,540,555	80.33%	Formula	
BO Targeted to Rural (a.20)	4,151,049	0	11,722	0	0	0	4,162,771	18.46%	1,601,946	19.67%	Supplement	
BO Targeted to Rural (a.21)	21,686,542	370,766	491,204	0	0	0	22,548,512		8,142,502		Carry Over	0



FY 2024 Ryan White Part A and MAI Procurement Report

"TBD" Funding Scenario  
"BD" Funding Scenario

Service Category	Original Allocation RWPC Approved Level Funding Scenario	Award Reconciliation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD
Must be ≤ 10% of total Part A + MAI)	2,133,394	0	0	0	0	0	2,133,394	7.71%			Totals	0
Must be ≤ 5% of total Part A + MAI)	522,214	0	0	0	0	0	522,214	1.89%				
MAI Procurement Report												
Regulatory Primary Care	2,068,055	30,356	47,459	0	0	0	2,145,870	87.07%	2,145,870	0		\$1,052,175
BO Targeted to African American	1,045,669	15,482	24,204	0			1,085,355	44.04%	1,085,355	0	3/1/2024	\$577,740
BO Targeted to Hispanic	1,022,386	14,874	23,255	0			1,060,515	43.03%	1,060,515	0	3/1/2024	\$474,435
Management	314,060	4,536	0	0	0	0	318,596	12.93%	318,596	0		\$91,808
to African American	157,030	2,268					159,298	6.46%	159,298	0	3/1/2024	\$63,892
to Hispanic	157,030	2,268					159,298	6.46%	159,298	0	3/1/2024	\$27,915
Service Funds	2,382,115	34,892	47,459	0	0	0	2,464,466	100.00%	2,464,466	0		\$1,143,983
	0	0	0	0	0	0	0	0.00%	0	0		\$0
	0	0	0	0	0	0	0	0.00%	0	0		\$0
	0	0	0	0	0	0	0	0.00%	0	0		\$0
	2,382,115	34,892	47,459	0	0	0	2,464,466	100.00%	2,464,466	0		\$1,143,983
MAI Grant Award	2,464,466	Carry Over:	47,459			Total MAI:	2,464,466					
Part A and MAI Original Allocation Total	26,724,265							Unallocated	Unobligated	0	MAI Award	2,464,466
											Total Part A & MAI Award	27,668,587

Unallocated 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.

Definition is multiple HRSA service categories. (1) does not include LPAP. Expenditures must be evaluated both by individual service category and by combined service categories.

and/or SS

s

# FY 2024 Ryan White Part A and MAI Service Utilization Report

Date Range: 03/01/2024 - 9/30/2024 23:59:00

## RW PART A Service Utilization Report

Category	Goal	Unduplicated Clients Served YTD	Male	Female	Trans gender	AA (non - Hispanic)	White (non -Hispanic)	Other (non - Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-54	55-64	
Ambulatory Primary Care (excluding Vision)	9,780	7,127	74%	23%	2%	43%	10%	2%	45%	0%	0%	5%	27%	27%	22%	1	
	3,113	2,477	69%	29%	1%	41%	7%	2%	51%	0%	0%	3%	17%	25%	27%	2	
	2,335	1,854	71%	26%	3%	99%	0%	1%	0%	0%	1%	6%	35%	29%	16%	1	
	1,934	1,769	82%	14%	4%	0%	0%	0%	100%	0%	1%	6%	32%	28%	21%	1	
	774	668	85%	13%	2%	7%	70%	15%	8%	0%	0%	4%	27%	27%	20%	1	
	752	519	72%	27%	1%	39%	19%	2%	40%	0%	0%	5%	25%	29%	23%	1	
	872	738	1%	99%	1%	50%	5%	1%	43%	0%	1%	2%	14%	27%	29%	2	
		2,663	1,593	71%	26%	2%	46%	11%	3%	40%	0%	0%	3%	22%	25%	25%	2
		5,719	2,436	69%	28%	2%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0
Management	967	520	74%	24%	2%	55%	15%	2%	29%	0%	1%	3%	26%	22%	20%	2	
Targeted to Public Clinic (A)	578	343	90%	8%	2%	52%	12%	1%	36%	0%	1%	1%	28%	24%	19%	2	
Targeted to AA (A)	1,479	566	69%	28%	4%	99%	0%	1%	1%	0%	1%	3%	30%	30%	19%	1	
Targeted to H/L (A)	728	316	82%	13%	5%	1%	0%	0%	99%	0%	7%	7%	27%	29%	22%	1	
Targeted to White and/or MSM (A)	460	129	81%	18%	2%	0%	87%	10%	3%	0%	2%	2%	16%	23%	29%	2	
Targeted to Rural (A)	554	360	67%	33%	0%	51%	25%	2%	22%	0%	2%	2%	18%	24%	22%	2	
Targeted to Women at Public Clinic (A)	259	195	1%	99%	0%	69%	7%	1%	23%	0%	2%	2%	26%	29%	23%	1	
Targeted to Geriatrics	532																
Targeted to Veterans	148																
Targeted to Youth	14	7	86%	14%	0%	57%	0%	0%	43%	0%	29%	71%	0%	0%	0%		
Reimbursement Program (A)	5,781	4,552	75%	22%	4%	41%	11%	2%	46%	0%	4%	25%	27%	27%	25%	1	
Untargeted (D)	348	249	67%	32%	1%	37%	27%	2%	33%	0%	0%	0%	17%	27%	28%	1	
Rural Target	NA	NA															
Targeted to Rural (A)	348	249	67%	32%	1%	37%	27%	2%	33%	0%	0%	0%	17%	27%	28%	1	
Targeted to Non-Rural (A)	2,034	1,781	78%	20%	2%	44%	22%	3%	31%	0%	2%	2%	14%	22%	21%	2	

NA	NA	NA	23%	1%	41%	17%	5%	37%	0%	0%	1%	6%	10%	28%
515	363	76%	23%	1%	41%	17%	5%	37%	0%	0%	1%	6%	10%	28%
19	7	100%	0%	0%	14%	29%	0%	57%	0%	0%	0%	43%	43%	0%
NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
3,218	878	76%	22%	3%	44%	9%	2%	45%	0%	0%	6%	25%	29%	22%
3,105	794	76%	21%	3%	42%	9%	2%	47%	0%	1%	6%	25%	30%	23%
113	85	72%	26%	2%	61%	13%	0%	26%	0%	0%	4%	21%	14%	18%
NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
8,568	5,260	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
179	145	64%	30%	6%	54%	3%	2%	41%	0%	10%	90%	0%	0%	0%
132	77	71%	26%	3%	49%	5%	8%	38%	0%	0%	0%	57%	27%	5%
3,621	2,314	64%	35%	1%	49%	8%	1%	41%	0%	0%	0%	17%	25%	26%
4,636	2,724	73%	25%	3%	49%	9%	2%	39%	0%	0%	4%	27%	29%	21%
2,358	1,071	70%	28%	2%	60%	9%	2%	29%	0%	0%	1%	15%	21%	25%
687	273	64%	34%	2%	53%	8%	5%	34%	0%	0%	1%	20%	26%	21%
195	92	66%	33%	1%	32%	34%	2%	33%	0%	0%	1%	16%	16%	30%
1,476	797	71%	27%	2%	66%	6%	1%	26%	0%	0%	1%	13%	19%	27%
NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
955	379	73%	24%	3%	59%	11%	2%	28%	0%	1%	6%	34%	26%	17%
15,378	12,585	73%	24%	2%	47%	12%	2%	39%	0%	0%	4%	24%	25%	22%
NA	30,198	75%	25%	0%	48%	17%	5%	30%	0%	0%	4%	21%	23%	25%

RW MAI Service Utilization Report

Category	Goal	Unduplicated Clients Served YTD	Male	Female	Trans gender	AA (non - Hispanic)	White (non - Hispanic)	Other (non - Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-54	55-64
ambulatory Primary Care (excluding Vision)	3,129															
- MAI CBO Targeted to AA (F)	1,676	1,371	70%	26%	3%	99%	0%	1%	0%	0%	5%	36%	29%	16%	1%	
- MAI CBO Targeted to HL (F)	1,453	1,223	83%	14%	3%	0%	0%	0%	100%	0%	5%	32%	29%	22%	1%	
Management (E)	1,535															
Targeted to AA (A)	907	257	67%	27%	5%	100%	0%	0%	0%	0%	3%	41%	30%	11%	1%	
Targeted to H/L (A)	628	130	77%	15%	8%	0%	0%	0%	100%	0%	7%	37%	28%	17%		

RW Part A New Client Service Utilization Report

Report reflects the number & demographics of clients served during the report period who did not receive services during previous 12 months

Category	Goal	Unduplicated Clients Served YTD	Male	Female	Trans gender	AA (non - Hispanic)	White (non - Hispanic)	Other (non - Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-54	55-64
Primary Care	1,929	1,151	75%	22%	3%	48%	10%	2%	39%	0%	1%	9%	35%	27%	15%	10%
Management	969	521	76%	18%	5%	42%	11%	3%	45%	0%	1%	10%	33%	24%	19%	12%
Management (E)	1,110	30	83%	13%	3%	60%	17%	0%	23%	0%	0%	7%	33%	23%	13%	11%
Management - Targeted to Veterans	1,050	378	72%	26%	2%	56%	13%	1%	30%	0%	1%	5%	29%	26%	20%	15%
Case Management (Service Linkage)	28															
Age at Testing Sites	49	12	83%	17%	0%	42%	33%	0%	25%	0%	0%	0%	17%	17%	33%	17%
	1,981	906	68%	30%	2%	56%	9%	3%	33%	0%	1%	7%	25%	25%	19%	17%
	100	76	66%	29%	5%	54%	4%	8%	34%	0%	3%	17%	45%	21%	4%	8%

Age groups 55-64 and 65+ combined together.

State Services

not include Clinical Case Management

A (1.b) and HL (1.c) goals represent combined Part A and MAI clients served

**The Houston Regional HIV/AIDS Resource Group, Inc.**  
**FY 2425 Ryan White Part B**  
**Procurement Report**  
**April 1, 2024 - March 31, 2025**



Reflects spending through August 2024

Spending Target: 41.7%

Revised 10/3/24

Priority	Service Category	Original Allocation per	% of Grant	Amendment*	Contractual Amount	Amendment	Contractual Amount	Date of Original	Expended YTD	Percent YTD
4	Oral Health Service-General	\$2,101,048	59%		\$2,101,048		\$2,101,048	4/1/2023	\$611,930	29%
4	Oral Health Service -Prostodontics	\$631,145	18%		\$631,145		\$631,145	4/1/2023	\$281,272	45%
5	Health Insurance Premiums and Cost Sharing (1)	\$805,845	23%		\$805,845		\$805,845	4/1/2023	\$775,757	96%
		\$0	0%	\$0	\$0		\$0			
		\$0	0%	\$0	\$0		\$0			
	<b>Total Houston HSDA</b>	3,538,038	100%	0	3,538,038	\$0	\$3,538,038		1,668,958	47%

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

- (1) Increase due to costs in spending

**The Houston Regional HIV/AIDS Resource Group, Inc.**  
**FY 2324 DSHS State Services**  
**Procurement Report**  
**September 1, 2023 - August 31, 2024**



Chart reflects spending through August (not final) 2024

Spending Target: 100%

Revised 10/3/2024

Priority	Service Category	Original Allocation per	% of Grant	Amendments per RWPC	Contractual Amount	Amendment	Contractual Amount	Date of Original	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$892,101	29%	\$141,000	\$1,033,101	\$0	\$1,033,101	9/1/2023	\$1,503,433	146%
6	Mental Health Services (4)	\$300,000	10%	\$0	\$300,000	\$0	\$300,000	9/1/2023	\$182,378	61%
11	Hospice	\$293,832	10%	\$57,388	\$351,220	\$0	\$351,220	9/1/2023	\$272,800	78%
13	Non Medical Case Management (2)	\$350,000	12%	-\$57,388	\$292,612	\$0	\$292,612	9/1/2023	\$121,298	41%
16	Linguistic Services (3)	\$68,000	2%	\$0	\$68,000	\$0	\$68,000	9/1/2023	\$8,774	13%
	Referral for Healthcare-Incarcerated (5)	\$141,000	5%	-\$141,000	\$0	\$0	\$0	9/1/2023	\$0	0%
	ADAP/Referral for Healthcare (4)	\$525,000	17%	\$0	\$525,000	\$0	\$525,000	9/1/2023	\$440,620	84%
	Food Bank	\$5,400	0.2%	\$0	\$5,400	\$0	\$5,400	9/1/2023	\$4,225	78%
	Medical Transportation	\$84,600	3%	\$0	\$84,600	\$0	\$84,600	9/1/2023	\$67,745	80%
	Emergency Financial Assistance (Compassionate Care)	\$368,123	12%	\$0	\$368,123	\$0	\$368,123	9/1/2023	\$215,245	58%
		<b>3,028,056</b>	<b>100%</b>	<b>\$0</b>	<b>\$3,028,056</b>	<b>\$0</b>	<b>\$3,028,056</b>		<b>2,816,517</b>	<b>93%</b>

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) Reallocation approved due to a change in provider.
- (3) Delayed billing
- (4) Delayed billing
- (5) Service was eliminated; reallocation approved by RWPC

**2023 - 2024 DSHS State Services Service Utilization Report**  
**9/1/2023 thru 8/31/2024 Houston HSDA**  
**4th Quarter - 9/1/2023 to 8/31/2024**

Revised 1/10/2024

Funded Service	UDC		Gender			Race				Age Group								
	Goal	YTD	Male	Female	FTM	MTF	AA	White	Hisp	Other	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65+
Hospice	15	33	75.76%	24.24%	0.00%	0.00%	42.43%	27.27%	27.27%	3.03%	0.00%	0.00%	0.00%	3.04%	18.18%	24.24%	39.39%	15.15%
Mental Health Services	205	119	92.44%	3.36%	0.00%	4.20%	25.63%	35.70%	28.15%	10.52%	0.00%	0.84%	22.68%	20.16%	14.29%	27.74%	14.29%	
Helath Insurance Premiums	2,050	900	82.24%	16.66%	0.22%	0.88%	36.45%	24.66%	34.23%	4.66%	0.00%	1.11%	15.66%	21.33%	24.33%	29.13%	8.44%	
Non-Medical Case Management	185	186	79.04%	17.20%	0.00%	3.76%	55.20%	16.49%	27.24%	1.07%	0.00%	1.61%	20.44%	27.95%	17.20%	26.89%	5.91%	
Linguistic services	65	26	42.30%	53.86%	0.00%	3.84%	53.84%	3.84%	0.00%	42.32%	0.00%	3.84%	7.69%	26.92%	38.48%	15.38%	7.69%	
Unduplicated Clients Served By State Services Funds:	2,520	1,264	74.36%	23.06%	0.04%	2.54%	42.71%	21.59%	23.38%	12.32%	0.00%	1.48%	13.90%	22.91%	23.70%	27.71%	10.30%	

Completed By: covagurtes

# Houston Ryan White Health Insurance Assistance Service Utilization Report



**Period Reported:**

09/01/2023-08/31/2024

**Revised:**

9/23/2024

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	1445	\$209,320.99	525	0	\$0.00	0
Medical Deductible	142	\$59,951.69	95	0	\$0.00	0
Medical Premium	7252	\$2,704,209.81	852	0	\$0.00	0
Pharmacy Co-Payment	28566	\$1,309,497.68	2324	0	\$0.00	0
APTC Tax Liability	0	\$0.00	0	0	\$0.00	0
Out of Network Out of Pocket	0	\$0.00	0	0	\$0.00	0
ACA Premium Subsidy Repayment	0	\$0.00	0	NA	NA	NA
<b>Totals:</b>	<b>37405</b>	<b>\$4,282,980.17</b>	<b>3796</b>	<b>0</b>	<b>\$0.00</b>	<b>0</b>

**Comments:** This report represents services provided under all grants.



## Ryan White Allocation Increases as of 10-24-24: Ryan White Part A Funding

**A - Part A Funds Available for Reallocation: \$ 420,000**

Control No. / Priority No.	Yes, No or Maybe	Service Category	Amount Requested	Recommended Reallocations	Justification
<b>RYAN WHITE PART A FUNDS</b>					
<b>Control 1</b> Priorities 1.e, 2.f, 3.b, 10.b, 12.c	<b>M</b>	Community-based Primary Medical Care targeted; Medical Case Management, Emergency Financial Assistance – Pharmacy; LPAP, and Service Linkage Workers - <b>Targeted to Rural</b>	\$ 60,000	<b>0</b>	The requestor started FY24 with more than they received in FY23
<b>Control 2</b> Priority 3.b	<b>Y</b>	Community-based Primary Medical Care for AA, H & W; Medical Case Management for the same populations, Emergency Financial Assistance – Pharmacy; LPAP, Outreach and Service Linkage Workers	\$600,000	<b>\$ 177,096</b>	Step 1: Fund core services before non-core or administrative costs. Therefore, fund the medication portion of the request only. Step 2: Fund Control #2, 3 and 4 with the balance of \$366,000 divided proportionately based upon their FY24 grant.
<b>Control 3</b> Priorities 1.b–1.d, 3.b	<b>Y</b>	Community-based Primary Medical Care for AA, H & W; Medical Case Management for the same populations, Emergency Financial Assistance – Pharmacy; LPAP, Outreach and Service Linkage Workers	\$173,750	<b>\$ 110,000</b>	Step 1: Fund core services before non-core or administrative costs. Therefore, fund the primary medical care portion of the request only. Step 2: Fund Control #2, 3 and 4 with the balance of \$366,000 divided proportionately based upon their FY24 grant.
<b>Control 4</b> Priorities 1.b–1.d, 3.b, 12.c	<b>Y</b>	Community-based Primary Medical Care for AA, H & W; Medical Case Management for the same populations, Emergency Financial Assistance – Pharmacy; LPAP, Outreach and Service Linkage Workers	\$508,865	<b>\$ 81,854</b>	Step 1: Fund core services before non-core or administrative costs. Therefore, fund the primary medical care portion of the request only. Step 2: Fund Control #2, 3 and 4 with the balance of \$366,000 divided proportionately based upon their FY24 grant.
<b>Control 5</b> Priority 2.a	<b>M</b>	Clinical Case Management	\$ 20,000	<b>\$ 8,000</b>	Fund core services before non-core or administrative costs.
<b>Control 6</b> Priority 2.a	<b>Y</b>	Clinical Case Management	\$ 8,000	<b>\$ 8,000</b>	Fund core services before non-core or administrative costs.
<b>Control 7</b> Priority 4.c	<b>Y</b>	Oral Health - Rural	\$ 10,050	<b>\$ 10,050</b>	Fund core services before non-core or administrative costs.
<b>Control 8</b> Priority 1.h	<b>Y</b>	Vision Care	\$ 25,000	<b>\$ 25,000</b>	Fund core services before non-core or administrative costs.
		<b>TOTALS</b>	<b>1,405,665</b>	<b>420,000</b>	

**MAI - Funds Available for Reallocation: \$ 60,000**

**RYAN WHITE MAI FUNDS**

			<b>0</b>	<b>\$60,000</b>	Per a staff recommendation, reallocate the funds equally between the 3 subrecipients who do not have FY24 unspent funds. This equals \$20,000 each. The reallocation will be proportional between the Outpatient/Ambulatory Health Services (OAHS) and Medical Case Management allocation amounts in the contracts
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**FY 2024 RW PART A REQUESTS FOR ALLOCATION INCREASE (OCTOBER 2024)**

REVISED

2024 Continuity Rank	HRSA Service Category	Local Service Category or Subcategory	Agency	Amount of Request	Amount Approved by RW/PC	FY 2023 Final Contract Amount	Expended 2023	Percent Expended	FY 2024 Contract Amount	FY 2024 Expended YTD	FY 2024 Percent YTD	FY 2024 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible for increase?	Notes
12.c	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance; Local Pharmacy Assistance; Non-Medical Case Management;	Community-based Primary Medical Care targeted to African American, Hispanic and White; Community-based Medical Case Management targeted to African American, Hispanic and White; EFA - Pharmacy; LPAP; Outreach; SLW - Targeted to Rural		\$60,000	\$0	\$131,900	\$130,806	99%	\$150,000	\$64,830	43%	50%	Yes	
12.b	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance; Local Pharmacy Assistance; Non-Medical Case Management;	Community-based Primary Medical Care targeted to African American, Hispanic and White; Community-based Medical Case Management targeted to African American, Hispanic and White; EFA - Pharmacy; LPAP; Outreach; SLW		\$600,000	\$0	\$3,267,327	\$3,262,744	100%	\$3,001,797	\$1,416,826	47%	50%	Yes	
12.d, 12.c	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance; Local Pharmacy Assistance; Non-Medical Case Management;	Community-based Primary Medical Care targeted to African American, Hispanic and White; Community-based Medical Case Management targeted to African American, Hispanic and White; EFA - Pharmacy; LPAP; Outreach; SLW		\$173,750	\$0	\$2,979,790	\$2,979,781	100%	\$2,100,325	\$1,058,368	50%	50%	Yes	
12.a	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance; Local Pharmacy Assistance; Non-Medical Case Management;	Community-based Primary Medical Care targeted to African American, Hispanic and White; Community-based Medical Case Management targeted to African American, Hispanic and White; EFA - Pharmacy; LPAP; Outreach; SLW		\$508,865	\$0	\$1,351,258	\$1,342,842	99%	\$1,094,637	\$400,975	37%	50%	Yes	
12.a	Medical Case Management	Clinical Case Management		\$20,000	\$0	\$389,941	\$347,661	89%	\$265,513	\$136,756	52%	50%	Yes	
12.c	Medical Case Management	Clinical Case Management		\$8,000	\$0	\$230,000	\$220,797	96%	\$265,512	\$133,984	50%	50%	Yes	
12.h	Oral Health Ambulatory/Outpatient Medical Care	Oral Health - Rural Vision Care		\$10,050 \$25,000	\$0 \$0	\$196,833 \$300,000	\$196,800 \$283,700	100% 95%	\$166,404 \$300,000	\$83,900 \$151,400	50% 50%	50% 50%	Yes Yes	
				\$1,405,665	\$0	\$8,847,049	\$8,765,131		\$7,344,188	\$3,447,039				
funds Available for Reallocation														
funds Avail. for Reallocation														
funds Available for Reallocation:														
				Explanation:										
				FY2024 Underspending Contracts										

Amount of additional funding Requested:						
Type of Service:	a. Number of units in <u>current</u> contract:	b. Cost/unit	c. Number of <u>additional</u> units	d. Total: (b x c)		
Only those units and disbursements where an increase is requested)						
Phy Ext	132	\$300.00	150	\$45,000.00		
CM	1200	\$25.00	200	\$5,000.00		
W	750	\$20.00	200	\$4,000.00		
AP Trans	208.33	\$30.00	200	\$6,000.00		
				\$0.00		
				\$0.00		
				\$0.00		
Disbursements (list current <b>amount</b> in column a. <b>Requested</b> amount in column c.)		N/A		\$0.00		
Total additional funding (must match E. above):				<b>\$60,000.00</b>		
Number of new/additional clients to be served with requested increase.						
Number of clients served under current contract - Agencies must use the CPCDMS to document clients served. <b>Identified CPCDMS-generated reports will be added to the RWPC by RWGA.</b>	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
Number of clients that received this service under Part A (or MAI) in FY 2023.* (March 1, 2023 - February 29, 2024) Agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	1168	45	9	153	91	
Number of clients that have received this service under Part A (or MAI) in FY 2024. (July Request Period = Not Applicable August Request Period = 03/01/24 - 06/30/24 October Request Period = 03/01/24 - 09/30/24 Qtr. Request Period = 03/01/24 - 11/30/24)	A. N/A B. 502 C. 866	A. N/A B. 38 C. 40	A. N/A B. 34 C. 39	A. N/A B. 131 C. 146	A. N/A B. 74 C. 146	A. N/A B. 57 C. 65
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 <b>not</b> include agency name or identifying information):			
Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	0	0				
Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	0	0				
Number of clients on a "waiting list" for services under Part A SOC):	0	0				
Number of clients unable to access services timely (number unable to make an appointment) under Part A SOC):	0	0				
Identify other sources and amounts of funding for similar services currently in place with agency: (As per email instructions, Section J is also to list any amounts)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):		

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT

[Agency]: Control #1 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: NO PAY [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	1	0	1	0	0	0	1	0	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	1	0	1	2	0	2
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	3	0	3	1	0	1	4	0	4
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	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	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	1	0	0	0	0	1	1	0
	35-44	1	1	0	0	0	0	1	1	0
	45-54	2	2	0	0	0	0	2	2	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	4	4	0	0	0	0	4	4	0
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	2	1	1	0	0	0	2	1	1
	35-44	1	1	0	0	0	0	1	1	0
	45-54	4	2	2	1	0	1	5	2	3
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	8	4	4	1	0	1	9	4	5

Clients Served This Period

Unduplicated clients:	9
Client visits: <sup>3</sup>	9
Spanish speaking (primary language at home) clients served:	3
Deaf/hard of hearing clients served:	0
Blind/sight impaired clients served:	0
Homeless clients served:	0
Transgender M to F clients served:	0
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	3
Clients served this period who live outside Harris County:	6
Active substance abuse clients served:	0
Active psychiatric illness clients served:	0

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	1
Hemophilia Coagulation	0
Transfusion	0
Heterosexual Contact	2
MSM (not IDU)	2
IV Drug Use (not MSM)	0
MSM/IDU	0
Multiple Exposure Categories	0
Other risk	4

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #1 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	1	0	1	0	0	0	1	0	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	1	0	1	2	0	2
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	3	0	3	1	0	1	4	0	4
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	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	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	1	0	0	0	0	1	1	0
	35-44	1	1	0	0	0	0	1	1	0
	45-54	2	2	0	0	0	0	2	2	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	4	4	0	0	0	0	4	4	0
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	2	1	1	0	0	0	2	1	1
	35-44	1	1	0	0	0	0	1	1	0
	45-54	4	2	2	1	0	1	5	2	3
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	8	4	4	1	0	1	9	4	5

Clients Served This Period

Methods of Exposure (not mutually exclusive)

Unduplicated clients:	9	PerinatalTransmission	1
Client visits: <sup>3</sup>	9	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	3	Transfusion	0
Deaf/hard of hearing clients served:	0	Heterosexual Contact	2
Blind/sight impaired clients served:	0	MSM (not IDU)	2
Homeless clients served:	0	IV Drug Use (not MSM)	0
Transgender M to F clients served:	0	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	0
Clients served this period who live w/in Harris County:	3	Other risk	4
Clients served this period who live outside Harris County:	6		
Active substance abuse clients served:	0		
Active psychiatric illness clients served:	0		

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)



HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #1 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: ALL [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	12	0	12	1	0	1	13	0	13
	35-44	4	0	4	7	0	7	11	0	11
	45-54	9	0	9	17	0	17	26	0	26
	55-64	11	0	11	11	0	11	22	0	22
	65+	3	0	3	9	0	9	12	0	12
	SubTotals:	40	0	40	45	0	45	85	0	85
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	2	0	2	0	0	0	2	0	2
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	0	0	0	2	0	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	2	0	0	0	0	2	2	0
	25-34	9	8	1	2	2	0	11	10	1
	35-44	7	5	2	3	1	2	10	6	4
	45-54	4	3	1	9	8	1	13	11	2
	55-64	13	10	3	3	2	1	16	12	4
	65+	4	3	1	3	3	0	7	6	1
	SubTotals:	39	31	8	20	16	4	59	47	12
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	3	2	1	0	0	0	3	2	1
	25-34	21	8	13	3	2	1	24	10	14
	35-44	11	5	6	10	1	9	21	6	15
	45-54	15	3	12	26	8	18	41	11	30
	55-64	24	10	14	14	2	12	38	12	26
	65+	7	3	4	12	3	9	19	6	13
	SubTotals:	81	31	50	65	16	49	146	47	99

Clients Served This Period

Unduplicated clients:	146
Client visits: <sup>3</sup>	886
Spanish speaking (primary language at home) clients served:	24
Deaf/hard of hearing clients served:	5
Blind/sight impaired clients served:	4
Homeless clients served:	10
Transgender M to F clients served:	0
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	42
Clients served this period who live outside Harris County:	104
Active substance abuse clients served:	4
Active psychiatric illness clients served:	17

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	1
Hemophilia Coagulation	0
Transfusion	5
Heterosexual Contact	85
MSM (not IDU)	32
IV Drug Use (not MSM)	2
MSM/IDU	0
Multiple Exposure Categories	2
Other risk	22

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency ( <b>not provided to RWPC</b> )						
B.	Contract Number ( <b>not provided to RWPC</b> )						
C.	Service Category Title (per RFP)					Control No.	<b>2</b>
D.	Request for Increase under (check one):	Part A:	or	MAI:			
	Request Period (check one):	April:	July:	<b>Oct: X</b>	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 <u>current</u> contract:	b. Cost/unit	c. Number of <u>additional</u> units	d. Total: (b x c)		
	1. LPAP Units	6744.9583	\$30.00	5000	\$150,000.00		
	2. LPAP Medications	607046.25	\$1.00	450000	\$450,000.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current <b>amount</b> in column a. and <b>requested</b> amount in column c.)		N/A		<u>\$0.00</u>		
	9. Total additional funding (must match E. above):					<b>\$600,000.00</b>	
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. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	2864	39%	16%	43%	84%	16%
	2. Number of clients that have received this service <u>under Part A</u> (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	2591	38%	15%	45%	84%	16%
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 <b>not</b> include agency name or identifying information):			
	1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	1	1				
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1	1				
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0				
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0				
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):		
	1. N/A	N/A	N/A	N/A	N/A		
	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).						
	<b>This form must be submitted electronically via email by published deadline to Glenn Urbach: glenn.urbach@phs.hctx.net</b>						

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #2 [Grant]: All [Service]: DRUG [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: ALL [Sub Cats 1]: All [Contract 2]: n/a [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 3

RACE	AGE <sup>2</sup>	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	0
	13-19	5	0	5	0	0	0	5	0	5
	20-24	53	3	50	7	0	7	60	3	57
	25-34	304	18	286	46	2	44	350	20	330
	35-44	242	13	229	74	4	70	316	17	299
	45-54	145	6	139	99	5	94	244	11	233
	55-64	121	2	119	48	2	46	169	4	165
	65+	18	0	18	13	0	13	31	0	31
	SubTotals:	888	42	846	287	13	274	1,175	55	1,120
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	1	0	0	0	1	0	1
	20-24	1	0	1	0	0	0	1	0	1
	25-34	9	0	9	0	0	0	9	0	9
	35-44	11	0	11	1	0	1	12	0	12
	45-54	10	0	10	2	0	2	12	0	12
	55-64	5	0	5	0	0	0	5	0	5
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	38	0	38	3	0	3	41	0	41
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	4	1	3	0	0	0	4	1	3
	25-34	10	5	5	0	0	0	10	5	5
	35-44	3	0	3	1	0	1	4	0	4
	45-54	5	2	3	1	1	0	6	3	3
	55-64	1	1	0	0	0	0	1	1	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	23	9	14	2	1	1	25	10	15
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	5	2	3	0	0	0	5	2	3
	35-44	2	0	2	0	0	0	2	0	2
	45-54	1	1	0	1	0	1	2	1	1
	55-64	0	0	0	1	1	0	1	1	0
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	10	3	7	2	1	1	12	4	8
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
PAC.ISLND/HAWAII	20-24	1	1	0	0	0	0	1	1	0
	25-34	2	0	2	0	0	0	2	0	2
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	4	1	3	0	0	0	4	1	3
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	50	47	3	2	2	0	52	49	3
	25-34	399	316	83	22	19	3	421	335	86
	35-44	387	284	103	48	40	8	435	324	111
	45-54	323	235	88	46	38	8	369	273	96
	55-64	230	118	112	36	28	8	266	146	120
	65+	58	22	36	4	3	1	62	25	37
	SubTotals:	1,449	1,024	425	158	130	28	1,607	1,154	453
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	8	2	6	0	0	0	8	2	6
	20-24	110	52	58	9	2	7	119	54	65
	25-34	729	341	388	68	21	47	797	362	435
	35-44	645	297	348	124	44	80	769	341	428
	45-54	485	244	241	149	44	105	634	288	346
	55-64	357	121	236	85	31	54	442	152	290
	65+	78	22	56	17	3	14	95	25	70
	SubTotals:	2,412	1,079	1,333	452	145	307	2,864	1,224	1,640

Clients Served This Period

Unduplicated clients:	2864
Client visits: <sup>3</sup>	18163
Spanish speaking (primary language at home) clients served:	647
Deaf/hard of hearing clients served:	20
Blind/sight impaired clients served:	36
Homeless clients served:	222
Transgender M to F clients served:	110
Transgender F to M clients served:	3
Clients served this period who live w/in Harris County:	2621
Clients served this period who live outside Harris County:	243
Active substance abuse clients served:	16
Active psychiatric illness clients served:	31

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	21
Hemophilia Coagulation	0
Transfusion	19
Heterosexual Contact	622
MSM (not IDU)	1543
IV Drug Use (not MSM)	39
MSM/IDU	10
Multiple Exposure Categories	73
Other risk	619
<u>Multi-Race Breakdown</u>	
ASN,WHT	7
BLK,NTV	2
BLK,NTV,WHT	2
BLK,WHT	12
HWN,WHT	1
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #2 [Grant]: All [Service]: DRUG [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: ALL [Sub Cats 1]: All [Contract 2]: n/a [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 3

RACE	AGE <sup>2</sup>	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	0
	13-19	5	0	5	0	0	0	5	0	5
	20-24	47	4	43	4	0	4	51	4	47
	25-34	280	10	270	42	0	42	322	10	312
	35-44	199	12	187	63	2	61	262	14	248
	45-54	118	3	115	74	4	70	192	7	185
	55-64	104	3	101	52	2	50	156	5	151
	65+	19	0	19	16	0	16	35	0	35
	SubTotals:	772	32	740	251	8	243	1,023	40	983
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	11	0	11	0	0	0	11	0	11
	35-44	8	0	8	1	0	1	9	0	9
	45-54	10	0	10	2	0	2	12	0	12
	55-64	4	0	4	0	0	0	4	0	4
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	35	0	35	3	0	3	38	0	38
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	3	1	2	0	0	0	3	1	2
	25-34	8	4	4	1	1	0	9	5	4
	35-44	5	2	3	0	0	0	5	2	3
	45-54	2	1	1	1	0	1	3	1	2
	55-64	1	1	0	0	0	0	1	1	0
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	20	9	11	2	1	1	22	10	12
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	0	0	0	1	0	1
	35-44	2	0	2	0	0	0	2	0	2
	45-54	2	1	1	1	0	1	3	1	2
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	1	0	2	1	1
	SubTotals:	6	1	5	2	1	1	8	2	6
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	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	3	0	3	0	0	0	3	0	3
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	4	0	4	0	0	0	4	0	4
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	6	6	0	1	1	0	7	7	0
	20-24	58	54	4	6	4	2	64	58	6
	25-34	359	299	60	24	22	2	383	321	62
	35-44	358	277	81	42	31	11	400	308	92
	45-54	295	223	72	47	39	8	342	262	80
	55-64	218	115	103	29	21	8	247	136	111
	65+	44	17	27	7	5	2	51	22	29
	SubTotals:	1,338	991	347	156	123	33	1,494	1,114	380
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	11	6	5	1	1	0	12	7	5
	20-24	109	59	50	10	4	6	119	63	56
	25-34	663	313	350	67	23	44	730	336	394
	35-44	573	291	282	106	33	73	679	324	355
	45-54	428	228	200	125	43	82	553	271	282
	55-64	327	119	208	81	23	58	408	142	266
	65+	66	17	49	24	6	18	90	23	67
	SubTotals:	2,177	1,033	1,144	414	133	281	2,591	1,166	1,425

Clients Served This Period

Unduplicated clients:	2591
Client visits: <sup>3</sup>	12539
Spanish speaking (primary language at home) clients served:	633
Deaf/hard of hearing clients served:	19
Blind/sight impaired clients served:	24
Homeless clients served:	181
Transgender M to F clients served:	102
Transgender F to M clients served:	5
Clients served this period who live w/in Harris County:	2391
Clients served this period who live outside Harris County:	200
Active substance abuse clients served:	12
Active psychiatric illness clients served:	26

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	20
Hemophilia Coagulation	1
Transfusion	13
Heterosexual Contact	579
MSM (not IDU)	1411
IV Drug Use (not MSM)	24
MSM/IDU	11
Multiple Exposure Categories	65
Other risk	549
<u>Multi-Race Breakdown</u>	
ASN,WHT	6
BLK,NTV	3
BLK,NTV,WHT	1
BLK,WHT	10
NTV,WHT	2



FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: Control #2 [Grant]: All [Service]: DRUG [Service Performer]: 0

Services performed between 3/1/24 and 9/30/24 Type Encounter

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

[Contract 1]: NO PAY [Sub Cats 1]: All [Contract 2]: n/a [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 3

RACE	AGE²	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	0
	13-19	5	0	5	0	0	0	5	0	5
	20-24	40	3	37	3	0	3	43	3	40
	25-34	232	8	224	33	0	33	265	8	257
	35-44	188	11	177	56	2	54	244	13	231
	45-54	110	3	107	67	5	62	177	8	169
	55-64	93	1	92	44	1	43	137	2	135
	65+	14	0	14	14	0	14	28	0	28
	SubTotals:	682	26	656	217	8	209	899	34	865
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	7	0	7	0	0	0	7	0	7
	35-44	8	0	8	1	0	1	9	0	9
	45-54	10	0	10	2	0	2	12	0	12
	55-64	3	0	3	0	0	0	3	0	3
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	30	0	30	3	0	3	33	0	33
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	1	1	0	0	0	2	1	1
	25-34	6	2	4	1	1	0	7	3	4
	35-44	4	1	3	0	0	0	4	1	3
	45-54	2	1	1	1	0	1	3	1	2
	55-64	1	1	0	0	0	0	1	1	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	15	6	9	2	1	1	17	7	10
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	0	0	0	1	0	1
	35-44	1	0	1	0	0	0	1	0	1
	45-54	2	1	1	1	0	1	3	1	2
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	1	0	2	1	1
	SubTotals:	5	1	4	2	1	1	7	2	5
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	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	3	0	3	0	0	0	3	0	3
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	4	0	4	0	0	0	4	0	4
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	7	7	0	0	0	0	7	7	0
	20-24	46	43	3	3	1	2	49	44	5
	25-34	305	253	52	17	15	2	322	268	54
	35-44	318	247	71	37	29	8	355	276	79
	45-54	267	203	64	41	34	7	308	237	71
	55-64	203	108	95	27	19	8	230	127	103
	65+	36	15	21	5	4	1	41	19	22
	SubTotals:	1,182	876	306	130	102	28	1,312	978	334
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	12	7	5	0	0	0	12	7	5
	20-24	89	47	42	6	1	5	95	48	47
	25-34	554	263	291	51	16	35	605	279	326
	35-44	519	259	260	94	31	63	613	290	323
	45-54	392	208	184	112	39	73	504	247	257
	55-64	300	110	190	71	20	51	371	130	241
	65+	52	15	37	20	5	15	72	20	52
	SubTotals:	1,918	909	1,009	354	112	242	2,272	1,021	1,251

Clients Served This Period

Unduplicated clients:	2272
Client visits: <sup>3</sup>	8414
Spanish speaking (primary language at home) clients served:	561
Deaf/hard of hearing clients served:	19
Blind/sight impaired clients served:	22
Homeless clients served:	157
Transgender M to F clients served:	92
Transgender F to M clients served:	4
Clients served this period who live w/in Harris County:	2096
Clients served this period who live outside Harris County:	176
Active substance abuse clients served:	11
Active psychiatric illness clients served:	26

Methods of Exposure (not mutually exclusive)

Perinatal/Transmission	16
Hemophilia Coagulation	1
Transfusion	13
Heterosexual Contact	502
MSM (not IDU)	1236
IV Drug Use (not MSM)	22
MSM/IDU	10
Multiple Exposure Categories	56
Other risk	486
<u>Multi-Race Breakdown</u>	
ASN,WHT	6
BLK,NTV	3
BLK,NTV,WHT	1
BLK,WHT	6
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

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)	Urban Primary Care			Control No.	3	
D.	Request for Increase under (check one):	Part A: <b>X</b>	or	MAI:			
	Request Period (check one):	April:	July:	Oct: <b>X</b>	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. MD, NP, PA	3166.86	\$275.00	400	\$110,000.00		
	2. Nutrition	188.12	\$150.00	165	\$24,750.00		
	3. LPAP Transactions	2620.95	\$30.00	500	\$15,000.00		
	4.				\$0.00		
	5.				\$0.00		
	6.						
	7.						
	8. LPAP MEDS Disbursements (list current amount in column a. and requested amount in column c.)	\$221,379.25	N/A	\$24,000.00	\$24,000.00		
	9. Total additional funding (must match E. above):					\$173,750.00	
G.	Number of new/additional clients to be served with requested increase.	35					
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	2826	59%	7%	32%	76%	24%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	2116	55%	7%	35%	75%	25%
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 <b>new</b> client:	1-2weeks	0-1 week	The demand for same-day appointments for new patients is rising steadily. Daily, newly diagnosed or out-of-care patients are linked to care, but we still have a limited number of same-day appointment spaces for new patients. Each month, we see an average of 20 to 25 new patients or return to care patients. With additional funding, we could lower new patient appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$232684.05 in unbilled services. Nutrition NP \$24,750   Medial Visits = \$95,700   LPAP Transactions = \$232,684.05			
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1-1.5 weeks	0 weeks	With a funding increase, existing patients could be seen within the same week.			
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	There is currently no waiting list, as we have been able to continue scheduling all patients for requested appointments			
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	There are no clients who are unable to access services on a monthly basis.			
J.	List all other sources and amounts of funding for similar services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):		
	1. Ryan White Part A NO PAY	RWGA	2/28/25	\$2,930,014	\$232,684.05 in no pay for services that have been delivered and cannot be billed		
	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).						
	<b>This form must be submitted electronically via email by published deadline to Glenn Urbach: glenn.urbach@phs.hctx.net</b>						

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #3 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: NO PAY [Sub Cats 1]: All [Contract 2]: [Sub Cats 2]: All  
 [Contract 3]: [Sub Cats 3]: All  
 [Contract 4]: [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

RACE	AGE²	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	0
	13-19	1	0	1	0	0	0	1	0	1
	20-24	10	0	10	0	0	0	10	0	10
	25-34	109	4	105	12	2	10	121	6	115
	35-44	95	6	89	43	2	41	138	8	130
	45-54	44	3	41	44	1	43	88	4	84
	55-64	31	1	30	19	0	19	50	1	49
	65+	10	1	9	6	0	6	16	1	15
	SubTotals:	300	15	285	124	5	119	424	20	404
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	2	0	2	0	0	0	2	0	2
	35-44	1	0	1	0	0	0	1	0	1
	45-54	2	0	2	1	0	1	3	0	3
	55-64	3	0	3	0	0	0	3	0	3
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	8	0	8	1	0	1	9	0	9
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	1	0	1	2	0	2
	25-34	1	1	0	0	0	0	1	1	0
	35-44	2	0	2	1	0	1	3	0	3
	45-54	1	0	1	1	1	0	2	1	1
	55-64	1	1	0	0	0	0	1	1	0
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	7	2	5	3	1	2	10	3	7
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	0	0	0	1	0	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	1	0	1	1	0	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	1	0	1	1	0	1	2	0	2
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	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	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	0	1	2	0	2
	SubTotals:	1	0	1	1	0	1	2	0	2
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	19	18	1	1	1	0	20	19	1
	25-34	119	111	8	8	6	2	127	117	10
	35-44	121	108	13	17	16	1	138	124	14
	45-54	69	61	8	20	17	3	89	78	11
	55-64	34	28	6	8	8	0	42	36	6
	65+	7	5	2	3	1	2	10	6	4
	SubTotals:	370	332	38	57	49	8	427	381	46
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	1	1	0	0	0	2	1	1
	20-24	30	18	12	2	1	1	32	19	13
	25-34	232	116	116	20	8	12	252	124	128
	35-44	219	114	105	61	18	43	280	132	148
	45-54	116	64	52	66	19	47	182	83	99
	55-64	69	30	39	28	8	20	97	38	59
	65+	19	6	13	10	1	9	29	7	22
	SubTotals:	687	349	338	187	55	132	874	404	470

Clients Served This Period

Unduplicated clients:	874
Client visits: <sup>3</sup>	1756
Spanish speaking (primary language at home) clients served:	299
Deaf/hard of hearing clients served:	2
Blind/sight impaired clients served:	1
Homeless clients served:	54
Transgender M to F clients served:	20
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	865
Clients served this period who live outside Harris County:	9
Active substance abuse clients served:	3
Active psychiatric illness clients served:	6

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	2
Hemophilia Coagulation	1
Transfusion	4
Heterosexual Contact	303
MSM (not IDU)	478
IV Drug Use (not MSM)	5
MSM/IDU	0
Multiple Exposure Categories	23
Other risk	97
<u>Multi-Race Breakdown</u>	
ASN,WHT	1
BLK,NTV	3
BLK,WHT	5
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #3 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: [Sub Cats 2]: All  
 [Contract 3]: [Sub Cats 3]: All  
 [Contract 4]: [Sub Cats 4]: All [Contract 5]: [Sub Cats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

RACE	AGE²	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	0
	13-19	2	0	2	1	1	0	3	1	2
	20-24	52	2	50	8	0	8	60	2	58
	25-34	416	10	406	84	5	79	500	15	485
	35-44	350	12	338	164	2	162	514	14	500
	45-54	185	8	177	167	2	165	352	10	342
	55-64	124	3	121	75	1	74	199	4	195
	65+	47	1	46	24	0	24	71	1	70
	SubTotals:	1,176	36	1,140	523	11	512	1,699	47	1,652
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	8	0	8	0	0	0	8	0	8
	35-44	7	0	7	2	0	2	9	0	9
	45-54	5	0	5	0	0	0	5	0	5
	55-64	5	0	5	0	0	0	5	0	5
	65+	1	0	1	1	0	1	2	0	2
	SubTotals:	26	0	26	3	0	3	29	0	29
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	1	0	0	0	1	0	1
	20-24	2	0	2	1	0	1	3	0	3
	25-34	11	4	7	2	0	2	13	4	9
	35-44	6	1	5	2	0	2	8	1	7
	45-54	2	0	2	2	1	1	4	1	3
	55-64	4	1	3	0	0	0	4	1	3
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	27	6	21	7	1	6	34	7	27
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	3	0	3	1	0	1	4	0	4
	35-44	1	0	1	1	0	1	2	0	2
	45-54	0	0	0	0	0	0	0	0	0
	55-64	1	1	0	1	0	1	2	1	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	5	1	4	3	0	3	8	1	7
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0



RACE	AGE <sup>2</sup>	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	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	0	1	2	0	2
	SubTotals:	2	0	2	1	0	1	3	0	3
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	40	36	4	4	3	1	44	39	5
	25-34	285	253	32	25	17	8	310	270	40
	35-44	261	218	43	41	34	7	302	252	50
	45-54	175	132	43	55	36	19	230	168	62
	55-64	105	79	26	27	18	9	132	97	35
	65+	30	16	14	3	2	1	33	18	15
	SubTotals:	898	736	162	155	110	45	1,053	846	207
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	5	2	3	1	1	0	6	3	3
	20-24	94	38	56	13	3	10	107	41	66
	25-34	723	267	456	112	22	90	835	289	546
	35-44	625	231	394	210	36	174	835	267	568
	45-54	368	140	228	224	39	185	592	179	413
	55-64	239	84	155	103	19	84	342	103	239
	65+	80	17	63	29	2	27	109	19	90
	SubTotals:	2,134	779	1,355	692	122	570	2,826	901	1,925

Clients Served This Period

Unduplicated clients:	2826
Client visits: <sup>3</sup>	15601
Spanish speaking (primary language at home) clients served:	578
Deaf/hard of hearing clients served:	17
Blind/sight impaired clients served:	12
Homeless clients served:	174
Transgender M to F clients served:	55
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	2729
Clients served this period who live outside Harris County:	97
Active substance abuse clients served:	6
Active psychiatric illness clients served:	26

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	17
Hemophilia Coagulation	1
Transfusion	18
Heterosexual Contact	1065
MSM (not IDU)	1440
IV Drug Use (not MSM)	23
MSM/IDU	2
Multiple Exposure Categories	95
Other risk	331
<u>Multi-Race Breakdown</u>	
ASN,WHT	1
BLK,NTV	9
BLK,NTV,WHT	1
BLK,WHT	18
NTV,WHT	5

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #3 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: [Sub Cats 2]: All  
 [Contract 3]: [Sub Cats 3]: All  
 [Contract 4]: [Sub Cats 4]: All [Contract 5]: [Sub Cats 5]: All  
 [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

RACE	AGE <sup>2</sup>	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	0
	13-19	3	0	3	0	0	0	3	0	3
	20-24	38	2	36	6	0	6	44	2	42
	25-34	260	11	249	50	2	48	310	13	297
	35-44	263	7	256	117	3	114	380	10	370
	45-54	111	4	107	138	2	136	249	6	243
	55-64	97	3	94	63	0	63	160	3	157
	65+	41	1	40	18	0	18	59	1	58
	SubTotals:	813	28	785	392	7	385	1,205	35	1,170
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	8	0	8	1	0	1	9	0	9
	35-44	4	0	4	2	0	2	6	0	6
	45-54	7	0	7	1	0	1	8	0	8
	55-64	6	0	6	0	0	0	6	0	6
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	26	0	26	4	0	4	30	0	30
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	1	0	1	3	0	3
	25-34	7	3	4	2	0	2	9	3	6
	35-44	4	0	4	1	0	1	5	0	5
	45-54	0	0	0	2	1	1	2	1	1
	55-64	4	1	3	0	0	0	4	1	3
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	18	4	14	6	1	5	24	5	19
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	1	0	1	2	0	2
	35-44	1	0	1	2	0	2	3	0	3
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	1	0	1	1	0	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	4	0	4	6	0	6
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	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	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	0	1	2	0	2
	SubTotals:	1	0	1	1	0	1	2	0	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	2	2	0	2	2	0
	20-24	36	33	3	3	2	1	39	35	4
	25-34	214	196	18	20	16	4	234	212	22
	35-44	225	191	34	40	34	6	265	225	40
	45-54	143	115	28	39	30	9	182	145	37
	55-64	79	57	22	19	14	5	98	71	27
	65+	21	13	8	8	4	4	29	17	12
	SubTotals:	718	605	113	131	102	29	849	707	142
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	3	0	3	2	2	0	5	2	3
	20-24	76	35	41	10	2	8	86	37	49
	25-34	490	210	280	74	18	56	564	228	336
	35-44	497	198	299	162	37	125	659	235	424
	45-54	261	119	142	180	33	147	441	152	289
	55-64	186	61	125	83	14	69	269	75	194
	65+	65	14	51	27	4	23	92	18	74
	SubTotals:	1,578	637	941	538	110	428	2,116	747	1,369

Clients Served This Period

Unduplicated clients:	2116
Client visits: <sup>3</sup>	7281
Spanish speaking (primary language at home) clients served:	509
Deaf/hard of hearing clients served:	5
Blind/sight impaired clients served:	5
Homeless clients served:	123
Transgender M to F clients served:	40
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	2096
Clients served this period who live outside Harris County:	20
Active substance abuse clients served:	7
Active psychiatric illness clients served:	12

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	14
Hemophilia Coagulation	1
Transfusion	16
Heterosexual Contact	810
MSM (not IDU)	1050
IV Drug Use (not MSM)	16
MSM/IDU	1
Multiple Exposure Categories	69
Other risk	263
<u>Multi-Race Breakdown</u>	
ASN,WHT	1
BLK,NTV	9
BLK,WHT	10
NTV,WHT	4

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

A.	Name of Agency (not provided to RWPC)						
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	Pcare, MCM, SLW, LPAP, EFA, OUTRE, EHE	Control No.	4			
D.	Request for Increase under (check one):	Part A: <b>X</b>	or	MAI:			
	Request Period (check one):	April:	July:	Oct: <b>X</b>	Final Qtr:		
E.	Amount of additional funding Requested:	<b>\$508,865.00</b>					
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. Primary Medical Care	1212.19	\$345.00	925	\$319,125.00		
	2. Service Linkage (Non-Medical)	1694.00	\$25.00	2100	\$52,500.00		
	3. LPAP	690.63	\$40.00	1906	\$76,240.00		
	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.) <b>Diagnostic Procedure</b>	\$141,444.27	N/A	\$17,000.00	\$17,000.00		
	8. Disbursements (list current amount in column a. and requested amount in column c.) <b>LPAP</b>	\$82,875.00	N/A	\$44,000.00	\$44,000.00		
	9. Total additional funding (must match E. above):				<b>\$508,865.00</b>		
G.	Number of new/additional clients to be served with requested increase.	<b>0</b>					
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	1049	50%	12%	38%	79%	21%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	997	51%	9%	41%	79%	21%
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 <b>new</b> client:	0	0				
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	0	0				
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0				
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0				
J.	List all other sources and amounts of funding for similar services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):		
	1. Primary Medical Care	Part A	2/28/25	\$319,125	Currently we have 925 units in NP Contract		
	2. Diagnostic Procedures	Part A	2/28/25	\$16,845	NP Costs billed from March - September		
	3. Service Linkage (Non-Medical)	Part A	2/28/25	\$52,505	Currently we have 2,100.21 units in NP		
	4. LPAP	Part A	2/28/25	\$76,240	Currently we have 1,906 units in NP Contract		
	5. LPAP Disbursements	Part A	2/28/25	\$44,064	NP Costs billed from March - September		

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 Glenn Urbach: glenn.urbach@phs.hctx.net**

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT

[Agency]: **Control #4** [Grant]: **All** [Service]: **ALL** [Service Performer]: **0**

Services performed between 3/1/23 and 2/29/24<sup>1</sup> Type **Encounter**

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

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

[Contract 3]: [Sub Cats 3]: **All**

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

[MAI]: **ALL** [ShowDetail]: **False** [Registration Type]: **ALL** [NewClientsOnly]: **No**<sup>3</sup>

		BIRTH GENDER								
RACE	AGE <sup>2</sup>	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	0
	13-19	4	1	3	1	0	1	5	1	4
	20-24	41	1	40	4	0	4	45	1	44
	25-34	213	6	207	28	0	28	241	6	235
	35-44	97	4	93	54	1	53	151	5	146
	45-54	27	0	27	35	0	35	62	0	62
	55-64	14	0	14	12	0	12	26	0	26
	65+	3	0	3	6	0	6	9	0	9
	<b>SubTotals:</b>	<b>399</b>	<b>12</b>	<b>387</b>	<b>140</b>	<b>1</b>	<b>139</b>	<b>539</b>	<b>13</b>	<b>526</b>
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	7	0	7	1	0	1	8	0	8
	35-44	4	0	4	1	0	1	5	0	5
	45-54	0	0	0	0	0	0	0	0	0
	55-64	2	0	2	0	0	0	2	0	2
	65+	0	0	0	1	0	1	1	0	1
	<b>SubTotals:</b>	<b>14</b>	<b>0</b>	<b>14</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>17</b>	<b>0</b>	<b>17</b>
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	1	0	1	0	1	2	1	1
	25-34	10	3	7	0	0	0	10	3	7
	35-44	4	2	2	0	0	0	4	2	2
	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
	<b>SubTotals:</b>	<b>15</b>	<b>6</b>	<b>9</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>16</b>	<b>6</b>	<b>10</b>
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	<b>SubTotals:</b>	<b>2</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	43	40	3	1	1	0	44	41	3
	25-34	169	144	25	26	20	6	195	164	31
	35-44	80	64	16	21	17	4	101	81	20
	45-54	47	34	13	14	8	6	61	42	19
	55-64	51	32	19	10	7	3	61	39	22
	65+	10	5	5	1	1	0	11	6	5
	<b>SubTotals:</b>	<b>402</b>	<b>321</b>	<b>81</b>	<b>73</b>	<b>54</b>	<b>19</b>	<b>475</b>	<b>375</b>	<b>100</b>

ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	6	3	3	1	0	1	7	3	4
	20-24	87	42	45	6	1	5	93	43	50
	25-34	399	153	246	55	20	35	454	173	281
	35-44	185	70	115	76	18	58	261	88	173
	45-54	75	34	41	49	8	41	124	42	82
	55-64	67	32	35	22	7	15	89	39	50
	65+	13	5	8	8	1	7	21	6	15
	<b>SubTotals:</b>	<b>832</b>	<b>339</b>	<b>493</b>	<b>217</b>	<b>55</b>	<b>162</b>	<b>1,049</b>	<b>394</b>	<b>655</b>

**Clients Served This Period**

Unduplicated clients:	1049
Client visits: <sup>3</sup>	3451
Spanish speaking (primary language at home) clients served:	235
Deaf/hard of hearing clients served:	3
Blind/sight impaired clients served:	20
Homeless clients served:	69
Transgender M to F clients served:	33
Transgender F to M clients served:	1
Clients served this period who live w/in Harris County:	986
Clients served this period who live outside Harris County:	63
Active substance abuse clients served:	7
Active psychiatric illness clients served:	13

**Methods of Exposure (not mutually exclusive)**

PerinatalTransmission	7
Hemophilia Coagulation	0
Transfusion	5
Heterosexual Contact	328
MSM (not IDU)	656
IV Drug Use (not MSM)	4
MSM/IDU	2
Multiple Exposure Categories	33
Other risk	75
<b><u>Multi-Race Breakdown</u></b>	
BLK,ASN	1
BLK,ASN,WHT	1
BLK,HWN,WHT	1
BLK,NTV	2
BLK,NTV,WHT	1
BLK,WHT	9
NTV,WHT	1

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT

[Agency]: **Control #4** [Grant]: **All** [Service]: **ALL** [Service Performer]: **0**

Services performed between 3/1/24 and 9/30/24 <sup>1</sup> Type **Encounter**

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

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

[Contract 3]: [Sub Cats 3]: **All**

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

[MAI]: **ALL** [ShowDetail]: **False** [Registration Type]: **ALL** [NewClientsOnly]: **No**<sup>3</sup>

RACE	AGE <sup>2</sup>	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	0	0
	13-19	2	0	2	0	0	0	2	0	2	
	20-24	35	3	32	5	0	5	40	3	37	
	25-34	196	9	187	39	0	39	235	9	226	
	35-44	100	2	98	51	2	49	151	4	147	
	45-54	28	0	28	26	0	26	54	0	54	
	55-64	21	2	19	15	0	15	36	2	34	
	65+	2	0	2	3	0	3	5	0	5	
	<b>SubTotals:</b>	<b>384</b>	<b>16</b>	<b>368</b>	<b>139</b>	<b>2</b>	<b>137</b>	<b>523</b>	<b>18</b>	<b>505</b>	
ASIAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	1	0	1	1	0	1	2	0	2	
	25-34	6	0	6	1	0	1	7	0	7	
	35-44	4	0	4	0	0	0	4	0	4	
	45-54	1	0	1	0	0	0	1	0	1	
	55-64	0	0	0	1	0	1	1	0	1	
	65+	1	0	1	1	0	1	2	0	2	
	<b>SubTotals:</b>	<b>13</b>	<b>0</b>	<b>13</b>	<b>4</b>	<b>0</b>	<b>4</b>	<b>17</b>	<b>0</b>	<b>17</b>	
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	1	0	1	0	0	0	1	0	1	
	25-34	6	4	2	0	0	0	6	4	2	
	35-44	4	2	2	1	0	1	5	2	3	
	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	
	<b>SubTotals:</b>	<b>11</b>	<b>6</b>	<b>5</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>12</b>	<b>6</b>	<b>6</b>	
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	0	0	0	0	0	0	0	0	0	
	35-44	0	0	0	0	0	0	0	0	0	
	45-54	1	0	1	0	0	0	1	0	1	
	55-64	0	0	0	0	0	0	0	0	0	
	65+	0	0	0	0	0	0	0	0	0	
	<b>SubTotals:</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0	
	13-19	0	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	0	
	25-34	1	1	0	0	0	0	1	1	0	
	35-44	0	0	0	0	0	0	0	0	0	
	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	
	<b>SubTotals:</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	



WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	34	32	2	1	1	0	35	33	2
	25-34	169	152	17	27	23	4	196	175	21
	35-44	89	76	13	16	15	1	105	91	14
	45-54	48	40	8	12	9	3	60	49	11
	55-64	35	26	9	5	4	1	40	30	10
	65+	4	2	2	3	2	1	7	4	3
	<b>SubTotals:</b>	<b>379</b>	<b>328</b>	<b>51</b>	<b>64</b>	<b>54</b>	<b>10</b>	<b>443</b>	<b>382</b>	<b>61</b>

ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	0	2	0	0	0	2	0	2
	20-24	71	35	36	7	1	6	78	36	42
	25-34	378	166	212	67	23	44	445	189	256
	35-44	197	80	117	68	17	51	265	97	168
	45-54	78	40	38	38	9	29	116	49	67
	55-64	56	28	28	21	4	17	77	32	45
	65+	7	2	5	7	2	5	14	4	10
	<b>SubTotals:</b>	<b>789</b>	<b>351</b>	<b>438</b>	<b>208</b>	<b>56</b>	<b>152</b>	<b>997</b>	<b>407</b>	<b>590</b>

**Clients Served This Period**

Unduplicated clients:	997
Client visits: <sup>3</sup>	2739
Spanish speaking (primary language at home) clients served:	259
Deaf/hard of hearing clients served:	2
Blind/sight impaired clients served:	18
Homeless clients served:	72
Transgender M to F clients served:	26
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	949
Clients served this period who live outside Harris County:	48
Active substance abuse clients served:	2
Active psychiatric illness clients served:	3

**Methods of Exposure (not mutually exclusive)**

PerinatalTransmission	11
Hemophilia Coagulation	0
Transfusion	8
Heterosexual Contact	318
MSM (not IDU)	626
IV Drug Use (not MSM)	3
MSM/IDU	0
Multiple Exposure Categories	36
Other risk	66

**Multi-Race Breakdown**

ASN,WHT	1
BLK,ASN	1
BLK,HWN,WHT	1
BLK,NTV	2
BLK,NTV,WHT	1
BLK,WHT	6

**FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency ( <b>not provided to RWPC</b> )						
B.	Contract Number ( <b>not provided to RWPC</b> )						
C.	Service Category Title (per RFP)	Medical Case Management				Control No.	<b>5</b>
D.	Request for Increase under (check one):	Part A:	or	MAI:			
	Request Period (check one):	April:	July:	<b>Oct: X</b>	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 <u>current</u> contract:	b. Cost/unit	c. Number of <u>additional</u> units	d. Total: (b x c)		
	1. Clinical Case Management Unit of Service	7586.09	\$35.00	571.43	\$20,000.00		
	2.				\$0.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current <b>amount</b> in column a. and <b>requested</b> amount in column c.)		N/A		\$0.00		
	9. Total additional funding (must match E. above):					<b>\$20,000.00</b>	
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. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	223	56%	23%	20%	77%	20%
	2. Number of clients that have received this service <u>under Part A</u> (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	152	51%	22%	26%	76%	38%
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 <b>not</b> include agency name or identifying information):			
	1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2 weeks	Same	We screen clients to identify if they are in crisis, and if so they are expedited. We can also provide more immediate services or referrals as necessary.			
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	2 days	Same				
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	Same				
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	Same				
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	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).						
	<b>This form must be submitted electronically via email by published deadline to Glenn Urbach: glenn.urbach@phs.hctx.net</b>						

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT BY COUNTY AND/OR REGION

Clients with Services Performed Between 03/01/23 and 02/29/24

[AgencyCode]: Control #5 [GrantCode]: All  
[CountyCode]: ALL [RegionCode]: 0 - All  
[ServiceCode]: CMGMT [SubCategories]: All  
[ContractNumber]:

RACE	AGE	BIRTH GENDER						BOTH GENDERS		
		MALE		FEMALE						
		Hispanic	Non-Hisp	Hispanic	Non- Hisp	Hispanic	Non -Hisp			
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	15	0	15	0	0	0	15	0	15
	35-44	17	0	17	2	0	2	19	0	19
	45-54	10	1	9	14	0	14	24	1	23
	55-64	35	0	35	15	0	15	50	0	50
	65 +	12	0	12	5	0	5	17	0	17
Sub Totals By Race:		89	1	88	36	0	36	125	1	124
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	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	1	0	1	1	0	1
Sub Totals By Race:		0	0	0	1	0	1	1	0	1
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	2	1	1	0	0	0	2	1	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65 +	1	1	0	0	0	0	1	1	0
Sub Totals By Race:		3	2	1	0	0	0	3	2	1
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	2	2	0	0	0	0	2	2	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	2	1	1	0	0	0	2	1	1
	65 +	0	0	0	0	0	0	0	0	0
Sub Totals By Race:		4	3	1	0	0	0	4	3	1
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	1	1	0	0	0	2	1	1

25-34	3	2	1	0	0	0	3	2	1
35-44	8	7	1	0	0	0	8	7	1
45-54	19	6	13	2	2	0	21	8	13
55-64	37	14	23	4	3	1	41	17	24
65 +	13	4	9	2	0	2	15	4	11
<b>Sub Totals By Race:</b>	<b>82</b>	<b>34</b>	<b>48</b>	<b>8</b>	<b>5</b>	<b>3</b>	<b>90</b>	<b>39</b>	<b>51</b>

**All Races and Ages:                    178                    40                    138                    45                    5                    40                    223                    45                    178**

Unduplicated clients served this period:	223	<u>METHODS OF EXPOSURE (not mutually exclusive)</u>	
Spanish speaking clients served this period	16	PerinatalTransmission	0
Deaf/hard of hearing clients served this period	7	Hemophilia Coagulation	0
Blind/sight impaired clients served this period	7	Transfusion	3
Homeless clients served this period	27	Heterosexual Contact	57
Transgender M to F clients served this period	0	MSM (not IDU)	93
Transgender F to M clients served this period	0	IV Drug Use (not MSM)	6
Clients served this period who live w/in Harris County	215	MSM/IDU	5
Clients served this period who live outside Harris County	8	Multiple Exposure Categories	16
Active substance abuse clients served this period	3	Other risk	60
Active psychiatric illness clients served this period	12		

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT BY COUNTY AND/OR REGION

Clients with Services Performed Between 03/01/24 and 10/15/24

[AgencyCode]: Control #5 [GrantCode]: All  
[CountyCode]: ALL [RegionCode]: 0 - All  
[ServiceCode]: CMGMT [SubCategories]: All  
[ContractNumber]:

RACE	AGE	BIRTH GENDER						BOTH GENDERS		
		MALE			FEMALE					
		Hispanic	Non-Hisp		Hispanic	Non- Hisp		Hispanic	Non -Hisp	
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	9	0	9	0	0	0	9	0	9
	35-44	9	0	9	1	0	1	10	0	10
	45-54	8	0	8	5	0	5	13	0	13
	55-64	21	0	21	11	0	11	32	0	32
65 +	7	0	7	6	0	6	13	0	13	
Sub Totals By Race:		55	0	55	23	0	23	78	0	78
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
65 +	1	1	0	0	0	0	1	1	0	
Sub Totals By Race:		1	1	0	0	0	0	1	1	0
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	1	0	1	0	0	0	1	0	1
65 +	0	0	0	0	0	0	0	0	0	
Sub Totals By Race:		1	0	1	0	0	0	1	0	1
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	3	2	1	0	0	0	3	2	1
	25-34	5	4	1	0	0	0	5	4	1
	35-44	8	6	2	0	0	0	8	6	2
	45-54	12	7	5	3	3	0	15	10	5
	55-64	27	11	16	1	1	0	28	12	16
65 +	11	4	7	2	1	1	13	5	8	
Sub Totals By Race:		66	34	32	6	5	1	72	39	33

All Races and Ages:                      123            35            88            29            5            24            152            40            112

Unduplicated clients served this period:                      152            METHODS OF EXPOSURE (not mutually exclusive)

Spanish speaking clients served this period	16	PerinatalTransmission	0
Deaf/hard of hearing clients served this period	8	Hemophilia Coagulation	0
Blind/sight impaired clients served this period	9	Transfusion	1
Homeless clients served this period	18	Heterosexual Contact	40
Transgender M to F clients served this period	0	MSM (not IDU)	64
Transgender F to M clients served this period	0	IV Drug Use (not MSM)	4
Clients served this period who live w/in Harris County	147	MSM/IDU	1
Clients served this period who live outside Harris County	5	Multiple Exposure Categories	9
Active substance abuse clients served this period	1	Other risk	41
Active psychiatric illness clients served this period	9		

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency ( <b>not provided to RWPC</b> )						
B.	Contract Number ( <b>not provided to RWPC</b> )						
C.	Service Category Title (per RFP)	Clinical Case Management			Control No.	6	
D.	Request for Increase under (check one):	Part A: <b>X</b>	or	MAI:			
	Request Period (check one):	April:	July:	Oct: <b>X</b>	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. CCM	10620.48	\$25.00	320	\$8,000.00		
	2.				\$0.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.						
	7.						
	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):				\$8,000.00		
G.	Number of new/additional clients to be served with requested increase.	20					
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	513	57%	11%	30%	69%	31%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	372	57%	12%	29%	74%	26%
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 <b>not</b> include agency name or identifying information):			
	1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	1-2weeks	0-1 week	Currently the CCM department has hired and additional therapist to render additional services. The department would be able to offer same-week appointments for new patients with increase in funding. Each month, we see an average of 5-10 psych new patients that are being referred to clinical case management for services. With additional funding, we could lower new patient appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$3008.12 in unbilled services .			
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1-1.5 weeks	0 weeks	With a funding increase, existing patients could be seen within the same week.			
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	There is currently no waiting list, as we have been able to continue scheduling all patients for requested appointments			
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	There are no clients who are unable to access services on a monthly basis.			
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):		
	1. Ryan White Part A NO PAY	RWGA	2/28/25	\$265,512	\$3008.25 in no pay for services that have been delivered and cannot be billed		
	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).						
	<b>This form must be submitted electronically via email by published deadline to Glenn Urbach: glenn.urbach@phs.hctx.net</b>						

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #6 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 1 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 3

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	9	0	9	2	0	2	11	0	11
	25-34	66	2	64	15	1	14	81	3	78
	35-44	67	1	66	38	1	37	105	2	103
	45-54	28	3	25	42	1	41	70	4	66
	55-64	11	0	11	11	0	11	22	0	22
	65+	4	1	3	8	0	8	12	1	11
	SubTotals:	185	7	178	116	3	113	301	10	291
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	2	0	2	0	0	0	2	0	2
	35-44	2	0	2	0	0	0	2	0	2
	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:	4	0	4	0	0	0	4	0	4
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	1	0	1	2	0	2
	25-34	2	0	2	1	0	1	3	0	3
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	2	1	1	2	1	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	3	0	3	4	1	3	7	1	6
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	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	1	0	1	2	0	2
	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	1	0	1	2	0	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0



		BIRTH GENDER								
RACE	AGE <sup>2</sup>	MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
WHITE	20-24	8	7	1	0	0	0	8	7	1
	25-34	53	46	7	3	1	2	56	47	9
	35-44	51	39	12	9	7	2	60	46	14
	45-54	34	22	12	17	7	10	51	29	22
	55-64	13	10	3	5	2	3	18	12	6
	65+	4	1	3	2	0	2	6	1	5
	SubTotals:		163	125	38	36	17	19	199	142
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	18	7	11	3	0	3	21	7	14
	25-34	123	48	75	19	2	17	142	50	92
	35-44	121	40	81	48	8	40	169	48	121
	45-54	62	25	37	61	9	52	123	34	89
	55-64	24	10	14	16	2	14	40	12	28
	65+	8	2	6	10	0	10	18	2	16
	SubTotals:		356	132	224	157	21	136	513	153

Clients Served This Period

Unduplicated clients:	513
Client visits: <sup>3</sup>	1329
Spanish speaking (primary language at home) clients served:	91
Deaf/hard of hearing clients served:	1
Blind/sight impaired clients served:	0
Homeless clients served:	24
Transgender M to F clients served:	8
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	403
Clients served this period who live outside Harris County:	110
Active substance abuse clients served:	1
Active psychiatric illness clients served:	7

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	3
Hemophilia Coagulation	0
Transfusion	4
Heterosexual Contact	196
MSM (not IDU)	257
IV Drug Use (not MSM)	4
MSM/IDU	0
Multiple Exposure Categories	17
Other risk	63
<u>Multi-Race Breakdown</u>	
BLK,NTV	1
BLK,WHT	5
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #6 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: NO PAY [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	3	1	2	1	0	1	4	1	3
	35-44	1	0	1	1	0	1	2	0	2
	45-54	2	0	2	2	0	2	4	0	4
	55-64	0	0	0	1	0	1	1	0	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	6	1	5	5	0	5	11	1	10
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	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	0	0	0	0	0	0	0	0	0
	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	1	1	0	1	1	0
	55-64	0	0	0	1	0	1	1	0	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	1	0	1	2	1	1	3	1	2
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	3	1	2	1	0	1	4	1	3
	35-44	2	0	2	1	0	1	3	0	3
	45-54	3	0	3	3	1	2	6	1	5
	55-64	0	0	0	2	0	2	2	0	2
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	8	1	7	7	1	6	15	2	13

<u>Clients Served This Period</u>		<u>Methods of Exposure (not mutually exclusive)</u>	
Unduplicated clients:	15	PerinatalTransmission	0
Client visits: <sup>3</sup>	21	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	0	Transfusion	0
Deaf/hard of hearing clients served:	0	Heterosexual Contact	10
Blind/sight impaired clients served:	0	MSM (not IDU)	4
Homeless clients served:	1	IV Drug Use (not MSM)	0
Transgender M to F clients served:	0	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	1
Clients served this period who live w/in Harris County:	8	Other risk	1
Clients served this period who live outside Harris County:	7	<u>Multi-Race Breakdown</u>	
Active substance abuse clients served:	0	BLK,WHT	1
Active psychiatric illness clients served:	0		

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]: Control #6 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	2	0	2	0	0	0	2	0	2
	20-24	5	0	5	1	0	1	6	0	6
	25-34	57	5	52	10	0	10	67	5	62
	35-44	41	0	41	17	0	17	58	0	58
	45-54	19	1	18	31	0	31	50	1	49
	55-64	13	0	13	15	0	15	28	0	28
	65+	4	0	4	3	0	3	7	0	7
	SubTotals:	141	6	135	77	0	77	218	6	212
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	1	0	1	0	0	0	1	0	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	0	0	0	2	0	2
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	1	0	1	1	0	1
	25-34	1	0	1	0	0	0	1	0	1
	35-44	2	0	2	0	0	0	2	0	2
	45-54	2	0	2	0	0	0	2	0	2
	55-64	1	1	0	0	0	0	1	1	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	6	1	5	1	0	1	7	1	6
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	4	1	0	0	0	5	4	1
	25-34	52	46	6	2	1	1	54	47	7
	35-44	32	22	10	7	3	4	39	25	14
	45-54	20	10	10	6	4	2	26	14	12
	55-64	15	10	5	2	0	2	17	10	7
	65+	2	1	1	1	0	1	3	1	2
	SubTotals:	127	94	33	18	8	10	145	102	43
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	3	1	2	0	0	0	3	1	2

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
ALL RACES	20-24	10	4	6	2	0	2	12	4	8
	25-34	110	51	59	12	1	11	122	52	70
	35-44	75	22	53	24	3	21	99	25	74
	45-54	42	11	31	37	4	33	79	15	64
	55-64	30	11	19	17	0	17	47	11	36
	65+	6	1	5	4	0	4	10	1	9
	SubTotals:	276	101	175	96	8	88	372	109	263

Clients Served This Period

Unduplicated clients:	372
Client visits: <sup>3</sup>	866
Spanish speaking (primary language at home) clients served:	49
Deaf/hard of hearing clients served:	1
Blind/sight impaired clients served:	1
Homeless clients served:	16
Transgender M to F clients served:	5
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	281
Clients served this period who live outside Harris County:	91
Active substance abuse clients served:	1
Active psychiatric illness clients served:	4

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	3
Hemophilia Coagulation	0
Transfusion	2
Heterosexual Contact	127
MSM (not IDU)	211
IV Drug Use (not MSM)	2
MSM/IDU	0
Multiple Exposure Categories	13
Other risk	37
<u>Multi-Race Breakdown</u>	
BLK,ASN	1
BLK,NTV	1
BLK,WHT	4
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

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)	Oral Health			Control No.	7	
D.	Request for Increase under (check one):	Part A: <b>X</b>	or	MAI:			
	Request Period (check one):	April:	July:	Oct: <b>X</b>	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 <u>current</u> contract:	b. Cost/unit	c. Number of <u>additional</u> units	d. Total: (b x c)		
	1. Prosthodontics	199.68	\$150.00	67	\$10,050.00		
	2.				\$0.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.						
	7.						
	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):					\$10,050.00	
G.	Number of new/additional clients to be served with requested increase.	20					
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	349	40%	25%	34%	70%	30%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	254	38%	27%	33%	68%	32%
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 <b>new</b> client:	1-2weeks	0-1 week	The oral health department would be able to offer same-week appointments for new patients with increase in funding especially to patients experiencing oral pain. With additional funding, we could lower new patient appointment wait times from the current 1 week to same day - 2 days for patients that need immediate services due to pain. We are currently holding \$12,300 in unbilled services .			
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1-1.5 weeks	0 weeks	With a funding increase, existing patients could be seen within the same week.			
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	There is currently no waiting list, as we have been able to continue scheduling all patients for requested appointments			
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	There are no clients who are unable to access services on a monthly basis.			
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):		
	1. Ryan White Part A NO PAY	RWGA	2/28/25	\$166,404	\$12,300 in no pay for services that have been delivered and cannot be billed		
	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).						
	<b>This form must be submitted electronically via email by published deadline to Glenn Urbach: glenn.urbach@phs.hctx.net</b>						

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT

[Agency]: Control #7 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: NO PAY [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0	0
	13-19	0	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0	0
	25-34	5	1	4	1	0	1	6	1	5	
	35-44	5	0	5	1	0	1	6	0	6	
	45-54	3	0	3	2	0	2	5	0	5	
	55-64	4	0	4	4	0	4	8	0	8	
	65+	1	0	1	2	0	2	3	0	3	
	SubTotals:	18	1	17	10	0	10	28	1	27	
ASIAN	0-12	0	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1	
	55-64	1	0	1	0	0	0	1	0	1	
	65+	1	0	1	0	0	0	1	0	1	
	SubTotals:	3	0	3	0	0	0	3	0	3	
WHITE	0-12	0	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0	0
	25-34	3	2	1	0	0	0	3	2	1	
	35-44	8	4	4	4	2	2	12	6	6	
	45-54	6	3	3	3	2	1	9	5	4	
	55-64	2	2	0	2	0	2	4	2	2	
	65+	3	0	3	0	0	0	3	0	3	
	SubTotals:	22	11	11	9	4	5	31	15	16	
ALL RACES	0-12	0	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0	0
	25-34	8	3	5	1	0	1	9	3	6	
	35-44	13	4	9	5	2	3	18	6	12	
	45-54	10	3	7	5	2	3	15	5	10	
	55-64	7	2	5	6	0	6	13	2	11	
	65+	5	0	5	2	0	2	7	0	7	
	SubTotals:	43	12	31	19	4	15	62	16	46	

Clients Served This Period

Unduplicated clients:	62
Client visits: <sup>3</sup>	94
Spanish speaking (primary language at home) clients served:	10
Deaf/hard of hearing clients served:	1
Blind/sight impaired clients served:	0
Homeless clients served:	3
Transgender M to F clients served:	0
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	2
Clients served this period who live outside Harris County:	60
Active substance abuse clients served:	0
Active psychiatric illness clients served:	1

Methods of Exposure (not mutually exclusive)

Perinatal Transmission	2
Hemophilia Coagulation	0
Transfusion	0
Heterosexual Contact	22
MSM (not IDU)	23
IV Drug Use (not MSM)	0
MSM/IDU	0
Multiple Exposure Categories	0
Other risk	13

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)



HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #7 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	1	1	0	0	0	2	1	1
	25-34	26	3	23	5	0	5	31	3	28
	35-44	19	0	19	14	0	14	33	0	33
	45-54	19	1	18	23	1	22	42	2	40
	55-64	12	0	12	12	0	12	24	0	24
	65+	5	0	5	7	0	7	12	0	12
	SubTotals:	83	5	78	61	1	60	144	6	138
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	2	0	2	0	0	0	2	0	2
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	2	0	2	0	0	0	2	0	2
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	1	0	1	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	1	0	1	3	0	3
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	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	1	0	0	0	0	1	1	0
	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	1	0	0	0	0	1	1	0
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
WHITE	20-24	6	5	1	0	0	0	6	5	1
	25-34	35	25	10	3	3	0	38	28	10
	35-44	40	24	16	11	5	6	51	29	22
	45-54	36	19	17	14	8	6	50	27	23
	55-64	28	15	13	9	5	4	37	20	17
	65+	13	2	11	4	0	4	17	2	15
	SubTotals:	158	90	68	41	21	20	199	111	88
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	8	6	2	0	0	0	8	6	2
	25-34	63	28	35	8	3	5	71	31	40
	35-44	60	25	35	25	5	20	85	30	55
	45-54	56	20	36	38	9	29	94	29	65
	55-64	40	15	25	21	5	16	61	20	41
	65+	19	2	17	11	0	11	30	2	28
	SubTotals:	246	96	150	103	22	81	349	118	231

Clients Served This Period

Unduplicated clients:	349
Client visits: <sup>3</sup>	1726
Spanish speaking (primary language at home) clients served:	59
Deaf/hard of hearing clients served:	4
Blind/sight impaired clients served:	1
Homeless clients served:	16
Transgender M to F clients served:	2
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	34
Clients served this period who live outside Harris County:	315
Active substance abuse clients served:	0
Active psychiatric illness clients served:	3

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	6
Hemophilia Coagulation	1
Transfusion	5
Heterosexual Contact	139
MSM (not IDU)	142
IV Drug Use (not MSM)	5
MSM/IDU	2
Multiple Exposure Categories	9
Other risk	53
<u>Multi-Race Breakdown</u>	
BLK,NTV	1
BLK,WHT	2

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #7 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	0	0	0	2	0	2
	25-34	12	2	10	6	0	6	18	2	16
	35-44	16	0	16	12	0	12	28	0	28
	45-54	9	0	9	13	1	12	22	1	21
	55-64	12	0	12	9	0	9	21	0	21
	65+	2	0	2	6	0	6	8	0	8
	SubTotals:	53	2	51	46	1	45	99	3	96
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	2	0	2	0	0	0	2	0	2
	55-64	1	0	1	0	0	0	1	0	1
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	4	0	4	0	0	0	4	0	4
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	0	0	0	1	0	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	0	0	0	2	0	2
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	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	1	0	0	0	0	1	1	0
	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	1	0	0	0	0	1	1	0
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
WHITE	20-24	0	0	0	0	0	0	0	0	0
	25-34	22	18	4	2	2	0	24	20	4
	35-44	30	16	14	9	4	5	39	20	19
	45-54	33	17	16	13	8	5	46	25	21
	55-64	15	10	5	8	4	4	23	14	9
	65+	12	1	11	4	0	4	16	1	15
	SubTotals:	112	62	50	36	18	18	148	80	68
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	0	0	0	2	0	2
	25-34	35	20	15	8	2	6	43	22	21
	35-44	47	17	30	21	4	17	68	21	47
	45-54	45	17	28	26	9	17	71	26	45
	55-64	28	10	18	17	4	13	45	14	31
	65+	15	1	14	10	0	10	25	1	24
	SubTotals:	172	65	107	82	19	63	254	84	170

Clients Served This Period

Unduplicated clients:	254
Client visits: <sup>3</sup>	868
Spanish speaking (primary language at home) clients served:	46
Deaf/hard of hearing clients served:	4
Blind/sight impaired clients served:	1
Homeless clients served:	13
Transgender M to F clients served:	2
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	7
Clients served this period who live outside Harris County:	247
Active substance abuse clients served:	1
Active psychiatric illness clients served:	6

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	6
Hemophilia Coagulation	0
Transfusion	5
Heterosexual Contact	106
MSM (not IDU)	103
IV Drug Use (not MSM)	2
MSM/IDU	2
Multiple Exposure Categories	7
Other risk	31
<u>Multi-Race Breakdown</u>	
BLK,ASN	1
BLK,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

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)	Vision			Control No.	8
D.	Request for Increase under (check one):	Part A: X	or	MAI:		
	Request Period (check one):	April:	July:	Oct: X	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. Vision	3000	\$100.00	250	\$25,000.00	
	2.				\$0.00	
	3.				\$0.00	
	4.				\$0.00	
	5.				\$0.00	
	6.					
	7.					
	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):				\$25,000.00	
G.	Number of new/additional clients to be served with requested increase.	80				
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <b>De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.</b>	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 2023.* (March 1, 2023 - February 29, 2024) *If agency was funded for service under Part A (or MAI) in FY 2022 - if not, mark these cells as "NA"	1200	52%	9%	36%	72% 28%
	2. Number of clients that have received this service under Part A (or MAI) in FY 2024. a. April Request Period = Not Applicable b. July Request Period = 03/01/24 - 06/30/24 c. October Request Period = 03/01/24 - 09/30/24 d. 4th Qtr. Request Period = 03/01/24 - 11/30/24	986	53%	10%	34%	71% 29%
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:	1-2weeks	0-1 week	Currently the vision department has two optometrists and they are able to provide more services due to the current demand for vision services. The demand for same-day appointments for new patients is rising steadily. Each month, we see an average of 20 to 25 medical new patients that are being referred to vision for services. With additional funding, we could lower new patient appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$15400 in unbilled services .		
	2. Length of waiting time (in weeks) for an appointment for a current client:	1-1.5 weeks	0 weeks	With a funding increase, existing patients could be seen within the same week.		
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	There is currently no waiting list, as we have been able to continue scheduling all patients for requested appointments		
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	There are no clients who are unable to access services on a monthly basis.		
J.	List all other sources and amounts of funding for similar services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):	
	1. Ryan White Part A NO PAY	RWGA	2/28/25	\$300,000	\$15,400 in no pay for services that have been delivered and cannot be billed	
	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).					
	<b>This form must be submitted electronically via email by published deadline to Glenn Urbach: glenn.urbach@phs.hctx.net</b>					

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #8 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: NO PAY [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	3	0	3	0	0	0	3	0	3
	25-34	16	3	13	2	0	2	18	3	15
	35-44	22	0	22	8	0	8	30	0	30
	45-54	9	0	9	7	0	7	16	0	16
	55-64	10	0	10	2	0	2	12	0	12
	65+	0	0	0	1	0	1	1	0	1
	SubTotals:	60	3	57	20	0	20	80	3	77
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	2	0	2	0	0	0	2	0	2
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	0	0	0	2	0	2
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	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	0	0	0	0	0	0	0	0	0
	20-24	3	2	1	2	1	1	5	3	2
	25-34	12	12	0	0	0	0	12	12	0
	35-44	17	14	3	1	0	1	18	14	4
	45-54	10	7	3	3	2	1	13	9	4
	55-64	8	6	2	0	0	0	8	6	2
	65+	1	1	0	1	0	1	2	1	1
	SubTotals:	51	42	9	7	3	4	58	45	13
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	BIRTH GENDER								
		MALE			FEMALE			BOTH GENDERS		
		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
ALL RACES	20-24	6	2	4	2	1	1	8	3	5
	25-34	28	15	13	2	0	2	30	15	15
	35-44	40	14	26	9	0	9	49	14	35
	45-54	19	7	12	10	2	8	29	9	20
	55-64	20	6	14	2	0	2	22	6	16
	65+	1	1	0	2	0	2	3	1	2
	SubTotals:	114	45	69	27	3	24	141	48	93

Clients Served This Period

Unduplicated clients:	141
Client visits: <sup>3</sup>	154
Spanish speaking (primary language at home) clients served:	26
Deaf/hard of hearing clients served:	0
Blind/sight impaired clients served:	2
Homeless clients served:	16
Transgender M to F clients served:	3
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	111
Clients served this period who live outside Harris County:	30
Active substance abuse clients served:	0
Active psychiatric illness clients served:	0

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	2
Hemophilia Coagulation	0
Transfusion	3
Heterosexual Contact	50
MSM (not IDU)	65
IV Drug Use (not MSM)	1
MSM/IDU	0
Multiple Exposure Categories	5
Other risk	23
<u>Multi-Race Breakdown</u>	
BLK,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #8 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/23 and 2/29/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	15	1	14	2	0	2	17	1	16
	25-34	135	5	130	30	2	28	165	7	158
	35-44	118	5	113	69	0	69	187	5	182
	45-54	68	2	66	74	0	74	142	2	140
	55-64	52	1	51	42	0	42	94	1	93
	65+	22	1	21	16	0	16	38	1	37
	SubTotals:	410	15	395	233	2	231	643	17	626
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	3	0	3	0	0	0	3	0	3
	35-44	1	0	1	1	0	1	2	0	2
	45-54	7	0	7	1	0	1	8	0	8
	55-64	3	0	3	0	0	0	3	0	3
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	15	0	15	2	0	2	17	0	17
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	6	2	4	0	0	0	6	2	4
	35-44	2	0	2	1	0	1	3	0	3
	45-54	1	0	1	0	0	0	1	0	1
	55-64	2	1	1	0	0	0	2	1	1
	65+	1	0	1	0	0	0	1	0	1
	SubTotals:	13	3	10	1	0	1	14	3	11
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	1	0	1	2	0	2
	35-44	2	1	1	1	0	1	3	1	2
	45-54	1	0	1	0	0	0	1	0	1
	55-64	1	1	0	1	0	1	2	1	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	5	2	3	3	0	3	8	2	6
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0



RACE	AGE <sup>2</sup>	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	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	0	1	2	0	2
	SubTotals:	1	0	1	1	0	1	2	0	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	18	18	0	1	1	0	19	19	0
	25-34	106	93	13	10	5	5	116	98	18
	35-44	113	94	19	23	17	6	136	111	25
	45-54	113	80	33	40	32	8	153	112	41
	55-64	59	45	14	18	12	6	77	57	20
	65+	10	5	5	3	2	1	13	7	6
	SubTotals:	421	337	84	95	69	26	516	406	110
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	34	19	15	3	1	2	37	20	17
	25-34	251	100	151	41	7	34	292	107	185
	35-44	236	100	136	95	17	78	331	117	214
	45-54	190	82	108	115	32	83	305	114	191
	55-64	117	48	69	61	12	49	178	60	118
	65+	35	6	29	20	2	18	55	8	47
	SubTotals:	865	357	508	335	71	264	1,200	428	772

Clients Served This Period

Unduplicated clients:	1200
Client visits: <sup>3</sup>	2837
Spanish speaking (primary language at home) clients served:	281
Deaf/hard of hearing clients served:	8
Blind/sight impaired clients served:	4
Homeless clients served:	75
Transgender M to F clients served:	18
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	956
Clients served this period who live outside Harris County:	244
Active substance abuse clients served:	2
Active psychiatric illness clients served:	9

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	8
Hemophilia Coagulation	2
Transfusion	16
Heterosexual Contact	482
MSM (not IDU)	549
IV Drug Use (not MSM)	9
MSM/IDU	1
Multiple Exposure Categories	43
Other risk	160
<u>Multi-Race Breakdown</u>	
ASN,WHT	1
BLK,NTV	4
BLK,WHT	8
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA  
**SERVICE UTILIZATION REPORT**

[Agency]: Control #8 [Grant]: All [Service]: ALL [Service Performer]: 0  
 Services performed between 3/1/24 and 9/30/24 Type Encounter  
 [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE  
 [Contract 1]: [Sub Cats 1]: All [Contract 2]: n/a [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 <sup>3</sup>

RACE	AGE <sup>2</sup>	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	0
	13-19	2	0	2	0	0	0	2	0	2
	20-24	11	0	11	2	0	2	13	0	13
	25-34	97	7	90	27	3	24	124	10	114
	35-44	106	2	104	59	1	58	165	3	162
	45-54	49	3	46	73	0	73	122	3	119
	55-64	58	0	58	28	0	28	86	0	86
	65+	16	0	16	10	0	10	26	0	26
	SubTotals:	339	12	327	199	4	195	538	16	522
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	1	0	1	0	0	0	1	0	1
	35-44	1	0	1	0	0	0	1	0	1
	45-54	3	0	3	1	0	1	4	0	4
	55-64	3	0	3	0	0	0	3	0	3
	65+	2	0	2	2	0	2	4	0	4
	SubTotals:	10	0	10	3	0	3	13	0	13
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	1	0	1	3	0	3
	25-34	3	2	1	2	0	2	5	2	3
	35-44	3	0	3	1	0	1	4	0	4
	45-54	1	0	1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	9	2	7	4	0	4	13	2	11
NATIVE AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	1	0	1	1	0	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	1	0	1	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	0	0	0	2	0	2	2	0	2
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0

RACE	AGE <sup>2</sup>	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	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	1	1	0	1	2	0	2
	SubTotals:	1	0	1	1	0	1	2	0	2
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	15	13	2	2	1	1	17	14	3
	25-34	91	80	11	9	5	4	100	85	15
	35-44	96	79	17	21	16	5	117	95	22
	45-54	75	51	24	31	22	9	106	73	33
	55-64	47	30	17	15	10	5	62	40	22
	65+	14	10	4	1	0	1	15	10	5
	SubTotals:	339	264	75	79	54	25	418	318	100
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	3	1	2	0	0	0	3	1	2
	20-24	28	13	15	5	1	4	33	14	19
	25-34	192	89	103	39	8	31	231	97	134
	35-44	206	81	125	81	17	64	287	98	189
	45-54	128	54	74	106	22	84	234	76	158
	55-64	108	30	78	43	10	33	151	40	111
	65+	33	10	23	14	0	14	47	10	37
	SubTotals:	698	278	420	288	58	230	986	336	650

Clients Served This Period

Unduplicated clients:	986
Client visits: <sup>3</sup>	1764
Spanish speaking (primary language at home) clients served:	221
Deaf/hard of hearing clients served:	8
Blind/sight impaired clients served:	4
Homeless clients served:	68
Transgender M to F clients served:	21
Transgender F to M clients served:	0
Clients served this period who live w/in Harris County:	827
Clients served this period who live outside Harris County:	159
Active substance abuse clients served:	4
Active psychiatric illness clients served:	8

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	10
Hemophilia Coagulation	2
Transfusion	9
Heterosexual Contact	394
MSM (not IDU)	463
IV Drug Use (not MSM)	9
MSM/IDU	0
Multiple Exposure Categories	40
Other risk	129
<u>Multi-Race Breakdown</u>	
ASN,WHT	1
BLK,NTV	3
BLK,WHT	8
NTV,WHT	1

FOOTNOTES

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2024; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/23.

[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

# Operations Committee Report

**2024 QUARTERLY REPORT**  
**PRIORITY AND ALLOCATIONS COMMITTEE**  
(Submitted October 2024)

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

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

**ALL ACTIVITIES ARE EITHER COMPLETED OR ONGOING.**

2. Review the final quarter allocations made by the administrative agents.  
**Status:**
3. \*Improve the processes for and strengthen accountability in the FY 2025 priority-setting, allocations and subcategory allocations processes for Ryan White Parts A and B and State Services funding.  
**Status:**
4. When applicable, plan for specialty dollars like Minority AIDS Initiative (MAI) and special populations such as Women, Infants, Children and Youth (WICY) throughout the priority setting and allocation processes.  
**Status:**
5. \*Determine the FY 2025 priorities, allocations and subcategory allocations for Ryan White Parts A/MAI, Part B and State Services funding.  
**Status:**
6. \*Review the FY 2024 priorities as needed.  
**Status:**
7. \*Review the FY 2024 allocations as needed.  
**Status:**
9. Annually, review the status of Committee activities identified in the current Integrated Houston Area HIV Prevention and Care Services Plan.  
**Status:**

**Status of Tasks on the Timeline:**

Peta-gay Ledbetter

10/24/24

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Committee Chairperson

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Date

# **PROPOSED POLICY FOR ALLOWING MEMBERS TO SPEAK AT COUNCIL AND COMMITTEE MEETINGS**

(Operations Committee approved 10/14/24/24)

On September 16, 2024 and again on October 14, 2024, the Operations Committee reviewed the proposed procedure for allowing its appointed members to speak at Ryan White Council and Committee meetings. This procedure is an alternative to the procedure outlined in Robert's Rules of Order.

## **Proposed Procedure:**

1. If many members wish to speak at a Ryan White meeting, the Council chair, or one of the Committee Co-chairs, makes a list of all who wish to speak in the order in which they raised their hand.
2. If a member calls for the question and the motion to call for the question is approved, then everyone on the list can make their comment before the motion is voted on. But, no new names, and no one who has already spoken, will be added to the list since the motion to end discussion has ended the list. During this portion of the meeting, there will be no dialogue between the person adding their comments and members of the Council or Committee. If the person adding their comments asks a question, it will be addressed by Ryan White staff or the subject expert.

## **Justification:**

Fairness to those who have been waiting to ask a question or provide their opinion without allowing the discussion to continue indefinitely after the question has been called.

## **Robert's Rules Procedure:**

Once the call for the question has been approved, no one can make comments, including those who are on the list, waiting for their turn to speak.

**SLATE OF NOMINEES FOR THE  
2025 HOUSTON RYAN WHITE PLANNING COUNCIL**

As of Tuesday, October 29, 2024, the following people have accepted their nomination to run for an officer position on the 2025 Ryan White Planning Council:

**Chair:**

**Tentative: Cecilia Ligons**

**Josh Mica**

**Vice Chair:**

**Ryan Rose**

**Secretary:**

**Skeet Boyle**

**Bill Patterson**

**Ryan Rose**

**Members Eligible to Run for  
Chair of the  
2025 Ryan White Planning Council**  
(as of 10-14-24)

According to Council Policy 500.01 regarding election of officers: “Ryan White Part A, B and State Services funded providers/employees/subcontractors/Board Members and/or employees/subcontractors of the Grantees for these entities shall not be eligible to run for office of Chair of the Ryan White Planning Council. Candidates will have served as an appointed member of the RWPC for the preceding twelve (12) months and, if needed, have been reappointed by the CEO. One of the three officers must be a self-identified HIV positive person. “Nominations for all three positions: Council Chair, Vice Chair and Secretary, must be submitted to the Director of the Office of Support before the end of the November Steering Committee or at the December Council meeting, which is the day of the election.

Eligible To Run for Chair (\* must be reappointed):

Not Eligible To Run for Chair

Servando Arellano*	Kevin Aloysius (Legacy Community Health)
Jay Bhowmick	Laura Alvarez (appointed mid-year 2024)
Skeet Boyle*	Yvonne Arizpe (Legacy Community Health)
Caleb Brown*	Kenneth Jones (Legacy Community Health)
Titan Capri	Norman Mitchell (Bee Busy, subcontractor RW agency)
Johanna Castillo*	Shital Patel - conflicted (Harris Health System)
Johnny Deal	Beatriz E.X. Rivera (Legacy Community Health)
Kathryn Fergus*	Megan Rowe* (City Housing & Community Develop)
Kenia Gallardo*	Yolanda Ross (may be employed by an agency that would make her ineligible to run)
Glen Hollis	Jose Serpa-Alvarez (Harris Health System)
Denis Kelly	Carol Suazo* (City Housing & Community Develop)
Peta-gay Ledbetter*	
Cecilia Ligons	
Roxane May*	
Josh Mica	
Rodney Mills	
Diana Morgan*	
Bill Patterson	
Oscar Perez	
Tana Pradia	
Ryan Rose*	
Evelio Salinas Escamilla	
Robert Sliepka*	
Steven Vargas	
Mike Webb	
Priscilla Willridge	