

# HOUSTON AREA HIV SERVICES RYAN WHITE PLANNING COUNCIL



*We envision an educated community where the needs of all persons living with and/or affected by HIV are met by accessible, effective, and culturally sensitive health and psychosocial services that are part of a fully coordinated system.*

*The community will continue to intervene responsibly until the end of the epidemic.*

*The Houston Eligible Metropolitan Area (EMA) Ryan White Planning Council will improve the quality of life and advocate for those living with and/or affected by HIV by taking a leadership role in the planning and assessment of HIV resources.*

## AGENDA

12 noon, November 11, 2021

### **Meeting Location: Online or via phone**

Join Zoom Meeting by clicking onto:

<https://us02web.zoom.us/j/995831210?pwd=UnlNdExMVFFqeVgzQ0NJNkpieXlGQT09>

Meeting ID: 995 831 210

Passcode: 577264

Or, dial in by calling: 346 248-7799

- I. Call to Order
  - A. Welcome, Moment of Reflection and Introductions
  - B. Adoption of the Agenda
  - C. Approval of the Minutes
  - D. We Appreciate Our Affiliate Committee Members
  - E. Project LEAP Special Presentation
  - F. Training: Ryan White Election Policy
- II. Public Comments 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 the Council Secretary who would be happy to read the comments on behalf of the individual at this point in the meeting. The Chair of the Council has the authority to limit public comment to 1 minute per person. All information from the public must be provided in this portion of the meeting. Council members please remember that this is a time to hear from the community. It is not a time for dialogue. Council members and staff are asked to refrain from asking questions of the person giving public comment.)
- III. Reports from Committees
  - A. Comprehensive HIV Planning Committee

No report this month since the Office of Support staff is completing the 2022 Epidemiological Profile, hence there was no committee meeting.

Allen Murray, Chair  
Ryan White Planning Council

Tori Williams, Diane Beck and  
Students of Project LEAP 2021  
Ronnie Galley and  
Veronica Ardoin, Co-Chairs

B. Affected Community Committee  
*Item:* Standards of Care and Performance Measures  
*Recommended Action:* FYI: The Committee hosted a consumer-only workgroup meeting to review and give input into the FY 2022 Standards of Care and Performance Measures. There were 10 consumers in attendance.

Rosalind Belcher and  
Tony Crawford, Co-Chairs

C. Priority and Allocations Committee  
*Item:* Reports from the Administrative Agent – Part A/MAI\*  
*Recommended Action:* FYI: See the attached reports from the Part A/MAI Administrative Agent:

- FY21 Procurement Report – Part A & MAI, dated 10/25/21

Peta-gay Ledbetter and  
Bobby Cruz, Co-Chairs

*Item:* Reports from the Administrative Agent – Part B/SS\*\*  
*Recommended Action:* FYI: See the attached reports from the Part B/State Services Administrative Agent:

- FY 2021 Procurement Report Part B – dated 10/06/21
- FY 2021 Procurement Report DSHS\*\*\* SS – dated 10/06/21
- 2020-21 DSHS State Services Service Utilization Report – dated 10/06/21
- FY 2020/21 Health Insurance Program Report – dated 09/29/21
- FY 2020/21 Health Insurance Program Report – dated 09/06/21

*Item:* FY 2021 Ryan White Part A Funding Increases  
*Recommended Action:* **Motion:** Per the attached chart, fund the increased funding requests in amounts that total \$449,386 in Ryan White Part A funds.

*Item:* FY 2021 MAI\* Funding Increases  
*Recommended Action:* **Motion:** Do not allocate approximately \$185,000 in MAI\* funds so that they will be available in the fourth quarter of the fiscal year when more is known about the status of ADAP.

*Item:* FY 2021 Unspent Funds  
*Recommended Action:* **Motion:** In the final quarter of the FY 2021 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 Steering Committee meeting.

\* MAI = Minority AIDS Initiative funding

\*\* SS = State Services funding

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

Item: Quarterly Committee Report

Recommended Action: FYI: See the attached Quarterly Committee Report.

D. Quality Improvement Committee  
No report since there was no meeting in October. Kevin Aloysius and Steven Vargas, Co-Chairs

E. Operations Committee  
*Item:* Policy 1200.00 Honorariums and Incentives  
*Recommended Action:* **Motion:** Approve revision to Policy 1200.00 entitled Honorariums and Incentives, see attached. New text is underlined and in bold text. Veronica Ardoin and Ronnie Galley, Co-Chairs

*Item:* Slate of Nominees for the 2022 RWPC\* Officers  
*Recommended Action:* **Motion:** Approve the attached slate of nominees for officers of the 2022 Ryan White Planning Council.

*Item:* 2022 Council Orientation  
*Recommended Action:* The Operations Committee is planning for an in-person Council Orientation at Third Coast Restaurant at the end of January 2022. Unless you are retiring from the Council at the end of December, please pencil this all-day meeting in to your datebook for Thursday, either January 20<sup>th</sup> or 27<sup>th</sup>.

- V. Report from the Office of Support  
Tori Williams, Director
- VI. Report from Ryan White Grant Administration  
Carin Martin, Manager
- VII. Report from The Resource Group  
Sha'Terra Johnson  
Health Planner
- VIII. Medical Updates  
Shital Patel, MD  
Baylor College of Medicine
- IX. New Business (**Written reports only when stay-at-home orders are in effect**)
- A. AIDS Educational Training Centers (AETC)  
Shital Patel
  - B. Ryan White Part C Urban and Part D  
Dawn Jenkins
  - C. HOPWA  
Kimberley Collins
  - D. Community Prevention Group (CPG)  
Matilda Padilla
  - E. Update from Task Forces:
    - Sexually Transmitted Infections (STI)
    - African American
    - Latino
    - Youth
    - MSM
    - Hepatitis C
    - Project PATHH (Protecting our Angels Through Healing Hearts) formerly Urban AIDS Ministry
- Sha'Terra Johnson  
Gloria Sierra  
Gloria Sierra
- Steven Vargas  
Johnny Deal

- F. HIV and Aging Coalition
- G. Texas HIV Medication Advisory Committee
- H. Positive Women's Network
- I. Texas Black Women's Initiative
- J. Texas HIV Syndicate
- K. END HIV Houston
- L. Texans Living with HIV Network

Nancy Miertschin  
D. Morgan or A. Murray  
Sha'Terra Johnson  
Ricardo Mora  
Amy Leonard  
Steven Vargas

IX. Announcements

X. Adjournment

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## MINUTES

12 noon, Thursday, October 14, 2021  
Meeting Location: Zoom teleconference

MEMBERS PRESENT	MEMBERS PRESENT	OTHERS PRESENT
Allen Murray, Chair	Oscar Perez	Charles Henley, Consultant
Denis Kelly, Vice Chair	Faye Robinson	Dr. Kelly Truong, Meninger Clinic
Crystal Starr, Secretary	Pete Rodriguez	Shabaura Perryman, Merck
Kevin Aloysius	Imran Shaikh	Richard Williams, HCPH
Veronica Ardoin	Gloria Sierra	Byancha Lawson, Project LEAP
Rosalind Belcher	Robert Sliepka	Curtis Walton, Project LEAP
Ardry "Skeet" Boyle	C. Bruce Turner	
Kimberley Collins	Steven Vargas	
Tony Crawford		<b>STAFF PRESENT</b>
Robert "Bobby" Cruz		<i>Ryan White Grant Administration</i>
Johnny Deal	<b>MEMBERS ABSENT</b>	Carin Martin
Ronnie Galley	Johanna Castillo	Heather Keizman
Dawn Jenkins	Enrique Chavez	Mauricia Chatman
Daphne L. Jones	Ahmier Gibson	
Peta-gay Ledbetter	Holly Renee McLean	<i>The Resource Group</i>
Tom Lindstrom	Deondre Moore	Sha'Terra Johnson
Roxane May	Nkechi Onyewuenyi, excused	
Josh Mica	Shital Patel, excused	<i>Office of Support</i>
Rodney Mills	Paul Richards, excused	Tori Williams
Diana Morgan	Andrew Wilson	Diane Beck
Matilda Padilla		

**Call to Order:** Allen Murray, Chair, called the meeting to order at 12:10 p.m.

During the opening remarks, Murray said it was good to see everyone on Zoom. He reminded members that he will be retiring from the Council at the end of the year so it is time to think about candidates for his position. He noted that the meeting packet was unusually thin this month, which means a very light agenda today. When this happens, the staff makes good use of our time by scheduling more than one training. Since the meeting agendas were mailed out, there have been

two changes: the City of Houston will not be providing information on the Ending the HIV Epidemic Plan and we will not be hearing about Trauma Informed Care today. Murray then called for a Moment of Reflection.

**Adoption of the Agenda: Motion #1:** *it was moved and seconded (Starr, Boyle) to adopt the agenda with the following changes: Delete the training on The Houston Plan for Ending the Epidemic and Trauma Informed Care and add a training on the National HIV & Aging Advocacy Network (NHAAN) by Steven Vargas. Motion carried.*

**Approval of the Minutes: Motion #3:** *it was moved and seconded (Kelly, Galley) to approve the September 9, 2021 minutes with the following changes: Boyle and Shaikh should be marked as present and Turner was excused. Motion carried.* Abstentions: Ardoin, Collins, Crawford, Deal, Lindstrom, Robinson, Turner.

**Training: Houston Area Resources for the Opioid Epidemic :** See the attached presentation by Kelly Truong, M.D., Psychiatrist at The Menninger Clinic.

**Training: National HIV & Aging Advocacy Network (NHAAN):** See the attached presentation by Steven Vargas, National HIV & Aging Advocacy Network.

**Public Comment and Announcements:** Shabaura Perryman, Community Liaison from Merck, said that Ryan White would have turned 50 on December 7<sup>th</sup> of this year. She wanted to make sure that the Council was aware so they can recognize him for his contribution.

### **Reports from Committees**

**Comprehensive HIV Planning Committee:** Daphne L. Jones, Co-Chair, reported on the following:

No meeting this month since the Office of Support staff is completing the 2022 Epidemiological Profile in collaboration with Imran Shaikh and others at the Houston Health Department and Carin Martin and her staff at the Harris County Health Department.

**Affected Community Committee:** Tony Crawford, Co-Chair, reported on the following:

Training: Standards of Care and Performance Measures: Mauricia Chatman gave an excellent training on standards of care and performance measures in advance of the consumer only workgroup meeting, which will be held at 12 noon on October 18, 2021 on Zoom.

**Quality Improvement Committee:** No report.

**Operations Committee:** Ronnie Galley, Co-Chair, reported on the following:

Quorum: The Committee recommends extending and making the following change to the Council bylaws, which was approved in June 2021. Because this is a change to the bylaws, it cannot be voted on until October 2021. Williams said that we no longer have access to a meeting room in our building that will accommodate social distancing and the number required to meet quorum (19 individuals). Staff is working to set up a purchase order to rent meeting space at a nearby church.

**Motion #3:** *Pending the Governor rescinding current waivers related to the definition of quorum in the Texas Open Meetings Act, amend the Houston Ryan White Planning Council bylaws so that 30% of the members satisfy in-person requirements at Council meetings. ~~until the end of August 2021. After that, the bylaws will revert back to "a majority of the members of the Council are required to constitute a quorum at Council meetings".~~ Everyone's vote will count during the*

*meeting but to hold a meeting, the Council must meet quorum as defined in its bylaws. **Motion carried.*** Abstention: Crawford.

Nominees for election of the 2022 Ryan White Officers: See the attached list of individuals eligible to run for Chair of the 2022 Ryan White Planning Council. Please submit nominations for the 2022 Chair, Vice Chair and Secretary to the Director of the Office of Support as the Operations Committee will be developing the slate of nominees at their October 19<sup>th</sup> meeting. According to Williams, the following individuals have so far been nominated and accepted the nomination: Starr for Chair and Boyle for Vice Chair.

**Priority and Allocations Committee:** No report.

**Report from Office of Support:** Tori Williams, Director, summarized the attached report.

**Report from Ryan White Grant Administration:** Carin Martin, Manager, summarized the attached report.

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

**Task Force Reports:** The Council agreed in March 2020 to skip verbal Task Force Reports while meeting on Zoom. See the Council Handouts packet for Task Force reports that were submitted in writing.

**Announcements:** Starr said that her birthday is in November and she will be performing on November 11<sup>th</sup>. Everyone is invited to come celebrate with her.

**Adjournment:** **Motion:** *it was moved and seconded (Belcher/Sliepka) to adjourn the meeting at 1:49 p.m.* **Motion Carried.**

Submitted by:

Approved by:

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Tori Williams, Director

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Date

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Committee Chair

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Date

## Council Voting Records for October 14, 2021

C = Chair of the meeting ja = Just arrived lm = Left the meeting lr = Left the room VP = Via phone	Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 Change Bylaws re Quorum Carried					Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 Change Bylaws re Quorum Carried			
MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
Allen Murray, Chair				C				C				C	Oscar Perez		X				X				X		
Denis Kelly, Vice Chair		X				X				X			Faye Robinson		X						X		X		
Crystal Starr, Secretary		X				X				X			Pete Rodriguez lm 1:15pm		X				X				X		
Kevin Aloysius		X				X				X			Imran Shaikh		X				X				X		
Veronica Ardoin lm 1:38pm		X						X		X			Gloria Sierra ja 12:45pm	X				X					X		
Rosalind Belcher		X				X				X			Robert Sliepka		X				X				X		
Ardry “Skeet” Boyle		X				X				X			C. Bruce Turner		X						X		X		
Kimberley Collins		X						X		X			Steven Vargas		X				X				X		
Tony Crawford		X						X				X													
Robert “Bobby” Cruz		X				X				X															
Johnny Deal		X						X		X															
Ronnie Galley		X				X				X			MEMBERS ABSENT												
Dawn Jenkins		X				X				X			Johanna Castillo												
Daphne L. Jones		X				X				X			Enrique Chavez												
Peta-gay Ledbetter		X				X				X			Ahmier Gibson												
Tom Lindstrom		X						X		X			Holly Renee McLean												
Roxane May		X				X				X			Deondre Moore												
Josh Mica		X				X				X			Nkechi Onyewuenyi												
Rodney Mills		X				X				X			Shital Patel												
Diana Morgan		X				X				X			Paul Richards												
Matilda Padilla		X				X				X			Andrew Wilson												



# **Priority and Allocations Committee Report**

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

FY 2021 Ryan White Part A and MAI  
Procurement Report

Priority	Service Category	Original Allocation <i>RWPC Approved Level Funding Scenario</i>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
<b>1</b>	<b>Outpatient/Ambulatory Primary Care</b>	<b>10,965,788</b>	<b>-75,776</b>	<b>1,415,641</b>	<b>-258,786</b>	<b>0</b>	<b>12,046,867</b>	<b>50.43%</b>	<b>12,046,867</b>	<b>0</b>		<b>3,664,078</b>	<b>30%</b>	<b>58%</b>
1.a	Primary Care - Public Clinic (a)	3,927,300	-27,177				3,900,123	16.33%	3,900,123	0	3/1/2021	\$882,494	23%	58%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	1,064,576	-7,367	441,880			1,499,089	6.27%	1,499,089	0	3/1/2021	\$532,002	35%	58%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	910,551	-6,301	441,880			1,346,130	5.63%	1,346,130	0	3/1/2021	\$534,845	40%	58%
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	1,147,924	-7,944	441,880			1,581,861	6.62%	1,581,861	0	3/1/2021	\$269,386	17%	58%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,100,000	-7,612		-75,000		1,017,388	4.26%	1,017,388	0	3/1/2021	\$600,445	59%	58%
1.f	Primary Care - Women at Public Clinic (a)	2,100,000	-14,532				2,085,468	8.73%	2,085,468	0	3/1/2021	\$603,806	29%	58%
1.g	Primary Care - Pediatric (a.1)	15,437					15,437	0.06%	15,437	0	3/1/2021	\$2,700	17%	58%
1.h	Vision	500,000	-3,460	90,000	-85,000		501,540	2.10%	501,540	0	3/1/2021	\$238,400	48%	58%
1.x	Primary Care Health Outcome Pilot	200,000	-1,384		-98,786		99,830	0.42%	99,830	0		\$0	0%	58%
<b>2</b>	<b>Medical Case Management</b>	<b>1,730,000</b>	<b>-100,528</b>	<b>30,000</b>	<b>0</b>	<b>0</b>	<b>1,659,472</b>	<b>6.95%</b>	<b>1,659,472</b>	<b>0</b>		<b>683,671</b>	<b>41%</b>	<b>58%</b>
2.a	Clinical Case Management	488,656	-3,381	30,000			515,275	2.16%	515,275	0	3/1/2021	\$169,227	33%	58%
2.b	Med CM - Public Clinic (a)	277,103	-1,918				275,185	1.15%	275,185	0	3/1/2021	\$87,611	32%	58%
2.c	Med CM - Targeted to AA (a) (e)	169,009	-1,170				167,839	0.70%	167,839	0	3/1/2021	\$110,473	66%	58%
2.d	Med CM - Targeted to H/L (a) (e)	169,011	-1,170				167,841	0.70%	167,841	0	3/1/2021	\$75,755	45%	58%
2.e	Med CM - Targeted to W/MSM (a) (e)	61,186	-423				60,763	0.25%	60,763	0	3/1/2021	\$38,205	63%	58%
2.f	Med CM - Targeted to Rural (a)	273,760	-1,894				271,866	1.14%	271,866	0	3/1/2021	\$73,593	27%	58%
2.g	Med CM - Women at Public Clinic (a)	75,311	-521				74,790	0.31%	74,790	0	3/1/2021	\$70,598	94%	58%
2.h	Med CM - Targeted to Pedi (a.1)	90,051	-90,051				0	0.00%	0	0	3/1/2021	\$0	#DIV/0!	58%
2.i	Med CM - Targeted to Veterans	80,025	0				80,025	0.33%	80,025	0	3/1/2021	\$41,522	52%	58%
2.j	Med CM - Targeted to Youth	45,888	0				45,888	0.19%	45,888	0	3/1/2021	\$16,688	36%	58%
<b>3</b>	<b>Local Pharmacy Assistance Program</b>	<b>1,810,360</b>	<b>-12,528</b>	<b>22,920</b>	<b>0</b>	<b>0</b>	<b>1,820,752</b>	<b>7.62%</b>	<b>1,820,752</b>	<b>0</b>	<b>3/1/2021</b>	<b>\$663,316</b>	<b>36%</b>	<b>58%</b>
3.a	Local Pharmacy Assistance Program-Public Clinic (a) (e)	310,360	-2,148				308,212	1.29%	308,212	0	3/1/2021	\$128,157	42%	58%
3.b	Local Pharmacy Assistance Program-Untargeted (a) (e)	1,500,000	-10,380	22,920			1,512,540	6.33%	1,512,540	0	3/1/2021	\$535,160	35%	58%
<b>4</b>	<b>Oral Health</b>	<b>166,404</b>	<b>-1,152</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>165,252</b>	<b>0.69%</b>	<b>165,252</b>	<b>0</b>	<b>3/1/2021</b>	<b>\$95,200</b>	<b>58%</b>	<b>58%</b>
4.a	Oral Health - Untargeted (c)	0					0	0.00%	0	0	N/A	\$0	0%	0%
4.b	Oral Health - Targeted to Rural	166,404	-1,152		0		165,252	0.69%	165,252	0	3/1/2021	\$95,200	58%	58%
<b>5</b>	<b>Health Insurance (c)</b>	<b>1,383,137</b>	<b>-9,571</b>	<b>300,000</b>	<b>0</b>	<b>0</b>	<b>1,673,566</b>	<b>7.01%</b>	<b>1,673,566</b>	<b>0</b>	<b>3/1/2021</b>	<b>\$590,574</b>	<b>35%</b>	<b>58%</b>
<b>6</b>	<b>Mental Health Services (c)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>	<b>NA</b>	<b>\$0</b>	<b>0%</b>	<b>0%</b>
<b>7</b>	<b>Early Intervention Services (c)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>	<b>NA</b>	<b>\$0</b>	<b>0%</b>	<b>0%</b>
<b>8</b>	<b>Medical Nutritional Therapy (supplements)</b>	<b>341,395</b>	<b>-2,362</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>339,033</b>	<b>1.42%</b>	<b>339,033</b>	<b>0</b>	<b>3/1/2021</b>	<b>\$169,944</b>	<b>50%</b>	<b>58%</b>
<b>9</b>	<b>Home and Community-Based Services (c)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>	<b>NA</b>	<b>\$0</b>	<b>0%</b>	<b>0%</b>
9.a	In-Home	0									N/A	\$0	0%	0%
9.b	Facility Based	0									N/A	\$0	0%	0%
<b>10</b>	<b>Substance Abuse Services - Outpatient</b>	<b>45,677</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>45,677</b>	<b>0.19%</b>	<b>45,677</b>	<b>0</b>	<b>3/1/2021</b>	<b>\$16,719</b>	<b>37%</b>	<b>58%</b>
<b>11</b>	<b>Hospice Services</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>	<b>NA</b>	<b>\$0</b>	<b>0%</b>	<b>0%</b>
<b>12</b>	<b>Referral for Health Care and Support Services (c)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00%</b>	<b>0</b>	<b>0</b>	<b>NA</b>	<b>\$0</b>	<b>0%</b>	<b>0%</b>
<b>13</b>	<b>Non-Medical Case Management</b>	<b>1,267,002</b>	<b>-8,768</b>	<b>40,000</b>	<b>-70,600</b>	<b>0</b>	<b>1,227,634</b>	<b>5.14%</b>	<b>1,227,634</b>	<b>0</b>	<b>3/1/2021</b>	<b>\$486,154</b>	<b>40%</b>	<b>58%</b>
13.a	Service Linkage targeted to Youth	110,793	-767		-20,600		89,426	0.37%	89,426	0	3/1/2021	\$37,466	42%	58%
13.b	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000	-692		-50,000		49,308	0.21%	49,308	0	3/1/2021	\$29,791	60%	58%
13.c	Service Linkage at Public Clinic (a)	370,000	-2,560				367,440	1.54%	367,440	0	3/1/2021	\$169,150	46%	58%
13.d	Service Linkage embedded in CBO Pcare (a) (e)	686,209	-4,749	40,000			721,460	3.02%	721,460	0	3/1/2021	\$249,747	35%	58%
13.e	SLW-Substance Use	0	0				0	0.00%	0	0	NA	\$0	0%	0%
<b>14</b>	<b>Medical Transportation</b>	<b>424,911</b>	<b>-2,940</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>421,971</b>	<b>1.77%</b>	<b>421,971</b>	<b>0</b>		<b>200,960</b>	<b>48%</b>	<b>58%</b>
14.a	Medical Transportation services targeted to Urban	252,680	-1,749				250,931	1.05%	250,931	0	3/1/2021	\$152,792	61%	58%
14.b	Medical Transportation services targeted to Rural	97,185	-673				96,512	0.40%	96,512	0	3/1/2021	\$48,168	50%	58%
14.c	Transportation vouchers (bus passes & gas cards)	75,046	-519				74,527	0.31%	74,527	0	3/1/2021	\$0	0%	58%
<b>15</b>	<b>Emergency Financial Assistance</b>	<b>1,545,439</b>	<b>-10,694</b>	<b>0</b>	<b>-120,000</b>	<b>0</b>	<b>1,414,745</b>	<b>5.92%</b>	<b>1,414,745</b>	<b>0</b>		<b>528,304</b>	<b>37%</b>	<b>58%</b>
16.a	EFA - Pharmacy Assistance	1,305,439	-9,034				1,296,405	5.43%	1,296,405	0	3/1/2021	\$524,636	40%	58%

## FY 2021 Ryan White Part A and MAI Procurement Report

As of: 10/25/2021

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

FY 2021 Ryan White Part A and MAI  
Procurement Report

Priority	Service Category	Original Allocation <small>RWPC Approved Level Funding Scenario</small>	Award Reconciliation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procurement Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
(c)	Funded under Part B and/or SS													
(d)	Not used at this time													
(e)	10% rule reallocations													

**The Houston Regional HIV/AIDS Resource Group, Inc.**  
**FY 2021 Ryan White Part B**  
**Procurement Report**  
**April 1, 2021 - March 31, 2022**



Reflects spending through July 2021

Spending Target: 33%

Revised

10/27/21

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendment*	Contractual Amount	Amendment	Contractual Amount	Date of Original Procurement	Expended YTD	Percent YTD
4	Oral Health Care	\$2,218,878	58%	\$0	\$2,218,878	\$0	\$2,218,878	4/1/2021	\$532,091	24%
	Oral Health Care -Prosthodontics (1)	\$460,000	12%	\$0	\$460,000	\$0	\$460,000	4/1/2021	\$226,666	49%
5	Health Insurance Premiums and Cost Sharing (2)	\$1,028,433	27%	\$0	\$1,028,433	\$0	\$1,028,433	4/1/2021	\$0	0%
8	Home and Community Based Health Services (3)	\$113,315	3%	\$0	\$113,315	\$0	\$113,315	4/1/2021	\$16,640	15%
	Increased RWB Award added to OHS per Increase Scenario*	\$0	0%	\$0	\$0					
<b>Total Houston HSDA</b>		<b>3,820,626</b>	<b>100%</b>	<b>0</b>	<b>3,820,626</b>	<b>\$0</b>	<b>\$3,820,626</b>		<b>775,397</b>	<b>20%</b>

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

- (1) Working with agency on spending and looking into possible reallocation
- (2) HIP- Funded by Part A, B and State Services/. Provider spends grant funds by ending dates Part A -2/28; B-3/31;SS-8/31
- (3) Demand is still down because of COVID

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



Chart reflects spending through August 2021

Spending Target: 100%

Revised 10/27/2021

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendments per RWPC	Contractual Amount	Amendment	Contractual Amount	Date of Original Procurement	Final Adjustments	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$864,506	43%		\$864,506	\$200,000	\$1,064,506	9/1/2020	\$0	\$1,064,506	100%
6	Mental Health Services (2)	\$300,000	15%		\$300,000	-\$163,000	\$137,000	9/1/2020	-\$16,049	\$120,951	88%
7	EIS - Incarcerated	\$175,000	9%		\$175,000	\$0	\$175,000	9/1/2020	-\$905	\$174,095	99%
11	Hospice	\$259,832	13%		\$259,832	-\$20,000	\$239,832	9/1/2020	\$27,028	\$266,860	111%
	Non Medical Case Management	\$350,000	17%		\$350,000	-\$80,000	\$270,000	9/1/2020	-\$13,507	\$256,493	95%
15	Linguistic Services	\$68,000	3%		\$68,000	-\$18,000	\$50,000	9/1/2020	\$4,600	\$54,600	109%
		\$0	0%								
<b>Total Houston HSDA</b>		<b>2,017,338</b>	<b>100%</b>	<b>\$0</b>	<b>\$2,017,338</b>	<b>-\$81,000</b>	<b>\$1,936,338</b>		<b>\$1,167</b>	<b>1,937,505</b>	<b>100%</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) Service utilization has decreased due to the interruption of COVID-19.

\*Note TRG made final adjustments moving funds to rural HSDA's to ensure 100% spending to avoid returning funds to DSHS

\*\*Note TRG may reallocated funds to avoid lapse in funds

**2020 - 2021 DSHS State Services Service Utilization Report**  
**9/1/2020 thru 8/31/2021 Houston HSDA**  
**4th Quarter**

Revised 10/6/2021

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+
Early Intervention Services	871	556	87.21%	10.15%	0.19%	2.45%	77.91%	0.22%	20.00%	1.87%	0.00%	0.17%	7.01%	32.55%	26.97%	17.62%	14.02%	1.66%
Health Insurance Premiums	1,600	1,103	81.86%	17.14%	0.20%	0.80%	36.89%	28.19%	32.18%	2.74%	0.00%	0.00%	1.63%	17.76%	17.95%	26.38%	28.55%	7.73%
Hospice	38	30	76.66%	23.34%	0.00%	0.00%	56.66%	23.34%	20.00%	0.00%	0.00%	0.00%	0.00%	6.67%	23.34%	23.33%	33.33%	13.33%
Linguistic Services	150	41	52.17%	36.95%	4.34%	6.54%	43.90%	4.87%	9.75%	41.48%	0.00%	2.43%	0.00%	9.75%	24.39%	41.46%	19.51%	2.46%
Mental Health Services	325	109	95.45%	3.63%	0.92%	0.00%	27.52%	38.53%	32.11%	1.84%	0.00%	0.00%	1.83%	17.43%	12.84%	23.85%	32.11%	11.94%
Unduplicated Clients Served By State Services Funds:	N/A	1,839	78.67%	18.24%	1.13%	1.96%	48.58%	19.03%	22.81%	9.59%	0.00%	0.52%	2.09%	16.83%	21.10%	26.53%	25.50%	7.42%

# Houston Ryan White Health Insurance Assistance Service Utilization Report

Period Reported:

09/01/2020-8/31/2021

Revised: 9/29/2021



Request by Type	Assisted			NOT Assisted		
	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)
Medical Co-Payment	1663	\$203,061.95	619			0
Medical Deductible	0	\$0.00	0			0
Medical Premium	7875	\$2,457,137.44	958			0
Pharmacy Co-Payment	17381	\$573,986.06	1411			0
APTC Tax Liability	1	\$500.00	1			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	13	\$13,484.00	13	NA	NA	NA
Totals:	26933	\$3,221,201.45	3002	0	\$0.00	

Comments: This report represents services provided under all grants.



# Houston Ryan White Health Insurance Assistance Service Utilization Report

Period Reported:

09/01/2020-7/31/2021

Revised: 9/6/2021



Request by Type	Assisted			NOT Assisted		
	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)
Medical Co-Payment	1374	\$170,347.37	553			0
Medical Deductible	0	\$0.00	0			0
Medical Premium	7100	\$2,274,091.87	927			0
Pharmacy Co-Payment	15849	\$522,555.83	1333			0
APTC Tax Liability	1	\$500.00	1			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	13	\$12,797.00	13	NA	NA	NA
Totals:	24337	\$2,954,698.07	2827	0	\$0.00	

Comments: This report represents services provided under all grants.

## Ryan White Allocation Increases as of 10-28-21: Ryan White Part A Funding

A - Part A Funds Available for Reallocation: \$

Control No. / Priority No.	Yes, No or Maybe	Service Category	Amount Requested	Recommended Reallocations	Justification
<b>RYAN WHITE PART A FUNDS</b>					
1/1.b-1.d 1.c-2.e 3.b 13.d 16.a; 17	Y	Community-based Primary Medical Care and Medical Case Mgmt. targeted to AA, Hispanic and White. EFA – Pharmacy; LPAP; Outreach & SLW	\$200,000	\$150,000	High priority. Consumer need. Continued issues with ADAP, such as delays in eligibility determination for ADAP clients.
2/8	Y	Medical Nutritional Therapy (supplements)	\$55,000	\$55,000	Documented consumer need
3/1.b-1.d 1.c-2.e 3.b 13.d 16.a; 17	Y	Community-based Primary Medical Care and Medical Case Mgmt. targeted to AA, Hispanic and White. EFA – Pharmacy; LPAP; Outreach & SLW	\$295,600	\$244,386	High priority. Consumer need. Continued issues with ADAP, such as delays in eligibility determination for ADAP clients.
<b>TOTALS</b>			<b>\$550,600</b>	<b>\$449,386</b>	

FY 2021 RW PART A REQUESTS FOR ALLOCATION INCREASE (October 2021)

REVISED: 10/25/2021

Request Control Number	FY 21 Priority Rank	HRSA Service Category	Local Service Category or Subcategory	Amount of Request	Amount Approved by RWPC	Rank Order	FY 2020 Final Contract Amount	Expended 2020	Percent Expended	FY 2021 Contract Amount	FY 2021 Expended YTD	FY 2021 Percent YTD	FY 2021 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible for increase?	Notes Amount approved detail:
1	1.b-1.d 2.c-2.e 3.b 13.d 16.a; 17	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance; Local Pharmacy Assistance; Non-Medical Case Management; Outreach	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	\$200,000			\$558,293	\$558,288	100%	\$588,388	\$110,679	49%	50%	Yes	
2	8	Medical Nutrition Therapy	Medical Nutritional Therapy (supplements)	\$55,000			\$381,395	\$378,983	99%	\$339,033	\$169,944	50%	50%	Yes	
3	1.b-1.d 2.c-2.e 3.b 13.d 16.a; 17	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance; Local Pharmacy Assistance; Non-Medical Case Management; Outreach	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	\$295,600			\$3,475,661	\$2,704,532	78%	\$2,720,655	\$696,270	44%	50%		
				\$550,600	\$0	\$0	\$4,415,349	\$3,641,803		\$3,648,076	\$976,893				
Confirmed Funds Avail. for Reallocation				\$449,386	Part A										
Source of Funds Available for Reallocation:				Explanation:											
Dispartities Pilot				\$98,786											
EFA				\$120,000											
Rural Pcare				\$75,000											
SLW				\$70,600											
Vision				\$85,000											

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)	Pcare, MCM, SLW, LPAP, EFA, OUTRE, EHE				Control No.	
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
	Request Period (check one):	April:	August:	Oct: X	Final Qtr:		
E.	Amount of additional funding Requested:	\$300,000.00					
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in <u>current</u> contract:	b. Cost/unit	c. Number of <u>additional</u> units requested:	d. Total: (b x c)		
	1. EFA	808	\$30.00		\$0.00		
	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.)	\$72,760.00	N/A	\$200,000.00	\$200,000.00		
	9. Total additional funding (must match E. above):	\$200,000.00					
G.	Number of new/additional clients to be served with requested increase.						
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served. <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 2019.* (March 1, 2019 - February 28, 2020) *If agency was funded for service under Part A (or MAI) in FY 2019 - if not, mark these cells as "NA"	144	53%	44%	36%	83%	17%
	2. Number of clients that have received this service <u>under Part A</u> (or MAI) in FY 2020. a. April Request Period = Not Applicable b. August Request Period = 03/01/20 - 06/30/20 c. October Request Period = 03/01/20 - 09/30/20 d. 4th Qtr. Request Period = 03/01/20 - 11/30/20	275	53%	44%	35%	80%	20%

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do <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		none
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1	1		none
	3. Number of clients on a "waiting list" for services (per Part A SOC):	180	1	Requested funding is essential to provide the much-needed services to PLWHA	
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	25	1	Requested funding is essential to provide the much-needed services to PLWHA. The number clients that need services will continue to grow throughout the remaining period	
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	1. EFA - Disbursements	Part A	2/28/21	\$72,760	Currently we have 204 units in NP Contract with a value of 381,894.29
	2. EHE EFINA - Disbursements	EHE	2/28/21	\$18,880	Currently we have 82 units in NP Contract with a value of 162,669.10
	3.				
	4.				
K.	Submit the following documentation at the same time as the request (budget narrative and fee-for-service budgets may be hard copy or fax):				
	Revised Budget Narrative (Table I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).				
	This form must be submitted electronically via email by published deadline to Carin Martin: carin.martin@phs.hctx.net				

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)	Nutritional Therapy Services & Supplements Program			Control No.	2	
D.	Request for Increase under (check one): Request Period (check one):	Part A: X April:	or August:	MAI: Oct: X	Final Qtr:		
E.	Amount of additional funding Requested:	\$55,000.00					
F.	Unit of Service: (list only those units and disbursements where an increase is requested)	a. Number of units in current contract:	b. Cost/unit	c. Number of additional units requested:	d. Total: (b x c)		
	1. NUTC	871.80	\$70.00	325	\$22,750.00		
	2. NUTST	1,453.00	\$35.00	83	\$2,905.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column a. and requested amount in column c.)	227,152.11	N/A	\$29,345.00	\$29,345.00		
	9. Total additional funding (must match E. above):	\$55,000.00					
G.	Number of new/additional clients to be served with requested increase.	0					
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> 1. Number of clients that received this service under Part A (or MAI) in FY 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA" 2. Number of clients that have received this service under Part A (or MAI) in FY 2021. a. April Request Period = Not Applicable b. August Request Period = 03/01/21 - 06/30/21 c. October Request Period = 03/01/21 - 09/30/21 d. 4th Qtr. Request Period = 03/01/21 - 11/30/21	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
		605	40%	20%	40%	78%	22%
		493	41%	18%	41%	77%	23%

Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do <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:			The agency has a large number of Ryan White patients seeking services referenced in this Request for Service Category Increase Form. The agency is requesting funding in order to sufficiently meet the continued demands for new	
			4	3 Ryan White patients.	
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:			The agency has a large number of Ryan White patients seeking services referenced in this Request for Service Category Increase Form. The agency is requesting funding in order to sufficiently meet the continued demands for existing	
			3	2 Ryan White patients.	
	3. Number of clients on a "waiting list" for services (per Part A SOC):		0	The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.	
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):		0	The agency offers a limited number of same day appointment slots for patients.	
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	1. NUTC				77 units (\$5,390.00) in NP @ 09/30/21
	2. NUTSD				\$23,654.26 in NP @ 09/30/21
	3. NUTST				131 units (\$4,585.00) in NP @ 09/30/21
	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 Carin Martin: carin.martin@phs.hctx.net</b>				

Request for Service Category Increase  
Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)					Control No.	<b>3</b>
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	Primary Care/MCM/LPAP					
D.	Request for Increase under (check one): Request Period (check one):	Part A: X April:	or August:	MAI: Oct: X	Final Qtr:		
E.	Amount of additional funding Requested:	<b>\$295,600.00</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.				\$0.00		
	2.				\$0.00		
	3.				\$0.00		
	4.				\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column a. and requested amount in column c.)	396,040.00	N/A	\$295,600.00	\$295,600.00		
	9. Total additional funding (must match E. above):					<b>\$295,600.00</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 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"						
	2. Number of clients that have received this service under Part A (or MAI) in FY 2021.						
	a. April Request Period = Not Applicable						
	b. August Request Period = 03/01/21 - 06/30/21						
	c. October Request Period = 03/01/21 - 09/30/21						
	d. 4th Qtr. Request Period = 03/01/21 - 11/30/21						
		143	43%	19%	38%	83%	17%
		74	31%	20%	49%	80%	20%



Request for Service Category Increase  
Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation.	a. Enter Number of Weeks in this column	b. How many Weeks will this be if full amount of request is received?	c. Comments (do <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:			The agency has a large number of Ryan White patients seeking services referenced in this Request for Service Category Increase Form. The agency is requesting funding in order to sufficiently meet the continued demands for new Ryan White patients.	
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	4		The agency has a large number of Ryan White patients seeking services referenced in this Request for Service Category Increase Form. The agency is requesting funding in order to sufficiently meet the continued demands for existing Ryan White patients.	
	3. Number of clients on a "waiting list" for services (per Part A SOC):	3		2 The agency does not maintain a waiting list. The agency offers a limited number of same day appointment slots for patients.	
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0		0 The agency offers a limited number of same day appointment slots for patients.	
		0			
J.	List all other sources and amounts of funding for <b>similar</b> services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	1. Diagnostics				\$218,331.77 in NP @ 09/30/21
	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 Carin Martin: carin.martin@phs.hctx.net</b>				

**2021 QUARTERLY REPORT**  
**PRIORITY AND ALLOCATIONS COMMITTEE**  
(Submitted October 2021)

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

1. Conduct training to familiarize committee members with decision-making tools.  
Status: *DONE*
2. Review the final quarter allocations made by the administrative agents.  
Status: *DONE*
3. \*Improve the processes for and strengthen accountability in the FY 2022 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: *DONE - DELAYED*
5. \*Determine the FY 2022 priorities, allocations and subcategory allocations for Ryan White Parts A and B and State Services funding.  
Status:
6. \*Review the FY 2021 priorities as needed.  
Status: *PENDING OR DONE*
7. \*Review the FY 2021 allocations as needed.  
Status: *DONE*
8. Evaluate the processes used.  
Status: *DONE*
9. Annually, review the status of Committee activities identified in the current Comprehensive Plan.  
Status: *DONE*

**Status of Tasks on the Timeline:**

*BOBBY CRUZ*  
Committee Chairperson

*10/28/21*  
Date

# **Operations Committee Report**

# HOUSTON AREA HIV HEALTH SERVICES RYAN WHITE PLANNING COUNCIL (RWPC)

EST. OCT. 2002

REVISED XXXXXX POLICY NO. 1200.00

## HONORARIUMS AND INCENTIVES

### PURPOSE

The purpose of this policy is to establish guidelines by which honorariums, incentives or other forms of gratuity are allowable.

### SCOPE

This policy encompasses Ryan White Planning Council and Affiliate Committee members, Project LEAP students, consumer input group participants, needs assessment survey participants, and needs assessment focus group participants who are living with HIV.

### AUTHORITY

Consumer input group participants, needs assessment survey participants, and needs assessment focus group participants who are living with HIV can receive an incentive but it must be purchased as described in Health Services and Resource Administration Policy Clarification Notice (PCN) #16-02: Eligible Individuals & Allowable Uses of Funds: store gift cards, vouchers, coupons, or tickets that can be exchanged for a specific service or commodity (e.g., food or transportation) must be used. Store gift cards that can be redeemed at one merchant or an affiliated group of merchants for specific goods or services that further the goals and objectives of the RWHAP are also allowable as incentives for eligible program participants. Health Services and Resource Administration (HRSA) RWHAP recipients are advised to administer voucher and store gift card programs in a manner which assures that vouchers and store gift cards cannot be exchanged for cash or used for anything other than the allowable goods or services, and that systems are in place to account for disbursed vouchers and store gift cards.

### PROCESS

Office of Support staff will provide procedures and internal controls for gift cards, including but not limited to:

- Documented processes for purchasing, requesting, distributing, and tracking of gift cards held by Office of Support staff.
- Gift cards for all grant participation incentives will meet the following qualifications:
  - Eligible participants are people living with HIV

- Participants in consumer input meetings must actively engage in event/meeting that furthers the goals and objectives of the RWHAP.

No member of the Ryan White Planning Council or Affiliate Committee member, Project LEAP student, or any other Council-related volunteer, may accept an honorarium, incentive or other form of gratuity for services performed in connection to his or her service to the Council. This does not pertain to reimbursements for travel, meals, hotel or other expenses incurred in performance of these services. If an honorarium is sent, the recipient is to turn it in to the Office of Support who will return the check with a letter declining the check and a suggestion that the money be distributed to an HIV organization, such as those listed in the Blue Book.

# Members Eligible to Run for Chair of the 2022 Ryan White Planning Council

(as of 10-21-21)

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):

Veronica Ardoin  
Rosalind Belcher\*  
Skeet Boyle  
Johanna Castillo  
Enrique Chavez\*  
Tony Crawford  
Bobby Cruz\*  
Johnny Deal  
Ronnie Galley\*  
Peta-gay Ledbetter  
Tom Lindstrom  
Roxane May\*  
Holly Renee McLean  
Josh Mica  
Diana Morgan  
Pete Rodriguez  
Robert Sliepka  
Crystal Starr  
Bruce Turner\*  
Andrew Wilson\*

## Not Eligible To Run for Chair

Kevin Aloysius\* (Legacy Community Health)  
Kimberley Collins (City of Houston)  
Ahmier Gibson-conflicted? Unable to locate  
Dawn Jenkins\*-conflicted (Harris Health System)  
Daphne Jones\*-conflicted (City of Houston)  
Denis Kelly-conflicted (Avenue 360)  
Nkechi Onyewuenyi-conflicted (Legacy Community Health)  
Matilda Padilla-conflicted (AIDS Healthcare Foundation)  
Shital Patel\*-conflicted (Harris Health System)  
Oscar Perez\*-conflicted (Avenue 360)  
Paul Richards (joined Fall 2021)  
Faye Robinson\*-conflicted (City of Houston)  
Imran Shaikh-conflicted (City of Houston)\*  
Steven Vargas\* (contractor for Proyecto VIDA with the Office of Support)

## SLATE OF NOMINEES

As of November 4, 2021 the following people have been nominated and accepted the nomination to run for an officer position on the 2022 Ryan White Planning Council:

### Chair:

Crystal Starr  
Bruce Turner

### Vice Chair:

Skeet Boyle  
Denis Kelly

### Secretary:

Kevin Aloysius  
Denis Kelly

# **The Houston Ryan White Office of Support Report**

## **NOVEMBER 2021**

Submitted: November 4, 2021

### **COVID-19 Updates**

- Due to the recent surge in COVID-19 cases in Texas, the Council continues to host all of its committee and Planning Council meetings via Zoom.

### **Office of Support Updates**

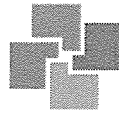
- The Director of the Office of Support meet with Beau Mitts, the Bureau Chief for HIV, Hepatitis and STI's for the City of Houston to review the guidelines for the 2022 Comprehensive Prevention and Care Services Plan. Our goal is to work closely together to make the plan interface with the Ending the HIV Epidemic plans since the instructions encourage us to build this next plan using already existing plans and input.
- As you know, Ricardo took a position with his old friends at the City Health Department. Because of that, we had to put the Out of Care Study on hold. So, instead of asking Project LEAP students to collect data for the study, they are going to provide public comment next week as their special project.
- The Office of Support is taking applications for the Health Planner position. Please help us get the word out as we have not received as many applications as we normally do.
- Next week is the last 2021 Project LEAP class. We anticipate having 16 fantastic graduates so please encourage them to apply to be Council members when you meet them virtually at the Council meeting on November 11<sup>th</sup>.
- Many thanks to the 12 individuals who have signed up to help at the Project LEAP graduation on Tuesday evening, November 30<sup>th</sup>. Those individuals are: Allen, Peta, Bobby, Ronnie, Daphne, Tana, Denis, Deborah, Titan, Rodney, Tony and Crystal. We will be meeting at United Way for set up at 4 pm. Everyone is required to wear a mask and dinner will come in individual packages as opposed to buffet style. In January, we hope to host an in-person graduation for the class of 2020 Project LEAP since we promised to do that and since they have never met each other.

### **Council Updates**

- At some point in the near future, we will announce the next joint training between the Houston Ryan White Planning Council (RWPC) and the Houston Prevention Community Planning Group (CPG). The trainings were put on hold while the City Health Department was hosting the Ending the HIV Epidemic workgroup meetings to get input into the plan.



Umair A. Shah, M.D., M.P.H.  
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Fax. (713) 439-6080



Harris County  
**Public Health**  
Building a Healthy Community

Michael Ha  
Disease Control & Clinical Prevention Division  
2223 West Loop South  
Houston, Texas 77027  
Tel. (713) 439-6000  
Fax: (713) 439-6199

## **Houston EMA Ryan White Part A and MAI Administrative Agency Report**

**November 4, 2021**

- **FY 2021 HIV Services Contracts:** RWGA has begun preparing mid-year contract amendments. Contract reductions have been prepared and will be submitted to County Purchasing for Court approval with corresponding increases, pending RWPC approval of October reallocation requests.
- **Take Charge Texas (TCT):** DSHS facilitated TCT demonstrations and user testing is underway. On October 29<sup>th</sup> DSHS hosted a demonstration of TCT's consumer portal for a limited number of invited consumers. On November 3<sup>rd</sup>, DSHS began user testing with Agency staff statewide. Testing for TCT data import features is scheduled to begin the week of November 8<sup>th</sup>. No date has been confirmed for the live rollout of TCT. However, CPCDMS will remain the Houston area HIV services client level database for the immediate future.
- **HCPH Divisional Restructuring:** On October 20<sup>th</sup>, HCPH leadership announced divisional restructuring that resulted in the elimination of the DCCP division director position. The DCCP division that houses RWGA has been combined with another HCPH division. On October 29<sup>th</sup> Dr. Ericka Brown was named as the new division director for this combined division. Dr. Brown will start with HCPH on December 6th.
- **RWGA Staffing Updates:** The RWGA Health Equity Specialist position has been filled. Jason Black will be onboarded at HCPH on November 22<sup>nd</sup>. Although this position primarily supports EHE activities, Jason is expected to become an even more familiar face in the community as he works to increase community engagement for HIV treatment.

After over 22 years of service, Art Delgado will retire from HCPH on November 19<sup>th</sup>. Art has lead Ryan White Part A program monitoring activities during his time with HCPH. His knowledge and expertise will be sorely missed.

Carin Martin, Manager  
HCPH/Ryan White Grant Administration Section  
2223 West Loop South, #601, Houston, TX 77027  
(832) 927-7630 (V) / [carin.martin@phs.hctx.net](mailto:carin.martin@phs.hctx.net)

*HCPH is the local public health agency for the Harris County, Texas jurisdiction. It provides a wide variety of public health activities and services aimed at improving the health and well-being of the Harris County community.*

Follow HCPH on Twitter [@hcphtx](https://twitter.com/hcphtx) and like us on Facebook



Ryan White Part B, C, D HOPWA and State Services Grant Administrative Agency

## **RWPC Steering Committee & Council Report**

**November 2021**

### **1. Administrative Agency Update**

#### **a. TRG Reports Submission:**

##### **▪ Procurement**

##### **1. Ryan White State Services September 1-August 31:**

- a. FY 2021 SS spending through July and August 2021  
**provided 10/7/2021**

##### **2. Ryan White Part B April 1-March 31:**

- a. FY 2021 RWB spending through July and August 2021  
**provided 10/7/2021**

##### **▪ Service Utilization Quarterly Report**

##### **1. State Services September 1-August 30:**

- a. FY 2021 1<sup>st</sup> Quarter (Sept-Nov)
- b. FY 2021 2<sup>nd</sup> Quarter (Dec-Feb)
- c. FY 2021 3<sup>rd</sup> Quarter (Mar-May)
- d. FY 2021 4<sup>th</sup> Quarter FINAL (Jun-Aug) **provided 10/7/2021**

##### **2. Ryan White Part B April 1-March 31:**

- a. FY 2021 1<sup>st</sup> Quarter (Apr-Jun)
- b. FY 2021 2<sup>nd</sup> Quarter (Jul-Sept) **provided 10/26/21**
- c. FY 2021 3<sup>rd</sup> Quarter (Oct-Dec)
- d. FY 2021 4<sup>th</sup> Quarter RWB (Jan-Mar)

##### **▪ Health Insurance Assistances Service Utilization Monthly Report**

- a. FY 20-21 Usage Through September 2021 **provided 10/26/21**

*\*All reports provided to RWPC OOS*

#### **Contact Information**

The Resource Group, Inc.

713-526-1016

Patrick L. Martin, Program Development Director

[plmartin@hivtrg.org](mailto:plmartin@hivtrg.org)

Sha'Terra Johnson, LMSW, Health Planner

[sjohnson@hivtrg.org](mailto:sjohnson@hivtrg.org)



**Ryan White Part B, C, D HOPWA and State Services Grant Administrative Agency**

**2. DSHS Funding Ryan White Part B & State Services Update**

- a. Take Charge Texas December 2021 implementation from ARIES system. DSHS has been conducting system demos related to the User Access Testing (UAT). Client Portal testing has been completed. Administrative Report Testing has been completed. Agency Portal Testing will start the week of November 8<sup>th</sup>.
- b. Completing the DSHS AA Reapplication
- c. **EIS Implementation Workgroup**
  - Collecting Outcome Data from DSHS.
  - HHS will be assuming medical care at HCJ in March.
- d. **Houston ADAP Enrollment Workers:**
  - Regional ADAP/Eligibility Liaison Hailey Malcolm Contact email [hmalcolm@hivtrg.org](mailto:hmalcolm@hivtrg.org)
- e. Performance measures are now in place for AEWs. This is to ensure the ADAP application process is error free with completed in a timely manner.
- f. Medication suspensions will begin on 11/1/2021. Medication list is available for review. Please contact Hailey Malcolm for a copy.
- g. Spend down is still currently placed on hold. More information TBA.
- h. THMP is still currently experiencing some back-log. AEWs are assisting clients to get set up with temporary medication assistance in the meantime.

**3. HRSA Funding Ryan White Part D**

- a. **The Positive VIBE Project (PVP) of Houston and Galveston Update (RW Part D)**
  - Completing the Ryan Part D CSWICY Reapplication

**4. DSHS Funding HOPWA**

- a. **HOPWA Bridge Re-Entry Initiative (BRI) Project**
  - TRG met with project staff to discuss the redesign of current program reporting and the establishment of outcomes to support the documentation of the project's best practices for replication.

Contact Information  
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Sha'Terra Johnson, LMSW, Health Planner  
[sjohnson@hivtrg.org](mailto:sjohnson@hivtrg.org)



Ryan White Part B, C, D HOPWA and State Services Grant Administrative Agency



### Community Initiatives

**1. Trauma-Informed Care Initiative**

TRG continues the COMPASS LEARN Trauma-Informed Learning and Supervisor (TILS) Project. Developing an Implementation Retreat for TIA with a national consultant. Reachelian Ellison is the lead for this project.

**2. create+equity Collaborative**

The local c+e Team continues to meet monthly. TRG is partnering with DSHS to create a virtual “on-demand” training to orient Care Coordinators on the PHQ-9 (for adults) and PQH-A (for adolescents) and how to administer it. The local c+e Team continue to develop the care pathway and adapt the Screening, Brief Intervention, and Referral to Treatment (SBIRT) intervention to provide mental health messaging to support the results of the screening. Once the initial pilot is concluded, the care pathway and SBIRT will be revised as necessary and implemented for all OAHS and Care Coordination sites.

**3. Serving the Recently Released and Incarcerated**

The SIRR Partnership Meeting will resume in January. To be added to the distribution list for meeting announcements, contact Felicia Booker [fbooker@hivtrg.org](mailto:fbooker@hivtrg.org)

**4. Texas Black Women’s Health Initiative (TxBWHI) Houston Team**

- a. Contact Sha’Terra Johnson [tbwihouston@gmail.com](mailto:tbwihouston@gmail.com)

Contact Information

The Resource Group, Inc.

713-526-1016

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[plmartin@hivtrg.org](mailto:plmartin@hivtrg.org)

Sha’Terra Johnson, LMSW, Health Planner

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# FYI

In an effort to save paper, most of the following pages are two sided.

## INFORMATION FROM THE TEXAS STRIKE FORCE

Provided by Allen Murray on 10-18-21

**FYI:** Recently, the Texas Strike Force had a meeting with Commissioner Imelda Garcia from the Texas Department of State Health Services (DSHS). See below for a list of their requests.

----- Forwarded Message -----

**From:** "Venita Ray" <[venita@pwn-usa.org](mailto:venita@pwn-usa.org)>

**To:** "Garcia, Imelda M (DSHS)" <[ImeldaM.Garcia@dshs.texas.gov](mailto:ImeldaM.Garcia@dshs.texas.gov)>

**Sent:** Mon, Oct 25, 2021 at 9:06 AM

**Subject:** Texas Strike Force Follow up - Response Requested by Nov. 30th

Good morning Imelda. I hope you had a wonderful weekend. Thank you again for sharing space with us last week. Please see below our list of asks we made on the call. We request a written response by Nov. 30th.

1. Provide quarterly written and oral program budget updates to the Texas Strike Force in a timely manner that allows us an opportunity to provide feedback and to ask follow up questions. We are asking DSHS to provide this to ensure the Texas HIV Medication Program is solvent beyond the next two years.
2. Retain the seventeen (17) medications that were considered to be removed from the formulary. We want there to be no changes and, if this still needs to be discussed, we ask the Medication Advisory Committee to form an ad hoc sub-committee to revisit the changes and include the Texas Strike Force.
3. Provide concrete steps and a timeline to reduce the waitlist (backlog). We further request that the Texas HIV Medication Program outline how long it takes for applications to be processed and to work towards a goal of 30-60 days processing time for applications. We also want to ensure that there is an opportunity for applicants to correct any missing items to their applications rather than being automatically denied for minor mistakes.
4. Establish a community engagement partnership with the Texas Strike Force to ensure ongoing accountability between DSHS and the community. We request that staff of the Texas HIV Medication Program attend our meetings and allow us to provide feedback and input to any proposed changes to the program, and allow people living with HIV to be the primary voices driving decisions of the program. DSHS would be required to respond to our concerns in writing or in person during our meetings.
5. Implement HRSA's recent guidance, Policy Clarification Notice 21-02, *Determining Client Eligibility and Payor of Last Resort in the Ryan White HIV/AIDS Program (RWHAP)*, to eliminate the 6 month recertification requirement. If DSHS is not implementing the guidance, provide justification for that decision.
6. Revise the agenda for the Medication Advisory Committee to allow public comment at an earlier time during the meeting.

We look forward to hearing from you.

Thanks