

Houston Area HIV Services Ryan White Planning Council
Office of Support
2223 West Loop South, Suite 240, Houston, Texas 77027
832 927-7926 telephone; 713 572-3740 fax
<http://rwpchouston.org>

MEMORANDUM

To: Members, Houston Ryan White Planning Council

Copy: Glenn Urbach, Ryan White Grant Administration
Mauricia Chatman, Ryan White Grant Administration
Tiffany Shepherd, The Resource Group
Sha'Terra Johnson, The Resource Group
Diane Beck, Ryan White Office of Support

Email Copy Only:

Lt. Commander Lawrence Momodu, HRSA
Commander Luz Rivera, PACE
Commander Rodrigo Chavez, PACE
Ann Robison, the Montrose Center
Marlene McNeese, Houston Health Department
Charles Henley, Consultant

From: Tori Williams, Director, Ryan White Office of Support

Date: Wednesday, May 3, 2023

Re: Meeting Announcement

Please remember that the Council will be using a hybrid format at all meetings in 2023. That means members can participate by phone, computer or in person. **But, we need 11 people to meet in-person at the Church in order to make quorum.** In an effort to entice you to come in person, we will be providing sandwich trays to those who have a medical need. Others are encouraged to bring a brown bag lunch. Please contact Rod ASAP to RSVP, even if you cannot attend:

Ryan White Planning Council Meeting

12 noon, Thursday, May 11, 2023

Meeting Location: Online or via phone

Click on the following link to join the Zoom meeting:

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

Meeting ID: 995 831 210 Passcode: 577264

Or, use the following telephone number: 346 248-7799

In Person: St. Philip Presbyterian Church, 4807 San Felipe St, Houston, Texas 77056

Please RSVP to Rod at 832 927-7926 or by responding to her email reminders. Thank you.

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, May 11, 2023

Meeting Location: Online or via phone

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- I. Call to Order
- A. Welcome and Moment of Reflection
- B. Adoption of the Agenda
- C. Approval of the Minutes
- D. Special Acknowledgement
- E. Roles and Responsibilities of Ryan White Part A Stakeholders
- Crystal R. Starr, Chair
Ryan White Planning Council
- Crystal R. Starr
Charles Henley, Consultant
- 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
- Most Ryan White committees, including the Comprehensive HIV Planning Committee, did not meet in April so that volunteers could attend the FY24 How To Best Meet the Need training and workgroup meetings.
- Allen Murray and
Steven Vargas, Co-Chairs
- B. Affected Community Committee
- No report
- Rodney Mills and
Diana Morgan, Co-Chairs
- C. Quality Improvement Committee
- No report
- Tana Pradia and
Pete Rodriguez, Co-Chairs

- | | | |
|-------|--|---|
| D. | Operations Committee
No report | Ronnie Galley and
Cecilia Ligons, Co-Chairs |
| E. | Priority and Allocations Committee
<i>Item:</i> Reallocation of FY23 Unallocated Funds
<i>Recommended Action:</i> Motion: Allocate \$18,000 to increase the FY23 Ryan White Office of Support Budget to pay for a short-term lease on office and meeting space until more permanent space becomes available.

<i>Item:</i> Reallocation of FY23 Unallocated Funds
<i>Recommended Action:</i> Motion: Allocate \$485,889 to Emergency Financial Assistance – Pharmacy based on the high need for this service in FY22. | Peta-gay Ledbetter and
Bobby Cruz, Co-Chairs |
| V. | Report from the Office of Support | Tori Williams, Director |
| VI. | Report from Ryan White Grant Administration | Glenn Urbach, 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 (<u>During Virtual Meetings, Reports Will Be Limited to Written Reports Only</u>) | |
| | A. AIDS Educational Training Centers (AETC) | Shital Patel |
| | B. Ryan White Part C Urban and Part D | Dawn Jenkins |
| | C. HOPWA | Megan Rowe |
| | D. Community Prevention Group (CPG) | Kathryn Fergus |
| | E. Update from Task Forces: | |
| | • Sexually Transmitted Infections (STI) | |
| | • African American | Sha’Terra Johnson |
| | • Latino | Steven Vargas |
| | • Youth | |
| | • MSM | |
| | • Hepatitis C | Steven Vargas |
| | • Project PATHH (Protecting our Angels Through Healing Hearts)
formerly Urban AIDS Ministry | Skeet Boyle? |
| | F. HIV and Aging Coalition | Skeet Boyle |
| | G. Texas HIV Medication Advisory Committee | Bruce Turner |
| | H. Positive Women’s Network | Tana Pradia or Diana M. |
| | I. Texas Black Women’s Initiative | Sha’Terra Johnson |
| | J. Texas HIV Syndicate | Steven Vargas |

K. END HIV Houston
L. Texans Living with HIV Network

Jason Black?
Steven Vargas?

IX. Announcements

X. Adjournment

* *ADAP = Ryan White Part B AIDS Drug Assistance Program*
** *TDSHS = Texas Department of State Health Services*

HOUSTON AREA HIV SERVICES RYAN WHITE PLANNING COUNCIL



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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.

MINUTES

12 noon, Thursday, April 13, 2023

Meeting Location: St. Philip Presbyterian Church 4807 San Felipe, Houston, Texas 77056
and Zoom teleconference

MEMBERS PRESENT	MEMBERS PRESENT	OTHERS PRESENT
Crystal Starr, Chair	Evelio Salinas Escamilla	Charles Henley, Consultant
Ardry “Skeet” Boyle, Vice Chair	Imran Shaikh	Shabaura Perryman, Merck
Josh Mica, Secretary	Robert Sliepka	Alfonzo Lopez, HOPWA
Servando Arellano	Steven Vargas	Melody Barr, HOPWA
Rosalind Belcher		Georgina German, Affiliate
Johanna Castillo		
Robert “Bobby” Cruz		STAFF PRESENT
Kathryn Fergus	MEMBERS ABSENT	<i>Ryan White Grant Administration</i>
Kenia Gallardo	Kevin Aloysius, excused	Glenn Urbach
Ronnie Galley	Caleb Brown, excused	Mauricia Chatman
Dawn Jenkins	Titan Capri, excused	Jason Black
Cecilia Ligons	Tony Crawford	
Rodney Mills	Daphne L. Jones	<i>The Resource Group</i>
Diana Morgan	Peta-gay Ledbetter, excused	Sha’Terra Johnson
Allen Murray	Roxanne May, excused	
Oscar Perez	Shital Patel, excused	<i>Office of Support</i>
Tana Pradia	Faye Robinson	Tori Williams
Paul Richards	Pete Rodriguez, excused	Mackenzie Hudson
Ryan Rose	Carol Suazo	Diane Beck
Megan Rowe	C. Bruce Turner, excused	Rod Avila

Call to Order: Crystal Starr, Chair, called the meeting to order at 12:05 p.m.

During the opening remarks, Starr thanked everyone who generously signed up to provide lunch at our Council meetings. Please reach out to Avila to pick a month when you would like to bring food for the group. Today we can thank Sliepka for graciously providing pizza and cookies. Those who wish to, are also welcome to bring a bag lunch. The Office of Support will soon be moving to another location.

Negotiations with several possible locations are still underway. But, in the meantime, heartfelt thanks go to following individuals who have volunteered their time to assist in packing up the office: Allen Murray, Ryan Rose, Anna Moore and Beth Allen. Tori will let us know if and when they need additional help. Starr then called for a Moment of Reflection with a request to think about several members who have been sick or in the hospital lately.

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

Approval of the Minutes: Motion #2: it was moved and seconded (Mica, Boyle) to approve the March 9, 2023 minutes. Motion carried. Abstentions: Arellano, Belcher, Sliepka.

FY 2024 How to Best Meet the Need Process: Tana Pradia reviewed the schedule of workgroups, see attached. Beck said that the packets are available today and also available for download on the website.

Public Comment and Announcements: Alfonzo Lopez, City of Houston Housing and Community Development HOPWA program, addressed the Planning Council in Spanish. Melody Barr, Deputy Director, City of Houston Housing and Community Development which administers the HOPWA program, said that she is not translating Lopez's comments - her comments are similar but independent. In September 2022 she was a member of the Planning Council and listened to a significant amount of public comment in Spanish. Though she identifies as Latina, more specifically Chicana, she does not speak Spanish. It is unfortunate that there was no translator available to translate in real time since the majority of the Council speaks English. The comments were later translated and sent to the Planning Council. Most comments related to mental health services provided in Spanish. The comments were related to various Ryan White services but had a common theme, a lack of representation of the Latino community. One specifically mentioned increasing Spanish speaking psychologists, therapists and counselors. Another said they want to know and read in their language how to take care of ourselves and what documents they are signing. Another comment said that they do not have access to health programs in Spanish. I am here today to say that we hear you.

The HOPWA program is not governed by Ryan White but because of those comments my team went to work to identify gaps – asking that materials, information and communications be provided in Spanish and other languages such as Vietnamese. Not just for the HOPWA program but for all programs administered by public service which is the group that she administers. The changes will take time but they are under way because the comments made in September are so important. We are conducting a secret shopper program and working with individuals with lived experience to better our programs. The HOPWA program released a Notice of Funding Award (NOFA), one of the agencies that applied and is scheduled to go before City Council is Fundación Latino Americana de Accion Social, also known as FLAS. They have provided services to Latino populations affected by HIV for nearly 28 years. The agreement between the City of Houston and Avenue360 will come to an end in June 2023 as they have chosen not to accept an additional HOPWA award. Melody and her team are working with other providers to transfer the clients seamlessly. Five additional agencies will be taking on 215 TBRA client households. It is important for clients to maintain services and to have housing stability. She thanked Avenue360 for their help in the transition of clients and AIDS Foundation Houston, Catholic Charities, the Montrose Center, FLAS and Bread of Life for absorbing the additional clients. HOPWA is the only federal program dedicated to the housing needs of people living with HIV. Stable housing is closely linked to successful HIV health outcomes. The more stable your living situation is the better you do in care.

Williams said that there was a translator present at the meeting and on Zoom but there are many other meetings where we are not as prepared unless we know ahead of time.

Reports from Committees

Affected Community Committee: Diana Morgan, Co-Chair, reported on the following:

Houston Ryan White Client Satisfaction Survey: Mauricia Chatman from Ryan White Grant Administration and John Sapero from Collaborative Research presented questions from the new Houston Ryan White Client Satisfaction Survey in order to get input from Committee members. Overall, Committee members agreed with the questions.

2022-26 Integrated HIV Prevention and Care Plan: Williams walked Committee members through the attached power point presentation that describes the suggested Leadership Team structure for implementing monitoring and evaluating the 2022 Integrated Plan. The Affected Community Committee recommends the suggested Leadership Team structure described in the PowerPoint presentation.

Comprehensive HIV Planning Committee: Steven Vargas, Co-Chair, reported on the following:

2022-26 Integrated HIV Prevention and Care Plan: **Motion #3:** *Approve the suggested Leadership Team structure for implementing, monitoring and evaluating the 2022-26 Integrated Plan.* **Motion Carried.**

Committee Vice Chair: Kenia Gallardo was elected as the Vice Chair for the Committee.

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

Criteria for Justifying the FY 2024 Service Categories: **Motion #4:** *Approve the attached criteria for justifying the FY 2024 Ryan White service categories during the 2023 How To Best Meet the Need process.* **Motion Carried.**

Home and Community-Based Health Services: **Motion #5:** *Due to many years of being underutilized, do not RFP the Home and Community-based Health Services service category. See attached memo from The Resource Group for justification.* **Motion Carried.** Abstentions: Escamilla, Shaikh.

FY 2024 How To Best Meet the Need Process: The FY 2024 How to Best Meet the Need process will begin on Monday, April 17th with Special Workgroup meetings on HIV and Aging in the morning and Case Management for individuals with a history of a sexual offense. Please see the enclosed calendar with all meeting dates and services to be discussed. Although all meetings will be in hybrid format, please sign up with Rod or Diane to attend these meetings. The RSVP list will tell us how large a room we will need to rent at the church.

Committee Vice Chair: Caleb Brown was elected as the Vice Chair for the Committee.

Priority and Allocations Committee: Bobby Cruz, Co-Chair, reported on the following:

Home and Community-Based Health Services: **Motion #6:** *Accept The Resource Group staff recommendations as outlined in the attached memo by de-funding Home and Community-Based Health Services and reallocating the \$113,315 in Ryan White Part B funds to Oral Health-General and Prosthodontics.* **Motion Carried.** Abstentions: Escamilla, Shaikh.

Reports from the Ryan White Part B/SS* Administrative Agency: See three attached reports.

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

Letter from HRSA re: Consumer Incentives, dated 12/06/22: **Motion #7:** *Adopt Option #2, as outlined in the 12/06/22 HRSA letter regarding consumer incentives. Option #2 provides consumers with a meal (when medically necessary) and reimburses consumers for transportation to and from a Ryan White-related meeting or event, and childcare needed during a Ryan White-related meeting or event. Ask Planning Council, Affiliate Committee members and students if they are taking medication that requires it be taken with food. If "yes", provide these individuals with a meal. Those who do not have a medical*

necessity for food are encouraged to bring a bag lunch or dinner to meetings that take place during a mealtime. **Motion Carried.**

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

Report from Ryan White Grant Administration: Glenn Urbach, Manager, summarized the attached report. Vargas asked that they make sure all case management staff is aware of the availability of the Local Pharmacy Assistance Program.

Report from The Resource Group: Sha’Terra Johnson, Health Planner, presented the attached report.

Task Force Reports: Starr said that the Council agreed some time ago that they preferred not to have verbal Task Force Reports while meeting on Zoom. The Office of Support is happy to receive and distribute written reports in advance of all Council meetings.

Announcements: Jenkins said that Community Health Choice is 500% over budget due to the cost of treating HIV with single pill regimens so they are no longer going to cover them on their insurance plans. She believes that other insurance providers will also follow suit. Mica said that Harris Health System is aware of this formulary change and is working to assist patients who are affected so they can continue their single pill regimen. If health insurance won’t allow it, they can still get their medication through the Ryan White Program. Starr said that HIV Advocacy Day in Austin was well attended. Ligons said that the Positive Living Conference in Florida is September 15-17, 2023.

Williams reminded everyone that there will be a training on the data that will be used in the How to Best Meet the Need process at 1:30 pm today. Beck put the Zoom link for the training in the chat box.

Adjournment: Motion: *it was moved and seconded (Murray, Sliepka) to adjourn the meeting at 1:25 p.m.* **Motion Carried.**

Respectfully submitted,

Victoria Williams, Director

Date _____

Draft Certified by
Council Chair: _____

Date _____

Final Approval by
Council Chair: _____

Date _____

Council Voting Records for April 13, 2023

C = Chaired 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 Structure of the Integ Plan Leadership Team Carried					Motion #1 Agenda Carried				Motion #2 Minutes Carried				Motion #3 Structure of the Integ Plan Leadership Team Carried			
	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
MEMBERS													MEMBERS												
Crystal Starr, Chair				C				C				C	Evelio Salinas Escamilla		X				X				X		
Ardry "Skeet" Boyle, Vice Chair		X				X				X			Imran Shaikh		X				X				X		
Josh Mica, Secretary		X				X				X			Robert Sliepka		X				X				X		
Servando Arellano		X				X				X			Steven Vargas		X				X				X		
Rosalind Belcher		X				X				X															
Johanna Castillo	X				X					X															
Robert "Bobby" Cruz		X				X				X															
Kathryn Fergus		X				X				X			MEMBERS ABSENT												
Kenia Gallardo		X				X				X			Kevin Aloysius												
Ronnie Galley		X				X				X			Caleb Brown												
Dawn Jenkins		X				X				X			Titan Capri												
Cecilia Ligons		X				X				X			Tony Crawford												
Rodney Mills		X				X				X			Daphne L. Jones												
Diana Morgan		X				X				X			Peta-gay Ledbetter												
Allen Murray		X				X				X			Roxanne May												
Oscar Perez	X				X					X			Shital Patel												
Tana Pradia		X				X				X			Faye Robinson												
Paul Richards	X				X					X			Pete Rodriguez												
Ryan Rose		X				X				X			Carol Suazo												
Megan Rowe		X				X				X			C. Bruce Turner												

C = Chair of the meeting ja = Just arrived lm = Left the meeting lr = Left the room VP = Via phone	Motion #4 FY24 Justification Criteria for HTBMN Carried				Motion #5 Do not re-RFP Home & Community Based Health Services Carried					Motion #4 FY24 Justification Criteria for HTBMN Carried				Motion #5 Do not re-RFP Home & Community Based Health Services Carried			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO
MEMBERS									MEMBERS								
Crystal Starr, Chair				C				C	Evelio Salinas Escamilla		X						X
Ardry “Skeet” Boyle, Vice Chair		X				X			Imran Shaikh		X						X
Josh Mica, Secretary		X				X			Robert Sliepka		X				X		
Servando Arellano		X				X			Steven Vargas		X				X		
Rosalind Belcher		X				X											
Johanna Castillo		X				X											
Robert “Bobby” Cruz		X				X											
Kathryn Fergus		X				X			MEMBERS ABSENT								
Kenia Gallardo		X				X			Kevin Aloysius								
Ronnie Galley		X				X			Caleb Brown								
Dawn Jenkins		X				X			Titan Capri								
Cecilia Ligons		X				X			Tony Crawford								
Rodney Mills		X				X			Daphne L. Jones								
Diana Morgan		X				X			Peta-gay Ledbetter								
Allen Murray		X				X			Roxanne May								
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Paul Richards		X				X			Pete Rodriguez								
Ryan Rose		X				X			Carol Suazo								
Megan Rowe		X				X			C. Bruce Turner								

C = Chair of the meeting ja = Just arrived lm = Left the meeting lr = Left the room VP = Via phone	Motion #6 Reallocate funds from Home and Community Based Health Services Carried				Motion #7 HRSA letter re Consumer Incentives-adopt Option 2 Carried					Motion #6 Reallocate funds from Home and Community Based Health Services Carried				Motion #7 HRSA letter re Consumer Incentives-adopt Option 2 Carried			
	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO
MEMBERS									MEMBERS								
Crystal Starr, Chair				C				C	Evelio Salinas Escamilla				X		X		
Ardry “Skeet” Boyle, Vice Chair		X				X			Imran Shaikh				X		X		
Josh Mica, Secretary		X				X			Robert Sliepka		X				X		
Servando Arellano		X				X			Steven Vargas		X				X		
Rosalind Belcher		X				X											
Johanna Castillo		X				X											
Robert “Bobby” Cruz		X				X											
Kathryn Fergus		X				X			MEMBERS ABSENT								
Kenia Gallardo		X				X			Kevin Aloysius								
Ronnie Galley		X				X			Caleb Brown								
Dawn Jenkins		X				X			Titan Capri								
Cecilia Ligons		X				X			Tony Crawford								
Rodney Mills		X				X			Daphne L. Jones								
Diana Morgan		X				X			Peta-gay Ledbetter								
Allen Murray		X				X			Roxanne May								
Oscar Perez		X				X			Shital Patel								
Tana Pradia		X				X			Faye Robinson								
Paul Richards		X				X			Pete Rodriguez								
Ryan Rose		X				X			Carol Suazo								
Megan Rowe		X				X			C. Bruce Turner								

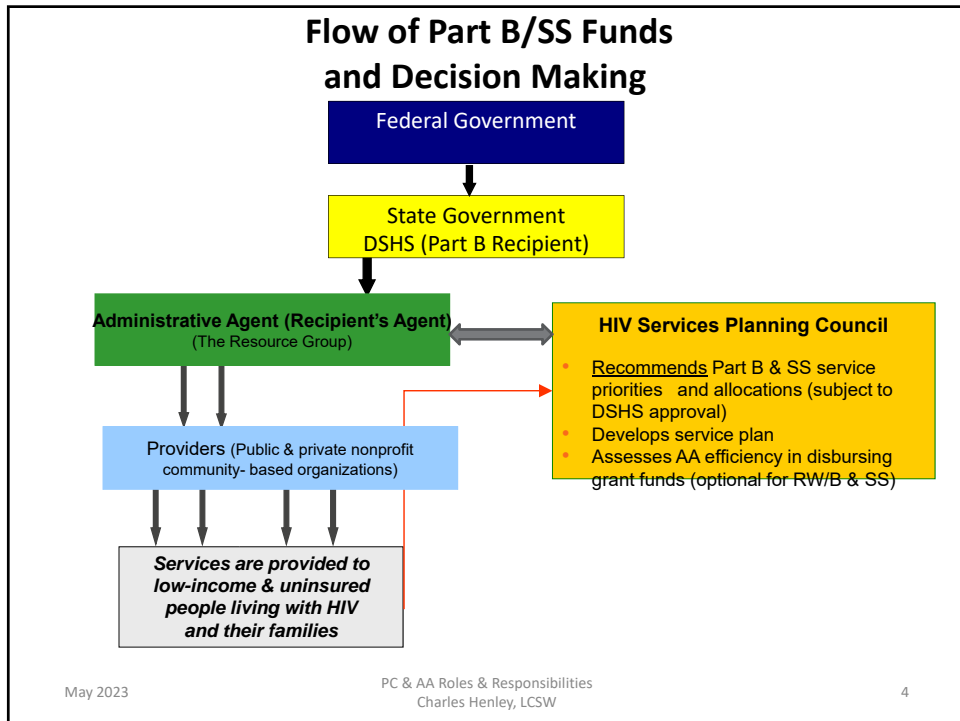
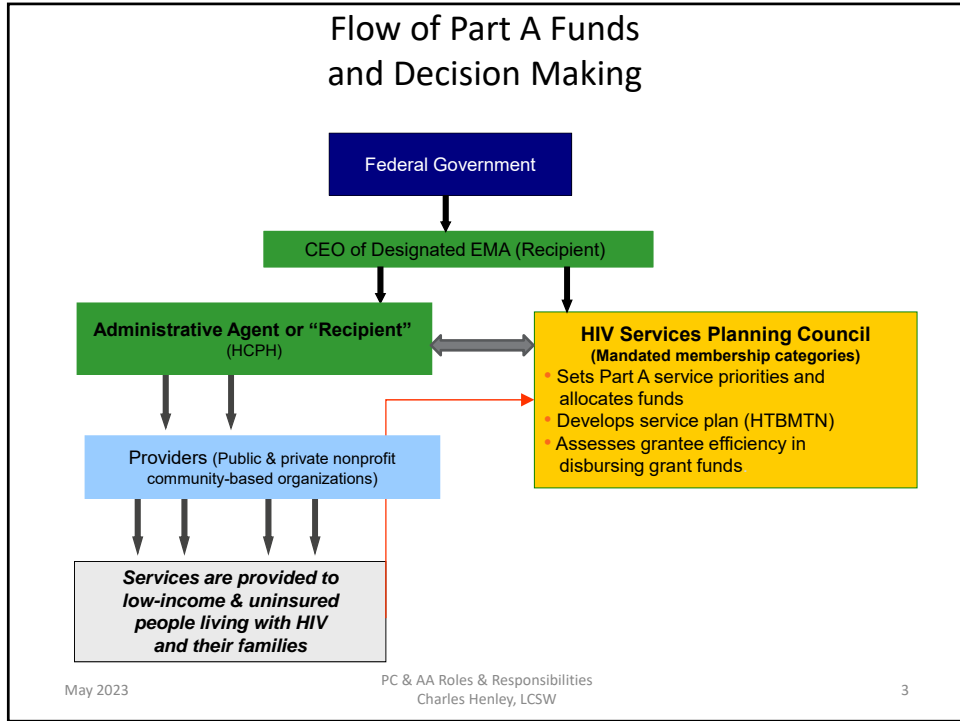
Ryan White Part A Admin Agency and Planning Council Roles & Responsibilities

Charles Henley, LCSW

May 2023

Key Stakeholders

- Chief Elected Official (CEO) *Lina Hidalgo, Harris County Judge*
 - Designates Admin Agency (*selected HCPH, ca. 1993*)
 - Establishes Planning Council
- Planning Council (RWPC)
 - Ensures consumer involvement/input
 - Sets Service Priorities and Funding Allocations
- Administrative Agency (AA) *HCPH/RWGA*
 - Selects Subrecipient Agencies (service providers)
 - Monitors providers & ensures quality of care



Part A Legislatively Mandated PC Roles

Role/Task	CEO/ Recipient	Planning Council
Planning Council Formation/Membership	✓ (CEO)	
Needs Assessment	✓	✓
Comprehensive Planning	✓	✓
Priority Setting		✓
Directives – How to Best Meet the Need		✓
Resource Allocation		✓
Coordination of Services	✓	✓
Procurement (RFP, Reviews, Contracting, Invoices)	✓	
Contract Monitoring	✓	
Clinical Quality Management	✓	✓
Cost-Effectiveness and Outcomes Evaluation	✓	✓ (option)
Assessment of the Administrative Mechanism		✓

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

5

Memorandum of Understanding (MOU)

- Roles and Responsibilities of each key stakeholder (CEO, PC including PC Support, AA) are detailed in an MOU
 - Includes language specific to the Houston EMA (not simply generic statements)
 - Specifies when the MOU is reviewed by key stakeholders (e.g., annually in October)
 - Specifies when the AA and PC annually negotiate resources needed for PC support
 - Attachments list the content and frequency of reports from the AA to PC, “do’s and don’ts”, etc.

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

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Recipient (AA) and Planning Council Roles and Responsibilities

- Recipient and Planning Council = two independent entities, both with legislative authority and roles
- Some roles belong to one entity, and some are shared
- HRSA/HAB recommends separation of duties to avoid confusion of roles
- Effectiveness requires communications, information sharing, and collaboration between the AA, Planning Council, and Planning Council support staff – and ongoing consumer and community involvement

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

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PC Mandated Roles

- Assessment of local community needs
- Develop a Comprehensive Plan for services
- Allocate services funds per PC priorities
- Participate with other RW partners in SCSN
- Coordinate with other Federal, State & Local programs providing HIV-related services
- Assess the efficiency of the Administrative Mechanism

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

8

PC Membership Requirements

- Must maintain no less than 33% unaligned PLWHA membership
 - **Unaligned** PC members are PLWH who receive RW Part A services and are not conflicted (may not be a board member, employee, or contractor)
- Must meet 15 other legislatively mandated membership categories

PC Operations

- Finding out what services are needed
- Deciding what services to fund and how much money to allocate to those services
- Works with the Recipient/AA to develop a long-term plan on how to provide those services
- Evaluates how efficiently providers are paid and how well their contracts are monitored (assessment of the Admin Mechanism)

PC Support Staff

- PC Support Staff are employees of the CJO
- Are not under the supervision of the AA
- The PC directs the work of the PC Support Staff
 - Efforts must be consistent with RW legislative requirements for PC operations and personnel guidelines for Harris County employees
 - Rely on PC support staff to provide Council with expertise in developing PC work products
 - PC Support Staff provide continuity to members with respect to projects, work products, etc.

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

11

PC Operations – Budget

- Part A PC support costs are considered part of the Recipient's (grantee's) administrative budget and are included under the 10% cap on Recipient administration
- "PC support should cover *reasonable and necessary costs* associated with carrying out legislatively mandated functions"
- PC support costs must be negotiated within this context – the PC does not solely set its budget
 - The annual process and timetable for this negotiation is detailed in PC policy and procedures

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

12

PC Operation Limitations

- The language developed by the PC to *best meet the need* of service categories may not name specific agencies as recipients of funds
- The PC may not participate or be involved in drafting Requests for Funding (RFP, FOA), reviewing funding proposals or selecting agencies
- The PC may not be involved in monitoring programmatic or fiscal performance of agencies
- The PC may not name, recommend or otherwise select agencies to receive reallocated funds

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

13

Best Practices for Reviewing Expenditures and Utilization

- Regular reports at predetermined intervals summarizing performance and effectiveness
 - Monthly Expenditure/Procurement Report
 - Quarterly Service Utilization Report
 - Annual Service Effectiveness Reports
 - Health Outcomes/HAB Performance Measures
 - Client/consumer Satisfaction
 - Fiscal and Program Monitoring summaries
 - WICY and Administrative Cap summaries
 - Health Insurance Assistance utilization summaries

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

14

Assessment of Admin Mechanism

- An annual fact-finding exercise
- Is not an evaluation of HCPH/RWGA, its staff or its “relationship” with funded agencies
- Performed using a PC-approved checklist against published information or documented results
- May be done by PC support staff or by a 3rd party
- Deficiencies (if any) are noted and allow for a response/plan for improvement by AA

Recap

- AA and PC are separate but equal entities, each with defined roles & responsibilities
- Some roles & responsibilities belong to one entity or the other and some are shared
- Effective communication, information sharing and collaboration between the AA, PC and PC Support is vital to effective PC operations
- Ongoing consumer and community involvement is key to successful PC operations

Best Practices

- Review Roles and Responsibilities (R&R) annually ✓
- Ensure R&R reflect local conditions and programs ✓
- Establish and follow RWPC-approved policy when requesting information and reports from the AA ✓
- PCS coordinates distribution of information to committees in a timely manner per PC policy ✓
- RWPC Support and the AA provide accurate and issue-relevant information to the PC ✓
- The RWPC Office of Support and the AA are both accountable for ensuring the overall program complies with all applicable HAB policies, rules and regulations ✓

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

17

Questions/Discussion

May 2023

PC & AA Roles & Responsibilities
Charles Henley, LCSW

18

REQUEST FOR INCREASED FUNDING FOR THE FY23 COUNCIL SUPPORT BUDGET

To: Members, Houston Ryan White Priority and Allocations Committee
From: Tori Williams, Director, Ryan White Office of Support
Date: Thursday, April 27, 2023
Re: Request for Increased Funding

As you are aware, the Ryan White Program and its volunteers and staff have been housed in a Harris County office building at 2223 W. Loop South for over 30 years. The County provides this space free of charge to the grant funded program. The County has decided to put the property on the market, therefore the Ryan White Office of Support must vacate the building. Ryan White Office of Support staff has been working with other Harris County staff to find a temporary location that will meet the needs of the staff and volunteers while waiting for permanent office and meeting space to become available in a Harris County Building near Holly Hall. Hence, **this request is for increased funding for the FY23 Office of Support Budget in the amount of \$18,000 which will allow the Program to rent space until permanent, no cost Harris County office and meeting space becomes available in approximately 10 – 12 months.**

The Ryan White Planning Council volunteers and staff need:

- 2 – 3 offices for staff to work from 2 – 4 days a week; staff will work from home the rest of the week
- meeting rooms that allow social distancing for between 6 and 65 people, some of whom are disabled
- free parking for staff and volunteers
- a safe environment for staff to teach weekly evening classes 22 weeks out of the year

Churches that have been considered include:

1. **St. Philips Presbyterian Church** in the Galleria area, meets all needs. The St. Philip Property Management Committee was in the process of determining a quote, but instead withdrew their offer when they learned that Harris County does not include an indemnification clause in their insurance policy.
2. **Resurrection Metropolitan Community Church (RMCC)** in the Heights has one very large room for office space, meeting rooms for most meetings, free parking and a safe environment for evening classes. Unfortunately, the area available for staff offices is not handicapped accessible as it is on a second floor and can only be accessed by stairs. And, the Church was hoping that staff would teach most of the evening classes in the office space, which means that the classes would not be open to people with disabilities unless they were to participate virtually. Although classes use a hybrid format, students are encouraged to attend in person. Janitorial services are included in the quote of \$_____/month.
3. **Bering United Methodist Church** in Montrose. They are offering two very large offices and access to multiple large and small meeting rooms, depending upon what is needed for each meeting. The entire campus is handicapped accessible, free parking is available in a large lot at the rear of the church, and the environment is safe for staff to teach classes in the evenings with a strong recommendation that students and facilitators leave to go to their cars

in pairs at the end of the night. Janitorial services are included in the quote of \$2,000/month.

All three churches are aware that the County insurance policy does not include an indemnification clause.

Bering United Methodist Church meets all of the program's needs. Although the price is higher than the other churches, the Church campus is handicapped accessible and will therefore allow public access to all Ryan White meetings and classes. The Church is also willing to provide meeting rooms that fit any occasion. And, the Church has been an integral part of the Houston area HIV community since the 1980's. Most people that work with the Council know where Bering Church is located and feel welcome on the campus.

REQUEST TO THE PRIORITY AND ALLOCATIONS

Rent in the amount of \$2,000 per month for the remaining 9 months in FY23 = \$18,000

The current budget can be adjusted to cover the moving costs

Note: The Office of Support uses a large copier that requires a special electrical outlet. Because the electrical wiring in all three of the churches is old, the County is providing a room in a County building downtown where the copier and postage machines will be kept and an employee will go when needed to make meeting packets. Of the three churches that were considered, Bering Church is the closed in proximity to downtown.

**Houston EMA Ryan White Part A, MAI & EHE
Administrative Agency Report
April 6, 2023**

FY 2023 Contract Status

- Several FY 2023 HIV services initial contracts have been approved by Commissioner's Court for services that began on March 1, with the remaining contracts to be placed on the April 25th agenda. RWGA does not anticipate a gap in services.
- On April 5th, RWGA received its FY23 RW/A Full Notice of Award
 - FY 23 RW/A = \$24,342,151 (FY22 = \$23,198,771) (4.99% increase)
 - FY 23 MAI = \$2,382,116 (FY22 = \$2,427,918) (1.9% decrease)
 - Represents an increase of \$1,097,578 (4.28% overall increase)
- Spring Technical Assistance Training for subrecipients was held on March 27th. The ongoing issue of unspent funds will be a significant focus in FY23 and was highlighted in the training. RWGA will vigorously monitor contracts and will shift funds from underspending contracts quickly.
- While it has not been decided by HRSA, waivers for Unobligated Balances exceeding 5% of the EMA's annual Formula Award may no longer be possible in FY23. RWGA did request a waiver for FY22, which was approved by HRSA.

FY 2022 Contract Status

- FY 2022 closed on February 28th. RWGA is preparing for the receipt of final FY22 expenditure reports from sub-recipients. Final expenditure reports were due to RWGA on March 31st. Allocations within contract totals may continue to change before being finalized in late May.

EHE Update

- RWGA has received the EHE FY23 full-year award. The Ryan White Grant Administration staff are working to finalize its fiscal year budget and work plan for submission to HRSA for approval.

Quality Management & Improvement Updates

- Medical Advisory Subcommittee quarterly meeting was held on 3/2/2023 while the Clinical Quality Management Committee quarterly meeting was held on 3/7/2023
- Houston Part A & Part B coordination quarterly meetings to resume on April 12th

RWGA Vacancies

- RWGA is actively interviewing for three open positions to support grant activities-Financial Analyst, Project Coordinator-Clinical Quality Improvement, and Program Coordinator. Information on open Ryan White Grant Administration positions can be found on the Harris County employment website.

Glenn Urbach, Manager
HCPH/Ryan White Grant Administration Section
1111 Fannin, Houston, TX 77002
(713) 274-5790 (V) / glenn.urbach@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.

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Follow HCPH on Twitter [@hcphtx](#) and like us on [Facebook](#)

www.hcphtx.org

FY23 Allocations with Partial Increase Funding Implimented

		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
Remaining Funds to Allocate		\$397,685	\$0	\$0	\$0	\$0	\$397,685	
		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
1	Ambulatory/Outpatient Primary Care	\$11,465,788	\$2,068,054	\$0	\$0	\$0	\$13,533,842	\$500,000 added to all subcategories except Pilot Project
1.a	PC-Public Clinic	\$4,109,697					\$4,109,697	
1.b	PC-AA	\$1,114,019	\$1,045,669				\$2,159,688	
1.c	PC-Hisp - see 1.b above	\$952,840	\$1,022,386				\$1,975,226	
1.d	PC-White - see 1.b above	\$1,201,238					\$1,201,238	
1.e	PC-Rural	\$1,151,088					\$1,151,088	
1.f	PC-Women	\$2,197,531					\$2,197,531	
1.g	PC-Pedi	\$16,153					\$16,153	Must zero out for FY24 (no vendor)
1.h	Vision Care	\$523,222					\$523,222	
1.j	PC-Pay for Performance Pilot Project	\$200,000					\$200,000	
2	Medical Case Management	\$1,880,000	\$314,062	\$0	\$0	\$0	\$2,194,062	
2.a	CCM-Mental/Substance	\$531,025					\$531,025	\$150,000 overall increase redistributed among all subcategories. Done.
2.b	MCM-Public Clinic	\$301,129					\$301,129	
2.c	MCM-AA	\$183,663	\$157,031				\$340,694	
2.d	MCM-Hisp	\$183,665	\$157,031				\$340,696	
2.e	MCM-White	\$66,491					\$66,491	
2.f	MCM-Rural	\$297,496					\$297,496	
2.g	MCM-Women	\$81,841					\$81,841	
2.h	MCM-Pedi	\$97,859					\$97,859	Must zero out for FY24 (no vendor)
2.i	MCM-Veterans	\$86,964					\$86,964	
2.j	MCM-Youth	\$49,867					\$49,867	
3	Local Pharmacy Assistance Program	\$2,067,104	\$0	\$0	\$0	\$0	\$2,067,104	
3.a	LPAP-Public Clinic	\$367,104					\$367,104	FY23 Part A: Increase by \$56,744 to address ADAP issues. Done.
3.b	LPAP-Untargeted	\$1,700,000					\$1,700,000	
4	Oral Health	\$166,404	\$0	\$2,218,878	\$0		\$2,385,282	
4.a	General Oral Health			\$1,758,878				
4.b	Prosthodontics			\$460,000				
4.c	Rural Dental	\$166,404					\$166,404	
5	Health Insurance Co-Pays & Co-Ins	\$1,583,137	\$0	\$1,028,433	\$864,506	\$0	\$3,476,076	\$200,000 added.
6	Mental Health Services	\$0	\$0	\$0	\$300,000	\$0	\$300,000	
7	Early Intervention Services	\$0	\$0	\$0	\$0	\$0	\$0	FY23 SS: Move \$175,000 to Referral for Healthcare and Services (RHSS) since the service fits better within RHSS.

FY23 Allocations with Partial Increase Funding Implimented

		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
	Remaining Funds to Allocate	\$397,685	\$0	\$0	\$0	\$0	\$397,685	
8	Medical Nutritional Therapy	\$341,395	\$0	\$0	\$0	\$0	\$341,395	
9	Home & Community Based Health Services	\$0	\$0	\$113,315	\$0	\$0	\$113,315	
9.a	In-Home (skilled nursing & health aide)						\$0	
9.b	Facility-based (adult day care)			\$113,315			\$113,315	
10	Substance Abuse Treatment - Outpatient	\$45,677	\$0	\$0	\$0	\$0	\$45,677	
11	Hospice	\$0	\$0	\$0	\$259,832	\$0	\$259,832	
12	Referral for Health Care & Support Services	\$0	\$0	\$0	\$175,000		\$175,000	FY23 SS: Move \$175,000 from EIS to Referral to Healthcare & Support Services (RHSS) since service fits better within RHSS.
13	Non-Medical Case Management	\$1,267,002	\$0	\$0	\$350,000	\$0	\$1,617,002	FY23 Pt A: Per a request from Quality Improvement Committee, increase the average allocation per FTE in order to encourage higher case management salaries and address high turnover. Due to underspending in FY21, Priority & Alloc. Committee feels that level funding will be enough to allow all SLW FTE positions to be increased if agencies wish to make this change.
13.a	SLW-Youth	\$110,793					\$110,793	
13.b	SLW-Testing	\$100,000					\$100,000	
13.c	SLW-Public	\$370,000					\$370,000	
13.d	SLW-CBO, includes some Rural	\$686,209					\$686,209	
13.e	SLW-Substance Use	\$0			\$350,000		\$350,000	
14	Transportation	\$424,911	\$0	\$0	\$0	\$0	\$424,911	
14.a	Van Based - Urban	\$252,680					\$252,680	
14.b	Van Based - Rural	\$97,185		\$0			\$97,185	
14.c	Bus Passes & Gas Vouchers	\$75,046					\$75,046	
15	Emergency Financial Assistance	\$1,645,439	\$0	\$0	\$0	\$0	\$1,645,439	
15.a	EFA - Pharmacy Assistance	\$1,545,439					\$1,545,439	FY23 Part A: Increase by \$240,000 to address ADAP issues.
15.b	EFA - Other	\$100,000					\$100,000	FY23 Part A: Decreased by \$140,000 due to underspending in FY21.
16	Linguistic Services	\$0	\$0	\$0	\$68,000	\$0	\$68,000	
17	Outreach Services	\$420,000	\$0	\$0	\$0	\$0	\$420,000	
	Total Service Allocation	\$21,306,857	\$2,382,116	\$3,360,626	\$2,017,338	\$0	\$29,066,937	
NA	Quality Management	\$428,695					\$428,695	
NA	Administration - RWGA + RWPC Support	\$2,208,914					\$2,208,914	

FY23 Allocations with Partial Increase Funding Implimented

		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
Remaining Funds to Allocate		\$397,685	\$0	\$0	\$0	\$0	\$397,685	
NA	HCPH Indirect Cost	\$0					\$0	Indirect costs are now included in RWGA Admin Budget
Total Non-Service Allocation		\$2,637,609	\$0	\$0	\$0	\$0	\$2,637,609	
Total Grant Funds		\$23,944,466	\$2,382,116	\$3,360,626	\$2,017,338	\$0	\$31,704,546	

Remaining Funds to Allocate (exact same as the yellow row on top)	\$397,685	\$0	\$0	\$0	\$0	\$397,685
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Tips:

* Do not make changes to any cells that are underlined. These cells represent running totals. If you make a change to these cells, then the formulas throughout the sheet will become "broken" and the totals will be incorrect.

* It is useful to keep a running track of the changes made to any service allocation. For example, if you want to change an allocation from \$42,000 to \$40,000, don't just delete the cell contents and type in a new number. Instead, type in "=-42000-2000". This shows that you

Core medical \$17,549,505 82%

[For Staff Only]						
If needed, use this space to enter base amounts to be used for calculations						
	RW/A Amount Actual	MAI Amount Actual	Part B actual	State Service est.	State Rebate est.	
Total Grant Funds	\$24,342,151	\$2,382,116	\$3,360,626	\$2,017,338	\$0	\$32,102,231

Houston Ryan White Planning Council
Priority and Allocations Committee

**Proposed Ryan White Part A, MAI, Part B and State Services Funding
FY 2023 Allocations**

(Priority and Allocations Committee approved 06-06-22)

MOTION A: All Funding Streams – Level Funding Scenario

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

Approve the attached Ryan White Part A, Minority AIDS Initiative (MAI), Part B, and State Services (SS) Level Funding Scenario for FY 2023.

MOTION B: MAI Increase / Decrease Scenarios

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

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

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

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

MOTION C: Part A Increase / Decrease Scenarios

Decrease Funding Scenario for Ryan White Part A Funding.

All service categories except subcategories 1.g. Primary Care-Pediatric, 2.h. Medical Case Management-Pediatric, 2.i. Medical Case Management-Veterans, 2.j. Medical Case Management-Youth, 10. Substance Abuse Services-Outpatient, 13.a. Service Linkage-Youth, and 13.b. Service Linkage-Newly Diagnosed/Not in Care will be decreased by the same percent. This applies to the total amount of service dollars available.

Increase Funding Scenario for Ryan White Part A Funding.

Step 1: Allocate the first \$500,000 to Primary Ambulatory/Outpatient Medical Care (category 1) to be allocated proportionately to all Primary Care subcategories by the Administrative Agent.

Step 2: Allocate the next \$200,000 to Health Insurance Assistance Program (category 5).

Step 3: Any remaining funds following the application of Steps 1 and 2 will be allocated by the Ryan White Planning Council.

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

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

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

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

Step 1: Allocate the first \$200,000 to be divided evenly between Oral Health – General Oral Health (category 4.a.) and Oral Health – Prosthodontics (category 4.b.).

Step 2: Allocate the next \$200,000 to Health Insurance Assistance Program (category 5).

Step 3: Any remaining increase in funds following application of Steps 1 and 2 will be allocated by the Ryan White Planning Council after the notice of grant award is received.

Houston Ryan White Health Insurance Assistance Service Utilization Report



Period Reported:

09/01/2022-2/28/2023

Revised: 3/30/2023

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	337	\$35,835.22	170	0	\$0.00	0
Medical Deductible	147	\$164,576.91	130	0	\$0.00	0
Medical Premium	3716	\$1,267,800.70	838	0	\$0.00	0
Pharmacy Co-Payment	14955	\$1,028,232.03	1434	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	10	\$995.87	9	NA	NA	NA
Totals:	19165	\$2,495,448.99	2581	0	\$0.00	

Comments: This report represents services provided under all grants.

2022 - 2023 DSHS State Services Service Utilization Report
9/1/2022 thru 02/28/2023 Houston HSDA
2nd Quarter

Revised 4/3/2023

Funded Service	UDC		Gender				Race				Age Group							
	Goal	YTD	Male	Female	FTM	MTF	AA	White	Hisp	Other	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65+
Health Insurance Premiums	925	1,207	80.00%	18.80%	0.05%	1.15%	38.30%	29.50%	29.80%	2.40%	0.00%	0.00%	1.10%	11.90%	15.40%	23.10%	32.00%	16.50%
Hospice	35	11	81.90%	18.10%	0.00%	0.00%	27.20%	45.40%	18.40%	9.00%	0.00%	0.00%	0.00%	0.00%	9.20%	27.20%	3.60%	0.00%
Linguistic Services	50	45	49.80%	45.80%	0.00%	4.41%	51.10%	8.80%	4.60%	35.50%	0.00%	0.00%	2.20%	6.90%	26.60%	42.20%	13.30%	8.80%
Mental Health Services	192	121	84.20%	15.80%	0.00%	0.20%	42.90%	25.60%	30.50%	0.80%	0.00%	0.85%	1.65%	24.70%	19.80%	20.60%	27.50%	4.90%
Non-Medical Case Management	315	75	81.40%	16.00%	0.00%	2.60%	53.30%	17.40%	29.30%	0.00%	0.00%	0.00%	1.30%	13.30%	18.60%	34.60%	25.60%	6.60%
Unduplicated Clients Served By State Services Funds:	NA	1,459	75.45%	22.89%	0.01%	1.65%	42.58%	25.34%	22.54%	9.54%	0.00%	0.17%	4.25%	13.36%	19.92%	29.54%	24.40%	8.36%

Completed By: C.Aguries

The Houston Regional HIV/AIDS Resource Group, Inc.
FY 2223 DSHS State Services
Procurement Report
September 1, 2022 - August 31, 2023



Chart reflects spending through February 2023

Spending Target: 50%

Revised 4/6/2023

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendments per RWPC	Contractual Amount	Amendment	Contractual Amount	Date of Original Procurement	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$864,506	47%	\$0	\$864,506	\$0	\$864,506	9/1/2022	\$657,598	76%
6	Mental Health Services (2)	\$300,000	16%	\$0	\$300,000	\$0	\$300,000	9/1/2022	\$47,693	16%
11	Hospice (3)	\$259,832	14%	\$0	\$259,832	\$0	\$259,832	9/1/2022	\$175,560	68%
13	Non Medical Case Management (4)	\$350,000	19%	\$0	\$350,000	\$0	\$350,000	9/1/2022	\$67,793	19%
16	Linguistic Services (5)	\$68,000	4%	\$0	\$68,000	\$0	\$68,000	9/1/2022	\$27,588	41%
Total Houston HSDA		1,842,338	100%	\$0	\$1,842,338	\$0	\$1,842,338		976,231	53%

Note Currently working with an agency to contract EIS services

- (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) Has had lower then expected service demand
- (3) Service utilization is increasing. If it continues to increase we should look at reallocating funds
- (4) One months behind in reporting
- (5) Service utilization is slightly behind

The Houston Regional HIV/AIDS Resource Group, Inc.
FY 2122 Ryan White Part B
Procurement Report
April 1, 2022 - March 31, 2023



Reflects spending through February 2023

Spending Target: 92%

Revised 4/6/23

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 Service	\$1,658,878	48%	\$0	\$1,658,878	\$0	\$1,658,878	4/1/2022	\$1,425,950	86%
4	Oral Health Service -Prosthodontics	\$560,000	16%	\$0	\$560,000	\$0	\$560,000	4/1/2022	\$600,760	107%
5	Health Insurance Premiums and Cost Sharing (1)	\$1,107,702	32%	\$0	\$1,107,702	\$0	\$1,107,702	4/1/2022	\$1,046,609	94%
9	Home and Community Based Health Services (2)	\$113,315	3%	\$0	\$113,315	\$0	\$113,315	4/1/2022	\$58,960	52%
		\$0	0%	\$0	\$0					
Total Houston HSDA		3,439,895	100%	0	3,439,895	\$0	\$3,439,895		3,132,279	91%

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

- (1) HIP- Funded by Part A, B and State Services/. Provider spends grant funds by ending dates Part A -2/28; B-3/31;SS-8/31.
- (2) Service has ended and funds will be reallocated in HSDA 16

*Note TRG reallocated funds to avoid lapse in funds including reallocated funds from rural HSDAs.

		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
Remaining Funds to Allocate		\$397,685	\$0	\$0	\$0	\$0	\$397,685	
		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
1	Ambulatory/Outpatient Primary Care	\$11,465,788	\$2,068,054	\$0	\$0	\$0	\$13,533,842	\$500,000 added to all subcategories except Pilot Project
1.a	PC-Public Clinic	\$4,109,697					\$4,109,697	
1.b	PC-AA	\$1,114,019	\$1,045,669				\$2,159,688	
1.c	PC-Hisp - see 1.b above	\$952,840	\$1,022,386				\$1,975,226	
1.d	PC-White - see 1.b above	\$1,201,238					\$1,201,238	
1.e	PC-Rural	\$1,151,088					\$1,151,088	
1.f	PC-Women	\$2,197,531					\$2,197,531	
1.g	PC-Pedi	\$16,153					\$16,153	Must zero out for FY24 (no vendor)
1.h	Vision Care	\$523,222					\$523,222	
1.j	PC-Pay for Performance Pilot Project	\$200,000					\$200,000	
2	Medical Case Management	\$1,880,000	\$314,062	\$0	\$0	\$0	\$2,194,062	
2.a	CCM-Mental/Substance	\$531,025					\$531,025	\$150,000 overall increase redistributed among all subcategories. Done.
2.b	MCM-Public Clinic	\$301,129					\$301,129	
2.c	MCM-AA	\$183,663	\$157,031				\$340,694	
2.d	MCM-Hisp	\$183,665	\$157,031				\$340,696	
2.e	MCM-White	\$66,491					\$66,491	
2.f	MCM-Rural	\$297,496					\$297,496	
2.g	MCM-Women	\$81,841					\$81,841	
2.h	MCM-Pedi	\$97,859					\$97,859	Must zero out for FY24 (no vendor)
2.i	MCM-Veterans	\$86,964					\$86,964	
2.j	MCM-Youth	\$49,867					\$49,867	
3	Local Pharmacy Assistance Program	\$2,067,104	\$0	\$0	\$0	\$0	\$2,067,104	
3.a	LPAP-Public Clinic	\$367,104					\$367,104	FY23 Part A: Increase by \$56,744 to address ADAP issues. Done.
3.b	LPAP-Untargeted	\$1,700,000					\$1,700,000	
4	Oral Health	\$166,404	\$0	\$2,218,878	\$0		\$2,385,282	
4.a	General Oral Health			\$1,758,878				
4.b	Prosthodontics			\$460,000				
4.c	Rural Dental	\$166,404					\$166,404	
5	Health Insurance Co-Pays & Co-Ins	\$1,583,137	\$0	\$1,028,433	\$864,506	\$0	\$3,476,076	\$200,000 added.
6	Mental Health Services	\$0	\$0	\$0	\$300,000	\$0	\$300,000	
7	Early Intervention Services	\$0	\$0	\$0	\$0	\$0	\$0	FY23 SS: Move \$175,000 to Referral for Healthcare and Services (RHSS) since the service fits better within RHSS.

	Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
Remaining Funds to Allocate	\$397,685	\$0	\$0	\$0	\$0	\$397,685	
8 Medical Nutritional Therapy	\$341,395	\$0	\$0	\$0	\$0	\$341,395	
9 Home & Community Based Health Services	\$0	\$0	\$113,315	\$0	\$0	\$113,315	
9.a In-Home (skilled nursing & health aide)						\$0	
9.b Facility-based (adult day care)			\$113,315			\$113,315	
10 Substance Abuse Treatment - Outpatient	\$45,677	\$0	\$0	\$0	\$0	\$45,677	
11 Hospice	\$0	\$0	\$0	\$259,832	\$0	\$259,832	
12 Referral for Health Care & Support Services	\$0	\$0	\$0	\$175,000		\$175,000	FY23 SS: Move \$175,000 from EIS to Referral to Healthcare & Support Services (RHSS) since service fits better within RHSS.
13 Non-Medical Case Management	\$1,267,002	\$0	\$0	\$350,000	\$0	\$1,617,002	FY23 Pt A: Per a request from Quality Improvement Committee, increase the average allocation per FTE in order to encourage higher case management salaries and address high turnover. Due to underspending in FY21, Priority & Alloc. Committee feels that level funding will be enough to allow all SLW FTE positions to be increased if agencies wish to make this change.
13.a SLW-Youth	\$110,793					\$110,793	
13.b SLW-Testing	\$100,000					\$100,000	
13.c SLW-Public	\$370,000					\$370,000	
13.d SLW-CBO, includes some Rural	\$686,209					\$686,209	
13.e SLW-Substance Use	\$0			\$350,000		\$350,000	
14 Transportation	\$424,911	\$0	\$0	\$0	\$0	\$424,911	
14.a Van Based - Urban	\$252,680					\$252,680	
14.b Van Based - Rural	\$97,185		\$0			\$97,185	
14.c Bus Passes & Gas Vouchers	\$75,046					\$75,046	
15 Emergency Financial Assistance	\$1,645,439	\$0	\$0	\$0	\$0	\$1,645,439	
15.a EFA - Pharmacy Assistance	\$1,545,439					\$1,545,439	FY23 Part A: Increase by \$240,000 to address ADAP issues.
15.b EFA - Other	\$100,000					\$100,000	FY23 Part A: Decreased by \$140,000 due to underspending in FY21.
16 Linguistic Services	\$0	\$0	\$0	\$68,000	\$0	\$68,000	
17 Outreach Services	\$420,000	\$0	\$0	\$0	\$0	\$420,000	
Total Service Allocation	\$21,306,857	\$2,382,116	\$3,360,626	\$2,017,338	\$0	\$29,066,937	
NA Quality Management	\$428,695					\$428,695	
NA Administration - RWGA + RWPC Support	\$2,208,914					\$2,208,914	

FY23 - Increase Funding Scenario Implemented

		Part A	MAI	Part B	State Services	State Rebate	Total	FY 2023 Allocations & Justification
Remaining Funds to Allocate		\$397,685	\$0	\$0	\$0	\$0	\$397,685	
NA	HCPH Indirect Cost	\$0					\$0	Indirect costs are now included in RWGA Admin Budget
Total Non-Service Allocation		\$2,637,609	\$0	\$0	\$0	\$0	\$2,637,609	
Total Grant Funds		\$23,944,466	\$2,382,116	\$3,360,626	\$2,017,338	\$0	\$31,704,546	

Remaining Funds to Allocate (exact same as the yellow row on top)	\$397,685	\$0	\$0	\$0	\$0	\$397,685
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Tips:

* Do not make changes to any cells that are underlined. These cells represent running totals. If you make a change to these cells, then the formulas throughout the sheet will become "broken" and the totals will be incorrect.

* It is useful to keep a running track of the changes made to any service allocation. For example, if you want to change an allocation from \$42,000 to \$40,000, don't just delete the cell contents and type in a new number. Instead, type in "=42000-2000". This shows that you subtracted

Core medical \$17,549,505 82%

[For Staff Only]						
If needed, use this space to enter base amounts to be used for calculations						
	RW/A Amount Actual	MAI Amount Actual	Part B actual	State Service est.	State Rebate est.	
Total Grant Funds	\$24,342,151	\$2,382,116	\$3,360,626	\$2,017,338	\$0	\$32,102,231

FY 2022 Ryan White Part A and MAI Service Utilization Report

RW PART A SUR- 4th Quarter (3/1-2/28)																		
Priority	Service Category	Goal	Unduplicated Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-54	55-64	65 plus
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6,467	7,946	76%	22%	2%	44%	12%	2%	41%	0%	0%	5%	28%	28%	11%	26%	2%
1.a	Primary Care - Public Clinic (a)	2,350	2,607	72%	26%	1%	42%	9%	2%	47%	0%	0%	3%	17%	27%	14%	36%	4%
1.b	Primary Care - CBO Targeted to AA (a)	1,060	2,267	71%	27%	3%	98%	0%	1%	0%	0%	0%	7%	37%	27%	10%	18%	2%
1.c	Primary Care - CBO Targeted to Hispanic (a)	960	1,908	82%	14%	4%	0%	0%	0%	100%	0%	0%	6%	32%	30%	11%	19%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	690	759	87%	11%	2%	0%	85%	15%	0%	0%	0%	2%	29%	26%	8%	32%	3%
1.e	Primary Care - CBO Targeted to Rural (a)	400	614	71%	28%	1%	43%	21%	2%	34%	0%	0%	2%	30%	28%	11%	26%	2%
1.f	Primary Care - Women at Public Clinic (a)	1,000	697	0%	99%	1%	52%	5%	1%	42%	0%	0%	2%	10%	27%	18%	38%	5%
1.g	Primary Care - Pediatric (a)	7	0															
1.h	Vision	1,600	2,251	74%	24%	2%	46%	13%	2%	38%	0%	0%	4%	23%	24%	12%	31%	6%
2	Medical Case Management (f)	3,075	4,567															
2.a	Clinical Case Management	600	753	71%	27%	2%	53%	13%	1%	33%	0%	0%	3%	23%	25%	12%	31%	6%
2.b	Med CM - Targeted to Public Clinic (a)	280	480	91%	7%	2%	50%	13%	1%	35%	0%	0%	1%	23%	28%	10%	32%	5%
2.c	Med CM - Targeted to AA (a)	550	1,404	67%	30%	3%	99%	0%	1%	0%	0%	0%	4%	30%	26%	10%	26%	4%
2.d	Med CM - Targeted to H/L(a)	550	678	79%	15%	6%	0%	0%	0%	100%	0%	0%	6%	29%	30%	11%	22%	2%
2.e	Med CM - Targeted to White and/or MSM (a)	260	449	86%	12%	2%	0%	89%	11%	0%	0%	0%	2%	20%	25%	10%	35%	8%
2.f	Med CM - Targeted to Rural (a)	150	462	66%	33%	1%	44%	30%	3%	24%	0%	0%	3%	24%	26%	10%	32%	6%
2.g	Med CM - Targeted to Women at Public Clinic (a)	240	199	0%	99%	1%	65%	10%	3%	23%	0%	0%	4%	22%	32%	12%	25%	5%
2.h	Med CM - Targeted to Pedi (a)	125	0															
2.i	Med CM - Targeted to Veterans	200	135	97%	3%	0%	70%	20%	1%	10%	0%	0%	0%	0%	3%	4%	44%	49%
2.j	Med CM - Targeted to Youth	120	7	86%	14%	0%	29%	29%	0%	43%	0%	14%	86%	0%	0%	0%	0%	0%
3	Local Drug Reimbursement Program (a)	2,845	5,505	75%	21%	3%	46%	12%	2%	40%	0%	0%	4%	28%	28%	12%	26%	2%
4	Oral Health	200	285	68%	31%	1%	39%	28%	1%	31%	0%	0%	3%	20%	24%	15%	31%	7%
4.a	Oral Health - Untargeted (d)	NA	NA															
4.b	Oral Health - Rural Target	200	285	68%	31%	1%	39%	28%	1%	31%	0%	0%	3%	20%	24%	15%	31%	7%
5	Mental Health Services (d)	NA	NA															
6	Health Insurance	1,700	1,698	79%	19%	2%	43%	25%	3%	29%	0%	0%	1%	15%	19%	10%	41%	15%
7	Home and Community Based Services (d)	NA	NA															
8	Substance Abuse Treatment - Outpatient	40	9	100%	0%	0%	11%	44%	11%	33%	0%	11%	0%	44%	22%	0%	22%	0%
9	Early Medical Intervention Services (d)	NA	NA															
10	Medical Nutritional Therapy/Nutritional Supplements	650	452	75%	23%	2%	43%	19%	3%	35%	0%	0%	1%	8%	17%	8%	50%	15%
11	Hospice Services (d)	NA	NA															
12	Outreach	700	843	77%	20%	3%	58%	14%	2%	26%	0%	0%	5%	32%	28%	9%	22%	5%
13	Non-Medical Case Management	7,045	7,619															
13.a	Service Linkage Targeted to Youth	320	165	77%	23%	0%	51%	6%	2%	41%	0%	13%	87%	0%	0%	0%	0%	0%
13.b	Service Linkage at Testing Sites	260	83	73%	24%	2%	54%	6%	4%	36%	0%	0%	0%	46%	33%	10%	12%	0%
13.c	Service Linkage at Public Clinic Primary Care Program (a)	3,700	3,085	68%	30%	1%	50%	9%	1%	39%	0%	0%	0%	18%	25%	13%	38%	6%
13.d	Service Linkage at CBO Primary Care Programs (a)	2,765	4,286	75%	23%	3%	53%	12%	2%	33%	0%	0%	4%	29%	24%	10%	27%	5%
14	Transportation	2,850	2,032															
14.a	Transportation Services - Urban	170	659	69%	30%	2%	59%	7%	3%	31%	0%	0%	5%	26%	24%	10%	30%	6%
14.b	Transportation Services - Rural	130	161	66%	32%	1%	29%	29%	1%	41%	0%	0%	4%	19%	19%	18%	30%	9%
14.c	Transportation vouchersing	2,550	1,212															
15	Linguistic Services (d)	NA	NA															
16	Emergency Financial Assistance (e)	NA	1,786	76%	22%	2%	46%	9%	2%	43%	0%	0%	4%	26%	28%	12%	27%	3%
17	Referral for Health Care - Non Core Service (d)	NA	NA															
Net unduplicated clients served - all categories*		12,941	13,745	75%	23%	2%	49%	14%	2%	35%	0%	0%	4%	25%	25%	11%	29%	6%
Living AIDS cases + estimated Living HIV non-AIDS (from FY19 App) (b)		NA	30,198	75%	25%		48%	17%	5%	30%	0%	4%		21%	23%	25%	20%	7%

FY 2022 Ryan White Part A and MAI Service Utilization Report

RW MAI Service Utilization Report - 4th Quarter (03/01 - 02/28)																		
Priority	Service Category MAI unduplicated served includes clients also served under Part A	Goal	Unduplicated MAI Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
	Outpatient/Ambulatory Primary Care (excluding Vision)																	
1.b	Primary Care - MAI CBO Targeted to AA (g)	1,060	1,819	71%	25%	3%	99%	0%	1%	0%	0%	0%	6%	35%	27%	10%	19%	2%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	960	1,627	82%	14%	4%	0%	0%	0%	100%	0%	0%	5%	31%	29%	13%	20%	1%
	2 Medical Case Management (f)																	
2.c	Med CM - Targeted to AA (a)	1,060	885	80%	17%	4%	47%	13%	2%	38%	0%	0%	7%	37%	27%	9%	17%	1%
2.d	Med CM - Targeted to H/L(a)	960	662	64%	33%	3%	63%	12%	1%	24%	0%	1%	6%	24%	28%	10%	24%	6%
RW Part A New Client Service Utilization Report - 4th Quarter (03/01-02/28)																		
Report reflects the number & demographics of clients served during the report period who did not receive services during previous 12 months (3/1/22-2/28/23)																		
Priority	Service Category	Goal	Unduplicated New Clients Served YTD	Male	Female	Trans gender	AA (non-Hispanic)	White (non-Hispanic)	Other (non-Hispanic)	Hispanic	0-12	13-19	20-24	25-34	35-44	45-49	50-64	65 plus
1	Primary Medical Care	2,100	1,755	81%	17%	2%	47%	13%	2%	38%	0%	1%	9%	37%	26%	9%	2%	17%
2	LPAP	1,200	791	80%	17%	4%	47%	13%	2%	38%	0%	0%	7%	37%	27%	9%	1%	17%
3.a	Clinical Case Management	400	67	64%	33%	3%	63%	12%	1%	24%	0%	1%	6%	24%	28%	10%	6%	24%
3.b-3.h	Medical Case Management	1,600	1003	77%	21%	2%	49%	15%	2%	34%	0%	0%	7%	33%	26%	8%	3%	21%
3.i	Medical Case Management - Targeted to Veterans	60	20	95%	5%	0%	55%	20%	5%	20%	0%	0%	0%	0%	5%	15%	35%	45%
4	Oral Health	40	34	76%	24%	0%	44%	26%	6%	24%	0%	0%	9%	32%	18%	9%	6%	26%
12.a. 12.c. 12.d.	Non-Medical Case Management (Service Linkage)	3,700	1,753	75%	23%	2%	52%	13%	2%	33%	0%	1%	7%	30%	25%	9%	23%	4%
12.b	Service Linkage at Testing Sites	260	74	76%	22%	3%	57%	7%	3%	34%	0%	4%	23%	30%	27%	9%	7%	0%
<i>Footnotes:</i>																		
(a)	Bundled Category																	
(b)	Age groups 13-19 and 20-24 combined together; Age groups 55-64 and 65+ combined together.																	
(d)	Funded by Part B and/or State Services																	
(e)	Total MCM served does not include Clinical Case Management																	
(f)	BO Pcare targeted to AA (1.b) and HL (1.c) goals represent combined Part A and MAI clients served																	

DATE: 04/26/2023
 TO: RWPC Priorities & Allocations Committee
 FR: Ryan White Grant Administration
 RE: FY 2022 Part A/MAI Procurement Report

Please note the following with regard to the ***FY 2022 Part A/MAI Procurement Report dated 4/24/2023:***

FY 2022-as of 4/24/23	Total Award	Expense	%	Unspent
Part A Services ¹	\$21,706,224	\$21,088,583	97.2%	\$617,641
MAI Services ²	\$2,704,223	\$2,686,441	99.4%	\$17,782
Administration ³	\$1,440,965	\$1,030,811	71.6%	\$410,154
RWPC Support	\$524,908	\$525,193	100.1%	-\$285
CQM	\$412,940	\$339,969	82.4%	\$72,971
Total*	\$26,789,260	\$25,670,997	95.8%	\$1,118,263

*final numbers are certified when Harris County submits its Federal Financial Report (FFR) due July 30, 2023

- The Houston EMA will be required submit a *retrospective Core Services Waiver* for FY22 because final Core Services expenditures were less than 75% of total service expenditures (this is the first time Houston has been under 75% Core services expenditures)
 - Core Services expenditures: 72.6% (primarily underspending in Primary Care)
 - Support Services expenditures: 27.4% (primarily due to higher than originally allocated expenditures in EFA-Pharmacy and Non-MCM)
- 97.4% of all procured RW/A & MAI service dollars were expended (\$24,410,447 allocated; \$23,775,024 expended)
- Of the total of \$1,120,282 in unspent funds in Outpatient Primary Care, \$437,926 (39%) is attributed to Primary Care Targeted to Women at Public Clinic (service priority 1.f)
- \$888,285 in FY21 carryover funds were allocated to Health Insurance Assistance (\$138,285) and EFA-Pharmacy (\$750,000) and these funds were fully expended
- Most of the Final Quarter Adjustments were reallocated to LPAP, Non-Medical Case Management (SLW), and EFA-Pharmacy

¹ Part A Services includes carryover funds of \$888,285

² MAI Services includes carryover funds of \$276,305

³ PHS did not take indirect costs of \$169,915 in FY22, but will charge indirect costs for FY 2023, which will be included in the Admin budget

- Vision (service category 1.h): only \$404,505 (81%) was expended in FY22 out of the \$500,000 allocated
 - One Vision care provider did not accept their full award in FY22. For FY23, the other Vision care provider will accept those additional funds
- The Primary Care Pay for Performance (P4P) pilot project awarded only \$29,070 to agencies in FY22 despite an allocation of \$200,000
 - Only two out of the five outpatient primary care providers billed for P4P services. This is historically an underspent category. RWGA is waiting to hear back from agencies to gauge interest in continuing the pilot project
 - The RWPC could consider reallocating this \$200,000 to other service categories. If needed, RWGA can usually identify unspent funds in the final quarter of the grant year to cover potential P4P costs

Glenn Urbach, Manager
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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.

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