Houston Area HIV Services Ryan White Planning Council Office of Support

1310 Prairie Street, Suite 800, Houston, Texas 77002 832 927-7926 telephone; http://rwpchouston.org

MEMORANDUM

To: Members, Houston Ryan White Planning Council

Copy: Glenn Urbach, Ryan White Grant Administration Mauricia Chatman, Ryan White Grant Administration Francisco Ruiz, 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

Jason Black, Ryan White Grant Administration

Ann Robison, the Montrose Center

Marlene McNeese, Houston Health Department

Charles Henley, Consultant

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

Date: Tuesday, August 1, 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 Bering Church in the Montrose area 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, August 10, 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: Bering Church, 1440 Harold St, Houston, Texas 77006. Use parking lot behind the church and ring the bell to be admitted into the downstairs hallway.

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, August 10, 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: Bering Church, 1440 Harold St, Houston, Texas 77006

I. Call to Order

A. Welcome and Moment of Reflection

B. Adoption of the Agenda

C. Approval of the Minutes

D. Houston's Syphilis Epidemic

Crystal R. Starr, Chair

Ryan White Planning Council

Rosario Valentin

Viral Hepatitis Coordinator,

Houston Health Department

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

Item: 2022 Integrated HIV Prevention and Care Services Plan
Recommended Action: FYI: The Comprehensive HIV Planning
Committee is looking at rewording some of the goals in the
Integrated Plan so that they are SMART goals. If anyone enjoys
this process, feel free to join the Comprehensive HIV Planning
Committee meeting at 2 pm after the Council meeting has adjourned,
on Thursday, August 10th. All are welcome and all will be allowed
to participate. Check the Council website at http://rwpchouston.org

to participate. Check the Council website at http://rwpchouston.org for the August Comprehensive HIV Planning Committee meeting

J:\Council\2023 Agendas & Minutes\Agenda 08-10-23.docx

Allen Murray and Steven Vargas, Co-Chairs packet. Or, call Rod or Diane to request a packet. They can be reached at: 832 927-7926.

B. Affected Community Committee

FYI: The Committee met in July to review the different Council sponsored projects that need consumer input. And, members signed up to help distribute Project LEAP and Proyecto VIDA information at Ryan White funded agencies.

Rodney Mills and Diana Morgan, Co-Chairs

C. Quality Improvement Committee

Item: Mental Health Service Category

Recommended Action: <u>Motion:</u> Have two Mental Health Subcategories: Mental Health – General and Mental Health – Special Populations.

Tana Pradia and Pete Rodriguez, Co-Chairs

Item: HIV and Aging

Recommended Action: <u>Motion:</u> Support the Baylor College of Medicine/AETC proposal to increase provider awareness of the needs and concerns of people living with HIV who are 50 years of age or older. See public comment for a copy of the initiative.

D. Priority and Allocations Committee

Item: Reports from the Administrative Agent – Part A/MAI* *Recommended Action:* FYI: See the following reports: FY22 Part A & MAI Procurement, dated 07/24/23

FY23 Part A & MAI Procurement, dated 07/23/23

FY23 Part A & MAI Service Utilization, dated 07/23/23

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 23/24 Part B Procurement, dated 06/27/23
- FY 22/23 DSHS SS** Procurement, dated 06/27/23
- FY23/24 Part B Procurement, April 1, 2023 March 31, 2024, dated 06/27/23
- FY22/23 DSHS SS Procurement, Sept. 1, 2022 Aug. 31, 2023, dated 06/27/23
- FY22/23 DSHS SS Service Utilization, 09/01/22 05/31/23, dated 06/30/23

Item: FY 2022 MAI* Carryover Funds

Recommended Action: <u>Motion:</u> Approve MAI* Request #1 in the amount of \$19,124. See attached request for details.

Item: FY 2022 Ryan White Part A Carryover Funds

Recommended Action: <u>Motion:</u> Approve the attached chart which reflects the re-allocation of FY 2022 Ryan White Part A carryover funds in the amount of \$1,278,521.

Item: Quarterly Committee Report

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

^{*} MAI = Minority AIDS Initiative funding

^{**} State Services funding

E. Operations Committee

Ronnie Galley and Cecilia Ligons, Co-Chairs

Item: Payroll/Debit Card vs. Paper Checks

Recommended Action: Motion: Start the pilot project to compare the results of using payroll/debit cards vs. paper checks for petty cash

reimbursements to Ryan White volunteers.

Item: Request for Food Forms

Recommended Action: FYI: Please submit this form to Rod asap.

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 (During Virtual Meetings, Reports Will Be Limited to Written Reports Only)

A. AIDS Educational Training Centers (AETC)

B. Ryan White Part C Urban and Part D

C. HOPWA

Megan Rowe

D. Community Prevention Group (CPG)

Kathryn Fergus

E. Update from Task Forces:

Sexually Transmitted Infections (STI)

African AmericanLatinoSha'Terra JohnsonSteven Vargas

Youth

• MSM

• Hepatitis C Steven Vargas

• Project PATHH (Protecting our Angels Through Healing Hearts) Skeet Boyle

formerly Urban AIDS Ministry

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 Jason Black

L. Texans Living with HIV Network

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, July 13, 2023

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

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

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

During the opening remarks, Starr said July is always an important month because we review and, hopefully approve, the FY 2024 Ryan White service priorities and allocations. The Priority and Allocations Committee has spent months reviewing expenditure reports, trends and other data to make thoughtful recommendations. Then, they shared the information on local access television and via social media. Now it is time for the Council to finalize their plan for next year. In a few minutes, Peta is going to walk members through the process the Committee used to make their recommendations. Starr then called for a Moment of Reflection.

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

Approval of the Minutes: <u>Motion #2</u>: it was moved and seconded (Mica, Boyle) to approve the June 8, 2023 minutes. **Motion carried.** Abstentions: Aloysius, Brown, Mills, Perez, Pradia, Rodriguez, Escamilla, Shaikh, Vargas.

Training on the 2023 Priority and Allocations Process: Peta-Gay Ledbetter, Co-Chair, Priority and Allocations Committee presented the attached training.

Training on SMART vs. SMARTIE Goals: Steven Vargas, Co-Chair, Comprehensive HIV Planning Committee presented the attached training.

Public Comment and Announcements: See attached public comments.

Reports from Committees

Comprehensive HIV Planning Committee: Allen Murray, Co-Chair, reported on the following: 2022-26 Integrated HIV Prevention and Care Plan: The committee is looking at rewording some of the goals in the Integrated Plan so that they are SMART goals. If anyone enjoys this process, feel free to join the Comprehensive HIV Planning Committee meeting at 2 pm after the Council meeting has adjourned. All are welcome and all will be allowed to participate. Check the Council website at rwpchouston.org for a meeting packet.

2023 HIV Care Needs Assessment: <u>Motion #3</u>: allow the Comprehensive HIV Planning Committee to have final approval of the 2023 HIV Care Needs Assessment survey form. *Motion Carried*.

Affected Community Committees: No meeting due to the Juneteenth holiday.

Quality Improvement Committee: No meeting due to a very busy June.

Priority and Allocations Committee: Bobby Cruz, Co-Chair, reported on the following: Reports from the Administrative Agent – Part A/MAI*: See the following reports:

- FY23 Part A & MAI Memo and FY22 Procurement, dated 06/12/23
- FY23 Part A & MAI Service Utilization, dated 06/21/23

Reports from the Administrative Agent – Part B/SS**: See the attached reports from the Part B/State Services Administrative Agent:

- FY 22/23 Part B Procurement, dated 06/01/23
- FY 22/23 DSHS SS** Procurement, dated 06/01/23
- FY 22/23 Health Insurance Service Utilization, dated 05/24/23

FY 2024 Ryan White Service Priorities: <u>Motion 4:</u> Approve the attached FY 2024 Service Priorities for Ryan White Part A/MAI*, Part B and State Services funding. **Motion Carried.**

FY 2024 Level Funding Scenario – All Funding Streams: <u>Motion 5</u>: Approve the attached FY 2024 Level Funding Scenario for Ryan White Parts A/MAI*, Part B and State Services funding. See attached chart for details. Motion Carried. Abstention: Shaikh.

Item: FY 2024 MAI* Increase/Decrease Funding Scenarios: <u>Motion 6:</u> Approve the attached FY 2024 Increase and Decrease Funding Scenarios for Ryan White MAI* funds. Motion Carried.

FY 2024 Part A Increase/Decrease Funding Scenarios: <u>Motion 7</u>: Approve the attached FY 2024 Increase and Decrease Funding Scenarios for Ryan White Part A funds. Motion Carried. Abstention: Sliepka.

FY 2024 Part B & SS** Increase/Decrease Funding Scenarios: <u>Motion 8</u>: Approve the attached FY 2024 Increase and Decrease Funding Scenarios for Ryan White Part B and State Services funding. **Motion Carried.** Abstention: Shaikh.

Operations Committee: No report.

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.

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

Task Force Reports: Starr said that the Council agreed 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: Boyle said that the HIV and Aging Coalition has changed its name to Positive Living Houston. They've been doing some reorganizing and have a townhall meeting on July 20th.

Bread of Life has HOPWA funds and 6 housing case workers. They are finalizing a program for those over the age of 60, a phlebotomist and social workers, and Lucille's restaurant has been cooking lunch and dinner for their clients for about 8 weeks. It is not HIV specific. Beck said there are LEAP and VIDA flyers available, please take some to share. Starr invited all to volunteer to staff a LEAP/VIDA table to recruit applicants. Please see Robert or Kenia to sign up.

Adjournment: *Motion:* it was moved and seconded (Sliepka, Vargas) to adjourn the meeting at 1:47 p.m. **Motion Carried.**

Respectfully submitted,	
	Date
Victoria Williams, Director	
Draft Certified by	
Council Chair:	Date
Final Approval by	
Council Chair:	Date

Council Voting Records for July 13, 2023

C = Chaired the meeting ja = Just arrived lm = Left the meeting lr = Left the room VP = Via phone		Moti Age Car	on # enda ried			Min	on #2 tutes ried		202	2023 NA survey		Motion #1 Agenda Carried			Motion #2 Minutes Carried				Motion #3 2023 NA survey Carried						
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Kevin Aloysius		X						X		X			Carol Suazo		X				X				X		
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Oscar Perez		X						X		X			Diana Morgan												
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MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	MEMBERS		YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN		
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Josh Mica, Secretary		X				X			Robert Sliepka				X		X				
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Background



Goal: To better understand who is affected by syphilis and where is it spreading

- By syphilis stage
- By sex-at-birth (counts and rates)
- By race-ethnicity group (rates)
- By age group (rates)
- Spatial hotspots (relative density)

Sample: syphilis cases reported to the Texas Department of State Health Services (DSHS), assigned to the HHD jurisdiction

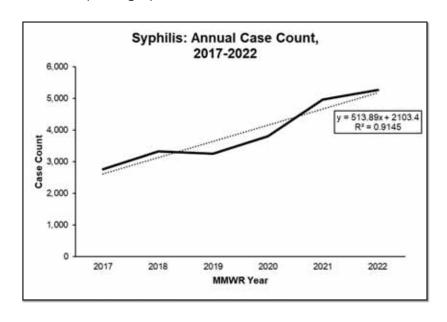
Data source: TB, HIV, STD Integrated System (THISIS) morbidity report

Time frame: 2017-2022 (2022 data is subject to change)

Annual Case Count



The annual syphilis case count (all stages) for the Houston-area increased from 2017 to 2022.

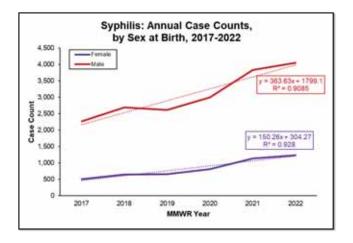


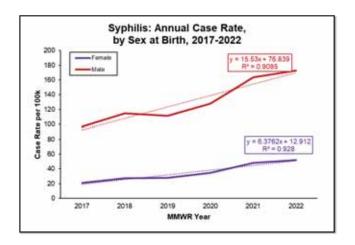
Annual Case Count/Rate by Sex-at-birth



Both male and female annual counts and case rates have **increased**.

Males consistently made up a majority of our syphilis cases and the case rate in males increased at a more rapid rate when compared to that of females.





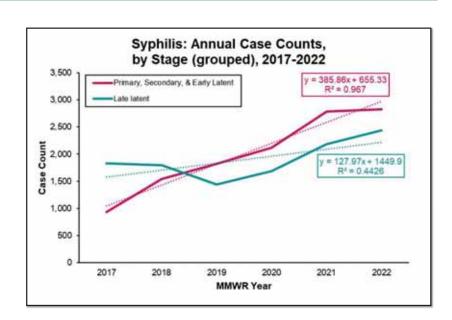
Annual Case Count by Stage



The annual syphilis case **counts for early syphilis** (primary, secondary, early latent) and **late latent syphilis** have **increased**.

Early syphilis cases increased more rapidly than late latent syphilis cases (by about 3x the rate).

There was a dip in late latent cases from 2018 to 2019, with counts continuing to increase from 2019 onwards.

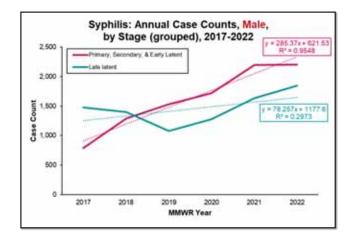


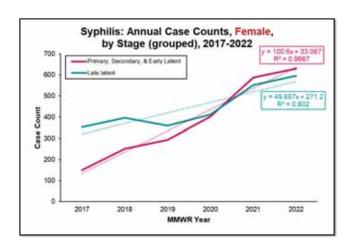
Annual Case Count by Stage and Sex-at-birth



Annual syphilis counts increased for both males and females across stages.

The early syphilis and late latent syphilis trend lines have slightly different shapes/patterns between male and female cases.



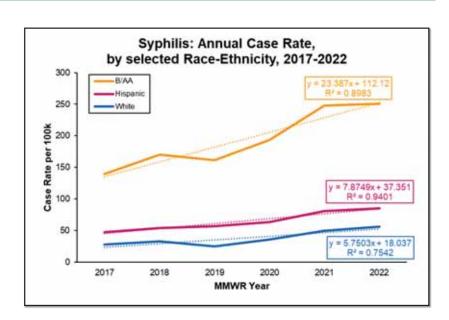


Annual Case Rate by Race-Ethnicity Group



The annual syphilis rates have increased across race-ethnicity groups.

The non-Hispanic Black group consistently had the highest rate and its rate increased faster when compared to other race-ethnicity groups (3x faster than Hispanic cases, and 4x faster than NH White cases).

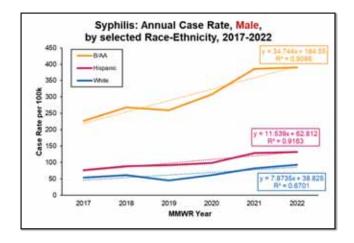


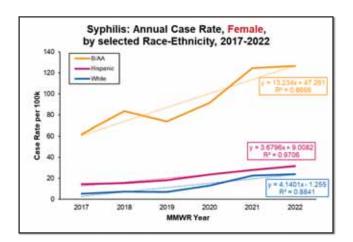
Annual Case Rate by Race-Ethnicity and Sex-at-birth



For both male and female cases, the annual syphilis rates have increased for each race-ethnicity group.

For both males and females, the NH Black group has both the highest rate and the highest rate increase.



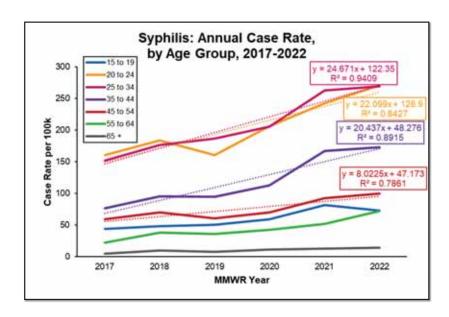


Annual Case Rate by Age Group



The annual syphilis **rates** have **increased** for **most age groups**.

The **20 to 24** and **25 to 34** age groups consistently had **the highest rates** and their **rates increased faster** when compared to other age groups.



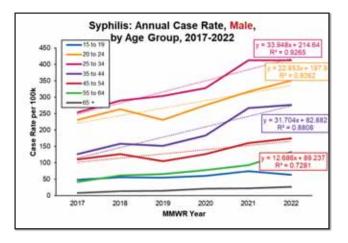
Annual Case Rate by Age Group and Sex-at-birth

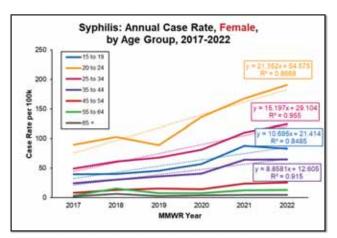


For both male and female cases, the annual syphilis rates have increased for most age groups.

For males, the age group with the highest rate was 25 to 34, followed by 20 to 24 and 35 to 44 years.

For females, the age group with the highest rate was 20 to 24, followed by 25 to 34 and 15 to 19 years.



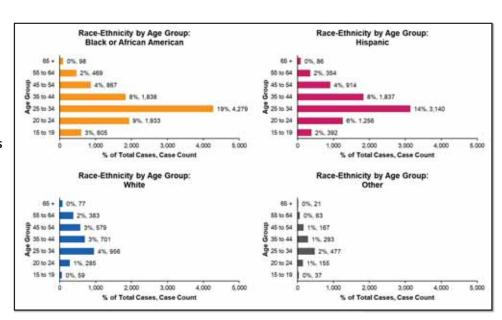


Age group breakdown by Race-Ethnicity Group (2017-2022)



Across race-ethnicity groups, the **highest proportion of cases** are in the age group **25 to 34 years**.

The NH Black, ages 25 to 34 make up a majority of our syphilis cases (19%), followed by Hispanic, ages 25 to 34 group (14%).

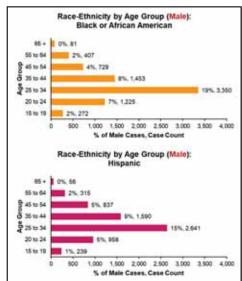


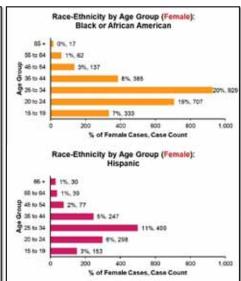
Age group breakdown by Race-Ethnicity Group & Sex-at-birth: NH Black & Hispanic



For males, the highest proportion of syphilis cases are NH Black ages 25 to 34, followed by Hispanic ages 25 to 34.

For females, the highest proportion of syphilis cases are NH Black ages 25 to 34, followed by NH Black ages 20 to 24.





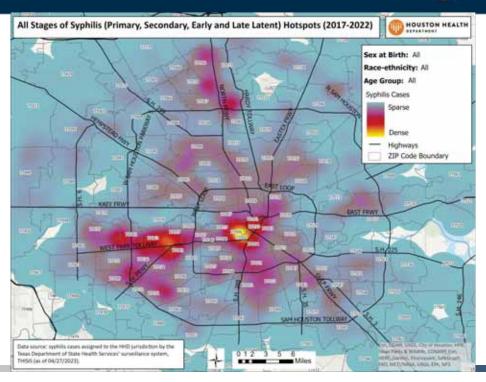
Hotspot Analysis for Syphilis



- The maps on the next few slides were produced using ArcGIS's heat map feature.
- They show the relative density of points (case addresses) with a color scale ranging from cool colors (sparse density) to hot colors (high density).
- This spatially allows us to see where our cases exist at a different level than a ZIP code map, while still maintaining privacy/confidentiality.

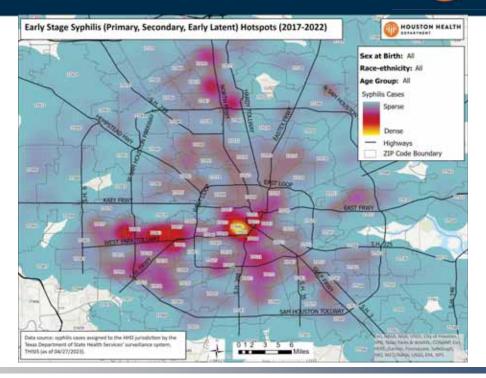
Hotspot Map: All Stages





Hotspot Map: Early Stages





Summary Points



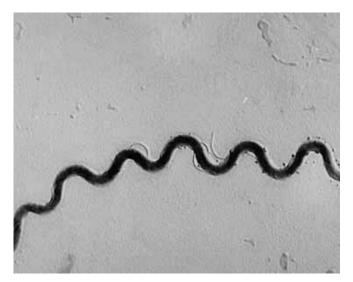
- Syphilis in the HHD jurisdiction has been on the rise since at least 2017. Increases are seen across clinical stage, sex, race-ethnicity, and most age groups.
- A majority of our cases are males, who also the highest case rate.
 - However, syphilis *is increasing* in females and there are potentially different behaviors in trends when considering clinical stages/other demographics.
- We see the highest rates and the greatest increase in rates in:
 - NH Blacks, overall and in both males and females separately.
 - Age groups covering 20 to 34y, overall. Rates in males slightly skew to older age groups (35 to 44), while female rates skew slightly younger (15 to 19).
- A majority of syphilis cases were NH Black ages 25 to 34 (19%), followed by Hispanic ages 25 to 34 (14%) overall.



What is syphilis?



- Syphilis is systemic infection caused by a bacteria, *Treponema pallidum*.
- *T. pallidum* is a spirochete bacterium transmitted primarily through sexual activity or vertical transmission during pregnancy.
- Syphilis has often been called "the great imitator", so many of the signs and symptoms may be difficult to differentiate from those of other diseases.



Primary Syphilis Symptoms



Chancre

• Following the inoculation of *T. pallidum* at the entry site, organisms proliferate, sensitize lymphocytes, and activate macrophages, causing the formation of a primary lesion or "chancre" at the site of inoculation.



Penile chancre



Oral chancre

Secondary Syphilis



- Secondary sx reflect hematogenous dissemination of *T. pallidum*
- Occurs in more than 75% of persons with secondary syphilis and is usually nonpruritic.
- The rash characteristically involves the chest, back, palms, and soles
- Generally, appear 4 to 10 weeks after the onset of the primary chancre



Maculo-papular Rash on Palms and Soles









Secondary symptoms: Mucuos patches & Condylomata Lata





Mucous Patches: The development of mucous patches occurs in 6 to 30% of patients and manifest as flat patches located in the oral cavity, pharynx, larynx, or genital region.

Condylomata Lata:

Approximately 10 to 20% of persons with secondary syphilis will have condylomata lata lesions. Appear as moist, wart-like papules in warm areas (most commonly gluteal folds, perineum, and perianal)

These lesions are highly contagious.



Secondary Symptoms:





Alopecia: About 5% of patients develop patchy alopecia.

Most often in the occipital or bitemporal scalp

Some patients will have loss of the lateral region of the eyebrows.

Other secondary symptoms

- •Lymphadenopathy: Approximately in 50 to 86% of persons, may be diffuse.
- •Systemic Symptoms: malaise, fever, and other nonspecific constitutional symptoms.
- •Visceral Organ Involvement: In some cases, liver, kidney, lungs, gastrointestinal tract, and spleen.
 - •Most common: nephritis and hepatitis (high alkaline phosphatase level).

Latent Syphilis: Early Latent & Late Latent

Early Latent Syphilis:
Infection of Less than 1 Year in Duration

- Documented seroconversion within the prior 12 months
- Fourfold or greater increase in titer (longer than 2 weeks)
- Unequivocal symptoms of primary or secondary syphilis within the prior 12 months
- Contact in the prior 12 months with a sex partner in early stages
- Documented reactive nontreponemal and treponemal tests, and the only possible exposure occurred during the prior 12 months

Late Latent Syphilis (Syphilis of unknown duration)

- Period of time when there are no signs or symptoms
- If left untreated, syphilis can persist in the body for years without signs or symptoms

Congenital Syphilis



40% will be **stillborn or die** in the hospital.

Transmission can occur during any stage of syphilis and during any trimester of pregnancy.

Can cause:

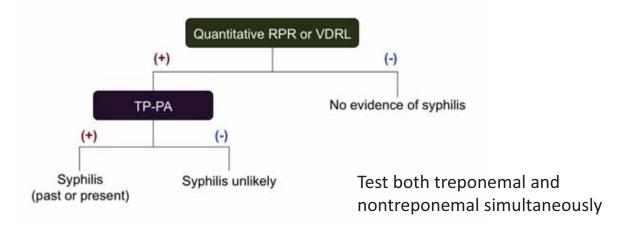
- Prematurity
- Birth defects
- Hutchinson's teeth
- Osteochondritis
- Developmental delays











DO NOT USE FTA-ABS (false positives are common)

Syphilis Treatment



Appropriate Treatment Options for Women During Pregnancy

	Benzathine	Penicillin G
Stage of Syphilis	2.4 million units IM in a single dose	7.2 million units IM in 3 doses at 1 week intervals
Primary Syphilis	Х	
Secondary Syphilis	X	
Early Latent Syphilis	X	
Late Latent Syphilis		Х

 $NOTE: IM = intramuscular; \ Please review the CDC's 2015\ Treatment\ Guidelines\ for\ patients\ who\ have\ an\ allergy\ to\ penicillin: https://www.cdc.gov/std/tg2015/default.htm$

Other adequate alternatives for non-pregnant patients:

- Doxycycline 100 mg BID x 14 days (primary, secondary, early latent)
- Doxycycline 100 mg BID x 28 days (late latent)

Houston Health Department Bureau of HIV/STI and Viral Hepatitis Prevention

Syphilis Outbreak Response Plan



Overview



The Syphilis Outbreak Response Plan outlines the coordinated intervention efforts between the HIV/STI Program, other internal collaborative areas within HHD, regional/state health authorities, community-based organizations, healthcare providers, and the media to eliminate syphilis in Houston/Harris County. The plan highlights the specific intervention activities that will contribute to the reduction of syphilis morbidity during an outbreak episode. Increased syphilis rates will be contained through intensified efforts that involve the following six (6) components:

- Enhanced Surveillance
- Disease Investigation and Public Health Follow-up
- Outreach Services and Education
- Community Involvement and Mobilization
- Enhanced Clinical Operations
- Public Information and Awareness

The HHD stakeholders that have assisted in the development of this response plan include the HHD Executive Leadership, Pharmacy, 340B Administration and Compliance, Clinic Operations, Nursing Services and IQUE.

Syphilis Outbreak Response Coordinating Operations



Enhanced Surveillance, Evaluation & Planning

- Monitoring and assessing reporting practices to ensure timely and accurate reporting of syphilis cases.
- Analyzing data to determine incidence, demographics, and behavior risk factors.
- Determining the threshold levels of early syphilis that will trigger escalation or de-escalation of the response (red, yellow, green).
- Conducting weekly analysis of early syphilis cases, especially primary and secondary cases.

Enhanced Clinical Operations

- Enhance capacity for the diagnosis and treatment of cases as well as preventively treat contacts within HHD clinics and other external clinical facilities
- Identify external clinical partners who will provide syphilis testing, treatment, and acceptance of HHD referrals
- Increase treatment of women of childbearing capacity, regardless of pregnancy status.
- Increase treatment of early cases and sex partners (SPT) in the field.
- Ensure appropriate diagnosis, staging and treatment of all syphilis cases and contacts
- Waive out of pocket fees for persons seeking STD services in HHD clinics
- Develop, revise, and implement relevant HHD clinical protocols to facilitate access for members of vulnerable populations

Disease Investigation & Public Health Follow-Up

- DIS identification, location, and notification of persons with indication of syphilis infection, their sex and substance using partners, and referral clinical to evaluation, treatment, and care.
- Identify and treat undiagnosed infections and interrupt the chain of transmission at a level sufficient to reduce morbidity.
- Monitor and assess reporting practices to ensure timely and accurate reporting of syphilis cases.

Outreach Services and Education

- HHD teams responsible for mobile disease testing, treatment, and vaccination efforts will collaborate to expand screening activities in impacted areas alongside community partners.
- Community organizations will be elicited for assistance with the response effort by conducting outreach recruitment, testing and behavioral intervention activities.
- Mobile screening activities will also take place at neighborhood clinics, hotels, and other high impact venues in identified geographic areas.
- Maintain a consistent outreach schedule throughout the response period.
- Increase education/information for key populations by deploying street canvas teams for outreach in hot spot apartment complexes, and small businesses

Public Information Awareness

- Inform and educate the public of the outbreak, their disease prevention and treatment options, as well as the HHD syphilis response activities.
- Enhance information on all media outlets and social media platforms to affected populations and communities.
- Distribute and disseminate the My Prenatal Promise campaign collateral materials via PSAs, radio/TV.
- Expand the My Prenatal Promise marketing campaign to persons who are not pregnant.
- Develop an Educational Materials and Resource Repository on the HHD webpage related to syphilis

Community Mobilization

- Engage community partner organizations, civic and neighborhood groups, and HIV/STI/Hepatitis community planning group leaders to increase awareness of syphilis, and the disease response efforts within their communities.
- Develop and maintain HHD Speakers Bureau to respond to requests for presentations
- Provide STI/HIV Education through other existing HHD programs; MBK, WIC and Vital Statistics offices

Additional Recommendations?



Quality Improvement Committee Report



July 17, 2023

Public Comment

As we all know – an important and pressing area of need is in improving care and quality of life of those aging with HIV. Effective medications with decrease pill burden and improved side effects as propelled HIV into what we can consider a chronic controllable health condition, however that is not without its challenges. As people live longer, then special considerations need to be considered, outlined and developed to optimize health outcomes and quality of life related to aging and co-morbidities that come along with aging. This cannot start when individuals are 65 years of age but rather in HIV – much earlier – at 50 and maybe even earlier to address prevention of co-morbidities and to address social determinants of health (SDOH) and social isolation as one ages.

We at Baylor College of Medicine and the Houston AIDS Education and Training Center are here to support initiatives to improve the care and quality of life for individuals at risk for and living with HIV. Although education is one of the resources at the Houston AETC and BCM our current workplan for the coming year only includes a few presentations that could be related to HIV and aging. We feel a pilot project is needed to to develop a comprehensive and robust program to expand the capacity and expertise in improving quality of life and address the needs of those aging with HIV. Through this pilot project outlined we will also leverage the infrastructure and partnerships and resources of both Baylor College of Medicine and the Houston AETC/SCAETC. In addition, we will work with partners like the organizations in New York and San Francisco who have been working in this area and have insight into lessons learned and solutions to share.

We hope that the council will support the pilot project and together we can lead the way in developing an initiative that will expand capacity, expand expertise, and truly have impact in our community by improving the quality of life and health outcomes of individuals aging with HIV.

Sincerely,

Shital M. Patel, MD
On behalf of BCM and Houston AETC/SCAETC



BCM Houston AETC Proposal for HIV and Aging

The South Central AIDS Education and Training Center (AETC), mission is to provide HIV evidence driven quality education, training, and capacity building technical assistance to organizations and health professionals throughout South Central United States (Arkansas, Louisiana, New Mexico, Oklahoma, and Texas). Our training topics are provided along the continuum of care starting with prevention and testing best practices, therapeutics and other treatments, comorbidities, and service linkage and retention. The BCM Houston AETC (a regional partner of the South Central AETC) initiatives also includes capacity building and implementation science. We are leaders in our regional in partnerships with local organizations and Ryan White funded agencies. We customize programs based on discussion and agreed upon needs and objectives with our partners. Programs can include ECHO program development, a learning curriculum for a lecture series or workshops, clinical consultations, and clinical preceptorships.

Significance:

In 2020, per the Centers for Disease Control and Prevention, more than 52% of people with HIV in the United States were 50 years of age or older. As of the end of 2019 in Houston, Harris County, approximately 45-50% of people with HIV were ≥50 years old, and nearly 30% were ≥55 years old [Houston/Harris County EPI 2021]. That same year, almost 19% of new HIV diagnoses in occurred in people ≥45 years old. In light of these local demographics, we propose to help develop a training initiative to educate and building capacity to address the needs of PWH aging with HIV as well as long term survivors aging with HIV. This proposal will help care providers expand quality services and improve health outcomes for older people with HIV as well as play a role in components of Ending the HIV Epidemic.

The goals of this proposal are to:

- Increase providers' awareness of the needs and concerns of patients with HIV who are 50 years of age or older.
- Inform providers about an aging-related approach to older patients with HIV.
- Highlight good practices to help providers provide optimal care for this population.
- Provide resources about aging with HIV for healthcare providers and their patients.
- Suggest steps to guide medical settings in implementing geriatric care into HIV clinical practice

Specifications:

Pilot: Develop of training curriculum for case managers and/or prescribing providers to address the goals above. Start with a small group of case managers and/or prescribing providers

- a. Initial in-person meeting to assess baseline understanding and knowledge related to HIV and aging
- b. In person half day workshop with experts within HIV care, geriatrics, and organizations that provide care and resources for individuals that are aging.
- c. Create a (virtual or in person) learning series that occurs once a month for 6 months after the workshop to reinforce concepts and knowledge, inform about new considerations, and update on best practices or evidence driven care.

Proposal Date: 08Jul2023 HIV and Aging



Budget:

Item		
Personnel	\$50,000	Funding includes development and implementation effort of project coordinator clinical/associate clinical director and experts for workshop and learning program over 9-12 months
Supplies	\$500	Supplies needed for initial in person meeting and workshop
Meeting costs	\$ 2000	Costs related to in person meetings

Proposal Date: 08Jul2023 HIV and Aging

Public Comment

Re: HIV and Aging Medical Case Management June 15, 2023

The following comment was submitted to the Office of Support via email:

I lend support to the Houston Harris County EMA Ryan White Planning Council efforts to create a Medical Case Management category for aging adults 50 years and older. The New York State Department of Health AIDS Institute document that was reviewed by Dr. Eugenia Siegler is a great start. However, Houston should adapt these guidelines for their Ryan White HIV Care System.

The amount of \$400,000 is appreciated but falls short to hire 5 FTEs qualified Medical Social Workers to address these issues jointly with Physicians, Nurse Practitioners, or Physician Assistants including Psychiatrist. These Medical Case Managers must play a central role in the integration of services for these older 50+ older adults. Interdisciplinary teams of care must jointly meet with clients to educate and build the health literacy of the client. The focus must be on polypharmacy, multi-morbidities, and cultural risk factors.

Medical Case Managers trained in cultural factors and cultural humility for aging minorities affected by HIV. Long-term stigma and cultural stress associated with living with HIV for more than 10 years and being older than 50 years old. SBIRT and recreational substance use screening with older adults. The issue of Medical Mistrust is most important with an aging population, rapport and trust with the client should be established. Motivational interviewing intervention skills are utilized to find mutual solutions to meet healthier outcomes.

Bone density is important but we must be more vigilant on muscle wasting with aging older adults over the age of 50 with more than 10 years since their HIV diagnosis. Weight management and mobility issues are further items to explore.

Ryan White as a player of last resort has limitations, therefore eligibility and transition of care to Medicare and/or Medicaid should be made seamless. Ryan White should be allowed to fill the gap in services where absent or medication purchases and adherence whenever needed. Medical Case Managers should be trained and be experts to provide the best options to clients.

Providing adequate Monitoring and Evaluation of positive health outcomes for individuals 50 years and older with more than 10 years since their HIV diagnosis. Measurable outcomes addressing Diabetes, Cholesterol management, Hypertension, and maintaining HIV viral suppression.

The term Geriatric in the literature refers to older adults over the age of 65. The Geriatric term does not really take into account the earlier onset of aging symptoms that affect HIV-positive individuals over the age of 50 and with more than 10 years since their HIV diagnosis.

Evelio Salinas Escamilla

MEMO

To: Members, Ryan White Priority and Allocations Committee

From: D. Kelly, A. Murray & Bruce Turner, Members, Ryan White HIV & Aging Workgroup

Date: Monday, June 12, 2023

Re: FY 2022 Carryover and FY 2024 Funds

According to the attached *Guidance: Addressing the Needs of Older Adults in AIDS Care*, from the New York State Department of Health AIDS Institute (updated on May 5, 2023):

"At the end of 2020, according to the Centers for Disease Control and Prevention, more than 52% of people with HIV in the United States were ≥50 years old [CDC 2023]... As the population with HIV grows older, the application of the principles of geriatrics can enhance the quality of care.

Because published evidence to support clinical recommendations is not currently available, (the attached) guidance on addressing the needs of older patients in HIV care was developed.... to present good practices to help clinicians recognize and address the needs of older patients with HIV. The goals of this guidance are several, including.... suggesting steps to guide medical settings in implementing geriatric care into HIV clinical practice."

It is recommended by the three individuals listed above, that the members of the HIV & Aging Workgroup, along with members of the Quality Improvement and Priority and Allocations Committees, set resources aside that will enable the following activities to take place starting in FY 2023, using FY 2022 carryover funds, and continuing into FY 2024:

- 1. Establish a partnership with AETC to provide training on the needs of older adults in HIV care for private physicians, as well as physicians and physician assistants at Houston EMA/HSDA Ryan white funded clinics.
- 2. Use Ryan White or State Services funding to pay for bone density tests and screenings for frailty for all RW clients who are ≥50 years old.
- 3. Use Ryan White or State Services funding to allow agencies to provide part time employment to individuals who are ≥50 years old so that they can educate Ryan White consumers on the importance of the above mentioned test and screening.
- 4. Develop a partnership with Meals on Wheels to better assist clients with nutritional needs and also lessen social isolation of older adults in HIV care.
- 5. Develop partnerships with local agencies who have volunteer companionship programs that would address issues of isolation and loneliness among older adults in HIV care.

Thank you for your thoughtful consideration. Feel free to contact us if you have questions or need additional information.

Priority and Allocations Committee Report

Ryan White Allocation Increases as of 07-27-23: Ryan White Part A Funding

A - Part A Funds Available for Reallocation: \$ 1,278,521

Control No. / Priority No.	Yes, No or Maybe	Service Category	Amount Requested	Recommended Reallocations	Justification
RYAN WHI	TE PAR	T A FUNDS			
Control 1 Priorities 1.b-1.d, 2.c- 2.e, 3.b, 13.d, 15.a, 17	Y	Community-based Primary Medical Care for AA, H & W; Medical Case Management for the same populations, Emergency Financial Assistance – Pharmacy; LPAP, Outreach and Service Linkage Workers	\$ 518,700		Priority #1 and spent 100% of FY22 allocation. 24% (of remaining \$1,248,521)
Control 2 Priority 5	Y	Health Insurance Assistance	\$ 800,000	474,438	This service saves RW money, private insurance provides in-patient care, clients having difficulty making co-pays creates a barrier to care and PLWH switching plans to access single regiment medication is causing more stress on this system. 38% (of remaining \$1,248,521)
Control 3 Priority 2.a	Y	Clinical Case Management	\$ 113,750	62,426	In FY22, expended 134% of original allocation. Eligible for additional funds during the FY23 mid-year sweep of unspent funds. 5% (of remaining \$1,248,521)
Control 4 Priorities 1.b-1.d, 2.c- 2.e, 3.b, 13.d, 15.a, 17	Y	Community-based Primary Medical Care for AA, H & W; Medical Case Management for the same populations, Emergency Financial Assistance – Pharmacy; LPAP, Outreach and Service Linkage Workers	\$ 690,115	412,012	High need for EFA, which makes up \$300,000 of this request, and the rising demand for same-day appointments for new patients, #1 service priority. 33% (of remaining \$1,248,521)
Control 5 Priorities 1.e 2.f 3.b 13.d 15.a	N	Community-based Primary Medical Care targeted to Rural; Medical Case Management, Emergency Financial Assistance – Pharmacy; LPAP, and Service Linkage Workers	\$ 150,000	0	Eligible for funds during the FY23 mid-year sweep of unspent funds.
Control 6 Priority 4.b	Y	Oral Health targeted to Rural (North)	\$ 30,000	30,000	Historically, Oral Health has a need for increased funds; difficult to get appointments, spent 100% of FY22 allocation and already spent 33% of FY23 allocation.
		TOTALS	\$2,302,565	\$1,278,521	Funds REMAINING for Reallocation: \$ 0

OVER FOR MAI FUNDING CHART

MAI - Funds Available for Reallocation: \$ 19,124

RYAN WHITE MAI FUNDS

Control No. / Priority No.	Yes, No or Maybe	Service Category	Amount Requested	Recommended Reallocations	Justification
Control 1 Priorities 1.b, 2.c		Community-based Primary Medical Care for African American and Hispanic; Medical Case Management for the same populations	\$ 19,124	\$ 19,124	Service priorities #1 and #2. To meet the increasing demand for same- day appointments for new patients, most of whom are coming from communities targeted in the request.

FY 2023 Ryan White Part A and MAI Procurement Report

Priority	Service Category	Original Allocation RWPC Approved Level Funding Scenario	Award Reconcilation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	, ,	Procure- ment Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
	Outpatient/Ambulatory Primary Care	10,965,788	460,625	0	0	0	0	11,426,413	46.94%	11,426,413	0		1,873,232	16%	25%
	Primary Care - Public Clinic (a)	3,927,300	182,397					4,109,697	16.88%	4,109,697	0	3/1/2023	\$706,921	17%	25%
	Primary Care - CBO Targeted to AA (a) (e) (f)	1,064,576	49,443					1,114,019	4.58%	1,114,019	0	3/1/2023	\$307,047	28%	25%
1.c	Primary Care - CBO Targeted to Hispanic (a) (e)	910,551	42,289					952,840	3.91%	952,840	0	3/1/2023	\$280,194	29%	25%
	Primary Care - CBO Targeted to White/MSM (a) (e)	1,147,924	53,314					1,201,238	4.93%	1,201,238	0	3/1/2023	\$135,464	11%	25%
	Primary Care - CBO Targeted to Rural (a) (e)	1,100,000	51,088					1,151,088	4.73%	1,151,088	0	3/1/2023	\$146,625	13%	25%
1.f	Primary Care - Women at Public Clinic (a)	2,100,000	97,531					2,197,531	9.03%	2,197,531	0	3/1/2023	\$223,206	10%	25%
1.g	Primary Care - Pediatric (a.1)	15,437	-15,437					0	0.00%	0	0	3/1/2023	\$0	0%	0%
1.h	Vision	500,000	0					500,000	2.05%	500,000	0	3/1/2023	\$73,775	15%	25%
1.x	Primary Care Health Outcome Pilot	200,000	0					200,000	0.82%	200,000	0	3/1/2023	\$0	0%	25%
2	Medical Case Management	1,880,000	-97,859	0	0	0	0	1,782,141	7.32%	1,782,141	0		390.962	22%	25%
	Clinical Case Management	531,025	0	_				531,025	2.18%	531,025	0	3/1/2023	\$183,560	35%	25%
	Med CM - Public Clinic (a)	301,129	0					301,129	1.24%	301,129	0			18%	25%
	Med CM - Targeted to AA (a) (e)	183,663	0					183,663	0.75%	183,663	0		\$49,603	27%	25%
	Med CM - Targeted to H/L (a) (e)	183,665	0					183,665	0.75%	183,665	0		\$15,782	9%	25%
	Med CM - Targeted to W/MSM (a) (e)	66.491	0					66,491	0.27%	66.491	0		\$23,347	35%	25%
	Med CM - Targeted to Rural (a)	297,496	0					297,496	1.22%	297,496	0		\$20,473	7%	25%
	Med CM - Women at Public Clinic (a)	81,841	0					81,841	0.34%	81,841	0	3/1/2023	\$31,967	39%	25%
	Med CM - Targeted to Pedi (a.1)	97,859	-97,859					01,011	0.00%	01,011	0		\$0	0%	0%
	Med CM - Targeted to Veterans	86,964	-97,009					86,964	0.36%	86,964	0	3/1/2023	\$1,509	2%	25%
	Med CM - Targeted to Veterans Med CM - Targeted to Youth	49,867	0					49,867	0.20%	49,867	0		\$10,355	21%	25%
	Local Pharmacy Assistance Program	2,067,104	0	0	0	0	0		8.49%	2,067,104	0	0, 1, 2020	\$365,461	18%	25%
	Local Pharmacy Assistance Program-Public Clinic (a) (e)	367,104	0	-			0	367,104	1.51%	367,104	0	3/1/2023	\$51,382	14%	25%
	Local Pharmacy Assistance Program-Untargeted (a) (e)	1,700,000	0					1,700,000	6.98%	1,700,000	0		\$314,079	18%	25%
	Oral Health	166,404	0	0	0	^	0		0.68%	166,404	0		\$514,079 55,050	33%	25% 25%
	Oral Health - Targeted to Rural	166,404	0	U	U	U	U	166,404	0.68%	166,404	0		\$55,050	33%	25% 25%
		,	223,222		0	0	0		6.60%	,	0		\$55,050 \$456,857	28%	25% 25%
	Health Insurance (c)	1,383,137			U	U	U			1,606,359		0, 1, -0-0			
	Medical Nutritional Therapy (supplements)	341,395	0			_		341,395	1.40%	341,395	0			33%	25%
	Substance Abuse Services - Outpatient (c)	45,677	0	0				,	0.19%	45,677	0	0, 1, 2020	\$5,731	13%	25%
	Non-Medical Case Management	1,267,002	0	0	0	0	0	-,,	5.20%	1,267,002	0	0, 1, 0 0 0	\$342,174	27%	25%
	Service Linkage targeted to Youth	110,793	0					110,793	0.46%	110,793	0	3/1/2023	\$22,546	20%	25%
	Service Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000	0					100,000	0.41%	100,000	0	3/1/2023	\$24,829	25%	25%
	Service Linkage at Public Clinic (a)	370,000	0					370,000	1.52%	370,000	0	0, ., _ 0 _ 0	\$87,657	24%	25%
	Service Linkage embedded in CBO Pcare (a) (e)	686,209	0					686,209	2.82%	686,209	0		\$207,142	30%	25%
14	Medical Transportation	424,911	0	0	0	0	0	424,911	1.75%	424,911	0		66,610	16%	25%
	Medical Transportation services targeted to Urban	252,680	0					252,680	1.04%	252,680	0	3/1/2023	\$47,150	19%	25%
	Medical Transportation services targeted to Rural	97,185	0					97,185	0.40%	97,185	0	3/1/2023	\$19,460	20%	25%
	Transportation vouchering (bus passes & gas cards)	75,046	0					75,046	0.31%	75,046	0	3/1/2023	\$0	0%	25%
	Emergency Financial Assistance	1,653,247	485,889	0	0	0	0	2,139,136	8.79%	2,139,136	0		397,676	19%	25%
15.a	EFA - Pharmacy Assistance	1,553,247	485,889					2,039,136	8.38%	2,039,136	0	3/1/2023	\$374,818	18%	25%
	EFA - Other	100,000	0					100,000	0.41%	100,000	0	3/1/2023	\$22,859	23%	25%
17	Outreach	420,000	0					420,000	1.73%	420,000	0	3/1/2023	\$47,682	11%	25%
FY23_RW_DIR	Total Service Dollars	20,614,665	1,071,877	0	0	0	0	21,686,542	89.09%	21,686,542	0		4,114,422	19%	25%
		-,,-30	,,			1		, ,		, ,			, -,		
						1		1	Unallocated	Unobligated					25%
	Part A Grant Award:	24,342,151	Carryover:	n			Total Part A:	24.342 151		0					25%
	Tarta Grant Award.	£ 7 ,5 7 £,131	Jan yoven.	0			Total Fait A.	27,072,131		<u></u>					20 /0
		Original Allocation	Award Reconcilation	July Adjusments (carryover)	August 10% Rule Adjustments	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent	Total Expended on Services	Percent	Award Category	Award Amount	Amount Spent	Balance
	Core (must not be less than 75% of total service dollars)	16,849,505	585,988	0	0	0	0	17,435,493	80.40%	3,260,280	79.24%	Formula			(

FY 2023 Ryan White Part A and MAI Procurement Report

Priority	Service Category Origin Allocat RWPC Api Level Fut Scena. Non-Core (may not exceed 25% of total service dollars) Total Service Dollars (does not include Admin and QM) 20,61	ion roved ding io 5,160	Award Reconcilation 485,889 1,071,877	July Adjustments (carryover)	August 10% Rule Adjustments (f) 0		·	Total Allocation 4,251,049 21,686,542	Percent of Grant Award 19.60%	(.,		Original Date Procured Supplemen Carry Over	Expended YTD	Percent YTD	Percent Expected YTD
	Total Admin (must be ≤ 10% of total Part A + MAI) 2,20	8.914	18.000	0	0	0	0	2,226,914	8.33%			Totals	0	0	0
	,	8,695	10,000	0	0		· · ·	428,695	1.60%						-
		,,,,,,								<u> </u>					
					MAI Procureme	ent Report				l					
Priority	Service Category Origin Allocat RWPC Appl Level Fur Scena	ion roved ding	Award Reconcilation	July Adjustments (carryover)	August 10% Rule Adjustments (f)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procure- ment Balance	Date of Procure- ment	Expended YTD	Percent YTD	Percent Expected YTD
1	Outpatient/Ambulatory Primary Care 2,10	7,819	-39,764	0	0	0	0	2,068,055	86.82%	2,068,055	0		473,635	23%	8%
		5,775	-20,106		0			1,045,669	43.90%	1,045,669	0	3/1/2023	\$225,795	22%	8%
1.c (MAI)	Primary Care - CBO Targeted to Hispanic 1,04	2,044	-19,658		0			1,022,386	42.92%	1,022,386	0	3/1/2023	\$247,840	24%	8%
	<u> </u>	0,099	-6,038	0	0	0	0	314,061	13.18%	314,061	0		\$51,122	16%	8%
		0,050	-3,019					157,031	6.59%	157,031	0	3/1/2023	\$34,668	22%	8%
	3	0,049	-3,019					157,030	6.59%	157,030	0	3/1/2023	\$16,454	10%	8%
	,	7,918	-45,802	0	0	<u> </u>		2,382,116	100.00%	2,382,116	0		524,757	22%	8%
	Grant Administration	0	0	0	0			0	0.00%	0	0		0	0%	0%
	Quality Management	0	0	0	U			0	0.00%	0	0		0	0%	0%
	Total MAI Non-service Funds	0	0	0	0	-	· ·	0	0.00%	0	0		0	0%	0%
	Total MAI Funds 2,42	7,918	-45,802	0	0	0	0	2,382,116	100.00%	2,382,116	0		524,757	22%	8%
	MAI Grant Award 2,38	2,116	Carry Over:	0			Total MAI:	2,382,116							8%
	Combined Part A and MAI Orginial Allocation Total 25,68	0,192	•						Unallocated	Unobligated					
									0	0		MAI Award	2,382,116		
Footnote	98:						Total Part A & MAI	26,724,267					, ,		-
All	When reviewing bundled categories expenditures must be evaluated both by individual service categories	ory and b	by combined catego	ries. One category	may exceed 100%			gory offsets this	overage.						
(a)	Single local service definition is multiple HRSA service categories. (1) does not include LPAP. Expe														
	Funded under Part B and/or SS														
(e)	10% rule reallocations														

FY 2023 Ryan White Part A and MAI Service Utilization Report

				RW PA	ART A SU	JR-1st C	Quarter (3/°	1-6/30)										
Priority	Service Category	Goal	Unduplicated	Male	Female		AA	White	Other	Hispanic	0-12	13-19	20-24	25-34	35-44	45-54	55-64	65 plus
			Clients Served YTD			gender	(non- Hispanic)	(non-Hispanic)	(non- Hispanic)									
1	Outpatient/Ambulatory Primary Care (excluding Vision)	8,643	4,421	75%	22%	2%	41%	12%	2%	45%	0%	0%	4%	26%	27%	12%	28%	3%
1.a	Primary Care - Public Clinic (a)	2,959	1,797	73%	25%	1%	40%	9%	2%		0%	0%	2%	17%	26%	15%	36%	4%
1.b	Primary Care - CBO Targeted to AA (a)	2,417	1,031	70%	26%	3%	98%	0%	1%	0%	0%	0%	5%	35%	28%	9%	20%	2%
1.c	Primary Care - CBO Targeted to Hispanic (a)	1,916	908	82%	14%	4%	0%	0%	0%	100%	0%	0%	5%	32%	30%	11%	20%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	774	439	85%	14%	1%	5%	67%	13%	15%	0%	0%	5%	30%	25%	8%	28%	3%
1.e	Primary Care - CBO Targeted to Rural (a)	683	282	72%	28%	0%	30%	26%	2%	41%	0%	0%	4%	26%	25%	11%	30%	4%
1.f	Primary Care - Women at Public Clinic (a)	793	459	0%	99%	1%	46%	5%	1%	48%	0%	0%	2%	10%	26%	19%	39%	5%
1.g	Primary Care - Pediatric (a)	5	0															
1.h	Vision	2,815	669	76%	22%	1%	38%	15%	2%	45%	0%	0%	3%	18%	24%	10%	40%	5%
2	Medical Case Management (f)	5,429	1,550															
2.a	Clinical Case Management	936	307	67%	30%	3%	54%	17%	2%		0%	0%	2%	20%	22%	12%	36%	8%
2.b	Med CM - Targeted to Public Clinic (a)	569	310	93%	5%	2%	53%	10%	2%		0%	0%	1%	25%	24%	12%	34%	5%
2.c	Med CM - Targeted to AA (a)	1,625	343	74%	23%	3%	99%	0%	1%		0%	0%	6%	25%	29%	8%	25%	6%
2.d	Med CM - Targeted to H/L(a)	813	188	80%	17%	3%	0%	1%	0%		0%	1%	4%	34%	26%	10%	22%	4%
2.e	Med CM - Targeted to White and/or MSM (a)	504	138	90%	8%	2%	0%	93%	7%		0%	0%	1%	20%	23%	7%	36%	12%
2.f	Med CM - Targeted to Rural (a)	548	105	62%	38%	0%	49%	32%	2%		0%	0%	3%	17%	16%	8%	46%	10%
2.g	Med CM - Targeted to Women at Public Clinic (a)	246	125	0%	100%	0%	70%	6%	2%	23%	0%	0%	2%	18%	34%	12%	27%	6%
2.h	Med CM - Targeted to Pedi (a)	0	0	0.40/	20/	201	7.40/	100/	20/	20/	20/	201	20/	201	00/	00/	450/	500/
2.i	Med CM - Targeted to Veterans	172	31	94%	6%	0%	74%	19%	0%		0%	0%	0%	0%	0%	3%	45%	52%
2.j	Med CM - Targeted to Youth	15	3	0%	0%	0%	0%	0%	0%		0%	0%	0%	0%	0%	0%	0%	0%
3	Local Drug Reimbursement Program (a)	5,775	3,142	76%	20%	4%	40%	13%	3%		0%	0%	3%	23%	28%	12%	30%	3%
4	Oral Health	356	192	67%	32%	1%	36%	28%	1%	35%	0%	0%	3%	15%	26%	17%	30%	9%
4.a 4.b	Oral Health - Untargeted (d) Oral Health - Rural Target	NA 356	NA 192	67%	32%	1%	36%	28%	1%	35%	0%	0%	3%	15%	26%	17%	30%	9%
4.b 5	3	330	192 NA	07%	32%	1%	36%	28%	1%	35%	0%	0%	3%	15%	20%	17%	30%	9%
6	Mental Health Services (d) Health Insurance	1,918	1,126	79%	20%	2%	39%	28%	3%	30%	0%	0%	1%	12%	16%	9%	44%	18%
7	Home and Community Based Services (d)	NA	1,126 NA	1970	20%	270	39%	20 %	3%	30%	0%	U 76	170	1270	1070	970	44 70	10 70
8	Substance Abuse Treatment - Outpatient	17	1NA 7	100%	0%	0%	0%	57%	14%	29%	0%	0%	0%	43%	14%	29%	14%	0%
9	Early Medical Intervention Services (d)	NA	NA	100 /6	0 /6	0 /6	0 /6	57 /0	14 /0	29 /6	0 /0	U /0	0 /6	43 /0	14 /0	25/0	14 /0	0 /6
10	Medical Nutritional Therapy/Nutritional Supplements	546	299	77%	21%	2%	45%	16%	4%	35%	0%	0%	1%	7%	13%	8%	52%	19%
11	Hospice Services (d)	NA NA	NA	11 /0	21/0	2 /0	4370	10 /0	470	3370	0 /0	0 70	1 /0	1 /0	13 /0	0 /0	JZ /0	13 /0
12	Outreach	1,042	245	71%	26%	3%	62%	14%	2%	21%	0%	0%	6%	31%	25%	11%	23%	4%
13	Non-Medical Case Management	8,657	3.316	1170	2070	0,0	0270	1-170	270	2170	0,0	0,0	0,0	0.70	20 70	1170	2070	170
13.a	Service Linkage Targeted to Youth	175	97	72%	27%	1%	53%	7%	3%	37%	0%	8%	92%	0%	0%	0%	0%	0%
13.b	Service Linkage at Testing Sites	100	48	77%	23%	0%	54%	2%	0%	-	0%	0%	0%	44%	31%	10%	10%	4%
13.c	Service Linkage at Public Clinic Primary Care Program (a)	3,546	1,526	69%	30%	1%	51%	9%	2%		0%	0%	0%	20%	24%	13%	37%	6%
13.d	Service Linkage at CBO Primary Care Programs (a)	4,537	1,645	76%	21%	3%	46%	12%	2%		0%	0%	4%	28%	26%	11%	26%	4%
14	Transportation	2,366	652															
14.a	Transportation Services - Urban	796	186	62%	35%	2%	55%	8%	4%	34%	0%	0%	4%	18%	26%	8%	32%	11%
14.b	Transportation Services - Rural	237	58	64%	36%	0%	38%	28%	2%		0%	0%	3%	21%	17%	12%	34%	12%
14.c	Transportation vouchering	1,333	408	74%	24%	2%	65%	11%	1%	23%	0%	0%	2%	11%	18%	12%	51%	6%
15	Linguistic Services (d)	NA	NA															
16	Emergency Financial Assistance (e)	1,830	383	74%	22%	4%	58%	10%	2%	31%	0%	0%	3%	28%	27%	9%	31%	2%
17	Referral for Health Care - Non Core Service (d)	NA	NA															
	plicated clients served - all categories*	12,941	9,368	75%		2%	45%	14%	2%		0%	0%	4%	23%	25%	11%	31%	6%
Living AIL	S 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%

Page 1 of 2 Pages Available Data As Of: 7/21/2023

CBO Pcare targeted to AA (1.b) and HL (1.c) goals represent combined Part A and MAI clients served

FY 2023 Ryan White Part A and MAI Service Utilization Report

•		•	1 2023 Kya	•••••	to i ait	r and i		oc Otmzane	on Ropon	•									
			RW M	Al Servic	e Utilizati	on Repor	t - 1st Quarte	er (03/01 -06/30))										
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	1 25	5-34	35-44	45-49	50-64	65 plus
	Outpatient/Ambulatory Primary Care (excluding Vision)																		
	Primary Care - MAI CBO Targeted to AA (g)	1,664	703	72%			99%	0%			0%	0%			35%	27%	11%	19%	2%
1.c	Primary Care - MAI CBO Targeted to Hispanic (g)	1,380	750	82%	14%	4%	0%	0%	0%	100%	0%	0%	5%	%	31%	27%	13%	22%	2%
2	Medical Case Management (f)	0																	
2.c	Med CM - Targeted to AA (a)	967	235	83%			45%	10%	3%		0%	0%			33%	28%	12%	15%	1%
2.d	Med CM - Targeted to H/L(a)	735	158	81%	19%	0%	57%	10%	0%	33%	0%	0%	0%	%	10%	29%	14%	38%	10%
			RW Part A No	ew Client	Service I	Itilization	Report - 1st	Quarter (03/0	1-06/30)					_					
	Report reflects the nur	mber & demograph								g previous	12 month	ıs (3/1/22	- 6/30/22	22)					
Priority	Service Category	Goal	Unduplicated	Male	Female	Trans	AA	White	Other	Hispanic	0-12	13-19	20-24	1 2	5-34	35-44	45-49	50-64	65 plus
			New Clients			gender	(non-	(non-	(non-										
			Served YTD				Hispanic)	Hispanic)	Hispanic)										
	Primary Medical Care	1,871	591	80%			48%	10%	2%		0%	1%			37%	26%	10%	3%	16%
2	LPAP	954		83%		_		10%	3%		0%	0%			33%	28%	12%	1%	15%
3.a	Clinical Case Management	95	21	81%			57%	10%	0%		0%	0%			10%	29%	14%	10%	38%
3.b-3.h	<u> </u>	1,097	282	76%	23%		50%	11%	1%		0%	1%			33%	23%	13%	5%	20%
3.i	Medical Case Manangement - Targeted to Veterans	33	3	67%			100%	0%	0%		0%	0%			0%	0%	33%	67%	0%
	Oral Health	50	13	62%			23%	38%	0%		0%	0%			8%	38%	8%	0%	38%
12.a. 12.c. 12.d.	Non-Medical Case Management (Service Linkage)	1,870	683	73%	25%	2%	52%	13%	1%	34%	0%	1%	5%	%	29%	24%	12%	23%	7%
12.b	Service Linkage at Testing Sites	92	42	71%	26%	2%	48%	2%	2%	48%	0%	7%	7%	%	29%	31%	10%	12%	5%
Footnote	S:																		
(a)	Bundled Category																		
(b)	Age groups 13-19 and 20-24 combined together; Age groups	55-64 and 65+ com	bined together.																
(d)	Funded by Part B and/or State Services																		
(e)	Total MCM served does not include Clinical Case Manageme	nt																	
(-/					1														

Page 2 of 2 Pages Available Data As Of: 7/21/2023

The Houston Regional HIV/AIDS Resource Group, Inc.

FY 2324 Ryan White Part B **Procurement Report** April 1, 2023 - March 31, 2024



Reflects spending through May 2023

Spending Target: 17%

	Revised	6/27/23
e of ginal	Expended YTD	Percent YTD
2023	\$272,390	15%
2023	\$95,833	17%

Priority	Service Category	Original	% of	Amendment*	Contractual	Amendment	Contractual	Date of	Expended	Percent
1 Hority	Service Category	Allocation per	Grant	Amendment	Amount	Amendment	Amount	Original	YTD	YTD
4	Oral Health Service-General	\$1,833,318	53%	\$0	\$1,833,318	\$0	\$1,833,318	4/1/2023	\$272,390	15%
4	Oral Health Service -Prosthodontics	\$576,750	17%	\$0	\$576,750	\$0	\$576,750	4/1/2023	\$95,833	17%
5	Health Insurance Premiums and Cost Sharing (1)	\$1,028,433	30%	\$0	\$1,028,433	\$0	\$1,028,433	4/1/2023	\$260,420	25%
		\$0	0%	\$0	\$0					
	Total Houston HSDA	3,438,501	100%	0	3,438,501	\$0	\$3,438,501		628,643	18%

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.

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 May 2023

Spending Target: 75%

Revised 6/27/2023

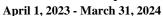
Priority	Service Category	Original	% of	Amendments	Contractual	Amendment	Contractual	Date of	Expended	Percent
11101111	Service Category	Allocation per	Grant	per RWPC	Amount	Amenument	Amount	Original	YTD	YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$864,506	47%	\$0	\$864,506	\$0	\$864,506	9/1/2022	\$769,352	89%
6	Mental Health Services (2)	\$300,000	16%	\$0	\$300,000	\$0	\$300,000	9/1/2022	\$83,850	28%
11	Hospice (3)	\$259,832	14%	\$0	\$259,832	\$0	\$259,832	9/1/2022	\$260,040	100%
13	Non Medical Case Management (4)	\$350,000	19%	\$0	\$350,000	\$0	\$350,000	9/1/2022	\$120,573	34%
16	Linguistic Services (5)	\$68,000	4%	\$0	\$68,000	\$0	\$68,000	9/1/2022	\$40,854	60%
	Total Houston HSDA	1,842,338	100%	\$0	\$1,842,338	\$0	\$1,842,338		1,274,669	69%

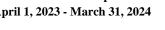
Note

- (1) TRG will reallocate as needed to support service delivery
- (2) Demand for services has been lower than expected
- (3) Service utilization has increased. TRG will reallocate funds to support care delivery
- (4) Staff vacancy has resulted in underspending
- (5) Slight decrease in utilization

The Houston Regional HIV/AIDS Resource Group, Inc.

FY 2324 Ryan White Part B **Procurement Report**







Reflects spending through May 2023

Spending Target: 17%

6/27/23 Revised

Priority	Camriga Catagomy	Original	% of	Amendme	Contractual	Amendm	Contractual	Date of	Expended	Percent
Friority	Service Category	Allocation per	Grant	nt*	Amount	ent	Amount	Original	YTD	YTD
4	Oral Health Service-General	\$1,833,318	53%	\$0	\$1,833,318	\$0	\$1,833,318	4/1/2023	\$272,390	15%
4	Oral Health Service -Prosthodontics	\$576,750	17%	\$0	\$576,750	\$0	\$576,750	4/1/2023	\$95,833	17%
5	Health Insurance Premiums and Cost Sharing (1)	\$1,028,433	30%	\$0	\$1,028,433	\$0	\$1,028,433	4/1/2023	\$260,420	25%
		\$0	0%	\$0	\$0					
	Total Houston HSDA	3,438,501	100%	0	3,438,501	\$0	\$3,438,501		628,643	18%

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.

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 May 2023

Spending Target: 75%

Revised 6/27/2023

Priority	Service Category	Original Allocation per RWPC	% of Grant Award	Amendme nts per RWPC	Contractual Amount	Amendm ent	Final Adjustments	Contractua I Amount	Date of Original Procurement	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$864,506	47%	\$0	\$864,506	\$0	\$0	\$864,506	9/1/2022	\$769,352	89%
6	Mental Health Services (2)	\$300,000	16%	\$0	\$300,000	\$0	\$0	\$300,000	9/1/2022	\$83,850	28%
11	Hospice (3)	\$259,832	14%	\$0	\$259,832	\$0	\$0	\$259,832	9/1/2022	\$260,040	100%
13	Non Medical Case Management (4)	\$350,000	19%	\$0	\$350,000	\$0	\$0	\$350,000	9/1/2022	\$120,573	34%
16	Linguistic Services (5)	\$68,000	4%	\$0	\$68,000	\$0	\$0	\$68,000	9/1/2022	\$40,854	60%
	Increased award amount -Approved by RWPC for Health Insurance (a)	\$0	0%	\$0							
	Total Houston HSDA	1,842,338	100%	\$0	\$1,842,338	\$0	\$0	\$1,842,338		1,274,669	69%

Note

- (1) TRG will reallocate as needed to support service delivery
- (2) Demand for services has been lower than expected
- (3) Service utilization has increased. TRG will reallocate funds to support care delivery
- (4) Staff vacancy has resulted in underspending
- (5) Slight decrease in utilization

2022-2023 DSHS State Services Service Utilization Report

09/01/2022 thru 05/31/2023 Houston HSDA

3rd Quarter

Revised 6/30/2023

	Ul	DC		Geno	ler			Ra	ice				I	Age Grou	л р			
Funded Service	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	1,356	80.70%	18.08%	0.05%	1.17%	39.20%	28.40%	30.00%	2.40%	0.00%	0.00%	1.03%	13.05%	16.50%	22.87%	31.41%	15.14%
Mental Health Services	192	76	64.37%	34.32%	0.00%	1.31%	64.71%	9.51%	25.40%	0.38%	0.00%	0.13%	0.52%	39.89%	25.00%	16.37%	13.15%	4.94%
Hospice	35	12	83.33%	16.67%	0.00%	0.00%	34.68%	44.66%	18.83%	1.83%	0.00%	0.00%	0.00%	0.00%	8.34%	33.33%	58.33%	0.00%
Non Medical Case Management	315	106	93.86%	5.20%	0.00%	0.94%	30.13%	33.91%	34.92%	1.04%	0.00%	0.00%	0.46%	16.43%	23.69%	18.86%	33.96%	6.60%
Linguistic Services	50	49	50.02%	45.90%	0.00%	4.08%	46.85%	8.16%	6.22%	38.77%	0.00%	0.00%	0.20%	6.12%	26.53%	43.85%	14.28%	9.02%
Unduplicated Clients Served By State Services Funds:	I /VA	1,599	74.46%	24.12%	0.01%	1.41%	43.11%	24.93%	23.07%	8.88%	0.00%	0.03%	0.44%	15.10%	20.01%	27.06%	30.23%	7.14%

completed by: lledezma

REVISED: 7/18/2023

Request	FY 2023	HRSA Service Category	Local Service	Amount of	FY 2022	Expended	Percent	FY 2023	FY 2023	FY 2023	FY 2023	Is agency	Notes
Control Number	Priority Rank		Category or Subcategory	Request	Final Contract Amount	2022	Expended	Contract Amount	Expended YTD	Percent YTD	Percent Expected YTD	currently in compliance with contract conditions and therefore eligible for increase?	Amount approved detail:
1	3.b 13.d 15.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 - Pharmancy; LPAP; Outreach; SLW	\$518,700	\$2,859,459	\$2,858,101	100%	\$2,965,948	\$597,211	20%	33%	Yes	Expended amounts are through 5/31/23
2	5	Health Insurance Premium & Cost Sharing Assistance	Health Insurance Co-Payments & Co-Insurance	\$800,000	\$1,952,721	\$1,952,396	100%	\$1,606,359	\$336,287	21%	33%	Yes	Expended amounts are through 5/31/23
3	2.a	Medical Case Management	Clinical Case Management	\$113,750	\$244,328	\$382,355	134%	\$224,328	\$89,451	37%	33%	Yes	Expended amounts are through 5/31/23
4	2.c-2.e 3.b 13.d 15.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 - Pharmancy; LPAP; Outreach; SLW	\$690,115	\$2,048,352	\$2,048,352	100%	\$2,020,920	\$368,850	18%	33%	Yes	Expended amounts are through 6/30/23

REVISED: 7/18/2023

Request	FY 2023	HRSA Service Category	Local Service	Amount of	FY 2022	Expended	Percent	FY 2023	FY 2023	FY 2023	FY 2023	Is agency	Notes
Control	Priority		Category or	Request	Final	2022	Expended	Contract	Expended	Percent	Percent	currently in	Amount approved detail:
Number	Rank		Subcategory		Contract			Amount	YTD	YTD	Expected	compliance with	
					Amount						YTD	contract	
												conditions and	
												therefore eligible	
												for increase?	
5	1.e 2.f 3.b	Outpatient/Ambulatory	Adult	\$150,000	\$1,601,000	\$1,600,992	100%	\$1,648,244	\$255,659	16%	33%	Yes	Expended amounts are through
		Health Services; Medical	Comprehensive										6/30/23
		Case Management;	Primary Medical										
			Care - Targeted										
		Assistance; Local	to Rural										
		Pharmacy Assistance;											
		Non-Medical Case											
		Management;											
6	4.b	Oral Health	Oral Health-Rural	\$30,000	\$166,404	\$166,400	100%	\$166,404	\$55,050	33%	33%	Yes	Expended amounts are through
			(North)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4 100, 10 1	ψ.σσ,.σσ		4 100,101	400,000				6/30/23
			(,										5. 5 5. 5 5
	1	1		\$2,302,565	\$8,872,264	\$9,008,596		\$8,632,203	\$1,702,508			I.	
					. , , -	. ,,		. , . ,	. , . , ,				
Confirme	d Funds Av	ail. for Reallocation											
	<u> </u>		-										

Explanation: Unspent Admin, QM, and HIV Services

Source of Funds Available for Reallocation: Part A

\$1,278,521

FY2022 Anticipated Unspent Funds

A.	Name of Agency (not provided to RWPC)						
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	Pcare/MCM/SL	W/Outreach/LP/	AP/EFA]	Control No.	T T
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
-	Request Period (check one):	April:	August: X	Oct:	Final Qtr:		
E.	Amount of additional funding Requested:	\$518,700.00					
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an	units in current		<u>additional</u>	(b x c)		
	increase is requested)	contract:		units .			
	Primary Health Care Visits by Physician &				\$518,700.00		
***************************************	Physician Extender	3303.42	\$300.00	1729.00			
	2.				\$0.00	_02000000000000000000000000000000000000	
	3.				\$0.00	-New Color of the Charles of the Cha	
	4				\$0.00		
	5.				\$0.00		
	6.				\$0.00	2. 2009 July St. C. St. St. St. St. J. V. St. St. St. St. St. St. St. St. St. St	
	7.		NGA 1 60-44 GEG. SONEY ENG		\$0.00		
l	8. Disbursements (list current amount in column a.		N/A		\$0.00		
	and requested amount in column c.)	Lechnonia Indiamentales o		0.000.000.000.000.000.000.000.000.000.	A-10		
	9.Total additional funding (must match E. above):				\$518,700.00		
G.	Number of new/additional clients to be served with						
	requested increase.	- N		D	J D		F D
		a. Number of	b. Percent AA		d. Percent	e. Percent Male	f. Percent Female
	3	clients served per CPCDMS	(non-Hispanic)	,	Hispanic (all	iviale	Female
	· · · · · · · · · · · · · · · · · · ·	per Crcbivis		Hispanic)	races) .		
	De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.						
	1. Number of clients that received this service under		- VATAIIP		MA	-	
	Part A (or MAI) in FY 2022.*						
	(March 1, 2022 - February 28, 2023)						
	*If agency was funded for service under Part A (or						
	MAI) in FY 2022 - if not, mark these cells as "NA"	2191	38%	19%	43%	87%	13%
	2. Number of clients that have received this service						
	under Part A (or MAI) in FY 2023.						
	a. April Request Period = Not Applicable						
	b. August Request Period = 03/01/23 - 06/30/23						
	c. October Request Period = 03/01/23 - 09/30/23						
	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23	1892	36%	16%	48%	87%	13%

[.	Additional Information Provided by Requesting	a. Enter		b. How many	c (Comments (do not include agency name or identifying			
	Agency (subject to audit by RWGA). Answer all	Number of		Weeks will this			as not morade agency hame or lacinarying			
	questions that are applicable to agency's current	Weeks in this		be if full		,.				
	situation.	column		amount of						
				request is						
				received?						
	1. Length of waiting time (in weeks) for an			<u> </u>	The	e agency has	s a large number of Ryan White patients			
	appointment for a new client:						s referenced in this Request for Service			
	·					ase Form. The agency is requesting funding in				
							ntly meet the continued demands for new			
			4	3		an White pat				
	2. Length of waiting time (in weeks) for an				The	e agency has	a large number of Ryan White patients			
	appointment for a current client:						s referenced in this Request for Service			
						se Form. The agency is requesting funding in				
							ntly meet the continued demands for existing			
			3	2	2 Rya	an White pat	ients			
	3. Number of clients on a "waiting list" for services				The	e agency doe	es not maintain a waiting list. The agency			
	(per Part A SOC):						number of same day appointment slots for			
			0	0	pati	ients.				
	3. Number of clients unable to access services									
	monthly (number unable to make an appointment)						ers a limited number of same day appointment			
) ASSESS	(per Part A SOC):		0) slot	ts for patients				
J.	List all other sources and amounts of funding for	a. Funding	isiaal),	b. End Date of	c. A	Amount	d. Comment (50 words or less):			
	similar services currently in place with agency:	Source:		Contract:		_				
	Primary Health Care Visits by Physician & Physician Extender	RWA		2/28/24	1	\$783,773	Back bill @ 05/31/23			
	Excitaci	,	_							
			-		-					
			_				·			
	Submit the following documentation at the same time	as the request	i i f (h	udget parrative	e and	d fee-for-sen	ice hudgets may be hard copy or fax):			
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 1.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).									
	This form must be submitted electronically via en									
	This form must be submitted electronically via en	- by publish	ieu	ueaume to G	JIEIII	i orbacii: g	ieini.urbacii@pris.iictx.iiet			



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

Agency]: [Grant]: All [Service]: ALL [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 ¹ Type Encounter [Agency]:

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
[Contract 1]: 22GEN0556AA [Sub Cats 1]: INFEC,PHEXT [Contract 2]: 22GEN0556HL [Sub Cats 2]: INFEC,PHEXT
[Contract 3]: 22GEN0556WHT [Sub Cats 3]: INFEC,PHEXT

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOniy]: No 3

					BIF	TH GEND	ER			
:	Γ		MALE			FEMALE		ВОТ	TH GENDE	RS
RACE	AGE ²		Hispanic	Noo-Hisp		Hispanie	Non-Hisp	[Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	73	5	68	6	0	6	79	5	74
	25-34	285	21	-264	22	3	19	307	24	283
	35-44	162	8	154	56	5	51	218	13	205
	45-54	100	2	98	67	5	62	167	7	160
	55-64	78	1	77	22	0	22	100	ŀ	99
	65÷	4	0	4	6	0	б	10	0	10
	SubTotals:	702	37	665	179	13	166	881	50	831
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	J3-19	0	0	0	0	0	0	0	0	0
•	20-24	0	0	0	0	0	0	0	0	0
	25-34	16	0	16	0	0	0	16	0	16
	35-44	10	0	10	1	0	1	11	0	I.I.
	45-54	11	0	11	3	0	3	14	0	14
	55-64	2	0	2	0	0	0	2	0	2
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	39	ĺ	39	4	0	4	43	Ú	43
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	(0	0	0	0	0	(0
	20-24	2	(2	0	0	0	. 2	(2
	25-34	14		10	0	0	0	14		1(
	35-44	4	() 4	0	0	0	4	() 4
	45-54	5	2	2 3	0	0	0	5		3
	55-64	1			0	€	0	1		(
	65+	0	() 0	0) (0	0) (
	SubTotals:	26	7	7 19	(t	0	26	1	7 1
NATIVE AMERICAN	0-12	0	4) (.0) (0	•)) (
·	13-19	0) () () (0	.0	}) (
	20-24	1		0 1	() (0	1)
	25-34	5		2 3	() () 0		5	2
	35-44	2	!	0 2	2 (}	0	2	2	0
	45-54	0		0 . () () (0) ()	0
	55-64	0		0 (1	1 0		i	Ţ ·
	. 65+	0)	0 () (0	0 0	1 4	0	0
,	SubTotals:	8	3	2	5 .	I	1 6)	9	3
PAC.ISLND/HAWAII	0-12	0)	0 0)	0	0 0)	0	0
	13-19	•)	0 0)	0	0 ()	0	0

	Γ				BIE	TH GEND	ER			
			MALE			FEMALE		BO	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	0	0	0	0
	25-34	3.	0	3	0	0	0	3	0	3
	35-44	0	. 0	0	0	0	0	0	0	0
	45-54	1	0	- 1	0	0	0	1	0	1
	55-64	0	0	0	0	0	0	0	0	0
	65÷	0	0	0	0	0	0	0	0	0
	SubTotals:	4	0	4	0	0	0	4	-0	4
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	47	42	5	2	2	0	49	44	5
	25-34	361	253	108	20	18	2	381	271	110
	35-44	330	219	111	31	21	10	361	240	121
	.45-54	226	144	82	24	20	4	250	164	86
	55-64	144	72	72	23	15	8	167	87	80
	65+	14	8	6	0	0	0	14	8	6
	SubTotals:	1,124	740	384	100	76	24	1,224	816	408
ALL RACES	0-12	0	()	0.	0	0	0	0	0	0
	13-19	2	2	0	0	0	0	2	2	0
	20-24	123	47	76	8	2	. 6	131	49	82
	25-34	684	280	404	42	21	21	726	301	425
	35-44	508	227	281	88	26	62	596	253	343
	45-54	343	148	195	94	25	69	437	173	264
	55-64	225	74	151	46	16	30	271	. 90	181
	65+	18	8	10	6	() 6	24	1 8	16
	SubTotals:	1,903	786	1,117	284	90	194	2,187	876	1,311

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	2187	PerinatalTransmission	15
Client visits: 3	3818	Hemophilia Coagulation	2
Spanish speaking (primary language at home) clients served:	432	Transfusion	17
Deaf/hard of hearing clients served;	15	Heterosexual Contact	433
Blind/sight impaired clients served:	22	MSM (not IDU)	1228
Homeless clients served:	183	IV Drug Use (not MSM)	32
Transgender M to F clients served:	64	MSM/IDU	11
Transgender F to M clients served:	0	Multiple Exposure Categories	61
Clients served this period who live w/in Harris County:	2022	Other risk	475
Clients served this period who live outside Harris Chunty:	165	Multi-Race Breakdown	
Active substance abuse elients served.	8	ASN,WHT	8
Active psychiatric illness clients served:	20	BLK,NTV	3
		BLK.NTV,HWN.WHT	1
		BLK.NTV,WHT	1
		BLK,WHT ·	П
		NTV,WHT	2



HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

[Agency]:/ ◄[Grant]: All [Service]: ALL [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 1 Type Encounter

Services performed between 3/1/22 and 2/20/23 - Type Encounted.

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

[Contract 1]: 22GEN0556AANP [Sub Cats 1]: INFEC,PHEXT [Contract 2]: 22GEN0556HLNP [Sub Cats 2]: INFEC,PHEXT

[Contract 3]: 22GEN0556WHTNP [Sub Cats 3]: INFEC,PHEXT [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIF	RTH GEND	ER			
	İ		MALE			FEMALE		BO	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	3	0	3	0	0	0	3	0	3
	35-44	1	0	1	0	0	0	1	0	i
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	4	0	4	θ	0	Ø	4	0	<u>11</u> 4
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	-0	0	0	0	0
	25-34	3	0	3	0	0	0	3	. 0	3
	35-44	1	0	Į.	0	0	0	1	0	1
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	-0	0	0	0	0
	65÷	0	0	0	0	0	0	0	0	0
	SubTotals:	4	0	4	0	6	0	. 4	6	4

Clients Served This Period Methods of Exposure (not mutually exclusive) Perinatal Transmission 0 Unduplicated clients: 6 Hemophilia Coagulation Client visits: 3 Transfusion 0 Spanish speaking (primary language at home) clients served: Deaf/hard of hearing clients served: Heterosexual Contact 0 MSM (not IDU) 3 Blind/sight impaired clients served: IV Drug Use (not MSM) 0 Homeless clients served: MSM/IDU O Transgender M to F clients served: Multiple Exposure Categories Ò Transgender F to M clients served: Other risk Clients served this period who live w/in Harris County: Clients served this period who live outside Harris County: Active substance abuse clients served: Active psychiatric illness clients served:

FOOTNOTES

¹ Visit - time spent per client per agency per service per day

² Age as of client max service date

³ If New Client = Ves is selected then cheents were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2022; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/21.

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



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

Agency]: _____ [Grant]: All [Service]: ALL [Service Performer]: 0 Services performed between 3/1/23 and 6/30/23 * Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
[Contract 1]: 23GEN0415AA [Sub Cats 1]: INFEC,PHEXT [Contract 2]: 23GEN0415HL [Sub Cats 2]: INFEC,PHEXT
[Contract 3]: 23GEN0415WHT [Sub Cats 3]: INFEC,PHEXT

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIE	RTH GEND	ER			
			MALE:			FEMALE		ВО	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	16	0	16	1	0	1	. 17	0	17
	25-34	101	5	96	15	0	15	116	ĵ	111
	35-44	64	5	59	19	1,	18	83	6	77
	45-54	36	1	35	17	0	17	53	I	52
	55-64	26	ì	25	6	0	6	32	, p. c.	31
•	65÷	2	0	2	1	0	į	3	0	3
	SubTotals:	245	12	233	59	1	58	304	13	291
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	4	0	4	0	0	0	4	0	4
	35-44	3	0	3	1	0	1	4	0	7
	45-54	3	. 0	3	1	0	1	4	0	
	55-64	1	. 0	i	0	0	0	1	(
	65+	0	0	0	0	0	0	0	. (
	SubTotals:		e	11	2	0	2	13	(1.
MULTI-RACE	0-12	0	0	0	0	0	0	0	((
	13-19	0	0	0	0	0	0	0	(,
	20-24	1	(I	0	0	0	1	- (
	25-34	5	(5	0	0	0	5	(
	35-44	2	(2	0	0	0	2		
	45-54	1	. (1	- 0) (0	1	(
	55-64	0	(0	0) () 0	0	,)
	65+	0	() 0	•) (0	0))
	SubTotals:	9		9 9) (9 0	5)	9
NATIVE AMERICAN	0-12	0) () (0	()	0
	13-19	0) () () (0	()	0
	20-24		. () 1	. () (0 0	1	1	0
	25-34	2	!	[)	0 0	2	2	I
	35-44			0 .		0	0 0	 		0
	45-54	(}	0 () (0	0 0	4	9	0
	55-64	(_	+	<u> </u>		0 0	_	-	0
	65+)				0 0			0
	SubTotals:		1			_	0 0	+	4	1
PAC.ISLND/HAWAII	0-12	()				0 0		0	0
	13-19				_	+	0 0	-	0	0

	· [BIF	TH GEND	ER			
			MALE			FEMALE		BO	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	. 0	0	0	0
	25-34	1	0	I	0	0	0	1	0	1
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	Į	0	1	. 0	0	0	.1	0	1
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	1	1	0	I	1	0
	20-24	21	18	3	2	2	0	23	20	3
	25-34	136	99	37	5	5	0	141	104	37
	35-44	102	66	36	12	9	3	114	75	39
	45-54	74	50	24	10	9	1	84	59	25
	55-64	47	23	24	5	3	2	52	26	26
	65+	7	4	3	0	0	0	7	4	3
	SubTotals:	387	260	.127	35	29	6	422	289	133
ALL RACES	0-12	0	0	0	0	0	0	0	0	(
	13-19	. 0	0	0	1	I	0	1	1	(
	20-24	39	18	21	3	2		42	20	22
	25-34	249	105	144	20	5	15	269	110	159
	35-44	172	71	101	32	10	22	204	81	123
	45-54	114	51	63	28	9	19	142	60	82
	55-64	74	24	50	11	3	8	85	27	58
	65+	9	4	5	1	. 0	i	10	4	. (
	SubTotals:	657	273	384	96	30	66	753	303	450

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	753	PerinatalTransmission	6
Client visits: 3	825	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	160	Transfusion	5
Deaf/hard of hearing clients served:	7	Heterosexual Contact	150
Blind/sight impaired clients served:	6	MSM (not IDU)	439
Homeless clients served;	71	IV Drug Use (not MSM)	12
Transgender M to F clients served:	19	MSM/IDU	3
Transgender F to M clients served:	0	Multiple Exposure Categories	19
Clients served this period who live w/in Harris County:	701	Other risk	146
Clients served this period who live outside Harris County:	52	Molti-Race Breakdown	
Active substance abuse clients served;	3	ASN,WHT	ı
Active psychiatric illness clients served:	8	BLK.NTV ·	3
		BLK,NTV,WHT	1
		BLK,WHT	3
		NTV.WHT	L

abr069 - SUR v3.6 11/5/2021 Page 2 of 3

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UNTROL 1 FY 23

HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA

SERVICE UTILIZATION REPORT

Agency] • [Grant]: All [Service]: ALL [Service Performer]: 0 Services performed between 3/1/23 and 6/30/23 1 Type Encounter [Agency]

[Contract I]: 23GEN0415AANP [Sub Cats I]: INFEC,PHEXT [Contract 2]: 23GEN0415HANP [Sub Cats 2]: INFEC,PHEXT [Contract 3]: 23GEN0415WTNP [Sub Cats 3]: INFEC,PHEXT [Contract 3]: 23GEN0415WTNP [Sub Cats 3]: INFEC,PHEXT

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIF	RTH GEND	ER			
			MALE			FEMALE		ВО	TH GENDE	RS
RACE	AGE2		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	ļ	0	0	0	1	0	1
	20-24	22	2	20	2	0	2	24	2	22
	25-34	147	i0	137	10	0	10	157	10	147
	35-44	98	4	94	24	2	22	122	6	116
	45-54	39	. 0	39	30	3	27	69	3	66
	55-64	33	1	32	8	0	8	41	1	40
	65÷	2	0	2	2	0	2	4	0	4
	SubTotals:	342	17	325	76	5	71	418	22	396
ASIAN	0-12	0	0	0	0	0	.0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	. 0	0
	25-34	1	0	1	0	0	0	1	0	ļ
	35-44	5	0	.5	0	0	0,	5	0	5
	45-54	6	1	5	1	0	1	7	i	(
	55-64	3	C	3	0	C	0	3	0	
	65+	0	€	0	0	0	0	0	(1
	SubTotals:	15	i	14	1	· ·	1	16	J	1.
MULTI-RACE	0-12	0	(0	0	(0	0	(1
	13-19	0	(0	0) (0	0	(
	20-24	1	() 1	G) (0	1	()
	25-34	3	. () 3	6) (0	3	()
	35-44	1	() 1) (0	1	()
	45-54	1	. () 1	. () (0 0	1)
	55-64	1		1 () (} (0 0	1		l
	65+	0	() () () (0 . 0	())
	SubTotals:	7	•	I t	5 (2	0 0	7	,	l
NATIVE AMERICAN	0-12	0)	0 () (0	0 0	()	0
	13-19	()	0 () (0	0 0) ()	0
	20-24)	0 (3 (0	0 0) ()	0
	25-34	2	2	1	1 (0	0 0)	2	1
	35-44		2	0 :	2	0	0 () .	2	0
	45-54	(0	0	0	1	0		1	0
	55-64	(0	0			0 ()	0	0
	65∻				0	0	0 ()	0	0
	SubTotals:		4			1	0	7	5	I
WHITE	0-12		0		_	0	0 6	О	0	0
	13-19		1	1	0 .	1	j i	0	2	2

	г								7/11/2023	2:52:10 PM	
			_		BIF	RTH GEND	ER				
			MALE			FEMALE		ВО	TH GENDE	'H GENDERS	
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
WHITE	20-24	31	30	. 1	1	1	0	32	31	ı	
	25-34	200	155	45	13	12	1	213	167	46	
	35-44	182	137	45	19	15	4	201	152	49	
	45-54	131	96	35	17	16	1	148	112	36	
	55 - 64	78	45	33	12	· 11	1	90	56	34	
	65÷	6	4	2	1	1	0	7	5	2	
	SubTotals:	629	468	161	64	57	7	693	525	168	
ALL RACES	0-12	0	0	0	0	0	0	0	0	0	
	13-19	2	1	1	1]	0	3	2	1	
	20-24	54	32	22	3	1	2	57	33	24	
	25-34	353	166	187	23	12	11	376	178	198	
	35-44	288	141	147	43	17	26	331	158	173	
	45-54	177	97	80	49	19	30	226	116	110	
	55-64	115	47	68	20	11	9	. 135	58	77	
	65+	8	4	4	3	1	2	11	5	6	
	SubTotals:	997	488	509	142	62	80	1,139	556	589	

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	1139	PerinatalTransmission	10
Client visits: 3	1388	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	293	Transfusion	7
Deaf/hard of hearing clients served:	10	Heterosexual Contact	230
Blind/sight impaired clients served:	10	MSM (not IDU)	646
Homeless clients served:	100	IV Drug Use (not MSM)	20
Transgender M to F clients served:	40	MSM/IDU	5
Transgender F to M clients served:	0	Multiple Exposure Categories	27
Clients served this period who live w/in Harris County:	1046	Other risk	229
Clients served this period who live outside Harris County:	93	Multi-Race Breakdown	
Active substance abuse clients served:	4	ASN,WHT	2
Active psychiatric illness clients served:	14	BLK,NTV	2
		BLK,NTV,WHT	1
		BLK_WHT	2

FOOTNOTES

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

³ If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

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

Α.	Name of Agency (not provided to RWPC)			_			
B.	Contract Number (not provided to RWPC)	The state of the s	***		-		
C.	Service Category Title (per RFP)	Health Insurance	e Premium & C	ost Sharing Ass	istance	Control No.	12
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
	Request Period (check one):	April:	August: X	Oct:	Final Qtr:		
E.	Amount of additional funding Requested:	\$800,000.00					
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an	units in current		additional '	(b x c)		
	increase is requested)	contract:		units	, ,		G (Control of the Control of the Con
	1.				\$0.00		
	2.				\$0.00		
	3.				\$0.00	_WANT 7 BY CALESTSHIP (PREEL VERSON-SELECT)	
	4.				\$0.00	DESIRE PERCEPTURE BASELINES SERVICE	
	5.				\$0.00		
	6.				\$0.00		
	7.		2 . 350 mg		\$0.00	Many Appear 1986 St.	
	8. Disbursements (list current amount in column a.	\$1,413,605.18	N/A	\$800,000.00	\$800,000.00		
	and requested amount in column c.)	THE WAY THEY IT OR AND GARRIE					
	9.Total additional funding (must match E. above):				\$800,000.00		
	Number of new/additional clients to be served with						
	requested increase.				and a substitute to the second second second	andreign tradition of the Association of the Associ	The second of th
	Number of clients served under current contract -		b. Percent AA		d. Percent		f. Percent
	Agencies must use the CPCDMS to document	clients served	(non-Hispanic)	,	Hispanic (all	Male	Female
	numbers served.	per CPCDMS		Hispanic)	races)		
	De-identified CPCDMS-generated reports will be						
	provided to the RWPC by RWGA.						
	1. Number of clients that received this service under						-
	Part A (or MAI) in FY 2022.*						
	(March 1, 2022 - February 28, 2023)						
*	*If agency was funded for service under Part A (or						
	MAI) in FY 2022 - if not, mark these cells as "NA"	1776	42%	25%	33%	81%	19%
2	2. Number of clients that have received this service	-					
l l	under Part A (or MAI) in FY 2023.						
	a. April Request Period = Not Applicable						
	b. August Request Period = 03/01/23 - 06/30/23						
	c. October Request Period = 03/01/23 - 09/30/23						,
[].	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23	1543	41%	26%	33%	81%	19%

1.	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 (information):	(do not include agency name or identifying
	Length of waiting time (in weeks) for an appointment for a new client:	. 4	. 3	seeking service Category Incre	as a large number of Ryan White patients es referenced in this Request for Service asse Form. The agency is requesting funding in ently meet the continued demands for new attents.
	2. Length of waiting time (in weeks) for an appointment for a current client:	3	2	seeking service Category Incre	is a large number of Ryan White patients es referenced in this Request for Service ase Form. The agency is requesting funding in ently meet the continued demands for existing tients.
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0		es not maintain a waiting list. The agency number of same day appointment slots for
ogn sam	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	O	O O STATE STORY OF STATE STORY	The agency off	ers a limited number of same day appointment ts.
J.	List all other sources and amounts of funding for similar services currently in place with agency:	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	DSHS State Services	The Resource Group	8/31/23	\$864,506	
	2. Ryan White Part B	The Resource Group	3/31/24	\$1,028,433	
	3. Ryan White Part B - Rebate	The Resource Group	8/31/23	\$49,511	
n astara National	HINS Disbursements Submit the following documentation at the same time			S. S. Sall J. B. Shan (1994), Inches (1994)	Back bill @ 05/31/23
	Revised Budget Narrative (Table I.A.) corresponding				
	This form must be submitted electronically via en		<u> </u>		



HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT [Agency] [Grant]: All [Service]: ALL [Service Performer]: 0

[Agency] [Grant]: All [Service]: ALL [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE [Contract 1]: 22GEN0498 [Sub Cats 1]: All [Contract 2]: 22GEN0498NP [Sub Cats 2]: All

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

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIF	TH GEND	ER			
	_		MALE	ВО	TH GENDE	RS				
RACE	AGE ²		Hispanic	Non-Hisp		Hispanie	Non-Hisp	[Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	I	0	0	0	1	0	1
	20-24	13	1	12	Ţ.	0	1	14	1	13
	25-34	104	2	102	23	0	23	127	2	125
	35-44	120	5	115	51	2	49	171	7	164
	45-54	102	: 4	98	69	0	69	171	4	167
	55-64	133	1	132	69	0	69	202	1	201
	65+	49	1	48	33	0.	33	82	1	81
	SubTotals:	522	14	508	246	2	244	768	16	752
ASIAN	0-12	- 0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	0	0	0	2	0	2
	25-34	12	0	12	0	0	0	12	0	12
	35-44	7	0	7	2	0	2	9	0	9
	45-54	9	0	9	1	0	1]	10	0	10
	55-64	5	0	5	0	0	0	5	0	5
	65+	3	0	3	1	0	I	4	0	4
	SubTotals:	38	0	38	4	0	4	42	Û	42
MULTI-RACE	0-12	0	C	0	0	0	0	0	0	0
	13-19	0	C	0	0	0	0	9	0	(
	20-24	0	0	0	0	0	0	0	0	0
	25-34	4	. 2	2	. 1	0	1	5	2	3
	35-44	3	1	2	0	0	0	3	[. 2
	45-54	. 3	j	2	0	0	0	3	1	2
	55-64	1	() 1	0	0	0	1	0)
	65÷	1	(1	0	0	0	1	()
	SubTotals:	12	4	8	1	0	1	13	4	1
NATIVE AMERICAN	0-12	0		0	0	0	0	0	() (
	13-19	0	(0	0	0	0	0	(3
	20-24	0) () (0	0	0	0	(0
	25-34	0	1	0	0	(0	0	1	0
	35-44	0) (0 0) (0	0	()	0
	45-54	1	. () (1	Ĭ	0	2		1
	55-64	1	1	0 1	1	1	0	2	2	1
	65+	0)	0 () () (0	()	0
	SubTotals:	2	?	0 1	2	? :	2 0) 4	1	2
PAC.ISLND/HAWAII	0-12	G)	0 () () (0)	0
	13-19	0)	0 () () (0) ()	0

			BIRTH GENDER									
			MALE			FEMALE		ВО	TH GENDE	RS		
RACE	'AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp	Ī	Hispanic	Non-Hisp		
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	0	0	0	0		
	25-34	0	0	0	0	0	0	0	0	. 0		
	35-44	0	0	0	0	0	0	0	0	0		
	45-54	I	0	1	0	0	0	1	0	1		
	55-64	2	1	1	0	0	0	2		I		
	65+	0	0	0	0	0	0	0	0	0		
	SubTotals:	3	I	2	0	0	0	3	1	2		
WHITE	0-12	0	0	0	0	0	0	0	0	0		
	13-19	0	0	0	0	0	0	0	0	0		
	20-24	11	10	1	0	0	0	11	10	1		
	25-34	117	85	32	1	0]	118	85			
	35-44	138	96	42	14	11	3	152	107	45		
	45-54	207	118	89	20	14	6	227	132	95		
	55-64	235	100	135	28	14	14	263	114	149		
	65÷	156	42	114	19		_	175				
	SubTotals:	864	451	413	82	50	32	946	501	445		
ALL RACES	0-12	0	0	0	0	0	0	0	0	0		
	13-19	1	0	1	0	0	0		0			
	20-24	26				0		27		-		
	25-34	237						262				
	35-44	268	+		67	 	 					
	45-54	323				_	-					
	55-64	377						_				
	65÷	209								-		
	SubTotals:	1,441	470	971	335	5 54	281	1,776	524	1,252		

Clients Served This Period		Methods of Exposure (not mutually exclusive)	-
Unduplicated clients:	1776	PerinatalTransmission	10
Client visits: 1	13060	Hemophilia Coagulation	1
Spanish speaking (primary language at home) clients served:	174	Transfusion	12
Deaf/hard of hearing clients served:	11	Heterosexual Contact	384
Blind/sight impaired clients served;	12	MSM (not IDU)	820
Homeless elients served:	83	IV Drug Use (not MSM)	23
Transgender M to F clients served:	34	MSM/IDU	6
Transgender F to M elients served:	1	Multiple Exposure Categories	45
Clients served this period who live win Hanis County:	1558	Other risk	492
Clients served this period who live outside Harris County:	218	Multi-Race Breakdown	
Active substance abuse clients served:	2	ASN,WHT	1
Active psychiatric illness clients served:	13	BLK,NTV	2
·		BLK,NTV,WHT	1
		BLK,WHT	6
		HWN,WHT	1
		NTV,WHT	2



HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SERVICE UTILIZATION REPORT [Agency]s figrand All 12

Services performed between 3/1/23 and 6/30/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
[Contract 1]: 23GEN0365 [Sub Cats 1]: All [Contract 2]: 23GEN0365NP [Sub Cats 2]: All
[Contract 3]: n/a [Sub Cats 3]: All

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					ВПЯ	TH GENDI	ER			
			MALE			FEMALE	Ţ	ВОТ	H GENDE	RS
RACE	AGEz	[Hispanie	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	
	13-19	0	0	. 0	0	0	0	0	0	(
	20-24	14	1	13	0	0	0	14	1	1.
	25-34	81	2	79	10	0	10	91	2	86
	35-44	90	3	87	34	2	. 32	124	5	U
	45-54	74	5	69	78	2	76	152	7	14
	55-64	125	0	125	60	0	60	185	0	18
	65+	52	2	· 50	36	0	36	88	2	8
	SubTotals:	436	13	423	218	4	214	654	17	63
ASIAN	0-12	0	0	0	0	0	0	8	0	
	13-19	0	0	0	0	0	0	0	0	
	20-24	0	0	0	0	0	0	0	0	
	25-34	12	0	12	0	0	0	12	0	
	35-44	8	0	8	1	0	I	9	0	
	45-54	8	0	8	2	0:	2	10	0	
	55-64	5	C	5	0	0	0	5	0	
	65÷	3		3	0	0	0	3	0	
	SubTotals:	36	(36	3	0	3	39	é	
MULTI-RACE	0-12	0	(0	0	0	0	0	. 0	
	13-19	0	(0	0	0	0	. 0	()
	20-24	0	(0	0	0	0	0	(1
	25-34	2	() 2	0	0	0	2	(
	35-44	2		1	6	0	0	2		
	45-54	3		1 2	1	. 0	1	4		
	55-64	2	. () 2		0	0	2	1	
	65÷	1) 1	() 0	0	1	()
	SubTotals:	10		2 8	3	7 0	I	11		2
NATIVE AMERICAN	0-12	Ð	1	0 (() (0	0)
	13-19	0		0 () 1	1 (i	1		0
	20-24	•)	0 () () (0	•	}	0
	25-34	-()	0 () () (0	()	0
	35-44	()	0 () (0 () 0	()	0
	45-54	1	i [0		1	0) 2	2	1
	55-64	1	Į į	0	1	0	0)	1	0
*	65 ⊦]	ı İ	1)	0	0)	i	1
	SubTotals:		3	1	2	2	1 1		5	2
PACJSLND/HAWAII	0-12)	0	0	0	j ()	0	0
	13-19	1	0	0	0	0	0 (0	0

					BIR	TH GEND	ER		71712023 12	
	İ	MALE FEMALE							TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
PAC.ISLND/HAWAII	20-24	0	0	0	0	0	. 0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	1	0	ĺ	0	0	0	1	0	1
	55-64	1	0	-	0	0	0	1	0	ì
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	a	2	0	0	0	2	0	
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	. 0	0	0	0
	20-24	10	8	2	1	1	0	11	9	2
	25-34	80	54	26	2	1	1	82	55	27
	35-44	115	74	41	11	9	2	126	83	43
	45-54	171	105	66	16	11	5	187	116	71
	55-64	221	104	117	26	16	10	247	120	127
	65⊹	165	39	126	14	8	6	179	47	132
	SubTotals:	762	384	378	70	46	24	832	430	402
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	. , 0	0	1	0	1	1	0	1
	20-24	24	9	15	1	1	0	25		
	25-34	175	56	119	12	l	11	187	57	130
	35-44	215	78	137	46	11	35	261	89	172
	45-54	258								
	55-64	355 104 25		86	16	70	441	. 120	321	
	65÷	222	42	. 180	50	8	42	272	50	222
	SubTotals:	1,249	400	849	294	51	243	1,543	45.	1,092

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	1543	Perinatal Transmission	10
Client visits: 3 4	7327	Hemophilia Congulation	1
Spanish speaking (primary language at home) clients served;	167	Transfusion	11
Deaf/hard of hearing clients served:	10	Heterosexual Contact	340
Blind/sight impaired elients served:	11	MSM (not IDU)	684
Homeless clients served:	64 ·	IV Drug Use (not MSM)	18
Transgender M to F clients served:	22	MSM/IDU	2
Transgender F to M clients served;	1	Multiple Exposure Categories	36
Clients served this period who live w/in Harris County:	1354	Other risk	453
Clients served this period who live outside Harris County:	189	Multi-Race Breakdown	
Active substance abuse clients served:	l	ASN,WHT	1
Active psychiatric illness clients served:	15	BLK,NTV	2
		BLK.WHT	5
		HWN,WHT	1
		NTV, WHT	2

A.	Name of Agency (not provided to RWPC)						han Silver at	
B.	Contract Number (not provided to RWPC)							
C.	Service Category Title (per RFP)	Medical Ca	se Managemen	t/Clinical Case N	Management	Control No.	3	
D.	Request for Increase under (check one):	Part A: X	or	MAI:				
***************************************	Request Period (check one):	April:	July	Oct:	Final Qtr:			
E.	Amount of additional funding Requested:		X					
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:			
	(list only those units and disbursements where an	units in current		additional	(b x c)			Y
	increase is requested)	contract:		units	, ,			
	Clinical Case Management	6980.8	\$35.00	3250	\$113,750.00			
	2.				\$0.00			
	3.			-	\$0.00			
	4.		_		\$0.00			
	5.				\$0.00			
	6.				\$0.00		El Calde British	
	7.				\$0.00			
	8. Disbursements (list current amount in column a.		N/A	A A	\$0.00	e gudolidadas		
	and requestedamount in column c.)		IWA	We want of the second				
	9.Total additional funding (must match E. above):	MG LEWIN			\$113,750.00			
G.	Number of new/additional clients to be served with requested increase.	gin - nephrinatsi kakuunin soo koo koo ka ka kun ee dii in gariin ja madii in ja ku too ka ku too ka ku too ka 70			His process of the first to the			
H.	Number of clients served under current contract -	a. Number of	b. Percent AA	c. Percent	d. Percent	e. Percent	f. Percent	concours t
	Agencies must use the CPCDMS to document		(non-Hispanic)		Hispanic (all	Male	Female	
	numbers served.	per CPCDMS	, ,	Hispanic)	races)			
	De-identified CPCDMS-generated reports will			,	,			
	be provided to the RWPC by RWGA.							
	Number of clients that received this service							
	under Part A (or MAI) in FY 2022.*							
	(March 1, 2022 - February 28, 2023)							
	*If agency was funded for service under Part A (or							
	MAI) in FY 2022 - if not, mark these cells as "NA"	246	58%	22%	19%	80%		20%
	2. Number of clients that have received this					100		
	service <u>under Part A</u> (or MAI) in FY 2023.							
	a. April Request Period = Not Applicable							
	b. July Request Period = 03/01/23 - 06/30/23							
	c. October Request Period = 03/01/23 - 09/30/23							
	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23	143	55%	23%	20%	76%		24%

Page 1 Form RFCI-2014/1

I.	Additional Information Provided by Requesting	a. Enter	b. How many	c. Comments	(do not include agency name or identifying
	Agency (subject to audit by RWGA). Answer all	Number of	Weeks will this		
	questions that are applicable to agency's current	Weeks in this	be if full	,	
	situation.	column	amount of		
			request is		
			received?		
	1. Length of waiting time (in weeks) for an			however, the	re will be a waitlist if we cannot get an increase
	appointment for a new client:			because we	will have to transfer staff to other projects. The
				current allo	cation is not suffient to support 3 CCMs. The
				current alloc	cation only supports 12.6 hours of service per
		1	0		CCM per week
	2. Length of waiting time (in weeks) for an				e will be a waitlist if we cannot get an increase
	appointment for a current client:				will have to transfer staff to other projects. The
			,		cation is not suffient to support 3 CCMs. The
					cation only supports 12.6 hours of service per
		1	0		CCM per week
	3. Number of clients on a "waiting list" for services				re will be a waitlist if we cannot get an increase
	(per Part A SOC):				will have to transfer staff to other projects. The
					cation is not suffient to support 3 CCMs. The
		,			ration only supports 12.6 hours of service per
	A November of disease would be accounted	0	0		CCM per week
	4. Number of clients unable to access services				e will be a waitlist if we cannot get an increase
	monthly (number unable to make an appointment)				will have to transfer staff to other projects. The
	(per Part A SOC):				cation is not suffient to support 3 CCMs. The ation only supports 12.6 hours of service per
		_ ا	0	current and	CCM per week
"("TTP" ()				androffered add	COM PET WEEK
J.	List all other sources and amounts of funding for	a. Funding	b. End Date of	c. Amount	d. Comment (50 words or less):
	similar services currently in place with agency: (As	Source:	Contract:		
	per email instructions, Section J is also to list any				
	NP units)				
	Resource Group case management for SUD	TRG	8/31/23	\$275,000	only consumers with an SUD history
	consumers - non-licensed CMs	(R. dorrel 1	on for add dubter	M. 1844 TON, JOHN V. JOSES ELEKTRONISK	To a second seco
111111	Submit the following documentation at the same tim		t /budaat parast	vo and foo for	contino hudasta may be bard cony or favir
<u>K.</u>	Revised Budget Narrative (Table I.A.) corresponding				- ,
			<u></u>		
	This form must be submitted electronically via e	mail by publis	hed deadline to	Glenn Urbach	glenn.urbach@phs.hctx.net

Page 2 Form RFCI-2014/1



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

Services performed between 3/1/22 and 2/28/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Incinde/Exclude SubCats]: INCLUDE [Contract 1]: 22GEN0503 [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All [Contract 3]: n/a [Sub Cats 3]: All

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

			· · · · · · · · · · · · · · · · · · ·		BIF	RTH GENDI	ER			
			MALE			FEMALE		ВОТ	'H GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp	Ţ	Hispanic	Nun-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	ı	0	0	0	1	0]
	20-24	3	0	3	0	0	0	3	0	3
	25-34	14	1	13	1	0	1	15	1]4
	35-44	24	0	24	7	0	7	31	0	31
•	45-54	22	Ţ	21	12	0	12	34	1	33
	55-64	38	0	38	11	0	11	49	0	49
	65÷	7	0	7	5	0	5	12	0	12
	SubTotals:	109	2	107	36	0	36	145	2	143
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	. 0	0	0,	0	0
	20-24	0	0	0	0	0	0	0	Ú	0
	25-34	0	0	0	0	0	0	0	0	. 0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	1	()	!	0	0	0	1.	0	1
	65÷	0	0	0	0	0	0	0	0	0
	SubTotals:	I	0	I	0	0	0	1	0	7
MULTI-RACE	0-12	0	C	0	0	0	0	0	0	C
	13-19	0	C	0	0	0	0	0	0	(
	20-24	0	(0	0	. 0	0	0	0	(
	25-34	1]	0	0	0	0	1	1	(
	35-44	0	(0	0	0	0	0	(1
	45-54	0	(0	0	0	0	0	()
	55-64	0	(0	0	0	0	0	()
	65÷	0	(0	0	0	0	0	()
	SubTotals:	I		7 0	0	0	0	.1		7
NATIVE AMERICAN	0-12	0	{	0	0) 0	0	0	()
	13-19		(0	. 6) (0	0	()
	20-24	0	(0	0) (0	0)
	25-34	0)	0 0	() (0	0		0
	35-44	0		3 () () (0	0		0
	45-54	0		0 0) () (0	0		0
	55-64	2		1 1	() (0	2		i
	65÷	0)	0 () (0 () 0	()	0
	SubTotals:		?	7	i i	0 1) 0) 2	?	7
WHITE	0-12	{)	0 () (0 (0) ()	0
	13-19	()	0 ()	1	o c)]	L	1

			BIRTH GENDER									
			MALE	ВО	TH GENDE	RS						
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp		
WHITE	20-24	0	0	0	0	0	0	0	0	0		
	25-34	8	7	1	0	0	0	8	7	1		
	35-44	8	5	3	4	3	1	12	8	4		
	45-54	22	9	13	1	1	0	23	10	13		
	55-64	33	11	22	5	3	2	38	14	24		
	65+	13	2	11	2	0	2	15	2	13		
	SubTotals:	84	34	50	13	8	5	97	42	55		
ALL RACES	0-12	0	0	0	0	0	0	0	0	0		
	13-19	1	0	1	1	1	0	2	1	1		
	20-24	3	0	3	0	0	0	3	0	3		
	25-34	23	9	14	1	0	1	24	9	15		
	35-44	32	5	27	11	3	- 8	43	8	35		
	45-54	44	10	34	13	1	12	57	11	46		
	55-64	74	12	62	16	3	13	90	15	75		
	65+	20	2	18	7	0	7	27	2	. 25		
	SubTotals:	197	38	159	49	8	41	246	46	200		

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	246	Perinatal Transmission	1
Client visits: 3	3041	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	19	Transfusion	I
Deaf/hard of hearing clients served:	7	Heterosexual Contact	63
Blind/sight impaired clients served;	8	MSM (not IDU)	112
Homeless clients served:	33	IV Drug Use (not MSM)	7
Transgender M to F clients served:	7	MSM/IDU	3
Transgender F to M clients served:	0	Multiple Exposure Categories	10
Clients served this period who live w/in Harris County:	241	Other risk	38
Clients served this period who live outside Harris County;	5	Multi-Race Breakdown	
Active substance abuse clients served:	2	BLK.WHT	1
Active psychiatric illness clients served:	7		•

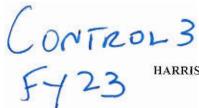
FOOTNOTES

Visit = time spent per client per agency per service per day

² Age as of client max service date

³ If New Client = Yes is selected then chents were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2022; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/21.

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



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

[Agency]: [Grant]: RW1 [Service]: CMGMT [Service Performer]: 0 Services performed between 3/1/23 and 6/30/23 | Type Encounter [Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE [Contract 1]: 23GEN0373 [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All

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

[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIR	TH GEND	ER			
	T		MALE			FEMALE	······································	BO	H GENDE	RS
RACE	AGE ²		Hispanie	Non-Hisp		Hispanic	Non-Hisp	-	Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	10	0	10	0	0	0	10	0	10
	35-44	8	0	8-	1.	0	1	9	0	9
	45-54	9	0	9	10	0	10	19	0	19
	55-64	21	0	21	10	0	10	31	0	31
	65+	4	0	4	5	0	5	9	0	9
	SubTotals:	53	0	53	26	0	26	79	0	79
ASIAN	0-12	0	0	0	0	0	0	0	0	- 0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	. 0	0	0	. 0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	θ	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	(
	65+	0	C	0	1	0	[]	1	0	j
	SubTotals:	0	6	0	Į	0	1	I	0	
MULTI-RACE	0-12	0	(0	0	0	0	0	0	. (
	13-19	0	(0	0	0	0	0	C	
	20-24	0	(. 0	0	0	0	. 0	0	(
	25-34	0	(0	0	0	0	0	0	
	35-44	0	(0	0	0	. 0	0		
	45-54	0	(0	0	C	0,	0	() ;
	55-64	0	(0	0	(0	0	() -
	65	1	1	0	0	(0	1		
	SubTotals:	I		7 0	0	0	0	1		!
NATIVE AMERICAN	0-12	0	(0	0) (0	0	()
	13-19	0) 0	0	. (0	C	()
	20-24	0) () (0) (0	(1)
	25-34)) (() (0	()
	35-44	0)	0) () (0	()	0
	45-54)	0 () () () 0			0
	55-64	2	2	1	()	0 0	:	2	Ţ
	65 i-	()	0 () () (0)	0
	SubTotals:	1	?	1	! {)	0 0		?	1
WHITE	0-12	()	0 () ()	0 0)	0	0
	13-19	()	0) (0	0 0))	0

					BII	RTH GEND	ER			
	Ī		MALE			FEMALE	ВС		TH GENDERS	
RACE	AGE ²		Hispanie	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
WHITE	20-24	0	0	0	0	0	0	0	0	0
	25-34	2	1	1	0	0	0	2	-1	1
	35-44	4	3	1	1	1	0	5	4	1
	45-54	18	6	J2	1	I	0	19	7	12
	55-64	20	10	10	5	3	2	25	13	12
	65÷	8	2	6	1	0	1	9	2	7
	SubTotals:	52	22	30	8	5	3	60	27	33
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	1	0	1	0	0	0	1	0	1
	25-34	12	1	11	0	0	. 0	12	1	i 1
	35-44	12	3	9	2	1]	14	4	10
	45-54	27	6	21	11	1	10	38	7	31
	55-64	43	11	32	15	3	12	58	14	44
	65÷	13	3	10	7	ď	. 7	20	3	17
•	SubTotals:	108	24	84	35	5	30	143	29	114

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated elients:	143	PerinatalTransmission	0
Client visits: 3	967	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	10	Transfission	1
Deafthard of hearing clients served:	6	Heterosexual Contact	4-1
Blind/sight impaired clients served:	4	MSM (not IDU)	54
Homeless clients served:	20	IV Drug Use (not MSM)	6
Transgender M to F clients served;	5	MSM/IDU	1
Transgender F to M clients served;	0	Multiple Exposure Categories	10
Clients served this period who live w/in Harris County:	138	Other risk	39
Clients served this period who live outside Harris County:	5	Multi-Race Brenkdown	
Active substance abuse clients served:	1	BLK,WHT	i
Active psychiatric illness clients served:	4		

FOOTNOTES

abr069 - SUR v3.6 11/5/2021 Page 2 of 2

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

³ If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

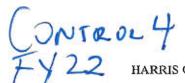
[4] Contracts, Subcats. Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

A.	Name of Agency (not provided to RWPC)						riscoels (These Milita
B.	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	URBAN PCAR	E			Control No.	7 4
D.	Request for Increase under (check one):	Part A: X	or	MAI:			1
	Request Period (check one):	April:	July: X	Oct:	Final Qtr:		
Ē.	Amount of additional funding Requested:	\$690,115.00					
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an	units in current		additional	(b x c)		
	increase is requested)	contract:		units	, ,		
	1.INFEC/PHEXT	3654.1099	\$275.00	1273	\$350,075.00		
	2. NUTRITION	154.399	\$130.00	308	\$40,040.00		
	3.EFINA MEDS (Disbursement See Line 8)				\$0.00		
	4.				\$0.00	2017 5 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	5.				\$0.00	_511 . TC10 PS 1 25 16650000000000000000000000000000000000	
	6.				\$0.00	_BPT_REALY_BMAKN_PAPERINGSSSSSSSSSSSSSS	
	7.		ON THE PER LAND BOOK FOR THE		\$0.00	1 (ASSESSMENT CONTRACTOR NO. 1987)	
	8. Disbursements (list current amount in column a.	\$134,413.50	N/A	\$300,000.00	\$300,000.00		
/aut.	and requestedamount in column c.)	AND THE PARTY OF T			444		
	9. Total additional funding (must match E. above):	Alaka adalan yang dalam mengalah dalam bahasa dalam da			\$690,115.00		
G.	Number of new/additional clients to be served with	150					
	requested increase.						
H.		a. Number of	b. Percent AA		d. Percent	e. Percent	f. Percent
	Agencies must use the CPCDMS to document	clients served	(non-Hispanic)	,	Hispanic (all	Male	Female
		per CPCDMS		Hispanic)	races)		
	De-identified CPCDMS-generated reports will						
	be provided to the RWPC by RWGA.						
	Number of clients that received this service		///8				
	under Part A (or MAI) in FY 2022.*						
	(March 1, 2022 - February 28, 2023)	2640	61%	7%	29%	75%	25%
	*If agency was funded for service under Part A (or						
	MAI) in FY 2022 - if not, mark these cells as "NA"						
	Number of clients that have received this				Attanto	111121111111111111111111111111111111111	
	service under Part A (or MAI) in FY 2023.						
	a. April Request Period = Not Applicable	1101	E00/	00/	200/	77%	228/
	b. July Request Period = 03/01/23 - 06/30/23	1101	50%	9%	38%	11%	23%
	c. October Request Period = 03/01/23 - 09/30/23						
	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23						

Page 1

Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current situation. 1. Length of waiting time (in weeks) for an appointment for a new client: 1-2weeks 1-2weeks 1-2weeks 2. Length of waiting time (in weeks) for an appointment for a current client: 2. Length of waiting time (in weeks) for an appointment for a current client: 3. Number of clients on a "waiting list" for services (per Part A SOC): 3. Number of clients on a "waiting list" for services (per Part A SOC): 4. How many Weeks will this be if full amount of request is received? 5. How many Weeks will this be if full amount of request is received? 6. Comments (do not include agency name or identifying linformation): 7. Weeks will this be if full amount of request is received? 8. How many Weeks will this be if full amount of request is received? 8. How many Weeks will this be if full amount of request is received? 8. How many Weeks will this be if full amount of request is received? 9. How many Weeks will this be if full amount of request is received? 1. Length of waiting time (in weeks) for an appointment for a new client: 1-2weeks 1-2weeks 0-1 week 0-1 week 0-2 weeks will have a limited number of sar day appointment spaces for new patients. Each month, we see an average of 20 to 25 new patients or return to care patients. With additional funding, we could lower new patients. With additional funding we could lower new patients. With additional funding we could lower new patients. With additional funding we could lower new patients. With additional funding we could lower new patients. With additional funding we could lower new patients with additional funding we could lower new patients. With additional funding we could lower new patients with additional funding we could lower new patients. With additional funding we could lower new patients with additional funding we could lower new patients. Seah month, we see an	1	Additional Information Provided by Requesting	a. Enter	b. How many	c Commente	(do not include agency name or identifying				
questions that are applicable to agency's current situation. Description of waiting time (in weeks) for an appointment for a new client: 1-2weeks				Weeks will this	information):	(do not include agency hame of identifying				
situation. column amount of request is received? The demand for same-day appointments for new patients rising steadily. Daily, newly diagnosed or out-of-care patier are linked to care, but we still have a limited number of sar day appointment spaces for new patients. Each month, we see an average of 20 to 25 new patients or return to care patients. With additional funding, we could lower new patie appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$732,125.57 in unbilled services that we are unable to bill for. EFINA Meds NP = \$213,610.57 Nutrition NP \$38,090 (293 units) Medial Vis = \$480,425 (1747 units) 2. Length of waiting time (in weeks) for an appointment for a current client: 1-1.5 weeks 0 weeks There is currently no waiting list, as we have been able to				the if full	inionnation).					
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1. Length of waiting time (in weeks) for an appointment for a new client: 1-2weeks 1-3weeks 1-4weeks 1		Situation.	Column	1						
1. Length of waiting time (in weeks) for an appointment for a new client: 1-2weeks 1]									
appointment for a new client: 1-2weeks 1-1-2weeks 1-2weeks 1-2weeks 1-2weeks 1-1-2weeks 1-2weeks 1-1-2weeks 1-2weeks 1-1-2weeks 1-1-2				receiveu	The demand for the state of the					
are linked to care, but we still have a limited number of sar day appointment spaces for new patients. Each month, we see an average of 20 to 25 new patients or return to care patients. With additional funding, we could lower new patients. With additional funding, we could lower new patients. With additional funding, we could lower new patients. With additional funding \$732,125.57 in unbilled appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$732,125.57 in unbilled services that we are unable to bill for. EFINA Meds NP = \$213,610.57 Nutrition NP \$38,090 (293 units) Medial Vis = \$480,425 (1747 units) 2. Length of waiting time (in weeks) for an appointment for a current client: 1-1.5 weeks 0 weeks With a funding increase, existing patients could be seen within the same week. There is currently no waiting list, as we have been able to										
day appointment spaces for new patients. Each month, we see an average of 20 to 25 new patients or return to care patients. With additional funding, we could lower new patie appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$732,125.57 in unbilled services that we are unable to bill for. EFINA Meds NP = \$213,610.57 Nutrition NP \$38,090 (293 units) Medial Vis = \$480,425 (1747 units) 2. Length of waiting time (in weeks) for an appointment for a current client: 1-1.5 weeks 3. Number of clients on a "waiting list" for services There is currently no waiting list, as we have been able to	ĺ	appointment for a new client:								
1-2weeks 1-2wee										
1-2weeks 1-2wee					day appointme	ent spaces for new patients. Each month, we				
appointment wait times from the current 1-2 weeks to 0-1 week. We are currently holding \$732,125.57 in unbilled services that we are unable to bill for. EFINA Meds NP = \$213,610.57 Nutrition NP \$38,090 (293 units) Medial Vis = \$480,425 (1747 units) 2. Length of waiting time (in weeks) for an appointment for a current client: 1-1.5 weeks 0 weeks With a funding increase, existing patients could be seen within the same week. There is currently no waiting list, as we have been able to										
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services that we are unable to bill for. EFINA Meds NP = \$213,610.57 Nutrition NP \$38,090 (293 units) Medial Vis = \$480,425 (1747 units) 2. Length of waiting time (in weeks) for an appointment for a current client: 1-1.5 weeks 3. Number of clients on a "waiting list" for services Services that we are unable to bill for. EFINA Meds NP = \$213,610.57 Nutrition NP \$38,090 (293 units) Medial Vis = \$480,425 (1747 units) With a funding increase, existing patients could be seen within the same week. There is currently no waiting list, as we have been able to	ĺ		1 21100110	O T WCCK						
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2. Length of waiting time (in weeks) for an appointment for a current client: 1-1.5 weeks 0 weeks With a funding increase, existing patients could be seen within the same week. There is currently no waiting list, as we have been able to										
appointment for a current client: 1-1.5 weeks 0 weeks within the same week. There is currently no waiting list, as we have been able to				1						
appointment for a current client: 1-1.5 weeks 0 weeks within the same week. There is currently no waiting list, as we have been able to										
3. Number of clients on a "waiting list" for services There is currently no waiting list, as we have been able to		2. Length of waiting time (in weeks) for an			With a funding	increase, existing patients could be seen				
		appointment for a current client:	1-1.5 weeks	0 weeks	within the same	e week.				
(per Part A SOC): 0 continue scheduling all patients for requested appointment					There is currer	ntly no waiting list, as we have been able to				
		(per Part A SOC):	0	0	continue sched	duling all patients for requested appointments				
4. Number of clients unable to access services There are no clients who are unable to access services on		4. Number of clients unable to access services			There are no c	lients who are unable to access services on a				
monthly (number unable to make an appointment) 0 0 monthly basis.		monthly (number unable to make an appointment)	0	0	monthly basis.					
(per Part A SOC):		(per Part A SOC):			-	·				
	II (II)			Served, 1922 thrabanes and						
J. List all other sources and amounts of funding for a. Funding b. End Date of c. Amount d. Comment (50 words or less):					c. Amount	d. Comment (50 words or less):				
similar services currently in place with agency: (As Source: Contract:			Source:	Contract:						
per email instructions, Section J is also to list any										
NP units)										
1.Ryan White Part A 23GEN0416NP RWGA 2/28/24 \$732,126 \$732,125.57 in no pay for services that have		1.Ryan White Part A 23GEN0416NP	RWGA	2/28/24	\$732,126					
been delivered and cannot be billed						been delivered and cannot be billed				
2.		2.								
3.		3.								
4.		4.								

7/14/2023 7:44:57 AM



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

[Agency]: (Grant]: RW1 [Service]: PCARE [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: EXCLUDE [Contract 1]: 22GEN0593AA [Sub Cats 1]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO [Contract 2]: 22GEN0593HL [Sub Cats 2]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO [Contract 3]: 22GEN0593WHT [Sub Cats 3]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO

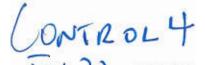
[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIR	TH GEND	ER			
			MALE			FEMALE		BO	TH GENDE	RS
RACE	AGE ²	[Hispanie	Non-Hisp	[Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	3	0	3	2	2	0	5	2	3
	20-24	38	2	36	5	0	5	43	2	41
	25-34	252	11	241	43	5	38	295	16	279
	35-44	178	8	170	82	2	80	260	10	250
	45-54	83	4	79	62	2	60	145	6	139
	55-64	35	ì	34	33	l	32	68	2	66
	65+	10	J	9	3	0	3	13	l	12
	SubTotals:	599	27	572	230	. 12	218	829	39	790
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	7	0	7	0	0	0	7	1 0	7
	35-44	4	C	4	1	0	1	5	0	5
	45-54	3	C	3	0	0	0	3	0	3
	55-64	2	C	2	. 0	0	0	2	. (
	65÷	0	(0	0	0	0	0) (
	SubTotals:	16	t	7 16	1		1	17		17
MULTI-RACE	0-12	0	(0	0	0	0	Ü) () (
	13-19	1	. () l			0	1)
	20-24	0	() (0) (0	((
	25-34	6	3	2	2	2	2		3	2
	35-44	3	() 3	3 1	() 1	4	4	0
	45-54	2	2	0 :	2 1	1	. 0) :	3	1
	55-64	2	2	1	i () (0)	2	1
	65+	()	0) (0) (0	0
	SubTotals:	14	1	3 1.	1 -	4	<i>I</i> 3	1.	8	4 1
NATIVE AMERICAN	0-12	()	0	0	0) (0	0
	13-19	()	0	0	0;	0		0	0
	20-24	(0	0	0	0	0 (3	0	0
	25-34		3	0	3	1	0	1	4	0
	35-44		3	1	2	2	0 :	2	5	i
	45-54		0	0	0	0	0	O	0	0
	55-64		0	0	0	1	0	1	1	0
	65+		0	0	0	0	0	0	0	0
	SubTotals:	_	6	1	5	4	0	4 1	0 .	1 .

					BIR	TH GEND	ER			
			MALE			FEMALE		ВО	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp			Non-Hisp		Ніѕрапіс	Non-Hisp
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	I	1	0	1	2	0	2
	SubTotals:	1	0	1	I	0	I	2	0	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	34	30	4	2	1	1	36	31	5
	25-34	184	160	24	10	8	2	194	168	26
	35-44	164	140	24	35	28	7	199	168	31
	45-54	89	73	16	32	21	11	121	94	27
	55-64	48	37	11	11	8	3	59	45	14
	65+	3	2	i	2	1		5	3	2
	SubTotals:	522	442	80	92	67	25	614	509	105
ALL RACES	0-12	0	0	0	0	0	0	C	C	0
	13-19	4	0	4	2	. 2	. 0	6	2	. 4
	20-24	72	32	40	7	1	6	79	33	46
	25-34	452	173	279	56	13	43	508	186	322
	35-44	352	149	203	121	30	91	473	179	294
	45-54	177	77	100	95	5 24	71			
	55-64	87	39	48	45	5	36	132	2 48	84
	65+	14		3 11	(5	. 5	20) 4	16
	SubTotals:	1,158	47.	683	332	2 86	252	1,49	55.	937

	Methods of Exposure (not mutually exclusive)	
90	PerinatalTransmission	· 12
50	Hemophilia Coagulation	1
67	Transfusion	9
2	Heterosexual Contact	525
4	MSM (not IDU)	815
85	IV Drug Use (not MSM)	12
45	MSM/IDU	3
0	Multiple Exposure Categories	61
32	Other risk	162
58	Multi-Race Breakdown	•
6	ASN,WIIT	2
12	BLK,NTV	6
	BLK,WHT	7
	NTV,WIIT	3
	50 57 2 4 35 34 0 32 58 6	Perinatal Transmission Hemophilia Congulation Transfusion Heterosexual Contact MSM (not IDU) IV Drug Use (not MSM) MSM/IDU Multiple Exposure Categorics Other risk Multi-Race Breakdown ASN,WHT BLK,NTV BLK,WHT



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

[Agency]: [Grant]: RW1 [Service]: PCARE [Service Performer]: 0 Services performed between 3/1/23 and 6/30/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCais]: EXCLUDE

[Contract 1]: 23GEN0416AA [Sub Cats 1]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO [Contract 2]: 23GEN0416HL [Sub Cats 2]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO [Contract 3]: 23GEN0416WHT [Sub Cats 3]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO
[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIR	TH GEND	ER			
	<u> </u>		MALE	•		FEMALE		ВО	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	. 0	0	0	0	0
	20-24	6	1	5	0	0	0	6	ı	- 5
	25-34	60	2	58	8	0	8	68	2	66
	35-44	49	4	45	21	i	20	70	5	6.
	45-54	18	0	18	21	0	21	39	0	39
	55-64	10	0	10	12	0	12	22	0	22
	65+	5	1	4	. 2	0	2	7	1	(
	SubTotals:	148	8	140	64	1	63	212	9	20.
ASIAN	0-12	0	0	0-	0	0	0	0	0	(
	13-19	0	0	0	0	0	0	0	0	
*	20-24	0	0	0	0	0	0	0	0	
	25-34	5	0	5	0	0	0	5	0	
	35-44	3	0	3	1	0	1	4	0	
	45-54	3	0	3	0	0	0	3	0	
	55-64	1	0	l	0	0	0	1	0	
	65+	0	0	0	0	0	0	0	C	
	SubTotals:	12	0	12	1	0	1	13	6	1
MULTI-RACE	0-12	0	0	0	0	0	0	0	ť	
	13-19	0	· C	0	0	0	0	0	(
	20-24	0	(0	0	0	0	0	()
	25-34	3	2	1	1	0	1	4		2
	35-44	0	(0	0	0	0	0	()
	45-54	1	(1	0	C	0	1	. ()
	55-64	1	(. 1	0	0	0	1	. ()
	65+	0	() (0)	0	•) ()
	SubTotals:	5	-	2 3	1	1 1	1	t	5	2
NATIVE AMERICAN	0-12	0) () (0) () 0	()	O)
	13-19	C) () () (() 0	()	0
•	20-24	C	· () () (()	()	0
	25-34	1	l I)]	1	. () 1		2	0
	35-44	J	[0	1 () () ()	1	0
	45-54	()	0 () () +	0)	0	0
	55-64	(0 () ;	t i	0 1		1	0
	65+			0 (0 0)	C)	0	0
	SubTotals:		2	0 .	2	2	0 :	?	4	0

					BIR	TH GEND	ER			
			MALE			FEMALE		BO	TH GENDE	RS
RACE	AGE ²		Hispanie	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0	0	. 0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	0	0
	55-64	0	0	0	0	0	0	0	0	0
	65+	1	0	L	1	0	1	2	0	2
	SubTotals:	1	0	I	I	0	1	2	0	2
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	1	1	0	1	1	0
	20-24	8	7	1	1	0	1	9	7	2
	25-34	63	52	- 11	6	3	3	69	55	-
	35-44	54	42	12	10	7	3	64	. 49	15
	45-54	35	26	9	13	3	10	48	29	19
	55-64	· 16	11	5	3	2	1	19	13	6
	65+	1	l	0	0	0	0	1	1	0
<u> </u>	SubTotals:	177	139	38	34	16	18	211	155	56
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	. 0			1	I	0	1	l	0
	20-24	14	_			0		15		
	25-34	132			· —			148		
	35-44	107			32					
	45-54	57			34			91		
	55-64	28	_			2		_		
	65+	7								2 8
	SubTotals:	345	149	196	103	17	86	448	160	5 282

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	448	PerinatalTransmission	1
Client visits: 3	562	Hemophilia Coagulation	. 0
Spanish speaking (primary language at home) clients served:	117	Transfusion	3
Deaf/hard of hearing clients served:	0	Heterosexual Contact	153
Blind/sight impaired clients served:	0	MSM (not IDU)	239
Homeless elients served:	27	IV Drug Use (not MSM)	4
Transgender M to F clients served:	[0	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	15
Clients served this period who live w/in Harris County:	443	Other risk	57
Clients served this period who live outside Harris County:	5	Multi-Race Breakdown	
Active substance abuse clients served:	2	ASN,WHT .	1
Active psychiatric illness clients served:	1	BLK,NTV	2
		BLK,WHT	. 2
		NTV,WIIT	1

A.	Name of Agency (not provided to RWPC)						oray, jaylana ay
B.	Contract Number (not provided to RWPC)		***				
C.	Service Category Title (per RFP)	RURAL PCAR	E			Control No.	5
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
	Request Period (check one):	April:	July: X	Oct:	Final Qtr:		The Blogger of Street
E.	Amount of additional funding Requested:	\$150,000.00					
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an	units in current		additional	(b x c)		
	increase is requested)	contract:		units			
				requested:			
	1.EFINA MEDS (Disbursement See Line 8)		***************************************		\$0.00		
	2				\$0.00		
	3.				\$0.00	No. P. 85 (No. 874) No. 85 (419) AND AND AND AND AND AND AND AND AND AND	
	4.				\$0.00		
	5.				\$0.00	[17] A. ANG, C. SERRESSA AND SERVICE SERVICE	
	6.				\$0.00	A THE CONTRACT OF A PROPERTY.	. I'm saliosi
	7.				\$0.00		
	8. Disbursements (list current amount in column	\$156,426 <i>.</i> 75	N/A	\$150,000.00	\$150,000.00		
	a. and requestedamount in column c.)						
	9. Total additional funding (must match E. above):				\$150,000.00		
G.	Number of new/additional clients to be served with	45					(6) (6) (7)
	requested increase.						
H.	Number of clients served under current contract -	a. Number of			d. Percent	e. Percent	f. Percent
	Agencies must use the CPCDMS to document	I	(non-Hispanic)	,	Hispanic (all	Male	Female
	numbers served.	per CPCDMS		Hispanic)	races)		
	De-identified CPCDMS-generated reports will)		
	be provided to the RWPC by RWGA.						
	Number of clients that received this service	4]	
	under Part A (or MAI) in FY 2022.*						
	(March 1, 2022 - February 28, 2023)	1652	51%	17%	30%	74%	26%
	*If agency was funded for service under Part A (or						
	MAI) in FY 2022 - if not, mark these cells as "NA"						
	2. Number of clients that have received this		-		-		
	service under Part A (or MAI) in FY 2023.				*		
	a. April Request Period = Not Applicable	000	220/		270/	720/	27%
	b. July Request Period = 03/01/23 - 06/30/23	368	33%	29%	37%	73%	21%
	c. October Request Period = 03/01/23 - 09/30/23						
	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23						

Form RFCI-2014/1

ī.	Additional Information Provided by Requesting	a. Enter	b. How many	c. Comments	(do not include agency name or identifying		
"	Agency (subject to audit by RWGA). Answer all	Number of	Weeks will this		do not morado agonoj name or identifying		
	questions that are applicable to agency's current	Weeks in this	be if full	'	•		
	situation.	column	amount of				
			request is				
			received?				
	Length of waiting time (in weeks) for an appointment for a new client:	1-2weeks	0-1 week	rising steadily. are linked to ca day appointme see an average patients. With a appointment w week. We are services that w	or same-day appointments for new patients is Daily, newly diagnosed or out-of-care patients are, but we still have a limited number of same-ent spaces for new patients. Each month, we e of 10 to 15 new patients or return to care additional funding, we could lower new patient ait times from the current 1-2 weeks to 0-1 currently holding \$173,577.07 in unbilled we are unable to bill for. EFINA Meds NP =		
				\$173,577.07 V delays and PA	Ve are seeing a steady increase in ADAP P Denials		
	Length of waiting time (in weeks) for an appointment for a current client:	1-1.5 weeks	0 weeks	With a funding increase, existing patients could be se within the same week.			
	3. Number of clients on a "waiting list" for services	***************************************		There is currer	itly no waiting list, as we have been able to		
	(per Part A SOC):	0	0		luling all patients for requested appointments		
	4. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	There are no comonthly basis.	lients who are unable to access services on a		
J.	List all other sources and amounts of funding for	a. Funding	b. End Date of	c. Amount	d. Comment (50 words or less):		
	similar services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	_	Contract:				
	1.Ryan White Part A 23GEN0363NP	RWGA	2/28/24	\$173,577	\$173,577 in no pay for services that have been delivered and cannot be billed. We are seeing a steady increase in ADAP delays and PAP Denials		
***************************************	2.	-	V				
	3.						

Form RFCI-2014/1

7/13/2023 2:11:18 PM



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

[Agency]: [Grant]: RW1 [Service]: PCARE [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: EXCLUDE
[Contract 1]: 22GEN0597 [Sub Cats 1]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO (Contract 2): n/a [Sub Cats 2]: All

[Contract 3]: n/a [Sub Cats 3]: All [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All [MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIF	TH GEND	ER			
			MALE		_	FEMALE		ВО	TH GENDE	CRS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	r. 0	0	θ	0	0	0	0	(
	13-19	0	0	0	0	()	0	0,	0	(
	20-24	6	0	6	2	0	2	8	0	8
	25-34	77	4	73	12	0	12	89	4	8:
	35-44	41	2	39	24	1	23	65	3	62
	45-54	26	0	26	28	1	27	54	1	5.
	55-64	13	1	12	12	0	12	25	1	2.
	65+	1	0	I	7	0	7	8	0	
	SubTotals:	164	7	157	85	2	83	249	9	24
ASIAN	0-12	0	0	0	0	0	0	0	0	
	I3-19	0	0	0	0	0	0	0	C	
	20-24	0	0	0	0	0	0	0	C	
	25-34	0	0	0	0	0	0	0	(
	35-44	0	0	. 0	1	0	1	. 1	(
	45-54	2	0	2	0	0	0	2	(
	55-64	0		0	2	0	2	2	(
	65+	0		0	0	0	0	0	(
	SubTotals:	2		2	3	0	3	5		7
MULTI-RACE	0-12	0	(0	0	C	0	0	1	
	13-19	0	{) 0	0	0	0	-{		0
	20-24	0	() (0		0	())
	25-34	1	() 1) (0	1		0
	35-44	0	() () () () () 1)	0
	45-54	1	()	1	. ()		2	0
	55-64	0) () () () ())	0
	65+	0) () () ()	0
	SubTotals:		?	0 :	2	I i	0	ī .	3	0
NATIVE AMERICAN	0-12		+			3) (0	0
	13-19	(_		O I	0	0 (0	0
	20-24	(-		_			С	0	0
	25-34	(0	0)	0	0
	35-44		-					1	2	ì
	45-54					_			1	0
	55-64				_	_			0	0
	65+								0	0
	SubTotals:		<i>I</i> .				_	2	3	1
WHITE	0-12		_		_	_		_	0	0
	13-19	ļ			0			0	0	0

					BIF	RTH GEND	ER			
	i		MALE.	_		FEMALE		BO	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		Hispanie	Non-Hisp		Hispanic	Non-Hisp
WHITE	20-24	8	5	3	1	0	1	9	5	4
	25-34	76	52	24	8	6	2	84	58	26
	35-44	74	43	31	20	11	9	94	54	40
	45-54	53	27	26	25	15	ĪO	78	42	36
	55-64	34	17	17	7	3	4	41	20	21
	65+	4		2	1	0	I	5	2	- 3
	SubTotals:	249	I46	103	62	35	27	311	181	130
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	14	5	9	3	0	3	17	5	12
,	25-34	154	56	98	20	6	14	174	62	112
	35-44	116	46	70	46	12	34	162	58	104
	45-54	82	27	55	55	16	39	137	43	94
	55-64	47	18	29	21	3	18	68	21	47
	65÷	5	2	. 3	- 8	0	8	13	2	11
	SubTotals:	418	154	264	153	37	116	571	193	380

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	571	PerinatalTransmission	5
Client visits: 3	2634	Hemophilia Coagulation	1
Spanish speaking (primary language at home) clients served:	98	Transfusion	7
Deaf/hard of hearing clients served;	1	Heterosexual Contact	233
Blind/sight impaired clients served:	2	MSM (not IDU)	270
Homeless clients served:	31	IV Drug Use (not MSM)	6
Transgender M to F clients served:	6	MSM/IDU	2
Transgender F to M clients served:	0	Multiple Exposure Categories	18
Clients served this period who live w/in Harris County:	182	Other risk	58
Clients served this period who live outside Harris County:	389	Multi-Race Breakdown	
Active substance abuse clients served;	7	BLK,ASN .	1
Active psychiatric illness clients served:	3	BLK,NTV	1
		BLK,WHT	ı

FOOTNOTES

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

³ If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2022; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/21.
[4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

7/14/2023 8:12:37 AM

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

[Agency]: [Grant]: RW1 [Service]: PCARE [Service Performer]: 0 Services performed between 3/1/23 and 6/30/23 † Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: EXCLUDE [Contract 1]: 23GEN0363 [Sub Cats 1]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC, VOMA, VOPTH, VOPTO [Contract 2]: n/a [Sub Cats 2]: All

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

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

	Г	BIRTH GENDER MALE FEMALE BOTH GENDERS											
	F		MALE	·		FEMALE		вот	H GENDE	RS			
RACE	AGE ²		Hispanie	Non-Hisp		Hispanic	Non-Hisp		Ніѕрапіс	Non-Hisp			
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0			
	13-19	0	0	٠ 0	0	0	0	0	0	0			
	20-24	2	1	Į	0	0	0	2	Ţ	i			
	25-34	16	3	13	4	0	4	20	3	17			
	35-44	10	0	01	7	. 0	7	17	0	17			
	45-54	6	0	6	12	1	11	18	l	17			
	55-64	5	0	5	9	0	9	14	0	14			
	65+	1	0	í	4	0	4	5	0	5			
	SubTotals:	40	4	36	36	1	35	76	5	71			
ASIAN	0-12	0	0	0	0	0	. 0	0	0	0			
	13-19	0	0	0	0	0	0	0	0	0			
	20-24	0	0	. 0	0	0	0	0	0	0			
	25-34	0	0	0	0	0	0	0	0	0			
	35-44	0	0	0	0	0	0	0	. 0	0			
	45-54	1	O	l	0	0	0	1	0	1			
	55-64	0	C	0	0	0	0	0	0	0			
	65+	0	C	. 0	0	0	0	0	0	0			
	SubTotals:	1	ť	1	0	0	0	I	l	I			
MULTI-RACE	0-12	0	{	0	0	0	0	0	C	0			
	13-19.	0	(0	0	0	0	0	() (
	20-24	0	(0	0	0	0	0	() (
	25-34	1	() L	C	0	0	. 1	()			
	35-44	0	() 0	0) 0	0	0	() (
	43-54	1	() 1	0) (0	1	()			
	55-64	0	() (() (0	0	()			
	65+	0	1) (() () 0	0)			
	SubTotals:	2	,	0 2	? (0 (0	2		0			
NATIVE AMERICAN	0-12	C		0 () (0 (0	0		0			
	13-19	()	0 () (3 (0	0		0			
	20-24	()	0 - () (0 (0	0	_	0			
	25-34	()	0 () (0 () 0	0		0			
	35-44]	i	1 ()	1 () 1	2		1			
	45-54	()	0 ()	0) C	C)	0			
	55-64	(o l	0	D C	0	0 0	0)	0			
	65+	(0	0	3	0	0 (()	0			
	SubTotals:	,	I	I	0	1	0 .	1 2	?	1			
WHITE	0-12		0	0	0	0	0 () ()	0			
	13-19		1	0	1	0	0 () :	(0			

ONTROL 5

	[BIF	TH GEND	ER			
			MALE			FEMALE		BO	TH GENDE	RS
RACE	AGE ²		Hispanic	Non-Hisp		FEMALE Hispanic	Non-Hisp		Hispanic	Non-Hisp
WHITE	20-24	9	7	2	0	0	0	9	7	2
	25-34	41	28	13	4	. 2	2	4 5	30	15
	35-44	38	20	18	7	6	·f	45	26	19
	45-54	28	17	11	13	9	4	41	26	15
	55-64	23	9	14	5	1	4	28	10	18
	65÷	4	2	2	0	0	0	4	2	2
	SubTotals:	144	83	61	29	18	11	173	101	72
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	1	0	0	0	1	0	l
	20-24	11	8	3	0	0	0	11	8	3
	25-34	58	31	27	8	2	6	66	33	33
	35-44	49	. 21	28	15	6	9	64	27	37
	45-54	36	17	19	25	10	15	61	27	34
	55-64	28	9	19	14	I	13	42	. 10	32
	65÷	5	2	. 3	4	0	4	9	2	. 7
	SubTotals:	188	58	100	66	19	47	254	107	147

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	254	PerinatalTransmission	4
Client visits: 3	439	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	56	Transfusion	3
Deat/hard of hearing clients served:	0	Heterosexual Contact	99
Blind/sight impaired clients served:	1	. MSM (not IDU)	117
Homeless clients served:	17	IV Drug Use (not MSM)	4
Transgender M to F clients served:	1	MSM/IDU ,	3
Transgender F to M clients served:	0	Multiple Exposure Categories	8
Clients served this period who live w/in Harris County:	3	Other risk	28
Clients served this period who live outside Harris County:	251	Multi-Race Breakdown	
Active substance abuse clients served:	4	BLK,ASN	ı
Active psychiatric illness clients served:	1	BLK,WHT	l

abr069 - SUR v3.6 11/5.2021 Page 2 of 2

FOOTNOTES

1 Visit = time spent per client per agency per service per day

² Age as of client max service dato

³ If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1 2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.

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

A.	Name of Agency (not provided to RWPC)						
B.	Contract Number (not provided to RWPC)				-		
C.	Service Category Title (per RFP)	Oral Health				Control No.	1
D.	Request for Increase under (check one):	Part A: X	or	MAI:			
	Request Period (check one):	April:	July: X	Oct:	Final Qtr:		College Congress
E.	Amount of additional funding Requested:	\$30,000.00					
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an	units in current		additional	(bxc)		
	increase is requested)	contract:		units	, ,		
	, ,		•	requested:		Posteronijalija	
	1.General	1364.5128	\$100.00	84	\$8,400.00		
	2.Prosthodontics	199.6848	\$150.00	144	\$21,600.00		
	3.			-	\$0.00		
	4.				\$0.00		
	5.	,			\$0.00		
	6.	_			\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column		N/A		\$0.00		
	a. and requestedamount in column c.)						
	9.Total additional funding (must match E. above):		in marine disp		\$30,000.00		
G.	Number of new/additional clients to be served with	100					
	requested increase.						
H.	Number of clients served under current contract -	a. Number of.			d. Percent	e. Percent	f. Percent
	Agencies must use the CPCDMS to document	clients served	(non-Hispanic)	`	Hispanic (all	Male	Female
	numbers served.	per CPCDMS		Hispanic)	races)		
	De-identified CPCDMS-generated reports will						
l	be provided to the RWPC by RWGA.						
	Number of clients that received this service						
	under Part A (or MAI) in FY 2022.*						
	(March 1, 2022 - February 28, 2023)	324	39%	28%	33%	70%	30%
	*If agency was funded for service under Part A (or			, -			
	MAI) in FY 2022 - if not, mark these cells as "NA"						
	Number of clients that have received this						
	service.under Part A (or MAI) in FY 2023.						
	a. April Request Period = Not Applicable	400	0004	0004	0.507	000/	2004
	b. July Request Period = 03/01/23 - 06/30/23	192	36%	28%	35%	68%	32%
	c. October Request Period = 03/01/23 - 09/30/23						
	•						
	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23						

Page 1

Form RFCI-2014/1

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 information):	(do not include agency name or identifying			
	1. Length of waiting time (in weeks) for an appointment for a new client:	1-2weeks	0-1 week	steadily. We an services each and need to be could lower ne current 1-2 we \$4000.00 in no	or same-day appointments for patients is rising re seeing a steady demand for Oral Health month due to patients being seen same day a seen due to pain. With additional funding, we we patient appointment wait times from the eks to 0-1 week. We are currently holding a pay for services that we are unable to bill for at a surpassing the 1/12 amount monthly.			
	Length of waiting time (in weeks) for an appointment for a current client:	1-1.5 weeks	0 weeks	With a funding increase, existing patients could be seen within the same week.				
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0		ntly no waiting list, as we have been able to luling all patients for requested appointments			
48.460000	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	monthly basis.	lients who are unable to access services on a			
	List all other sources and amounts of funding for similar services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding	b. End Date of Contract:		d. Comment (50 words or less):			
	1.Ryan White Part A 23GEN0371NP	RWGA	2/28/24	\$4,000	\$4000 in no pay for services that have been delivered and cannot be billed.			
	2.							
	3.							
	4.		`					
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Page 2 Form RFCI-2014/1



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

[Agency]: [Grant]: RW1 [Service]: DENT [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
[Contract 1]: 22GEN0511 [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All
[Contract 3]: n/a [Sub Cats 3]: All
[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All
[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

	Γ				BlF	RTH GEND	ER			
			MALE		во	TH GENDE	RS			
RACE	AGE2		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	2	0	2	0	0	0	2	0	2
	25-34	21	1	20	9	0	9	30	1	29
	35-44	23	()	23	12	1	11	35	Ī	34
	45-54	11	0	11	14	1	13	25	1	24
	55-64	13	1	12	13	1	12	26	2	24
	65+	4	0	. 4	8	0	' 8	12	0	12
	SubTotals:	74	2	72	56	3	53	130	ว์	125
ASIAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	- 0	0	0	0	0	0	0
	25-34	0	. 0	0	0	0	0	0	0	0
	35-44	0	0	0	0	0	0	0	0	0
	45-54	0	0	0	0	0	0	0	Ç	0
	55-64	0	0	0	0	0	0	0	C	0
	65+	1	0	1	0	0	0	1	C	1
	SubTotals:	I	6		0	0	0	I	t) 1
MULTI-RACE	0-12	0	(0	0	0	0	0	(0
	13-19	0	()	. 0	0	0	. 0	() (
	20-24	1	() 1	. 0	0	0	1	. (
	25-34	0	() (. 0	0	()	0) (
	35-44	0	() (0	0	0	0) () (
	45-54	0	() (] 1	l C	1	1	L ()
	55-64	0	-() (() (0	()	0
	65+	0) () {) . (0	()	0 (
	SubTotals:	Į.	'	0	<i>I</i>	1 0) 1	7	?	0
NATIVE AMERICAN	0-12	-()	0) () () 0) ()	0
	13-19	- {)	0) () () (1	O .	0
	20-24	()	0	0	0 (0	0
	25-34	()	0	0	0) (0	0
	35-44	()	0	0	0 (0 (0	0
	45-54		1	1	0	0	0 (1	Į.
•	55-64	1)	0	0	0	0 (0	0
	65÷		1	0	I	0	0 0	C	I	0
	SubTotals:		2	I	1	0	0	0	2	I
WHITE	0-12		0	0	0	0	0	0	0	0
·	13-19		0	0 .	0	0	0	0	0	0

					BIR	TH GEND	ER		*	
· ·			MALE	_	FEMALE			BOTH GENDI		RS
RACE	AGE ²		Hispanie	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
WHITE	20-24	6	3	3	0	0	0	6	. 3	3
,	25-34	35	24	11	4	3		39	. 27	12
	35-44	39	25	14	11	6	5	50	31	19
	45-54	37	19	18	14	10	4	51	29	22
	55-64	23	8	15	9	1	8	32	9	. 23
	65+	9	1	8	2	0	2	11	1	10
	SubTotals:	149	80	69	40	20	20	189	100	89
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	. 0	0	0	0	0
	20-24	9	3	6	0	0	0	9	3	6
	25-34	56	25	31	13	. 3	01	69	28	41
	35-44	62	25	37	23	7	16	85	32	53
	45-54	49	20	29	29	l i	18	78	31	47
	55-64	36	9	27	22	2	20	58	11	47
	65+	15	1	14	10	0	10	25	_1	24
	SubTotals:	227	83	144	97	23	74	324	106	218

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	324	PerinatalTransmission	7
Client visits: 3	1501	Hemophilia Coagulation	2
Spanish speaking (primary language at home) clients served:	62	Transfusion	6
Deaf/hard of hearing clients served:	2	Heterosexual Contact	133
Blind/sight impaired clients served;	3	MSM (not IDU)	137
Homeless clients served:	20	IV Drug Use (not MSM)	. 5
Transgender M to F clients served:	4	MSM/IDU .	3
Transgender F to M clients served:	0	Multiple Exposore Categories	14
Clients served this period who live w/in Harris County:	34	Other risk	38
Clients served this period who live outside Harris County:	290	Multi-Race Breakdown	
Active substance abuse clients served:	2	BLK,NTV	1
Active psychiatric illness clients served:	4	BLK,WHT	1

FOOTNOTES

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2022; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/21.
[4] Contracts. Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

CONTROL 6 FY22 HARRI NO PAY

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

[Agency]: [Grant]: OTH [Service]: DENT [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
[Contract 1]: 22GEN0511NP [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All
[Contract 3]: n/a [Sub Cats 3]: All
[Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BIF	TH GEND	ER		•	
			MALE			FEMALE		BO	TH GENDE	ERS
RACE	AGE2		Hispanie	Non-Hisp		Hispanic	Non-Hisp		Hispanie	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	. 0	0	0	0	0	0	0
	25-34	0	0	0	0	0	0	0	0	0
	35-44	1	0	ŧ	0	0	0	1	0	1
	45-54	1	. 0	1	0	0	0	1 '	0	1
	55-64	2	0	2	2	0	2	4	0	4
	65÷	1	0	1	2	0	2	3	0	3
	SubTotals:	5	θ	5	4	0	4	9	θ	. 9
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	0	0	0			0	0	0	0
	25-34	1	1	0	0	0	0	I	I	0
	35-44	0	0	0	0			0	C	0
	45-54	2	2	0	2	2	0	4	4	0
	55-64	1	C	1	2	1	1	3	1	. 2
	65+	1	0	l	0	0	0	1		l l
	SubTotals:	5	á	2	4	3	1	9	(5 3
ALL RACES	0-12	0	C	0	0	0		0		
	13-19	0	(0	0	0	0	0	(0
	20-24	0	() 0	0			C		0
	25-34	1	١	C	0	C	0	1		1 0
	35-44	1	() }	0	C	0			0 1
	45-54	3		2 1	. 2	2	-		+	4 (
	55-64	3) 3			1		7	1 6
	65+	2) 3		+				0 4
	SubTotals:	10		3 7	7 8	3	3	18	8	6 12

Methods of Exposure (not mutually exclusive)

PerinatalTransmission	0
Hemophilia Coagulation	0
Transfusion	0
Heterosexual Contact	7
MSM (not IDU)	5
IV Drug Use (not MSM)	2
MSM/IDU	0
Multiple Exposure Categories	0
Other risk	3

Clients Served This Perind 13 Unduplicated clients: 43 Client visits: 3 13 Spanish speaking (primary language at home) clients served: Deaf/hard of hearing clients served: Blind/sight impaired clients served: Homeless clients served: Transgender M to F clients served; Transgender F to M clients served: Clients served this period who live w/in Harris County: 18 Clients served this period who live outside Harris County: 0 Active substance abuse clients served: 0 Active psychiatric illness clients served:

FOOTNOTES

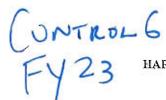
abr069 - SUR v3.6 11/5/2021 Page 2 of 2

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

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



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

[Agency]: [Grant]: RW1 [Service]: DENT [Service Performer]: 0
Services performed between 3/1/23 and 6/30/23 1 Type Encounter
[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats]: INCLUDE
[Contract 1]: 23GEN0371 [Sub Cats 1]: All [Contract 2]: n/a [Sub Cats 2]: All
[Contract 3]: n/a [Sub Cats 3]: All

[Contract 3]: n/a [Sub Cats 3]: All [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All [MAl]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

		BIRTH GENDER											
		-	MALE			FEMALE		вот	H GENDE	RS			
RACE	AGE2		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp			
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	(
	13-19	0	0	0	0	0	0	0	0				
	20-24	1	l	0	0	0	0	1	1				
	25-34	8	[7	5	0	5	13	1	1:			
	35-44	10	0	10	7	0	7	17	0	l I			
	45-54	6	0	6	14	0	14	20	0	2			
	55-64	6	0	6	5	0	5	11	0	1			
	65+	3	0	3	6	0	6	9	0				
	SubTotals:	34			37	0	37	71	2	6			
ASIAN	0-12		0	0	0	0	0	0	0				
	13-19	0	0	0	0	. 0	0	0	0	·			
	20-24	0	0	0	0	0	0	0	0	_			
	25-34	0	0		0	0	0	0	0				
	35-44	0	C	0	0			0	0				
	45-54	0	C		0			0	0				
	55-64	0		0	0			0	-0				
	65+	1	(. 0			1	C	,			
	SubTotals:	1	(7 1	0	0	0	1	0				
NATIVE AMERICAN	0-12	0	() 0			0	0	(
•	13-19	0	(0	C	0	0	(
	20-24	0	() (0	C	0	0	()			
	25-34	0	4) (+			()			
	35-44	1		1 0		 	0	1		i			
	45-54	0	1) (1		0	(
	55-64	0		0 (0		0			
	65+			0 (0			
	SubTotals:	1	+	1 6				-	_	1			
WHITE	0-12	0		_		_) 0			0			
	13-19	-(-			-) 0	<u> </u>	-	0			
	20-24	ŝ								4			
	25-34	15			+		1 0	`		2			
	35-44	25		4 1			3 3	_	_	7			
	45-54	25		3 (_	6 2		<u> </u>	9			
	55-64	18	_			+		5 2		2			
	65+		5			_	_	\	8	1			
	SubTotals:	9.	_	$\frac{1}{2}$ 4			3 11			55			
ALL RACES	0-12							_	0	0			
a normal of the state of	13-19		0			+	_		0	0			

					BIF	TH GEND	ER		-		
	_		MALE			FEMALE			BOTH GENDERS		
RACE	AGE ²		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp	
ALL RACES	20-24	6	5	1	0	0	0	_. 6	5	l	
	25-34	23	12	11	6	L	5	29	13	16	
	35-44	36	15	21	13	3	10	49	18	31	
	45-54	31	13	18	22	6	16	53	19	34	
	55-64	24	9	15	13	3	10	37	12	25	
	65+	10	1	9	8	0	8	18	1	17	
	SubTotals:	130	55	75	62	13	49	192	68	124	

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	192	PerinatalTransmission	5
Client visits: 3	495	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	32	Transfusion	3
Deaf/hard of hearing clients served:	0	Heterosexual Contact	80
Blind/sight impaired clients served:	0	MSM (not IDU)	73
Homeless clients served:	13	IV Drug Use (not MSM)	2
Transgender M to F clients served:	2	MSM/IDU	2
Transgender F to M clients served:	0	Multiple Exposure Categories	б
Clients served this period who live w/in Harris County:	2	Other risk	30
Clients served this period who live outside Harris County:	190		
Active substance abuse clients served:	2		
Active psychiatric illness clients served:	0		

FOOTNOTES

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

If New Client = Yes is selected then clients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2023; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/22.
 [4] Contracts, Subcats, Service Performer, Grants, MAI ignored for SURTypes (Bus Voucher, Ride Share, Ending The Epidemic)

FY 2020 RW PART MAI REQUESTS FOR ALLOCATION INCREASE (JULY {august} 2021)

Request Control Number	FY 23 Priority Rank	HRSA Service Category	Local Service Category or Subcategory	Agency	Amount of Request	FY 2022 Final Contract Amount	Expended 2022	Percent Expended	FY 2023 Contract Amount	FY 2023 Expended YTD	Percent	FY 2023 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible	
1		Outpatient/Ambulatory Health Services; Medical Case Managemen	Primary Medical Care targeted to African American, and Hispanic; Medical Case Management targeted to African American, and Hispanic	SHF	\$19,124	\$974,382	\$974,368	100%	\$704,304	\$78,950	11%	33%		Expended amounts are through 6/30/23
Confirm	d Promite A	ril for Deallocation			\$19,124	\$974,382	\$974,368		\$704,304	\$78,950				
Source of	Funds Ava	rail. for Reallocation ailable for Reallocation: atticipated Unspent Funds	MAI \$19,124		Explanation:	Unspent MAI t	funds from FY	22 program y	ear for both Pr	imary Care ar	d MCM			

A.	Name of Agency (not provided to RWPC)					_	[0.60 A 6.78 EXPERIENCE
B.	Contract Number (not provided to RWPC)		44.72				
C.	Service Category Title (per RFP)	MAI PRIMARY	CARE			Control No.	
D.	Request for Increase under (check one):	Part A:	or	MAI: X			4
	Request Period (check one):	April:	July: X	Oct:	Final Qtr:		
Ē.	Amount of additional funding Requested:	\$19,124.00		la de la companya de la companya de la companya de la companya de la companya de la companya de la companya de			
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an	units in current		additional	(b x c).		
	increase is requested)	contract:		units	` '		
	,			requested:			
****	1.MD/P/PA	2266.313	\$275.00		\$18,975.00		
	2.MCM	3235.36	\$25.00	5			
	3. DIAGNOSTICS (Disbursements see line8)				\$0.00		
	4.				\$0.00		
***************************************	5.	-			\$0.00		
	6.				\$0.00		
	7.	***************************************		77	\$0.00	terille de la la la la la la la la la la la la la	
	8. Disbursements (list current amount in column	\$183.90	N/A	\$24.00	\$24.00		
	a. and requestedamount in column c.)		IN/A				
	9. Total additional funding (must match E. above):				\$19,124.00	A seed specialization of	Bart Sales and Soles
G.	Number of new/additional clients to be served with	35				ve-HAMBARTER ET MI	
	requested increase.	35					
Н.	Number of clients served under current contract -	a. Number of	b. Percent AA	c. Percent	d. Percent	e. Percent	f. Percent
	Agencies must use the CPCDMS to document	clients served	(non-Hispanic)	White (non-	Hispanic (all	Male	Female
	numbers served.	per CPCDMS		Hispanic)	races)		
	De-identified CPCDMS-generated reports will				-		
	be provided to the RWPC by RWGA.						
	Number of clients that received this service		7/2/07/11				
	under Part A (or MAI) in FY 2022.*						
	(March 1, 2022 - February 28, 2023)	1499	62%	0%	.38%	77%	23%
	*If agency was funded for service under Part A (or	1.00	0270	0,0	.0070	7 7 70	2070
	MAI) in FY 2022 - if not, mark these cells as "NA"						
	Number of clients that have received this	-			***************************************		
	service under Part A (or MAI) in FY 2023.						
	a. April Request Period = Not Applicable						
	b. July Request Period = 03/01/23 - 06/30/23	438	55%	0%	45%	82%	18%
	c. October Request Period = 03/01/23 - 09/30/23						
	d. 4th Qtr. Request Period = 03/01/23 - 11/30/23						
	dmi dd. Hogadd diod - 00/0 1/20 - 1 1/00/20						

Page 1 Form RFCI-2014/1

Ķ

1.	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 information):	(do not include agency name or identifying
	Length of waiting time (in weeks) for an appointment for a new client:	1-2weeks	0-1 week	rising steadily are linked to day appointment see an average patients. With	for same-day appointments for new patients is Daily, newly diagnosed or out-of-care patients care, but we still have a limited number of same-ent spaces for new patients. Each month, we go of 10 to 12 new patients or return to care additional funding, we could lower new patient wait times from the current 1-2 weeks to 0-1
	Length of waiting time (in weeks) for an appointment for a current client:	1-1.5 weeks	0 weeks	With a funding within the sam	g increase, existing patients could be seen ne week.
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0		ntly no waiting list, as we have been able to duling all patients for requested appointments
	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	There are no omonthly basis.	clients who are unable to access services on a
J.	List all other sources and amounts of funding for similar services currently in place with agency: (As per email instructions, Section J is also to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):
	2.		MAN MAN MAN MAN MAN MAN MAN MAN MAN MAN		
	3.				
6.24 REP\$1175-	4.	28. 1847 Ferfin Andrew (1820). 647665 (1820).		## ## ## ## ## ## ## ## ## ## ## ## ##	ALL GALLANDER REPORTED CONTROL OF A STATE OF
	Submit the following documentation at the same tim Revised Budget Narrative (Table I.A.) corresponding		, -		



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

[Agency]: [Grant]: RW1 [Service]: PCARE [Service Performer]: 0 Services performed between 3/1/23 and 6/30/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [include/Exclude SubCats]: EXCLUDE

Contract 1]: 23GEN0362AAMAI [Sub Cats 1]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC [Contract 2]: 23GEN0362HLMAI [Sub Cats 2]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC

[Contract 3]: n/a [Sub.Cats 3]: All [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]: All

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					Віл	TH GENDI	ER			
			MALE			FEMALE	Bo		OTH GENDERS	
RACE	AGE ²		Hispanic	Non-Hisp		Hîspanic	Non-Hisp	-	Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	0	0
	20-24	11	1	10	1	0	{	12	1	1 I
	25-34	79	2	77	5	0	5	84	2	82
	35-44	47	3	44	20	0	20	67	3	64
	45-54	26	3	23	22	0	22	48	3	_ 45
	55-64	8	0	8	6	0	6	14	0	I 4
	65÷	6	0	6	1	0	1	7	0	7
	SubTotals:	177	9	168	55	θ	35	232	9	223
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	, 0	0	0	0	. 0	0
	20-24	1	0	l	0	Ú	.0	I	0	{
·	25-34	2	j	1	0	0	0	2	1	l
	35-44	1	0	1	0	0	0	I	0	1
	45-54	1	C	Į	0	0	0	1	0	. 1
	55-64	0	C	0	0	0	0	0	0	0
	65+	0	C	0	0	0	0	0	0	. 0
	SubTotals:	5	l l	4	0	0	0	5	J	4
WHITE	0-12	0	(0	0	0	0	0	(1	0
	13-19	0	(0	0	0	0	. 0	0	0
	20-24	10	10	0	0	0	0	10	10	0
	25-34	50	5() 0	2	. 2	0	52	52	0
	35-44	58	58	3 0	5	5	0	63	63	0
	45-54	27	2	7 . C	11	. 11	0	38	38	0
	55-64	14	14	\$ C	3	3	0	17	17	0
	65+	1		3 (() 0	0	1	1	0
	SubTotals:	160	16	0	2	21	0	181	18.	0
ALL RACES	0-12	()) () () (0	- 0	(0
	13-19	()) () () "(0	C	() 0
	20-24	22	2	1		(l	23	1	1 12
	25-34	131	1 5	3 78	3	7 2	2 5	138	5	5 83
	35-44	100	6) 45	5 2:	5 5	5 20	131	. 60	65
	45-54	54	4 3	0 2:	4 3:	3 1	1 22	87	4	l 46
	55-64	23	2 I	4 3	3	9 3	3 6	3	l I	7 14
	65+		7	1 +	5	1 () 1		3	1 7
	SubTotals:	34.	2 17	17.	2 7	6 2.	1 55	418	3 19] 227

			773472025 7.57.40 2121
Clients Served This Period		Methods of Exposure (not mutually exclusive)	•
Unduplicated clients:	418	PerinatalTransmission	0 .
Client visits: 3	482	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	127	Transfusion	2
Deaf/hard of hearing clients served:	1	Heterosexual Contact	141
Blind/sight impaired clients served:	l	MSM (not IDU)	249
Homeless clients served:	27	IV Drug Use (not MSM)	2
Transgender M to F clients served:	10	MSM/IDU	0
Transgender F to M clients served:	0	Multiple Exposure Categories	17
Clients served this period who live w/in Harris County:	415	Other risk	41
Clients served this period who live outside Harris County:	3	Multi-Race Breakdown	
Active substance abuse clients served:	1	BLK,NTV	3
Active psychiatric illness elients served:	t	BLK,WHT	2

FOOTNOTES

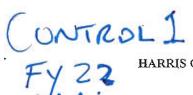
abr069 - SUR v3.6 11/5 '2021 . Page 2 of 2

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

[Agency]: [Grant]: RW1 [Service]; PCARE [Service Performer]: 0 Services performed between 3/1/22 and 2/28/23 1 Type Encounter

[Age Group]: AgeGrp1 (expanded) [include/Exclude SubCats]: EXCLUDE

Contract 1]: 22GEN0516AAMAI [Sub Cats 1]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC [Contract 2]: 22GEN0516HLMAI [Sub Cats 2]: ASBMC, ASBPS, ASCMC, CREG, CREGU, DPPLC, DPPSL, MCCM, MCCRD, MTGCM, MTPSL, PCSLW, PCSUP, SPBMC, SPBPS, SPCMC

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

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

[MAI]: ALL [ShowDetail]: False [Registration Type]: ALL [NewClientsOnly]: No 3

			7.45		BIF	RTH GEND	ER			
•	,		MALE			FEMALE		BO	TH GENDE	CRS
RACE	AGE ^z		Hispanic	Non-Hisp		Hispanic	Non-Hisp	I	Hispanic	Non-Hîsp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	I	sr.2	2	0	3	2	}
	20-24	41	2	39	3	0	3	44	2	42
	25-34	252	9	243	46	5	41	298	14	284
	35-44	171	6	165	83	I	82	254	7	247
	45-54	71	3	68	68	2	66	139	5	134
	55-64	42	2	40	30]	29	72	3	69
	65÷	9	1	8	7	0	7	16	1	15
	SubTotals:	587	23	564	239	11	228	826	3.4	792
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	0	1	0	0	0	1	0	Ţ
	20-24	0	()	0	0	. 0	0	0	0	0
•	25-34	4	· 2	2	1	0	Ï	5	2	3
	35-44	3	0	3	1	0	1	4	0	4
	45-54	2	C	2	0	0	0	2	0	2
•	55-64	1	l	0	0	0	0	j	. 1	0
	65+	0	(0	0	0	0	0	C	0
	SubTotals:	11	3	8	2	0	2	13		10
WHITE	0-12	0	(0	0	. 0	0	0	(0
	13-19	0	(0	0	6	0	0	(0
	20-24	26	20	5 0	1	1	0	27	27	0
	25-34	150	150) (8	8	0	158	158	0
	35-44	128	128	3 0	24	- 24	0	152	150	2 0
	45-54	70	7() (22	22	2 0	92	9.	2 0
	55-64	32	2 32	2 (7	7	. 0	39	39	0
	65+	2	2 :	2 () 1		0	3	3	3 0
	SubTotals:	408	3 40	8 (0 63	63	8 0	47)	47.	1 0
ALL RACES	0-12	()	0 () () (0	() () (
	13-19		2	0 2	2 2	2 2	2 0		1 :	2 2
	20-24	67	7 2	8 39)	ţ	1 3	71	2.	43
	25-34	400	5 16	1 24:	5 5	5 1:	3 42	46	17	4 287
	35-44	301	2 13	4 16	3 108	3 2:	5 83	410	15	9 251
	45-54	14.	3 7	3 70) 90) 2-	4 66	230	3 9	7 136
	55-64	7:	3	5 4	0 3	7	8 29	113	2 4	3 69
	65+	1	1	3	8	8	1 7	1	9	4 - 15
Į Į	SubTotals:	1,00	6 43	4 57.	2 30-	1 7	4 230	1,31	0 50	8 802

FOOTNOTES

Active psychiatric illness clients served:

BLK,WHT

¹ Visit = time spent per client per agency per service per day

² Age as of client max service date

³ If New Client = Yes is selected then elients were only included if they had no encounters (for the service, agency, and grant selected) in the twelve months prior to 3/1/2022; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/21.

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

Operations Committee Report

Houston Ryan White Planning Council

Request for Food During Ryan White Meetings or Events

(05-09-23)

In 20	, I was appointed to serve on the	e (check all that apply):
Commit	ttee(s):	
	Affected Community	Priority & Allocations
	Comprehensive HIV Planning	Quality Improvement
	Operations	Steering
Other:		
	Ryan White Planning Council	
	Project LEAP Class	
	Proyecto VIDA Class	
	_ Integrated Planning Workgroup(s)):
	Other:	
When or	ne of my meetings takes place during	g a mealtime,
I, (print	your name)	
request	a meal because I have medication th	hat must be taken with food.
Signature:		Date:

2023 QUARTERLY REPORT PRIORITY AND ALLOCATIONS COMMITTEE

(Submitted July 2023)

Status of Committee Goals and Responsibilities (* means mandated by HRSA):
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1.	Status:
2.	Review the final quarter allocations made by the administrative agents. Status: ONGOING
3.	*Improve the processes for and strengthen accountability in the FY 2024 priority-setting, allocations and subcategory allocations processes for Ryan White Parts A and B and State Services funding. Status: ON GOING
4.	When applicable, plan for specialty dollars like Minority AIDS Initiative (MAI) and special populations such as Women, Infants, Children and Youth (WICY) throughout the priority setting and allocation processes. Status:
5.	*Determine the FY 2024 priorities, allocations and subcategory allocations for Ryan White Parts A and B and State Services funding. Status:
6.	*Review the FY 2022 priorities as needed. Status:
7.	*Review the FY 2023 allocations as needed. Status:
8.	Evaluate the processes used. Status: ONGOING
9.	Annually, review the status of Committee activities identified in the current Comprehensive Plan. Status: TOBE COMPLETED
Status	s of Tasks on the Timeline:
Comm	$\frac{7/27/23}{\text{Date}}$
	1