MIAMI-DADE HIV/AIDS PARTNERSHIP

Get on Board!

Station 6: Understanding the Ryan White Program from Part A through Part F

June 8, 2022

Get on Board!

- **Get on Board!** is a virtual training series for Miami-Dade HIV/AIDS Partnership members, Ryan White Program clients, and the HIV/AIDS community.
- Trainings include a variety of topics to promote understanding of the Ryan White Program planning council (Partnership) and service system.
- Today's training is led by Partnership Staff, Marlen Meizoso and Christina Bontempo, who have more than 20 years combined experience with the Partnership and the Ryan White Program.
- Participants are welcome to chat questions or comments to Staff throughout the presentation.
- This presentation and presentation notes will be posted online at aidsnet.org/orientation/.

Today's Topics

- What is the Ryan White HIV/AIDS Program?
- What are Parts A-F?
- Why does understanding the Parts matter?
- Learning more terminology of the RWHAP.

This is an interactive course.

Get ready to CHAT!

The Ryan White HIV/AIDS Program

- The Ryan White HIV/AIDS Program (RWHAP):
  - is administered by the **HIV/AIDS Bureau (HAB),** within the **Health Resources** and **Services Administration (HRSA)**;
  - provides a comprehensive system of care for people with HIV;
  - provides ongoing access to HIV medications; and
  - includes five Parts: **A, B, C, D**, and **F**.
- RWHAP Parts are designed to work together to ensure a comprehensive system of care in urban, suburban, and rural communities throughout the U.S.

RWHAP Funding

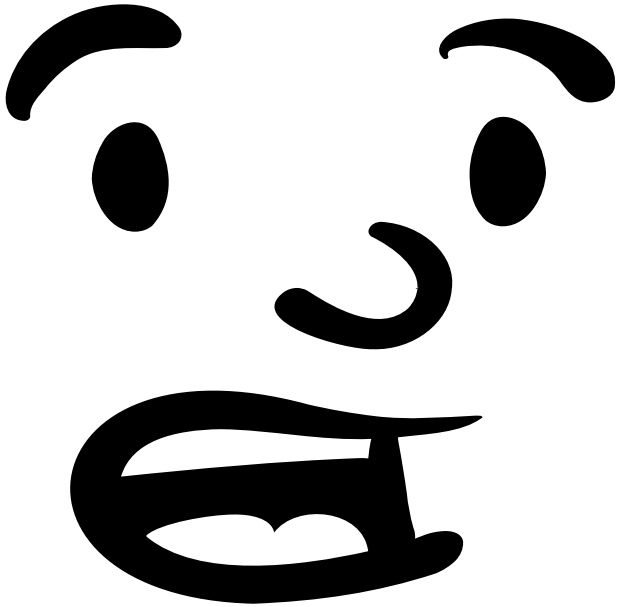
- RWHAP funds are used to develop or enhance access to a comprehensive system of high-quality community-based care for low-income people with HIV.
- Most funds support primary medical care and other medical-related and support services.
- Small amounts of funds are used for technical assistance, clinical training, and development of innovative models of care.

Part A

- The Ryan White HIV/AIDS Program Part A funds grants to Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs) that are most affected by the HIV epidemic.
- Locally, Part A funds are administered by the Miami-Dade County Office of Management and Budgets-Grants Coordination.

EMAs & TGAs

- RWHAP Part A funding areas are defined by two categories:
  - **Eligible Metropolitan Areas (EMAs)**
    - Area with at least 2,000 new cases of AIDS reported in the past 5 years *and* at least 3,000 people living with HIV.
    - Miami-Dade County is an EMA.
  - **Transitional Grant Areas (TGAs)**
    - Areas with 1,000 – 1,999 new cases of AIDS reported in the past 5 years *and* at least 1,500 people living with HIV.
    - Some TGAs cover multiple counties or even multiple states.



Which of these is ***not*** a RWHAP Part A funded jurisdiction:

a) Eligible Metropolitan Areas (EMAs).

b) The Florida Department of Health.

c) Transitional Grant Areas (TGAs).

Knowledge Check

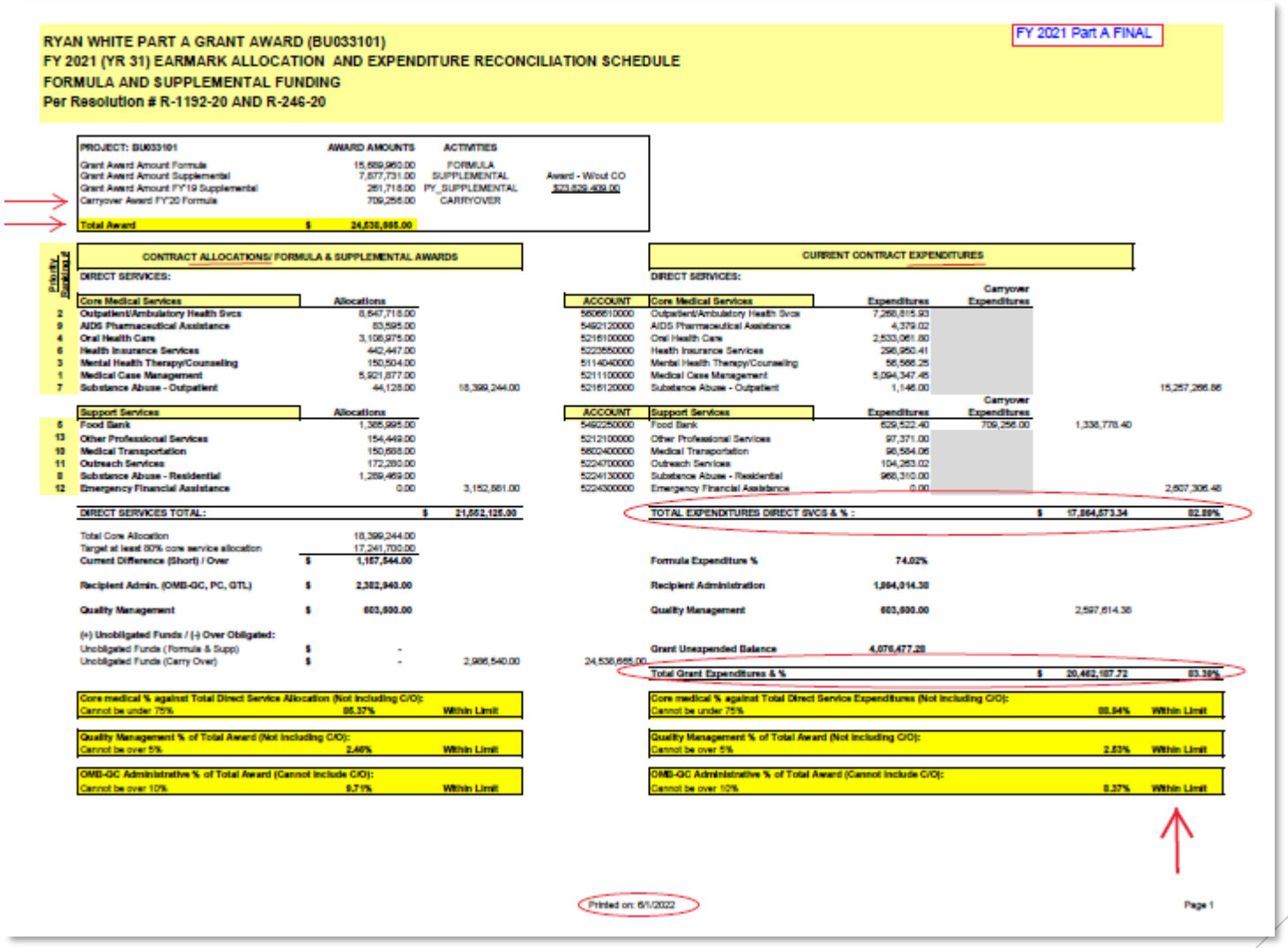
Fundable Part A Core Services

- At least 75% of Part A funding must be spent on Core Medical Services.
- Locally, the Part A program funds these Core Medical Services:
  - AIDS Pharmaceutical Assistance
  - Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals
  - Medical Case Management, including Treatment-Adherence Services
  - Mental Health Services
  - Oral Health Care
  - Outpatient/Ambulatory Health Services
  - Substance Abuse Outpatient Care

Fundable Part A Support Services

- No more than 25% of Part A funding can be spent on Support Services.
- Locally, the Part A program funds these Support Services:
  - Emergency Financial Assistance
  - Food Bank/Home Delivered Meals
  - Medical Transportation
  - Other Professional Services
  - Outreach Services
  - Substance Abuse Services (residential)

Part A Expenditures Report



FY 2021 Part A FINAL

RYAN WHITE PART A GRANT AWARD (BU033101)
FY 2021 (YR 31) EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE
FORMULA AND SUPPLEMENTAL FUNDING
Per Resolution # R-1192-20 AND R-246-20

PROJECT: BU033101	AWARD AMOUNTS	ACTIVITIES	
Grant Award Amount Formula	15,669,960.00	FORMULA	
Grant Award Amount Supplemental	7,877,731.00	SUPPLEMENTAL	Award - W/out CO
Grant Award Amount FY'19 Supplemental	261,718.00	FY_SUPPLEMENTAL	$23,829,409.00
Carryover Award FY'20 Formula	709,256.00	CARRYOVER	
Total Award	$ 24,538,665.00		

CONTRACT ALLOCATIONS/ FORMULA & SUPPLEMENTAL AWARDS

DIRECT SERVICES:

Priority Ranking	Core Medical Services	Allocations	
2	Outpatient/Ambulatory Health Svcs	8,647,718.00	
9	AIDS Pharmaceutical Assistance	83,595.00	
4	Oral Health Care	3,108,975.00	
6	Health Insurance Services	442,447.00	
3	Mental Health Therapy/Counseling	150,504.00	
1	Medical Case Management	5,921,877.00	
7	Substance Abuse - Outpatient	44,128.00	18,399,244.00

	Support Services	Allocations	
6	Food Bank	1,385,995.00	
13	Other Professional Services	154,449.00	
10	Medical Transportation	150,688.00	
11	Outreach Services	172,280.00	
8	Substance Abuse - Residential	1,289,469.00	
12	Emergency Financial Assistance	0.00	3,152,881.00

DIRECT SERVICES TOTAL:		$ 21,552,125.00
Total Core Allocation	18,399,244.00	
Target at least 80% core service allocation	17,241,700.00	
Current Difference (Short) / Over	$ 1,157,544.00	
Recipient Admin. (OMB-GC, PC, GTL)	$ 2,382,940.00	
Quality Management	$ 603,000.00	
(+) Unobligated Funds / (-) Over Obligated:		
Unobligated Funds (Formula & Supp)	$ -	
Unobligated Funds (Carry Over)	$ -	2,986,540.00

Core medical % against Total Direct Service Allocation (Not including C/O):		
Cannot be under 75%	85.37%	Within Limit
Quality Management % of Total Award (Not including C/O):		
Cannot be over 5%	2.46%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O):		
Cannot be over 10%	9.71%	Within Limit

CURRENT CONTRACT EXPENDITURES

DIRECT SERVICES:

ACCOUNT	Core Medical Services	Expenditures	Carryover Expenditures	
5606510000	Outpatient/Ambulatory Health Svcs	7,268,815.93		
5492120000	AIDS Pharmaceutical Assistance	4,379.02		
5216100000	Oral Health Care	2,533,061.80		
5223550000	Health Insurance Services	298,950.41		
5114040000	Mental Health Therapy/Counseling	56,566.25		
5211100000	Medical Case Management	5,094,347.45		
5216120000	Substance Abuse - Outpatient	1,146.00		15,257,266.86

ACCOUNT	Support Services	Expenditures	Carryover Expenditures		
5492250000	Food Bank	629,522.40	709,256.00	1,338,778.40	
5212100000	Other Professional Services	97,371.00			
5602400000	Medical Transportation	98,584.06			
5224700000	Outreach Services	104,263.02			
5224130000	Substance Abuse - Residential	968,310.00			
5224300000	Emergency Financial Assistance	0.00			2,607,306.48

TOTAL EXPENDITURES DIRECT SVCS & % :		$ 17,864,573.34	82.89%
Formula Expenditure %	74.02%		
Recipient Administration	1,994,014.38		
Quality Management	603,000.00	2,597,614.38	
Grant Unexpended Balance	4,076,477.28		
24,538,665.00 Total Grant Expenditures & %		$ 20,462,187.72	83.38%

Core medical % against Total Direct Service Expenditures (Not including C/O):		
Cannot be under 75%	88.84%	Within Limit
Quality Management % of Total Award (Not including C/O):		
Cannot be over 5%	2.53%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O):		
Cannot be over 10%	8.37%	Within Limit

Printed on: 6/1/2022

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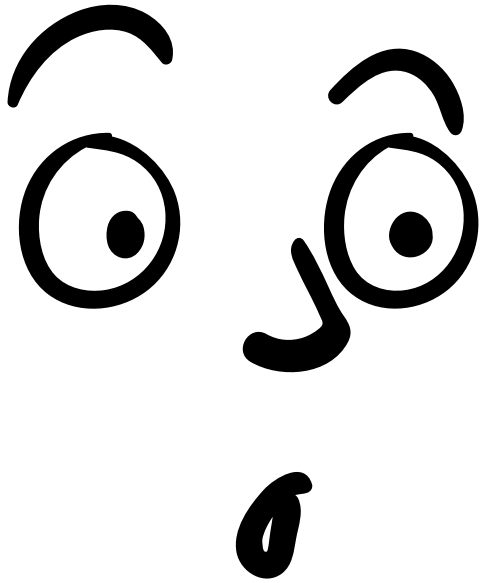
Why Understanding Part A Matters

- The Miami-Dade HIV/AIDS Partnership is responsible for prioritizing Part A services and allocating Part A funds in our EMA.
- As a Partnership member, you have a say in the allocation of more than $22 Million for the services outlined above.
- Members should review the Part A Expenditures Report each month – posted at www.aidsnet.org/meeting-documents/ and available from Staff.



Who is responsible for allocating RHWAP Part A funds to service categories?

a) The Florida Department of Health.

b) The Mayor of Miami-Dade County.

c) The Miami-Dade HIV/AIDS Partnership.

d) HRSA/HAB.

Knowledge Check

Part B

- RWHAP Part B:
  - provides funds for medical and support services;
  - funds are to be used to improve the quality, availability, and organization of HIV health care and support services;
  - funding is available to all 50 States, DC, Puerto Rico, and U.S. territories and jurisdictions;
  - includes the AIDS Drug Assistance Program (ADAP), which provides access to HIV-related medications, through direct purchase and purchase of health insurance; and
  - provides funds to emerging communities with a growing epidemic, reporting 500-999 new cases in the past 5 years.
- Part B funds are administered by the Florida Department of Health in Miami-Dade County.

Fundable Part B Core Services

- At least 75% of Part B funding must be spent on Core Medical Services
- Locally, the Part B program funds these Core Medical Services:
  - Outpatient and ambulatory health services
  - Emergency Financial Assistance (meds)
  - Home health care
  - Mental health services
  - Medical case management, including treatment-adherence services

Fundable Part B Support Services

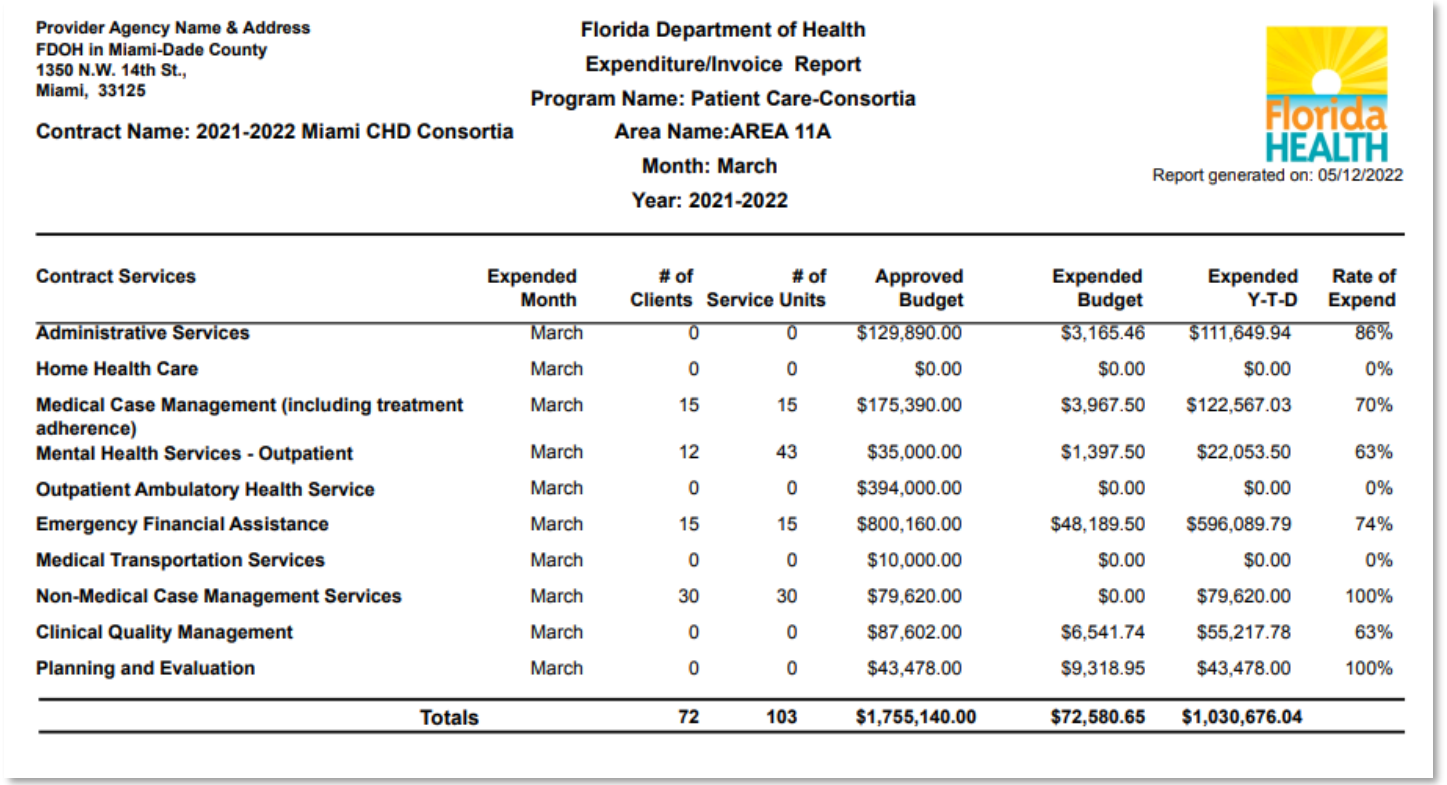
- No more than 25% of Part B funding can be spent on Support Services.
- Locally, the Part B program funds these Support Services:
  - Medical transportation
  - Non-medical case management

Additional Part B Services

- June 2022 Update: Additional Services for Part B-eligible clients:
  - Food Cards- $50 /week per client up to $1000 for grant year)
  - Utility Assistance (one time up to $200 for grant year)
  - Rent Assistance (one time up to $3000 for grant year)
  - Transportation (only Uber or Lyft)

- Please note:
  - These are funds of last resort and cannot be issued if a client is getting the same assistance from other Ryan White Parts.
  - The transportation is to be used for clients that have difficulty using public transportation.
  - Documentation is necessary to access these.
  - Funding available April 1, 2022-March 31, 2023.

Part B Expenditures Report



Provider Agency Name & Address
FDOH in Miami-Dade County
1350 N.W. 14th St.,
Miami, 33125

Contract Name: 2021-2022 Miami CHD Consortia

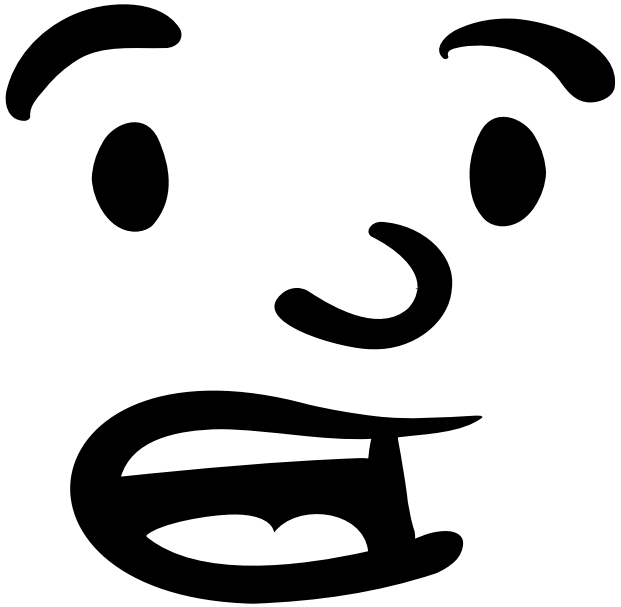
Florida Department of Health
Expenditure/Invoice Report
Program Name: Patient Care-Consortia
Area Name:AREA 11A
Month: March
Year: 2021-2022

Report generated on: 05/12/2022

Contract Services	Expended Month	# of Clients	# of Service Units	Approved Budget	Expended Budget	Expended Y-T-D	Rate of Expend
Administrative Services	March	0	0	$129,890.00	$3,165.46	$111,649.94	86%
Home Health Care	March	0	0	$0.00	$0.00	$0.00	0%
Medical Case Management (including treatment adherence)	March	15	15	$175,390.00	$3,967.50	$122,567.03	70%
Mental Health Services - Outpatient	March	12	43	$35,000.00	$1,397.50	$22,053.50	63%
Outpatient Ambulatory Health Service	March	0	0	$394,000.00	$0.00	$0.00	0%
Emergency Financial Assistance	March	15	15	$800,160.00	$48,189.50	$596,089.79	74%
Medical Transportation Services	March	0	0	$10,000.00	$0.00	$0.00	0%
Non-Medical Case Management Services	March	30	30	$79,620.00	$0.00	$79,620.00	100%
Clinical Quality Management	March	0	0	$87,602.00	$6,541.74	$55,217.78	63%
Planning and Evaluation	March	0	0	$43,478.00	$9,318.95	$43,478.00	100%
Totals		**72**	**103**	**$1,755,140.00**	**$72,580.65**	**$1,030,676.04**	

Why Understanding Part B Matters

- Part A is the payor of last resort.
- Just because services are not funded under Part A does not mean they are unavailable.
- By understanding what each RWHAP Part funds, you get a better understanding of all available services.
- Members should review the Part B Expenditures Report each month – posted at www.aidsnet.org/meeting-documents/ and available from Staff.



What percentage of Part A and Part B funds must be spent on Core Medical Services?

a) No more than 25%.

b) At least 75%.

c) 100%.

d) There are no spending requirements.

Knowledge Check

ADAP

- Another component under Part B.
- The AIDS Drug Assistance Program (ADAP):
  - provides FDA-approved medications to low-income people with HIV; and
  - covers those who have limited or no health insurance.
- ADAP funds may also be used to:
  - buy health insurance for eligible clients, and
  - provide services that improve access to, adherence to, and monitoring of, drug treatments.
- ADAP funds are administered by the Florida Department of Health.
- Locally, ADAP pays for health insurance premiums under the Affordable Care Act Marketplace (ACA-MP).

ADAP Expenditures Report

Mission:
To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.

Vision: To be the **Healthiest State** in the Nation

Ron DeSantis
Governor

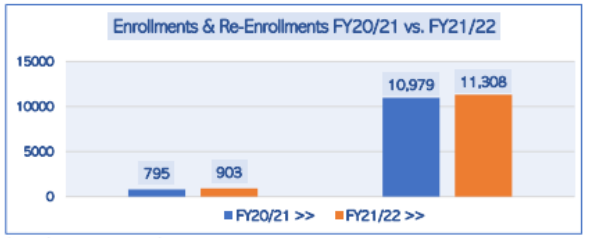
Joseph A. Ladapo, M.D., Ph.D.
State Surgeon General

June 1, 2022

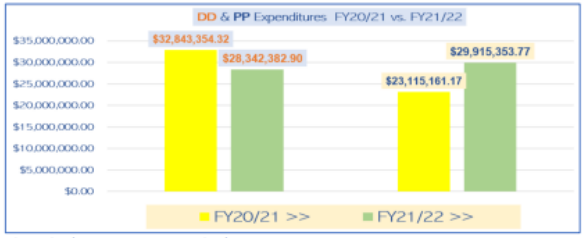
ADAP Miami-Dade / Summary Report – May 2022

FY 21/22	First Enrollments	6-mo. Re-Enrollments	OPEN ACTIVE	CHD Pharmacy Expenditures	RXs	Patients	RX/Pt	Premium Payments	Number of Premiums	Average Premium
FY20/21 >>	795	10,979	6,150	$32,843,354.32	52,678	17,944	2.9	$23,115,161.17	25,395	$ 910.22
FY21/22 >>	903	11,308	6,074	$28,342,382.90	49,549	16,381	3.0	$29,915,353.77	27,419	$1,091.04
Apr-22	113	914	6,143	$2,334,995.84	4,164	1,377	3.0	$2,885,135.63	2,429	$1,187.79
May-22	114	808	6,205	$2,428,021.98	4,295	1,385	3.1	$2,844,770.69	2,374	$1,198.30
Jun-22										
Jul-22										
Aug-22										
Sep-22										
Oct-22										
Nov-22										
Dec-22										
Jan-23										
Feb-23										
Mar-23										
FY22/23 >>	227	1,722		$4,763,017.82	8,459	2,762	3.1	$5,729,906.32	4,803	$1,192.98

*SOURCE: Provide - DATE: 06/01/22 - Subject to Review & Editing - * West Perrine Direct Dispense ~325 clients NOT INCLUDED. (Estimate - ~$5 million/TBC).*



** FY20/21: 11,774 v. FY21/22: 12,211 > Net Increase: 3.7% (New: +13.6%; Re-E: +3.0%)*



**FY20/21 $55,958,515.49 v FY21/22 $58,257,736.67. Net Increase: 4.1% (DD -13.7%; PP +29.4%)*

PROGRAM UPDATE
* Magellan RX PBM: for uninsured clients. Implementation: 4/1/22. Participating pharmacies: CVS Specialty Pharmacy (thru 9/30/22).
* Cabenuva utilization @ ADAP Miami (06/01/22): 107 *(1.7%)* clients. Direct Dispense 55 *(52%)*; Premium Plus 52 *(48%)*
* ACA-MP Special Enrollment Period: APTC+=>100% FPL; <150 % FPL. Requirements apply.

For additional information: www.ADAPMiami.com or ADAP.FLDOHMDC@flhealth.gov

Florida Department of Health in Miami-Dade County
ADAP Program & FLDOHMDC CHD Pharmacy
2515 W Flagler Street, Suite 102. Miami, Florida 33135 - Phone: 305-643-7400

Accredited Health Department
Public Health Accreditation Board

Why Understanding ADAP Matters

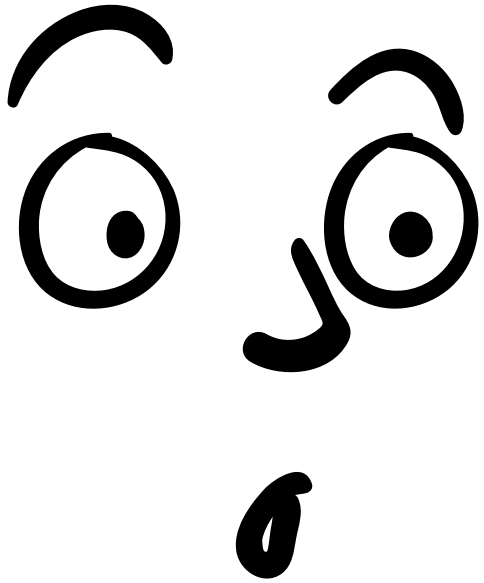
- *No one should ever be without HIV medication!*
- Members should review the ADAP Expenditures Report each month – posted at www.aidsnet.org/meeting-documents/ and available from Staff.
- ADAP reports include expenditures and:
  - important reminders about ADAP and ACA-MP enrollment and re-enrollment periods;
  - information on medication delivery options; and
  - updates on changes to the ADAP Prescription Drug Formulary.

Part C

- Part C funding is focused on services in rural areas and for traditionally underserved populations.
- Part C **Capacity Development** grants:
  - help organizations strengthen their infrastructure; and
  - helps grant recipients improve their ability to develop, enhance, or expand access to high-quality HIV primary health care services for people with HIV in low-income or rural communities.
- Part C **EIS "early intervention services"** grants:
  - fund primary health care and support services in outpatient settings for people with HIV.
  - Locally, Borinquen Health Care Center, Inc.; Empower U CHC; University of Miami; and Miami Beach Community Health Center received EIS funding in 2021.

Why Understanding Part C Matters

- Part C funds are available on a three- to five-year cycle to local community-based organizations, community health centers, health departments, and hospitals.
- If your organization could benefit from additional funding for **capacity building** or **early intervention services**, you should become familiar with the Part C grant cycle and requirements.
- Sign up for Part C funding alerts at www.grants.gov.



Which Part has a capacity building component?

a) Part A

b) Part B

c) ADAP

d) Part C

Knowledge Check

Part D

- RWHAP Part D provides funding to support family-centered HIV primary medical and support services for women, infants, children, and youth living with HIV.
  - Includes support services for family members.
  - Includes services designed to engage youth with HIV and retain them in care.

Part D Funding

- Local public and private health care entities, including hospitals, and public agencies are eligible for Part D competitive grant funding.
  - Recipients must coordinate with HIV education and prevention programs designed to reduce the risk of HIV infection among youth.
  - Locally, the University of Miami Department of Obstetrics, Gynecology and Reproductive Sciences is the Part D recipient.

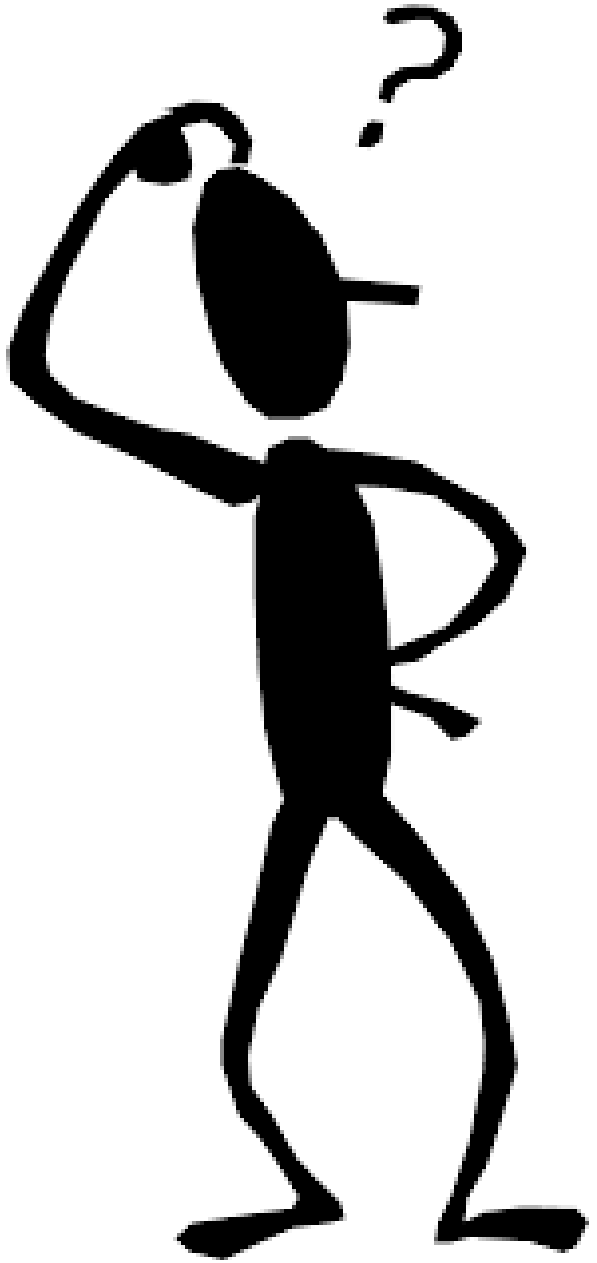
Why Understanding Part D Matters

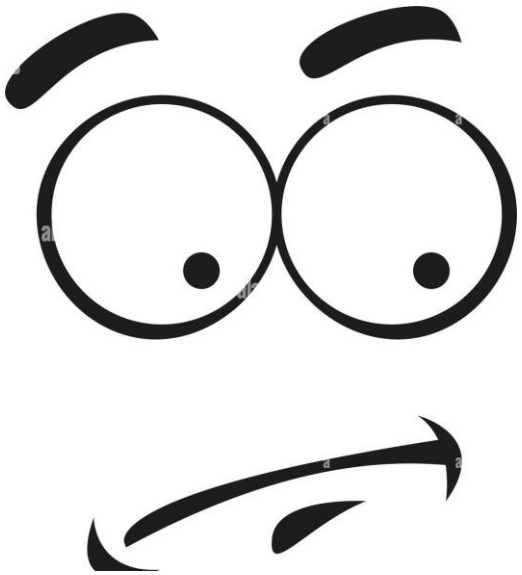
- Women with or at risk for HIV have special needs which are addressed by Part D, including:
  - preconception counseling;
  - sexual health;
  - obstetrical care;
  - gynecological care;
  - primary care;
  - behavioral health;
  - infant screening; and
  - other support services.
- Remember! Part A is payor of last resort!

Part E?

Fun Fact!

There is no RWHAP Part E.





Which Part funds services for women, infants, and children specifically?

a) Part A

b) Part B

c) Part C

d) Part D

Knowledge Check

Part F

- RWHAP Part F is divided into 4 components:
  1. **Minority AIDS Initiative (MAI)**
     - Helps RWHAP recipients improve access to HIV care and health outcomes for minority populations.
  2. **AIDS Education and Training Center (AETC) Program**
     - Provides training and technical assistance to providers treating patients with or at risk for HIV.
  3. **Special Projects of National Significance (SPNS)**
     - Develops innovative models of HIV care and treatment to respond to RWHAP client needs
  4. **Dental Programs**
     - Provides oral health care for people with HIV and education about HIV for dental care providers.

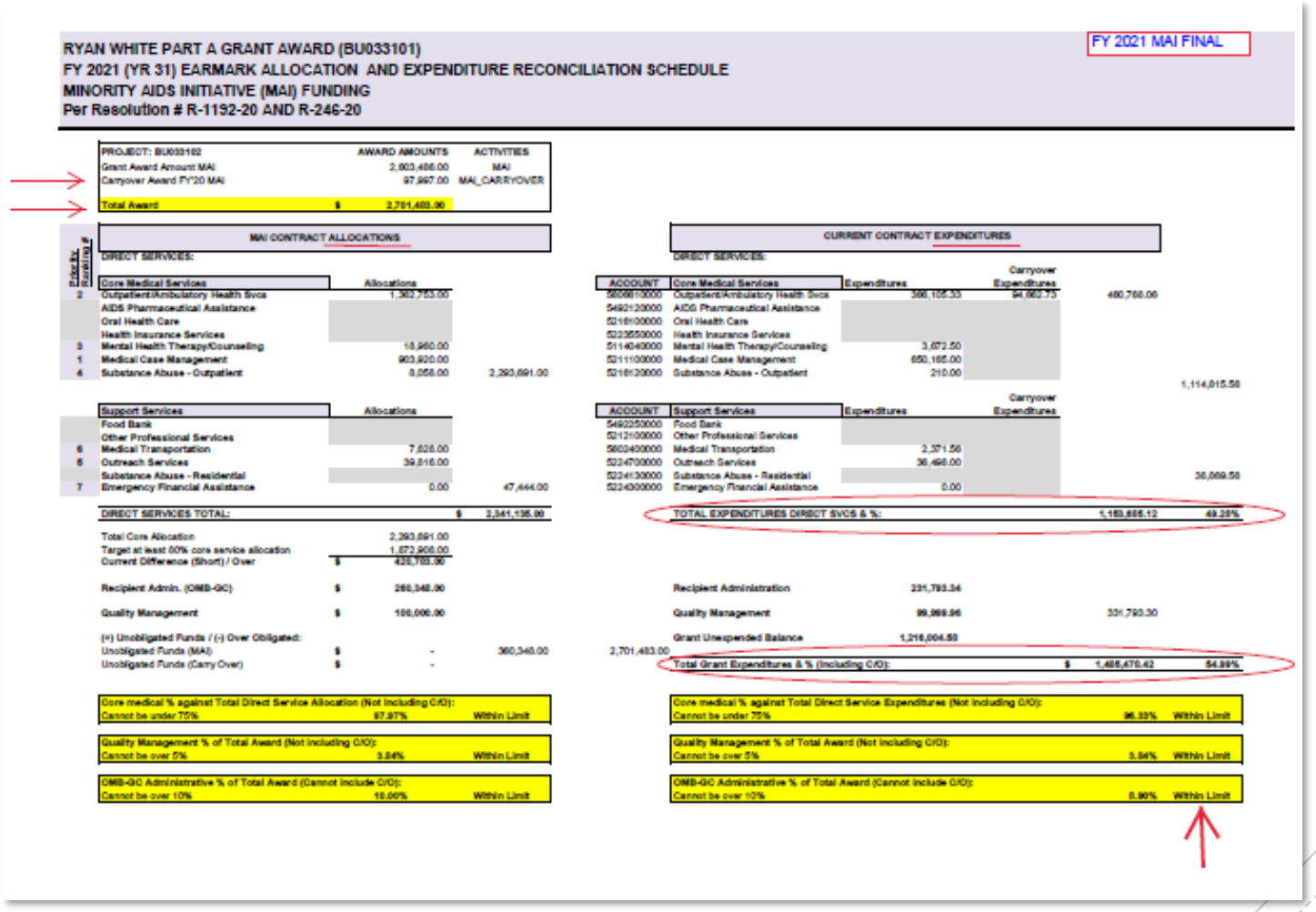
Part F: Minority AIDS Initiative (MAI)

- MAI funds are used to improve access to HIV care and improve health outcomes for disproportionately affected racial and ethnic minorities.
- MAI funds are secured on a three-year cycle as part of the Part A grant application.
- Funds are awarded on a formula based on the number of racial and ethnic minority individuals with HIV/AIDS in the jurisdiction.

Funded MAI Services

- Just like Part A and Part B funds, at least 75% of MAI funding must be spent on Core Medical Services and no more than 25% of MAI funding can be spent on Support Services.
- These Core Medical Services receive MAI funding in our EMA:
  - Medical Case Management, including Treatment-Adherence Services
  - Mental Health Services
  - Outpatient/Ambulatory Health Services
  - Substance Abuse Outpatient Care
- These Support Services may receive MAI funding in our EMA:
  - Emergency Financial Assistance
  - Medical Transportation
  - Outreach Services

MAI Report



RYAN WHITE PART A GRANT AWARD (BU033101)
FY 2021 (YR 31) EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE
MINORITY AIDS INITIATIVE (MAI) FUNDING
Per Resolution # R-1192-20 AND R-246-20

FY 2021 MAI FINAL

PROJECT: BU033102	AWARD AMOUNTS	ACTIVITIES
Grant Award Amount MAI	2,603,486.00	MAI
Carryover Award FY'20 MAI	97,997.00	MAI_CARRYOVER
Total Award	$ 2,701,483.00	

MAI CONTRACT ALLOCATIONS

DIRECT SERVICES:

Priority Ranking #	Core Medical Services	Allocations	
2	Outpatient/Ambulatory Health Svcs	1,382,753.00	
	AIDS Pharmaceutical Assistance		
	Oral Health Care		
	Health Insurance Services		
3	Mental Health Therapy/Counseling	15,960.00	
1	Medical Case Management	903,920.00	
4	Substance Abuse - Outpatient	8,058.00	2,293,691.00

Priority Ranking #	Support Services	Allocations	
	Food Bank		
	Other Professional Services		
6	Medical Transportation	7,626.00	
5	Outreach Services	39,816.00	
	Substance Abuse - Residential		
7	Emergency Financial Assistance	0.00	47,444.00

DIRECT SERVICES TOTAL:		$ 2,341,135.00
Total Core Allocation	2,293,691.00	
Target at least 60% core service allocation	1,872,906.00	
Current Difference (Short) / Over	$ 420,785.00	
Recipient Admin. (OMB-GC)	$ 280,348.00	
Quality Management	$ 100,000.00	
(+) Unobligated Funds / (-) Over Obligated:		
Unobligated Funds (MAI)	$ -	360,348.00
Unobligated Funds (Carry Over)	$ -	

Core medical % against Total Direct Service Allocation (Not Including C/O):		
Cannot be under 75%	97.97%	Within Limit
Quality Management % of Total Award (Not Including C/O):		
Cannot be over 5%	3.84%	Within Limit
OMB-GC Administrative % of Total Award (Cannot Include C/O):		
Cannot be over 10%	10.06%	Within Limit

CURRENT CONTRACT EXPENDITURES

DIRECT SERVICES:

ACCOUNT	Core Medical Services	Expenditures	Carryover Expenditures	
5600610000	Outpatient/Ambulatory Health Svcs	366,105.33	94,662.75	460,768.08
5492120000	AIDS Pharmaceutical Assistance			
5216100000	Oral Health Care			
5223550000	Health Insurance Services			
5114040000	Mental Health Therapy/Counseling	3,672.50		
5211100000	Medical Case Management	650,165.00		
5216120000	Substance Abuse - Outpatient	210.00		
				1,114,015.58

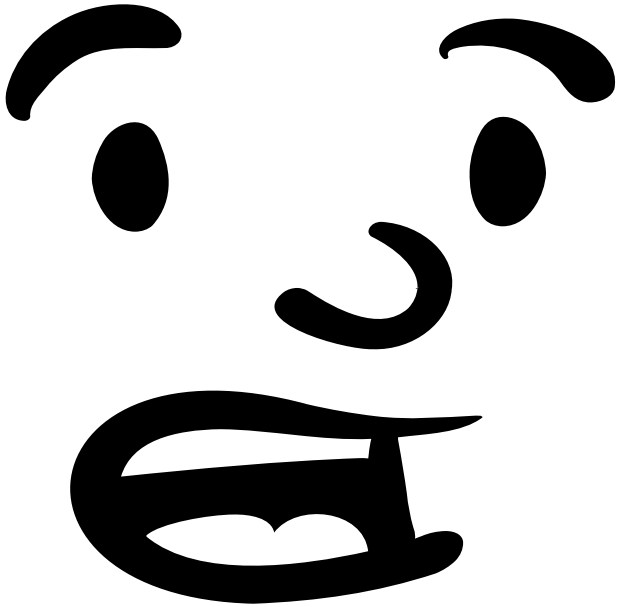
ACCOUNT	Support Services	Expenditures	Carryover Expenditures	
5492250000	Food Bank			
5212100000	Other Professional Services			
5602400000	Medical Transportation	2,371.56		
5224700000	Outreach Services	36,466.00		
5224130000	Substance Abuse - Residential			38,069.56
5234300000	Emergency Financial Assistance	0.00		

TOTAL EXPENDITURES DIRECT SVCS & %:			1,152,085.12	49.28%
Recipient Administration	231,793.34			
Quality Management	99,999.96		331,793.30	
Grant Unexpended Balance	1,218,004.58			
2,701,483.00				
Total Grant Expenditures & % (Including C/O):			$ 1,485,478.42	54.99%

Core medical % against Total Direct Service Expenditures (Not Including C/O):		
Cannot be under 75%	96.33%	Within Limit
Quality Management % of Total Award (Not Including C/O):		
Cannot be over 5%	3.84%	Within Limit
OMB-GC Administrative % of Total Award (Cannot Include C/O):		
Cannot be over 10%	0.90%	Within Limit

Why Understanding MAI Matters

- The Miami-Dade HIV/AIDS Partnership is responsible for prioritizing MAI services and allocating MAI funds in our EMA.
- As a Partnership member, you have a say in the allocation of almost $3 Million for the MAI services outlined above.
- Members should review the MAI Expenditures Report each month – posted at www.aidsnet.org/meeting-documents/ and available from Staff.



The Miami-Dade HIV/AIDS Partnership allocates funds for services under:

a) Part D

b) Part C

c) Part A/MAI

d) ADAP

Knowledge Check

Part F: AIDS Education and Training Centers (AETCs)

- The AETC supports a network of 8 regional centers that provide targeted, multidisciplinary education and training programs for health care providers serving people with HIV:
  - Training is intended to increase the number of providers prepared and motivated to counsel, diagnose, treat, and medically manage people with HIV.
  - A link to the complete calendar of AETC webinars and events is online at http://aidsnet.org/community-news/training/.

Part F: AIDS Education and Training Centers (AETCs)

- The Program also includes two national AETC centers:
  - National Coordinating Resource Center which offers free, targeted training to new and experienced HIV care providers; and
  - National Clinician Consultation Center which responds to questions from clinicians.

Part F: Special Project of National Significance (SPNS)

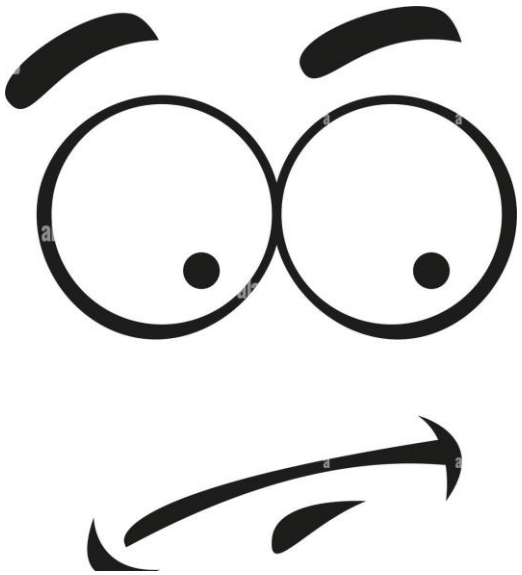
- Part F Special Projects of National Significance (SPNS) Program supports the development of innovative models of HIV care and treatment to quickly respond to emerging needs of RWHAP clients.
- Through its demonstration, implementation, and IT projects, SPNS uses implementation science to evaluate the design, implementation, utilization, cost, and health-related outcomes of treatment strategies.
- SPNS promotes the dissemination and replication of successful interventions.
- Current SPNS opportunity: *Increasing Uptake of Long-Acting Injectable Antiretrovirals Among People with HIV* (closes June 21, 2022)

Part F: Dental Services

- Part F dental grants fund two programs:
  - The Dental Reimbursement Program (DRP) run by dental schools and other dental programs; and
  - The Community-Based Dental Partnership Program (CBDPP) to provide dental services for people with HIV while providing education and clinical training for dental care providers
- Funded services include:
  - oral health care for people with HIV, and
  - education and training for oral health providers.

Why Understanding Part F Matters

- Part F funds a variety of programs and training modules to improve HIV service delivery and ultimately improve the life of people with HIV.
- Free webinars and online events to enhance service delivery are held almost daily through the AETC.
  - Find the calendar of events at www.seaetc.com/calendar/
- Your agency may benefit Part F funding opportunities.
  - Sign up for Part F funding alerts at www.grants.gov.



Part F is composed of all the following ***<u>except:</u>***

a) Dental Services

b) Special Projects of National Significance

c) Early Intervention Services

d) Minority AIDS Initiative

Knowledge Check

Importance of Collaboration Across RWHAP Parts

- Representatives of all RWHAP Parts are members of all Part A planning councils/planning bodies (PC/PBs) – locally, the Miami-Dade HIV/AIDS Partnership.
  - All Parts are collaborators in the development of the HRSA/CDC Integrated HIV Prevention and Care Plan.
  - Come to Partnership meetings to meet the RWHAP representatives!
- Coordination across all RWHAP Parts helps people with HIV and service providers make the most of available resources and continue to improve the service system.

Putting it all Together: Coordination of Care Across All RWHAP Parts

- A single RWHAP client might receive:
  - Medications through **Part B ADAP**;
  - Oral health care from a **Part F**-funded dental program;
  - Food bank from a **Part A**-funded provider;
  - Support services funded through **Part C**; and
  - could participate in a RWHAP Part F demonstration **SPNS** project.

Resources & References

- Miami-Dade HIV/AIDS Partnership Website
  - Reports: aidsnet.org/meeting-documents/
  - Training: aidsnet.org/community-news/training/
  - Grants: aidsnet.org/community-news/grant-opportunities/
  - Membership: aidsnet.org/membership/
  - Calendar: aidsnet.org/calendar/
- HRSA Ryan White Program Website
  - ryanwhite.hrsa.gov/about/parts-and-initiatives
- TargetHIV: Tools for HRSA's RWHAP
  - targethiv.org/
- Grants.gov
  - www.grants.gov

Q&A

- Thank you for joining our **Get on Board!** presentation!
- Please raise your hand or chat your questions.
- Answers to questions we do not get to today will be posted with this presentation at http://aidsnet.org/getonboard/
- Contact us for more information and to learn how you can be a decision-maker with the Partnership!
  - Marlen Meizoso, M.A., Project Manager/Research Associate, Marlen@behavioralscience.com
  - Christina Bontempo, Project Manager/Community Liaison, Cbontempo@behavioralscience.com