



Get on Board: Member Enhancement Training

Station 15: Ryan White Part A Program

June 5, 2024

Presentation created by Behavioral Science Research Corp.





Get on Board!

Member Enrichment Training Series



Training sessions are designed to promote understanding of the Ryan White Program planning council (Partnership) and service system.



Your presenters are Marlen Meizoso and Christina Bontempo, Partnership Staff who have more than 40 years combined experience with the Partnership and the Ryan White Program.



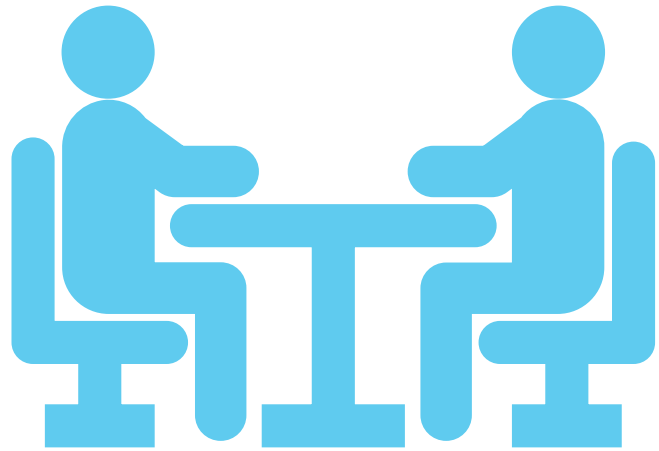
Please chat questions or comments to us throughout today's presentation.



This presentation will be posted online at www.aidsnet.org/the-partnership/#getonboard1.



Contact us at (305) 445-1076.



Today's Objectives

- Understand what the Ryan White Part A Program (Part A) is.
- Introduce concepts and terms to assist you in understanding meeting terms related to Part A.
- Introduce locally-funded Part A services.
- Identify where to find Part A reports.
- Learn why understanding Part A is important to you as a Partnership member, a persons with HIV, or as a Ryan White provider.

Ryan White HIV/AIDS Program Part A

- ▶ The Ryan White HIV/AIDS Program (**RWHAP** or **RWP**) is a Federal program that supports HIV services under the Health Resources and Service Administration (**HRSA**).
- ▶ RWP Part A funds grants to Eligible Metropolitan Areas (**EMAs**) and Transitional Grant Areas (**TGAs**) that are most affected by the HIV epidemic.
- ▶ Miami-Dade County is an EMA.
- ▶ EMA's are required by HRSA to have a planning council (**PC**).
- ▶ In our EMA, the planning council is called the Miami-Dade HIV/AIDS Partnership (**Partnership**).

Why Understanding the Ryan White Part A Matters?



The Miami-Dade HIV/AIDS Partnership (Planning Council) is responsible for prioritizing Part A/MAI services and allocating Part A/MAI funds in our EMA.



Partnership members are responsible for Priority Setting and Resource Allocations (PSRA) the current 13 Ryan White Program Part A and 7 MAI Core Medical Services and Support Services.



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/MAI Expenditures Report each month - posted at <https://aidsnet.org/the-partnership/#pshipreports1> and available from Staff.

Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds

*Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18)
Replaces Policy #10-02*

Scope of Coverage: Health Resources and Services Administration (HRSA) Ryan White HIV/AIDS Program (RWHAP) Parts A, B, C, and D, and Part F where funding supports direct care and treatment services.

Purpose of PCN

This policy clarification notice (PCN) replaces the HRSA HIV/AIDS Bureau (HAB) PCN 10-02: Eligible Individuals & Allowable Uses of Funds. This PCN defines and provides program guidance for each of the Core Medical and Support Services named in statute and defines individuals who are eligible to receive these HRSA RWHAP services.

Background

The Office of Management and Budget (OMB) has consolidated, in 2 CFR Part 200, the uniform grants administrative requirements, cost principles, and audit requirements for all organization types (state and local governments, non-profit and educational institutions, and hospitals) receiving federal awards. These requirements, known as the "Uniform Guidance," are applicable to recipients and subrecipients of federal funds. The OMB Uniform Guidance has been codified by the Department of Health and Human Services (HHS) in [45 CFR Part 75—Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards](#). HRSA RWHAP grant and cooperative agreement recipients and subrecipients should be thoroughly familiar with 45 CFR Part 75. Recipients are required to monitor the activities of its subrecipient to ensure the subaward is used for authorized purposes in compliance with applicable statute, regulations, policies, program requirements and the terms and conditions of the award (see [45 CFR 55.75.351-352](#)).

[45 CFR Part 75, Subpart E—Cost Principles](#) must be used in determining allowable costs that may be charged to a HRSA RWHAP award. Costs must be necessary and reasonable to carry out approved project activities, allocable to the funded project, and allowable under the Cost Principles, or otherwise authorized by the RWHAP statute. The treatment of costs must be consistent with recipient or subrecipient policies and procedures that apply uniformly to both federally-financed and other non-federally funded activities.

HRSA HAB has developed program policies that incorporate both HHS regulations

Policy Clarification Notice #16-02 Allowable Services

- ▶ “PCN Sixteen–Oh–Two”
- ▶ The ultimate guide of the 28 services that can be funded under Part A.

Part A Locally-Funded Core Medical Services

- ▶ **Seven Core Medical Services (= or >75%)**
 - ▶ Outpatient/Ambulatory Health Services (medical services including doctor visits, labs, etc.)
 - ▶ AIDS Pharmaceutical Assistance (prescription drugs)
 - ▶ Oral Health Care (dental care)
 - ▶ Health Insurance Services (health insurance wrap around services)
 - ▶ Mental Health Therapy/Counseling (mental health visits with licensed therapist)
 - ▶ Medical Case Management (assistance with navigating health care)
 - ▶ Substance Abuse-Outpatient (overcoming substance use in an outpatient setting)

Part A Locally-Funded Support Services

- ▶ **Six Support Services (< 25%)**
 - ▶ Food Bank (bag of food)
 - ▶ Other Professional Services-Legal and Permanency planning (legal assistance for HIV related issues)
 - ▶ Medical Transportation (transportation services to get to health-related appointments)
 - ▶ Outreach services (assist in returning clients to care)
 - ▶ Substance Abuse-Residential (overcoming substance use in a residential facility)
 - ▶ Emergency Financial Assistance (restricted to assisting with prescriptions provided for TTRA [Test and Treat Rapid Access])



Priority Setting

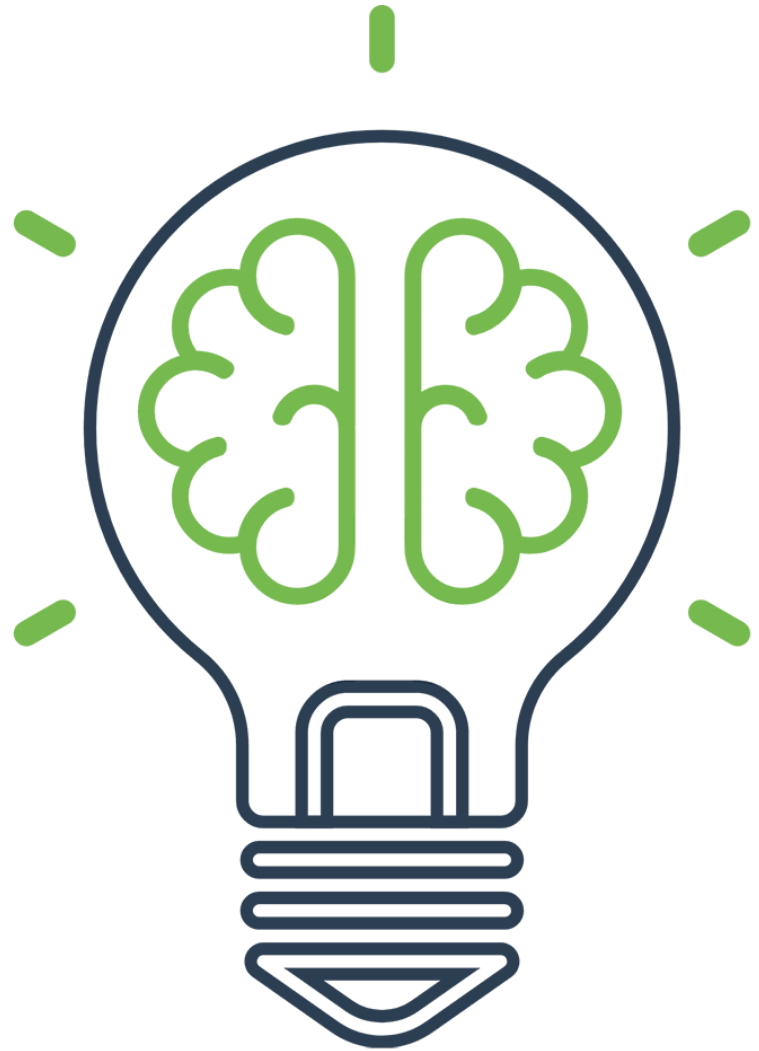
Partnership members are responsible for Priority Setting and Resource Allocations (PSRA).

- ▶ Care and Treatment Committee Members make PSRA recommendations based on Needs Assessment data.
 - ▶ Members *prioritize* all 28 fundable services as described in PCN #16-02.
 - ▶ Members *allocate resources* to the 13 locally-funded Part A services and the 7 locally-funded MAI services.



Resource Allocation

- ▶ There are three components of RWP Funds:
 - 1) Formula
 - ▶ Based on number of people living with HIV/AIDS in the EMA.
 - 2) Supplemental
 - ▶ Based on the competitive grant award.
 - 3) Minority AIDS Initiative (MAI)
 - ▶ Based on number of persons representing racial/ethnic minorities in the EMA.
- ▶ 75% of funds **MUST BE ALLOCATED** to **core** services.
- ▶ **NO MORE THAN 25%** of funds may be allocated to **support** services.



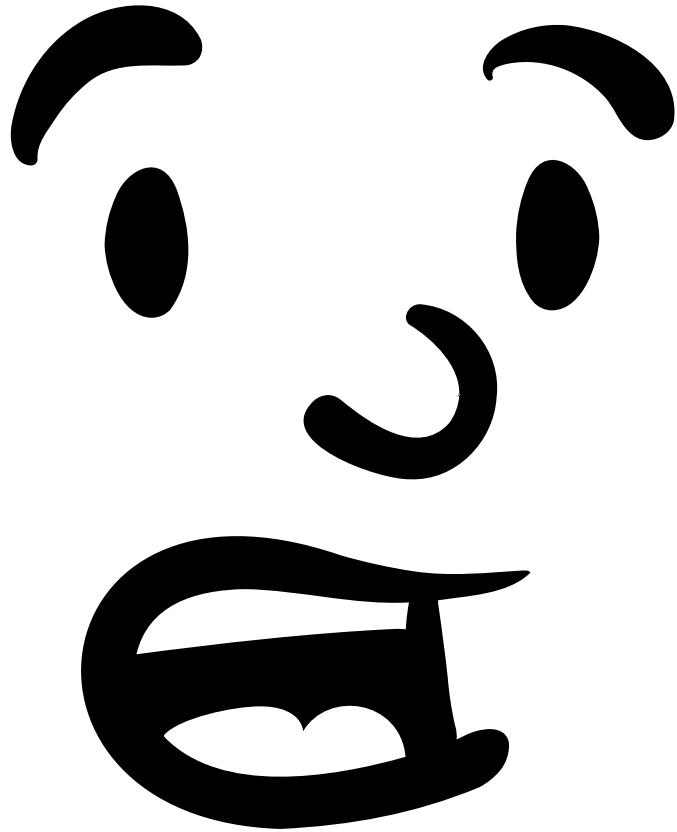
Knowledge Check

There are 7 Part A Core Medical Services and 4 MAI Core Medical Services.

Core Medical Services allocations must be:

- A. At least 25%
- B. At least 50%
- C. At least 75%
- D. 100%

Please CHAT your answer.



Knowledge Check

There are 6 locally-funded Part A Support Services and 3 locally-funded MAI Support Services.

Support Services allocations cannot be:

- A. More than 25%
- B. More than 50%
- C. More than 75%
- D. 100%
- E. There are no limits

Please CHAT your answer.

How to Access Reports



Miami-Dade County's Official Ryan White Program Planning Council for HIV Prevention and Care.

SERVING

9,060

people with HIV

Our vision is to eliminate disparities and improve health outcomes for all people living with or at risk for HIV/AIDS.



The Partnership



Executive Committee



Care and Treatment Committee



Needs Assessment



Medical Care Subcommittee



Community Coalition Roundtable



Housing Committee



Strategic Planning Committee



Prevention Committee



Integrated Plan and Ending the HIV Epidemic



Integrated Plan Evaluation Workgroup



Joint Integrated Plan Review Team



Partnership, Recipient, and Grantee Reports



Get On Board! Planning Council Member Enrichment Training



New Member Orientation



Join the Partnership!



Join a Partnership Committee!



RSVP or Contact Us

Partnership, Recipient, and Grantee Reports

Members are asked to review reports in advance of meetings.

For questions or to request a paper copy of any report(s), please contact hiv-aidsinfo@behavioralscience.com.



PARTNERSHIP REPORTS

- [Top Line Summaries Report](#) (March 18, 2024, revised)
- [Partnership Report to Committees](#) (March 18, 2023)
- [Membership Report - Members and Vacancies](#) (April 24, 2024)



RECIPIENT AND GRANTEE REPORTS

- [Top Line Summaries Report](#) (March 18, 2024, revised)
- [Ryan White Program Part A / MAI - Expenditures](#) (April 4, 2024)
- [Ryan White Program Part A / MAI - Utilization & Service Definitions](#) (March 27, 2024)
- [Ryan White Part B](#) (January 2024)
- [General Revenue](#) (January 2024)
- [AIDS Drug Assistance Program \(ADAP\)](#) (March 2024)



YEAR END REPORTS

- [Ryan White Program Part A / MAI Monthly and Year-To-Date Service Utilization Summary with service unit definitions](#) (End of FY2022)
- [Ryan White Program Part A / Minority AIDS Initiative \(MAI\) FY2022 Expenditures Report](#) (End of FY 2022)
- [Year 2022-2023 Ryan White Program Part B Report](#) (Final)



SPECIAL REPORTS AND PROGRAM UPDATES

- [ADAP Formulary](#) (March 2024)
- [Patient Care Policies and Procedures](#) Minimum requirements for clients to receive ADAP assistance with health insurance obtained through the federally facilitated Marketplace
- [HOPWA Program Directive: #2023/2024 #001; 2024 Revised Rent Payment Standards Applicable to HOPWA Tenant Based Rental Assistance \(TBRA\) Program](#)
- [HOPWA: Excerpts from the Consolidated Annual Performance and Evaluation Report \(CAPER\) Measuring Performance Outcomes](#)



RETURN TO MENU

Terms to Know

These are some of the terms we use when talking about expenditures:

- ▶ **HRSA:** The Health Resources and Services Administration – This is where the grant money comes from to fund the Ryan White Program.
- ▶ **Formula Funds:** The amount of money HRSA allows based on the number of people with HIV in our area.
- ▶ **Supplemental Funds:** The additional money we ask for in our grant.
- ▶ **Carryover Funds:** Any monies not spent in the past year which HRSA agrees to let us spend this year.
- ▶ **Unobligated Funds:** Monies which have not been assigned to a contracted subrecipient.

More Terms to Know

These are some of the terms we use when talking about expenditures:

- ▶ **Fiscal Year:** March 1 of a year through the end of February of the following year
- ▶ **Allocation:** The amount of money the Partnership agrees should be spent in each *service category* during the Fiscal Year.
- ▶ **Direct Services:** Funds spent on Core Medical and Support Services – The Partnership is responsible for allocating these funds.
- ▶ **Grantee or Recipient:** Miami-Dade County Office of Management and Budget - aka “The County”
- ▶ **Subrecipient:** Service Providers contracted by The County

Expenditure Report

PART A

This report includes YTD paid reimbursements for FY 2022 Part A service months up to February 2023, as of 5/3/2023. This report reflects final reimbursement requests that were due by 4/7/2023; and have been paid thus far. Pending Part A reimbursement requests that have been received and are in the review process total \$415,337.60. Miami-Dade County staff are still in the process of closing out FY 2022, as well as processing the final invoices and administrative charges. A final expenditure report will be forthcoming.

RYAN WHITE PART A GRANT AWARD (Grant #: BURW3201)
EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR32
FORMULA AND SUPPLEMENTAL FUNDING
 Per Resolution #8: R-1182-21, R-248-20, R-247-20 & R-817-18

Project #: BURW3201	AWARD AMOUNTS	ACTIVITIES	
Grant Award Amount Formula	16,141,300.00	FORMULA	FY 2022 Award
Grant Award Amount Supplemental	4,121,825.00	SUPPLEMENTAL	304,522.00
Grant Award Amount FY20 Supplemental	4,208,879.00	FY_SUPPLEMENTAL	
Carryover Award FY21 Formula	4,026,427.00	CARRYOVER	
Total Award	\$ 28,506,431.00		

Note:
 The recipient has reached its budgeted direct services Formula minimum expenditures. Until the end of the current period of performance, only budgeted Administrative and Quality Management expenditures and a carryover allowance will be applied to this funding source in order to surpass the 95% minimum expenditure threshold.

CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER

Priority Order	Account	Core Medical Services	Allocations	Carryover Allocations
4	5008910000	ALCO Pharmaceutical Assistance	84,492.00	
6	5008910000	Health Insurance Services	320,176.00	259,404.00
1	5008910000	Medical Case Management	5,826,737.00	493,000.00
3	5008910000	Mental Health Therapy/Counseling	51,237.00	91,457.00
3	5008910000	Oral Health Care	3,894,445.00	1,000,000.00
2	5008910000	Outpatient/Ambulatory Health Svcs	6,946,763.00	600,000.00
9	5008910000	Substance Abuse - Outpatient	20,046.00	17,369.00
		CORE Services Total:		30,250,269.00

CURRENT CONTRACT EXPENDITURES

Account	Core Medical Services	Expenditures	Carryover Expenditures
5008910000	ALCO Pharmaceutical Assistance	3,254.10	
5008910000	Health Insurance Services	297,151.81	0.00
5008910000	Medical Case Management	5,415,024.15	0.00
5008910000	Mental Health Therapy/Counseling	51,237.00	10,203.00
5008910000	Oral Health Care	3,894,445.00	438,169.50
5008910000	Outpatient/Ambulatory Health Svcs	7,691,572.85	0.00
5008910000	Substance Abuse - Outpatient	4,401.00	0.00
	CORE Services Total:	18,719,378.01	438,169.50

Priority Order	Account	Support Services	Allocations	Carryover Allocations
11	5008910000	Emergency Financial Assistance	9,853.00	
8	5008910000	Food Bank	1,000,100.00	1,000,000.00
9	5008910000	Medical Transportation	209,912.00	
13	5008910000	Other Professional Services	154,449.00	
12	5008910000	Outreach Services	179,086.00	
7	5008910000	Substance Abuse - Residential	1,330,400.00	200,000.00
		SUPPORT Services Total:	4,750,814.00	1,200,000.00

Account	Support Services	Expenditures	Carryover Expenditures
5008910000	Emergency Financial Assistance	0.00	
5008910000	Food Bank	1,540,864.00	1,000,000.00
5008910000	Medical Transportation	193,061.00	
5008910000	Other Professional Services	67,581.00	
5008910000	Outreach Services	114,024.88	
5008910000	Substance Abuse - Residential	1,050,800.00	0.00
	SUPPORT Services Total:	3,967,024.78	1,000,000.00

DIRECT SERVICES TOTAL:	\$ 28,506,431.00		
Total Core Allocation	17,890,549.00		
Target at least 80% core service allocation	17,149,080.40		
Current Difference (Short)/ Over	\$ 741,468.60		
Recipient Admin. (QC, QTL, BSR Start)	\$ 2,453,208.00		
Quality Management	\$ 641,222.00		
(+) Unobligated Funds / (-) Over Obligated:			
Unobligated Funds (Formula & Supp)	\$ -		
Unobligated Funds (Carry Over)	\$ 507,727.00	3,967,024.78	28,506,571.00

TOTAL EXPENDITURES DIRECT SVCS & %:	\$ 22,686,392.77	80.0%
Formula Expenditure %		94.8%
5008710000 Recipient Administration	1,640,204.50	
5008800000 Quality Management	620,491.00	3,260,515.50
Grant Unexpended Balance	FY 2022 Award	Carryover
	3,842,718.15	3,654,964.50
Total Grant Expenditures & %:	\$ 22,912,968.20	80.0%

Core medical % against Total Direct Service Allocation (Not including QC):
 Cannot be under 75% **81.4%** **Within Limit**

Quality Management % of Total Award (Not including QC):
 Cannot be over 5% **2.2%** **Within Limit**

OMB-QC Administrative % of Total Award (Cannot include QC):
 Cannot be over 10% **16.9%** **Within Limit**

Core medical % against Total Direct Service Expenditures (Not including QC):
 Cannot be under 75% **85.5%** **Within Limit**

Quality Management % of Total Award (Not including QC):
 Cannot be over 5% **2.7%** **Within Limit**

OMB-QC Administrative % of Total Award (Cannot include QC):
 Cannot be over 10% **6.8%** **Within Limit**

Service Utilization

**RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA**

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY
FOR THE PERIOD OF:

February 2023

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A
Ryan White MAI

SERVICE CATEGORIES

Core Medical Services

AIDS Pharmaceutical Assistance (LPAP/CPAP)
Health Insurance Premium and Cost Sharing Assistance
Medical Case Management
Mental Health Services
Oral Health Care
Outpatient Ambulatory Health Services
Substance Abuse Outpatient Care

Support Services

Food Bank/Home Delivered Meals
Medical Transportation
Other Professional Services
Outreach Services
Substance Abuse Services (residential)

	Service Units		Unduplicated Client Count	
	Monthly	Year-to-date	Monthly	Year-to-date
AIDS Pharmaceutical Assistance (LPAP/CPAP)	4	252	4	156
Health Insurance Premium and Cost Sharing Assistance	169	4,852	125	1,454
Medical Case Management	8,931	99,114	4,282	8,052
Mental Health Services	41	766	17	101
Oral Health Care	786	9,687	598	2,575
Outpatient Ambulatory Health Services	1,943	31,330	1,089	4,506
Substance Abuse Outpatient Care	3	73	2	22
Support Services				
Food Bank/Home Delivered Meals	1,932	21,700	730	1,130
Medical Transportation	198	5,143	117	727
Other Professional Services	48	751	15	78
Outreach Services	68	847	24	155
Substance Abuse Services (residential)	363	4,684	21	72
TOTALS:	14,486	179,199		

Total unduplicated clients (month):

5,067

Total unduplicated clients (YTD):

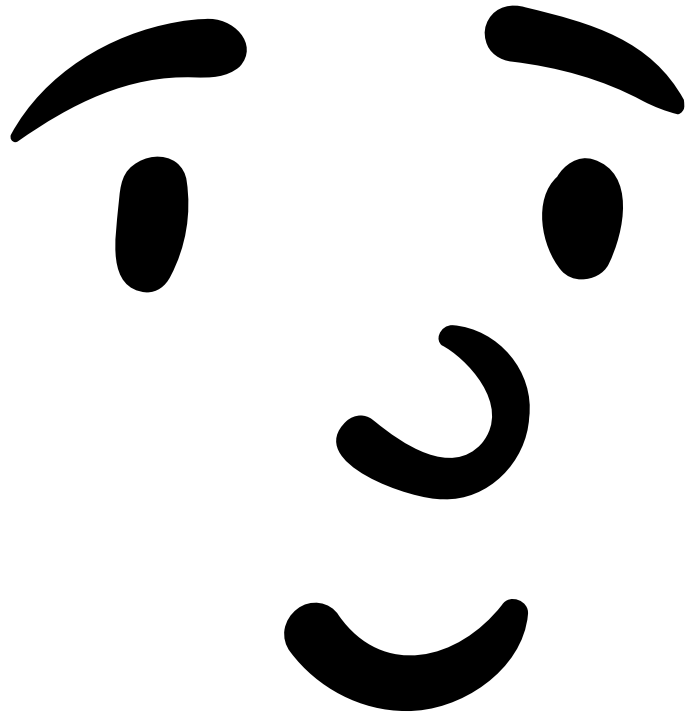
8,584

See page 4 for
Service Unit
Definitions

NOTE: Amounts above are subject to change as we complete closeout of FY 2023. A recent CQM Report Card reflects 8,599 clients served in past 12 months. We are reviewing the data to determine the cause of the difference in the YTD for this report (= 15 clients).

Page 1 of 4

REPORT COMPILED ON: 05/03/2023



Knowledge Check

Expenditure Reports are available:

- A. On-line at AIDSNET.org
- B. Via email, by request
- C. Via mail, by request
- D. All of the above

Please CHAT your answer.

Details on Expenditure Reports

- ▶ Expenditure Reports contain A LOT of data.
- ▶ We will look at what information is covered in the reports.
- ▶ For review purposes the report is being divided into six quadrants.

1

RYAN WHITE PART A GRANT AWARD (Grant #: BURW201)
EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YEAR
FORMULA AND SUPPLEMENTAL FUNDING
 Per Resolution #s: R-1162-21, R-248-20, R-248-20 & R-617-19

2

This report includes YTD paid reimbursements for FY 2022 Part A service months up to February 2023, as of 2/23/2023. This report reflects final reimbursement requests that were due by 4/7/2023; and have been paid thus far. Pending Part A reimbursement requests that have been received and are in the review process total \$415,337.50. Miami-Dade County staff are still in the process of closing out FY 2022, as well as processing the final invoices and administrative charges. A final expenditure report will be forthcoming.

3

CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER

Activity	Allocation	Carryover
Direct Services:		
4. Core Medical Services		
4.100 Professional Assistance	64,480.00	
6 Health Insurance Services	325,735.00	259,904.00
8 Medical Case Management	5,026,727.00	400,000.00
3 Mental Health Therapy/Counseling	51,457.00	51,457.00
5 Oral Health Care	2,854,445.00	1,000,000.00
2 Outpatient/Ambulatory Health Svcs	8,565,763.00	800,000.00
9 Substance Abuse - Outpatient	28,044.00	17,369.00
CORE Services Total:	20,255,299.00	
Support Services:		
11 Emergency Financial Assistance	9,853.00	
8 Food Svcs	1,000,000.00	1,000,000.00
10 Medical Transportation	208,912.00	
13 Other Professional Services	154,446.00	
12 Outreach Services	130,000.00	
7 Substance Abuse - Residential	1,336,406.00	200,000.00
SUPPORT Services Total:	4,730,616.00	
DIRECT SERVICES TOTAL:		\$ 25,085,915.00
Total Core Allocation	17,890,546.00	
Target at least 87% core service allocation	17,126,581.45	
Current Difference (Short) Over	\$ 763,964.55	
Recipient Admin. (QC, QTL, BSR Start)	\$ 2,451,209.00	
Quality Management	\$ 615,522.00	

4

CURRENT CONTRACT EXPENDITURES

Account	Current Contract Expenditures	Carryover
Direct Services:		
500801000	3,004.10	
500802000	297,151.61	0.00
500807000	5,415,034.15	0.00
500808000	51,233.00	12,253.00
500809000	2,854,445.00	426,169.50
500810000	7,661,572.65	0.00
500811000	4,671.00	0.00
CORE Services Total:	16,779,318.01	
Support Services:		
500804000	1,540,864.00	1,000,000.00
500805000	153,964.90	
500806000	67,581.20	
500803000	114,624.95	
500809000	1,050,800.00	0.00
SUPPORT Services Total:	3,867,074.75	
TOTAL EXPENDITURES DIRECT SVCS & %:	\$ 20,646,392.77	82.56%
Formula Expendure %:	84.94%	
500810000	Recipient Administration	1,842,024.58
500808000	Quality Management	620,491.00
		2,392,515.58

5

Unobligated Funds (Carry Over) \$ 507,227.00 3,902,458.00 20,000

Core Medical % against Total Direct Services Allocation (not including CTO)	83.44%	With Level
Quality Management % of Total Award (not including CTO)	2.92%	With Level
OMB-QC Administrative % of Total Award (not including CTO)	10.89%	With Level

6

Total Grant Expenditures & %	\$ 22,172,667.53	88.06%
Core Medical % against Total Direct Services Expenditures (not including CTO)	85.56%	With Level
Quality Management % of Total Award (not including CTO)	2.92%	With Level
OMB-QC Administrative % of Total Award (not including CTO)	6.89%	With Level

Section 1: The Details

1. Title

RYAN WHITE PART A GRANT AWARD (Grant #: BURW3201)
EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR32
FORMULA AND SUPPLEMENTAL FUNDING
Per Resolution #S: R-1162-21, R-246-20, R-247-20 & R-817-19

2. Grant number and resolution numbers related to the grant

3. Grant Award Amounts (\$)

Project #: BURW3201	AWARD AMOUNTS	ACTIVITIES	
Grant Award Amount Formula	16,141,380.00	FORMULA	
Grant Award Amount Supplemental	4,121,835.00	SUPPLEMENTAL	FY 2022 Award
Grant Award Amount FY'20 Supplemental	4,268,879.00	PY_SUPPLEMENTAL	<u>\$24,532,094</u>
Carryover Award FY'21 Formula	4,076,477.00	CARRYOVER	
Total Award	\$ 28,608,571.00		

4. Important information is highlighted in yellow and/or circled in red.

Section 2: Program Notes

1. Which report is this? Part A or MAI?
2. Reimbursement date range.
3. Updates on due and pending reimbursements.
4. Contract updates and other notes.

This report includes YTD paid reimbursements for FY 2022 Part A service months up to February 2023, as of 5/3/2023. This report reflects final reimbursement requests that were due by 4/7/2023; and have been paid thus far. Pending Part A reimbursement requests that have been received and are in the review process total \$415,337.60. Miami-Dade County staff are still in the process of closing out FY 2022, as well as processing the final invoices and administrative charges. A final expenditure report will be forthcoming.

Section 3: Allocations

1. Priority Rank/**Allocations** for Core Medical Services

2. Priority Rank/**Allocations** for Support Services

3. Direct Services Total

4. Grantee Funds

5. Quality Management Funds

6. Unobligated Funds

Priority Order	CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER			
	DIRECT SERVICES:			
	Core Medical Services	Allocations	Carryover Allocations	
4	AIDS Pharmaceutical Assistance	84,492.00		
6	Health Insurance Services	335,776.00	259,924.00	
1	Medical Case Management	5,826,737.00	400,000.00	
3	Mental Health Therapy/Counseling	51,237.00	91,457.00	
5	Oral Health Care	2,864,445.00	1,000,000.00	
2	Outpatient/Ambulatory Health Svcs	8,695,763.00	600,000.00	
9	Substance Abuse - Outpatient	28,099.00	17,389.00	
	CORE Services Totals:		20,255,299.00	
	Support Services	Allocations	Carryover Allocations	
11	Emergency Financial Assistance	9,853.00		
8	Food Bank	1,660,108.00	1,000,000.00	2,660,108
10	Medical Transportation	209,912.00		
13	Other Professional Services	154,449.00		
12	Outreach Services	178,088.00		
7	Substance Abuse - Residential	1,338,406.00	200,000.00	1,538,406
	SUPPORT Services Totals:		4,750,814.00	
	DIRECT SERVICES TOTAL:		\$ 25,006,113.00	
	Total Core Allocation	17,886,549.00		
	Target at least 80% core service allocation	17,149,890.40		
	Current Difference (Short) / Over	\$ 736,658.60		
	Recipient Admin. (GC, GTL, BSR Staff)	\$ 2,453,209.00		
	Quality Management	\$ 641,522.00		
	(+) Unobligated Funds / (-) Over Obligated:			
	Unobligated Funds (Formula & Supp)	\$ -		
	Unobligated Funds (Carry Over)	\$ 507,727.00	3,802,458.00	28,608,571.00



Section 4: Expenditures

1. Expenditures for Core Medical Services

2. Expenditures for Support Services

3. Total Direct Services Expenditures

4. Percent of Formula Funds expended

5. Grantee Expenditures

6. Quality Management Expenditures

7. Total not yet spent

8. Total spent in dollars \$ / percents %

CURRENT CONTRACT EXPENDITURES				
DIRECT SERVICES:				
Account	Core Medical Services	Expenditures	Carryover Expenditures	
5608970000	AIDS Pharmaceutical Assistance	3,954.10		
5608920000	Health Insurance Services	297,151.61	0.00	297,151.61
5608870000	Medical Case Management	5,415,024.15	0.00	5,415,024.15
5608880000	Mental Health Therapy/Counseling	51,237.00	12,333.00	63,570.00
5608900000	Oral Health Care	2,864,445.00	409,199.50	3,273,644.50
5608810000	Outpatient/Ambulatory Health Svcs	7,661,572.65	0.00	7,661,572.65
5608910000	Substance Abuse - Outpatient	4,401.00	0.00	4,401.00
CORE Services Totals:			16,719,318.01	
Account	Support Services	Expenditures	Carryover Expenditures	
5608940000	Emergency Financial Assistance	0.00		
5608980000	Food Bank	1,540,864.00	1,000,000.00	2,540,864.00
5608480000	Medical Transportation	153,904.90		
5608890000	Other Professional Services	67,581.00		
5608950000	Outreach Services	114,924.86		
5608930000	Substance Abuse - Residential	1,053,800.00	0.00	1,053,800.00
SUPPORT Services Total:			3,931,074.76	
TOTAL EXPENDITURES DIRECT SVCS & % :			\$ 20,650,392.77	82.58%
Formula Expenditure %		94.84%		
5608710000	Recipient Administration	1,642,024.58		
5608880000	Quality Management	620,491.00		2,262,515.58
Grant Unexpended Balance		<u>FY 2022 Award</u> 3,040,718.15	<u>Carryover</u> 2,654,944.50	5,695,662.65
Total Grant Expenditures & %			\$ 22,912,908.35	80.09%



Section 5: Expenditure Thresholds

- 1. Core Medical allocations have to be **75% or more** of the total allocated Direct Services funds.

Core medical % against Total Direct Service Allocation (Not including C/O):		
Cannot be under 75%	97.97%	Within Limit

- 2. Quality Management **maximum is 5%**.

Quality Management % of Total Award (Not including C/O):		
Cannot be over 5%	3.94%	Within Limit

- 3. Grantee administration **maximum is 10%**.

OMB-GC Administrative % of Total Award (Cannot include C/O):		
Cannot be over 10%	10.00%	Within Limit

- 4. Notates allocations are (or are not) within limits.

Section 6: Expenditure Thresholds

1. Core Medical expenditures have to be 75% or more of the total allocated Direct Services funds.

2. Quality Management maximum is 5%.

3. Grantee administration maximum is 10%.

Core medical % against Total Direct Service Expenditures (Not including C/O): Cannot be under 75%	96.81%	Within Limit
Quality Management % of Total Award (Not including C/O): Cannot be over 5%	3.94%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O): Cannot be over 10%	5.12%	Within Limit

4. Notates expenditures are (or are not) within limits.

Printed on: 5/3/2023

5. Date of printing – a new report is available each month

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The Importance of Understanding Ryan White Part A Reports



Review of thresholds is your way of knowing funds are being spent in accordance with HRSA guidelines.



The County (Recipient) provides these reports to ensure members that their decisions about funding are being followed.



If you have questions about allocations or expenditures, please ask County (Recipient) representatives who attend most meetings. Staff can also help.



Utilization reports help to determine how much services are being used, a useful tool during the reallocation process.



Partnership members make decisions about Ryan White Program Part and MAI funds. This is just one tool to help you make data-based decisions.

A great opportunity for people with HIV



The Ryan White Part A program provides care to more than 9,000 people with HIV.



Attending planning council meetings and reviewing reports provides you information on the services and how funds are spent.



The planning council and its committees have vacancies. You can lend your voice and experience on how services should be provided.



Ask members of staff how to join!

The Bottom Line



Partnership members decide how funds are allocated to service categories based on recommendations by Care and Treatment Committee members.



The Expenditure Report lets members see that funds are being spent in line with their decisions.



When funds are being underspent or overspent, the Expenditure Report gives Care and Treatment Committee members and Partnership members the information needed to reallocate funds (move funds from one service category to another).



Understanding this report means members can ask well-informed questions and make data-based decisions.



Q&A

- ▶ Please raise your hand or chat your questions.
- ▶ Answers to questions we do not get to today will be posted with this presentation at:
www.aidsnet.org/the-partnership/#getonboard1
- ▶ 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

Thank You

