Fiscal Year 2024-2025

This survey refers to activities from March 1, 2024, through February 28, 2025.

All Ryan White Program Part A/MAI-funded subrecipients must complete the survey.

This survey link is specific to your organization.

More than one person can contribute responses. It is strongly recommended to complete the survey as a group, including input from medical case managers, MCM supervisors, contract managers, and billing managers when completing the survey. Topics include contract negotiation and execution, compliance, technical assistance, staff communication, and Provide Enterprise® Miami.

Results will be distributed to all respondents and shared with the Strategic Planning Committee. You are welcome to attend Strategic Planning Committee meetings to review results and assist with process improvement.

Please complete no later than May 30, 2025.

Notes:

- The Recipient is the Miami-Dade County Office of Management and Budget-Grants Coordination.
- Responses are tallied and reported without identifying information.
- A separate survey will be distributed to Miami-Dade HIV/AIDS Partnership members addressing
 these issues and other concerns. If you represent both a subrecipient AND are a Partnership
 member, you are asked to complete two surveys.
- The Assessment of the Recipient Administrative Mechanism (AAM) is a Health Resources and Services Administration (HRSA)-mandated evaluation, and a major activity of the Miami-Dade HIV/AIDS Partnership Strategic Planning Committee.

Thank you!

_		
* 1. Please enter yo	our Organization's Name	
Organization		
· -	this survey. (This is requ	First and Last Name and Title of the primary lired for tracking responses and will not be
You can include up	to two additional people	in the next section.
First and last name of primary person completing this survey		
Title of primary person completing this survey		

* 3. Primary Respondent: How many years have you worked with the Ryan White Program?
0 to 3 years
4-9 years
10 years or more
4. OPTIONAL Second Respondent: Please enter the First and Last Name and Title of the second respondent completing the survey.
First and last name of second respondent completing survey
Title of second respondent completing survey
5. Second Respondent: How many years have you worked with the Ryan White Program?
0 to 3 years
4-9 years
10 years or more
6. OPTIONAL Third Respondent: Please enter the First and Last Name and Title of the third respondent completing the survey.
First and last name of third respondent completing survey
Title of third respondent completing survey
7. Third Respondent: How many years have you worked with the Ryan White Program?
0 to 3 years
4-9 years
10 years or more

Contract Negotiation

* 8. The Miami-Dade County Office of Management and Budget-Grants Coordination ("the Recipient") conducted a fair contract negotiation process with our organization.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Contract Negotiation
disagree" response to the statement: The Miami-Dade County Office of Management and Budget-Grants Coordination ("the Recipient") conducted a fair contract negotiation process with our organization.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Award Notification
March 1, 2024, through February 28, 2025
* 10. The Recipient sent award notifications/letters to our organization in a timely manner.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Ont applicable
Comments: Strengths, weaknesses & suggestions (optional)

Award Notification
* 11. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Recipient sent award notifications/letters to our organization in a timely manner.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Contract Execution
March 1, 2024, through February 28, 2025
* 12. The Recipient executed our organization's contract in a timely manner.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Contract Execution
* 13. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Recipient executed our organization's contract in a timely manner.

Contract Execution
farch 1, 2024, through February 28, 2025
* 14. Were there internal factors within your organization that led to delayed contract execution?
Yes
□ No
N/A - Our contract was executed on time.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Contract Execution
* 15. Please select up to three internal factors that led to delayed contract execution. You can also include other internal factors in the comment box.
Difficulty obtaining the necessary paperwork.
Difficulty obtaining the necessary signatures.
Limited time due to other contract execution demands.
Limited time due to program monitoring schedule.
Delayed by Board of Directors process(es).
Delayed by our internal document routing process(es).
Other internal factors
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Contract Execution
farch 1, 2024, through February 28, 2025
* 16. Were there external factors with the Recipient that led to delays in contract execution?
Yes
N/A - Our contract was executed on time.

Contract Execution
* 17. Please select up to three external factors that led to delayed contract execution. You can
also include other external factors in the comment box.
Delayed by the lateness of the Notice of Award.
Delayed due to a contract language revision.
Delayed due to multiple contract language revisions.
Delayed in obtaining approval for the allocated amounts assigned to our agency.
Delayed by Recipient for unknown reasons.
Other external factors
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Contract Execution
March 1, 2024, through February 28, 2025
* 18. Did delays in contract execution cause service disruptions and/or organizational disruptions?
Yes
☐ No
N/A - Our contract was executed on time.

Contract Execution

from deleved contract execution. Very can also include additional feedback in the comment
from delayed contract execution. You can also include additional feedback in the comment box.
Delayed services to existing clients.
Inability to expand services for existing clients.
Inability to accommodate new clients.
Delayed payroll.
Unable to hire additional staff.
Delayed billing (accounts payable).
Interrupted cashflow.
Unable to complete facilities upgrades with reserve funding.
Other service disruptions and/or organizational disruptions
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
eimbursements
arch 1, 2024, through February 28, 2025
* 20. There were no significant differences between billed versus reimbursed amounts for our organization that were not discussed prior to any disallowance.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)

Reimbursements

* 21. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: There were no significant differences between billed versus reimbursed amounts for our organization that were not discussed prior to any disallowance.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Utilization and Expenditures
March 1, 2024, through February 28, 2025
* 22. The Recipient contacted our organization to review utilization and expenditures that were not on target.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Utilization and Expenditures
* 23. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Recipient contacted our organization to review utilization and expenditures that were not on target.

Utilization and Reimbursements

* 24. The Recipient reviewed our organization's service utilization and reimbursement requests submissions in a timely manner.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
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Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Utilization and Reimbursements
utilization and reimbursement requests submissions in a timely manner.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Payment of Invoices
March 1, 2024, through February 28, 2025
* 26. After contract execution, the Recipient provided payment to our organization within 30 days of submission of complete and accurate invoices.
Strongly agree
Agree
Neither agree nor disagree
○ Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)

Subrecipient Assessment of the Recipient Administrative Mechanism Survey Payment of Invoices * 27. Please **explain your concern** and **suggest a solution** for a "Disagree" or "Strongly disagree" response to the statement: After contract execution, the Recipient provided payment to our organization within 30 days of submission of complete and accurate invoices. Subrecipient Assessment of the Recipient Administrative Mechanism Survey Payment of Invoices March 1, 2024, through February 28, 2025 * 28. The Recipient clearly explained any holds or disallowances on reimbursement requests. Strongly agree Agree) Neither agree nor disagree Disagree Strongly disagree O Not applicable Comments: Strengths, weaknesses & suggestions (optional)

Subrecipient Assessment of the Recipient Administrative Mechanism Survey

Payment of Invoices

* 29. Please explain your concern and suggest a s e	olution for a "Disagree" or "Strongly	
disagree" response to the statement: The Recipient clearly explained any holds or		
disallowances on reimbursement requests.		

March 1, 2024, through February 28, 2025
* 30. The Recipient provided our organization with a clear explanation of Ryan White Program reporting requirements (i.e., Ryan White HIV/AIDS Program Services Report (RSR), Annual Progress Report, client eligibility screening, etc.).
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Communication
* 31. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Recipient provided our organization with a clear explanation of Ryan White Program reporting requirements (i.e., Ryan White HIV/AIDS Program Services Report (RSR), Annual Progress Report, client eligibility screening, etc.).

Communication

Communication

* 32. Communication between the Recipient and our organization has been timely.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Ont applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Communication
* 33. Please explain your concern and suggest a solution for a "Disagree" or "Strongly
disagree" response to the statement: Communication between the Recipient and our
organization has been timely.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Communication
March 1, 2024, through February 28, 2025
* 34. Communication between the Recipient and our organization has been effective.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)

Communication
* 35. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: Communication between the Recipient and our organization has been effective.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Communication
March 1, 2024, through February 28, 2025
* 36. The Recipient informed our organization of reallocation processes (sweeps) to identify unmet needs or service gaps, and the requirements of a spending plan in order to adjust our organization's budget during the contract year.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Communication
* 37. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Recipient informed our organization of reallocation processes (sweeps) to identify unmet needs or service gaps, and the requirements of a spending plan in order to adjust our organization's budget during the contract year.

Communication

March 1, 2024, through February 28, 2025

* 38. The Recipient kept our organization well informed of Miami-Dade HIV/AIDS Partnership decisions that impact Ryan White Program subrecipients (e.g., approval of or changes to
service definitions, notice of Prescription Drug Formulary changes, updates to Allowable
Medical Conditions, changes to billable services, etc.).
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Ont applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Communication
* 39. Please explain your concern and suggest a solution for a "Disagree" or "Strongly
disagree" response to the statement: The Recipient kept our organization well informed of
Miami-Dade HIV/AIDS Partnership decisions that impact Ryan White Program subrecipients
(e.g., approval of or changes to service definitions, notice of Prescription Drug Formulary
changes, updates to Allowable Medical Conditions, changes to billable services, etc.).

Subrecipient Assessment of the Recipient Administrative Mechanism Survey

Compliance

* 40. When contract non-compliance issues were raised, the Recipient provided adequate time for remediation specific to the issue.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
○ Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Comments. Detengens, weathlesses a suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Compliance
* 41. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: When contract non-compliance issues were raised, the Recipient provided adequate time for remediation specific to the issue.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Technical Assistance
March 1, 2024, through February 28, 2025
* 42. When/if our organization requested programmatic and/or fiscal technical assistance or training, it was provided in a timely manner.
Strongly agree
Agree
Neither agree nor disagree
○ Disagree
Strongly disagree
O Not applicable
Comments: Strengths, weaknesses & suggestions (optional)

Technical Assistance
* 43. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: When/if our organization requested programmatic and/or fiscal technical assistance or training, it was provided in a timely manner.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey Technical Assistance
March 1, 2024, through February 28, 2025
* 44. In response to our requests, the Recipient provided guidance and clarification to our organization for any program-related document, reporting requirement, or other requested items, in a timely manner.
Strongly agree
Agree
Neither agree nor disagree
○ Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Technical Assistance
* 45. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: In response to our requests, the Recipient provided guidance and clarification to our organization for any program-related document, reporting requirement, or other requested items, in a timely manner.

Technical Assistance

March 1, 2024, through February 28, 2025

st 46. The Recipient responded adequately to inquiries, requests, and problem-solving needs from our organization.
Strongly agree
Agree
Neither agree nor disagree
○ Disagree
Strongly disagree
O Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Technical Assistance
47. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Recipient responded adequately to inquiries, requests, and problem-solving needs from our organization.

Subrecipient Assessment of the Recipient Administrative Mechanism Survey

Staff

* 48. The Recipient's staff was courteous and respectful.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Staff
* 49. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: <i>The Recipient's staff was courteous and respectful.</i>
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Staff
March 1, 2024, through February 28, 2025
* 50. Behavioral Science Research Corp. (BSR), the Recipient's Ryan White Program Clinical
Quality Management contractor, responded adequately to inquiries, requests, and problem-
solving from our organization. Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)

Staff
* 51. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: <i>BSR</i> , the Recipient's Ryan White Program Clinical Quality Management contractor, responded adequately to inquiries, requests, and problemsolving from our organization.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Provide Enterprise® Miami
March 1, 2024, through February 28, 2025
* 52. The Groupware Technologies, LLC (GTL) Provide Enterprise® Miami (PE Miami) clie data management system is reliable.
Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Not applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Provide Enterprise® Miami
* 53. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The Groupware Technologies, LLC (GTL) Provide Enterprise® Miami (PE Miami) client data management system is reliable.

Provide Enterprise® Miami March 1, 2024, through February 28, 2025 * 54. The PE Miami client database system is easy to use. Strongly agree) Agree Neither agree nor disagree Disagree Strongly disagree Not applicable. Comments: Strengths, weaknesses & suggestions (optional) Subrecipient Assessment of the Recipient Administrative Mechanism Survey Provide Enterprise® Miami * 55. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The PE Miami client database system is easy to use. Subrecipient Assessment of the Recipient Administrative Mechanism Survey Provide Enterprise® Miami March 1, 2024, through February 28, 2025 * 56. The PE Miami client database system generates organization-specific data in an efficient and user-friendly manner. Strongly agree Neither agree nor disagree Disagree Strongly disagree Not applicable

Comments: Strengths, weaknesses & suggestions (optional)

Provide Enterprise® Miami
57. Please explain your concern and suggest a solution for a "Disagree" or "Strongly disagree" response to the statement: The PE Miami client database system generates organization-specific data in an efficient and user-friendly manner.
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Provide Enterprise® Miami
March 1, 2024, through February 28, 2025
* 58. The PE Miami client database system vendor, Groupware Technologies, responds promptly and adequately to inquiries, data requests, and system trouble-shooting. — Strongly agree
Agree
Neither agree nor disagree
Disagree
Strongly disagree
Ont applicable
Comments: Strengths, weaknesses & suggestions (optional)
Subrecipient Assessment of the Recipient Administrative Mechanism Survey
Provide Enterprise® Miami

59. Please explain your concern and suggest a solution for a "Disagree" or "Strongly
disagree" response to the statement: The PE Miami client database system vendor,
Groupware Technologies, responds promptly and adequately to inquiries, data requests, and
system trouble-shooting.

Su	brecipient A	Assessment (of the	Recipient	t Administrative	Mechanism	Survey

Additional Comments - Optional

60. Please offer additional comments or suggestions Groupware Technologies, and/or other matters.	regarding the Recipient, BSR, PE Miami