## **Houston Area HIV Services Ryan White Planning Council**

## **Priority & Allocations Committee Meeting**

12 noon, Thursday, August 26, 2021

Join Zoom Meeting:

https://us02web.zoom.us/j/89374713843?pwd=UDBqbitGUk14d081eDRUSCtBdGltdz09

Meeting ID: 893 7471 3843 Passcode: 339238

Or, use your telephone and dial in: 346 248 7799

#### **AGENDA**

\* = to be sent at a later date

I. Call to Order

to Order

- A. Moment of Reflection
- B. Adoption of the Agenda
- C. Approval of the Minutes
  - May 27, 2021
  - June 16, 2021
  - June 24, 2021

#### II. Public Comment

(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. When signing in, guests are not required to provide their correct or complete names. 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 your self, please state that you are attending as an individual and not as an agency representative. Individuals can also submit written comments to a member of the staff who would be happy to read the comments on behalf of the individual at this point in the meeting.)

III. Updates & Reports from Ryan White Grant Administration

Carin Martin

Peta-gay Ledbetter and

Bobby Cruz, Co-Chairs

IV. Updates & Reports from The Resource Group

Yvette Garvin

- V. Requests for Allocation Increases
  - A. Available Part A funds: \$90,051. See requests A1 A3 (GREEN)
  - B. Available Part A funds: \$1,718,510 See requests 1-6 (BLUE)
  - C. Available MAI\* funds: \$905,361 See request M1 (PINK)
- VI. New Business
  - A. Quarterly Committee Report
  - B. Probably no committee meeting in September
- VII. Announcements
- VIII. Adjourn

\**MAI* = *Minority AIDS Initiative* 

## Houston Area HIV Services Ryan White Planning Council

## **Priority & Allocations Committee Meeting**

12:00 p.m., Thursday, May 27, 2021 Meeting Location: Zoom Teleconference

#### **MINUTES**

MEMBERS PRESENT	MEMBERS ABSENT	STAFF PRESENT
Bobby Cruz, Co-Chair	Ardry Skeet Boyle	The Resource Group
Peta-gay Ledbetter, Co-Chair		Yvette Garvin
Mauricia E. Chatman		
Kimberley Collins	OTHERS PRESENT	Ryan White Grant Admin
Roxane May	Santos Vera, Avenue360	Carin Martin
Josh Mica		Heather Keizman
Robert Sliepka		Rebecca Edwards
Bruce Turner		
		Office of Support
		Tori Williams
		Ricardo Mora
		Diane Beck

See the attached chart at the end of the minutes for individual voting information.

**Call to Order**: Bobby Cruz, Co-Chair, called the meeting to order at 12:06 p.m. and asked for a moment of reflection.

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

**Approval of the Minutes**: <u>Motion #2:</u> it was moved and seconded (Turner, Ledbetter) to approve the April 22, 2021 minutes. **Motion carried.** Abstentions: May, Sliepka

**Public Comment and Announcements:** None.

**Training: Houston Council Priority Setting Process:** Ledbetter presented the attached training slides.

#### **Old Business**

#### Report from the Administrative Agency - Part A/MAI

**Updates on the FY 2020 and 2021 Grant Awards:** See attached reports that were emailed separately from the meeting packet: FY2020 Procurement Report dated 05/26/21, FY2020 Service Utilization dated 03/16/21, and FY2021 Procurement Report reflecting the decrease funding scenario. Martin said that her office is still in the process of finalizing FY 2020 so the final

procurement report will be sent to the committee before the next meeting. As expected, the Houston EMA has significant underspending this year but all Ryan White Programs have received waivers so there will be no penalty for the underspending. The Houston EMA also has the option to send funds to the state ADAP program. For FY2021, Houston received a slight decrease overall for Part A/MAI funding, hence the decrease funding scenario has been implemented.

Report from the Administrative Agency – Part B/State Services: See attached reports included in the meeting packet. Garvin said they spent about 90% of the Part B grant which ended March 31, 2021. The final report will be sent to the committee before the next meeting. For the upcoming year the Houston area received level funding but, as a note, they may still need to implement a decrease.

**Determine June Meeting Dates:** The committee decided to hold the special meetings from 1:00-5:00 p.m. on June 16 and June 17. The June committee meeting will be at noon on June 24, 2021. The Committee Co-chairs will record the public hearing on June 21 and if there is significant public comment, the committee will meet on June 29, 2021.

#### **Priority Setting Process**

**Determine FY 2022 Service Priorities:** The committee reviewed the Policy for the FY 2022 Priorities Setting Process; there is no new needs assessment data to justify changes in the priorities. **Motion #3:** it was moved and seconded (Mica, Ledbetter) to keep the FY 2022 Ryan White Part A/Minority AIDS Initiative (MAI), Part B, and State Services funded service priorities the same as those in FY 2021 since there is no new data to justify changes. **Motion carried unanimously.** 

**Public Comment:** Santos Vera, Executive VP of Operations at Avenue 360 said he would like the committee to consider raising the priority of oral health. His organization would like the committee to consider medical as the top priority followed by oral health, pharmacy and then medical case management because this is how his agency prioritizes care. Mica said he would like to see the Health Insurance Assistance Program moved up to priority #4 from priority #5.

Final vote on the FY 2022 service priorities: <u>Motion #4</u>: it was moved and seconded (Mica, Chatman) to keep the FY 2022 Ryan White Part A/Minority AIDS Initiative (MAI), Part B, and State Services funded service priorities the same as those in FY 2021. Motion carried unanimously. (See page 4 of the minutes for the list of service priorities.)

#### **New Business**

**Announcements:** None.

**Proposed Idea Form:** See attached. <u>Motion #5:</u> it was moved and seconded (Turner, Mica) to approve page 2 of the Proposed Idea Form with no changes. **Motion carried.** 

Adjournment: Motion: it was moved and seconded (Turner, Ledbetter) to adjourn the meeting at 1:00 p.m. Motion Carried.

Submitted by:

Approved by:

Tori Williams, Director

Date

Committee Chair

Date

Scribe: Beck

C = chaired the meeting; JA = just arrived; LM = left meeting

## 2021 Priority & Allocations Committee Voting Record for 05/27/21

	1	Motion #1 Agenda Carried			Motion #2 Minutes Carried			Motion #3 Keep the same priorities for FY22 Carried			Motion #4 Keep the same priorities for FY22 Carried				Motion #5 2021 New Idea form Carried					
MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	ON	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
Bobby Cruz, Co-Chair				С				С				С				С				С
Peta-gay Ledbetter, Co-Chair		X				X				X				X				X		
Ardry Skeet Boyle	X				X				X				X				X			
Mauricia E. Chatman ja 12:26pm	X				X					X				X				X		
Kimberley Collins		X				X				X				X				X		
Roxane May		X						X		X				X				X		
Josh Mica		X			X				X					X				X		
Robert Sliepka		X						X		X				X				X		
Bruce Turner		X			X				X					X				X		

## **Worksheet for Determining FY 2022 Service Priorities**

Core Services	HL Scores	HL Rank	Approved FY 2020 Priorities	Approved FY 2021 Priorities	Proposed FY 2022 Priorities	Justification
Ambulatory/Outpatient Medical Care	ННН	2	1	1	1	No new needs assessment or other data.
Medical Case Management	HHH	2	2	2	2	
Local Pharmacy Assistance Program	ннн	2	3	3	3	
Oral Health Services	HLL	3	4	4	4	
Health Insurance	HLL	3	5	5	5	
Mental Health Services	HLH	4	6	6	6	
Early Intervention Services (jail)	LLL	8	7	7	7	
Medical Nutritional Therapy	LLH	7	10	8	8	
Day Treatment	LLH	7	8	9	9	
Substance Abuse Treatment	LLH	7	9	10	10	
Hospice*	_	-	11	11	11	

Support Services	HL Scores	HL Rank	Approved FY 2020 Priorities	Approved FY 2021 Priorities	Proposed FY 2022 Priorities	Justification
Referral for Health Care & Support Services	HHH	2	14	12	12	
Non-medical case management	HHH	2	15	13	13	
Medical Transportation	HLL	3	16	14	14	
<b>Emergency Financial Assistance</b>	HLH	4	13	15	15	
Linguistics Services	LLL	8	17	16	16	
Outreach	LLL	8	12	17	17	

<sup>\*</sup>Hospice does not have HL Score or HL Rank.

# Houston Area HIV Services Ryan White Planning Council **Priority and Allocations Committee Meeting**

#### **MINUTES**

12:00 p.m., Wednesday, June 16, 2021 Meeting Location: Zoom Teleconference

-----

MEMBERS PRESENT	MEMBERS ABSENT	STAFF PRESENT
Bobby Cruz, Co-Chair	Mauricia E. Chatman	Ryan White Grant Admin
Peta-gay Ledbetter, Co-Chair	Kimberley Collins	Carin Martin
Roxane May		Heather Keizman
Josh Mica		
Robert Sliepka		The Resource Group
Bruce Turner	OTHERS PRESENT	Yvette Garvin
	Allen Murray, RWPC Chair	Sha'Terra Johnson-Fairley
		Office of Support
		Tori Williams
		Ricardo Mora
		Diane Beck

See the attached chart for individual voting information.

**Call to Order**: Bobby Cruz, Co-Chair, called the meeting to order at 1:13 p.m. and asked for a moment of reflection

**Approval of Agenda:** <u>Motion #1</u>: it was moved and seconded (Turner, Ledbetter) to approve the agenda. **Motion carried.** 

**Review Meeting Goals:** Williams explained that the goal for the meeting was to make recommendations regarding the FY 2022 Level, Increase and Decrease Allocation Scenarios. Recommendations are to be presented at the Public Hearing on June 28, 2021. If no comments are received, the recommendations will move forward to the July Steering Committee and then the July Council meeting for final approval.

Public Comment: None.

Changes Recommended for the FY 2022 Service Definitions: Williams presented the summary of the FY 2022 How to Best Meet the Need recommendations from the Quality Improvement Committee. See attached.

**Updates from the Administrative Agents:** No updates.

ADAP Updates and Possible Responses: Charles Henley, a consultant with the Texas Department of State Health Services (TDSHS), said that there hasn't been an update from the Texas HIV Medication Program (THMP) since the memo that was sent a few months ago saying they were delaying implementation of the spend down until at least June 30<sup>th</sup>. He asked Part B staff a few days ago if there were any updates he could share with the Council during this critical time and they did not have anything. No news is good news since the spend down continues and no one is being dis-enrolled from the program as of now. If there are any updates, he will rush them to the committee. Turner asked how the additional funds recently allocated to the program by the State legislature changes things. Henley said if the State puts additional money into TDSHS that is earmarked for ADAP, perhaps THMP will not have to dis-enroll clients or implement changes.

#### Draft Allocations for FY 2022 Part A/MAI, Part B & State Services Funding

Staff Recommendations: Martin said due to COVID, spending was much different last year so the committee should be careful about basing decisions on FY2020 expenditures as they normally do. Garvin agreed. Martin also noted that the committee made significant changes to the allocations for medical case management and LPAP last year and should wait for a year of normal activity before making adjustments to those service categories again. Pediatric medical case management had a staff shortage they were unable to address due to COVID and returned approximately \$90,000. This year, they should be able to fill the position so they are likely to spend the funds in FY 2021.

FY 2022 Level Funding Scenario - Part A/MAI, Part B and State Services:

<u>Motion #2</u>: it was moved and seconded (Turner, Sliepka) to use the FY 2021 level funding Part A and MAI allocations for the FY 2022 level funding Part A and MAI allocations because of inadequate data to support changes. Motion carried. Abstention: May.

<u>Motion #3</u>: it was moved and seconded (Turner, Sliepka) to use the FY 2021 level funding Part B and State Services allocations for the FY 2022 level funding Part A and MAI allocations because of inadequate data to support changes. **Motion carried**. Abstention: May.

FY 2022 Increase/Decrease Funding Scenarios for Part A/MAI, Part B & State Services: <u>Motion #4</u>: it was moved and seconded (Turner, Ledbetter) to approve the attached FY 2022 increase and decrease funding scenarios for Minority AIDS Initiative (MAI). Motion carried. Abstention: May.

<u>Motion #5</u>: it was moved and seconded (Ledbetter, Turner) to approve the attached FY 2022 decrease funding scenario for Part A. **Motion carried.** Abstention: May.

<u>Motion #6</u>: it was moved and seconded (Ledbetter, Turner) to approve the attached FY 2022 increase funding scenario for Part A. **Motion carried.** Abstention: May.

<u>Motion #7</u>: it was moved and seconded (Ledbetter, Mica) to approve the attached FY 2022 increase and decrease funding scenarios for Part B and State Services. **Motion carried.** Abstention: May.

**Announcements:** Williams reminded committee members of the following important meetings:

- 12 noon, Thursday, June 24, 2021 Committee votes on FY 2022 Allocations
- Tentative: 2 pm, Tuesday, June 29, 2021 Review public comment

**Adjournment:** <u>Motion</u>: it was moved and seconded (Ledbetter, Turner) to adjourn the meeting at 2:23 p.m. Motion carried unanimously.

Submitted by:	mitted by:		
Tori Williams, Director	Date	Committee Chair	Date

## 2021 Priority & Allocations Committee Voting Record for 06/16/21

Scribe: D. Beck

	Motion #1 Agenda Carried				Fu	Motion #2 FY22 Level Funding Scenario for Part A/MAI Carried				Motion #3 FY22 Level Funding Scenario for Part B/SS/SS-R Carried				Motion #4 FY22 Increase and Decrease Funding Scenarios for MAI Carried			
MEMBERS	ABSENT	ABSENT YES NO ABSTAIN			ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	
Bobby Cruz, Co-Chair				C				C				C				C	
Peta-gay Ledbetter, Co-Chair		X				X				X				X			
Ardry Skeet Boyle	X				X				X				X				
Mauricia E. Chatman	X				X				X				X				
Kimberley Collins	X				X				X				X				
Roxane May		X						X				X				X	
Josh Mica		X				X				X				X			
Robert Sliepka		X				X				X				X			

	Motion #5 FY22 Decrease Funding Scenario for Part A Carried				F		ncrea	se	Motion #7 FY22 Increase and Decrease Funding Scenarios for Part B/State Services Carried				
MEMBERS	ABSENT	YES	ON	ABSTAIN	ABSENT	YES	ON	ABSTAIN	ABSENT	YES	NO	ABSTAIN	
Bobby Cruz, Co-Chair				C				C				C	
Peta-gay Ledbetter, Co-Chair		X				X				X			
Ardry Skeet Boyle	X				X				X				
Mauricia E. Chatman	X				X				X				
Kimberley Collins	X				X				X				
Roxane May				X				X				X	
Josh Mica		X				X				X			
Robert Sliepka		X				X				X			

## Houston Area HIV Services Ryan White Planning Council

## **Priority & Allocations Committee Meeting**

12:00 p.m., Thursday, June 24, 2021 Meeting Location: Zoom teleconference

#### **MINUTES**

MEMBERS PRESENT	MEMBERS ABSENT	STAFF PRESENT
Bobby Cruz, Co-Chair	Ardry Skeet Boyle	The Resource Group
Mauricia E. Chatman	Peta-gay Ledbetter, Excused	Yvette Garvin
Kimberley Collins		
Roxane May		Ryan White Grant Admin
Josh Mica	OTHERS PRESENT	Carin Martin
Robert Sliepka	Allen Murray, RWPC Chair	
Bruce Turner	Tony Crawford, RWPC	Office of Support
	Charles Henley	Tori Williams
		Diane Beck

See the attached chart at the end of the minutes for individual voting information.

**Call to Order**: Bobby Cruz, Co-Chair, called the meeting to order at 12:06 p.m. and asked for a moment of reflection.

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

**Approval of the Minutes**: *Motion #2*: it was moved and seconded (Mica, Sliepka) to approve the May 27, 2021 minutes. **Motion carried.** 

**Review Meeting Goals:** Williams said that the purpose of the meeting is to walk through the level, increase and decrease funding scenarios that were created at the special meeting to look for anything that might be a problem or an error and needs to be changed.

Public Comment: None.

#### **Updates**

ADAP: Henley said there was no new information to report on the status of the ADAP deficit.

Ryan White Part A/MAI Administrative Agent: Martin said there was no new information to report.

Ryan White Part B/State Services Administrative Agent: Garvin said there was no new information to report.

#### FY 2022 Part A/MAI, Part B & State Services Allocations

The committee reviewed the proposed FY 2022 Level, Increase, and Decrease Funding Scenarios for all funding streams, see attached.

<u>Motion #3:</u> it was moved and seconded (Sliepka, Turner) to approve the 2022 Level, Increase, and Decrease Funding Scenarios for Ryan White Part A, MAI, Part B, State Services and State Rebate Funding. Motion carried.

**Announcements:** Williams said that the committee will tentatively meet at 2:00 p.m. on June 29, 2021 to review any public comment that is received regarding the allocations. The committee will meet on Thursday, July 22, 2021 to reallocate funds. The public hearing is available to view on our website <a href="http://rwpcHouston.org">http://rwpcHouston.org</a>.

Submitted by:		Approved by:							
Tori Williams, Director	Date	Committee Chair	Date						

Scribe: Beck

C = chaired the meeting; VP = participated via telephone; JA = just arrived; LM = left meeting

## 2021 Priority & Allocations Committee Voting Record for 06/24/21

		Motion #1 Agenda Carried				Motion Min			Motion #3 Approve FY22 Level, Increase, and Decrease Funding Scenarios Carried			
MEMBERS	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN	ABSENT	YES	NO	ABSTAIN
Bobby Cruz, Co-Chair				C				C				C
Peta-gay Ledbetter, Co-Chair	X				X				X			
Ardry Skeet Boyle	X				X				X			
Mauricia E. Chatman ja 12:13pm	X				X					X		
Kimberley Collins		X				X				X		
Roxane May		X				X				X		
Josh Mica		X				X				X		
Robert Sliepka		X				X				X		
Bruce Turner		X				X				X		

#### Part A Reflects "Decrease" Funding Scenario MAI Reflects "Decrease" Funding Scenario

#### FY 2021 Ryan White Part A and MAI Procurement Report

Priority	Service Category	Original	Assessed	lada.		T =								
	'	Allocation	Award Reconcilation	July Adjustments	October	Final Quarter	Total	Percent of	Amount	Procure-	Original Date	Expended	Percent	Percent
		RWPC Approved			Adjustments	Adjustments	Allocation	Grant Award	Procured	ment	Procured	YTD	YTD	Expected
1		Level Funding	(b)	(carryover)					(a)	Balance			1 1	YTD
1	Outpatient/Ambulatory Primary Care	Scenario									i i		1	i
1.a	Primary Care - Public Clinic (a)	10,965,788		0	0	0	10,890,012	49.12%		198,616		2,243,947	21%	33%
1.b	Primary Care - CBO Targeted to AA (a) (e) (f)	3,927,300	-27,177				3,900,123		3,900,123	0		\$661,141	17%	339
1.c	Primary Care - CBO Targeted to Ak (a) (e) (1)	1,064,576	-7,367	<del>,</del>			1,057,209		1,057,209	0		\$300,201		339
1.d	Primary Care - CBO Targeted to White/MSM (a) (e)	910,551	-6,301	<u> </u>			904,250	4.08%	904,250	0		\$341,760		33%
1.e	Primary Care - CBO Targeted to Rural (a) (e)	1,147,924 1,100,000	-7,944 -7,612				1,139,980	5.14%	1,139,980	0		\$183,632		33%
1.f	Primary Care - Women at Public Clinic (a)	2,100,000	-14.532				1,092,388	4.93%	1,092,388	0	77 77 67 77	\$351,750		33%
1.g /	Primary Care - Pediatric (a.1)	15,437	-14,002				2,085,468	9.41%	2,085,468	0		\$240,809		33%
1.h	Vision	500,000	-3,460				15,437 496,540	0.07%	15,437 496,540	0	4, 1, 44	\$2,100		33%
1.x	Primary Care Health Outcome Pilot	200,000	-1,384	<del></del>			198,616	0.90%	496,540	198,616		\$162,555	33% #DIV/0!	33%
2 1	Medical Case Management	1,730,000	-10,477	0	0	0	1,719,523	7.76%	1,719,523	196,010		463,270		33% <b>33</b> %
2.a (	Clinical Case Management	488,656	-3,381				485,275	2.19%	485,275	0	and the state of t	\$134,978		33%
	Med CM - Public Clinic (a)	277,103	-1,918				275,185	1.24%	275,185	0	3/1/2021	\$59.857	22%	33%
2.c N	Med CM - Targeted to AA (a) (e)	169,009	-1,170				167,839	0.76%	167,839	0		\$62,105	37%	33%
2.d N	Med CM - Targeted to H/L (a) (e)	169,011	-1,170		-		167,841	0.76%	167,841	0		\$61,047	36%	33%
2.e N	Med CM - Targeted to W/MSM (a) (e)	61,186	-423				60,763	0.27%	60,763	Ö		\$29,966	49%	33%
2.f N	Med CM - Targeted to Rural (a)	273,760	-1,894				271,866	1.23%	271,866	0		\$55,364	20%	33%
2.g N 2.h N	Med CM - Women at Public Clinic (a)	75,311	-521				74,790	0.34%	74,790	0	3/1/2021	\$25,138	34%	33%
	led CM - Targeted to Pedi (a.1) led CM - Targeted to Veterans	90,051					90,051	0.41%	90,051	0	3/1/2021	\$0	0%	33%
2.j M	led CM - Targeted to Veterans	80,025	0				80,025	0.36%	80,025	0	3/1/2021	\$23,413	29%	33%
3 L	ocal Pharmacy Assistance Program	45,888	0				45,888	0.21%	45,888	0	3/1/2021	\$11,401	25%	33%
3.a Lo	ocal Pharmacy Assistance Program-Public Clinic (a) (e)	1,810,360	-12,528	0	. 0	0	1,797,832	8.11%	1,797,832	0	3/1/2021	\$321,639	18%	33%
3.b Lo	ocal Pharmacy Assistance Program-Untargeted (a) (e)	310,360 1,500,000	-2,148				308,212	1.39%	308,212	0		\$77,575	25%	33%
4 0	ral Health	166,404	-10,380 -1,152				1,489,620	6.72%	1,489,620	0	3/1/2021	\$244,064	16%	33%
	ral Health - Untargeted (c)	0	*1,132		0	0	165,252	0.75%	165,252	0	3/1/2021	54,300	33%	33%
4.b O	ral Health - Targeted to Rural	166,404	-1,152				0	0.00%	0	0	N/A	\$0	0%	0%
5 He	ealth Insurance (c)	1,383,137	-9,571	0	0	- 0	165,252	0.75%	165,252	0	3/1/2021	\$54,300	33%	33%
6 M	ental Health Services (c)	1,000,107	-0,017				1,373,566	6.20% 0.00%	1,373,566	0	3/1/2021	\$244,045	18%	33%
7 Ea	arly Intervention Services (c)	0		-			0	0.00%	0	0	NA NA	\$0	0%	0%
8 M	edical Nutritional Therapy (supplements)	341,395	-2,362				339,033	1.53%	339,033	0	NA 3/1/2021	\$0	0%	0%
9 Ho	ome and Community-Based Services (c)	0	2,002	o	0	- 0	0 339,033	0.00%	339,033	- 0	3/1/2021 NA	\$83,377	25%	33%
	Home	0						0.00%			N/A N/A	\$0	0%	0%
	cility Based	o						···			N/A	\$0 \$0	0% 0%	0% 0%
10 Su	bstance Abuse Services - Outpatient	45,677	0	Ō	0	0	45,677	0.21%	45,677	0	3/1/2021	\$13,063	29%	33%
	ospice Services	0	0	0	0	0	10,077	0.00%	0	0	NA	\$10,003	0%	0%
12 Re	ferral for Health Care and Support Services (c)	0	0				0	0.00%	0	0	NA NA	\$0	0%	0%
	n-Medical Case Management	1,267,002	-8,768	0	0	0	1,258,234	5.67%	1,258,234	0	3/1/2021	\$272,531	22%	33%
13.a   Se	rvice Linkage targeted to Youth	110,793	-767	·			110,026	0.50%	110,026	0	3/1/2021	\$17,645	16%	33%
13.b Se	rvice Linkage targeted to Newly-Diagnosed/Not-in-Care	100,000	-692	•			99,308	0.45%	99,308	0	3/1/2021	\$11,510	12%	33%
13.c   Sei	rvice Linkage at Public Clinic (a)	370,000	-2,560		-		367,440	1.66%	367,440	ol-	3/1/2021	\$84,825	23%	33%
13.d Sei	rvice Linkage embedded in CBO Pcare (a) (e)	686,209	-4,749			·· -	681,460	3.07%	681,460	- 0	3/1/2021	\$158,551	23%	33%
	W-Substance Use	0	0			-	0	0.00%	0	0	NA NA	\$0	0%	0%
	dical Transportation	424,911	-2,940	0	0	0	421,971	1.90%	421,971	0		114,684	27%	33%
14.a Me	dical Transportation services targeted to Urban	252,680	-1,749				250,931	1.13%	250,931	Ŏ	3/1/2021	\$88,752	35%	33%
14.b Me	dical Transportation services targeted to Rural	97,185	-673				96,512	0.44%	96,512	0	3/1/2021	\$25,932	27%	33%
14.c Tra	nsportation vouchering (bus passes & gas cards)	75,046	-519		_		74,527	0.34%	74,527	0	3/1/2021	\$0	0%	33%
15 Em	ergency Financial Assistance	1,545,439	-10,694	0	0	Ō	1,534,745		1,534,745	0	5, 1/2021	246,521	16%	33%
ro.a ∐EFA	A - Pharmacy Assistance	1,305,439	-9,034			<del>-  -</del>	1,296,405		1,296,405	oi oi	3/1/2021	\$246,521	19%	33%

#### FY 2021 Ryan White Part A and MAI Procurement Report

Priority	Service Category	Original Allocation RWPC Approved Level Funding Scenario	Award Reconcilation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procure- ment Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
16.b	EFA - Other	240,000	-1,661				238,339				3/1/2021	\$0	0%	33%
16	Linguistic Services (c)	Ö	_				0	0.0070		(		\$0	0%	0%
	Outreach	420,000	-2,906				417,094		417,094			\$94,579		33%
DEVISOR	Total Service Dollars	20,100,113	-137,175	0	0	0	19,962,938	90.04%	19,764,322	198,615		4,151,954	21%	33%
K \$ 16(11), 51	Grant Administration	1,795,958	0	0	0	o	1,795,958	8.10%	1,795,958	C	N/A	554,430	31%	33%
0.020	HCPH/RWGA Section	1,271,050		Ô		0	1,271,050	5.73%	1,271,050	C	N/A	\$395,599	31%	33%
	RWPC Support*	524,908			0	0				C	N/A			33%
	Quality Management	412,940		0	0	1				C		\$117,105		33%
		22,309,011	-137,175	0	0	0	22,171,836	100.00%	21,973,220	198,615		4,823,489	22%	33%
								Unallocated						
	Part A Grant Award:	22,171,816	Carry Over:	0		Total Part A:	22,171,816	-20	198,615					
								1						
		Original	Award	July	October	Final Quarter	Total	Percent	Total	Percent				
		Allocation	Reconcilation	Adjusments	Adjustments	Adjustments	Allocation		Expended on					
			(b)	(carryover)					Services					
	Core (must not be less than 75% of total service dollars)	16,442,761			0		, ,							
	Non-Core (may not exceed 25% of total service dollars)	3,657,352				-	3,632,043							
	Total Service Dollars (does not include Admin and QM)	20,100,113	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	0	0	0	19,962,938							
				ACCUMATE AND ADMINISTRATION OF THE PROPERTY OF										
	Total Admin (must be ≤ 10% of total Part A + MAI)	1,795,958			0		1,795,958							
<u> </u>	Total QM (must be ≤ 5% of total Part A + MAI)	412,940	0	0	0	0	412,940	1.69%	<u> </u>		ļ			
		L	<u> </u>				<del></del>	<u> </u>						
			<del></del>		MAI Procure	<del> </del>								
Priority	Service Category	Original	Award	July	October	Final Quarter	Total	Percent of	Amount	Procure-	Date of	Expended	Percent	Percent
		Allocation  RWPC Approved  Level Funding  Scenario	Reconcilation (b)	Adjustments (carryover)	Adjustments	Adjustments	Allocation	Grant Award	Procured (a)	ment Balance	Procure- ment	YTD	YTĎ	Expected YTD
1	Outpatient/Ambulatory Primary Care	2,002,860	-52,609	Ô	0	0	1,950,251	85.90%	1,950,251	0		609,950	31%	33%
1.b (MAI)	Primary Care - CBO Targeted to African American	1,012,700	-26,601				986,099	43.43%	986,099	0	3/1/2021	\$308,000	31%	33%
	Primary Care - CBO Targeted to Hispanic	990,160	-26,009				964,151		964,151	Ō		\$301,950	31%	33%
	Medical Case Management	320,100		0	0	0	320,100		320,100	0		\$87,440		33%
	MCM - Targeted to African American	160,050					160,050		160,050	0		\$48,971		33%
2.d (MAI)	MCM - Targeted to Hispanic	160,050					160,050		160,050	0		\$38,469	24%	33%
	Total MAI Service Funds	2,322,960			0	-	_,		2,270,351	0		697,390	31%	33%
100	Grant Administration	0	0		0			*****	0	0		0	0%	0%
	Quality Management	<u>U</u>	n		0		0		0	0	The state of the s	0		0% <b>0%</b>
	Total MAI Non-service Funds	2,322,960			0		2,270,351		2,270,351	0	and the special part of the second se		0% 31%	33%
03.6770	Total MAI Funds	2,322,900	-52,609	•		•	2,210,331	100.0074	2,270,351	<u>_</u>		697,390	3176	33%
	MAI Grant Award	2,270,349	Carry Over:	n		Total MAI:	2,270,349					<del></del>		
ļ	Combined Part A and MAI Orginial Allocation Total	24,631,971				i otai mat.	Z,E10,343			·				
-	Combined Part A and MAI Orginial Allocation Total	24,001,371		<u> </u>										
Footnot	es:		<del> </del>						+					<u></u>
All	When reviewing bundled categories expenditures must be evaluated	both by individual s	ervice category and b	y combined categori	es. One category m	ay exceed 100% of a	vailable funding so	long as other categ	ory offsets this ov	verage.				
(a)	Single local service definition is four (4) HRSA service categories (Pc	are, LPAP, MCM, N	ion Med CM). Expend	titures must be eval	uated both by individ	fual service category	and by combined s	ervice categories.						
(a.1)	Single local service definition is three (3) HRSA service categories (de	aes not include LPA	P). Expenditures mu	st be evaluated both	by individual servic	e category and by co	mbined service cate	egories.						
(b)	Adjustments to reflect actual award based on Increase or Decrease fu	unding scenario.			<u> </u>	<u> </u>								

#### Part A Reflects "Decrease" Funding Scenario MAI Reflects "Decrease" Funding Scenario

#### FY 2021 Ryan White Part A and MAI Procurement Report

Priority	Service Category	Original Allocation RWPC Approved Level Funding Scenario	Award Reconcilation (b)	July Adjustments (carryover)	October Adjustments	Final Quarter Adjustments	Total Allocation	Percent of Grant Award	Amount Procured (a)	Procure- ment Balance	Original Date Procured	Expended YTD	Percent YTD	Percent Expected YTD
(c) (d)	Funded under Part B and/or SS  Not used at this time													_
(e)	10% rule reallocations													-

## FY 2021 Ryan White Part A and MAI Service Utilization Report

the fourth				RWP	ARTAS	UR-Met	Quarter (3/	1-5/31)		SEASTINES OF	Lago da Abia	and a second	Carlos al Paris III de	ins a sa	The HALL PORTS	LUGS CHERT		a Edmontor
Priori	y Service Category	Goal	Unduplicated	Male		Trans #	AA ILI	White	Other	Hispanic	0-12	E13-198	20-24	25-34	35-44	45-49	50-64	65 plus
150	10. 计上类型的 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.		Clients Served		23.20	gender	(non-	(non-Hispanic)	(non- Hispanic)			100		10000	2000	4.00	"	
1	Outpatient/Ambulatory Primary Care (excluding Vision)	6 467	YTD	Con a mary branch service and a design	000	00/	Hispanic)					Nebraid 3		100	state at the	4 (1)		
1.a	Primary Care - Public Clinic (a)		3:98 3:98 170					15%	3%	38%	0%	0%			26%			2%
1.b	Primary Care - CBO Targeted to AA (a)	1,060						9% 0%l	2%	44%	0%	0%			25%			3%
1.c	Primary Care - CBO Targeted to Hispanic (a)	960	Company of the Compan				0%	0%	1% 0%	0% 100%	0% 0%	1% 0%			27%		18%	1%
1.d	Primary Care - CBO Targeted to White and/or MSM (a)	690	TOTAL CONTROL OF THE PARTY OF T				0%	84%	16%	0%	0%	0%		25%	29% 26%		20% 29%	1%
1.e	Primary Care - CBO Targeted to Rural (a)		427				43%	26%	2%	29%	0%	0%		30%	26%			3%
1.f	Primary Care - Women at Public Clinic (a)		482				53%	5%	2%	40%	0%	0%			27%		27% 40%	2%
1.g	Primary Care - Pediatric (a)	7		**			40%	0%	0%	60%	20%	60%		0%	0%	0%	0%	5% 0%
1.h	Vision	1,600	830				47%	13%	2%	37%	0%	0%		26%	23%	14%	30%	3%
2	Medical Case Management (f)		2,058				20 Y 20 30 30 30 3		2/0		0.70		J/6	2078	2376		3078	
2.a	Clinical Case Management	600		******************	25%	3%	57%	10%	1%	32%	0%	0%	5%		24%		31%	4%
2.b	Med CM - Targeted to Public Clinic (a)	280	205	~			52%	12%	0%	35%	0%	1%	0%	28%	22%	12%	32%	4%
2.c	Med CM - Targeted to AA (a)	550	499	71%			98%	0%	2%	0%	0%	1%	6%	33%	24%	10%	23%	3%
2.d	Med CM - Targeted to H/L(a)	550	914	78%	19%	3%	0%	0%	0%	100%	0%	1%	5%	27%	30%	11%	24%	2%
2.e	Med CM - Targeted to White and/or MSM (a)	260	<b>14.14.16.17.0</b>	81%		2%	0%	90%	10%	0%	0%	1%	2%	25%	24%	8%	31%	9%
2.f	Med CM - Targeted to Rural (a)	150	COMPANY OF THE PARTY OF THE PAR	67%		1%	52%	30%	1%	18%	0%	0%	4%	24%	23%	9%	35%	5%
2.g	Med CM - Targeted to Women at Public Clinic (a)	240			100%	0%	71%	9%	0%	21%	0%	0%	1%	21%	32%	14%	30%	1%
2.h	Med CM - Targeted to Pedi (a)	125	Carrie de Asian de O	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!			#DIV/0!		#DIV/0!
2.i	Med CM - Targeted to Veterans	200	Sandal Andrea 84	94%	6%	0%	70%	21%	1%	7%	0%	0%	0%	0%	2%	5%	55%	38%
2.j	Med CM - Targeted to Youth			67%	33%	0%	67%	0%	0%	33%	0%	67%	33%	0%	0%	0%	0%	0%
3	Local Drug Reimbursement Program (a)	2,845	COLUMN TO THE PROPERTY OF THE PARTY OF THE P	72%	23%	4%	44%	14%	2%	39%	0%	0%	3%	24%	28%	13%	31%	1%
4	Oral Health	200	154	65%	35%	0%	47%	25%	1%	27%	0%	0%	2%	23%	23%	15%	34%	3%
4.a	Oral Health - Untargeted (d)	NA.					<del>د زده که کنو</del> د م <del>ترسستند.</del> مادر در ارسیدیک کست ب										· · · · · · · · · · · · · · · · · · ·	
4.b	Oral Health - Rural Target	200	162	65%	35%	0%	47%	25%	1%	27%	0%	0%	2%	23%	23%	15%	34%	3%
5	Mental Health Services (d)	NA	747															
<del>0</del>	Health Insurance	1,700	<b>MINISTER</b> 868	79%	19%	2%	42%	27%	2%	29%	0%	0%	1%	11%	15%	11%	47%	14%
	Home and Community Based Services (d)	NA NA	<u> </u>															
9	Substance Abuse Treatment - Outpatient Early Medical Intervention Services (d)	40	<b>MATERIAL S</b>	93%	0%	7%	33%	40%	0%	27%	0%	0%	0%	27%	40%	13%	20%	0%
10	Medical Nutritional Therapy/Nutritional Supplements	NA NA																
11	Hospice Services (d)	650	316	73%	26%	1%	42%	20%	4%	34%	0%	0%	1%	11%	15%	9%	49%	14%
12	Outreach	NA TOO					ال ـ سنستني	<u></u>							التيمدنيث			
13	Non-Medical Case Management	700	The second second second second second	74%	22%	4%	55%	13%	1%	31%	0%	0%	6%	31%	27%	11%	22%	3%
	Service Linkage Targeted to Youth	7,045	2/201 701	670/	0464	401					المستند			النبني				
13.b	Service Linkage Targeted to Touth Service Linkage at Testing Sites	260	/U	67% 73%	31%	1%	54%	3%	1%	41%	0%	11%	89%	0%	0%	0%	0%	0%
	Service Linkage at Pesting Oiles Service Linkage at Public Clinic Primary Care Program (a)	3,700		68%	27% 31%	0%	55%	6%	0%	39%	0%	0%	0%	64%	27%	0%	9%	0%
13.d	Service Linkage at CBO Primary Care Programs (a)	2,765	1,2624	73%	24%	1% 3%	53% 54%	10%	2%	36%	0%	0%	0%	19%	25%	12%	39%	5%
14	Transportation	2,703		13%	24%	3%	54%	13%	2%	31%	3%	2%	4%	27%	23%	10%	28%	3%
14.a	Transportation Services - Urban	2,650	minimum parameter -a-1-3	67%	33%	0%	570/	440/	20/	040/	604	224	300	000				
14.b	Transportation Services - Rural	130	45.V	67%	33%	0%	57% 34%	11% 38%i	2%	31% 25%	0%	0%	3%	26%	24%	11%	30%	6%
14.c	Transportation vouchering	2,550	2000 - 100 -	07-76	33%	U76	34%	35%	3%	25%	0%	0%	2%	18%	25%	13%	36%	6%
	Linguistic Services (d)	2,550 g	20.0									- '/						
	Emergency Financial Assistance (e)	NA W	3 for 10 27/3	70%	27%	3%	55%	10%	0%	34%	00/	00/	201	2487	2007	4.40	000/	44/
	Referral for Health Care - Non Core Service (d)	NA NA	312	1072	2170	370	337a	10%	U%	J4%	0%	0%	3%	21%	28%	14%	32%	1%
Net undu	plicated clients served - all categories*	12,941	8/2377	73%	25%	2%	48%	15%	2%	35%	02/	40/	40/	220/	2484	120/	249/	50/
Living AID	S cases + estimated Living HIV non-AIDS (from FY18 App) (b)	NA	29.078	75%	25%	0%	48%	18%	2% 5%	29%	0% 0%	1% 49	4%	23%	24%	12%	31%	5%
	777.77		23,010	1 0/ /0	Z-J 70	U 78	40 76	10%	<b>⊅</b> %	2970	U 76	49	0 1	21%	23%	459	/0	7%

Page 1 of 2 Pages Available Data As Of: 8/16/2021

## FY 2021 Ryan White Part A and MAI Service Utilization Report

			RW M	Al Servic	e Utilizatio	n Report	િન1st Quarte	er (03/01 -05/31)	<b>S</b>	ng sa sang		it eksiki			Regular Sec	A GEO DE TE	i da dise	ing and each
Priority	Service Category MAI unduplicated served includes clients also served under Part A	Goal	Unduplicated MAI: Glients Served YTD	Male	Female	Trans :	AA (non- (Hispanic)	White		Hispanic	0-12	13-19	20-24		35-44	45-49	50-64	65 plus
1.b 1.c	Outpatient/Ambulatory Primary Care (excluding Vision) Primary Care - MAI CBO Targeted to AA (g) Primary Care - MAI CBO Targeted to Hispanic (g)	1,060 960	7/03		29%	2% 4%	99% 0%	0% 0%	1% 0%	0% 100%	0% 0%	1% 0%	5% 5%	38% 30%	25% 32%	12% 13%	19% 19%	1%
2.c 2.d	Medical Case Management (f)  Med CM - Targeted to AA (a)  Med CM - Targeted to H/L(a)		353 261	76% 71%	21% 29%	3% 0%	58% 74%	12% 9%	4% 3%	26% 15%	0% 0%	1% 3%	5% 6%	38% 32%	25% 26%	14% 21%	17% 12%	1% 0%
	Report reflects the num	nber & demograpi	nics of clients :	served du	ring the re	port peri	od who did r	At a citation and a second and a citation and a cit	vices during	4 / Property (1997) 194(31-34) (	350 (***), 803 36 5 6 5 (**)	01109: NO 82259110842	128-15-15 - 12-15-16-18-19	AND DESCRIPTION OF STREET				
Prioriti	Service Category		Unduplicated New Clients Served YTD		4.00	gender	(non- Hispanic)		(non- Hispanic)			17	20-24		35-44		50-64	100
1	Primary Medical Care		438 103	76% 76%	22% 21%	3% 3%	52% 58%	14% 12%	3% 4%	32% 26%	0% 0%	1%	9% 5%	38%	24% 25%	9% 14%	2% 1%	18% 17%
3.a	Clinical Case Management		34	71%	29%	0%	74%	9%	3%	15%	0%	3%	6%	32%	26%	21%	0%	12%
	Medical Case Management		4 × 231	80%	17%	3%	48%	19%	2%	30%	0%	3%	6%	41%	22%	7%	2%	19%
3.i	Medical Case Manangement - Targeted to Veterans  Oral Health		14 10	100% 80%	0% 20%	0% 0%	93% 60%	7% 20%	0% 0%	0% 20%	0% 0%	0% 0%	0% 0%	0% 30%	0% 20%	0% 0%	29% 10%	71% 40%
12.a. 12.c. 12.d.	Non-Medical Case Management (Service Linkage)			74%	25%	1%	59%	15%	3%	24%	2%	2%	5%	30%	22%	10%	24%	4%
12.b	Service Linkage at Testing Sites	260	16	88%	13%	0%	69%	0%	0%	31%	0%	6%	19%	56%	13%	0%	6%	0%
Footnot																		
(a)	Bundled Category  Age groups 13-19 and 20-24 combined together; Age groups	EE 64 and 65+ com	hined together	<del>                                     </del>									+					
(b) (d)	Funded by Part B and/or State Services	JJ-04 and GOT CON	ibilieu logether.								<del></del>							
(e)	Total MCM served does not include Clinical Case Manageme	l <u>.                                    </u>							+					<del>-  </del>				-
( <del>C</del> )	CBO Pcare targeted to AA (1.b) and HL (1.c) goals represen		and MAI clients	served											_			

Page 2 of 2 Pages Available Data As Of: 8/16/2021

# The Houston Regional HIV/AIDS Resource Group, Inc. FY 2021 Ryan White Part B Procurement Report April 1, 2021 - March 31, 2022



#### Reflects spending through May 2021

#### Spending Target: 17%

		STOPHEN S		The state of the s					Revised	8/4/21
Prito dy	Scryice Category  Oral Health Care	Allocation per RWPC	Game	Amendment*	Contractual Amount	Amendment	Contractual Amount	Date of A Original Reconstnents	Expended VED	a Percent
·		\$2,218,878	58%	\$0	\$2,218,878	\$0	\$2,218,878	#Procurements 4/1/2021	\$347,126	16%
i	Oral Health Care -Prosthodontics	\$460,000	12%	\$0	\$460,000	\$0	\$460,000	4/1/2021	\$118,002	26%
8	Health Insurance Premiums and Cost Sharing (1)	\$1,028,433	27%	\$0	\$1,028,433	\$0	\$1,028,433	4/1/2021	\$0	0%
	Home and Community Based Health Services Increased RWB Award added to OHS per Increase Scenario*	\$113,315	3%	\$0	\$113,315	\$0	\$113,315	4/1/2021	\$8,160	7%
	Total/Houston:HSDA	\$0	0%	\$0	<del>                                     </del>					
		3,820,626	100%	0	3,820,626	\$0	\$3,360,626		473,288	14%

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

## 2021-2022 Ryan White Part B Service Utilization Report 4/1/2021 - 6/30/2021 Houston HSDA (4816) 1st Quarter

	UI	C		Gen	der			D.	ace				<del></del>				Revised	8/17/202
Funded Service	Gud	YTD	Mule	Female	THE PARTY OF	MTF	/A/A - 1			0.1				ge Grou	р			
Health Insurance Premiums &			ETELEVISION IN	- Cilitate	TITATA	WIII	<u> </u>	wnite	Hiliso	Other	0.00	13-19	20-20	25-34	35:40	45-49	50:63	65+
Cost Sharing Assistance	11, (1)(0)(0)	0	(0)(1)(1)2.4	0.00%	(6)(6)(6)(7)	0.00%	0.003	0.00%	S (0)(0)(0)	0.00%	(0)(0)(0).	0.00%	(01.0)(01%	0.00%	(6)(6)(6)	0.000/		
Home & Community Based	30	14	ST0) (018):25	50.000/			السندي						2	0.0078	0.0010/76	0.00%	0.00%	0.00%
Health Services		14	1077.15(v)	50.00%	(0)(6)(0)(6)	0.00%	921692	0.00%	11.100%	0.00%	(1)(0,0).20	0.00%	*/JK <b>W</b>	0.00%	(0,(0))?	14.28%	级感染	21 44%
Oral Health Care	2,310	1,496	1.00 %	26.74%	(0)(0](0)25	1.24%	30,375%	14 24%	19,40%	1 920/	(a)tata)g(?	0.000/	YOUN					
Unduplicated Clients Served By	Nei	4							,		(ATJA VAIV.)	0.00%	(6/3%)	15.64%	201825%	27.40%	24,36%	9.53%
RW Part B Funds:		1,510	O1003%	38.37%	CAMP)	0.62%	ALCOXO	7.12%	30.3169	0.91%	0000%	0.00%	48995	7.82%	10, 92	20.84%	( <b>1</b> 1000%)	15 40%

## The Houston Regional HIV/AIDS Resource Group, Inc.

## **FY 2021 DSHS State Services**

#### **Procurement Report** September 1, 2020 - August 31, 2021



#### Chart reflects spending through May 2021

Spending Target: 75%

		Original	% of	<del></del>	<del></del>	<del></del>			Revised	8/4/2021
Priority	Service Category	Allocation per RWPC	Grant Award	Amendments per RWPC	Contractual Amount	Amendment	Contractual Amount	Date of Original Procurement	Expended YTD	Percent YTD
5	Health Insurance Premiums and Cost Sharing (1)	\$864,506	43%	\$0	\$864,506	\$200,000	\$1,064,506	9/1/2020	\$465,724	44%
6	Mental Health Services (2)	\$300,000	15%	\$0	\$300,000	-\$163,000	\$137,000	9/1/2020	\$87,578	64%
7	EIS - Incarcerated	\$175,000	9%	\$0	\$175,000	\$0	\$175,000	9/1/2020	\$128,896	<del>                                     </del>
11	Hospice	\$259,832	13%	\$0	\$259,832	-\$20,000	\$239,832	9/1/2020	\$167,860	74% 70%
	Non Medical Case Management (2)	\$350,000	17%	\$0	\$350,000	-\$80,000	\$270,000	9/1/2020	\$194,638	72%
15	Linguistic Services (2)	\$68,000	3%	\$0	\$68,000	-\$18,000	\$50,000	9/1/2020	\$36,525	73%
	Increased award amount -Approved by RWPC for Health Insurance (a)	\$0	0%	\$0				21 412020	Ψυ0,υΔυ	1370
Program	Total Houston HSDA	2,017,338	100%	\$0	\$2,017,338	-\$81,000	\$1,936,338	4.20	1,081,221	56%

#### Note

- (1) HIP-Funded by Part A, B and State Services. Provider spends grant funds by ending dates Part A -2/28; B-3/31;SS-8/31
- (2) Service utilization has decreased due to the interruption of COVID-19.

## Houston Ryan White Health Insurance Assistance Service Utilization Report

**Period Reported:** 

09/01/2020-6/30/2021

Revised:

7/26/2021

		Assisted			NOT Assisted	
Request by Type	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)	Number of Requests (UOS)	Dollar Amount of Requests	Number of Clients (UDC)
Medical Co-Payment	1291	\$162,417.05	519			0
Medical Deductible	0	\$0.00	0			. 0
Medical Premium	6381	\$2,074,048.99	902			0
Pharmacy Co-Payment	14503	\$483,206.17	1284			0
APTC Tax Liability	1	\$500.00	1			0
Out of Network Out of Pocket	0	\$0.00	0			0
ACA Premium Subsidy Repayment	13	\$12,797.00	0	NA	NA	NA
Totals:	22189	\$2,707,375.21	2706	0	\$0.00	

Comments: This report represents services provided under all grants.

Request Control Number	FY 21 Priority Rank	HRSA Service Category	Local Service Category or Subcategory	Amount of Request	FY 2020 Final Contract Amount	Expended 2020	Percent Expended	FY 2021 Contract Amount	FY 2021 Expended YTD	FY 2021 Percent YTD	FY 2021 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible for increase?	Notes Amount approved detail:
A <sup>1</sup>	5	Health Insurance Assistance	Health Insurance Assistance	\$90,05	\$1,383,137	n/a		\$3,227,236	n/a			Yes	
<b>A</b> 2	2.c-2.e 16.a	Outpatient/Ambulatory Health Services; Medical Case Management; Emergency Financial Assistance	Community-based Primary Medical Care targeted to African American, Hispanic and White; Community-based Medical Case Management targeted to African American, Hispanic and White; Emergency Financial Assistance - Pharmancy	\$88,100	\$558,293	l n/a		\$341,395	n/a			Yes	<del>, , ,</del>
<b>A</b> 3		Outpatient/Ambulatory Health Services	Community-based Primary Medical Care targeted to African American, Hispanic and White	\$95,700	\$1,077,656	n/a		\$226,000	n/a			Yes	
												t	
							,						
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~~~							
						,							
					,								
		سأرب ودعس الرحمتهن امع وحصدة مرومون موردونان ارو دوماه اسويسنان ديرشد شاك		\$253.851	\$3,019,086	\$0		\$3,794,631	\$0				سا چەرچىداد ۋەسىيە يېلىنىڭ كېكىيىدىسىدىد دەسەردىد
			The second state of the se		40,010,000	φ0	<del></del>	₩J,134,UJ1	- 3U	1	T		ي پريون د الحيون د در ويون بيد العامل بياه و الدو براهند الدو بيد الدامور بيواند البيد و خارد دار برا العا
onfirmed l	Funds Ava	il. for Reallocation	\$90,051	Part A									
ource of F	unds Avai	lable for Reallocation:		Explanation:	De-obligated N	/CM-Pedi							

## Request for Service Category Increase Ryan White Part A and MAI

A.	Name of Agency (not provided to RWPC)	<del></del>					
B.	Contract Number (not provided to RWPC)			•			
C.	Service Category Title (per RFP)	Linglin Income					
D.	Request for Increase under (check one):	Dert A. X	ce Premium & (	ost Sharing As	sistance	Control No.	A
ļ —	Request Period (check one):	Part A: X	ir sol				
E.	Amount of additional funding Requested:	April: X	August:	Oct:	Final Qtr:		
F.	Unit of Service:	\$90,051.00	Transfer to the second of the second				
' '			b. Cost/unit	c. Number of	d. Total:		
	(list only those units and disbursements where an increase is requested)	units in current	ļ	additional	(b x c)		- 100
	increase is requested)	contract:	]	units	,,		
ļ	1.			requested:			
	2.				\$0.00		
-	3.				\$0.00		
	4.				\$0.00		
-					\$0.00		
	5.				\$0.00		
	6.				\$0.00		
	7.				. \$0.00		
	8. Disbursements (list current amount in column a.	\$304,294.00	MAKAN E.E.	\$90,051.00			
<u>                                     </u>	and requestedamount in column c.)		N/A	700,001.00	#90,031,00	1	
	9.Total additional funding (must match E. above):				\$90,051.00		
G.	Number of new/additional clients to be served with				490,001.00	A Translation	
-	requested increase.						
H.	Number of clients served under current contract -	a. Number of	b. Percent AA	c Percent	d. Percent	e. Percent	
	Agencies must use the CPCDMS to document		(non-Hispanic)		1	Male	f. Percent
1 1	numbers served.	per CPCDMS	(mon raopanio)	Hispanic)	races)	iviale	Female
1 1	De-identified CPCDMS-generated reports will be			i nopariic)	laces	}	
]	provided to the RWPC by RWGA.				ļ		
	1. Number of clients that received this service under	<del></del>			<u> </u>		
	Part A (or MAI) in FY 2020.*				[		
	(March 1, 2020 - February 28, 2021)						
	*If agency was funded for service under Part A (or					1	
	MAI) in FY 2020 - if not, mark these cells as "NA"	1976	44%	25%	0.45		
	2. Number of clients that have received this service	1970	7470	25%	31%	81%	19%
]	under Part A (or MAI) in FY 2021.		•				
	a. April Request Period = Not Applicable					-	
1	b. August Request Period = 03/01/21 - 06/30/21				1		
]	c. October Request Period = 03/01/21 - 09/30/21						
	d. 4th Qtr. Request Period = 03/01/21 - 11/30/21						
	11100/21			<u> </u>	[	<u> </u>	

## Request for Service Category Increase Ryan White Part A and MAI

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all	a. Enter	b. How many	c. Comments	(do not include agency name or identifying
	questions that are applicable to agency's current	Number of	- 10010 WILL BILLS	information):	- assistant against name of identifying
	situation.	Weeks in this	be if full		
	,	column	amount of		
			request is		
	1. Length of waiting time (in weeks) for an	<del></del>	received?		
	appointment for a new client:			The agency ha	as a large number of Ryan White patients
	appointment for a new cheff.			seeking service	es referenced in this Request for Service
				Category Incre	age Form. The age and
				order to suffici	ease Form. The agency is requesting funding in
<u> </u>		1 4		Ryan White pa	ently meet the continued demands for new
	2. Length of waiting time (in weeks) for an			The economic pa	idents.
	appointment for a current client:			ine agency na	s a large number of Ryan White patients
				laceving setator	es reterenced in this Request for Service
		ļ		learedory ructe	ase Form. The agency is requesting funding in
		1		Order to sufficie	POUV Meet the confinued demands for avioting
	3. Number of clients on a "waiting list" for services	3	2	Lizyan vanite pa	tients.
	(per Part A SOC);	}		The agency do	es not maintain a waiting list. The agency
			i	offers a limited	number of same day appointment slots for
	2 Number of elicute	0	0	patients.	and at same day appointment siots lot
	3. Number of clients unable to access services			-	
	monthly (number unable to make an appointment)			The agency off	ers a limited number of same day appointment
	(per Part A SOC):	l 0	0	slots for patien	te
<u> </u>	List all other sources and amounts of funding for	A Section of the sect			to the second
	similar services currently in place with agency:	a. Funding	b. End Date of	c. Amount	d. Comment (50 words or less):
	DSHS State Services	Source:	Contract:		(3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	1. Bolio diate del vides		8/31/21	\$864,506	
—	2. Ryan White Part B			· 	
	L. Tyan winte Part B		3/31/22	\$1,028,433	
	3 Pyon White Part P. D. L.				
	3. Ryan White Part B - Rebate		3/31/22	\$136,918	
			[	, : = 5,0 10	
	4.				
<u> </u>	Submit the following documentation of the			And the second s	
·.	Submit the following documentation at the same time Revised Budget Narrative (Table I.A.) corresponding	as the request	(budget narrative	and fee-for-se	rvice budgets may be hard copy or feed
i	This form must be submitted electronically via email by publi	shed deadline to C	arin Martin: carin	martin@pho.het-	not plus current contract amount).
				aufahus-uctx	uer

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

[Agenc]

it]: All [Service]: ALL [Service Performer]: 0
Services performed between 3/1/20 and 2/28/21

[Contract 1]:

\_ ib Cats 2]: All

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCats1: INCLUDE ontract 1]: [Sub Cats 1]: All [Contract 2]: ub Cats 2]: A [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 [ShowDetaii]: False [Registration Type]: ALL [NewClientsOnly]: No 3

					BI	RTH GENI	ER			
		_	MALE			FEMALE		ВО	TH GEND	ERS
RACE	AGE <sup>2</sup>		Hispanic	Non-Hisp		Hispanic	Non-Hisp		Hispanic	Non-Hisp
AFRICAN AMERICAN		. 0	0	0	0	0	0	0	0	0
	13-19	2	0	2	0	0	0	2	0	2
	20-24	21	1	20	1	0	1	22	1	21
	25-34	142	4	138	26	1	25	168	5	163
	35-44	131	7	124	65	. 2	63	196	9	. 187
	45-54	131	5	126	107	0	107	238	5	233
	55-64	140	2	138	73	1	72	213	. 3	210
İ	65+	37	1	36	25	0	25	62	1	61
	SubTotals:	604	20	584	297	4	293	901	24	877
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	1	0	1	0	0	0	1	ol	1
	25-34	8	0	8	0	0	0	8	0	8
	35-44	9	1	8	2	0	2	11	1	10
	45-54	9	0	9	2	0	2	11	0	. 11
•	55-64	7	0	7	0	0	0	7	0	7
	65+	3	0	3	0	0	0	3	0	3
	SubTotals:	37	I	36	4	0	4	41	1	40
MULTI-RACE	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	6	0	0
	20-24	2	0	2	0	0	0	2	0	2
	25-34	5	2	3	0	o	0	5	2	3
	35-44	1	0	1	0	0	0	1	0	1
	45-54	2	0	2	1	0	1	3	0	3
	55-64	3	0	3	0	0	0	3	0	3
,	65+	2	0	2	0	0	0	2	0	2
	SubTotals:	15	2	13	I	0	1	16	2	14
NATIVE 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	0	0	0	2	1	1	2	1	<u>~</u>
•	45-54	1	0	1	1	1	0	2	1	1
	55-64	1	0	1	0	0	0	1	0	1
	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	2	0	2	3	2	1	5	2	3
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	0	0
	13-19	0	0	0	0	0	0	0	Ö	0

					В	IRTH GENI	ER		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.54740 AM
			MALE		1	FEMALE		R(	OTH GEND	FDC
RACE	AGE <sup>2</sup>	]	Hispanic	Non-Hisp	5	Hispanic	Non-Hisp		Hispanic	
PAC.ISLND/HAWAII	20-24	0	0		0	0 0	<del></del>	<del> </del>		<del> </del>
	25-34	0	0		0 (		<u> </u>	<del></del>	<del></del> -	<del> </del>
	35-44	1	0		1 (	<del></del>	<del> </del>	1	0	· `
	45-54	1	0		1 (		0	1	0	<del> </del>
	55-64	1	1	(		<del>                                     </del>	0	1	1	- 1
	65+	0	0	(		<del> </del>	0	0	0	0
	SubTotals:	3			2 0	0	0	3	7	2
WHITE	0-12	0	0	C	0	0	0	0	0	0
	13-19	2	1	1	1	I	0	3	2	1
	20-24	10	9	1	0	0	0	10	9	
	25-34	145	97	48	7	6	1	152	103	49
	35-44	151	93	58	15	10	5	166	103	63
•	45-54	253	145	108	17	11	6	270	156	114
	55-64	272	104	168	24	8	16	296	112	184
	65+	99	31	68	14	8	6	113	39	74
· · · · · · · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _ · _	SubTotals:	932	480	452	78	44	34	1,010	524	486
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	4	1	3	1	I	Ö	5	2	3
	20-24	34	10	24	1	0	1	35	10.	25
	25-34	300	103	197	33	7	26	333	110	223
•	35-44	293	101	192	84	13	71	377	114	263
	45-54	397	150	247	128	12	116	525	162	363
	55-64	424	107	317	97	9	88	521	116	405
ļ	65+	141	32	109	39	- 8	31	180	40	140
	SubTotals:	1,593	504	1,089	383	50	333	1,976	554	1,422

Clients Served This Period		Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	1976	Perinatal Transmission	12
Client visits: 3	9562	Hemophilia Coagulation	3
Spanish speaking (primary language at home) clients served:	189	Transfusion	11
Deaf/hard of hearing clients served:	6	Heterosexual Contact	434
Blind/sight impaired clients served:	3	MSM (not IDU)	896
Homeless clients served:	134	IV Drug Use (not MSM)	27
Transgender M to F clients served:	27	MSM/IDU	4
Transgender F to M clients served:	1	Multiple Exposure Categories	45
Clients served this period who live w/in Harris County:	1781	Other risk	544
Clients served this period who live outside Harris County:	195	Multi-Race Breakdown	
Active substance abuse clients served:	1	ASN,HWN	1
Active psychiatric illness clients served:	10	ASN,WHT	1
		BLK,NTV	3
		BLK,NTV,WHT	1
		BLK,WHT	9
		NTV,WHT	1
į.			

## Request for Service Category Increase Ryan White Part A and MAI

<u>A.</u> B.	Name of Agency (not provided to RWPC)  Contract Number (not provided to RWPC)			•	· · · · · · · · · · · · · · · · · · ·		GATT SHIPLE STREET COLUMN
<u></u>	Solution (not provided to RWPC)			<del></del>			The second second
<u>C.</u>	Service Category Title (per RFP)	Adult Community	-Based Compreher	nsive Primary Medic	al Care Targeted to		1
D	Request for Increase under (check one):	Part A:	aura aariiresiisi9iši - V	ALDICAL CASE MA	NAGEMENT	Control No.	7
	Request Period (check one):		301	gMAI:			
Ε,	Amount of additional funding Requested:	Apull 5	August:	Oct:	Final Qtr:		
=.	Unit of Service:	o Number of					
	(list only those units and disbursements where an	a. Number of	D. Cost/unit	c. Number of	d. Total:		
	increase is requested)	units in <u>current</u>		<u>additional</u>	(b x c)		
		contract:	}	units			
	Medical Case Management	457.00		requested:			
	2. Emergency Financial Assistance	457.33	T-0.00		1 7 1 4 4 4 4 4 4 4 4		AND THE RES
	3. Primary Care MD/PE	198	+00.00	<del></del> -	T T T T T T T T T T T T T T T T T T T		
	4.	155	\$275.00	100	\$27,500.00	3-2-7-6-4	
	5.				\$0.00		
	6.				\$0.00		
	7.				\$0.00		
	8. Disbursements (list current amount in column a.	<u> </u>	gan da najirda yangga kangga kalanda kangga sang		\$0.00	P. Contraction	Historia Colombia
	and requestedamount in column c.) EFA	\$17,810.00	N/A	\$30,000.00	\$30,000.00		
	9. Total additional funding (must match E. above):	haid all aligness in a property little distriction of a contraction of the contraction of		1			
Э.	Number of new/additional clients to be served with				\$68,100.00	人。这个人	
	requested increase.		1.7.1.1.4.1.4.1.3.1.1.1.1.1.1.1.1.1.1.1.1.1				
<del>-</del>	Ni mala a a f a 11 a d	- No. 1 5					
	) // // / / / / / / / / / / / / / / / /	a. Number of	b. Percent AA	c. Percent	d. Percent	e. Percent	f. Percent
	IDIIMMOTO CONTOL	clients served	(non-Hispanic)		Hispanic (all	Male	Female
	De-identified CPCDMS-generated reports will	per CPCDMS		Hispanic)	races)		
	be provided to the RWPC by RWGA.					!	-
	Number of clients that received this service						
	under Part A (or MAI) in FY 2020.*						
	(March 1, 2020 - February 28, 2021)			'			
	*If agency was funded for coming at the	708	<i>56</i> %,	13%	29%	6.8%	25%
	*If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"	650	541.	13%	291.	681	362.70
	Number of clients that have received this				211	601	301.
	service <u>under Part A</u> (or MAI) in FY 2021.	ļ					
	a. April Request Period = Not Applicable				•		
	b. August Request Period = 03/01/21 - 06/30/21	NA					
	c. October Request Period = 03/01/21 - 09/30/21	, .					
	d. 4th Qtr. Request Period = 03/01/21 - 11/30/21						
	11/30/21 - 11/30/21						1

## Request for Service Category Increase Ryan White Part A and MAI

	Additional Information Provided by Requesting	a. Enter	b. How many	- C	
	Agency (subject to audit by RWGA). Answer all	Number of	Wooke will 45:-	c. Comments	(do not include agency name or identifying
	questions that are applicable to agency's current	Weeks in this	TAACCIVO ANIII EI 119	uniformation):	, ,
	situation.	column	amount of	1	•
			request is		
			received?	f	
	Length of waiting time (in weeks) for an		received?	<del> </del> -	
	appointment for a new client:	]	. '	]	
		1	1		
	2. Length of waiting time (in weeks) for an		1	<del></del>	
	appointment for a current client:		i '	i	
	<u></u>	1		ļ	
	3. Number of clients on a "waiting list" for services		2	Peguastad for	
	(per Part A SOC):	25	.	services to PL	nding is essential to provide the much-needed
	3. Number of clients unable to access services	35	<u> </u>	services to br	_VVHA,
	monthly (number unable to make an appointment)		3	Requested fu	nding is essential to provide the much-needed
	(per Part A SOC):		1	services to PL	-WHA. The number of clients that need service
	and the confidence of the property of the prop	10		Will continue to	O arow througaut the remaining paried
	List all other sources and amounts of funding for	C. Frankling	and the second s	The second and the second seco	where the same the same consists to be an interest of the continues of the continues of the continues of the same
	similar services currently in place with agency:	i , arrairig	or run pare of	c. Amount	d. Comment (50 words or less):
	1. None	Source:	Contract:		<u></u>
ĺ		:			
	2.	<u> </u>	<del></del>	<u></u>	<u> </u>
•	3.	<u> </u>			
_					
	4.	<del> </del>	<del> </del>		
	•		]		·
	Submit the following documentation at the same time	والمار والماري والماري والمارية	der i beren a reg e galan e regular.	المرادي بسوعودي المسافقة والمجملاة	
	Submit the following documentation at the same time	e as the reques	t (hudget parreti	to and for f	And the second s
	Revised Budget Narrative (Table I.A.) corresponding	a to the revised	contract to the	Ae aild (66-10)	-service budgets may be hard copy or fax):
$\overline{}$	This form must be submitted electronically via email by pub	A to the levised	contract total (ar	nount in Item	F.9.d. plus current contract amount).
	ing form must be submitted electronically via small by mark	- 11- سماء اسمطحاتا	_		

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

\_\_\_\_\_ [...nt]: RWI [Service]: ALL [Service Performer]: 0 Services performed between 3/1/20 and 2/28/21 1

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCotal- INCL TIME \_ \_ \_ Jats 2]: All

[Contract 1]

All [Contract 2].

[Contract 3]: 20GEN0375NP [Sub Cats 3]: All

4]: All [Contract 5

[Contract 47 \*\*

Cats 5]: All

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

					BI	RTH GENI	ER		<del>-</del>	<del>-</del>
			MALE			FEMALE		ВО	TH GEND	ERS
RACE	AGE	<u></u>	Hispanic	Non-Hisp	1	Hispanic	Non-Hisp	1	Hispanic	Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0	0	. 0	.0	
	13-19	3	0	3	2	. 1	1	5	1	4
	20-24	20	0	20	5	0	5	25	0	25
	25-34	129	3	126	45	0	45	174	3	171
	35-44	46	1	45	65	O	65	111	1	110
	45-54	19	0	19	23	0	23	42	0	42
	55-64	3	0	3	8	0	8	11	0	11
,	65+	0	0	0	2	0	2	2	0	2
	SubTotals:	220	4	216	150	1	149	370	5	365
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	1	0	1	0	0	0	1	0	1
	25-34	2	0	2	0	0	0	2	0	2
	35-44	3	0	3	0	0	- 0	3	O.	3
	45-54	0	0	0	0	0	0	0	0	0
	55-64	1	0	1	0	0	0	1	0	1
·	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	7	0	7	0	0	0	7	0	7
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	1	0	0	0	1	0	1
	25-34	4	1	3	0	0	0	4	1	3
	35-44	3	1	2	1	0	1	4	1	3
	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:	8	2	6		0	1	9	2	7
PAC.ISLND/HAWAII	0-12	0	- 0	0	0	0	0	0	0	0
ļ	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	1
-	35-44	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
<u> </u>	65+	0	0	0	0	0	0	0	0	0
	SubTotals:	1	0	1	0	0	0	1	0	1
WHITE	0-12	0	0	0	0	0	0	0	0	0
	13-19	4	4	0	1	1	0	5	5	0

•					B	IRTH GENI	DER			
· · · · · · · · · · · · · · · · · · ·	<u> </u>	┧ .	MALE			FEMALE		ВС	TH GEND	ERS
RACE	AGE <sup>2</sup>		Hispanic	Non-Hisp	]	Hispanic	Non-Hisp	-1	Hispanic	Non-Hisp
WHITE	20-24	22	18	4		5 4	1	27	22	5
	25-34	70	53	17	17	12	5	87	65	<del></del>
	35-44	52	38	14	19	13	6	71	51	20
	45-54	32	21	11	8	4	4	40	25	
	55-64	25	9	16	7	5	2	32	14	
	65+	1	1	0	0	. 0	0	1	1	0
	SubTotals:	206	144	62	57	39	18	263	183	80
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	7	4	3	3	2	ı	10	6	4
	20-24	44	18	26	10	4	6	54	22	32
	25-34	206	57	149	62	12	50	268	69	199
	35-44	104	40	64	85	13	72	189	53	136
	45-54	51	21	30	31	4	27	82	25	57
	55-64	29	9	20	15	5	10	44	14	30
	65+	1	1	0	2	0	2	3		30
	SubTotals:	. 442	150	292	208	40	168	650	190	460

Clients Served This Period		Methods of Exposure (not mutually exclusive)	•
Unduplicated clients:	650	PerinatalTransmission	11
Client visits; 3	2408	Hemophilia Coagulation	0
Spanish speaking (primary language at home) clients served:	86	Transfusion	5
Deaf/hard of hearing clients served:	3	Heterosexual Contact	239
Blind/sight impaired clients served:	ì	MSM (not IDU)	341
Homeless clients served:	57	IV Drug Use (not MSM)	7
Transgender M to F clients served:	15	MSM/IDU	1
Transgender F to M clients served;	. 2	Multiple Exposure Categories	8
Clients served this period who live w/in Harris County:	614	Other risk	52
Clients served this period who live outside Harris County:	36	Multi-Race Breakdown	
Active substance abuse clients served:	15	BLK,NTV	3
Active psychiatric illness clients served:	20	BLK,NTV,WHT	1
		BLK,WHT	5

#### **FOOTNOTES**

<sup>1</sup> Visit = time spent per client per agency per service per day

<sup>&</sup>lt;sup>2</sup> Age as of client max service date

<sup>3</sup> 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 3/1/2020; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/19.

## Request for Service Category Increase Ryan White Part A and MAI

A	Name of Agency (not provided to RWPC)	1				•	
B.	Contract Number (not provided to RWPC)	<u>.</u>	<u></u>			<del></del>	
C.	Service Category Title (per RFP)	7	-				
D.	Request for Increase under (check one):	Part A: X	utpatient/Ambul	atory Primary C	are	Control No.	- <b>.</b>
	Request Period (check one):			MAI:			
Ē.	Amount of additional funding Requested:		August:	Oct:	Final Qtr:	14-14-14-1	
F.	Unit of Service:	\$95,700.00					
	(list only those units and disbursements where an	a. Number of	b. Cost/unit	c. Number of	d. Total:		
	increase is requested)	units in <u>current</u>		additional	(b x c)		
	is requested)	contract:		units	` '		
	INFEC/PHEXT			requested:			
	2.	<u> </u>			\$0.00		<b>三十岁年</b>
	3.	472	\$275.00	348		The second secon	
	4.				\$0.00		
	5.	·			\$0.00		
	6.				\$0.00	コンカース *** デー・・・*	
	7.				\$0.00		
					\$0.00		
	8. Disbursements (list current amount in column a.				\$0.00		
	and requested amount in column c.)	<u> </u>	N/A		<u>\$0.00</u>		
	9. Total additional funding (must match E. above):				\$95,700.00		
Э.	Number of new/additional clients to be served with				2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		传了少数是
1	requested increase.						
١.	Number of clients served under current contract -	a. Number of	b. Percent AA	c Percent	d. Percent	la Daniel	
	Agencies must use the CPCDMS to document	clients served	(non-Hispanic)	l.		e. Percent	f. Percent
	numbers served.	per CPCDMS	(**************************************	Hispanic)	races)	Male	Female
	De-identified CPCDMS-generated reports will	•		i nopariio)	races)		
	be provided to the RWPC by RWGA.						
	Number of clients that received this service	<del></del>					
	under Part A (or MAI) in FY 2020.*						
	(March 1, 2020 - February 28, 2021)						
}	*If agency was funded for service under Part A (or						
İ	MAI) in FY 2020 - if not, mark these cells as "NA"	-937	41% 461.	_11%	41%	ZHO.	2807
	The state of the s	27	14.1	17.11			~£0/6
	•	070	461.	10.		741.	20d.
							1

## Request for Service Category Increase Ryan White Part A and MAI

2. Number of clients that have received this service under Part A (or MAI) in FY 2021.  a. April Request Period = Not Applicable b. August Request Period = 03/01/21 - 06/30/21 c. October Request Period = 03/01/21 - 09/30/21 d. 4th Qtr. Request Period = 03/01/21 - 11/30/21			

## Request for Service Category Increase Ryan White Part A and MA!

	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	c. Comments information):	s (do <b>not</b> include agency name or identifying
	1 1 11 11		received?	1	
	Length of waiting time (in weeks) for an		reserved:	This data is a	as of November 2020
	appointment for a new client:		.		SO OF HOVEHIDE 2020
	2. Length of waiting time (in weeks) for an	9.8	<u> </u>		
	appointment for a current client:			This data is a	as of November 2020
		_  _			
	<ol><li>Number of clients on a "waiting list" for services (per Part A SOC):</li></ol>				
	Number of clients unable to access services	<u> </u>	<u> </u>	]	
	monthly (number unable to make an appointment) (per Part A SOC):				
					The state of the first transfer to the contract of the state of the st
١.	List all other sources and amounts of funding for	a. Funding	b. End Date of	c Amount	d Comment (50
). ———	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):
·	List all other sources and amounts of funding for similar services currently in place with agency:  1.		p. Lik Date of	c. Amount	d. Comment (50 words or less):
	List all other sources and amounts of funding for similar services currently in place with agency:  1.  2.		p. Lik Date of	c. Amount	d. Comment (50 words or less):
	Similar services currently in place with agency:     1. 2.		p. Lik Date of	c. Amount	d. Comment (50 words or less):
	Similar services currently in place with agency:  1.		p. Lik Date of	c. Amount	d. Comment (50 words or less):
	Similar services currently in place with agency:     1. 2. 3.		p. Lik Date of	c. Amount	d. Comment (50 words or less):
	1. 2. 3. 4.	Source:	Contract:	C. Amount	d. Comment (50 words or less):
Company of the Compan	1. 2. 3.	Source:	Contract:	C. Amount	d. Comment (50 words or less):
	Similar services currently in place with agency:  1.  2.  3.  4.  Submit the following documentation at the same tin	Source:	Contract;	C. Amount	d. Comment (50 words or less):
	1. 2. 3. 4.	Source:	Contract:	ve and fee-for	d. Comment (50 words or less):  r-service budgets may be hard copy or fax):

## HARRIS COUNTY PUBLIC HEALTH AND ENVIRONMENTAL SERVICES - RWGA SEDVICE UTILIZATION REPORT

¡Grant]: RW1 [Service]: ALL [Service Performer]: 0 Services performed between 3/1/20 and 2/28/21 1

[Contract

.... - ..... [Dato Cats 2]; All

[Age Group]: AgeGrp1 (expanded) [Include/Exclude SubCatal INCLUDE t Sub Cats 1]: All [Contract [Sub Cats 3]: All [Contract 4]: n/a [Sub Cats 4]: All [Contract 5]: n/a [Sub Cats 5]; All All All [Sub Cats 5]: All

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

		Γ	····	<del></del>	BI	RTH GEND	ER			<del>-</del>
			MALE		<del></del>	FEMALE		P.C	TH GENDI	7D6
RACE	AGE <sup>2</sup>	7	Hispanic	Non-Hisp	1	Hispanic	Non-Hisp	, BC		Non-Hisp
AFRICAN AMERICAN	0-12	0	0	0	0	0		0	0	0
1	13-19	0	0	0		0	0	0	0	0
	20-24	7	0	7	···-	Ō	1	8	0	8
	25-34	107	5	102	29	0	29	136	5	131
	35-44	70	3	67	43	2	41	113	5	108
	45-54	59	3	56	39	2	37	98	5	93
•	55-64	33	1	32	21	4	17	54	5	49
	65+	5	0	5	6	1	5	11	1	10
	SubTotals:	281	12	269	139	9	130	420	21	399
ASIAN	0-12	0	0	0	0	O.	0	0	0	-0
	13-19	0	0	0	0	0	0	0	0	Ö
	20-24	0	0	0	0	0	0	0	0	0
}	25-34	2	0	2	0	0	0	2	0	2
,	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:	3	0	3	0	0	0	3	0	3
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	0	0	. 0	0	0	0	0	0	0
	25-34	2	0	2	0	0	0	2	0	2
	35-44	1	1	0	0	0	0	1	1	0
	45-54	0	0	0	1	0	1	1	0	1
	55-64	0	0	0	1	1	0	1	1	0
	65+ SubTotals:	0	0	0	0	0	0	0	0	0
NATIVE AMERICAN		3		2	2	· 1	1	5	2	3
NATIVE AMERICAN	0-12 13-19	0	0	0	0	0	0	0	0	0
}		0	0	0	0	- 0	0	- 0	0	0
-	20-24		0	0	0	0	0	0	0	0
-	35-44	0		0	0	0	0	0	0	0
-	45-54	0	0		0	0	0	0	0	0
}	55-64	0	0	. 0	0	0	0	1	1	0
}	65+	0	0	0	0	0	0 0	0	0	0
F	SubTotals:	0	0	0		1		0	0	0
PAC.ISLND/HAWAII	0-12	0	0	0	0	0	0	0	1	
-	13-19	0	0	0	0	0	0	0	0	0
<del></del>	10-10	<u></u>			<u></u>	<u>U</u>	U		0,	0

					В	RTH GENI	ER			
			MALE			FEMALE		BC	TH GEND	ERS
RACE	AGE2		Hispanic	Non-Hisp	]	Hispanic	Non-Hisp		Hispanie	Non-Hisp
PAC.ISLND/HAWAII	20-24	0	0	C	0	0	0	0	0	0
	25-34	0	0	. 0	0	0	0	0	0	0
	35-44	1	_ 0	1	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:	1	0	1	. 0	0	0	1	0	I
WHITE	0-12	0	0	0	0	.0	0	0	0	0
	13-19	1	I	0	0	0	0	1	1	0
1	20-24	5	3	2	2	2	0	7	5	2
	25-34	77	62	15	9	7	2	86	69	17
	35-44	101	86	15	25	20	5	126	106	20
,	45-54	106	78	28	28	23	. 5	134	101	33
	55-64	53	35	18	15	11	4	68	46	22
	65+	16	4	12	2	2	0	18	6	12
	SubTotals:	359	269	90	81	65	16	440	334	106
ALL RACES	0-12	0	0	0	0	0	0	0	0	0
	13-19	1	1	0	0	0	0	1	]	0
	20-24	12	3	9	3	2	1	15	5	10
	25-34	188	67	121	38	. 7	31	226	74	152
	35-44	173	90	83	68	22	46	241	112	129
	45-54	166	81	85	69	26	43	235	107	128
	55-64	86	- 36	50	37	16	21	123	52	71
	65+	21	4	17	8	3	5	29	7	22
	SubTotals:	647	282	365	223	76	147	870	358	512

Clients Served This Period	•	Methods of Exposure (not mutually exclusive)	
Unduplicated clients:	870	PerinatalTransmission	16
Client visits: 3	3986	Hemophilia Coagulation	1
Spanish speaking (primary language at home) clients served:	231	Transfusion	6
Deaf/hard of hearing clients served:	0	Heterosexual Contact	293
Blind/sight impaired clients served:	1	· MSM (not IDU)	395
Homeless clients served:	197	IV Drug Use (not MSM)	13
Transgender M to F clients served;	48	MSM/IDU	2
Transgender F to M clients served:	0	Multiple Exposure Categories	26
Clients served this period who live w/in Harris County:	831	Other risk	164
Clients served this period who live outside Harris County:	39	Multi-Race Breakdown	
Active substance abuse clients served:	2	BLK,HWN	1
Active psychiatric illness clients served:	3	BLK,NTV	1
		BLK,WHT	3

#### FOOTNOTES

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

<sup>&</sup>lt;sup>2</sup> Age as of client max service date

<sup>&</sup>lt;sup>3</sup> 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 3/1/2020; encounters (for the service, agency, and grant selected) may or may not have occurred prior to 03/01/19.

Request Control Number	FY 21 Priority Rank	HRSA Service Category	Local Service Category or Subcategory	Amount of Request	FY 2020 Final Contract Amount	Expended 2020	Percent Expended	FY 2021 Contract Amount	FY 2021 Expended YTD	FY 2021 Percent YTD	FY 2021 Percent Expected YTD	Is agency currently in compliance with contract conditions and therefore eligible for increase?	Notes Amount approved detail:
1	1.b-1.d 2.c-2.e 3.b 13.d 16.a; 17		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	\$515,420	\$558,293	\$558,288	100%	\$588,388 ·	\$110,679	19%	33%	Yes Yes	
2	1.h	Outpatient/Ambulatory Health Services	Vision	\$90,000	\$363,000	\$363,000	100%	\$248,270	\$103,600	42%	33%	Yes	
3	5	Health Insurance Assistance	Health Insurance Assistance	\$300,000	\$1,383,137	\$1,382,419	100%	\$1,373,566	\$244,045	18%	33%	Yes	
4	1.b-1.d 2.c-2.e 3.b 13.d 16.a; 17	Case Management; Emergency Financial Assistance; Local	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	\$446,310°	\$3,475,661	\$2,704,532	78%	\$2,720,655	\$696,270	26%	33%	Yes	
5	2.a	Medical Case Management	Clinical Case Management	\$30,000	\$244,328	\$244,320	100%	\$242,638	\$51,900	21%	33%	Yes	
6	1.b-1.d 2.c-2.e 3.b 13.d 16.a; 17		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	\$495,000	\$2,698,492	\$2,698,482	100%	\$1,960,119	\$571,995	29%	33%	Yes	
				· ·									
					·			:	<del></del>				· ·
gregorijanski ga Santo Singaraje s	e and many parent rings.	e commente e maior communicações moi o compositor que a compresença e que compre En esta en esta esta esta esta en esta esta en esta esta esta esta esta esta esta esta	and the second s	\$1,876,730	\$8,722,911	\$7,951,041		\$7,133,636	\$1,778,489	mangger who can be so the last	en a man marken nyaéta sang majawa Albama na marka mandak manadaka	and a series of the series of	THE STAND BUT THE MEN WHICH HE HAD THE WORLD HE SHARE A SHARE AND MEN AND MENTAL THE STAND OF THE SHARE AND A
		/ail. for Reallocation ailable for Reallocation:	\$1,718,510	Part A Explanation:				the standard to					
	and the second of the second	Inspent Funds			QM, and HIV	Services (prin	narily LPAP. C	Outreach, Non-	Medical and N	Vedical Cas	se Managen	nept)	

Α	Name of Agency (not provided to RWPC)		-	<u> </u>			集成的 近位 在6 性的
В	Contract Number (not provided to RWPC)						
C.	Service Category Title (per RFP)	Pcare,	MCM, SLW, LP.	AP. EFA. OUTE	RE EHE	Control No.	illy Means
D,	Request for Increase under (check one):	Part A: X	or or	MAI:	RESERVED TO THE	CONTROL NO.	To the state of th
<u> </u>	Request Period (check one):	April:	August:	Oct:	Final Qtr:	fragradus:	
E.	Amount of additional funding Requested:						
F.	Unit of Service:	a. Number of	b. Cost/unit	c. Number of	d Total:		
		units in current		additional	(b x c)	<b>萨美国的</b>	<b>《大学》的图像</b>
	increase is requested)	contract:		units	(0 x c)	就在2.20mm 一个主义。 图 18 图 18 图 18 图 19 图 19 图 19 图 19 图 19	
	, ,			requested:		<b>大学是是</b>	
	1. MD/PE	813	\$275.00		\$192,500.00		<b>并没有到达法</b> 更
	2. LPAP	468					
	3.	400	Ψ30.00	704	<del>+ </del>		
	4.				\$0.00		
	5.				\$0.00	A 4 L N 4 C C C C C C C C C C C C C C C C C C	
	6.	· <del></del>			\$0.00		
·	7.	<u> </u>			\$0.00	表 英语 "是是一个	
	8. Disbursements (list current amount in column a.	\$72,760.00	   11 คีมใช้เปลี่สลังกินแบ้	0000 000 00	\$0.00		
ļ	and requestedamount in column c.)	\$72,700.00	N/A	\$300,000.00	\$300,000.00		
-	9. Total additional funding (must match E. above):	] - (15년왕기원왕(15년)		ANTENNE DE VERENET	<b></b>		
G.	Number of new/additional clients to be served with	ras irveruset, <u>Jose</u>			\$515,420.00		
1	requested increase.						
		a. Number of	b Dovert AA				
	[	clients served	b. Percent AA		d. Percent		f. Percent
		per CPCDMS	(non-Hispanic)	'	, ,	Male	Female
	De-identified CPCDMS-generated reports will	per CPCDIVIS	-	Hispanic)	races)		
	be provided to the RWPC by RWGA.						<u> </u>
	Number of clients that received this service				<del></del>	·	
						-	
	under Part A (or MAI) in FY 2020.*						
]	(March 1, 2020 - February 28, 2021)						
}	*If agency was funded for service under Part A (or					•	
İ	MAI) in FY 2020 - if not, mark these cells as "NA"						
		708	56%	13.28%	28.53%	67.94%	32.06%
	Number of clients that have received this						
	service <u>under Part A</u> (or MAI) in FY 2020.						
	a. April Request Period = Not Applicable						
.	b. August Request Period = 03/01/21 - 06/30/21		;	-			
	c. October Request Period = 03/01/21 - 09/30/21		4				
	d. 4th Qtr. Request Period = 03/01/21 - 11/30/21	619	58.16%	27.30%	28.76%	69.63%	30.37%

I.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all questions that are applicable to agency's current	a. Enter Number of Weeks in this	b. How many Weeks will this be if full	c. Comments ( information):	do <b>not</b> include agency name or identifying			
	situation.	column	amount of request is received?					
	Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	. 1	1		None			
	Length of waiting time (in weeks) for an appointment for a current client:	1	1		None			
· -	3. Number of clients on a "waiting list" for services (per Part A SOC):	140	1	Requested fundamental services to PLV	ding is essential to provide the much-needed WHA			
i populati	Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	28		services to PLV	ling is essential to provide the much-needed VHA. The number clients that need services grow througout the remainig period			
J.	List all other sources and amounts of funding for similar services currently in place with agency: (As per email J is to list any NP units)	a. Funding Source:	b. End Date of Contract:	c. Amount	d. Comment (50 words or less):			
	1. Outpatient		2/28/22	\$192,500	Currently we have 701 units in NP contract			
	2. DRUG		2/28/22	\$22,920	We have 764 units in NP with a value of 5,658.58			
	3. EFA		2/28/22	\$5,010	We have 167 units in NP with a value of 312,639.68			
	Submit the following documentation at the same times	e as the reques	t (budget parret	ive and for for	Sign of the state			
	Revised Budget Narrative (Table I.A.) corresponding	g to the revised	contract total (a	mount in Item F	.9.d. plus current contract amount)			
	This form must be submitted electronically via email by pub	lished deadline to	Carin Martin: car	in.martin@phs.hcf	x.net			

A. B. C. D. E. F.	Name of Agency (not provided to RWPC) Contract Number (not provided to RWPC) Service Category Title (per RFP) Request for Increase under (check one): Request Period (check one): Amount of additional funding Requested: Unit of Service: (list only those units and disbursements where an increase is requested)	VISION Part A: X April: \$90,000.00 a. Number of units in current contract:	b. Cost/unit	MAI: Oct: c. Number of additional units	Final Qtr: d. Total: (b x c)	Control No.	
	<ol> <li>Vision Services</li> <li>3.</li> <li>5.</li> <li>7.</li> </ol>	2482.7	\$100.00	requested: 900	\$90,000.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
G.	<ul><li>8. Disbursements (list current amount in column a. and requested amount in column c.)</li><li>9. Total additional funding (must match E. above):</li><li>Number of new/additional clients to be served with</li></ul>		N/A		\$0.00 \$90,000.00		
H.	requested increase.  Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served.  De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.		b. Percent AA (non-Hispanic)		d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	1. Number of clients that received this service under Part A (or MAI) in FY 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"	1998	55% raw# 1093	10% raw# 203	33% raw# 656	71% raw# 1427	29% raw# 571
	2. Number of clients that have received this service under Part A (or MAI) in FY 2020. a. April Request Period = Not Applicable b. August Request Period = 03/01/21 - 06/30/21 c. October Request Period = 03/01/21 - 09/30/21 d. 4th Qtr. Request Period = 03/01/21 - 11/30/21	662	55% raw# 364	8% raw# 53	34% raw# 226	74% raw# 487	26% raw# 175

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	to audit by RWGA). Answer all Number of Weeks will re applicable to agency's current Weeks in this be if full column amount of request is		c. Comments (do <b>not</b> include agency name or identifying information):
	appointment for a <b>new</b> client:	2 weeks	0-1 week	We would like to be able to provide new patients services within same week - 1 week of scheduling an appointment. With the steady increase in new patient appointments the appointment times could easily be expanded to greater than two weeks without increased funding. Currently we have \$54,500 in no pay.
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1 weeks	0 weeks	We would be able to see existing patients within the same week with funding increase, we would see patients five days a week.
	3. Number of clients on a "waiting list" for services (per Part A·SOC):	0	0	No waiting list at this time as we have been able to continue scheduling all patients for appointments.
ALAN MEN ELLE	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	No clients unable to access services monthly
J.	List all other sources and amounts of funding for similar services currently in place with agency:  1.	a. Funding Source:	b. End Date of Contract:	c. Amount d. Comment (50 words or less):
	2.			

3.

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 I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).

This form must be submitted electronically via email by published deadline to Carin Martin: carin.martin@phs.hctx.net

Α	Name of Agency (not provided to RWPC)						
B	Contract Number (not provided to RWPC)		<del></del>		·		
C.	Service Category Title (per RFP)	Health Insuranc	e Premium & C	oct Shoring Ass	inter	10	
D.	Request for Increase under (check one):	Part A: X	Section & C	MAI:	istance Transmission is	Control No.	
	Request Period (check one):	April:	August: X	Oct:	I C	KALL BOLLS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ē.	Amount of additional funding Requested:	\$300,000.00		OCL. 	Final Qtr:		
F.	Unit of Service:		b. Cost/unit				
	(list only those units and disbursements where an	units in current	b. Costunit	c. Number of	į.		
ĺ	increase is requested)	contract:		additional units	(p x c)	in the state of	
ļ		Contract.				<b>自然的</b> 类的点	
	1.			requested:			
	2.				\$0.00	→ C. M. 2 S. C. M. C. C. March, Phys. Lett. 12 (1997).	
	3.				\$0.00	事により さいきょうしん バード・ボ	
	4.				\$0.00		
	5.				\$0.00	20 1. 化气管管 A. M. C. A. M. C. C. C. C. C. C. C.	
	6.		<u> </u>		\$0.00	and the first of the first of the second and	
	7.	<del></del>			\$0.00	agrico de la compansión de la compansión de la compansión de la compansión de la compansión de la compansión d	
	8. Disbursements (list current amount in column a.	£4 200 740 00	Santa e sense e senapata des		\$0.00		
	and requested amount in column c.)	\$1,208,746.00	N/A	\$300,000.00	\$300,000.00		
_	9. Total additional funding (must match E. above):			Í Meigrafi í semennig í kegyss	L		
G.	Number of new/additional clients to be served with				\$300,000.00		
	requested increase.						of Northwest & F Historian States
Н.	Number of clients served under current contract -	a. Number of		والمستنف للمناب المستنف المعتبان			)
•	Agencies must use the CPCDMS to document		b. Percent AA		d. Percent		f. Percent
	numbers served.	clients served	(non-Hispanic)		Hispanic (all	Male	Female
	De-identified CPCDMS-generated reports will be	per CPCDMS		Hispanic)	races)		
	provided to the RWPC by RWGA.						
			<u> </u>				
	1. Number of clients that received this service under						
	Part A (or MAI) in FY 2020.*						
	(March 1, 2020 - February 28, 2021)						
		1					
	*If agency was funded for service under Part A (or				1		ì
	MAI) in FY 2020 - if not, mark these cells as "NA"	1976	44%	25%	31%	81%	19%
_	MAI) in FY 2020 - if not, mark these cells as "NA"  2. Number of clients that have received this service	1976	44%	25%	31%	81%	19%
	MAI) in FY 2020 - if not, mark these cells as "NA"  2. Number of clients that have received this service under Part A (or MAI) in FY 2021.	1976	44%	25%	31%	81%	19%
_	MAI) in FY 2020 - if not, mark these cells as "NA"  2. Number of clients that have received this service under Part A (or MAI) in FY 2021.  a. April Request Period = Not Applicable	1976	44%	25%	31%	81%	199
	MAI) in FY 2020 - if not, mark these cells as "NA"  2. Number of clients that have received this service under Part A (or MAI) in FY 2021.  a. April Request Period = Not Applicable b. August Request Period = 03/01/21 - 06/30/21	1976	44%	25%	31%	81%	19%
	MAI) in FY 2020 - if not, mark these cells as "NA"  2. Number of clients that have received this service under Part A (or MAI) in FY 2021.  a. April Request Period = Not Applicable	1976	44%	25% 26%		81%	19%

1.	Additional Information Provided by Requesting	a. Enter	b. How man	ıy	c. Comments (	do not include agency name or identifying			
	Agency (subject to audit by RWGA). Answer all	Number of	Weeks will t	this	information):	services agonos name or identifying			
	questions that are applicable to agency's current	Weeks in this	be if full		.,.				
	situation.	column	amount of			•			
			request is	į					
			received?						
	Length of waiting time (in weeks) for an				The agency ha	s a large number of Ryan White patients			
	appointment for a <b>new</b> client:				seeking conjec	o a large number of Ryan willte patients			
					Cotogon India	es referenced in this Request for Service			
				ľ	Category incre	ase Form. The agency is requesting funding in			
					order to sufficie	ently meet the continued demands for new			
	2 Length of waiting time (in weeks) for		4		Ryan White pa				
	2. Length of waiting time (in weeks) for an	4			The agency has a large number of Ryan White patients				
	appointment for a current client:	•			seeking service	es referenced in this Request for Service			
					Category Increa	ase Form. The agency is requesting funding in			
				+,	order to sufficie	ently meet the continued demands for existing			
			3	2	Ryan White pa	tients			
	3. Number of clients on a "waiting list" for services								
	(per Part A SOC):				offers a limited	es not maintain a waiting list. The agency			
	, i		0		oners a limited	number of same day appointment slots for			
	3. Number of clients unable to access services		<u> </u>	U	patients.	· · · · · · · · · · · · · · · · · · ·			
	monthly (number unable to make an appointment)								
	(per Part A SOC):				The agency off	ers a limited number of same day appointment			
: - : - : : : : : : : : : : : : : : : :	Aper Part A 300).	l Signification of the state of the state of the state of the state of the state of the state of the state of the	0	0 :	slots for patient	ts.			
J.	List all other sources and amounts of funding for	a. Funding	b. End Date	of l	c Amount	d. Comment (50 words or less):			
	similar services currently in place with agency:	Source:	Contract:	۱, ۲	o. Amount	d. Comment (50 words of less):			
	1. DSHS State Services	TODUICC.	8/31/	/24	\$864,506				
			0/3//	121	\$004,50 <del>0</del>				
	2. Ryan White Part B	<del></del>	3/31/	100	£4.000.400				
			3/3//	122	\$1,028,433				
	3. Ryan White Part B - Rebate		2/24	100	0400.040				
	, respectively and burney and bur		3/31/	122	\$136,918	•			
	4. HINS Disbursements	RWA	0/00	100	A455.55				
	THE DISDUISEMENTS	KVVA	2/28/	/22	\$102,234	Back bill @ 06/30/21			
r.Su		A STREET THE TO THE	TO ESSAY TO THE TOP OF THE PARTY OF THE PART	يلرين	James og 1982 i 1960-blevores e	and the second of the second o			
K.	Submit the following documentation at the same time	as the request	(budget parre	tive	and for for se-	MANAGERIA PARAMENTA PARAMENTA PARAMENTA PARAMENTA PARAMENTA PARAMENTA PARAMENTA PARAMENTA PARAMENTA PARAMENTA P			
	Revised Budget Narrative (Table LA ) corresponding	to the review-	(Dudyet Harla	uve	and ree-for-ser	vice budgets may be hard copy or fax):			
	Revised Budget Narrative (Table I.A.) corresponding	to the revised (	contract total (a	amo	unt in Item F.9.	<ul> <li>d. plus current contract amount).</li> </ul>			
	This form must be submitted electronically via email by publ	ished deadline to	Carin Martin: ca	rin.m	nartin@phs.hctx.n	net			

Α.	Name of Agency (not provided to RWPC)	,	<del></del>				K 3. 33
В.	Contract Number (not provided to RWPC)			-			
C.	Service Category Title (per RFP)	OAM	C/MCM/LPAP/S	I WEENOUTE	EACH		1/6
D.	Request for Increase under (check one):	Part A: X	OF I	MAI:		Control No.	<u> </u>
	Request Period (check one):	April:	August: X	Oct:	Final Qtr:	rei i de la companya de la companya de la companya de la companya de la companya de la companya de la companya	15. 1. 1. 25.
E.	Amount of additional funding Requested:	\$446,310.00			jrin <b>ai Qii.</b> Pinggita asimtan	基础的	<b>为进行证明主持</b>
F.	Unit of Service:	a. Number of		c. Number of			
l	(list only those units and disbursements where an	units in current		additional	1		
١.	increase is requested)	contract:	1	units	(b x c)		
L				1			
	Medical Case Management	6800	\$25.00	requested: 3600	000 000 00		(1) (1) (1)
	Service Linkage Worker	12250	7-0.00		11000.00		
	3.	12200	Ψ20.00	3/50	T. 01000.00	<b>⊒</b> 40 € 5 5 € 7 € 7 € 5 € 5 € 5 € 5	
	4.	<del> </del>			\$0.00		
	5.			· .	\$0.00		
	6.				\$0.00		teturi e sulle didici
	7.	<del></del>			\$0.00	그 선생님 작가 있었다면서 그의 그리	
	8. Diagnostics (list current amount in column a.	\$114,730.00		\$004.040.00	\$0.00	ごくしょ さんどく ごうり カル・ス	
i	and requested amount in column c.)	Ψ114,730.00	N/A-	\$281,310.00	<u>\$281,310.00</u>		
	9.Total additional funding (must match E. above):				0440.040.00	A. 18 A. A. A.	
G.	Number of new/additional clients to be served with				\$446,310.00		
	requested increase.						
Н.	Number of clients served under current contract -	a. Number of	b. Percent AA	Doront			
	Agencies must use the CPCDMS to document	clients served	(non-Hispanic)	1	d. Percent		f. Percent
	numbers served.	per CPCDMS	(non-inspanic)	Hispanic)	Hispanic (all	Male	Female
	De-identified CPCDMS-generated reports will	per or obivio		піврапіс)	races)		
	be provided to the RWPC by RWGA.						
	Number of clients that received this service						
	under Part A (or MAI) in FY 2020.*						
	(March 1, 2020 - February 28, 2021)						
	*If agency was funded for service under Part A (or						
	MAI) in FY 2020 - if not, mark these cells as "NA"	2616	49%	470/		_	
	Number of clients that have received this	2010	49%	17%	34%	83%	179
	service under Part A (or MAI) in FY 2020.						
	a. April Request Period = Not Applicable						
	b. August Request Period = 03/01/21 - 06/30/21						
	c. October Request Period = 03/01/21 - 09/30/21						
	d. 4th Qtr. Request Period = 03/01/21 - 11/30/21	901	47%	. 18%	0.504		
	11100121		71 /0	10%	35%	82%	189

I.	Additional Information Provided by Requesting	a. Enter	b. How many	c. Comments	(do <b>not</b> include agency name or identifying
	Agency (subject to audit by RWGA). Answer all	Number of	Weeks will this	information):	(as not moldae agency hame or identifying
	questions that are applicable to agency's current situation.	Weeks in this	be if full	/	
	situation.	column	amount of		
			request is		
	1 Longth of weiting the C		received?		
	1. Length of waiting time (in weeks) for an			The agency ha	as a large number of Ryan White patients
	appointment for a <b>new</b> client:			seeking service	es referenced in this Request for Service
				Category Incre	ease Form. The agency is requesting funding
				order to suffici	ently meet the continued demands for new
		4	3	Ryan White pa	atients
	2. Length of waiting time (in weeks) for an				as a large number of Ryan White patients
	appointment for a current client:			seeking service	es referenced in this Request for Service
			_	Category Incre	ease Form. The agency is requesting funding i
				order to suffici	ently most the continued demand to
		. 3	2	Ryan White pa	ently meet the continued demands for existing
	3. Number of clients on a "waiting list" for services			The agency do	pes not maintain a waiting list. The agency
	(per Part A SOC):			offers a limited	I number of same day appointment slots for
		l 0	0	patients.	mamber of same day appointment slots for
	3. Number of clients unable to access services			padonto.	
	monthly (number unable to make an appointment)			The agency of	fore a limited number of some days and the
	(per Part A SOC):	i o	0	slots for patien	fers a limited number of same day appointmen
	List all other agreements			Richard Company of the Company of the	
•	List all other sources and amounts of funding for	a. Funding	<ul><li>b. End Date of</li></ul>	c. Amount	d. Comment (50 words or less):
	similar services currently in place with agency:  1. Diagnostics	Source:	Contract:		
	1. Diagnostics	RWA	2/28/22	\$135,217	Back bill @ 06/30/21
	2.				
	3.			 	
_					
	4.				
	THE STATE OF THE S	Art data was a			
	Submit the following documentation at the same time		A CONTRACTOR OF THE PARTY OF TH	and while the second of	
·	Submit the following documentation at the same tim	e as the reques	it (budget narrat	ive and fee-for-	service budgets may be hard copy or fax):
	revised budget Nariative (Table I.A.) corresponding	a to the revised	contract total (a	mount in Itam E	Old plus gurrout contract
	This form must be submitted electronically via email by pub	lished deadline to	Carin Martin: car	in.martin@phs.hc	fy net

A. Name	of Agangy (mating)					-	
	e of Agency (not provided to RWPC)	_,					48 4 1 18 2 2 3 3 3 3 4 7 1
C. Service	act Number (not provided to RWPC)	<del></del>	<del></del>		<del></del>		
D. Reque	ce Category Title (per RFP)		Control No.				
D. Reque	est for Increase under (check one):	Clinical Case N Part A: X		MAI:	- VEN MARTIN	COURTOLING.	
E. Amou	est Period (check one):	April:	August: X	Oct:	Final Qtr:		
	nt of additional funding Requested:				p mai Qu.		医布 经支票
	f Service:	a. Number of	b. Cost/unit	c. Number of	d. Total:		
(list or	nly those units and disbursements where an	units in current		additional			
Increa	se is requested)	contract:		units	(b x c)		
				requested:			
	ILIC	8087.93	\$30.00		. 620 000 00		<b>克里克罗斯</b> 克
2.			Ψου.σο	1000	+50,500.00	<b></b> 1	
3.			<del></del>	<del> </del>	\$0.00		
4.					\$0.00	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	
5.			ļ	<del></del>	\$0.00		
6.					\$0.00		
7.					\$0.00	三年でも しょうりょうしゃ とうしゃく	
8. Dist	pursements (list current amount in column a.		l PO RO DOS DANGES		\$0.00	→ の、 がしままた。 たいこと	
and re	questedamount in column c.)		N/A	<u>}</u>	<u>\$0.00</u>		
9.Tota	l additional funding (must match E. above):			i Barrage, repektore	L		
3. Numbe	er of new/additional clients to be served with	والمتأثرة والمتأثرة والمتأثرة والمتأثرة			\$30,000.00		
reques	sted increase.	:					
		a. Number of		<u> </u>	A STATE OF THE STA		
Agenci	ica ministri. II. oponia		b. Percent AA		d. Percent	e. Percent	f. Percent
numbe	ers served.	per CPCDMS	(non-Hispanic)	•	Hispanic (all	Male	Female
	entified CPCDMS-generated reports will	hei Choning		Hispanic)	races)		
be pro	wided to the RWPC by RWGA.						
1 Nur	mber of clients that received this service						
under I	Part A (or MAI) in FY 2020.*	462	55%	26%	18%	83%	179
(March	1, 2020 - February 28, 2021)		,				11.
*If and	ncy was funded for any ite and a			I			
MAIN	ncy was funded for service under Part A (or						
2 Nun	n FY 2020 - if not, mark these cells as "NA" mber of clients that have received this						
service	e under Part A (or MAI) in FY 2021.	146	66%	20%	14%	75%	25%
a Anril	Request Period = Not Applicable		į			. 0,0	207
h Augu	ust Request Period = Not Applicable ust Request Period = 03/01/21 - 06/30/21						
c Octo	wher Request Period = 03/01/21 - 06/30/21	ļ			·		
d 4th C	ober Request Period = 03/01/21 - 09/30/21						
10, 401 0	Qtr. Request Period = 03/01/21 - 11/30/21						

l.	Additional Information Provided by Requesting Agency (subject to audit by RWGA). Answer all	a. Enter	b. How many	c. Comments	(do not include agency name or identifying
	questions that are applicable to agency's current	Number of Weeks in this	Weeks will this be if full	information):	
	situation.	column	amount of		
			request is		
	1. Length of waiting time (in weeks) for an		received?		
	appointment for a <b>new</b> client:	0	0		There is currently no wait time
	2. Length of waiting time (in weeks) for an				There is currently no wait time
	appointment for a current client:	0	0		There is currently no wait time
	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	None, but we o	do have 671 units in no pay from 3/1/21-6/30/2
	3. Number of clients unable to access services	<del></del>	-		provided
	monthly (number unable to make an appointment) (per Part A SOC):	0	0		None
Žiga.	, Audi California I de la companya de la companya de la companya de la companya de la companya de la companya		Transfer in a series with a series		
١.	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:	Source:	Contract:		d. Comment (50 words of less):
	Service Linkage (non-medical case management)	the Resource Group - State	8/31/21	\$275,000	specializing in substance users and the
	2.				recently released
	3.				
	4.			·	
	Submit the following documentation at the same tim	ic as me redues	i ithichiel harran	NO ODO TOO TOO ?	3000000 bud1
	Littlead Eddager (danger L'A') colleabough	a to the revised.	COntract total (a)	mount in Itam E	
	This form must be submitted electronically via email by pub	lished deadline to	Carin Martin: cari	n.martin@nhe het	y net Form under 2/10/49

<del>4</del> .	Name of Agency (not provided to RWPC)						
3.	Contract Number (not provided to RWPC)						<b>建</b> 第1650年,北海北洋5
Ō.	Service Category Title (per RFP)	ADULT COMP	DELIENCIVE D	DIMARYOARE	T150		
<u>D.</u>	Request for Increase under (check one):	Part A: X	CLITENSIVE P	MAI:	TARGETING URBAN	Control No.	(0)
	Request Period (check one):	April:	August: <b>X</b>	Oct:	Final Qtr:		
hiili	Amount of additional funding Requested:	\$495,000.00		TOOL Series on a parter of a	Final QIF;		
Ξ.	Unit of Service:	a. Number of		c. Number of	- T	编的成功	
	(list only those units and disbursements where an	units in current		additional	1		
	increase is requested)	contract:	†	units	(b x c)		
		CONT. GOL.		i			
	1.MD/Phys Extenders	3323	\$275.00	requested: 1000	4077 000		
	2. PSYCH	889	\$130.00		\$275,000.00		
_	3. SLW	10750	\$20.00		\$97,500.00		
	4. NUTRITION	140	\$150.00		\$40,000.00		
	5.		<b>\$100.00</b>	550	\$82,500.00		
	6.				\$0.00	and the second of the second transfer of the second of the	
	7.				\$0.00	and the second of the second	
	8. Disbursements (list current amount in column a.		Daniel Ing		\$0.00		
	and requested amount in column c.)		N/A		\$0.00		
****	9. Total additional funding (must match E. above):				\$495,000.00		
3.	Number of new/additional clients to be served with	000			; ************************************		
	requested increase.	300					
₹.	Number of clients served under current contract -	a. Number of	b. Percent AA	c. Percent	d. Percent Hispanic (all	e. Percent	ie D
	Agencies must use the CPCDMS to document		(non-Hispanic)		races)	Male	f. Percent
	numbers served.	per CPCDMS	,	Hispanic)	14003)	iviale	Female
	De-identified CPCDMS-generated reports will			opao,			
	be provided to the RWPC by RWGA.					,	
	Number of clients that received this service	-	<del></del>				
	under Part A (or MAI) in FY 2020.*						
	(March 1, 2020 - February 28, 2021)	2570	61%	9% raw#	28%	74%	26%
	*If agency was funded for service under Part A (or	2510	raw# 1562	226	raw# 718	raw# 1911	raw# 659
	MAI) in FY 2020 - if not, mark these cells as "NA""				1	14,577	1447 005
	Number of clients that have received this	<del>,</del>					
	service under Part A (or MAI) in FY 2020.						
	a. April Request Period = Not Applicable	İ	57%	9% raw#	0.404		
	b. August Request Period = 03/01/21 - 06/30/21	1459	57 % raw# 835		31%	75%	25%
	c. October Request Period = 03/01/21 - 09/30/21		14W# 035	127	raw# 453	raw# 1087	raw# 372
	d. 4th Qtr. Request Period = 03/01/21 - 11/30/21			!		,	

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. Comment	s (do <b>not</b> include agency name or identifying information):			
1. Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2 weeks	0-1 week	but we still had appointment month. New steady increase.	r same day appointments for new patients is consitently Linkage to care for newly diagnosed is being completed daily ave a limited number of new patient slots for same day s. We are seeing a average of 20-25 new patients each patient appt timeframes is currently 2 weeks, but with the ase of new patients the timeframe could reach 3 weeks acrease in funding. Currently we have \$409,240 in no pay			
Length of waiting time (in weeks) for an appointment for a current client:	1 - 1.5 weeks	0 weeks	We would be	would be able to see existing patients within the same week with			
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	O WCCKS	funding incre	ase.			
3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	No waiting list at this time as we have been able to continue scheduling patients for appointments.				
3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0		able to access services monthly			
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):			
1.							
2.							
3.				<u> </u>			
4.							
Submit the following documentation at the same time	ne as the reques	t /budget parret	TOTAL STATE				
Revised Budget Narrative (Table I.A.) corresponding	a to the revised	contract total (	ve and ree-fo	r-service budgets may be hard copy or fax):			

Request FY 21 Control Priority Number Rank	HRSA Service Category	Local Service Category or Subcategory	Amount of Request	FY 2020 Final Contract Amount	Expended - 2020	Percent Expended	FY 2021 Contract Amount	FY 2021 Expended YTD	FY 2021 Percent YTD	FY 2021 Percent Expected YTD	Is agency currently in compliance with contract conditions and	Notes Amount approved detail:
i						•					therefore eligible	
M1 1;2	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	\$100,100	\$1,045,496	\$1,045,494	100%	\$921,412	\$388,205	42%	42%	for increase? Yes	
							· · · · · · · · · · · · · · · · · ·		<del></del>			
	,											
												· · · · · · · · · · · · · · · · · · ·
		•	•					•				
· · · · · · · · · · · ·												The second secon
						***************************************				***************************************		
	1 <u></u>								·			
				•								
The second secon		<u> </u>							**** ,			
						!	i -					
o de la companya del companya de la companya de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya del companya de la companya de la companya de la companya de la companya del companya de la companya del companya de la		erge in representation in a source of august come consistent and a source of the contract of t	\$100,100	\$1,045,496	\$1,045,494	· · · · · · · · · · · · · · · · · · ·	\$921,412	\$388,205		garta ar atau garta tahung ahga merengan serjam karamatan bar	There is an extended to the second second to the second se	tomin and taken manya as works of the later taken was particular.
Source of Funds Av	ail. for Reallocation	\$905,361 E	MAI xplanation:									
FY 2020 C	arryover Funds	<u> </u>	Inspent MAI fur	nds from FY 2	0 program yea	ar for both Prin	ary Care and	МСМ				

A. B. C. D. E. F.	Name of Agency (not provided to RWPC) Contract Number (not provided to RWPC) Service Category Title (per RFP) Request for Increase under (check one): Request Period (check one): Amount of additional funding Requested: Unit of Service: (list only those units and disbursements where an increase is requested)	ADULT COME Part A: April: \$100,100.00 a. Number of units in current contract:	b. Cost/unit	RIMARY CARE MAI: X Oct: c. Number of additional units	Final Qtr:	Control No.	M
	1.MD/Phys Extenders 2. 3. 4. 5. 6. 7.	2957	\$275.00	requested: 364	\$100,100.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
G.	8. Disbursements (list current amount in column a. and requested amount in column c.) 9. Total additional funding (must match E. above): Number of new/additional clients to be served with requested increase.	125	N/A		\$0.00 <u>\$0.00</u> <b>\$100,100.00</b>		
H.	Number of clients served under current contract - Agencies must use the CPCDMS to document numbers served.  De-identified CPCDMS-generated reports will be provided to the RWPC by RWGA.  1. Number of clients that received this service	a. Number of clients served per CPCDMS	b. Percent AA (non-Hispanic)		d. Percent Hispanic (all races)	e. Percent Male	f. Percent Female
	under Part A (or MAI) in FY 2020.* (March 1, 2020 - February 28, 2021) *If agency was funded for service under Part A (or MAI) in FY 2020 - if not, mark these cells as "NA"" 2. Number of clients that have received this service under Part A (or MAI) in FY 2020.	1403	64% raw# 893	0% raw# 0	35% raw# 497	76% raw# 1063	24% raw# 340
	<ul> <li>a. April Request Period = Not Applicable</li> <li>b. August Request Period = 03/01/21 - 06/30/21</li> <li>c. October Request Period = 03/01/21 - 09/30/21</li> <li>d. 4th Qtr. Request Period = 03/01/21 - 11/30/21</li> </ul>	836	60% raw# 503	0% raw# 0	39% raw# 328	76% raw# 633	24% raw# 203

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	be if full amount of request is	c. Comments (do <b>not</b> include agency name or identifying information):				
	Length of waiting time (in weeks) for an appointment for a <b>new</b> client:	2 weeks	received?  0-1 week	The need for same day appointments for new patients is consitently increasing. Linkage to care for newly diagnosed being completed daily, but we still have a limited number of new patient slots for same day appointments. We are seein a average of 25 new patients each month. New patient app timeframes is currently 2 weeks, but with the steady increas of new patients the timeframe could reach 3-4 weeks without the increase in funding. Currently we have \$27,775 in no pastatus.				
	2. Length of waiting time (in weeks) for an appointment for a <b>current</b> client:	1 - 1.5 weeks	0 weeks	Will be able to see patients same week with funding increase				
;	3. Number of clients on a "waiting list" for services (per Part A SOC):	0	0	No waiting list at this time as we have been able to continue scheduling all patients for appointments.				
	3. Number of clients unable to access services monthly (number unable to make an appointment) (per Part A SOC):	0	0	No clients unable to access services monthly				
J.	List all other sources and amounts of funding for similar services currently in place with agency:  1.	a. Funding Source:	b. End Date of Contract:	c. Amount d. Comment (50 words or less):				
	2.							
	3.							
	4.			:				

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 I.A.) corresponding to the revised contract total (amount in Item F.9.d. plus current contract amount).