Assessment of the Ryan White Administrative Mechanism

March 1, 2024 - February 28, 2025

FINAL REPORT

BROWARD COUNTY RYAN WHITE PART A HIV HEALTH SERVICES PLANNING COUNCIL

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OUR MISSION

"Broward Regional Health Planning Council is committed to developing and providing innovative technology and service solutions at the national, state and local level through planning, direct services and evaluation."

FOR MORE INFORMATION

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ASSESSMENT OF THE EFFICIENCY OF THE ADMINISTRATIVE MECHANISM

Legislative Mandate for the Assessment of the Administrative Mechanism

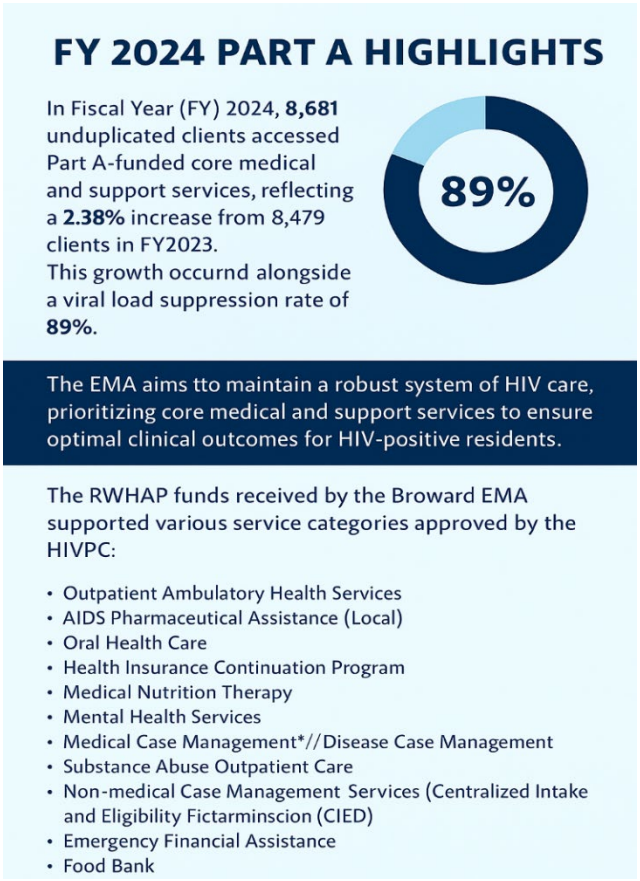
Section 2602(b)(4)(E) of the PHS Act requires a planning council to "assess the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the eligible area, and at the discretion of the planning council (PC), assess the effectiveness, either directly or through contractual arrangements, of the services offered in meeting the identified needs[1]."

The Administrative Mechanism

The Administrative Mechanism is the Community Partnerships Division within the Broward County Department of Human Services, serving as the Recipient responsible for administering the Ryan White Part A (RWPA), Minority AIDS Initiative (MAI), and Ending the HIV Epidemic (EHE) programs.

The Role of Planning Councils

The assessment is conducted by the Broward County HIV Health Services Planning Council (HIVPC), which evaluates the RWPA Recipient's performance in provider selection, contract management, reimbursement processing, communication, and delivery of technical assistance (TA) to subrecipients. Oversight of the AEAM rests with the Priority Setting and Resource Allocation Committee, with final approval granted by the HIVPC general body. While the council is responsible for conducting the assessment, the RWPA Recipient retains sole responsibility for subrecipient monitoring and oversight.



Broward/Fort Lauderdale EMA

Broward County, Florida—the state's second-largest metropolitan area—has a population of 1.9 million. It is designated as an Eligible Metropolitan Area (EMA) under the Ryan White HIV/AIDS Treatment Extension Act of 2009.

In Fiscal Year (FY) 2024, 8,681 unduplicated clients accessed Part A-funded core medical and support services, reflecting a 2.38% increase from 8,479 clients in FY2023. This growth occurred alongside a viral load suppression rate of 89%. The EMA aims to maintain a robust system of HIV care, prioritizing core medical and support services to ensure optimal clinical outcomes for HIV-positive residents.

[1] https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/resources/part-a-program-manual.pdf *NOTE: The planning council will not be involved in how the administrative agency monitors providers, as this is the Recipient's sole responsibility [RWHAP Part A Manual, September 2025; Chapter 4; pgs. 30, 35].*

Frequently Used Acronyms

- **AEAM** - Assessment of the Efficiency of the Administrative Mechanism
- **CQM** - Clinical Quality Management
- **EHE** – Ending the HIV Epidemic
- **EMA** – Eligible Metropolitan Area
- **FY** – Fiscal Year
- **HAB** – HIV/AIDS Bureau
- **HIVPC** – Broward County HIV Health Services Planning Council
- **HRSA** – Health Resources and Services Administration of the U.S. Department of Health and Human Services
- **MAI** - Minority AIDS Initiative
- **NGA** – Notice of Grant Award
- **NOA** - Notice of Award
- **PCS** – Planning Council Support
- **PWH**- People with HIV
- **PSRA** – Priority Setting and Resource Allocation
- **TA** – Technical Assistance
- **TGA** – Transitional Grant Area

ASSESSMENT METHODOLOGY

The FY 2024–2025 AEAM methodology was developed in alignment with HRSA requirements and informed by best practices identified through research conducted by Planning Council Support (PCS) staff. This methodology is submitted annually to the RWPA Recipient as a contractual deliverable. Per the RWPA Manual, s*ection 2609(d)(1)(a) of the PHS Act* requires a planning body (PB) to establish a priority setting and resource allocation (PSRA) process, and, as such, HRSA HAB also requires the PB to assess the administrative mechanism[2].*"*

The PSRA Committee ensures the AEAM is completed annually through a coordinated effort with PCS staff.

Period Assessed

March 1, 2024-February 28, 2025

Timeline

ACTIVITY	*PROPOSED DATE*
HIVPC and Recipient Surveys approved by PSRA.	October 16, 2025
Distribute surveys to HIVPC, Recipient Staff, and subrecipients.	November 17, 2025
Deadline to submit completed surveys.	December 5, 2025
Presentation: Results of the Assessment of the Administrative Mechanism to PSRA and the HIVPC.	January 15, 2026 January 22, 2026
Assessment of the Administrative Mechanism Report due to the RWPA Recipient.	February 28, 2026
Quarterly update report (if necessary)	March 31 June 30 September 30 December 31

Data Collection Process

PCS staff utilized the following components to complete the assessment:

a. Surveys through Alchemer.com
b. Data Collection
c. Data Analysis
d. Production of a Final Report and Presentation

[2] https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/resources/part-a-program-manual.pdf *NOTE: The planning council will not be involved in how the administrative agency monitors providers, as this is the Recipient's sole responsibility. [RWHAP Part A Manual, September 2025; Chapter 4; pgs. 30, 35].*

Primary Data Collection Method

Electronic surveys were the primary tool for gathering input from HIVPC members, the Recipient Office, and subrecipients.

- **Subrecipient Survey:** Captured experiences related to procurement, contracting, reimbursement, and communication with the RWPA Recipient. Questions included multiple-choice, rating scales, and a few open-ended items.
- **HIVPC Survey:** Focused on member self-assessment and communication between HIVPC and the Recipient regarding award notifications, contract progress, reimbursements, procurements, and responsiveness to requests.
- **Recipient Survey:** Addressed topics such as award notification, contract execution dates, average reimbursement time, and communication and technical assistance.

Surveys were distributed electronically via **Alchemer** from **November 17, 2025, through December 5, 2025**. *Note: Master copies of all three surveys are provided in the Appendix.*

As per the RWHAP Part A Manual, topics covered in the AEAM surveys included:

- **The procurement process** – outreach to potential new service providers (officially known as "subrecipients"), dissemination of the Request for Proposal (RFP), number of applications received and funded, the review process including the use of external review panels, and the composition of that panel, and criteria used in the selection of subrecipients as service providers.
- **Contracting** – the time between the Notice of Grant Award to the Recipient and completion of fully executed subcontracts with providers.
- **Reimbursement of subrecipients** – the monthly reporting and invoicing process and the length of time between recipient (or administrative agency) receipt of an accurate invoice with required documentation and issuance of a reimbursement check to the provider as well as obstacles to timely reimbursement.
- **Use of funds** – whether contracting and expenditure of RWHAP Part A funds are consistent with allocations made by the planning council and the proportion of formula and supplemental RWHAP Part A funds that are expended by the end of the program year.
- **Engagement with the HIVPC in the planning process** –how well the Recipient and council work together to carry out shared and coordinated planning tasks, to meet legislative requirements, the extent to which the HIVPC received the data needed for sound decision-making, and evidence of success in maintaining and strengthening the system of HIV care, to desired performance and standards and clinical outcomes are reached.

The following table represents the total number of individual participants, their respective affiliations, and the methodology used to gather data:

PARTICIPANT	# OF POTENTIAL PARTICIPANTS	# OF PARTICIPANTS COMPLETED SURVEY	SURVEY ADMINISTRATION
HIVPC Members	25	22 (88%)	Alchemer.com
Recipient Office	01	01 (100%	
RWPA Subrecipients/Providers	12	12 (100%)	
Total	**38**	**35 (92%)**	

Limitations

This fiscal year, the Recipient Office's outreach achieved a 100% survey submission rate from subrecipients, while Planning Council Support follow-up increased HIVPC member participation to 88%, up from 52% in FY2023.

Final Report and Quarterly Updates

Planning Council Support Staff will present the final report to the PSRA Committee and HIVPC during the January 2026 meetings. The 2024–2025 AEAM report will be submitted to the Recipient Office by February 15, 2026. Identified issues or improvement areas will guide quarterly progress updates. If HIVPC requests additional details—such as subrecipient follow-up surveys—these will be incorporated into quarterly reporting.

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QUANTITATIVE AND QUALITATIVE RESULTS

This report summarizes the findings from three key surveys conducted for the FY 2024-2025 Assessment of the Administrative Mechanism (AAM) under the Ryan White Part A program in Broward County. These surveys include the Subrecipient Survey, HIVPC Survey, and Recipient Survey.

Subrecipient Survey Results

The FY 2024–2025 Assessment of the Administrative Mechanism included a comprehensive survey of Ryan White Part A (RWPA) subrecipients, achieving a 100% response rate (12 agencies). The feedback provides valuable insights into service delivery, administrative processes, and the overall partnership between subrecipients and the Recipient's Office.

Service Provision and Agency Tenure

Respondents reported delivering a diverse range of services, with Non-Medical Case Management 66.7% (8) and Medical Case Management 58.3% (7) being the most common. Integrated Primary Care and Behavioral Health Services 41.7% (5) and Oral Health Care – Routine 33.3% (4) were also frequently cited. Additional services included AIDS Pharmaceutical Assistance, Emergency Financial Assistance, and Mental Health support. **Agency tenure**- Notably, 91.7% (11) of agencies have partnered with RWPA for over 16 years, underscoring the stability and continuity of service provision within the Broward EMA, while 8.3% (1) reported 4–9 years.

Contracting and Award Notifications

Award notifications were primarily issued electronically (91.7%), reflecting a strong reliance on digital communication. While most respondents expressed satisfaction with the timeliness of contract loading in Provide Enterprise, 33.3% rated the process as "Very Satisfied" and 25% (3) as "Satisfied"—a combined 16.6% (2) reported dissatisfaction. Comments suggest that delays were often beyond the control of the Recipient's Office, but they impacted planning efforts.

Reimbursement Timeliness and Accuracy

The majority of agencies experienced reimbursement within 8–14 days (41.7%) or 15–21 days (25%), aligning with program standards. However, 16.7% reported delays of 36–42 days, indicating an area for improvement. Discrepancies in reimbursement were rare, with 91.7% reporting no issues. When discrepancies occurred, agencies noted that they were promptly addressed through system checks and communication with the Recipient's Office.

Communication and Responsiveness

Communication was consistently rated as strong, with 66.7% of respondents stating they were "fully informed" and 33.3% "fairly well informed." Responsiveness was exceptional—58.3% rated it as "Excellent" (within one day) and 41.7% as "Good" (within two days). Comments praised the Recipient's Office for being "extremely helpful," "a valued partner," and "among the best at communicating and supporting agencies."

Technical Assistance

Technical assistance was widely regarded as effective. Programmatic support received the highest ratings, with 66.7% marking it as "Excellent." Fiscal and quality management assistance were also rated positively, though some respondents noted that fiscal TA could be more hands-on. Suggestions included continuing monthly provider meetings and offering additional training opportunities.

Overall Sentiment
Respondents emphasized the importance of maintaining transparency and timely updates. While communication was generally strong, comments highlighted opportunities to enhance fiscal support and streamline contract processes. Positive feedback underscored the Recipient's role as a collaborative partner, with one respondent noting, "Broward County is among the best at communicating and supporting us in accomplishing the mission."

Recipient Office Survey Results

The survey focused on award notifications, contract execution, invoicing and reimbursement, fiscal and programmatic monitoring, communication, technical assistance, and procurement.

Award Notifications and Contract Execution: The Broward EMA received its initial Notice of Grant Award on January 12, 2024, and the final award on May 16, 2024. Partial notifications were issued but did not affect procurement since estimates were based on prior-year allocations. Award letters were sent on February 9, 2024, and contracts were executed between February and June 2024, with uploads to Provide Enterprise on March 6, 2024. Some delays occurred due to legal review and agency-level DocuSign issues. Continued early drafting and coordination with the County Attorney's Office are recommended to minimize delays.

Invoicing and Reimbursement: Providers began submitting invoices in March 2024. The **average reimbursement time** was **15 to 21 days**, and no discrepancies were reported. Although policies were not uploaded in the survey due to document size, the *HSCPD-FI014 Electronic Invoice Processing Policy* was submitted via email. This policy outlines detailed procedures for invoice submission, review, and approval, including timelines, error tracking, and PeopleSoft integration, ensuring compliance with prompt payment standards and federal requirements.

Fiscal and Programmatic Monitoring: Each provider received one programmatic and one fiscal site visit during FY 2024, with corrective action plans implemented as needed. The *Ryan White Part A Monitoring Standards*, provided via email, reinforce these practices by detailing HRSA's expectations for annual site visits, fiscal monitoring, and compliance with 2 CFR 200.

Financial Reporting: *The Federal Financial Report for FY 2023–2024* confirms total federal funds authorized at $16,902,904, expenditures of $16,187,641.08, and an unobligated balance of $715,262.92. These figures reflect strong fiscal management and compliance with HRSA's requirement to minimize unobligated balances.

Communication and Technical Assistance: Communication was rated as keeping agencies fairly well informed, with responses provided within two days, and technical assistance was rated as good. Monthly meetings with providers to review utilization and quality management issues, along with ongoing technical support, were cited as key strategies for maintaining compliance and addressing emerging challenges.

Request for Proposals (RFP)Contractual Corrective Actions: To ensure timely and efficient distribution of contracts following an RFP process, the Recipient Office plans to draft initial contracts "early" to allow sufficient time for legal review by the County Attorney's Office. This proactive approach is intended to minimize delays and support efficient contract execution.

Supporting Documents: The supporting documents referenced in this report establish the compliance framework and underscore Broward EMA's commitment to transparency, accountability, and continuous improvement in service delivery.

- ✓ HSCPD-FI014 Electronic Invoice Processing Policy
- ✓ Ryan White Part A 2023–2024 Federal Financial Report
- ✓ Ryan White Part A Monitoring Standards
- ✓ FY2023-2024 Final Allocations
- ✓ Ryan White Contracted Subrecipients and Consultants
- ✓ FY2023-2024 Expenditures

Strengths and Opportunities: The survey results highlight several **strengths**, including timely reimbursements within 15–21 days, comprehensive invoice processing procedures, adherence to HRSA monitoring standards, strong financial reporting, and effective communication and technical assistance. **Opportunities** for improvement include standardizing award notification Standard Operating Procedures (SOPs), ensuring visibility of the invoice processing policy among subrecipients, formalizing site-visit schedules based on HRSA standards, and continuing to track timeliness metrics for reimbursements and responses.

HIVPC Survey Results

The survey evaluated the effectiveness of the Planning Council's structure, processes, and collaboration with the Ryan White Part A Office, focusing on communication, responsiveness, and participation by Persons with HIV (PWH).

Summary of Findings: The survey achieved a 95.5% completion rate, with 22 responses (21 complete and 1 partial).

Planning council self-assessment:

- Overall Performance: 61.9% (13) rated Excellent, 33.3% (7) Good. Comments noted strong leadership and effective decision-making.
- Structure and Processes: 47.6% (10) strongly agreed, and 42.9% (9) agreed that the Council's structure and processes are effective.
- PWH Participation: 52.4% (11) rated participation as Good, 14.3% (3) as Excellent. Comments suggest continuing outreach to increase engagement.
- Training and Education to understand HIVPC structure and operational processes: 47.6% (10) strongly agreed, and 42.9% agreed that they received sufficient training, while 9.5% (2) strongly disagreed.

RWPA Recipient assessment:

- Funding Information: 61.9% (13) rated the Ryan White Part A Office as Good and 38.1% (8) as Excellent in providing updates.
- Communication on Notices of Award: 57.1% (12) rated Excellent, 38.1% (8) Good.

- Communication on Subrecipient Contracts: 47.6% (10) Good, 38.1% (8) Excellent.
- Responsiveness to Data Requests: 57.1% (12) Good, 33.3% (7) Excellent.
- Overall Communication: 47.6% (10) Good and 47.6% (10) Excellent.

Summary: The survey results indicate that the HIVPC is functioning effectively as a planning body, with improved structural processes and active engagement from members. Training efforts appear adequate, as most respondents feel well-informed about Council operations. Communication between the Ryan White Part A Office and the Planning Council is consistently rated as good to excellent, particularly regarding notices of award and funding updates. Responsiveness to data requests and overall collaboration were also highly rated, reinforcing confidence in the administrative mechanism. Several comments suggested improving PWH engagement, training, and ensuring consistent updates on contract-related matters.

FY 2024-2025 RECOMMENDATIONS

Recommendations to the Recipient Office

Based on survey findings and respondent comments, the following recommendations are proposed:

1. **Improve Contract Loading Timeliness**
    - Continue early drafting and coordination with the County Attorney's Office to minimize delays.
    - Explore automation or streamlined workflows in Provide Enterprise to reduce bottlenecks.
2. **Maintain and Monitor Reimbursement Timeliness**
    - Continue meeting the 15–21-day reimbursement window.
    - Implement a tracking dashboard for invoice processing times to identify and address delays proactively.
3. **Enhance Fiscal Technical Assistance**
    - Provide more hands-on training for fiscal processes, complementing documentation-based support.
    - Offer quarterly workshops focused on invoice accuracy and compliance.
4. **Strengthen Communication and Transparency**
    - Maintain responsiveness within two business days.
    - Document and share technical assistance provided for HRSA reporting.
    - Continue monthly provider meetings to address emerging issues and share best practices.
5. **Standardize Award Notification SOPs**
    - Develop and disseminate clear procedures for communicating award notifications and contract timelines to subrecipients.
6. **Expand Training Opportunities**
    - Offer onboarding sessions for new subrecipient staff.
    - Include modules on contract management, reimbursement processes, and compliance requirements.
7. **Preparation for Contract Awards Following a New RFP Process**
    - The Recipient should establish a clear definition of what constitutes "early drafting" of contracts and integrate this standard into its official Standard Operating Procedures (SOPs).

Recommendations to Planning Council Support

1. **Expand Training Opportunities**
   - Incorporate AEAM and HIVPC structure and operational processes training annually.

CONCLUSION

AEAM Status: The administrative mechanism functioned effectively and efficiently from March 1, 2024, through February 28, 2025.

APPENDICES

Appendix A – HIVPC Member Survey

The HIVPC survey was distributed via email, which contained a link to Alchemer for HIVPC members to complete the survey.
Background Information

1) Your Name*
_____

2) In general, how would you rate the work of the Planning Council during Fiscal Year 2024 (March 1, 2024 - February 28, 2025? *
[ ] Excellent
[ ] Good
[ ] Average
[ ] Fair
[ ] Poor
[ ] Comments: _____

3) In terms of structure and process, the Ryan White Part A HIVPC is effective as a planning body:*
[ ] Strongly Disagree
[ ] Disagree
[ ] Strongly Agree
[ ] Agree
[ ] Comments: _____

4) I have been given enough training/education to understand the structure and process of the Ryan White Part A HIVPC:*
[ ] Strongly Disagree
[ ] Disagree
[ ] Strongly Agree
[ ] Agree
[ ] Comments: _____

5) Rate how well the Ryan White Part A Office provided the Planning Council with funding information and updates during FY2024-2025.*
[ ] Don't know
[ ] Poor
[ ] Fair
[ ] Good
[ ] Excellent
[ ] Comments:: _____

6) Rate how well the Ryan White Part A Office informed the Planning Council of federal notice of award (s) for Fiscal Year 2024-2025.*
[ ] Don't know
[ ] Poor
[ ] Fair
[ ] Good
[ ] Excellent

[ ] Comments:: _____

7) How would you rate Planning Council's FY 2024 Priority Setting and Resource Allocation (PSRA) Process which sets priorities and allocations for each service category?*
( ) Excellent
( ) Good
( ) Average
( ) Fair
( ) Poor
( ) I am not familiar enough to rate it

8) Do you have any suggestions for improving future Priority Setting and Resource Allocation (PSRA) processes?*
_____
_____
_____
_____

9) Rate the level of participation by Persons Living with HIV (PWH) in the planning process*
[ ] Don't know
[ ] Poor
[ ] Fair
[ ] Good
[ ] Excellent
[ ] Comments:: _____

10) How would you rate the responsiveness of the Ryan White Part A Office in providing the information requested by the planning council for making informed decisions?
*
[ ] Don't know
[ ] Poor
[ ] Fair
[ ] Good
[ ] Excellent
[ ] Comments:: _____

11) How would you rate the level of communication between the Ryan White Part A Office and the Planning Council?*
[ ] Don't know
[ ] Poor
[ ] Fair
[ ] Good
[ ] Excellent
[ ] Comments:: _____

12) What other comments do you have on the Planning Council's work? Feel free to comment on the Council's service standards, opportunity for consumer/public input at meetings and needs assessments/integrated health plan, timing/location of meetings, or anything else relevant to the Planning Council's work. Please type N/A if you have no further comments.*

Appendix B – Recipient Survey

Contracts

1) When did the Broward EMA receive its Notice of Grant Award for FY2024 funding to begin the procurement process?*

_____

2) Were there any Partial Notifications of Award issued by HRSA/HAB for FY2024?*
( ) Yes
( ) No

3) If yes, how did that affect the procurement process?

_____
_____
_____
_____

4) On what date did the Broward EMA receive its final Notification of Award from the federal government for FY 2024 funding?*

_____

5) On what date were award letters sent to funded agencies for FY2024?*

_____

6) How were agencies notified of their award? Please select all that apply.*
[ ] Award Letter (hard copy)
[ ] Award Letter (electronic/e-mail)
[ ] Other - Write In: _____

7) On what date were contracts uploaded into Provide Enterprise for funded agencies? Please note multiple dates for multiple contracts.*

_____
_____
_____
_____

8) On what date were contracts with funded agencies fully executed? Please note multiple dates for multiple contracts. *

_____
_____
_____
_____

9) What was the due date for agencies to submit contract documents for processing?*

_____

10) Describe any Recipient obstacles contributing to delay in executing provider contracts.*

_____
_____
_____

_____

11) Describe any agency/provider obstacles contributing to the delay in executing provider contracts.*
_____
_____
_____
_____

Contracts

12) When did the Broward EMA receive its Notice of Grant Award for FY2024 funding to begin the procurement process?*
_____

13) Were there any Partial Notifications of Award issued by HRSA/HAB for FY2024?*
( ) Yes
( ) No

14) If yes, how did that affect the procurement process?
_____
_____
_____
_____

15) On what date did the Broward EMA receive its final Notification of Award from the federal government for FY 2024 funding?*
_____

16) On what date were award letters sent to funded agencies for FY2024?*
_____

17) How were agencies notified of their award? Please select all that apply.*
[ ] Award Letter (hard copy)
[ ] Award Letter (electronic/e-mail)
[ ] Other - Write In: _____

18) On what date were contracts uploaded into Provide Enterprise for funded agencies? Please note multiple dates for multiple contracts.*
_____
_____
_____
_____

19) On what date were contracts with funded agencies fully executed? Please note multiple dates for multiple contracts. *
_____
_____
_____
_____

20) What was the due date for agencies to submit contract documents for processing?*
_____

21) Describe any Recipient obstacles contributing to delay in executing provider contracts.*
_____
_____
_____
_____

22) Describe any agency/provider obstacles contributing to the delay in executing provider contracts.*
_____
_____
_____
_____

Service Provider Reimbursements

23) What procedures, documents and policies are used to guide the payment of invoices/reimbursements?
_____1

24) Please provide policies and procedures regarding the payment of invoices/reimbursements, if available.
_____1

25) When (month/date) were providers first able to submit invoices for reimbursement in FY2024?*
_____

26) Over the past year, what is the approximate amount of time between submission of an accurate invoice/end-of-month report and receipt of a reimbursement check?*
( ) 0-7 days
( ) 8-14 days
( ) 15-21 days
( ) 22-28 days
( ) 29-35 days
( ) 36-42 days
( ) 42+ days

27) List/describe any obstacle contributing to the delay in reimbursement to providers.*
_____
_____
_____
_____

28) Have there ever been discrepancies in reimbursement checks (checks were more or less than the amount due)? *
( ) Yes
( ) No

29) If yes, how were those discrepancies resolved?*
_____
_____

_____
_____

30) Over the past year (FY2024-2025), has the Recipients' Office contacted agencies to review utilization and expenditures that were not on target (over or under targets for utilization or expenditures?*
( ) Yes
( ) No

31) If yes, did the Recipient's office provide feedback or solutions to help agencies get back to target utilization and expenditures? Please explain

_____
_____
_____
_____

Recipient Communication & Technical Assistance/Training

32) What is the policy regarding programmatic and fiscal monitoring site visits to service providers? That is, how many site visits are required for a service provider and what is the scope of those visits?

33) In your experience during FY2024-2025, how would you rate the communication between the Recipient's Office and funded agencies?*
[ ] Keeps agency fully informed
[ ] Keeps agency fairly well informed
[ ] Keeps agency adequately informed
[ ] Gives out only a limited amount of information
[ ] Doesn't communicate much at all about what is going on
[ ] Comments:: _____

34) How would you rate the Recipients' timeliness in responding to questions and requests for information over the past year?*
[ ] Excellent (within one day)
[ ] Good (within two days)
[ ] Average (within three days)
[ ] Poor (more than five days)
[ ] Comments:: _____

35) How would you rate the Recipient's Office in providing agencies with programmatic and/or fiscal technical assistance or training during FY2024-2025?*
[ ] Excellent
[ ] Good
[ ] Average
[ ] Poor
[ ] Very Poor
[ ] Comments:: _____

36) In the last fiscal year (FY2024), how many Programmatic site visits did each service provider receive? (Please give range and average)*

_____

37) In the last fiscal year (FY 2024), how many fiscal site visits did each service provider receive? (Please give range and average)*

_____

38) What measures are taken to ensure that service providers act on recommendations offered during the monitoring visit (e.g., corrective action plans, additional site visits, requests for reports, funding reductions, etc.)?*

_____
_____
_____
_____

39) In addition to the monitoring, what other technical assistance is provided?*

_____
_____
_____
_____

40) What percentage of the overall award for the last fiscal year was used for Recipient Administration, Planning Council Support, and Clinical Quality Management?*
Recipient Administration: _____
Planning Council Support: _____
Clinical Quality Management: _____

Procurement and Allocation

41) What percent of formula funds were unexpended at the end of FY 2024? Please explain.*

_____
_____
_____
_____

42) What percent of supplemental funds were unexpended at the end of FY2024? Please explain.*

_____
_____
_____
_____

43) Please provide a final expenditure report for FY2024.*
_____1

44) Please provide a final allocation report for FY2024.*
_____1

45) Please provide a list of all Part A-funded service providers in the Broward EMA for FY2024 (including contract information), as well as the categories for which each provider is contacted.*
_____1

46) What measures did the Recipient Office implement, if any, to ensure the timely and efficient distribution of contracts following an RFP process?

_____

Appendix C – Subrecipient Survey

The Subrecipient Survey was distributed via email, which contained a link to Alchemer for the funded Providers to complete the survey.

Provider Information

1) Please provide the following contact information: *
Name: _____
Job Title: _____
Agency: _____
Phone Number: _____
Email: _____

2) My agency is contracted to provide the following Ryan White Part A service(s) (select all that apply): *
[ ] Outpatient /Ambulatory Health Services (OAHS)
[ ] Minority AIDS Initiative (MAI) OAHS
[ ] AIDS Pharmaceutical Assistance
[ ] Oral Health Care
[ ] Health Insurance Continuation Program (HICP)
[ ] Medical Case Management
[ ] Mental Health Services
[ ] MAI Mental Health Services
[ ] MAI Substance Abuse Outpatient Care
[ ] Substance Abuse Outpatient Care
[ ] Non-Medical Case Management Services: Centralized Intake and Eligibility Determination (CIED)
[ ] MAI Non-Medical Case Management Services: CIED
[ ] Non-Medical Case Management Services
[ ] Food Bank Services
[ ] Legal Services
[ ] MAI Medical Case Management
[ ] Medical Nutrition Therapy
[ ] Food Bank (Food Vouchers)
[ ] Emergency Financial Assistance

3) How long has your agency been a Ryan White Part A provider? *
( ) This is my agency's first year as a provider
( ) 2-3 years
( ) 4-9 years
( ) 10-15 years
( ) 16+ years

Contracts

4) For the fiscal year (beginning March 1, 2024 to February 28, 2025), on approximately what date was your agency notified that you would be receiving funding for the new fiscal year?
_____

5) How were you notified of your award? Please select all that apply.*

( ) Award Letter (hard copy)
( ) Award Letter (electronic/e-mail)
( ) Other - Write In: _____

6) Approximately what date was your agency notified that the contract(s) were uploaded into Provide Enterprise? *
_____

7) Approximately what date did you receive a fully executed contract for Part A services? *
_____

8) How satisfied are you with the timeliness of the contract loading process in Provide Enterprise for Ryan White Part A subrecipients? *
( ) Very Satisfied
( ) Satisfied
( ) Neutral
( ) Dissatisfied
( ) Very Dissatisfied

9) Please explain if "Dissatisfied" or "Very Dissatisfied" with the contract loading process.
_____
_____
_____
_____

10) What additional comments do you have about the contractual process?
_____
_____
_____
_____

Service Provider Reimbursements

11) Over the past year (FY2024-2025), what is the approximate amount of time between submission of an accurate invoice/end-of-month report and receipt of a reimbursement check? *
( ) 0-7 days
( ) 8-14 days
( ) 15-21 days
( ) 22-28 days
( ) 29-35 days
( ) 36-42 days
( ) 42+ days

12) When (month/date) did your agency receive your first reimbursement check for FY2024 services? *
_____

13) Have there ever been discrepancies in your reimbursement checks (checks were more or less than the amount due)? *
( ) Yes
( ) No

14) If yes, how were those discrepancies resolved? *
_____
_____
_____
_____

15) Over the past year (FY2024-2025), has the Recipients' Office contacted your agency to review utilization and expenditures that were not on target (over or under targets for utilization or expenditures? *
( ) Yes
( ) No

16) Did the Recipient offer feedback or solutions to assist your agency in meeting target utilization and expenditure goals? *
[ ] Yes
[ ] No
[ ] Other - Write In: _____

17) What additional comments do you have about the reimbursement process? *
_____
_____
_____
_____

Recipient Communication & Technical Assistance/Training

18) In your experience during the FY2024-2025 period, how would you rate the communication between your agency and the Recipients' Office? *
[ ] Keeps agency fully informed
[ ] Keeps agency fairly well informed
[ ] Keeps agency adequately informed
[ ] Gives out only a limited amount of information
[ ] Doesn't communicate much at all about what is going on
[ ] Other - Write In: _____

19) How would you rate the Recipients' Office in responding to questions and requests for information during the FY2024-2025 period? *
[ ] Excellent (within one day)
[ ] Good (within two days)
[ ] Average (within three days)
[ ] Poor (more than five days)
[ ] Other - Write In: _____

20) How would you rate the Ryan White Part A Office in providing your agency with (1) Programmatic, (2) Fiscal, (3) Quality Management technical assistance (TA) or training during FY 2024 (this may include recommendations from the site visit or a special technical assistance training)? *

	Excellent	Good	Average	Fair	Poor	N/A Agency has not required TA in FY23	N/A Requests for TA during FY23 have not been met	N/A (No site visits/TA during FY23)
Programmatic TA	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Fiscal TA	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Quality Management TA	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

21) Additional comments regarding the communication / technical support of the Ryan White Part A Office.

_____
_____
_____
_____

References

Assessing the Efficiency of the Administrative Mechanism: An Introduction

Part A Manual

Ryan White HIV/AIDS Program Part A Planning Council Primer

END OF REPORT