



MEETING AGENDA

Committee: Priority Setting & Resource Allocation (PSRA)

Date/Time: Thursday, June 21, 2018, 9:00 a.m.

Location: Governmental Center Room A-337

Chair: Lorenzo Robertson **Vice Chair:** Marie Hayes

1. **CALL TO ORDER:** *Welcome, Ground Rules, Sunshine, Introductions, Moment of Silence, & Public Comment*
2. **APPROVALS:** 6/21/18 Agenda and 5/17/18 Meeting Minutes
3. **STANDARD COMMITTEE ITEMS**
 - a. Monthly Expenditure/Utilization Report by Category of Service
4. **UNFINISHED BUSINESS**
5. **MEETING ACTIVITIES**

Goal/Work Plan Objective #:	Accomplishments
Ryan White Part A Service Category Presentations	ACTION ITEM: Receive presentations on Part A trends, expenditures, utilization, health outcomes, etc.
Wrap-Up and Final Discussion	ACTION ITEM: Final discussion on data presentations, key findings, service gaps and barriers, community needs, etc.
FY2019 Service Category Allocations	ACTION ITEM: Allocate Part A & MAI funds by service category.

6. **RECIPIENT REPORTS**
7. **PUBLIC COMMENT**
8. **AGENDA ITEMS/TASKS FOR NEXT MEETING:** July 19, 2018 **Time:** 9:00 a.m. **Venue:** Governmental Center Annex, Room A-337

Goal/Work Plan Objective #:	Accomplishments

9. **ANNOUNCEMENTS**
10. **ADJOURNMENT**

PLEASE COMPLETE YOUR MEETING EVALUATIONS

THREE PRINCIPLES IDEAS OF THE BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

- Linkage to Care • Retention in Care • Viral Load Suppression •

VISION: To ensure the delivery of high quality comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care

MISSION: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



MEETING MINUTES

Committee: Priority Setting & Resource Allocation (PSRA)

Date/Time: Thursday, May 17, 2018 9:00 a.m.

Location: Government Center A-337

Chair: Lorenzo Robertson **Vice Chair:** Marie Hayes

ATTENDANCE					
#	Members	Present	Absent		Guests
1	Barrientos, Y.	X			Fortune-Evans, B.
2	Barnes, B.	X			Mester, B.
3	Grant, C.	X			HIVPC Staff
4	Hayes, M., <i>Vice Chair</i>	X			Ewart, L.
5	Katz, H. B.	X			Oratien, V.
6	Lopes, R.	X			Johnson, B.
7	Robertson, L., <i>Chair</i>	X			
8	Schickowski, K.				Grantee Staff
9	Shamer, D.				Jones, L.
10	Siclari, R.		A		Anderson, T.
11	Williams, R.	X			Drummond, K.
					Meeks, A.
	Quorum = 7	10			Robinson, J.

1. CALL TO ORDER:

The PSRA Chair called the meeting to order at 9:15 a.m. The Chair welcomed all present. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. Chairs, committee members, guests, Grantee staff and HIVPC staff self-introductions were made.

2. APPROVALS:

Motion #1: To approve 5/17/18 meeting agenda.

Proposed by: Hayes, M. **Seconded by:** Lopes, R.

Action: Passed Unanimously

Motion #2: To approve meeting minutes of 4/19/18.

Proposed by: Hayes, M. **Seconded by:** Shamer, D.

Action: Passed Unanimously

3. UNFINISHED BUSINESS

None.

4. STANDARD COMMITTEE ITEMS

Monthly Expenditure/Utilization Report: waiting on a few invoices, approving budgets with the start of the FY. Vice Chair would like reports also in writing. Asked about budget approval, HRSA mandates budget meet specific criteria, and providers cannot invoice until approved.

5. MEETING ACTIVITIES

- a. Ryan White Funder and Stakeholder Presentations:

VISION: To ensure the delivery of high quality comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care

MISSION: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



- i. Ryan White Part C- Claudette Grant, the Part C representative, gave an overview of the Part C Program provided through Broward Health. Part C provides Early Intervention Services that target low-income, medically underserved PLWHA in Broward. Primary care services in the targeted area include: 1) HIV counseling, testing and referral; 2) medical evaluation and clinical care; 3) other primary care services; and 4) referral to other health services. The Part C representative noted various client trends: “newly diagnosed” clients who seem to have been HIV+ for several years, AIDS diagnoses, opportunistic infections such as Kaposi's Sarcoma (KS) and Pneumocystis Carinii Pneumonia (PCP), AIDS, and an increase in syphilis cases. She stressed the need for increased messaging surrounding sexual education and risk reduction. Service gaps include the need for an on-site psychiatrist to help bridge integration of behavioral health and OAMC services.
 - ii. Ryan White Part D - The Part D representative gave an overview of the Comprehensive Family AIDS Program (CFAP) at Children’s Diagnostic and Treatment Center (CDTC). The Part D Program provides access to coordinated, family-centered primary medical care and support services for HIV-infected women, infants, children, and youth and their affected family members. The Part D representative discussed notable trends in various populations of focus, including in newly diagnosed patients (diagnosed during pregnancy, issues with ART resistance); young adults (problems with retention in care, unplanned pregnancies, employment/housing issues), etc. The members asked questions about temporary/one time services (food pantry, legal) and the difference between linking clients to services and having in-house treatment. While there is no medical doctor on staff, the Part D representative stated clients are still being served with service gaps through linkage to services.
 - iii. Housing Opportunities for Persons with AIDS (HOPWA) - The HOPWA representative gave an overview of the City of Ft. Lauderdale HOPWA Program, the various services provided, their eligibility criteria, budget and clients served. With a \$7.2 million budget HOPWA provides Short-Term Rent, Mortgage, and Utility, Permanent Housing Placement, Housing Case Management, Project Based Rental and Tenant Bases Rental Voucher services to 1791 clients (651 of which received financial subsidies and 1140 of which only received case management services). The members asked about the number clients receiving financial help versus those without, the housing project model, and ways to improve housing assistance in the County.
- b. Needs Assessment/Community Feedback- The PC Manager presented information regarding community feedback and needs assessment activities relevant to each of the funded Part A services in Broward. Information from the CEC, Black Women’s Study and Broward House Day Treatment Center Focus Group was used to help PSRA members understand community priorities and rank the services according to community need. Common themes included “not feeling comfortable going to the doctor” as a barrier to care, issues understanding and accessing insurance, and the need for a one-stop-shop for both medications and eligibility. The PC Manager also explained the recent classification of Broward’s Part A Case Management services under Core Medical instead of Support based on the delivery of the program. However, CIED and BISS will remain under the support service. A member expressed his interest in reviewing data to assess the need for medical nutrition therapy as its own core medical service.
- c. Priority Setting- Each member reviewed HRSA’s definitions of allowable core and support services, then input their rankings to send to the HIVPC for final approval. (See attachments)

Motion #3: To approve the FY2019 Rankings of the Core Medical Services

Proposed by: Shamer, D. **Seconded by:** Lopes, R.

Action: Passed Unanimously

Motion #4: To approve the FY2019 Rankings of the Support Services

Proposed by: Williams, R. **Seconded by:** Hayes, M.

Action: Passed Unanimously

VISION: To ensure the delivery of high quality comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care

MISSION: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



Motion #5: To appoint Bisiola Fortune-Evans to the PSRA Committee
Proposed by: PSRA Chair

6. RECIPIENT REPORT

None.

7. DATA REQUEST:

Part D FY2017 client demographics and expenditures; HOPWA sub-recipients' clients and funding per agency.

8. PUBLIC COMMENT

None.

9. AGENDA ITEMS/TASKS FOR NEXT MEETING: June 21, 2018 **Time:** 9:00 a.m. **EXTENDED MEETING**
Venue: A-337

<i>Goal/Work Plan Objective #:</i>	<i>Accomplishments</i>
Ryan White Part A Service Category Presentations	ACTION ITEM: Receive presentations on Part A trends, expenditures, utilization, health outcomes, etc.
Wrap-Up and Final Discussion	ACTION ITEM: Final discussion on data presentations, key findings, service gaps and barriers, community needs, etc.
FY2019 Service Category Allocations	ACTION ITEM: Allocate Part A & MAI funds by service category.

10. ANNOUNCEMENTS

None.

11. ADJOURNMENT

The meeting was adjourned at 12:50 a.m.



PSRA Attendance CY2018

Consumer	PLWHA	Absences	Count	Meeting Month:	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date:	18	C	15	19	17								
1	1	1	1	Barnes, B.	X		A	X	X								
1	0	0	2	Barrientos, Y.	X		X	X	X								
0	0	0		DeSantis, M.	X	Z-1/23											
0	0	1	3	Grant, C.	X		X	A	X								
0	0	1	4	Hayes, M., V. Chair	A		X	X	X								
1	1	0	5	Katz, H.B.	X		X	E	X								
0	0	1	6	Lopes, R.	A		X	X	X								
			7	Robertson, L., Chair	N- 4/1			A	X								
0	0	0	8	Schickowski, K.	X		X	X	X								
1	1	0	9	Shamer, D.	X		X	X	X								
0	0	2	10	Siclari, R.	X		A	X	A								
0	1	1		Spencer, W.	X		X	A	Z- 5/15								
		1	11	Williams, R.	N- 1/18		X	A	X								
				Quorum = 7	9		8	7	10								

Legend:	
X	- present
A	- absent
E	- excused
NQA	- no quorum absent
NQX	- no quorum present
NQE	- no quorum excused
N	- newly appointed
Z	- resigned
C	- cancelled
W	- warning letter
R	- removal letter

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:1 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Grant, C.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Outpatient/Ambulatory Health Services (OAMC)
2. AIDS Drugs Assistance Program Treatments (ADAP)
3. Oral Health Care (Dental)
4. Mental Health Services
5. Medical Case Management (Disease)
6. Health Insurance Premium and Cost Sharing (HICP)
7. AIDS Pharmaceutical Assistance (Local)
8. Early Intervention Services (EIS)
9. Medical Nutrition Therapy
10. Substance Abuse- Outpatient
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Non-Medical Case Management
2. Medical Transportation Services
3. Linguistics Services (Interpretation and Translation)
4. Housing
5. Legal Services
6. Health Education/Risk Reduction
7. Food Bank/Home-Delivered Meals
8. Psychosocial Support
9. Permanency Planning
10. Other Professional Services
11. Substance Abuse- Residential
12. Respite Care
13. Outreach
14. Referral for Health Care and Support Services
15. Rehabilitation Services
16. Child Care
17. Emergency Financial Assistance

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:2 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Schickowski, K.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Outpatient/Ambulatory Health Services (OAMC)
2. Oral Health Care (Dental)
3. AIDS Pharmaceutical Assistance (Local)
4. Health Insurance Premium and Cost Sharing (HICP)
5. AIDS Drugs Assistance Program Treatments (ADAP)
6. Medical Case Management (Disease)
7. Mental Health Services
8. Substance Abuse- Outpatient
9. Medical Nutrition Therapy
10. Home and Community-Based Health Services
11. Early Intervention Services (EIS)
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Legal Services
2. Food Bank/Home-Delivered Meals
3. Emergency Financial Assistance
4. Housing
5. Medical Transportation Services
6. Non-Medical Case Management
7. Substance Abuse- Residential
8. Psychosocial Support
9. Outreach
10. Child Care
11. Referral for Health Care and Support Services
12. Health Education/Risk Reduction
13. Linguistics Services (Interpretation and Translation)
14. Permanency Planning
15. Respite Care
16. Other Professional Services
17. Rehabilitation Services

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:3 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Williams, R.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. AIDS Pharmaceutical Assistance (Local)
2. Health Insurance Premium and Cost Sharing (HICP)
3. Outpatient/Ambulatory Health Services (OAMC)
4. Medical Case Management (Disease)
5. Mental Health Services
6. Oral Health Care (Dental)
7. Substance Abuse- Outpatient
8. AIDS Drugs Assistance Program Treatments (ADAP)
9. Early Intervention Services (EIS)
10. Medical Nutrition Therapy
11. Home Health Care
12. Hospice
13. Home and Community-Based Health Services

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Housing
2. Child Care
3. Psychosocial Support
4. Substance Abuse- Residential
5. Food Bank/Home-Delivered Meals
6. Health Education/Risk Reduction
7. Emergency Financial Assistance
8. Legal Services
9. Medical Transportation Services
10. Referral for Health Care and Support Services
11. Rehabilitation Services
12. Outreach
13. Linguistics Services (Interpretation and Translation)
14. Non-Medical Case Management
15. Other Professional Services
16. Permanency Planning
17. Respite Care

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:4 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Lopes, R.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Outpatient/Ambulatory Health Services (OAMC)
2. Mental Health Services
3. Medical Case Management (Disease)
4. Health Insurance Premium and Cost Sharing (HICP)
5. Oral Health Care (Dental)
6. Substance Abuse- Outpatient
7. AIDS Pharmaceutical Assistance (Local)
8. AIDS Drugs Assistance Program Treatments (ADAP)
9. Medical Nutrition Therapy
10. Early Intervention Services (EIS)
11. Home Health Care
12. Home and Community-Based Health Services
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Food Bank/Home-Delivered Meals
2. Non-Medical Case Management
3. Housing
4. Emergency Financial Assistance
5. Legal Services
6. Substance Abuse- Residential
7. Psychosocial Support
8. Referral for Health Care and Support Services
9. Health Education/Risk Reduction
10. Medical Transportation Services
11. Outreach
12. Child Care
13. Rehabilitation Services
14. Permanency Planning
15. Linguistics Services (Interpretation and Translation)
16. Other Professional Services
17. Respite Care

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:5 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Robertson, L.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Outpatient/Ambulatory Health Services (OAMC)
2. AIDS Pharmaceutical Assistance (Local)
3. Mental Health Services
4. AIDS Drugs Assistance Program Treatments (ADAP)
5. Health Insurance Premium and Cost Sharing (HICP)
6. Medical Case Management (Disease)
7. Oral Health Care (Dental)
8. Early Intervention Services (EIS)
9. Substance Abuse- Outpatient
10. Home and Community-Based Health Services
11. Home Health Care
12. Medical Nutrition Therapy
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Emergency Financial Assistance
2. Non-Medical Case Management
3. Housing
4. Legal Services
5. Food Bank/Home-Delivered Meals
6. Medical Transportation Services
7. Referral for Health Care and Support Services
8. Psychosocial Support
9. Substance Abuse- Residential
10. Child Care
11. Permanency Planning
12. Health Education/Risk Reduction
13. Outreach
14. Linguistics Services (Interpretation and Translation)
15. Other Professional Services
16. Rehabilitation Services
17. Respite Care

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:6 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Barnes,B.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Medical Case Management (Disease)
2. Health Insurance Premium and Cost Sharing (HICP)
3. Oral Health Care (Dental)
4. AIDS Pharmaceutical Assistance (Local)
5. Mental Health Services
6. Medical Nutrition Therapy
7. Outpatient/Ambulatory Health Services (OAMC)
8. Substance Abuse- Outpatient
9. AIDS Drugs Assistance Program Treatments (ADAP)
10. Early Intervention Services (EIS)
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Food Bank/Home-Delivered Meals
2. Legal Services
3. Emergency Financial Assistance
4. Medical Transportation Services
5. Linguistics Services (Interpretation and Translation)
6. Housing
7. Health Education/Risk Reduction
8. Child Care
9. Non-Medical Case Management
10. Other Professional Services
11. Outreach
12. Permanency Planning
13. Psychosocial Support
14. Referral for Health Care and Support Services
15. Rehabilitation Services
16. Respite Care
17. Substance Abuse- Residential

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:7 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Shamer, D.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Outpatient/Ambulatory Health Services (OAMC)
2. AIDS Drugs Assistance Program Treatments (ADAP)
3. Medical Case Management (Disease)
4. Health Insurance Premium and Cost Sharing (HICP)
5. AIDS Pharmaceutical Assistance (Local)
6. Oral Health Care (Dental)
7. Mental Health Services
8. Medical Nutrition Therapy
9. Home and Community-Based Health Services
10. Substance Abuse- Outpatient
11. Home Health Care
12. Early Intervention Services (EIS)
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Food Bank/Home-Delivered Meals
2. Housing
3. Psychosocial Support
4. Non-Medical Case Management
5. Medical Transportation Services
6. Health Education/Risk Reduction
7. Substance Abuse- Residential
8. Referral for Health Care and Support Services
9. Other Professional Services
10. Legal Services
11. Emergency Financial Assistance
12. Rehabilitation Services
13. Outreach
14. Permanency Planning
15. Respite Care
16. Linguistics Services (Interpretation and Translation)
17. Child Care

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:8 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Katz, H.B.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Medical Case Management (Disease)
2. Early Intervention Services (EIS)
3. Oral Health Care (Dental)
4. Health Insurance Premium and Cost Sharing (HICP)
5. Outpatient/Ambulatory Health Services (OAMC)
6. AIDS Pharmaceutical Assistance (Local)
7. AIDS Drugs Assistance Program Treatments (ADAP)
8. Medical Nutrition Therapy
9. Mental Health Services
10. Substance Abuse- Outpatient
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Housing
2. Non-Medical Case Management
3. Emergency Financial Assistance
4. Medical Transportation Services
5. Food Bank/Home-Delivered Meals
6. Legal Services
7. Outreach
8. Psychosocial Support
9. Substance Abuse- Residential
10. Health Education/Risk Reduction
11. Referral for Health Care and Support Services
12. Other Professional Services
13. Linguistics Services (Interpretation and Translation)
14. Child Care
15. Rehabilitation Services
16. Respite Care
17. Permanency Planning

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:9 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Barrientos, Y.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Substance Abuse- Outpatient
2. Mental Health Services
3. Health Insurance Premium and Cost Sharing (HICP)
4. AIDS Pharmaceutical Assistance (Local)
5. Home and Community-Based Health Services
6. AIDS Drugs Assistance Program Treatments (ADAP)
7. Outpatient/Ambulatory Health Services (OAMC)
8. Medical Nutrition Therapy
9. Medical Case Management (Disease)
10. Oral Health Care (Dental)
11. Early Intervention Services (EIS)
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Housing
2. Substance Abuse- Residential
3. Rehabilitation Services
4. Food Bank/Home-Delivered Meals
5. Emergency Financial Assistance
6. Medical Transportation Services
7. Referral for Health Care and Support Services
8. Pyschosocial Support
9. Other Professional Services
10. Non-Medical Case Management
11. Linguistics Services (Interpretation and Translation)
12. Permanency Planning
13. Health Education/Risk Reduction
14. Child Care
15. Legal Services
16. Outreach
17. Respite Care

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:10 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Hayes, M.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

1. Outpatient/Ambulatory Health Services (OAMC)
2. Medical Case Management (Disease)
3. Oral Health Care (Dental)
4. AIDS Pharmaceutical Assistance (Local)
5. AIDS Drugs Assistance Program Treatments (ADAP)
6. Mental Health Services
7. Substance Abuse- Outpatient
8. Health Insurance Premium and Cost Sharing (HICP)
9. Medical Nutrition Therapy
10. Early Intervention Services (EIS)
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

1. Non-Medical Case Management
2. Psychosocial Support
3. Housing
4. Medical Transportation Services
5. Food Bank/Home-Delivered Meals
6. Emergency Financial Assistance
7. Substance Abuse- Residential
8. Legal Services
9. Health Education/Risk Reduction
10. Respite Care
11. Outreach
12. Referral for Health Care and Support Services
13. Linguistics Services (Interpretation and Translation)
14. Other Professional Services
15. Child Care
16. Rehabilitation Services
17. Permanency Planning

FY 2019-2020 PSRA Ranking Survey 5.17.18

Response ID:11 Data

1. PSRA Rankings 5.17.18

1. What is your name?

Hayes, M.

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, while the score of **13** is the **lowest important** service. Do not give two services the same rank.

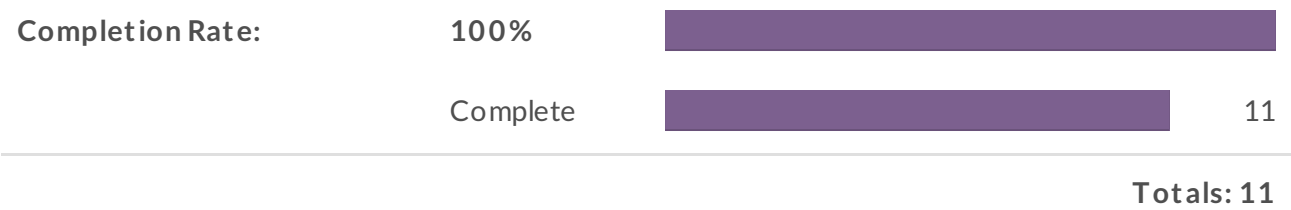
1. Outpatient/Ambulatory Health Services (OAMC)
2. Medical Case Management (Disease)
3. Oral Health Care (Dental)
4. AIDS Pharmaceutical Assistance (Local)
5. AIDS Drugs Assistance Program Treatments (ADAP)
6. Mental Health Services
7. Substance Abuse- Outpatient
8. Health Insurance Premium and Cost Sharing (HICP)
9. Medical Nutrition Therapy
10. Early Intervention Services (EIS)
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of **1** is given to the **most important** service, and the score of **17** is the **lowest important** service. Do not give two services the same rank.

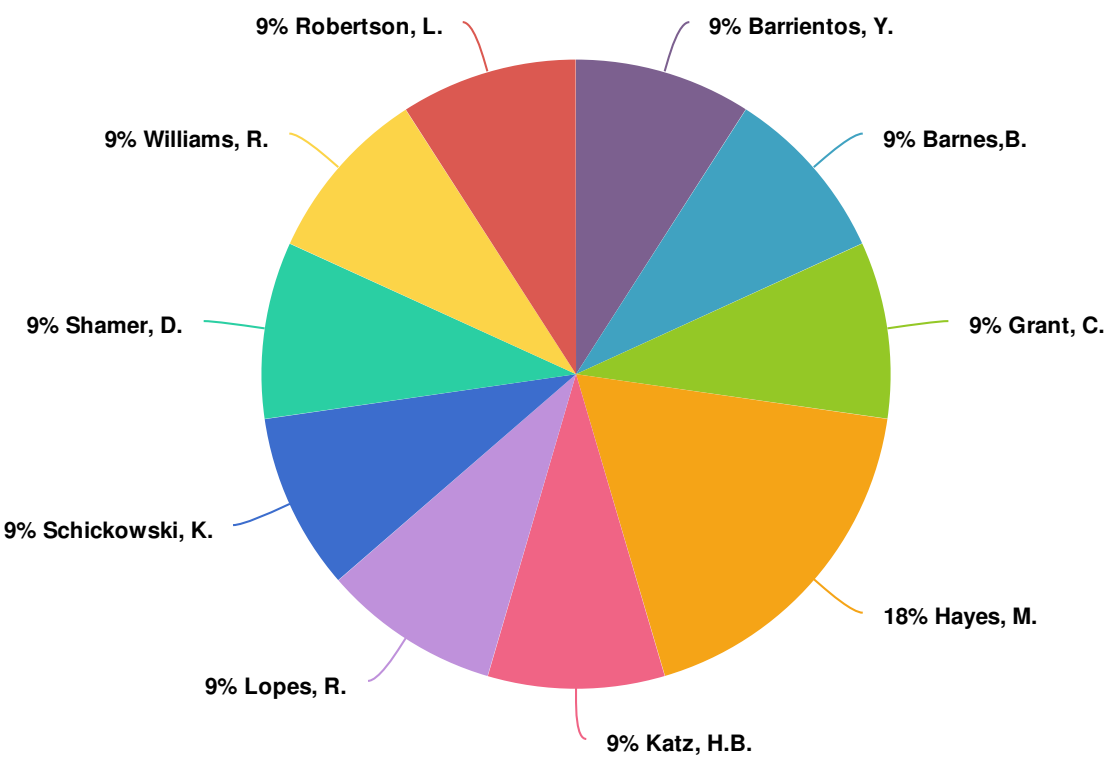
1. Non-Medical Case Management
2. Psychosocial Support
3. Housing
4. Medical Transportation Services
5. Food Bank/Home-Delivered Meals
6. Emergency Financial Assistance
7. Substance Abuse- Residential
8. Legal Services
9. Health Education/Risk Reduction
10. Respite Care
11. Outreach
12. Referral for Health Care and Support Services
13. Linguistics Services (Interpretation and Translation)
14. Other Professional Services
15. Child Care
16. Rehabilitation Services
17. Permanency Planning

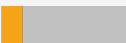
Report for FY 2019-2020 PSRA Ranking Survey 5.17.18

Response Counts



1. What is your name?



Value		Percent	Responses
Barrientos, Y.		9.1%	1
Barnes,B.		9.1%	1
Grant, C.		9.1%	1
Hayes, M.		18.2%	2
Katz, H.B.		9.1%	1
Lopes, R.		9.1%	1
Schickowski, K.		9.1%	1
Shamer, D.		9.1%	1
Williams, R.		9.1%	1
Robertson, L.		9.1%	1
			Totals: 11

2. CORE SERVICES. Listed below are the core services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score of 1 is given to the most important service, while the score of 13 is the lowest important service. Do not give two services the same rank.

Item	Overall Rank	Rank Distribution	Score	No. of Rankings
Outpatient/Ambulatory Health Services (OAMC)	1		125	11
Medical Case Management (Disease)	2		112	11
AIDS Pharmaceutical Assistance (Local)	3		107	11
Health Insurance Premium and Cost Sharing (HICP)	4		104	11
Oral Health Care (Dental)	5		103	11
Mental Health Services	6		98	11
AIDS Drugs Assistance Program Treatments (ADAP)	7		93	11
Substance Abuse- Outpatient	8		71	11
Medical Nutrition Therapy	9		57	11
Early Intervention Services (EIS)	10		53	11
Home and Community-Based Health Services	11		40	11
Home Health Care	12		26	11
Hospice	13		12	11

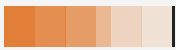
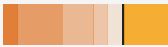
Lowest Rank

Highest Rank

3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of 1 is given to the most important service, and the score of 17 is the lowest important service. Do not give two services the same rank.

Item	Overall Rank	Rank Distribution	Score	No. of Rankings
Housing	1		167	11
Food Bank/Home-Delivered Meals	2		157	11
Non-Medical Case Management	3		146	11
Medical Transportation Services	4		139	11
Emergency Financial Assistance	5		132	11
Psychosocial Support	6		128	11
Legal Services	7		126	11
Substance Abuse- Residential	8		112	11
Health Education/Risk Reduction	9		99	11
Referral for Health Care and Support Services	10		84	11
Outreach	11		71	11
Linguistics Services (Interpretation and Translation)	12		69	11
Child Care	13		65	11



Item	Overall Rank	Rank Distribution	Score	No. of Rankings
Other Professional Services	14		58	11
Rehabilitation Services	15		49	11
Permanency Planning	16		45	11
Respite Care	17		36	11



Broward EMA Ryan White Part A Health Outcomes – FY 2017

Priority Setting & Resource Allocation Committee Meeting – June 21, 2018

Presented By: Kelsey Holloman, MPH—*Quality Improvement Manager*



HIV CARE CONTINUUM DEFINITIONS

1. **Total HIV+ Clients:** Clients who are HIV+ and received at least one service from the selected service category(s) in the reporting period.
2. **Ever in Care:** HIV+ clients who ever had a medical care service documented.
3. **In Care:** HIV+ clients who had a medical care service within the reporting period.
4. **Retention in Care:** HIV+ clients who had two or more medical care services at least three months apart in the reporting period.
5. **On Antiretroviral Therapy (ART):** HIV+ clients who have a documented ART at any time during the reporting period within HIV history records.
6. **Virally Suppressed:** HIV+ clients with most recent viral load less than 200 copies/mL, as of end of the reporting period.

**Medical Care Service* = Medical Care Appointment, Viral Load or CD4 Count Test



DATA CONSIDERATIONS

Reporting Period: Fiscal Year (FY) 2017: March 1, 2017 – February 28, 2018

Data Source: Provide Enterprise

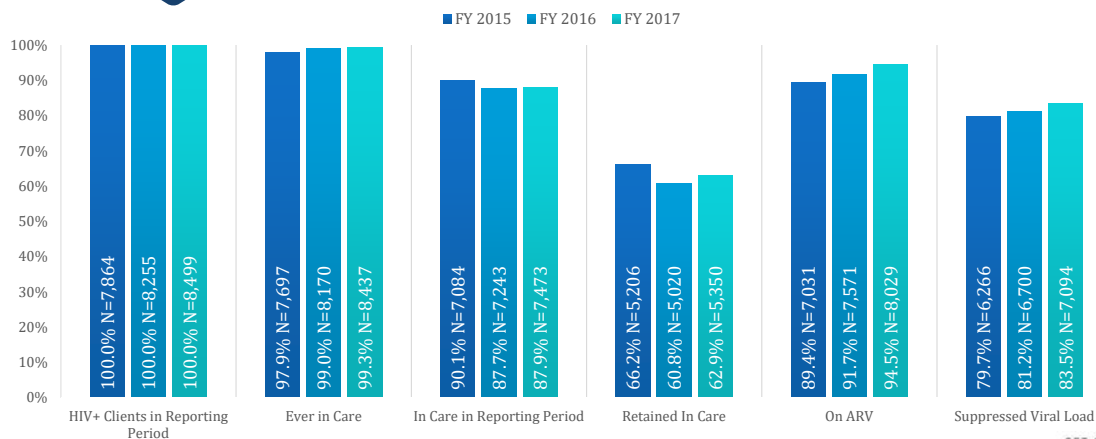
HIV Care Continuum:

- + **Retention in Care**—Measure is low due to limited accountability for information from:
 - + Clients who move, are incarcerated, or deceased during the measurement period
 - + Clients with private insurance/doctors
 - + The strict definition may exclude clients who received the appropriate amount of medical care during the reporting period.
- + **On ART**—Measured with self-reported data
- + The Test & Treat Program began in May 2016 possibly impacting *retention in care* and *viral suppression* measures. Clients who enter the Part A system through the Test & Treat Program are:
 - + Our most vulnerable clients
 - + Less likely to be virally suppressed and working to improve their health outcomes

★ = FY 2016 comparison



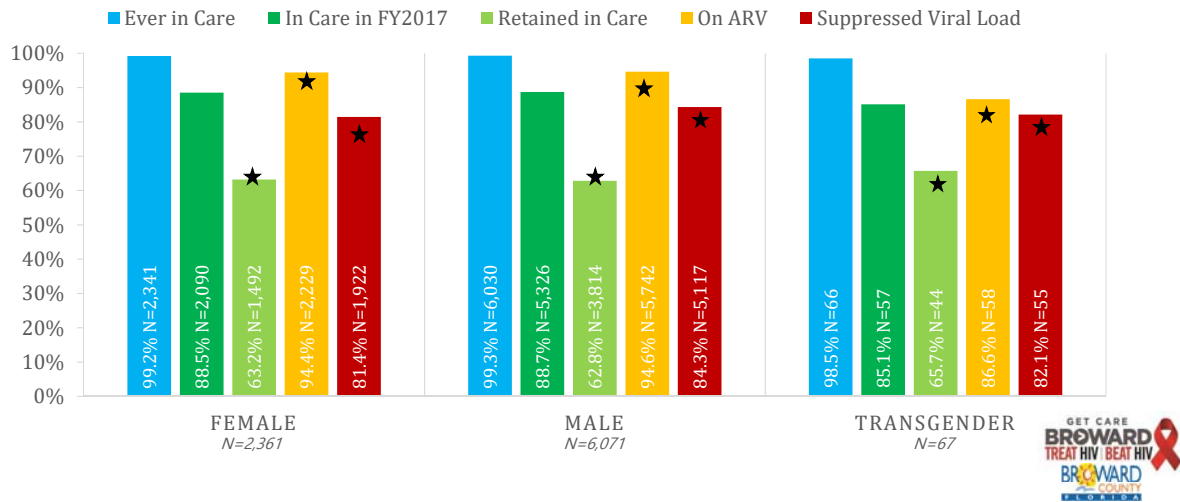
HIV CARE CONTINUUM FOR PART A CLIENTS SYSTEMWIDE: FY 2015 – FY 2017



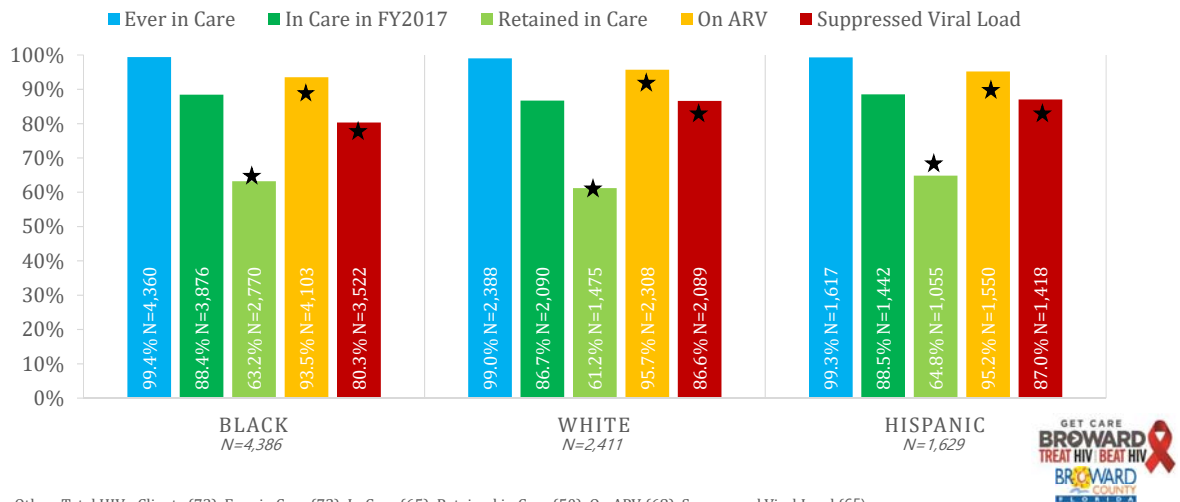
- Steady increases in *ever in care*, *on ARV*, and *suppressed viral load*
- Although *retention in care* has decreased since FY 2015, this may indicate an increase in Part A clients with private insurance.



HIV CARE CONTINUUM FOR PART A CLIENTS SYSTEMWIDE FY 2017 – GENDER

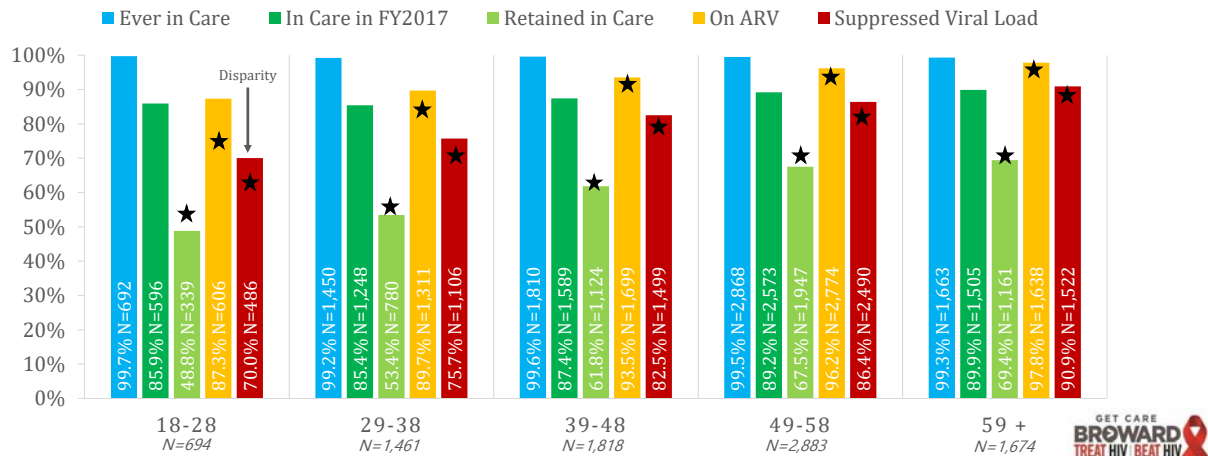


HIV CARE CONTINUUM FOR PART A CLIENTS SYSTEMWIDE FY 2017 – RACE

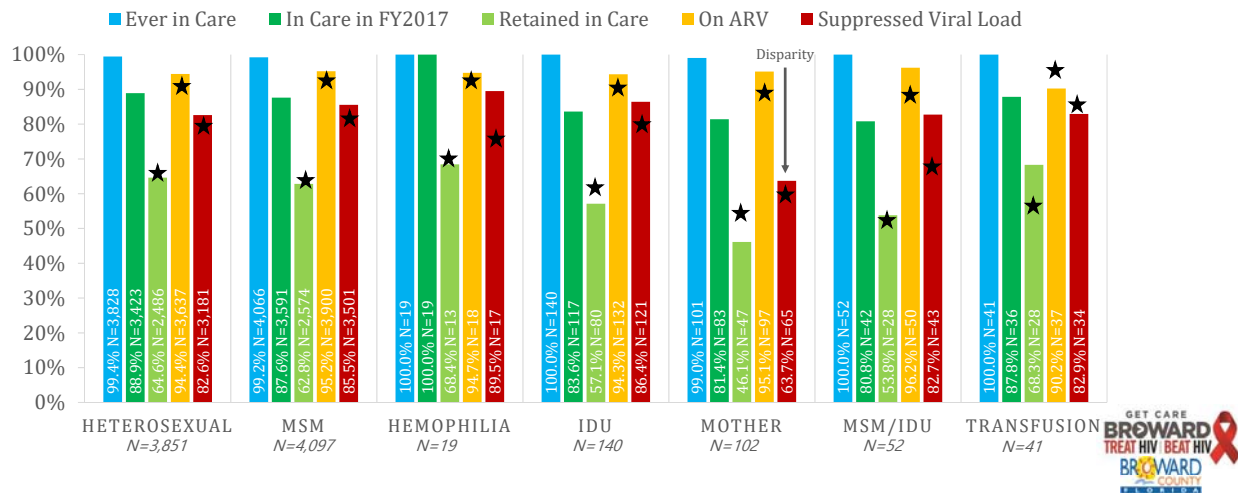


Exclusions – Other: Total HIV+ Clients (73), Ever in Care (72), In Care (65), Retained in Care (50), On ARV (68), Suppressed Viral Load (65)

HIV CARE CONTINUUM FOR PART A CLIENTS SYSTEMWIDE FY 2017 – AGE



HIV CARE CONTINUUM FOR PART A CLIENTS SYSTEMWIDE FY 2017 – RISK FACTOR



DATA CONCLUSIONS

- + Since FY 2016, viral load suppression has increased across all subpopulations and service categories.
- + Subpopulations who experienced the largest increase in viral load suppression include:
 - + *Females: 3.8%*
 - + *Black Females: 4.2%*
 - + *Ages 18-28: 5.5%*
- + Since FY 2016, retention in care has decreased across the majority of subpopulations and service categories.
 - + This year, the Part A Program will be working to improve the accuracy of this measure.
- + Clients ages 18-28 remain a disparity in the Part A System, however they saw the largest increase in viral load suppression since FY 2016.



PSRA FY2019-2020

RW Part A Overview:

Service Components, Client Utilization, Allocations & Expenditures



Overview

Purpose

Current Services

Data Sources

- Client Demographics
- Client Utilization
- Client Projections
- Trends in Allocations & Expenditures

Trends/Factors to Consider



Purpose

In order to ensure the needs of clients in the EMA are met, the PRSA Committee reviews client demographics, allocations, and expenditure trends yearly in order to:

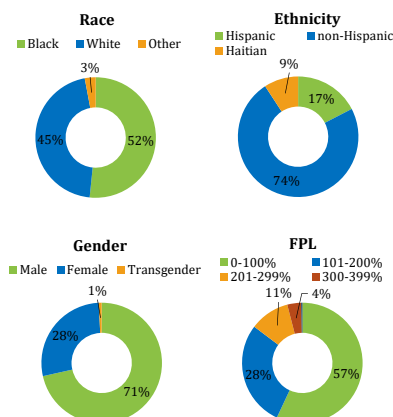
- Identify services that are needed in the EMA
- Potentially funding those services, and if they are funded
- Ensure they are cost effective and of the highest quality



Part A Overall – Client Utilization

- In FY 17-18 the Part A Program provided services to **8,124** clients, a **4.21% increase** in clients from the previous FY (8,142).
- **Over the past 5 years, Part A client utilization has increased 22.3%.**
 - Broward has also experienced an upward trend in:
 - New HIV infections (20% increase in 2016)
 - Clients reengaging in care
 - Clients accessing the Part A Program
- Based on a 5-year trend in client utilization, Part A can expect to see a **projected 8,671 clients in the upcoming FY19.**

Part A Client Demographics



Client Demographic Trends

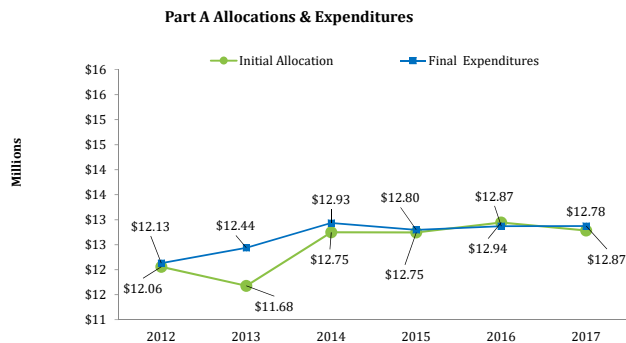
The majority of Part A Clients are:

- **Male** 71.5% (6,066)
- Identify as **Black** 51.6% (4,378)
- Non-Hispanic 79.4% (6,734)
- Between 0-100% FPL 55.8% (4,734)
- **Uninsured** 42.6% (3,614)

These demographics are reflected throughout the majority of all service categories (*Legal, OHC, HICP serve more White, non-Hispanic, Males*)



Part A Overall – Allocations & Expenditures



In FY 2017, Part A experienced a **1.6% decrease in overall funding**



Currently Funded Part A Services

Core Services

1. Integrated Primary Care and Behavioral Health (OAMC)
2. Local Pharmaceutical Assistance Program (LPAP)
3. Oral Health Care (OHC)
4. Health Insurance Continuation Program (HICP)
5. Medical Case Management- Disease Case Management (DCM)
6. Medical Case Management- Case Management*
7. Mental Health (MH)
8. Substance Abuse – Outpatient (SA)

Support Services

1. Non-Medical Case Management – Benefit Insurance Support Services (BISS)
2. Non-Medical Case Management – Centralized Intake and Eligibility (CIED)
3. Emergency Financial Assistance (EFA-Emergency Drugs)
4. Food Bank
5. Legal Services



Currently Funded Part A Core Services - OAMC

Current Service Components:

- Outpatient medical settings: clinics, medical offices, and mobile vans where clients do not stay overnight (*Emergency room or urgent care services are not considered outpatient settings*).

OAMC activities may include:

- Diagnostic/laboratory testing
- Preventive care and screening
- Prescription, and management of medication therapy
- Treatment and management of physical/behavioral health conditions
- Behavioral risk assessment, subsequent counseling/referral
- Treatment adherence
- Referral to and provision of specialty care related to HIV diagnosis

New services offered to eligible Part A Clients:

➤ Integrated Primary & Behavioral Health Care Services

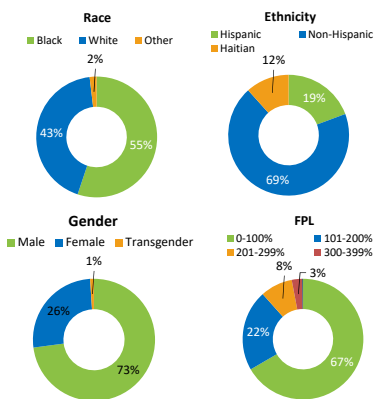
- Outpatient Ambulatory Medical Care, **Behavioral Health**, and Care Coordination services
- Providers are responsible for providing **assessments**, brief therapy interventions, and **referrals** for clients that require a **higher level of care**



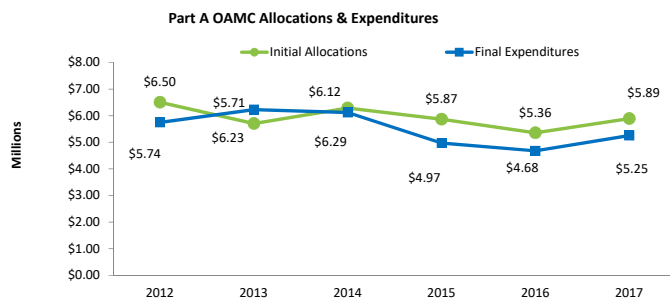
OAMC– Client Utilization

- In FY 17-18 **3,603** clients received OAMC, a **3.71% increase** in clients from the previous FY (3,474).
- With the implementation of T&T and the rise in new HIV infections in 2016 (20%), Part A experienced an increase in client utilization in the first year since 2014.

OAMC Client Demographics



OAMC – Allocations & Expenditures



- OAMC is the highest utilized Part A service category and receives **34.9%** of the overall Part A award.



Currently Funded Part A Core Services - LPAP

- LPAP is operated by a RWHAP Part A or B recipient or subrecipient as a **supplemental means of providing medication assistance when ADAP has a restricted formulary, waiting list and/or restricted financial eligibility criteria**
 - ADAP funds may not be used for LPAP support
 - LPAP funds are not to be used for EFA – EFA may assist with medications not covered by the LPAP.

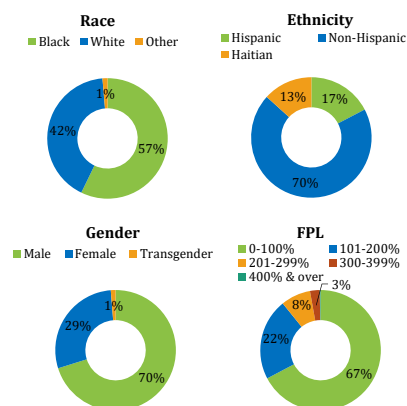


LPAP – Client Utilization

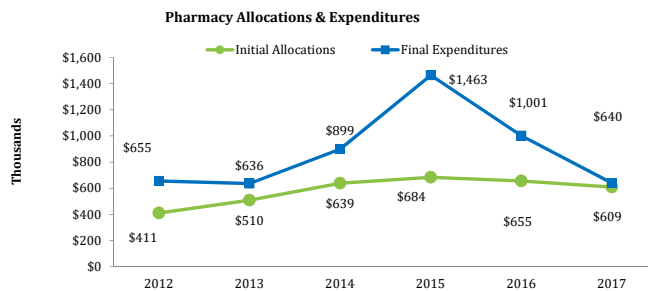
- In FY 17-18 **2,707** clients received LPAP, a **3.67% decrease** in clients from the previous FY (2,810).

- Based on four-years trends in client utilization, a **projected 2,575 clients are expected to utilize the service in the upcoming FY.**

LPAP Client Demographics



LPAP – Allocations & Expenditures



- LPAP saw a **spike in expenditures in 2015** due to emergency financial assistance to Part A clients.
- In 2016, the HIVPC approved the **EFA** service category.
- Expenditures for LPAP decreased significantly due to this change in service provisions and **ADAP** formulary expansion.



Currently Funded Part A Core Services – OHC

➤ Current Service Components

- OHC Services provided by dental health care professionals include:
 - Outpatient diagnostic
 - Preventive
 - Therapeutic services

➤ New services offered to eligible Part A Clients (funded separately):

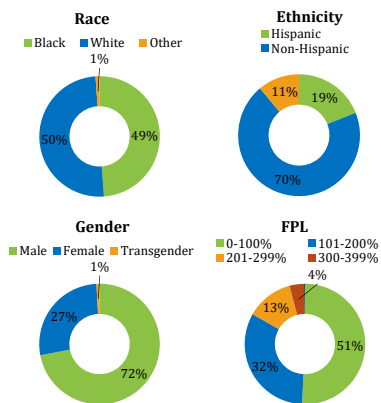
- **Routine Maintenance**
- **Specialty Care**
- **3 new service providers in FY17**
 - Increased geographic coverage throughout the EMA



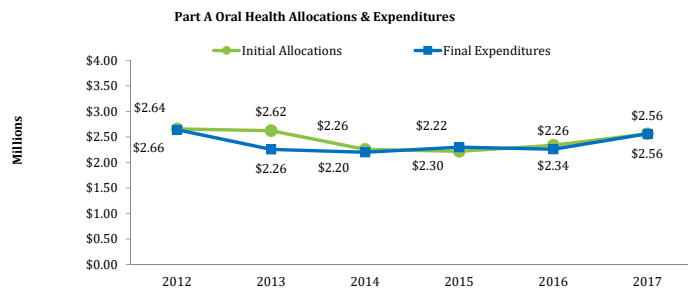
OHC – Client Utilization

- In FY 17-18 **2,961** clients were served through the OHC service category, a **5.79% increase** in clients from the previous FY (2,799).
- Utilization for OHC has increased due to expanded geographic coverage and division of service into routine and specialty care
- Based on four-years trends in OHC client utilization, a **projected 3,356 clients** are expected to utilize the service in the upcoming FY.

OHC Client Demographics



OHC – Allocations & Expenditures



OHC has maintained allocations and expenditures since 2014.



Currently Funded Part A Core Services - HICP

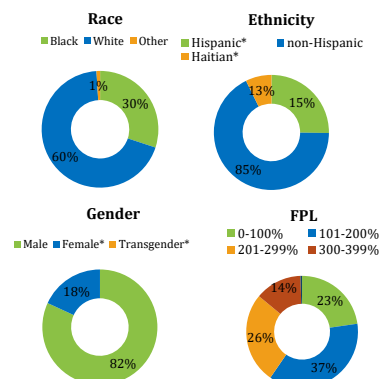
- HICP Provides financial assistance for eligible clients living with HIV to **maintain continuity of health insurance or to receive medical and pharmacy benefits under a health care coverage program.**
 - Paying **co-payments and deductibles** on behalf of the client
 - Paying health **insurance premiums** to provide comprehensive HIV Outpatient/Ambulatory Health Services, and pharmacy benefits*



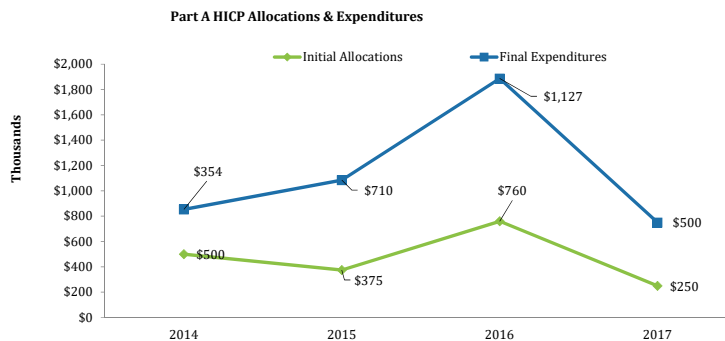
HICP – Client Utilization

- In FY 17-18 **612** clients were served through the HICP service category
 - **20.71% increase** in clients from the previous FY (507).
- **Part B** Program expanded eligibility for ADAP Premium Plus, **covering clients up to 400% FPL.**
 - *Part A will continue to cover co-payments for eligible clients.*

HICP Client Demographics



HICP – Allocations & Expenditures



HICP has experienced an **increase in co-payments** in the last FY



Currently Funded Part A Core Services - DCM

- The provision of a range of **client-centered activities focused on improving health outcomes in support of the HIV care continuum**. Key activities include:
 - Initial **assessment of service needs**
 - Development of a comprehensive, individualized **care plan**
 - Access to medically appropriate levels of health and support services
 - Continuous **client monitoring** to assess the efficacy of the care plan
 - **Re-evaluation of the care plan** at least every 6 months with adaptations as necessary
 - **Ongoing assessment of the client's needs** and personal support systems
 - Treatment adherence counseling to **ensure readiness for and adherence to complex HIV treatments**
 - Client-specific advocacy and/or review of utilization of services

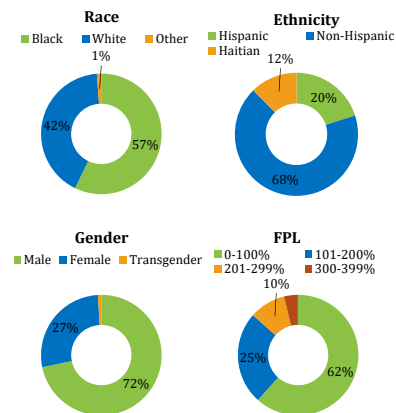


DCM – Client Utilization

➤ In FY 17-18 **1,011** clients received DCM, a **31.3% increase** in clients from the previous FY (770).

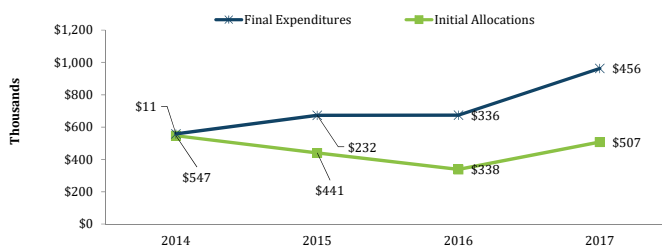
○ Based on predictive trends in DCM client utilization, a **projected 1,213 clients** are expected to utilize the service in the upcoming FY.

DCM Client Demographics



DCM – Allocations & Expenditures

Part A DCM Allocations & Expenditures



FY17 saw **increased expenditures** – impact and trends in service utilization is more prominent 4 years into implementation



Currently Funded Part A Core Services – MH

➤ Current Service Components

- Outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling
- Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by a mental health professional

➤ New services offered to eligible Part A Clients:

○ Trauma-Informed Mental Health Services

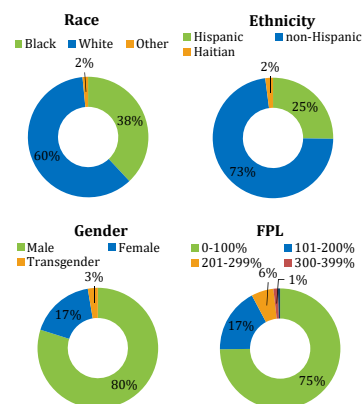
- Clients are referred to the prevention, intervention, or treatment services that **address traumatic stress** as well as any **co-occurring disorders** (including substance use and mental disorders) that **developed during or after trauma**



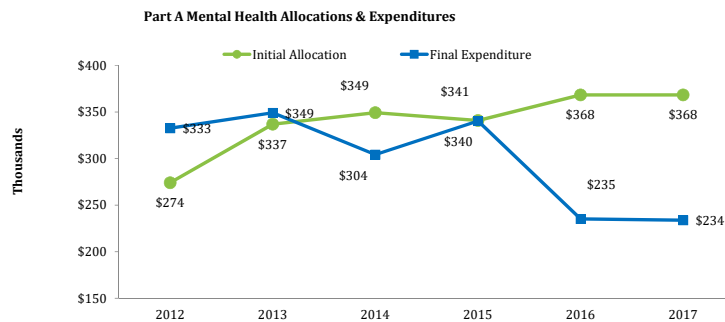
Mental Health – Client Utilization

- In FY 17-18 **334** clients were served through the Substance Abuse service category, a **2.62% decrease in client utilization** from the previous FY (343).
- **Even with integration of Primary Care and Behavioral health, MH continues to be an underutilized service category.**
- Based on four-years trends in MH client utilization, a **projected 325 clients are expected to utilize the service in the upcoming FY.**

MH Client Demographics



Mental Health – Allocations & Expenditures



Mental Health has continuously been an **underutilized service category**



Currently Funded Part A Core Services – SA (Outpatient)

➤ Services include:

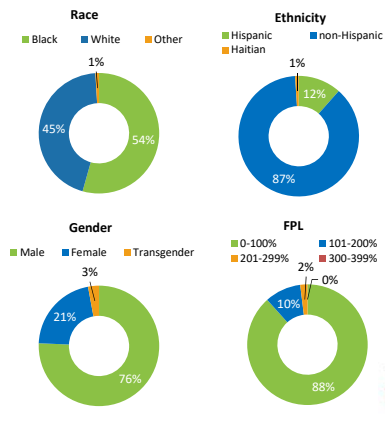
- Screening
- Assessment
- Diagnosis
- Treatment of substance use disorder, including:
 - Pretreatment/recovery readiness programs
 - Harm reduction
 - **Behavioral health counseling** associated with substance use disorder
 - Outpatient drug-free treatment and counseling
 - Medication assisted therapy
 - Neuro-psychiatric pharmaceuticals
 - Relapse prevention



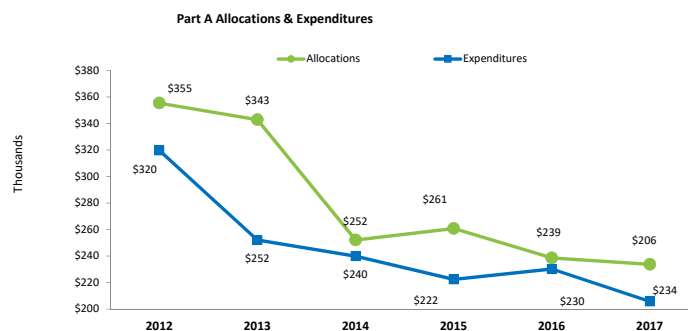
Substance Abuse – Client Utilization

- In FY 17-18 **103** clients were served through the Substance Abuse service category, a **8.85% decrease in client utilization** from the previous FY (113).
- Based on four-years trends in SA client utilization, a **projected 103 clients are expected to utilize the service in the upcoming FY.**
- **Even with integration of Primary Care and Behavioral health, SA continues to be an underutilized service category. (MAY occur as implementation continues?)**

SA – Outpatient Client Demographics



Substance Abuse – Allocations & Expenditures



Substance Abuse has continuously been an **underutilized service category**



Currently Funded Part A Support Services – Case Management

- Provides guidance and assistance in accessing medical, social, community, legal, financial, and other needed services. Key activities include:
 - **Initial assessment of service needs**
 - Development of a comprehensive, individualized care plan
 - **Continuous client monitoring** to assess the efficacy of the care plan
 - **Re-evaluation of the care plan** at least every 6 months with adaptations as necessary
 - Ongoing assessment of the client's and other key family members' needs and personal support systems
- **Now classified as Medical Case Management Core Medical Service**

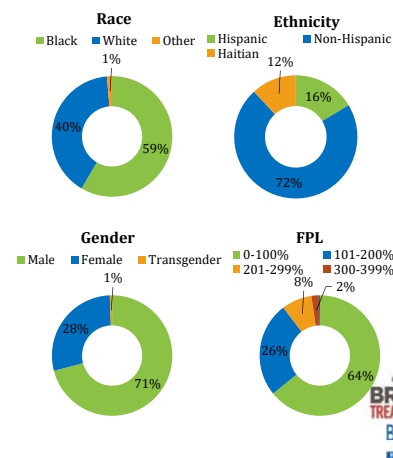


Case Management – Client Utilization

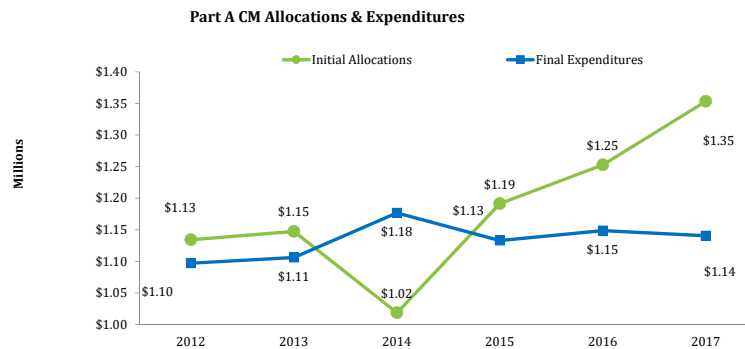
- In FY 17-18 **2,229** clients received CM services, a **12.69% decrease** in clients from the previous FY (2,553).

- Based on four-years trends in CM client utilization, a **projected 1,986 clients are expected to utilize the service in the upcoming FY.**

CM Client Demographics



Case Management – Allocations & Expenditures



Currently Funded Part A Support Services - CIED

- Centralized Intake and Eligibility Determination (CIED) is a standalone intake which determines:
 - **Eligibility** for Ryan White Part A Services
 - Identifies **Third-Party Payers and other community resources** for services
 - Provides information and referrals to clients for services which they may be eligible to receive
 - **Recertifies Ryan White Part A clients** (every 6 months)

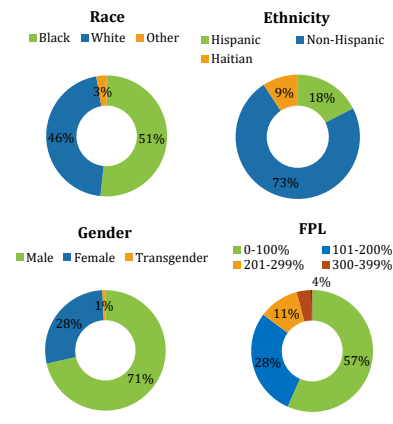


CIED – Client Utilization

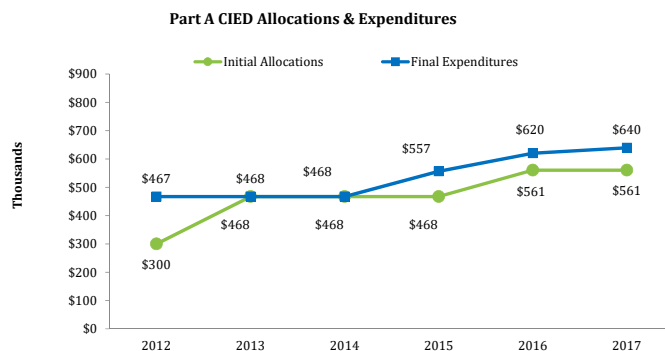
- In FY 17-18 **8,347** clients went through part A Eligibility (CIED), a **3.39% increase** in clients from the previous FY (8,073).

- Based on four-year trends in CIED client utilization, a **projected 8,596 clients** are expected to utilize the service in the upcoming FY.

CIED Client Demographics



CIED – Allocations & Expenditures



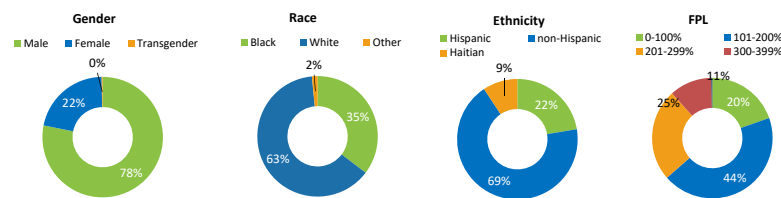
In 2016, CIED received a reallocation of \$60,000



Benefit Insurance Support Service

Benefits Insurance Support Services provides information to clients about their health insurance coverage which includes:

- Navigating and utilizing insurance effectively to achieve better health outcomes
- Reviewing health care plan coverage and limitations
- Educating clients on the different types of health care providers
- Identifying resources for clients to use related to their health benefits
- Assisting with prior authorizations and appeals process



Currently Funded Part A Support Services – EFA

- Provides limited one-time or short-term payments to assist Part A clients with an emergent need for paying for medication.
 - It is expected that all other sources of funding in the community for emergency financial assistance will be effectively used and that any allocation of RWHP funds for these purposes will be as the **payer of last resort, and for limited amounts, uses, and periods of time.**
 - Continuous provision of an allowable service to a client should not be funded through emergency financial assistance.
- Some T&T/newly reengaged clients can access EFA for 30 day ARV prescriptions



EFA

- Newly funded service category beginning in mid-FY16
- **282 clients served in FY2017**
- Used for short term/stop gap medications, especially ARVs for:
 - Clients waiting for ADAP eligibility
 - Test and Treat clients (recently reengaged, newly diagnosed)



Currently Funded Part A Support Services – Food Bank

- Food Bank includes the provision of:
 - Actual food items
 - Hot meals
 - Voucher program to purchase food

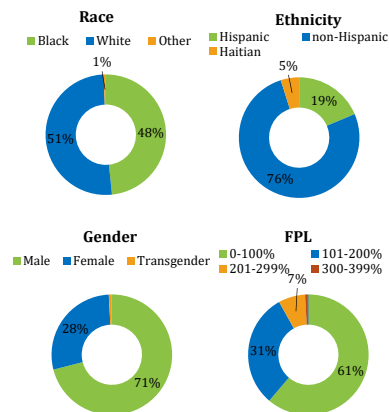


Food Bank – Client Utilization

○ In FY 17-18 **2,651** received Food Bank Services, a **5.74% increase** in clients from the previous FY (2,507).

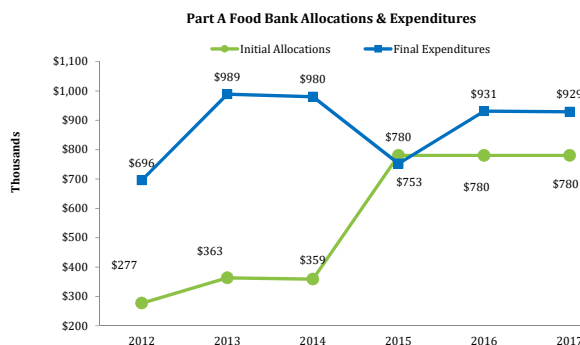
○ Based on four-years trends in Food Bank client utilization, a **projected 2,544 clients** are **expected to utilize the service** in the upcoming FY.

Food Bank Client Demographics



Food Bank – Allocations & Expenditures

Client eligibility criteria was revised in FY17 with implementation in FY18



Federal Poverty Level	Annual Income	Original Units/Year	HIVPC Approved Unit/Year for FY18
0 - 50%	\$0-\$6,030	24	12 (Max 6 Vouchers)
51 - 100%	\$6,031-\$12,060	24	12 (Max 6 Vouchers)
101 - 150%	\$12,061-\$18,090	24	12 (Max 6 Vouchers)
151 - 200%	\$18,091-\$24,120	24	6 (Max 3 Vouchers)
201-250%	\$24,121-\$30,150	24	6 (Max 3 Vouchers)
251 - 300%	\$30,151-\$36,180	3	3



Currently Funded Part A Support Services – Legal Services

- Provided to and/or on behalf of a PLWHA and involving **legal matters related to or arising from their HIV disease**, including:
 - Assistance with public benefits such as Social Security Disability Insurance (SSDI)
 - Interventions necessary to **ensure access to eligible benefits**, including discrimination or breach of confidentiality litigation as it relates to services eligible for funding under the RWHAP
 - Preparation of:
 - Healthcare power of attorney
 - Durable powers of attorney
 - Living wills
 - Legal services **exclude criminal defense and class-action suits unless related to access to services eligible for funding under the RWHAP.**

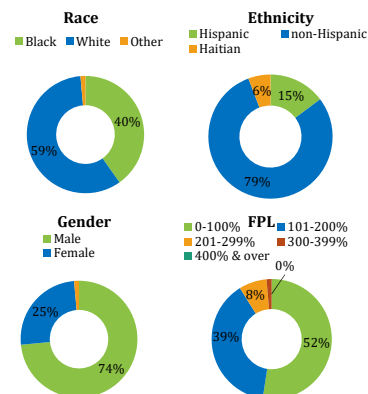


Legal – Client Utilization

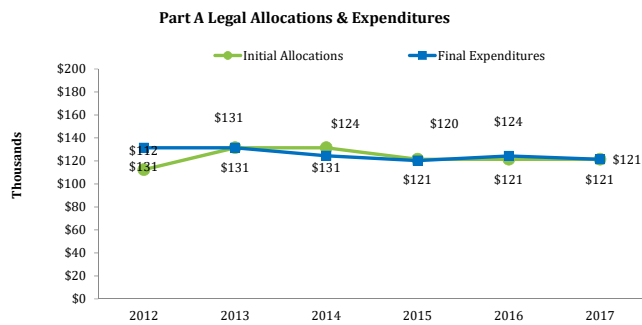
- In FY 17-18 **147** clients received Part A Legal Services, a **9.82% decrease** in clients from the previous FY (163).

- Based on four-years trends in Legal client utilization, a **projected 131 clients are expected to utilize the service in the upcoming FY.**

Legal Services Client Demographics



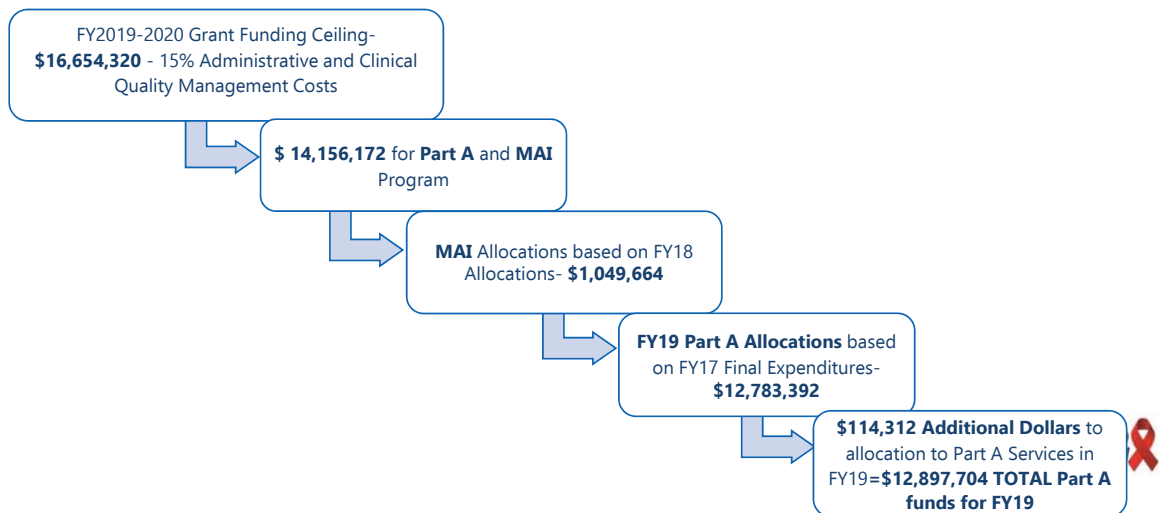
Legal – Allocations & Expenditures



Legal services have **continuously maintained their allocations and expenditures** for over 5 years



Recommendations for FY19 Allocations



Factors to Consider for Allocations

- Although, several service categories are experiencing a decrease in overall client utilization, new clients are continuously accessing Part A services.
- **Recommendation for additional \$114,312 FY19 Part A funds:**
 - DCM
 - OAMC
 - OHC
- **Recommendations for \$7,880 deduction in MAI funding:**
 - MH continues to exhibit underutilization with 48% of MAI funding expended in FY17



Questions/Discussion

Next Steps:

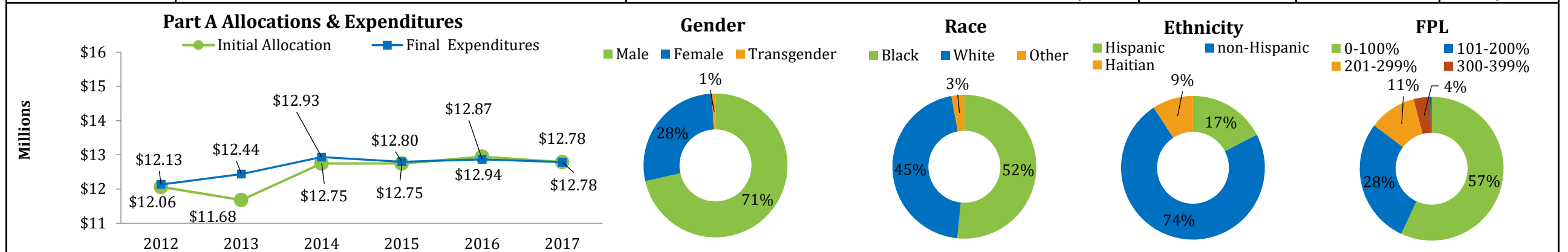
FY 2019-2020 Part A and MAI Allocations



FY 2017-2018 PSRA SCORECARDS

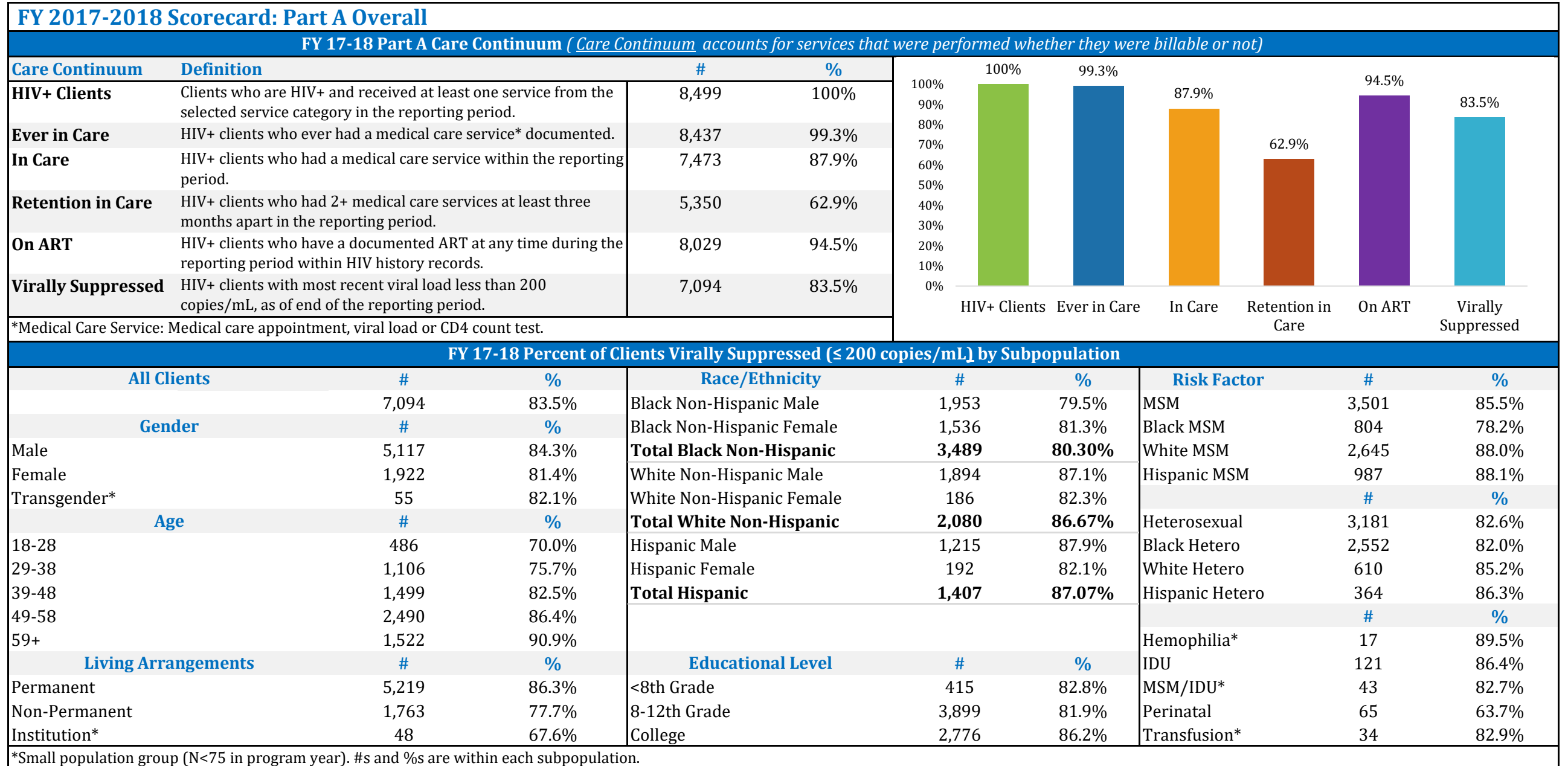
FY 2017-2018 Scorecard: Part A Overall

Fiscal Year	Part A & MAI Service Allocations			Final Part A & MAI Expenditures				EMA Award		
FY	Initial Allocation	MAI	Total	Final Expenditures	MAI	Total	% Change	Total	Carryover	% Change
2017	\$12,783,392	\$1,266,527	\$14,049,919	\$12,783,319	\$1,090,111	\$14,063,909	-0.4%	\$15,831,728	\$202,175	-1.6%
2016	\$12,944,417	\$1,096,019	\$14,040,436	\$12,870,073	\$1,246,017	\$14,116,089	2.4%	\$16,089,080	\$190,407	0.4%
2015	\$12,745,667	\$1,096,019	\$13,841,686	\$12,798,095	\$993,810	\$13,791,905	-1.1%	\$16,019,206	\$338,098	0.0%
2014	\$12,747,410	\$1,096,019	\$13,843,429	\$12,934,463	\$1,009,772	\$13,944,235	3.0%	\$16,012,762	\$0	4.2%
2013	\$11,677,997	\$1,096,019	\$12,774,016	\$12,439,721	\$1,095,535	\$13,535,256	3.9%	\$15,366,650	\$448,662	-0.4%
2012	\$12,059,174	\$1,063,593	\$13,122,767	\$12,131,345	\$898,412	\$13,029,757	n/a	\$15,423,413	\$32,755	n/a

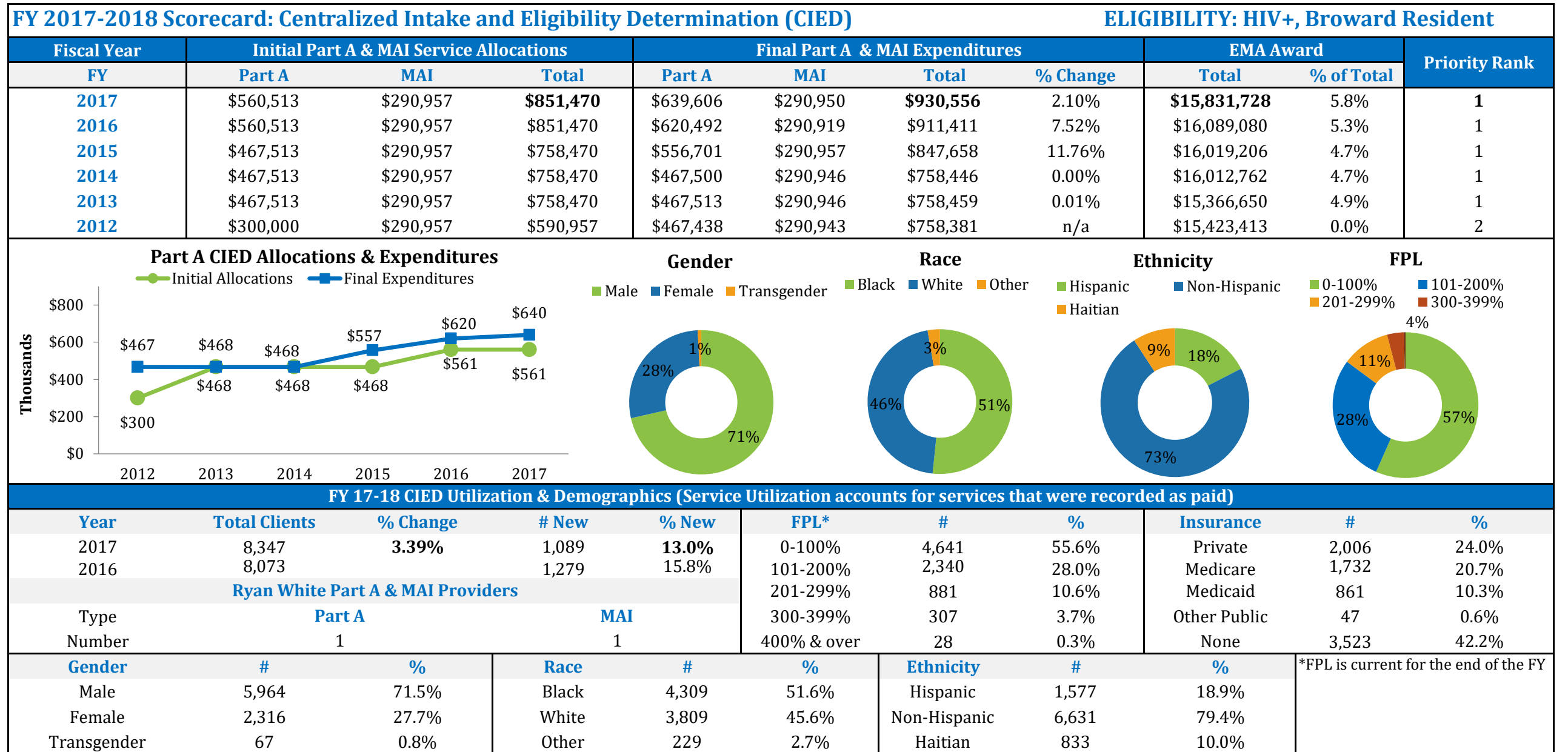


FY 17-18 Part A Utilization & Demographics (<i>Service Utilization</i> accounts for services that were recorded as paid)									
Year	Total Clients	% Change	FPL*	#	%	Insurance	#	%	
2017	8,485	4.21%	0-100%	4,734	55.8%	Private	2,015	23.7%	
2016	8,142		101-200%	2,356	27.8%	Medicare	1,744	20.6%	
Ryan White Part A & MAI Providers			201-299%	886	10.4%	Medicaid	874	10.3%	
Type	Part A	MAI	300-399%	308	3.6%	Other Public	47	0.6%	
Number	13	5	400% & over	28	0.3%	None	3,614	42.6%	
Gender	#	%	Race	#	%	Ethnicity	#	%	*FPL is current for the end of the FY
Male	6,066	71.5%	Black	4,378	51.6%	Hispanic	1,596	18.8%	
Female	2,352	27.7%	White	3,861	45.5%	Non-Hispanic	6,734	79.4%	
Transgender	67	0.8%	Other	246	2.9%	Haitian	844	9.9%	

FY 2017-2018 PSRA SCORECARDS



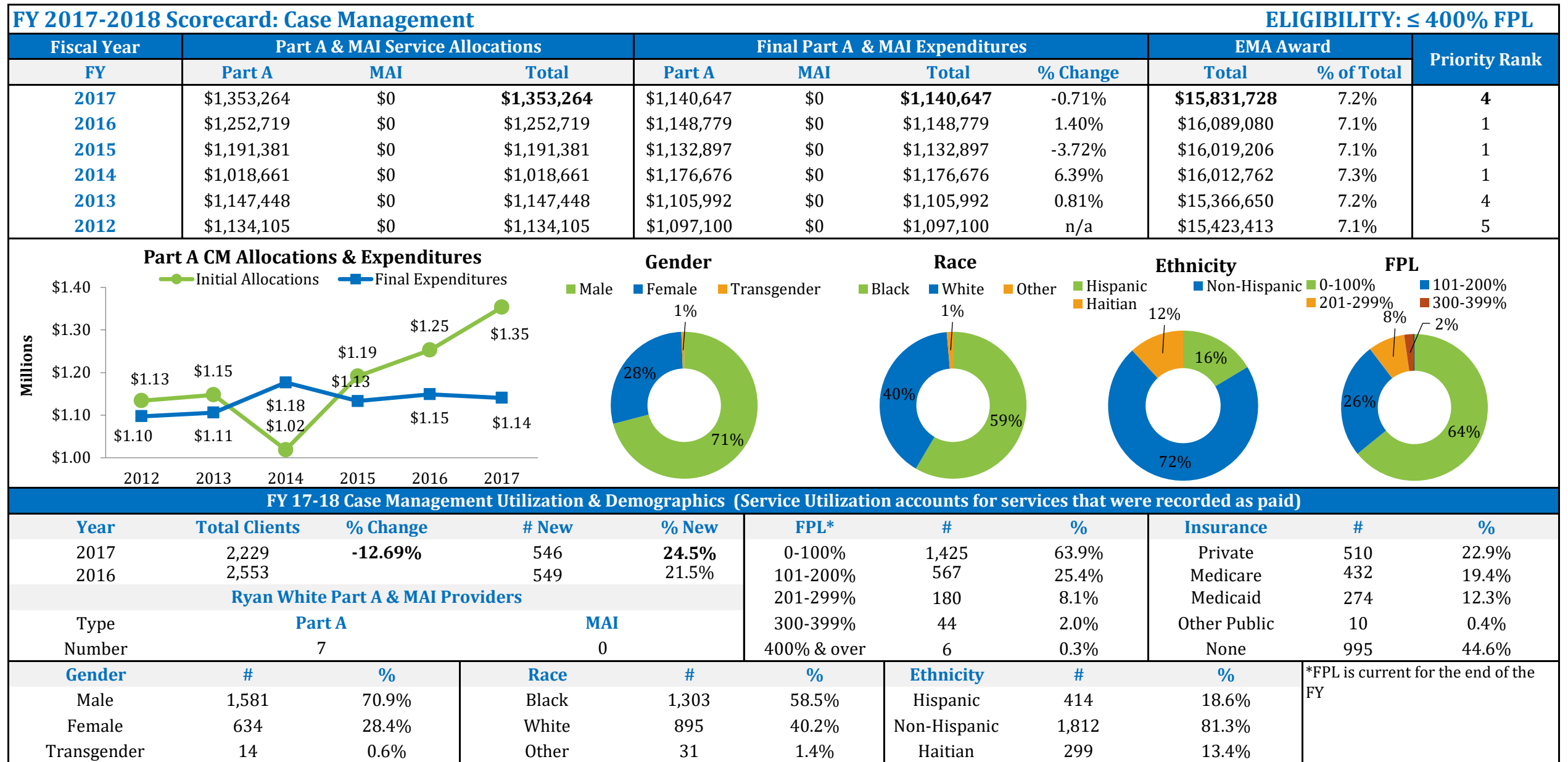
FY 2016-2017 PSRA SCORECARDS



FY 2016-2017 PSRA SCORECARDS

FY 2017-2018 Scorecard: Centralized Intake and Eligibility Determination (CIED)				ELIGIBILITY: HIV+, Broward Resident															
FY 17-18 CIED Care Continuum (Care Continuum accounts for services that were performed whether they were billable or not)																			
Care Continuum	Definition	#	%	<table><tr><th>Care Continuum</th><th>%</th></tr><tr><td>HIV+ Clients</td><td>100%</td></tr><tr><td>Ever in Care</td><td>99.5%</td></tr><tr><td>In Care</td><td>89.0%</td></tr><tr><td>Retention in Care</td><td>64.2%</td></tr><tr><td>On ARV</td><td>94.8%</td></tr><tr><td>Virally Suppressed</td><td>83.9%</td></tr></table>		Care Continuum	%	HIV+ Clients	100%	Ever in Care	99.5%	In Care	89.0%	Retention in Care	64.2%	On ARV	94.8%	Virally Suppressed	83.9%
Care Continuum	%																		
HIV+ Clients	100%																		
Ever in Care	99.5%																		
In Care	89.0%																		
Retention in Care	64.2%																		
On ARV	94.8%																		
Virally Suppressed	83.9%																		
HIV+ Clients	Clients who are HIV+ and received at least one service from the selected service category in the reporting period.	8,327	100%																
Ever in Care	HIV+ clients who ever had a medical care service* documented.	8,284	99.5%																
In Care	HIV+ clients who had a medical care service within the reporting period.	7,407	89.0%																
Retention in Care	HIV+ clients who had 2+ medical care services at least three months apart in the reporting period.	5,344	64.2%																
On ARV	HIV+ clients who have a documented ART at any time during the reporting period within HIV history records.	7,896	94.8%																
Virally Suppressed	HIV+ clients with most recent viral load less than 200 copies/mL, as of end of the reporting period.	6,989	83.9%																
*Medical Care Service: Medical care appointment, viral load or CD4 count test.																			
FY 17-18 Percent of Clients Virally Suppressed (≤ 200 copies/mL) by Subpopulation																			
All Clients		#	%	Race/Ethnicity		#	%	Risk Factor		#	%								
		6,989	83.9%	Black Non-Hispanic Male		1,920	79.8%	MSM		3,443	85.8%								
Gender		#	%	Black Non-Hispanic Female		1,519	81.8%	Black MSM		786	77.9%								
Male	5,033	84.7%	Total Black Non-Hispanic		3,439	80.65%	White MSM		2,606	88.5%									
Female	1,902	82.0%	White Non-Hispanic Male		1,855	87.5%	Hispanic MSM		980	88.8%									
Transgender*	54	83.1%	White Non-Hispanic Female		185	83.3%	#		%										
Age		#	%	Total White non-Hispanic		2,040	87.14%	Heterosexual		3,147	83.1%								
18-28	471	70.1%	Hispanic Male		1,204	88.5%	Black Hetero		2,526	82.4%									
29-38	1,086	76.5%	Hispanic Female		191	83.4%	White Hetero		603	85.8%									
39-48	1,475	83.0%	Total Hispanic		1,395	87.79%	Hispanic Hetero		361	86.8%									
49-58	2,458	86.8%					#		%										
59+	1,503	91.3%					Hemophilia*		17	89.5%									
Living Arrangements		#	%	Educational Level		#	%	IDU		117	86.0%								
Permanent	5,142	86.7%	<8th Grade		415	84.2%	MSM/IDU*		41	82.0%									
Non-Permanent	1,739	78.1%	8-12th Grade		3,844	82.3%	Perinatal		65	64.4%									
Institution*	46	69.7%	College		2,728	86.6%	Transfusion*		32	82.1%									
*Small population group (N<75 in program year). #s and %s are within each subpopulation.																			

FY 2016-2017 PSRA SCORECARDS



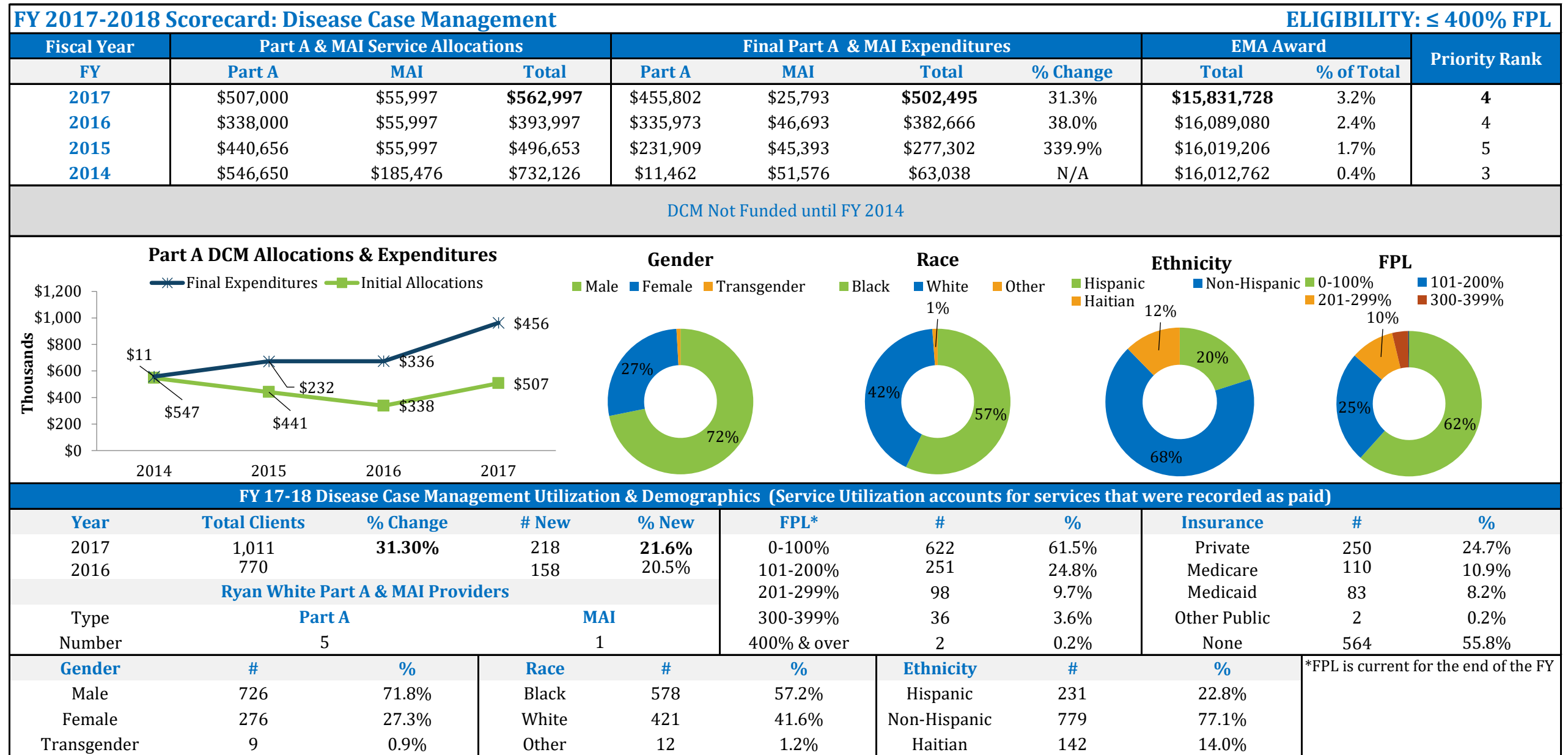
FY 2017-2018 Scorecard: Case Management

ELIGIBILITY: ≤ 400% FPL

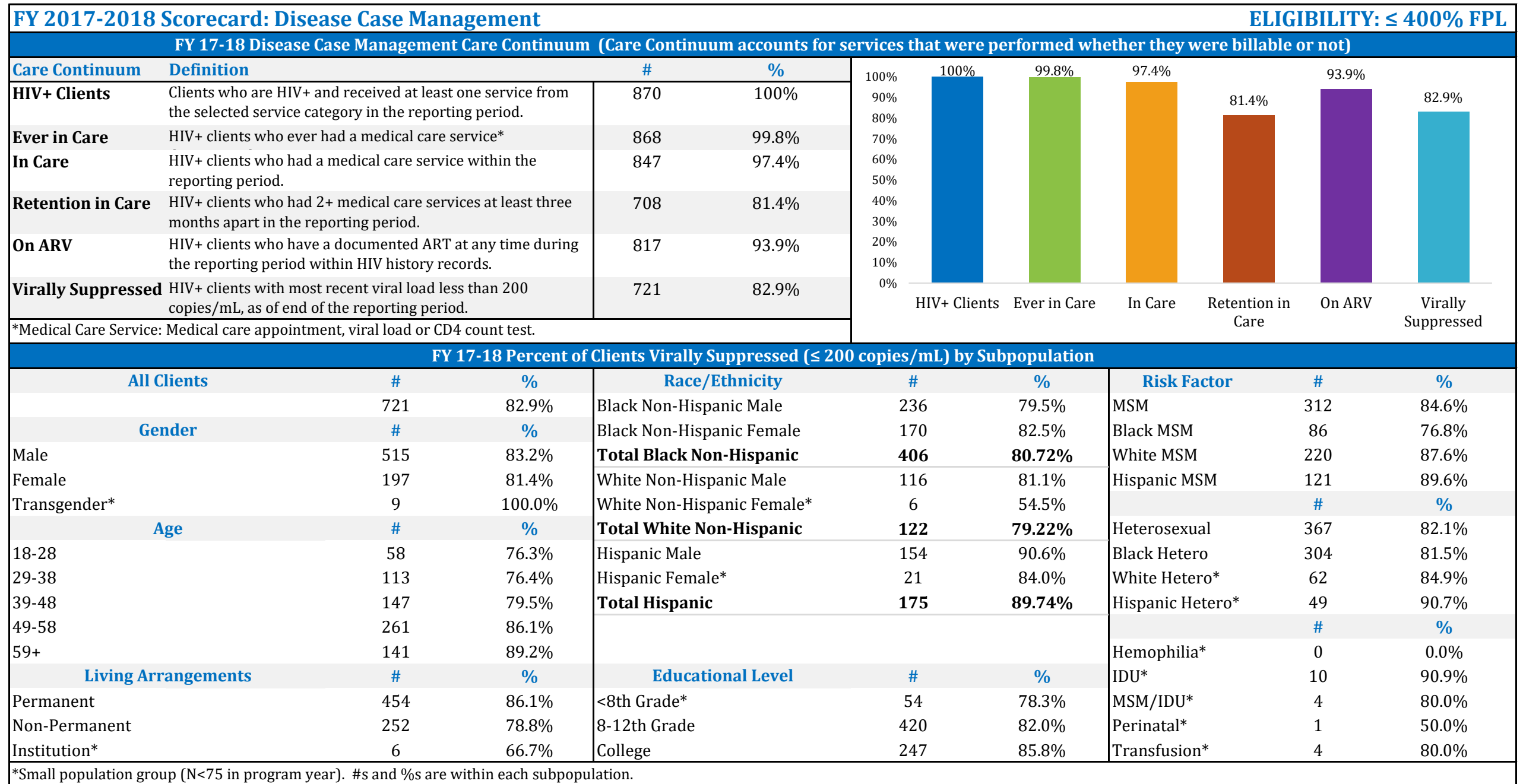
FY 17-18 Case Management Care Continuum (Care Continuum accounts for services that were performed whether they were billable or not)					
Care Continuum	Definition	#	%		
HIV+ Clients	Clients who are HIV+ and received at least one service from the selected service category in the reporting period.	2,510	100%	100%	
Ever in Care	HIV+ clients who ever had a medical care service* documented.	2,496	99.4%	99.4%	
In Care	HIV+ clients who had a medical care service within the reporting period.	2,388	95.1%	95.1%	
Retention in Care	HIV+ clients who had 2+ medical care services at least three months apart in the reporting period.	1,971	78.5%	78.5%	
On ARV	HIV+ clients who have a documented ART at any time during the reporting period within HIV history records.	2,409	96.0%	96.0%	
Virally Suppressed	HIV+ clients with most recent viral load less than 200 copies/mL, as of end of the reporting period.	2,146	85.5%	85.5%	
*Medical Care Service: Medical care appointment, viral load or CD4 count test.					
FY 17-18 Percent of Clients Virally Suppressed (≤ 200 copies/mL) by Subpopulation					
All Clients	#	%	Race/Ethnicity	#	%
	2,146	85.5%	Black Non-Hispanic Male	688	80.9%
Gender	#	%	Black Non-Hispanic Female	471	84.4%
Male	1,541	85.9%	Total Black Non-Hispanic	1,159	82.32%
Female	589	84.3%	White Non-Hispanic Male	478	89.8%
Transgender*	16	94.1%	White Non-Hispanic Female*	55	87.3%
Age	#	%	Total White Non-Hispanic	533	89.58%
18-28	131	78.4%	Hispanic Male	357	90.6%
29-38	285	77.7%	Hispanic Female	60	80.0%
39-48	427	84.9%	Total Hispanic	417	88.91%
49-58	783	87.1%			
59+	521	90.8%			
Living Arrangements	#	%	Educational Level	#	%
Permanent	1,449	88.3%	<8th Grade	181	86.2%
Non-Permanent	655	80.3%	8-12th Grade	1,238	83.8%
Institution*	26	92.9%	College	726	88.3%
			Risk Factor	#	%
			MSM	948	87.3%
			Black MSM	246	79.6%
			White MSM	686	90.1%
			Hispanic MSM	284	90.2%
				#	%
			Heterosexual	1,065	84.5%
			Black Hetero	867	83.3%
			White Hetero	192	90.1%
			Hispanic Hetero	121	89.6%
				#	%
			Hemophilia*	4	80.0%
			IDU*	46	90.2%
			MSM/IDU*	10	76.9%
			Perinatal*	9	69.2%
			Transfusion*	12	85.7%
*Small population group (N<75 in program year). #s and %s are within each subpopulation.					

*Small population group (N<75 in program year). #s and %s are within each subpopulation.

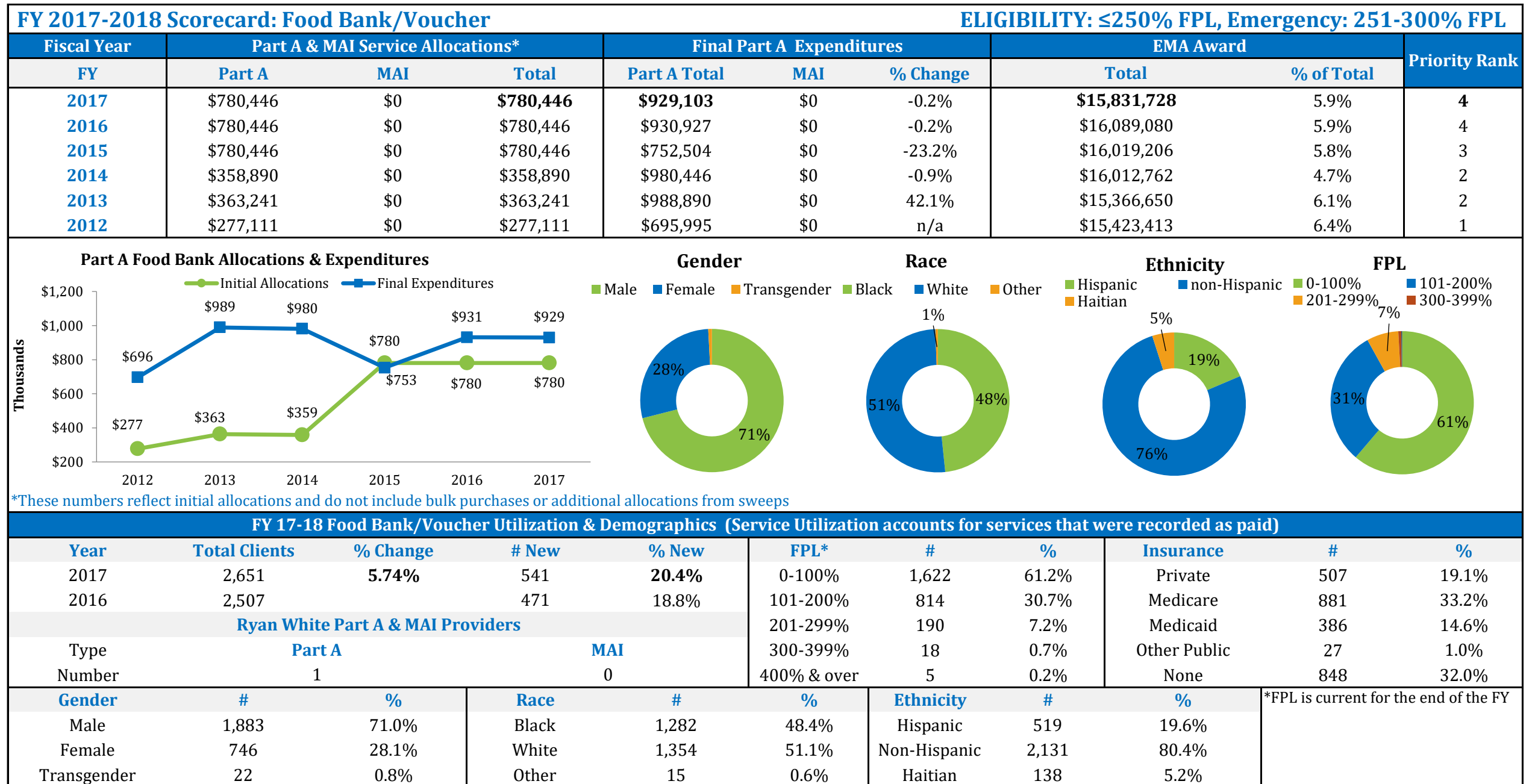
FY 2016-2017 PSRA SCORECARDS



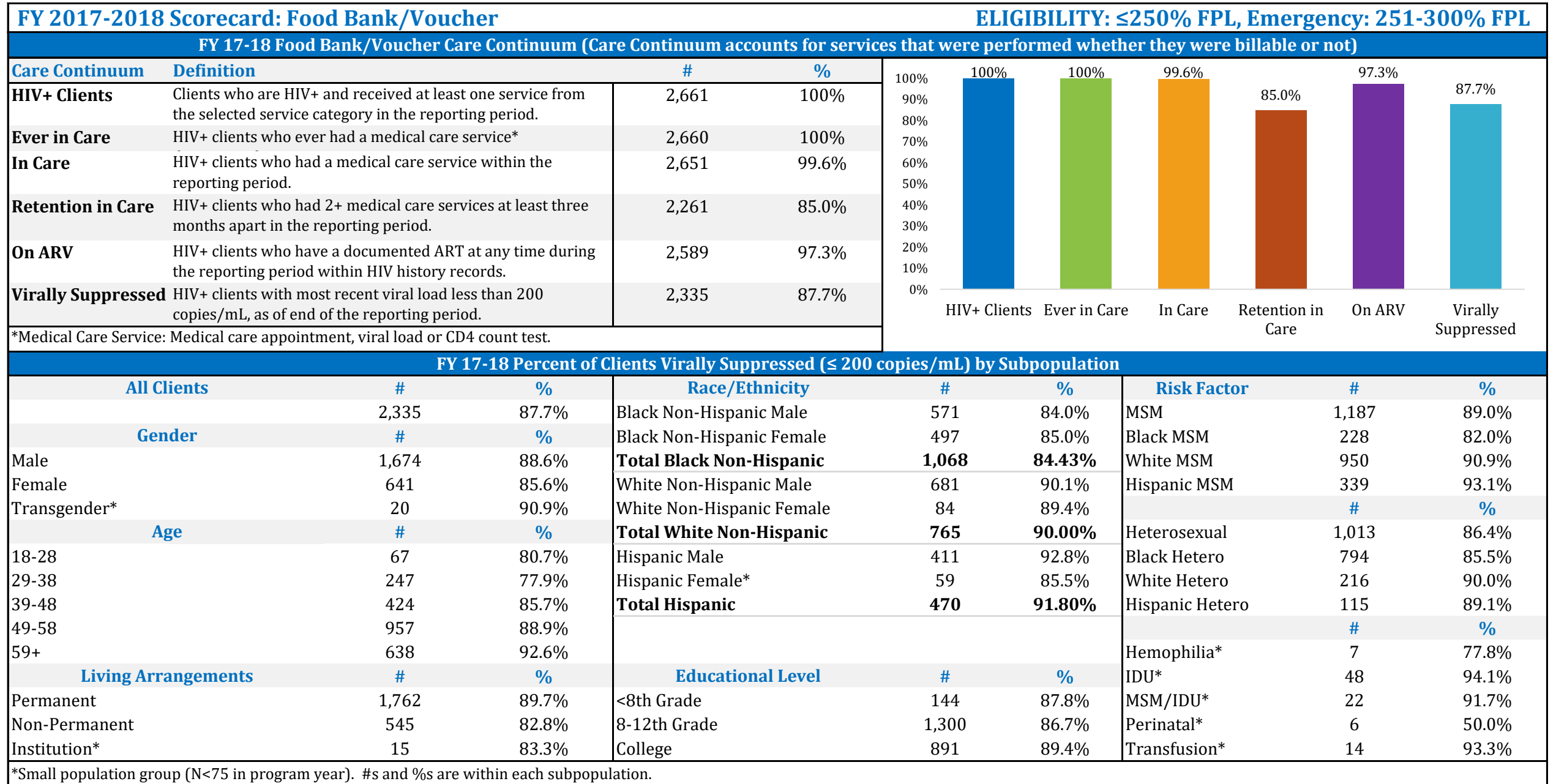
FY 2016-2017 PSRA SCORECARDS



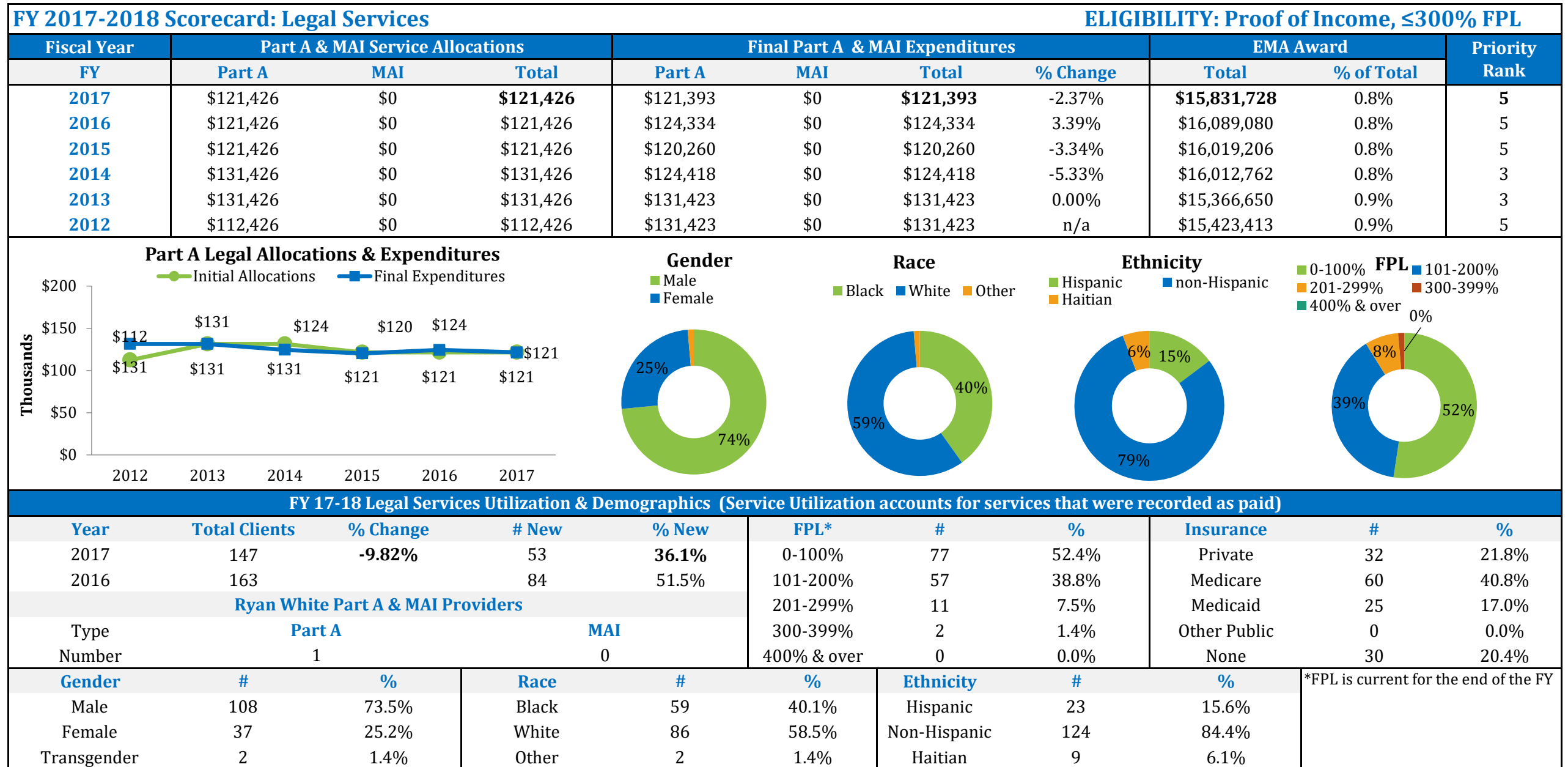
FY 2016-2017 PSRA SCORECARDS



FY 2016-2017 PSRA SCORECARDS



FY 2016-2017 PSRA SCORECARDS



FY 2016-2017 PSRA SCORECARDS

FY 2017-2018 Scorecard: Legal Services

ELIGIBILITY: Proof of Income, ≤300% FPL

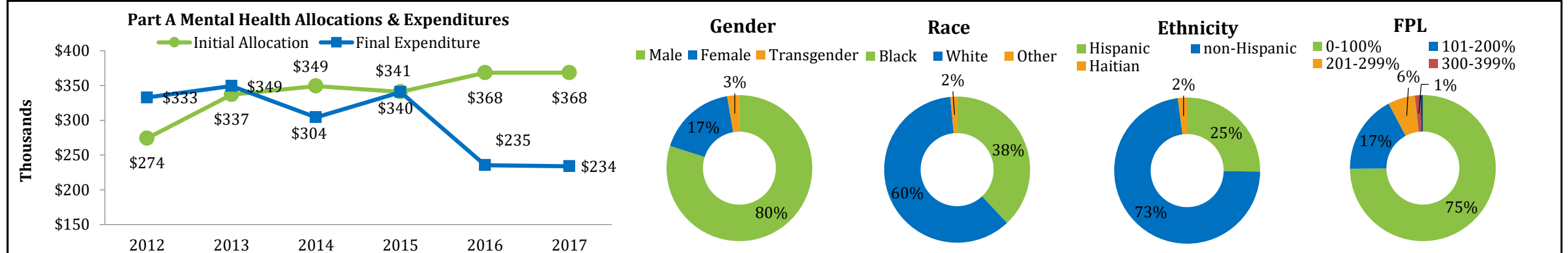
FY 17-18 Legal Services Care Continuum (Care Continuum accounts for services that were performed whether they were billable or not)																					
Care Continuum	Definition	#	%	<table><tr><th>Category</th><th>Percentage</th></tr><tr><td>HIV+ Clients</td><td>100%</td></tr><tr><td>Ever in Care</td><td>99.7%</td></tr><tr><td>In Care</td><td>92.2%</td></tr><tr><td>Retention in Care</td><td>76.3%</td></tr><tr><td>On ARV</td><td>95.5%</td></tr><tr><td>Virally Suppressed</td><td>87.1%</td></tr></table>				Category	Percentage	HIV+ Clients	100%	Ever in Care	99.7%	In Care	92.2%	Retention in Care	76.3%	On ARV	95.5%	Virally Suppressed	87.1%
Category	Percentage																				
HIV+ Clients	100%																				
Ever in Care	99.7%																				
In Care	92.2%																				
Retention in Care	76.3%																				
On ARV	95.5%																				
Virally Suppressed	87.1%																				
HIV+ Clients	Clients who are HIV+ and received at least one service from the selected service category in the reporting period.	333	100%																		
Ever in Care	HIV+ clients who ever had a medical care service*	332	99.7%																		
In Care	HIV+ clients who had a medical care service within the reporting period.	307	92.2%																		
Retention in Care	HIV+ clients who had 2+ medical care services at least three months apart in the reporting period.	254	76.3%																		
On ARV	HIV+ clients who have a documented ART at any time during the reporting period within HIV history records.	318	95.5%																		
Virally Suppressed	HIV+ clients with most recent viral load less than 200 copies/mL, as of end of the reporting period.	290	87.1%																		
*Medical Care Service: Medical care appointment, viral load or CD4 count test.																					
FY 17-18 Percent of Clients Virally Suppressed (≤ 200 copies/mL) by Subpopulation																					
All Clients		#	%	Race/Ethnicity		#	%	Risk Factor		#	%										
		290	87.1%	Black Non-Hispanic Male*		57	83.8%	MSM		147	88.0%										
Gender		#	%	Black Non-Hispanic Female		84	83.2%	Black MSM*		29	80.6%										
Male		186	89.0%	Total Black Non-Hispanic		141	83.43%	White MSM		115	89.8%										
Female		99	83.9%	White Non-Hispanic Male		92	90.2%	Hispanic MSM*		27	93.1%										
Transgender*		5	83.3%	White Non-Hispanic Female*		7	87.5%	#		%											
Age		#	%	Total White Non-Hispanic		99	90.00%	Heterosexual		125	88.7%										
18-28*		7	46.7%	Hispanic Male*		34	94.4%	Black Hetero		100	87.7%										
29-38*		35	85.4%	Hispanic Female*		8	88.9%	White Hetero*		25	92.6%										
39-48*		52	83.9%	Total Hispanic*		42	93.33%	Hispanic Hetero*		16	94.1%										
49-58		120	88.2%					#		%											
59+		75	96.2%					Hemophilia*		1	50.0%										
Living Arrangements		#	%	Educational Level		#	%	IDU*		3	100.0%										
Permanent		236	89.1%	<8th Grade*		17	89.5%	MSM/IDU*		4	100.0%										
Non-Permanent*		54	83.1%	8-12th Grade		152	85.4%	Perinatal*		2	50.0%										
Institution*		0	0.0%	College		121	89.0%	Transfusion*		3	100.0%										
*Small population group (N<75 in program year). #s and %s are within each subpopulation.																					

FY 2016-2017 PSRA SCORECARDS

FY 2017-2018 Scorecard: Mental Health

ELIGIBILITY: ≤300% FPL

Fiscal Year	Part A & MAI Service Allocations			Final Part A & MAI Expenditures				EMA Award		Priority Rank
FY	Part A	MAI	Total	Part A	MAI	Total	% Change	Total	% of Total	
2017	\$368,438	\$62,469	\$430,907	\$233,831	\$29,759	\$263,590	-9.6%	\$15,831,728	1.7%	6
2016	\$368,438	\$62,469	\$430,907	\$235,298	\$56,424	\$291,722	-18.9%	\$16,089,080	1.8%	6
2015	\$340,957	\$62,469	\$403,426	\$340,438	\$19,370	\$359,808	-0.2%	\$16,019,206	2.2%	7
2014	\$349,367	\$77,469	\$426,836	\$304,356	\$56,062	\$360,418	-12.7%	\$16,012,762	2.3%	6
2013	\$336,987	\$128,418	\$465,405	\$349,261	\$63,477	\$412,738	-1.0%	\$15,366,650	2.7%	3
2012	\$274,099	\$95,368	\$369,467	\$332,746	\$84,003	\$416,749	n/a	\$15,423,413	2.7%	6



FY 17-18 Mental Health Utilization & Demographics (Service Utilization accounts for services that were recorded as paid)

Year	Total Clients	% Change	# New	% New	FPL*	#	%	Insurance	#	%
2017	334	-2.62%	127	38.0%	0-100%	250	74.9%	Private	40	12.0%
2016	343		90	26.2%	101-200%	58	17.4%	Medicare	5	1.5%
Ryan White Part A & MAI Providers					201-299%	20	6.0%	Medicaid	14	4.2%
					300-399%	4	1.2%	Other Public	2	0.6%
Type	Part A		MAI		400% & over	2	0.6%	None	273	81.7%
Number	4		1							
Gender	#	%	Race	#	%	Ethnicity	#	%	*FPL is current for the end of the FY	
Male	267	79.9%	Black	127	38.0%	Hispanic	86	25.7%		
Female	58	17.4%	White	202	60.5%	Non-Hispanic	248	74.3%		
Transgender	9	2.7%	Other	5	1.5%	Haitian	7	2.1%		

FY 2017-2018 Scorecard: Mental Health

ELIGIBILITY: ≤300% FPL

FY 17-18 Mental Health Care Continuum (Care Continuum accounts for services that were performed whether they were billable or not)

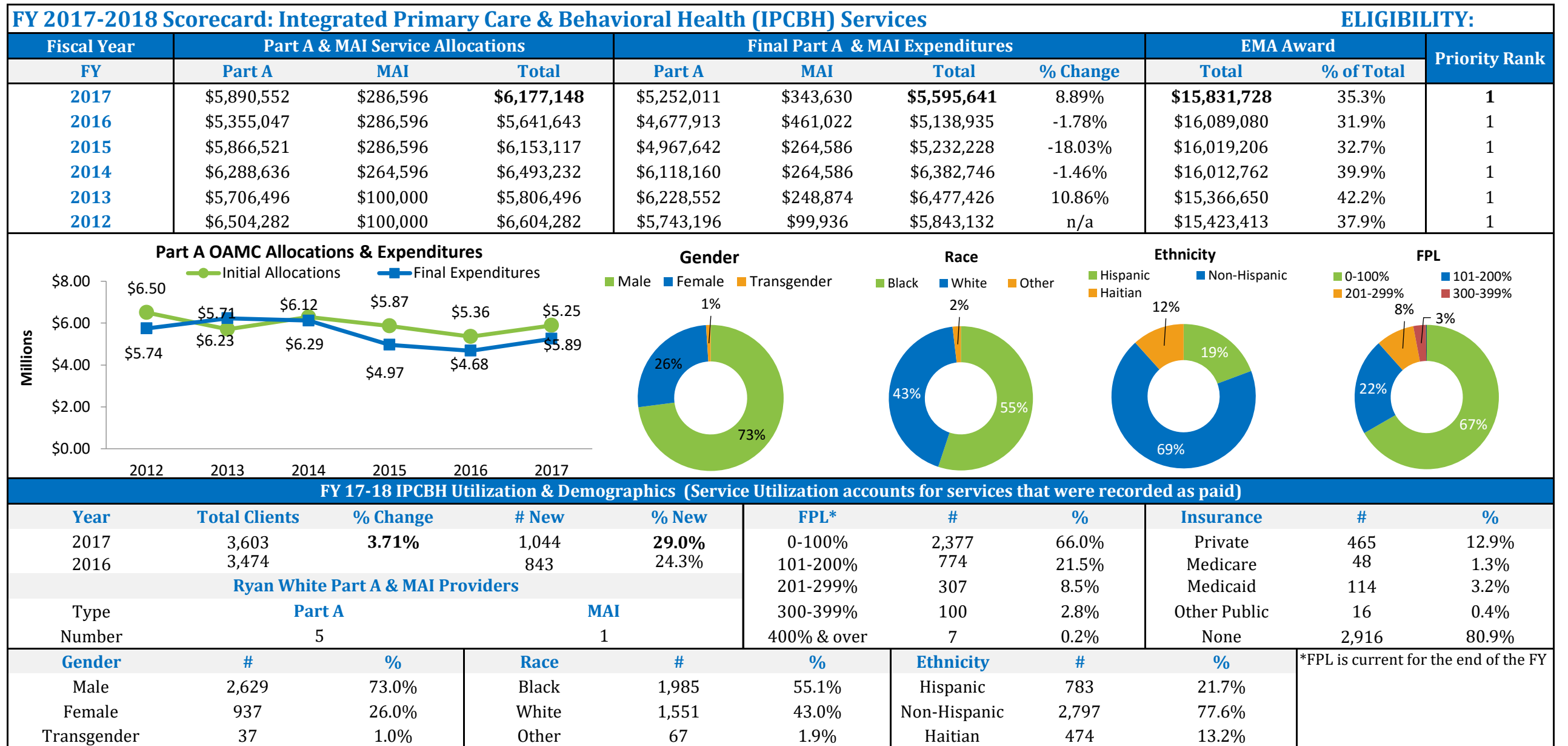
Care Continuum	Definitions	#	%	
HIV+ Clients	Clients who are HIV+ and received at least one service from the selected service category in the reporting period.	427	100%	100%
Ever in Care	HIV+ clients who ever had a medical care service*	426	100%	100%
In Care	HIV+ clients who had a medical care service within the reporting period.	423	99.1%	99.1%
Retention in Care	HIV+ clients who had 2+ medical care services at least three months apart in the reporting period.	333	78.0%	78.0%
On ARV	HIV+ clients who have a documented ART at any time during the reporting period within HIV history records.	404	94.6%	94.6%
Virally Suppressed	HIV+ clients with most recent viral load less than 200 copies/mL, as of end of the reporting period.	357	83.6%	83.6%

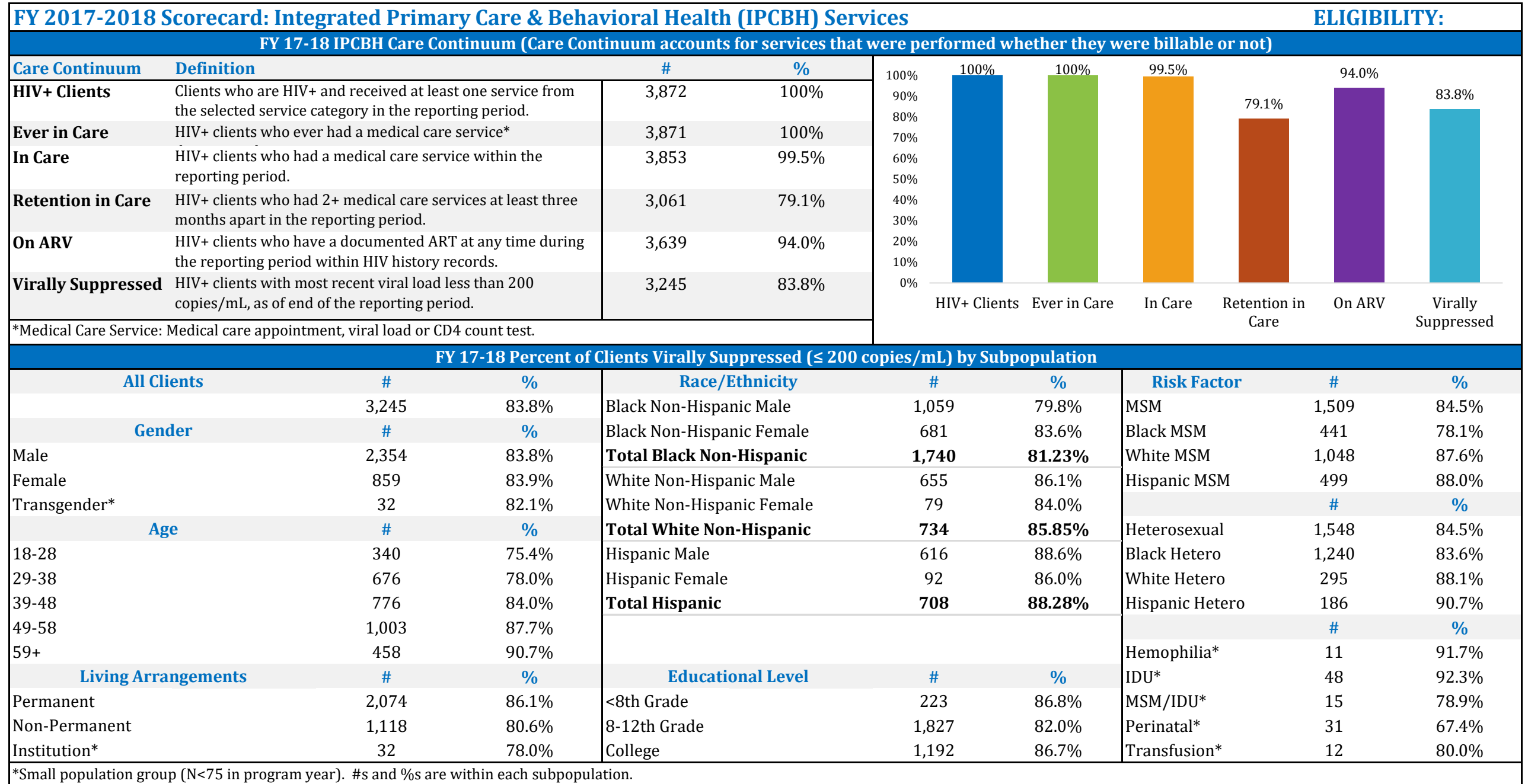
*Medical Care Service: Medical care appointment, viral load or CD4 count test.

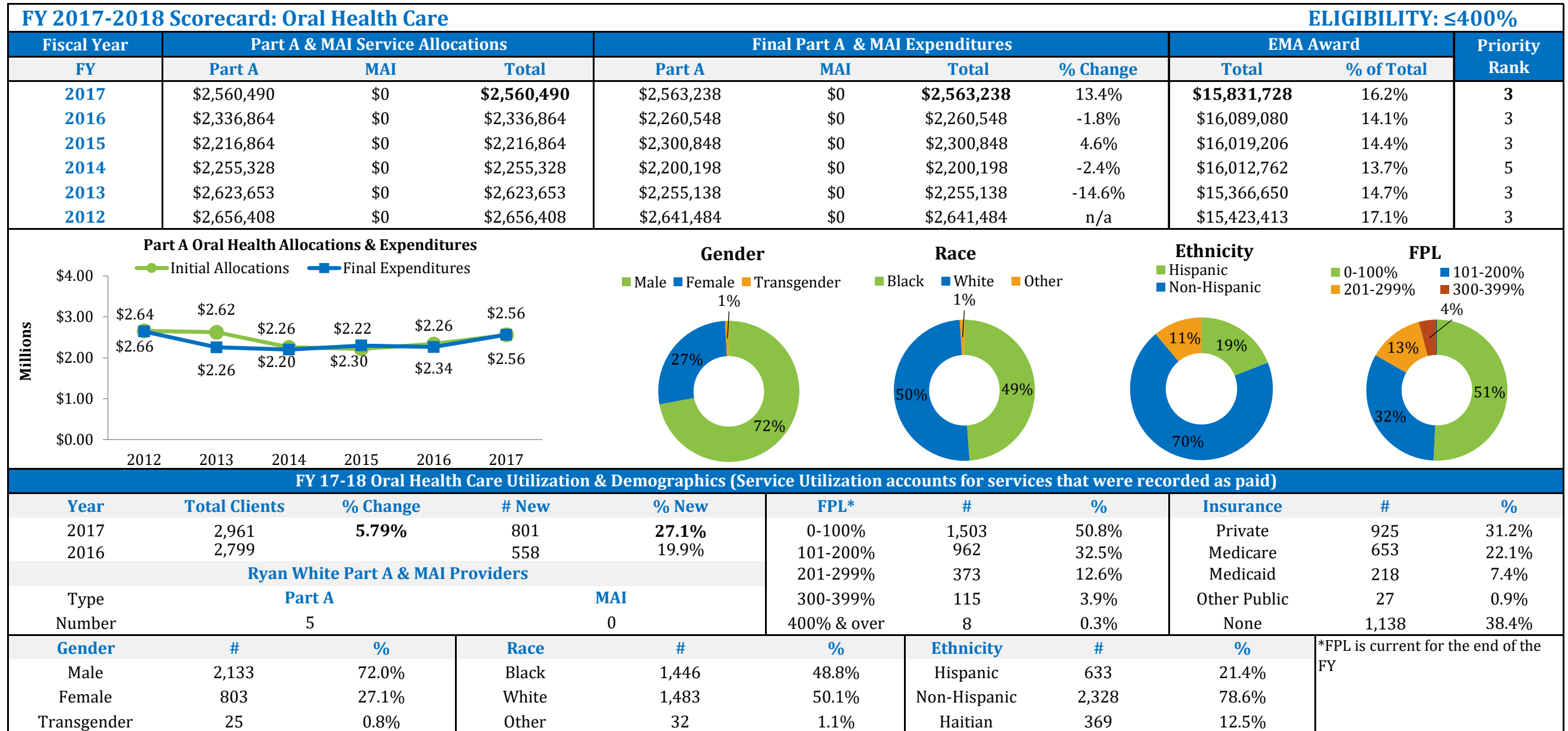
FY 17-18 Percent of Clients Virally Suppressed (≤ 200 copies/mL) by Subpopulation

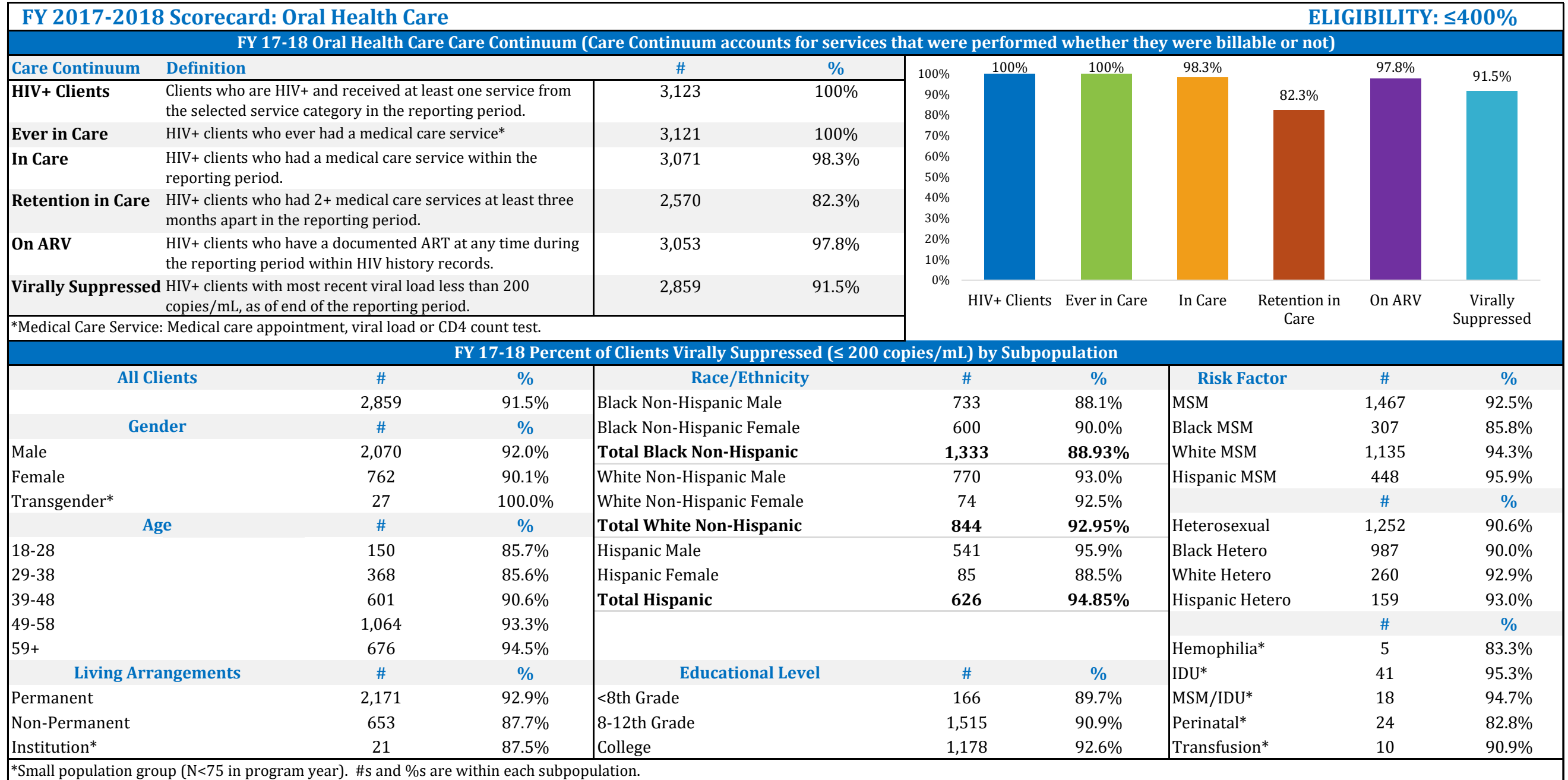
All Clients	#	%	Race/Ethnicity	#	%	Risk Factor	#	%
	357	83.6%	Black Non-Hispanic Male	98	81.7%	MSM	220	84.3%
Gender	#	%	Black Non-Hispanic Female*	34	77.3%	Black MSM*	53	77.9%
Male	286	84.6%	Total Black Non-Hispanic	132	80.49%	White MSM	163	86.2%
Female	63	79.7%	White Non-Hispanic Male	101	84.2%	Hispanic MSM	76	90.5%
Transgender*	8	80.0%	White Non-Hispanic Female*	16	84.2%		#	%
Age	#	%	Total White Non-Hispanic	117	84.17%	Heterosexual	115	83.9%
18-28*	37	74.0%	Hispanic Male	84	88.4%	Black Hetero	77	81.9%
29-38	78	78.0%	Hispanic Female*	13	86.7%	White Hetero*	38	88.4%
39-48	95	85.6%	Total Hispanic	97	88.18%	Hispanic Hetero*	19	90.5%
49-58	124	86.7%					#	%
59+*	27	96.4%				Hemophilia*	1	100.0%
Living Arrangements	#	%	Educational Level	#	%	IDU*	11	100.0%
Permanent	184	83.6%	<8th Grade*	7	70.0%	MSM/IDU*	2	50.0%
Non-Permanent	166	83.8%	8-12th Grade	185	82.2%	Perinatal*	0	0.0%
Institution*	5	83.3%	College	165	85.9%	Transfusion*	1	100.0%

FY 2016-2017 PSRA SCORECARDS

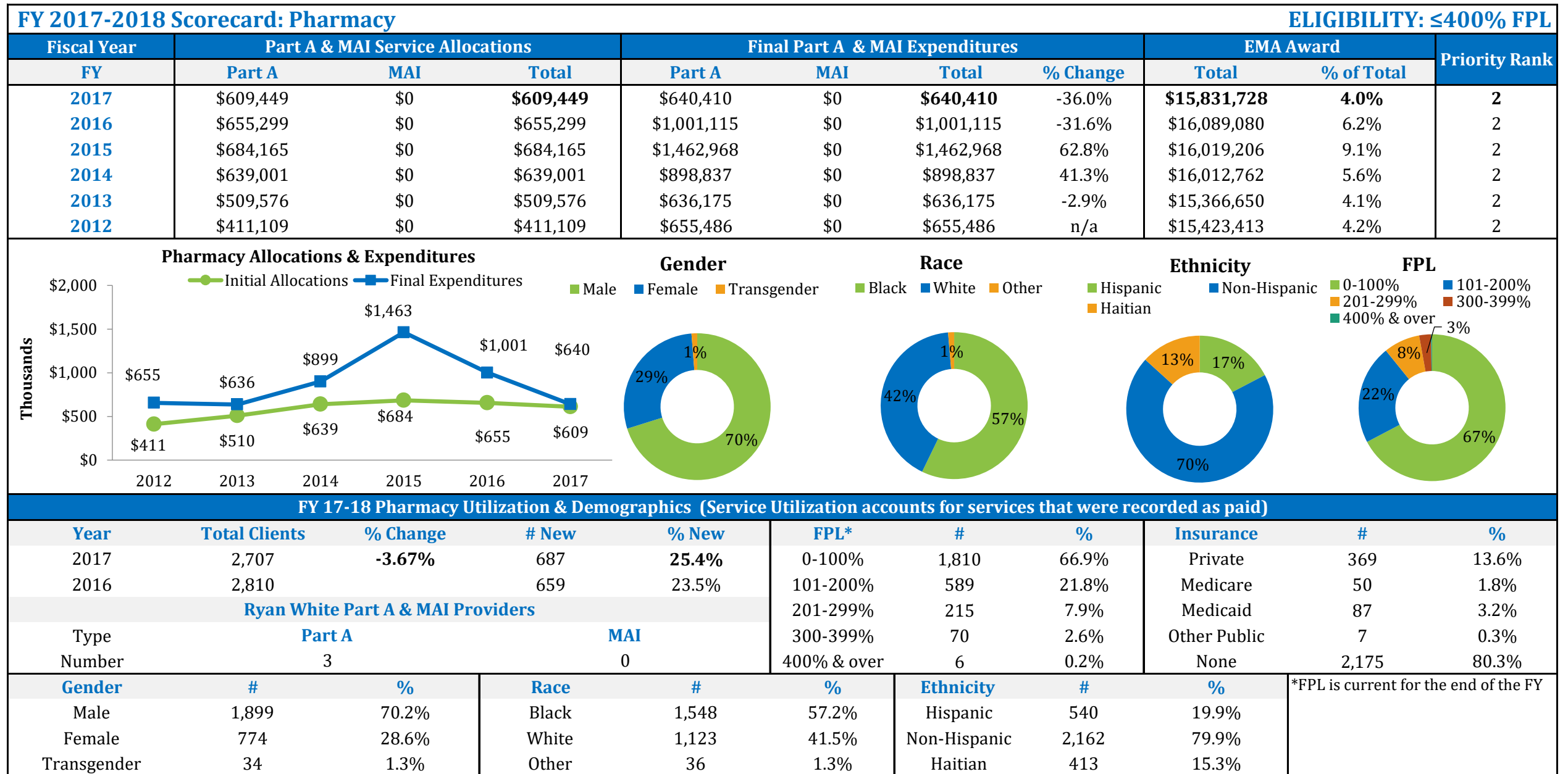






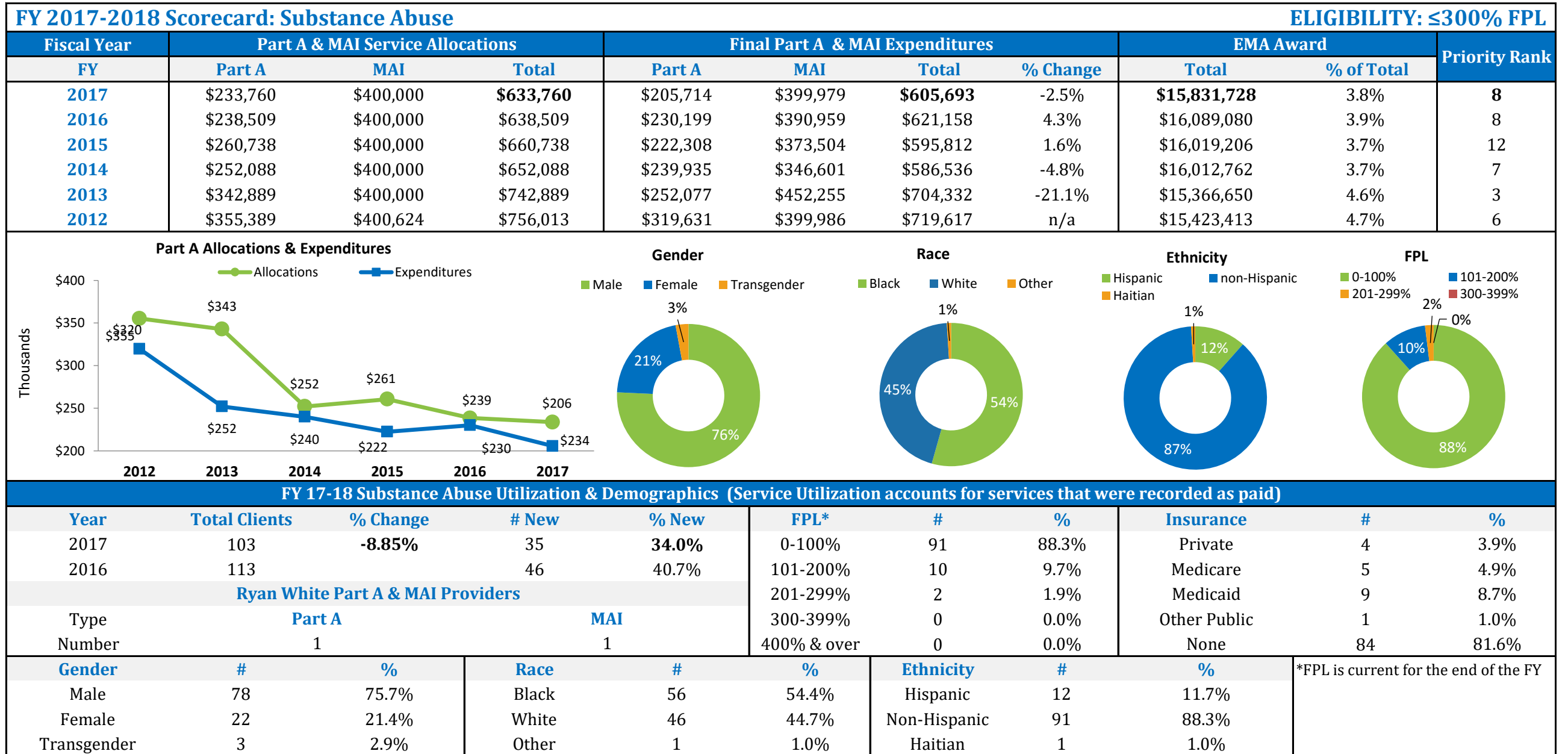


FY 2016-2017 PSRA SCORECARDS

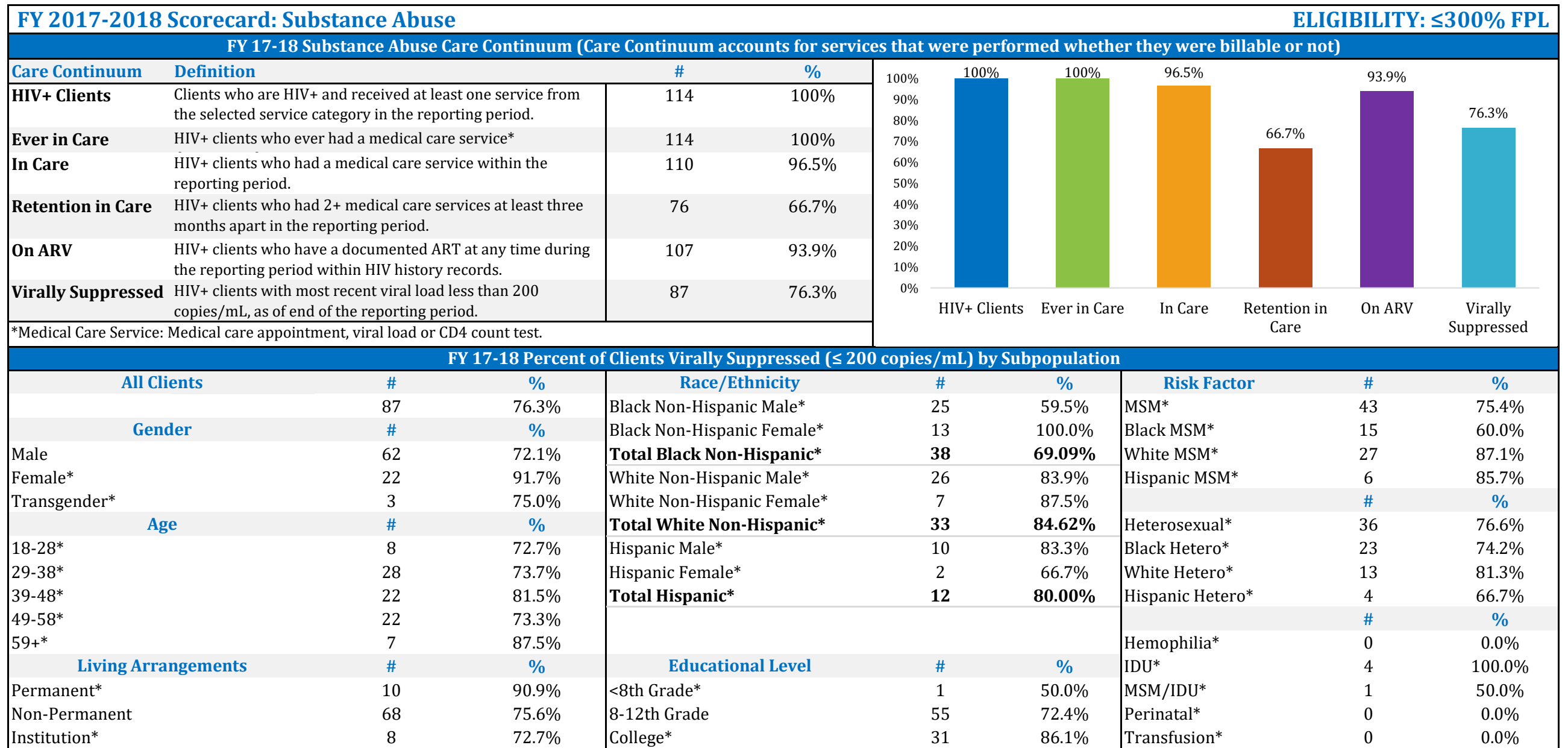


FY 2017-2018 Scorecard: Pharmacy				ELIGIBILITY: ≤400% FPL							
FY 17-18 Pharmacy Care Continuum (Care Continuum accounts for services that were performed whether they were billable or not)											
Care Continuum	Definition	#	%								
HIV+ Clients	Clients who are HIV+ and received at least one service from the selected service category in the reporting period.	2,881	100%	100%	100%	98.9%	81.6%	95.6%	84.6%		
Ever in Care	HIV+ clients who ever had a medical care service*	2,881	100%								
In Care	HIV+ clients who had a medical care service within the reporting period.	2,849	98.9%								
Retention in Care	HIV+ clients who had 2+ medical care services at least three months apart in the reporting period.	2,352	81.6%								
On ARV	HIV+ clients who have a documented ART at any time during the reporting period within HIV history records.	2,753	95.6%								
Virally Suppressed	HIV+ clients with most recent viral load less than 200 copies/mL, as of end of the reporting period.	2,437	84.6%								
*Medical Care Service: Medical care appointment, viral load or CD4 count test.											
FY 17-18 Percent of Clients Virally Suppressed (≤ 200 copies/mL) by Subpopulation											
All Clients		#	%	Race/Ethnicity		#	%	Risk Factor		#	%
		2,437	84.6%	Black Non-Hispanic Male		757	80.3%	MSM		1,071	85.2%
Gender		#	%	Black Non-Hispanic Female		566	85.1%	Black MSM		295	79.1%
Male	1,706	84.3%	Total Black Non-Hispanic		1,323	82.28%	White MSM		764	87.7%	
Female	702	85.2%	White Non-Hispanic Male		494	86.4%	Hispanic MSM		350	88.4%	
Transgender*	29	85.3%	White Non-Hispanic Female*		58	85.3%	#		%		
Age		#	%	Total White Non-Hispanic		552	86.25%	Heterosexual		1,228	85.4%
18-28	208	75.6%	Hispanic Male		440	89.2%	Black Hetero		989	84.6%	
29-38	481	79.1%	Hispanic Female		73	85.9%	White Hetero		229	88.8%	
39-48	614	85.0%	Total Hispanic		513	88.75%	Hispanic Hetero		148	91.4%	
49-58	798	87.2%					#		%		
59+	336	91.8%					Hemophilia*		8	100.0%	
Living Arrangements		#	%	Educational Level		#	%	IDU*		31	86.1%
Permanent	1,532	86.7%	<8th Grade		181	87.9%	MSM/IDU*		14	73.7%	
Non-Permanent	867	81.9%	8-12th Grade		1,384	82.7%	Perinatal*		20	60.6%	
Institution*	22	73.3%	College		870	87.4%	Transfusion*		12	75.0%	
*Small population group (N<75 in program year). #s and %s are within each subpopulation.											

FY 2016-2017 PSRA SCORECARDS



FY 2016-2017 PSRA SCORECARDS



FY19 Rank	Providers	Service	FY17 Clients	% Total Clients	FY 17 Final Expenditure	FY17 Avg Cost/Client	FY17 New Clients		FY18 Allocations w/ Funding Ceiling (\$16,623,315)		FY19 Projected Clients	Factors to Consider
#	#		#	%	\$	\$	#	%	\$	%	#	
1	5	Integrated Primary Care and Behavioral Health	3,603	42%	\$ 5,252,011	\$ 1,457.68	1,044	29%	\$ 4,965,640	45%	3,783	With the implementation of T&T, 20% increase in 2016 new HIV infections and a rise in utilization, OAMC could benefit from increased funding in FY19
3	3	Pharmacy	2,707	32%	\$ 640,410	\$ 236.58	687	25%	\$ 625,165	6%	2,575	Expansion of ADAP formulary may provide potential cost savings in FY18 and onward. Recommending funding based on FY17 final expenditures
5	5	Oral Health	2,961	35%	\$ 2,563,238	\$ 865.67	801	27%	\$ 2,744,564	25%	3,109	With increased provider locations, routine and specialty services and increase in client utilization, OHC could benefit from increased funding in FY19
4	1	HICP	612	7%	\$ 499,893	\$ 816.82	16	3%	\$ 350,000	3%	630	Continuous monitoring of expenditures throughout FY18 to determine impact of client copayments for Part A and Part B clients. Recommending funding based on FY17 final expenditures.
2	5	MCM (Disease)	1,011	12%	\$ 455,802	\$ 450.84	218	22%	\$ 507,000	5%	1,213	DCM service starting to reach full impact in year 4 of implementation. The EMA and stakeholders report increases in clients with co-morbidities, AIDS, and OI (as highlighted in other funder presentations). DCM could benefit from increased funding in FY19
2	7	MCM (CM)	2,229	26%	\$ 1,140,647	\$ 511.73	546	24%	\$ 1,353,263	12%	1,986	Funding recommended based on FY17 final expenditures.
6	4	Mental Health	334	4%	\$ 233,831	\$ 700.09	127	38%	\$ 318,438	3%	325	Under utilized core service despite integration of BH and OAMC. Should continue to monitor client utilization to determine impact of integration. Recommending funding based on FY17 final expenditures.

8	1	Substance Abuse (Outpatient)	103	1%	\$ 205,714	\$ 1,997.22	35	34%	\$ 233,760	2%	103	Under utilized core service. Recommending funding based on FY17 final expenditures.
		CORE			\$ 10,991,546				\$ 11,097,830	85%		
FY19 Rank	Providers	Service	FY17 Clients	% Total Clients	FY 17 Final Expenditure	FY17 Avg Cost/Client	FY17 New Clients		FY18 Allocations w/ Funding Ceiling (\$16,623,315)		FY19 Projected Clients	Factors to Consider
#	#		#	%	\$	\$	#	%	\$	%	#	
3	1	Non Medical CM (CIED)	8,347	98%	\$ 560,498	\$ 67.15	1089	13%	\$ 560,513	28%	8,596	CIED serves as entry point and initial case management for all Part A clients. Experiences continuous 3-5% increase in new clients each year. Funding recommendation based on FY17 final expenditures.
3	1	Non Medical CM (BISS)	719	8%	\$ 79,108	\$ 110.03	27	4%	\$ 118,125	6%	720	BISS in second year of implementation. Continuous monitoring of client utilization is necessary to determine impact of service. Funding recommendation based on FY17 final expenditures.
5	3	Emergency Financial Assistance	282	3%	\$ 101,744	\$ 360.79	282	100%	\$ 100,000	5%	300	Monitor impact of Test and Treat and number of clients accessing stop-gap and emergency medications. Funding recommendation based on FY17 final expenditures.
2	1	Food Bank/Voucher	2,651	31%	\$ 929,103	\$ 350.47	541	20%	\$ 1,070,566	54%	2,544	New Food Bank/Voucher eligibility may decrease service expenditures in FY18. Funding recommendation based on FY17 final expenditures.
7	1	Legal	147	2%	\$ 121,393	\$ 825.80	53	36%	\$ 121,426	6%	131	Legal expenditures and client utilization remain steady throughout service history. Funding recommendation based on FY17 final expenditures.
		SUPPORT			\$ 1,791,846				\$ 1,970,630	15%		
	13	TOTAL CORE/SUPPORT	8,485		\$ 12,783,392				\$ 13,068,460			

FY19 Rank	Providers	Service	FY17 Clients	% Total Clients	FY 17 Final Expenditure	FY17 Avg Cost/Client	FY17 New Clients		FY18 Allocations w/ Funding Ceiling (\$16,623,315)		Factors to Consider
#	#		#	%	\$	\$	#	%	\$	%	
1	1	OAMC	672	13%	\$ 343,630	\$ 511.35	87	13%	\$ 291,669	38%	Funding based on previous FY allocation.
2	1	MCM (Disease)	58	1%	\$ 25,793	\$ 444.71	8	14%	\$ 50,956	7%	Funding based on previous FY allocation.
6	1	Mental Health	67	1%	\$ 29,759	\$ 444.16	18	27%	\$ 16,082	2%	Funding based on previous FY allocation.
8	1	Substance Abuse (Outpatient)	67	1%	\$ 399,979	\$ 5,969.84	17	25%	\$ 400,000	53%	Funding based on previous FY allocation.
		CORE			\$ 799,161				\$ 758,707	72%	
FY19 Rank	Providers	Service	FY17 Clients	% Total Clients	FY 17 Final Expenditure	FY17 Avg Cost/Client	FY17 New Clients		FY18 Allocations w/ Funding Ceiling (\$16,623,315)		Factors to Consider
#	#		#	%	\$	\$	#	%	\$	%	
3	1	Non Medical CM (CIED)	5,042	98%	\$ 290,950	\$ 57.71	336	7%	\$ 290,957	100%	Funding based on previous FY allocation.
		SUPPORT			\$ 290,950				\$ 290,957	28%	
		TOTAL CORE/SUPPORT	5,156		\$ 1,090,111				\$ 1,049,664		

FY2017 Expenditures and Utilization												
	Part A & Minority AIDS Initiative (MAI)		Part B / ADAP / AIDS Insur. Contin. Prog.		Part C		Part D		Part F		Housing Opports. For PWA (HOPWA)	
	\$	#	\$	#	\$	#	\$	#	\$	#	\$	#
Outpatient /Ambulatory	\$5,786,048	3,603			\$634,765	444						
AIDS Drug Asstnc. Prog.	\$640,410	2,707										
Pharmaceutical Asstnc. (ADAP Premium Plus)												
Dental	\$2,563,238	2,961							\$219,000	254		
Early Intervention						128						
Health Insur. Premium (MedCo)	\$499,893	612										
Home Health												
Home/Community Hlth.												
Hospice Services												
Mental Health	\$263,590	334										
Medical Nutrition												
Case Management	\$930,556	8,347			\$122,720	102						
Subst. Abuse - outpat.	\$605,693	103										
Disease Case Mgt. *	\$1,622,242	3,240										
Child Care												
Emerg. Financial Aid	\$101,744	282										
Food Bank/Deliv. Meals	\$929,103	2,651										
Education/Risk Redctn.												
Housing												
Legal	\$121,393	147										
Linguistics												
Medical Transportation												
Outreach												
Psychosocial Support												
Referral/Support Care					\$6,548	838						
Rehabilitation												
Respite Care												
Subst. Abuse - residntl.												
Treatment Adherence					\$119,339	810						
Total Unduplicated	\$14,063,909	8,485				838						

* Not unduplicated

FY 2017 Total Unduplicated Clients Served By Funder

FY17-18 Demographics	Part A	Part B / ADAP	Part C	Part D	Part F	Housing (HOPWA)
# New Patients			49	185	146	
# AIDS	991		27	264	18	
# HIV/non AIDS	7,009		762	957	229	
AIDS Status Unknow	542				7	
Exposed Infants				171		
Total	8,485		838	1,392	254	651
Race						
Black	4,378		608	1,222	153	439
White	3,861		116	161	94	210
More than one	25		35	2	5	-
Asian	50		2	4	2	-
American Indian	8		-	-		1
Other Race	154			3		1
Ethnicity						
Hispanic	1,596		77	80	83	65
Haitian	844		unk	239		-
Gender						
Male	6,066		504	288	136	373
Female	2,352		334	1,104	115	270
Transgender	67		-	-	3	8
Exposure Category						
MSM	4,097		113	37		NA
IV Drug User	140		15	1		NA
Heterosexual	3,851		700	978		NA
Transfusion	41		2	2		NA
Mother at-risk	102			-		NA
Perinatal Infect.			8	374		NA
MSM/IV Drug				-		NA
Unknown	240			-		NA
Age						
(0-12)				188	0	-
(13-24)			21	171	12	25
(25-44)			206	619	103	322
(45-64)			528	389	87	290
(65+)			83	25	52	14
Insurance Status						
No Insurance	3,614		215	74	254	NA
Mdcaid/Mdcare	2,618		150	943		NA
R.White Part A			394	168		NA
HMO/Private	2,015		79	204		NA
VA				3		NA
Federal Poverty Level						
0-100	4,734		638	1,206	231	200
101-200	2,356		90	157	0	261
201-300	886		15	18	3	124
301-400	308		9	4	10	30
400+	28		4	7		36
Unknown			82	-	10	