FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES
PLANNING COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685
System of Care Committee Meeting
Thursday, October 2, 2025 - 9:30AM to 11:30AM
Meeting at Broward Regional Health Planning Council and via Microsoft Teams

Join the meeting now
https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmY0MThlM2UtNWFhMC00MDg1LTlmMmMtMjUwZjU3NThlZTcz%40thread.v2/0?context=%7b%22Tid%22%3a%220dd42165-bf27-4e00-9f50-1f4dff8a73f8%22%2c%22Oid%22%3a%22df400b73-e09f-4638-a7b6-0750be4ecb25%22%7d
Meeting ID: 256 553 685 164
Passcode: df2wy9Zr
Chair: Jose Castillo • Vice Chair: Kendra Hayes

Purpose. The System of Care Committee aims to evaluate the system of care in Broward County and analyze the impact of local, state, and federal policy and legislative issues impacting people living with HIV in the Broward County EMA. The Committee will be responsible for advising the Council on how these issues may impact the Broward County EMA and may recommend response strategies.

This meeting is audio and video recorded.

Quorum for this meeting is 4

DRAFT AGENDA

ORDER OF BUSINESS

I. Call to Order/Establishment of Quorum
   a. Welcome from the Chair
   b. Meeting Ground Rules
   c. Statement of Sunshine
   d. Introductions & Abstentions
II. Moment of Silence
III. Action Item: Approval of Agenda for October 2, 2025
IV. Action Item: Approval of Minutes from August 7, 2025 **(Handout A)**
V. Public Comment
VI. Standard Committee Item(s): None.

VII. Discussion Items:

a. None.

VIII. Old Business:

a. None.

IX. New Business

a. **Update**: Part A/EHE Services Pamphlet; Recipient Staff **(Handout B)**

b. **Discussion:** Freedom of Choice Form; Recipient Staff **(Handout C)**

c. **Discussion:** Centralized Intake and Eligibility Determination Program Review; SOC Chair **(Handout D1, D2, D3, D4)**

X. Recipient Report

XI. Public Comment

XII. Announcements

XIII. Agenda Items for Next Meeting

a. To be Determined

XIV. Next Meeting Date: November 6, 2025, at 9:30 a.m. Location: BRHPC and via Microsoft Teams Video Conference

XV. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at the HIV Planning Council Website

Please complete your meeting evaluation.

Three Guiding Principles 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: (1) Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.

October 2025

Broward HIV Health Services Planning Council Calendar

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit HIV Health Service Planning Council for updates.					
			1	2 System of Care Committee Meeting (SOC) 9:30AM – 11:30AM Location: BRHPC/MS Teams Medical Provider Network Meeting In-person (CQM) 2:30PM-4:30PM	3 Medical Case Management Network Meeting In-person (CQM) 2:30PM-4:30PM	4
5	6	7 Community Empowerment Committee Meeting (CEC) 3:00PM– 5:00PM Location: BRHPC/MS Teams	8 Quality Network Meeting (CQM) 9:00AM-10:15AM	9 Membership/Council Development Committee Meeting (MCDC) 9:30AM – 11:30AM Location: BRHPC/MS Teams	10 Minority AIDS Initiative Subcommittee Meeting 9:30AM – 11:30AM Locations: BRHPC/MS Teams	11
12	13	14 Behavioral Health Network Meeting In-person (CQM) 2:00PM-3:30PM	15 NLAAD National Latinx AIDS Awareness Day	16 Priority Setting and Resource Allocation Committee Meeting 9:30AM – 11:30AM Location: BRHPC/MS Teams Executive Committee Meeting 12:45PM – 2:45PM Location: BRHPC/MS Teams	17	18
19	20 VOICES OF THE COMMUNITY WE WANT TO HEAR YOUR VOICE 4:30PM-7:30PM SESSION #3	21	22	23 HIV Planning Council Meeting 9:30AM – 11:30AM Locations: Broward Government Center/MS Teams	24	25
26	27	28	29	30	31	GET CARE BROWARD TREAT HIV | BEAT HIV RYAN WHITE | PART A

Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020
Links are active and lead to meetings or Awareness Day Information. **Information is subject to change.**

Meetings in RED are canceled. Meetings in BLUE are for the HIV Planning Council Committees. Meetings in GREEN are for the Provider Network.
Holidays and meetings outside of the HIV Planning Council are in BLACK.

October 2025

Broward HIV Health Services Planning Council Calendar

All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Unless otherwise noted, meetings will be held via WebEx.
Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1292 or 1343. Visit HIV Health Service Planning Council for updates.

TODOS ESTAN BIENVENIDOS!	ALL ARE WELCOME!	BON VINI!
A menos que se anote de forma diferente en el calendario, todas las reuniones se realizarán en: Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020 Para confirmar información acerca de la reunión de Consejo de Planeación HIV, o confirmar la reserva de servicios especiales tales como: Traducción Inglés a Español o a Criollo (Haitiano), servicios para discapacitados en visión o audición, por favor llame con 48 horas de antelación para que puedan hacerse los arreglos necesarios.	Unless otherwise noted on the calendar, all meetings are held at: Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020 To confirm HIV Planning Council meeting information, or reserve special needs services such as Translation from English to Spanish or Creole, or are hearing or visually impaired, please call 48 hours in advance so that arrangements can be made for you.	Sòf si yo ta ekri yon lòt bagay nan almanak-la, tout rankont-yo ap fét: Location: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020 Pou konfime enfòmasyon ou resevwa sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyol; oswa, si ou gen pwoblèm wè oswa tande, rele 48 tè alavans pou yo ka fè aranjman pou ou.

HIVPC Committee Descriptions

HIV Health Services Planning Council (HIVPC) - Monitors, evaluates, and continuously improves systematically the quality and appropriateness of HIV care and ser- vices provided to all patients receiving Part A and MAI-funded services.

Executive Committee - Sets agenda for Council meetings, addresses conflict of interest issues, reviews attendance reports, oversees the planning activities established in the Comprehensive Plan, oversees committee work plans, reviews committee recommendations, ratifies recommendations for removal for cause, and addresses unresolved grievance issues.

Priority Setting Resource Allocation (PSRA) Committee - Recommends priorities and allocation of Ryan White Part A funds. Facilitates the Priority Setting and Resource Allocation Process to include the review of appropriate data (service utilization, epidemiological data). Develops, reviews, and monitors eligibility, service definitions, as well as language on 'how best to meet the need.

Quality Management Committee (QMC) - Ensures highest quality HIV medical care and support services for PLWHA by developing client and system-based outcomes and indicators. Provides oversight of standards of care, develops scopes of service for program evaluation studies, assesses client satisfaction, and provides QM staff/client training/education.

Membership/Council Development Committee (MCDC) - Recruits and screens applications based on objective criteria for appointment to the Council in order to ensure demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act. Presents recommendations to the Council. Institutes orientation and training programs for new and incumbent members.

Community Empowerment Committee (CEC) - Encourages the participation of individuals living with and affected by HIV/AIDS in the planning, priority-setting and resource-allocation processes. Function as a primary level of appeal for unresolved grievances relative to the Council's decisions regarding Ryan White Part A funding.

System of Care (SOC) Committee - Evaluates the system of care and analyzes the impact of local, state, and federal policy and legislative issues impacting PLWHA in the Broward County EMA. Plans and addresses coordinated care across diverse groups by engaging community resources to eliminate disparities in access to services.

HANDOUT A

FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING
COUNCIL
AN ADVISORY BOARD OF THE BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

System of Care Committee Meeting

Thursday, August 7, 2025 - 9:30 – 11:30 AM
Meeting at Broward Regional Health Planning Council and via Microsoft Teams

Chair: Jose Castillo • Vice Chair: Kendra Hayes

DRAFT MINUTES

SOC Members Present: J. Castillo (Chair), A. Murphy, F. D'Amore, K. Hayes, T. Pietrogallo, Julio De La Nuez

Members Absent: None

Ryan White Part A Recipient Staff Present: B. Spalding, R. Pena, W. Cius

Planning Council Staff Present: G. Martinez, D. Liao, S. Isidore, M. Lacroix, M. Rosiere, D. Cestero-Seifer, J. Beal

Guests Present: J. Rodriguez, D. Shamer, O. Desinor, J. Rivero, M. Anyan, M. DiMaria, A. tender, H. Singh, J. Shirley, J. Hidalgo, J. Rodriguez

Call to Order, Welcome from the Chair & Public Record Requirements

The SOC Chair called the meeting to order at **9:31 A.M**. The SOC Chair welcomed all meeting attendees who were present. Attendees were notified that the SOC meeting is based on Florida's "Government-in-the-Sunshine Law and meets reporting requirements, including the recording of minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the SOC Chair, Committee members, Recipient Staff, PCS & CQM Staff, and guests by roll call, and a moment of silence was observed.

Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters about HIV/AIDS and services in Broward County. There were no public comments.

Meeting Approvals

The approval for the August 7, 2025, agenda of the Systems of Care Committee meeting was proposed by K. Hayes seconded by F. D'Amore, and passed unanimously.

The approval for the minutes of the June 5, 2025, meeting was proposed by F. D'Amore, seconded by K. Hayes, and approved with no further corrections.

Motion #1: K. Hayes, on behalf of the SOC Committee, made a motion to approve the June 5, 2025, System of Care Committee agenda. The motion was seconded by F. D'Amore and adopted unanimously.

Motion #2: F. D'Amore, on behalf of the SOC Committee, made a motion to approve the June 5, 2025, System of Care Committee meeting minutes as presented. The motion was seconded by K. Hayes and adopted unanimously.

Public comment.

None.

Standard Committee Items

None.

Discussion Items

a. **Action Item:** Review and approve System of Care Committee Policies & Procedures

   PCS staff M. Lacroix noted that the System of Care last reviewed its Policies and Procedures in 2017. G. Martinez added that recent updates make the document easier to follow, clearly outline SOC's purpose, and reflect key components of the committee's work plan.

   F. D'Amore commented that the document is comprehensive, with only minor punctuation edits needed in Sections B and C. Martinez also highlighted that the Policies and Procedures align with the Integrated Workplan—for example, the committee reviews Needs Assessments, and findings may inform IP plan goals and objectives. A motion followed the discussion.

   Motion #3: On behalf of the SOC Committee, K. Hayes moved to approve the updated System of Care Committee Policies and Procedures. J. De La Nuez seconded the motion, which was unanimously approved.

b. **Presentation:** Updates to the Quality Improvement Project (QIP) Toolkit

   D. Liao, CQM Health Planner, gave a comprehensive overview of the Quality Improvement Project (QIP) Toolkit. The committee thanked her afterward for the thorough presentation.

Old Business

a. **Update**: Listening Tour Session #2, August 12, 2025 at 6:00 PM to 8:00 PM at the African American Research Library and Cultural Center

   PCS staff confirmed that the Listening Tour is scheduled for next Tuesday at the African American Research Library and Cultural Center, with the venue now finalized. Agencies with EHE Transportation funding can use it to help clients attend, reducing access

barriers. Since the event isn't hosted by a provider agency, clients may feel more comfortable speaking openly. B. Spaulding (Part A) shared that flyers have been sent to providers and outreach efforts are underway. The Chair thanked staff and encouraged committee members to attend, emphasizing the importance of hearing directly from. clients to support meaningful change

New Business

a. **Invite**: Mix, Mingle, & Learn: Interactive Table Talk – Thursday, August 14, 2025 from 5:30PM to 7:30PM

   PCS staff, S. Isidore, shared that T. Adeagbo, Community Linkage and Liaison Coordinator at Holy Cross, invited the HIV Planning Council to the upcoming Mix, Mingle, & Learn event. At the last session, providers cited limited awareness of available resources as a barrier to client support. This event aims to connect agencies and share service information. PCS staff extended the invitation to the System of Care Committee for any interested members.

Recipient Report

B. Spaulding, Part A representative, noted that a lot of the Recipient senior team is at the HRSA Reverse site visit in Virginia. Agencies have been preparing Quarterly reports.

Data Requests

None.

Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.

Agenda Items for Next Meeting

II. Next Meeting Date: October 2, 2025. at 9:30 a.m. Location: BRHPC and via Microsoft Teams Video Conference. Location: Broward Regional Health Planning Council

Announcements

- **Poverello Center**
  - **Women's Support Group:** Every third Monday of the month
  - **Men's Support Group:** Every third Wednesday of the month
  - **Food Pantry Inventory Notice:** Starting in September, the pantry will close four hours early on the last business day of each month to conduct inventory**.**
- **AHF**
  - All medical offices at AHF including Case Management, are open on Wednesday's until 7:00PM.

Adjournment

There being no further business, the meeting was adjourned at **10:19 AM.**

Attendance CY 2025

Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
	Meeting Date	2	C	6	3	1	5	C	7					
1	Pietrogallo, T.	X	C	X	X	X	X	C	X					
2	Castillo, J. Chair	E	C	X	X	X	X	C	X					
3	D'Amore, F.	X	C	X	A	X	X	C	X					
4	Murphy, H.A.	E	C	X	X	X	X	C	X					
5	Hayes, K., V. Chair	X	C	X	X	X	X	C	X					
6	De La Nuez, J.	X	C	A	X	X	X	C	X					
	Quorum = 4	4	C	5	5	6	6	C	6					

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

System of Care Committee Meeting Minutes – August 7, 2025

Minutes prepared by PCS Staff

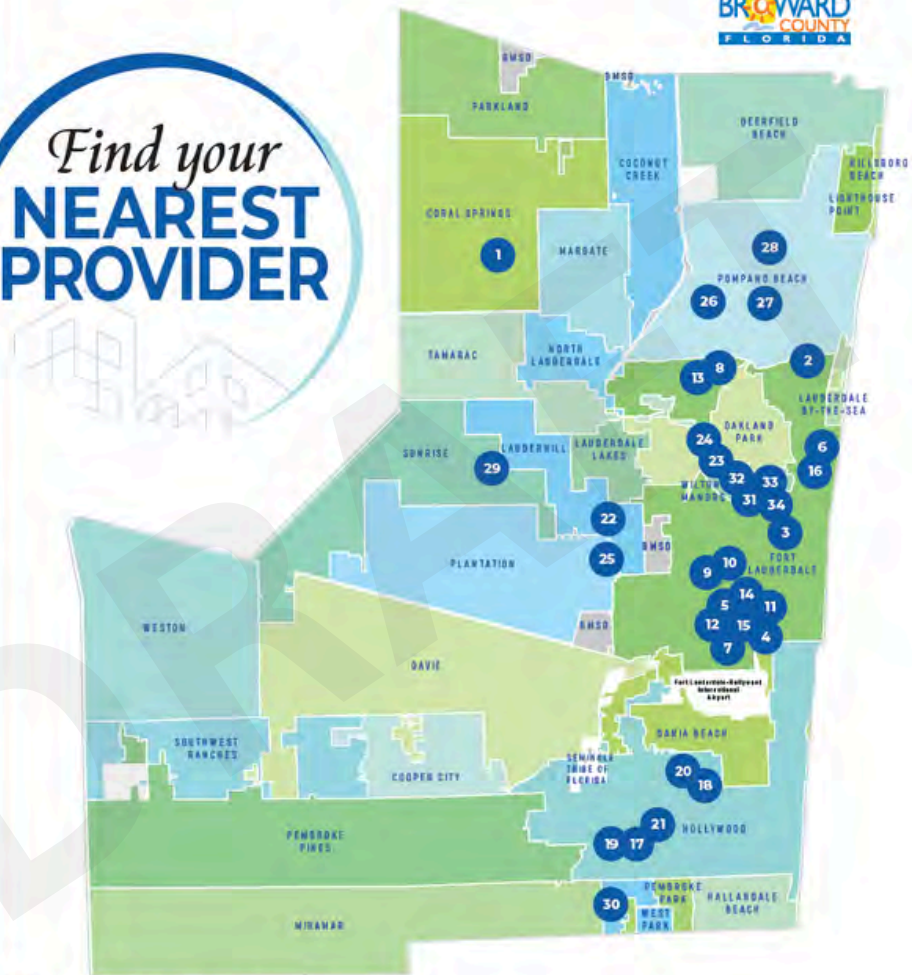
THE RYAN WHITE PART A & ENDING THE HIV EPIDEMIC CARE CONTINUUM RESOURCE GUIDE

BROWARD COUNTY
FLORIDA

Ending the HIV Epidemic
Broward | Ryan White Part A

HIV Service Providers

Find your NEAREST PROVIDER



Scan QR code to visit HIV services

(EXAMPLE)

HIV SERVICE PROVIDERS

1	**Community Rightful Center** • 954-840-3205	1801 N. University Dr., Suite 210, Coral Springs, FL 33071	MT, NMCM, MCM, FV
2	**AHF (North Point) Medical Center** • 954-727-2174	6405 N. Federal Hwy., Suite 205, Fort Lauderdale, FL 33308	OAHS, NMCM, MCM, MT, FB, FV, Rx
3	**AHF Out of the Closet (Sunrise Blvd., Fort Lauderdale)** • 954-462-9223	1785 E. Sunrise Blvd., Fort Lauderdale, FL 33304	Rx
4	**Broward House (South) ALF** • 954-568-7373	417 SE 18th Ct., Fort Lauderdale, FL 33316	SU, MH
5	**CAN Community Health** • 754-701-6920	315 SE 14th St., Fort Lauderdale, FL 33316	Rx, OAHS, MCM, EFA
6	**AHF Oakland Park Healthcare Center** • 954-566-2745	2966 E. Oakland Park Blvd., 2nd Floor, Fort Lauderdale, FL 33306	OAHS, NMCM, MCM, MT, FB, FV, Rx
7	**FL Dept. of Health** • 954-213-0623	2421 SW 6th Ave., Fort Lauderdale, FL 33315	ADAP
8	**IMG Helps** • 754-231-8270	670 NW 5th Way, Fort Lauderdale, FL 33309	MH, FV
9	**NBHD North Broward Hospital District** • 954-463-0880	1111 W. Broward Blvd., Fort Lauderdale, FL 33312	Rx, OAHS, MCM, NMCM, MT
10	**NBHD North Broward Hospital District** • 954-759-6600	200 NW 7th Ave., Fort Luaderdale, FL 33311	Rx, OAHS, MCM, NMCM, MT
11	**NBHD North Broward Hospital District** • 954-728-8080	1401 S. Federal Hwy., Fort Lauderdale, FL 33316	Rx, OAHS, MCM, NMCM, MT
12	**NBHD North Broward Hospital District** • 954-355-4400	1600 S. Andrews Ave., Fort Lauderdale, FL 33316	Rx, OAHS, MCM, NMCM, MT
13	**NSU NOVA** • 954-262-7530	1201 W. Cypress Creek Rd., Fort Lauderdale, FL 33309	Dental
14	**AHF (Downtown)** • 954-761-4534	700 SE 3rd Ave., Suite 301, Fort Lauderdale, FL 33316	OAHS, NMCM, MCM, MT, FB, FV, Rx, Dental
15	**NSU NOVA** • 954-355-4400	1600 S. Andrews Ave., 3rd Floor, Fort Lauderdale, FL 33314	Dental
16	**Mayfaire Medical** • 305-747-3156	2810 E Oakland Park Blvd., Suite 200B, Fort Lauderdale, FL 33306	OAHS
17	**BCOMM (Hollywood)** • 954-967-0028	5010 Hollywood Blvd., Hollywood, FL 33021	NMCM, MCM, OAHS, MT
18	**BRHPC Broward Regional Health Planning Council** • 954-566-1417	200 Oakwood Ln, Suite 100, Hollywood, FL 33020	CIED, HICP
19	**SBHD South Broward Hospital District Memorial** • 954-276-1616	5647 Hollywood Blvd., Hollywood, FL 33021	MCM, MT, OAHS, NMCM,
20	**SBHD South Broward Hospital District Memorial** • 954-276-3401	3400 N. 29th Ave., Hollywood, FL 33020	MCM, MT, OAHS, NMCM,
21	**AHF Hollywood Healthcare Center** • 954-745-8344	3800 Johnson St., Suite F, Hollywood, FL 33021	OAHS, NMCM, MCM, Rx
22	**BCOMM (Lauderhill)** • 954-583-4710	1295 NW 40th Ave., Suite 200, Lauderhill, FL 33313	NMCM, MCM, OAHS, MT
23	**Care Resource** • 954-567-7141	871 W. Oakland Park Blvd., Oakland Park, FL 33311	Housing, NMCM, MCM, MT, Dental, MH, OAHS
24	**Continental Community Outreach Corporation** • 954-840-3205	3400 NW 9th Ave., Suite A, Oakland Park, FL 33309	NMCM, MCM
25	**Legal Aid** • 954-765-8950	491 N. State Rd. 7, Plantation, FL 33317	Legal
26	**BCOMM (Pompano)** • 954-970-8805	168 N. Powerline Rd., Pompano Beach, FL 33069	NMCM, MCM, OAHS, Dental, MT
27	**FL Dept. of Health** • 954-213-0623	205 NW 6th Ave., Pompano Beach, FL 33060	ADAP
28	**NBHD North Broward Hospital District** • 954-786-5901	2011 NW 3rd Ave., Pompano Beach, FL 33060	Rx, OAHS, MCM, NMCM, MT
29	**Thrive Mental Health and Substance Abuse Recovery Support Services** • 954-900-2948	7800 W. Oakland Park Blvd., Bldg. E, Suite 115, Sunrise, FL 33351	MH
30	**BCOMM (West Park)** • 954-966-3939	5801 W. Hallandale Beach Blvd., West Park, FL 33023	NMCM, MCM, OAHS, MT
31	**AHF Out of the Closet (Wilton Manors)** • 954-318-6997	2097 Wilton Dr., Wilton Manors, FL 33305	Rx
32	**Broward House (North)** • 954-568-7373	2800 N. Andrews Ave., Wilton Manors, FL 33311	NMCM, MCM, PEER, Housing, MT
33	**Latinos Salud** • 954-765-6239	1401 NE 26th St., Wilton Manors, FL 33305	NMCM
34	**Poverello** • 954-561-3663	2056 N. Dixie Hwy., Wilton Manors, FL 33305	FB, FV, NMCM, MCM, OAHS

LEGEND

Dental = Dental
MT = Medical Transportation
SU = Substance Use
MH = Mental Health
Rx = Pharmacy
OAHS = Outpatient Ambulatory Health Services
NMCM = Non Medical Case Management
MCM = Medical Case Management
FB = Food Bank
FV = Food Voucher
Legal
Housing
EFA = Emergency Financial Assistance
HICP = Health Insurance Continuum Program

(EXAMPLE)

HEALTH CARE SERVICES

At Broward County, Health Care Services is funded by our United States federal government to provide these three programs.

RYAN WHITE PART A | MINORITY AIDS INITIATIVE | ENDING THE HIV EPIDEMIC

Our programs are **not** health insurance. But, it may help pay for health care when other money is not available. Our programs help people with HIV/AIDS in Broward County, Florida, get medical care and support.

RYAN WHITE PART A

The **Ryan White Part A** program funds core medical and support services to clients living with HIV/AIDS in Broward County, Florida.

SERVICES OFFERED:

CORE MEDICAL SERVICES:

1. Medical Care (Outpatient)
2. AIDS Pharmaceutical Assistance
3. Oral (Dental) Healthcare
    a. Routine and Specialty
4. Mental Health
5. Health Insurance Premium Assistance
6. Medical Nutrition Therapy
7. Substance Use (Outpatient)

SUPPORT SERVICES:

1. Non-Medical Case Management
2. Food Bank
3. Food Vouchers
4. Legal Assistance
5. Emergency Financial Assistance

RYAN WHITE PART A
MINORITY AIDS INITIATIVE (MAI)

The **Ryan White Part A MAI** program gives important medical care and help to make it easier for people with HIV/AIDS to get the care they need. It also helps to make sure that everyone has the same chance to be healthy, no matter their racial and ethnic background.

SERVICES OFFERED:

CORE MEDICAL SERVICES:

1. MAI Medical Care (Outpatient)
2. MAI Mental Health
3. MAI Substance Use (Outpatient)

SUPPORT SERVICES:

1. MAI Non-Medical Case Management

ENDING THE HIV EPIDEMIC (EHE)

The Ending the HIV Epidemic is another program that has a goal to lower the number of new HIV infections in the United States by at least 90% by the year 2030. Here are the services we offer in Broward County, Florida:

SERVICES OFFERED:

1. EHE Medical Case Management
2. EHE Medical Transportation
3. EHE Non-Medical Case Management
4. EHE Housing and Care Support Services
5. EHE Food Bank
6. EHE Food Voucher
7. EHE Peer Counseling Services
8. EHE Evaluation and Assessment
9. EHE Disease Intervention Specialists

CLIENT GRIEVANCE POLICY

A "grievance" is a problem you might have with the HIV/AIDS health care and support you get. As a client, you can make a complaint so people will listen to your concerns. You have the right to get services you qualify for, to have services that are good enough based on the program rules, and to be treated fairly by everyone.

HOW TO SUBMIT A GRIEVANCE/COMPLAINT:

1. Fill out a Grievance Form, which you can get from your Ryan White Part A service provider.

VERY IMPORTANT: First, you need to make a complaint to the Ryan White Part A service provider you're having a problem with. Then, the service provider needs a chance to solve the problem before it goes to the Ryan White Part A Broward County Office.

2. Client grievances that have not been solved at the provider level will be sent to the Broward County Office by the Ryan White Part A service provider within 7 business days after both groups state that no resolution has been made.

3. The Ryan White Part A Broward County Office staff will inspect the grievance.

4. Lastly, you will get a written letter about the final choice about the grievance and the reason behind the result from the Broward County Office.

For more information, please contact:

Broward County Government

115 South Andrews Avenue, Fort Lauderdale, FL, 33301

954-357-5390

CIED - CENTRALIZED INTAKE

Centralized Intake & Eligibility Determination, or CIED, is a service that checks if people qualify for the Ryan White Part A program. CIED also renews the eligibility of current clients, finds other payment options, and points clients to important resources.

BROWARD REGIONAL HEALTH PLANNING COUNCIL (BRHPC)

Hollywood, FL - CIED Main Office Location 954-566-1417
Fax Number 954-564-1185

CIED OUTPOST LOCATIONS:

AIDS HEALTHCARE FOUNDATION (AHF)

Northpoint Healthcare Center 954-772-2411
Oakland Park, Healthcare Center 954-561-6900
Fort Lauderdale, Downtown Wellness Center 954-767-0887

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

Pompano Beach Medical Center 954-970-8805

BROWARD HOUSE

Wilton Manors & Fort Lauderdale, FL 954-568-7373

BROWARD HEALTH

Fort Lauderdale, Comprehensive Care Center 954-467-0880

CARE RESOURCE COMMUNITY HEALTH CENTER

Fort Lauderdale/Oakland Park, FL 954-567-7141

MEMORIAL HEALTHCARE SYSTEM

Hollywood, FL 954-276-1616

THE POVERELLO CENTER

Wilton Manors, FL 954-561-3663

BROWARD COUNTY, FL DEPARTMENT OF HEALTH

Fort Lauderdale, FL 954-467-4700

HEALTH INSURANCE CONTINUATION PROGRAM (HICP)

The Health Insurance Continuation Program helps people with HIV pay for their health insurance. This program can help pay for things like copays, deductibles, and coinsurance.

HICP ELIGIBILITY REQUIREMENTS:

Clients must:

1. Be enrolled in an Affordable Care Act (ACA) Marketplace plan that has been approved by the Florida Department of Health (FDOH)
2. Hold active eligibility with the AIDS Drug Assistance Program (ADAP) ***and*** receive premium assistance
3. Hold active eligibility with the Ryan White Part A program

CONTACT HICP FOR MORE INFORMATION:

AIDS DRUG ASSISTANCE PROGRAM (ADAP)

Ryan White Part B/ADAP verifications or certifications

Phone Number 954-467-4700

CENTRALIZED INTAKE AND ELIGIBILITY DETERMINATION (CIED)

Ryan White Part A eligibility certification or benefit updates

Phone Number 954-566-1417

HEALTH INSURANCE CONTINUATION PROGRAM (HICP)

Enrollment into Health Insurance or ADAP Premium Assistance

Phone Number 1-844-441-4422

Fax Number 954-563-3502

Email ..... HICPSUBMIT@BRHPC.ORG

MEDICAL CARE (OUTPATIENT)

Integrated Primary Care and Behaviorall Health Services (IPCBH) offers medical care and mental health support in their clinics. They help people who might need to learn about health, get medical treatment, take tests, receive counseling, and other health services.

RYAN WHITE PART A INTEGRATED PRIMARY CARE & BEHAVIORAL HEALTH SERVICES

AIDS HEALTHCARE FOUNDATION (AHF)

Fort Lauderdale, Downtown Wellness Center	954-767-0887
Oakland Park, Healthcare Center	954-561-6900
Northpoint Healthcare Center	954-772-2411

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

Pompano Beach Medical Center	954-970-8805
Lauderdale Medical Center	954-583-4710
Hollywood Medical Center	954-967-0028
West Park Medical Center	954-966-3939

BROWARD HEALTH

Fort Lauderdale, Comprehensive Center	954-467-0880
Fort Lauderdale, Children's Diagnostic & Treatment Center	954-527-6042
Pompano Beach, Annie L. Weaver Health Center	954-786-5903
Fort Lauderdale, Specialty Care Center	954-463-7373
Fort Lauderdale, Comprehensive Care Center	954-522-5903

CAN COMMUNITY HEALTH

Fort Lauderdale, SE 14 St & E Commercial Blvd, FL	754-701-6920

CARE RESOURCE COMMUNITY HEALTH CENTER

Fort Lauderdale/Oakland Park, FL	954-567-7141

MEMORIAL HEALTHCARE SYSTEM

Hollywood, FL	954-276-1616

MAYFAIRE MEDICAL

Fort Lauderdale, FL	305-747-3156

MAI INTEGRATED PRIMARY CARE & BEHAVIORAL HEALTH SERVICES

THE POVERELLO CENTER

Wilton Manors Location	954-561-3663

NON-MEDICAL CASE MANAGEMENT

These are activities that focus on the patient and aim to make it easier for them to get important medical care and support.

RYAN WHITE PART A NON-MEDICAL CASE MANAGEMENT

AIDS HEALTHCARE FOUNDATION (AHF)

Fort Lauderdale, FL 954-767-0887
Oakland Park, Healthcare Center 954-561-6900
Northpoint Healthcare Center 954-772-2411

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

Pompano Beach Medical Center 954-970-8805
Lauderdale Medical Center 954-583-4710
Hollywood, FL 954-967-0028
West Park Medical Center 954-966-3939

BROWARD HEALTH

Fort Lauderdale, Comprehensive Care Center 954-467-0880
Fort Lauderdale, Specialty Care Center 954-463-7373
Pompano Beach, Annie L. Weaver Health Center 954-786-5903

BROWARD HOUSE

Wilton Manors & Fort Lauderdale, FL 954-568-7373

CARE RESOURCE COMMUNITY HEALTH CENTER

Fort Lauderdale/Oakland Park, FL 954-567-7141

COMMUNITY RIGHTFUL CENTER

Coral Springs, FL 954-840-3205

CONTINENTAL COMMUNITY OUTREACH

Oakland Park, FL 954-462-4599

LATINOS SALUD

Wilton Manors, FL 954-765-6239

THE POVERELLO CENTER

Wilton Manors, FL 954-561-3663

MEMORIAL HEALTHCARE SYSTEM

Hollywood, FL 954-276-1616

NON-MEDICAL CASE MANAGEMENT

These are activities that focus on the patient and aim to make it easier for them to get important medical care and support.

EHE NON-MEDICAL CASE MANAGEMENT

AIDS HEALTHCARE FOUNDATION (AHF)
Fort Lauderdale, FL 954-767-0887

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)
Pompano Beach Medical Center 954-970-8805

BROWARD HEALTH
Fort Lauderdale, Comprehensive Care Center 954-467-0880

BROWARD HOUSE
Wilton Manors & Fort Lauderdale, FL 954-568-7373

COMMUNITY RIGHTFUL CENTER
Coral Springs, FL 954-840-3205

CONTINENTAL COMMUNITY OUTREACH
Oakland Park, FL 954-462-4599

MAI PART A NON-MEDICAL CASE MANAGEMENT

BROWARD HOUSE
Wilton Manors & Fort Lauderdale, FL 954-568-7373

CARE RESOURCE COMMUNITY HEALTH CENTER
Fort Lauderdale/Oakland Park, FL 954-567-7141

COMMUNITY RIGHTFUL CENTER
Coral Springs, FL 954-840-3205

CONTINENTAL COMMUNITY OUTREACH
Oakland Park, FL 954-462-4599

MEDICAL CASE MANAGEMENT

These activities focus on the patient and aim to improve and take care of their health as they go through HIV treatment.

RYAN WHITE PART A MEDICAL CASE MANAGEMENT

AIDS HEALTHCARE FOUNDATION (AHF)

Fort Lauderdale, Downtown Wellness Center 954-767-0887
Oakland Park, Healthcare Center 954-561-6900
Northpoint Healthcare Center 954-772-2411

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

Pompano Beach Medical Center 954-970-8805
Lauderdale Medical Center 954-583-4710
Hollywood, FL 954-967-0028
West Park Medical Center 954-966-3939

BROWARD HEALTH

Fort Lauderdale, Comprehensive Care Center 954-467-0880

BROWARD HOUSE

Wilton Manors & Fort Lauderdale, FL 954-568-7373

CAN COMMUNITY HEALTH

Fort Lauderdale, E Commercial Blvd, FL 754-701-6920
Fort Lauderdale, SE 14 St, FL 754-701-6920

CARE RESOURCE COMMUNITY HEALTH CENTER

Fort Lauderdale/Oakland Park, FL 954-567-7141

COMMUNITY RIGHTFUL CENTER

Coral Springs, FL 954-840-3205

THE POVERELLO CENTER

Wilton Manors, FL 954-561-3663

MEMORIAL HEALTHCARE SYSTEM

Hollywood, FL 954-276-1616

MEDICAL CASE MANAGEMENT

These activities focus on the patient and aim to improve and take care of their health as they go through HIV treatment.

EHE MEDICAL CASE MANAGEMENT

AIDS HEALTHCARE FOUNDATION (AHF)

Fort Lauderdale, Downtown Wellness Center 954-767-0887

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

Pompano Beach Medical Center 954-970-8805

BROWARD HEALTH

Fort Lauderdale, Comprehensive Care Center 954-467-0880

BROWARD HOUSE

Wilton Manors & Fort Lauderdale, FL 954-568-7373

CARE RESOURCE COMMUNITY HEALTH CENTER

Fort Lauderdale/Oakland Park, FL 954-567-7141

COMMUNITY RIGHTFUL CENTER

Coral Springs, FL 954-840-3205

THE POVERELLO CENTER

Wilton Manors, FL 954-561-3663

MEMORIAL HEALTHCARE SYSTEM

Hollywood, FL 954-276-1616

PRESCRIPTION SERVICES

Helps people with HIV/AIDS who are part of the Ryan White Part A program get the medication they need when the AIDS Drug Assistance Program (ADAP) has rules that limit which medication are available, has a waiting list, or has rules about who can get help based on their income.

PHARMACY (AIDS PHARMACEUTICAL ASSISTANCE) PROVIDERS

AIDS HEALTHCARE FOUNDATION (AHF)

Fort Lauderdale, Downtown Wellness Center	954-767-0887
Oakland Park, Healthcare Center	954-561-6900
Northpoint Healthcare Center	954-772-2411
Sunrise Pharmacy Center	954-462-9223

BROWARD HEALTH

Fort Lauderdale, Bernard P. Alicki Health Pharmacy	954-527-6042
Fort Lauderdale, Broward Health Medical Center	954-522-3355
Fort Lauderdale, Cora E. Braynon Family Health Center	954-759-6600
Fort Lauderdale, Specialty Care Center	954-463-7373

CAN COMMUNITY HEALTH

Fort Lauderdale, SE 14 Street, FL	754-701-6920
Fort Lauderdale, E Commercial Blvd, FL	754-701-6920

AIDS DRUG ASSISTANCE PROGRAM (ADAP)

FLORIDA DEPARTMENT OF HEALTH

Fort Lauderdale, FL	954-213-0638
Pompano Beach, Paul Hughes Health Center	954-213-0638

MENTAL HEALTH

Offers medical, treatment, and/or counseling services to people who do not need to stay in a hospital. These services help people with their behavioral health needs.

RYAN WHITE PART A TRAUMA-INFORMED MENTAL HEALTH CARE

BROWARD HOUSE
Wilton Manors & For Lauderdale, FL 954-568-7373

CARE RESOURCE COMMUNITY HEALTH CENTER
Fort Lauderdale/Oakland Park, FL 954-567-7141

IMG HELPS
Fort Lauderdale, FL 754-231-8270

THRIVE MENTAL HEALTH
Sunrise, FL 954-900-2948

MAI TRAUMA-INFORMED MENTAL HEALTH CARE

BROWARD HOUSE
Wilton Manors & For Lauderdale, FL 954-568-7373

SUBSTANCE USE (OUTPATIENT) CARE

Provides outpatient services that are medical, treatment, and/or counseling services for clients to address substance use disorders.

RYAN WHITE PART A & MAI SUBSTANCE USE OUTPATIENT CARE

BROWARD HOUSE
Wilton Manors & For Lauderdale, FL 954-568-7373

LEGAL ASSISTANCE

Offers legal help to people who qualify for things like:

- Planning ahead for the future.
- Taking action to get eligible benefits.
- Stopping unfair housing denials or evictions because of HIV-related discrimination or someone sharing their HIV status when they shouldn't have.

LEGAL AID SERVICE OF BROWARD COUNTY

Plantation, FL 954-765-8950

EMERGENCY FINANCIAL ASSISTANCE

Provides limited or one-time payment help for clients who need essential items or services to improve their health.

AIDS HEALTHCARE FOUNDATION (AHF)

Fort Lauderdale/Oakland Park & Northpoint Healthcare Centers 954-767-0887

BROWARD HEALTH

Fort Lauderdale & Pompano Locations 954-522-5903

CAN COMMUNITY HEALTH

Fort Lauderdale, SE 14 St & E Commercial Blvd FL 754-701-6920

FOOD ASSISTANCE

Food assistance offers food items, hot meals, or a voucher program to purchase food.

RYAN WHITE PART A FOOD BANK & VOUCHERS

AIDS HEALTHCARE FOUNDATION (AHF)
Fort Lauderdale, Wellness Center 954-767-0887
(Part A Food Bank)

COMMUNITY RIGHTFUL CENTER
Coral Springs, FL 954-840-3205
(Part A Food Vouchers)

IMG HELPS
Fort Lauderdale, FL 754-231-8270
(Part A Food Vouchers)

THE POVERELLO CENTER
Wilton Manors Location 954-561-3663
(Part A Food Bank & Part A Food Vouchers)

EHE FOOD BANK & VOUCHERS

AIDS HEALTHCARE FOUNDATION (AHF)
Fort Lauderdale, Wellness Center 954-767-0887
(EHE Food Vouchers)

COMMUNITY RIGHTFUL CENTER
Coral Springs, FL 954-840-3205
(EHE Food Vouchers)

IMG HELPS
Fort Lauderdale, FL 754-231-8270
(EHE Food Vouchers)

THE POVERELLO CENTER
Wilton Manors Location 954-561-3663
(EHE Food Bank & EHE Food Voucher)

MEDICAL NUTRITION THERAPY

Provides medically custom-made food items and meals approved by a licensed registered dietitian to help clients have a balanced, nutritionally suitable diet to improve their health.

THE POVERELLO CENTER
Wilton Manors, FL 954-561-3663

ORAL HEALTH CARE

Oral Health care activities to take care of your mouth including checkups, preventing problems, and treatments.

ROUTINE ORAL HEALTH (DENTAL) CARE SERVICES

AIDS HEALTHCARE FOUNDATION (AHF)
Fort Lauderdale, Wellness-Dental Center 954-767-0887

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)
Pompano Beach Medical Center 954-970-8805

CARE RESOURCE COMMUNITY HEALTH CENTER
Fort Lauderdale/Oakland Park, FL 954-567-7141

NOVA SOUTHEASTERN UNIVERSITY
Davie, FL 954-568-7709

SPECIALTY ORAL HEALTH (DENTAL) CARE SERVICES

NOVA SOUTHEASTERN UNIVERSITY
Cypress Creek, FL 954-262-7530

EHE PEER COUNSELING SERVICES

Peer services are different activities and advice led by people with experiences. Our peers try to get more clients involved in our programs and keep them coming back for help.

Important: Any provider with Non-Medical Case Management can offer peer counseling with our Ryan White Part A and MAI programs.

BROWARD HOUSE
Wilton Manors, FL 954-568-7373

EHE HOUSING & CARE SUPPORT SERVICES

Provides transitional, short-term, or emergency housing assistance to help a client to gain or maintain stable housing. This helps our clients focus on their health and remain in care.

BROWARD HOUSE
Wilton Manors, FL 954-568-7373

CARE RESOURCE COMMUNITY HEALTH CENTER
Fort Lauderdale/Oakland Park, FL 954-561-7141

EHE MEDICAL TRANSPORTATION

Provision of non-emergency transportation to enable clients to access or be retained in core and support services.

AIDS HEALTHCARE FOUNDATION (AHF)
Fort Lauderdale/Oakland Park & Northpoint Healthcare Centers 954-767-0887

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)
Pompano, Lauderhill, Hollywood, & West Park Locations 954-970-8805

BROWARD HEALTH
Fort Lauderdale & Pompano Locations 954-522-5903

BROWARD HOUSE
Wilton Manors, FL 954-568-7373

CARE RESOURCE COMMUNITY HEALTH CENTER
Fort Lauderdale/Oakland Park 954-567-7141

COMMUNITY RIGHTFUL CENTER
Coral Springs, FL 954-840-3205

MEMORIAL HEALTHCARE SYSTEM
Hollywood, FL 954-276-1616

HOURS OF OPERATIONS

AIDS HEALTHCARE FOUNDATION (AHF)

WELLNESS CENTER: 750 SE 3RD AVE, 1ST FLOOR, FORT LAUDERDALE, FL, 33316 954-970-8805
MON, TUES, THUR, FRI: 10 AM - 6:30 PM
WED: 8 AM - 7 PM
SAT & SUN: CLOSED

FORT LAUDERDALE HEALTHCARE CENTER: 700 SE 3RD AVE, STE 301, FORT LAUDERDALE, FL, 33316 954-767-0887
MON - FRI: 10 AM - 6:30 PM
SAT & SUN: CLOSED

NORTHPOINT HEALTHCARE CENTER: 6333 NORTH FEDERAL HWY, STE 302, FORT LAUDERDALE, FL, 33308 954-772-2411
MON, TUES, THUR, FRI: 8 AM - 5 PM
WED: 11 AM - 7 PM
SAT & SUN: CLOSED

OAKLAND PARK HEALTHCARE CENTER: 2866 E OAKLAND PARK BLVD, FL 2, OAKLAND PARK, FL, 33306 954-561-6900
MON, TUES, THUR, FRI: 8 AM - 5 PM
WED: 8 AM - 6:30 PM
SAT & SUN: CLOSED

WILTON MANORS HEALTHCARE CENTER: 2097 WILTON DRIVE, WILTON MANORS, FL, 33305 877-259-8727
WED & FRI: 10 AM - 6 PM
SATURDAY: 10 AM - 5 PM
MON, TUE, THUR, SUN: CLOSED

PRIDE CENTER WELLNESS CENTER: 2038 DIXIE HIGHWAY WILTON MANORS, FL, 33305 877-259-8727
TUE & THURS: 12 PM - 7PM
MON, WED, FRI-SUN: CLOSED

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

POMPANO MEDICAL CENTER: 168 N. POWERLINE RD, POMPANO BEACH, FL, 33069 954-970-8805
MON, WED, THUR, FRI: 8:30 AM - 5 PM
TUES: 10 AM - 7 PM
SAT & SUN: CLOSED

POMPANO DENTAL CENTER: 162 N. POWERLINE RD, POMPANO BEACH, FL, 33069 954-970-7067
MON, WED, THUR, FRI: 8:30 AM - 5 PM
TUES: 10 AM - 7 PM
SAT & SUN: CLOSED

(EXAMPLE)

HOURS OF OPERATIONS

BROWARD COMMUNITY & HEALTH CENTERS (BCOM)

LAUDERHILL CENTER: 1295 NW 40TH AVE STE 200, LAUDERHILL, FL, 33313 954-583-4710
MON, WED, THUR, FRI: 8:30 AM - 5 PM
TUES: 10 AM - 7 PM
SAT & SUN: CLOSED

HOLLYWOOD CENTER: 5010 HOLLYWOOD BLVD, HOLLYWOOD, FL, 33021 954-583-4710
MON, WED, THUR, FRI: 8:30 AM - 5 PM
TUES: 10 AM - 7 PM
SAT & SUN: CLOSED

WEST PARK CENTER: 5801 WEST HALLENDALE BEACH BLVD, WEST PARK, FL, 33023 954-966-3939
MON, WED, THUR, FRI: 8:30 AM - 5 PM
TUES: 10 AM - 7 PM
SAT & SUN: CLOSED

(EXAMPLE)

HANDOUT C

Ryan White Part A Provider Orientation and Freedom of Choice Provider List

I, _____, have received an orientation to my choices of Part A providers for services for which I am eligible. I have received a list of Part A providers, which includes information regarding the Part A services that they provide. I have been informed that I am free to select whichever provider I prefer. I have also been informed that I am free to decline any services, unless court ordered, and can revoke this consent at any time.

Medical Care
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Broward Community & Family Health Center
- ☐ Broward Health
- ☐ CAN Community
- ☐ Care Resource
- ☐ Mayfaire Medical
- ☐ Memorial Healthcare System
- ☐ The Poverello Center

Case Management
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Broward Community & Family Health Center
- ☐ Broward Health
- ☐ Broward House
- ☐ Care Resource
- ☐ Community Rightful Center
- ☐ Continental Community Outreach
- ☐ Latinos Salud
- ☐ Memorial Healthcare System
- ☐ The Poverello Center

Food Bank/Voucher
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Community Rightful Center
- ☐ IMG Helps
- ☐ The Poverello Center

Health Insurance Continuation Program
☐ Declined ☐ Ineligible
- ☐ Broward Regional Health Planning Council

Legal Assistance
☐ Declined ☐ Ineligible
- ☐ Legal Aid

Substance Use
☐ Declined ☐ Ineligible
- ☐ Broward House

Medical Case Management
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Broward Community & Family Health Center
- ☐ Broward Health
- ☐ Broward House
- ☐ CAN Community Health
- ☐ Care Resource
- ☐ Community Rightful Center
- ☐ Memorial Healthcare System
- ☐ The Poverello Center

Mental Health
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Broward Community and Family Health Center
- ☐ Broward House
- ☐ CAN Community Health
- ☐ Care Resource
- ☐ IMG Helps
- ☐ North Broward Hospital District
- ☐ The Poverello Center
- ☐ Thrive and Success Community Outreach
- ☐ Memorial Healthcare System

Oral Health
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Broward Community & Family Health Center
- ☐ Care Resource
- ☐ Nova Southeastern University

Medical Nutritional Therapy*
☐ Declined ☐ Ineligible
- ☐ The Poverello Center

*Requires Medical referral

Pharmaceutical Assistance
☐ Declined ☐ Ineligible
- ☐ AIDS Healthcare Foundation
- ☐ Broward Health
- ☐ CAN Community Health

Client Signature: _____	Date: _____

Summary of Coordination Call 09.29.2025: Centralized Intake and Eligibility Determination (CIED) Program

The purpose of this meeting was to follow up on the Chair's request to add a review of the following documents to the October SOC agenda; *The Broward County Ryan White HIV/AIDS Treatment Modernization Act of 2006 Part A Funded Case Management System* and *Recommendations and Roadmap for Improving the Broward County Title I (Part A) Case Management System.*

The HIV Support staff provided a comparison of expenditures for case management services across all EMAs/TGAs using the HRSA FY2023-2024 expenditure report. To assess the extent to whether costs were reduced by implementing the standalone eligibility model. The following table compares the combined cost of medical case management and nonmedical case management across EMAs/TGAs in Florida as well as a selection of EMAs/TGAs across the country.

Broward's expenditures as a percentage of total Part A/MAI award for case management (MCM,NMCM, and CIED combined) were the lowest in the state at 23% and among the lowest nationally.

To conduct a full analysis, the data for all EMAs/TGAs is available by clicking here.

Florida EMAs	Percentage of Award	Other EMAs	Percentage of Award
Broward	23%	Los Angelos, CA	27%
West Palm Beach	25%	Philadelphia, PA	34%
Miami-Dade	27%	Phoenix, AZ	35%
Tampa	31%	Jersey City, NJ	39%
Jacksonville	35%	Norfolk, VA	40%
Orlando	36%	Portland, OR	41%
-	-	Sacramento, CA	46%

Source: HRSA Ryan White Part A Expenditure Report FY2023-2024

Note: For FY2023–2024 reporting, HRSA standardized its measure, requiring EMAs nationwide to conduct eligibility only once per year.

RECOMMENDATIONS AND ROADMAP FOR IMPROVING THE BROWARD COUNTY TITLE I (PART A) CASE MANAGEMENT SYSTEM

Julia Hidalgo, ScD, MSW, MPH
Positive Outcomes, Inc.

Positive Outcomes INC.

1

The Case Management Roadmap

- Developed in close collaboration with
  - Case management (CM) clients through focus groups
  - Front line CMs and supervisors through focus groups and CM Network meetings
  - BCHSD Title I (Part A) staff
- In consultation with HRSA HIV/AIDS Bureau (HAB) staff
- Based on
  - Analysis of Broward County Part A invoice data
  - Consultation with Part A and Part B grantees throughout the US to identify CM "best practices"

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2

Factors Considered In Developing the Recommendations in the Roadmap

- Provide positive benefits to HIV+ Broward County residents, including supporting their efforts to navigate the HIV care system and maintain independence
- Optimize the positive aspect of the existing CM system
- Address the findings of CM system assessments completed in the past four years
- Address the existing CM workforce's training and experience level
- Strive for administrative simplicity and budget neutrality
- Adhere to the HAB's payer of last resort policies and avoid audit exceptions
- Consistency with the reauthorized Ryan White HIV/AIDS Treatment Modernization Act of 2006 and planned changes in FL Medicaid coverage of CM services

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3

Define the Case Management Service Model

- Intake CM would serve as the single point of entry into HIV care for new clients
  - A stand-alone component of the service model to be undertaken by a new unit of experienced HIV CMs
  - Borrow from the best practices of several EMAs, including Philadelphia
- Ongoing CMs would
  - Assess new and active clients' level of care (LOC) or "acuity"
  - Do care planning
  - Provide ongoing information and referral (Tier 1) for eligible individuals that need minimal services, or moderate CM (Tier 2) and intensive CM (Tier 3)
  - Refer clients to Part A or other services and coordinate those services per the care plan

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4

Expanding the Case Management Team

- **Intake CMs** to provide a single point of entry into the Part A-funded HIV system
- **Ongoing CMs** to provide care planning and ongoing information, referral, and moderate or intensive CM
- **Peer or "near peer" outreach workers** to assist in appointment adherence and case finding

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5

The Role of Intake Case Managers

- Be employed and supervised by a single agency to conduct rapid centralized intake and ED for individuals entering the Part A system
- Conduct centralized intake or be out-posted at high volume service sites for face-to-face intake
- Assess eligibility for Part A-funded services
  - Provide information and referral to individuals that are ineligible for Part A services *or* eligible individuals that need minimal services and DO NOT want a CM
- Screen for Part A eligibility, as well as for eligibility for entitlement and discretionary programs
- Refer eligible individuals to Part A-funded CM agencies
- Assist clients to prepare applications for entitlement and other discretionary programs
  - NOTE: Clients should not be required to have applications prepared if they are assessed as being ineligible (e.g., undocumented residents)

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6

Intake Case Management Processes

- Intake CMs would use automated systems to assess current enrollment in entitlement programs or commercial insurance and confirm income
  - This process is similar to that used by the hospital districts in Broward County to determine eligibility for district services
- Intake CMs would enter Title I eligibility data into a highly secure web-based eligibility verification system, similar to that used by the Medicaid Program, to be designed by Broward County for human services programs
  - Title I-funded agencies would be required to query that system before a Title I-funded service is provided
- Eligibility re-determination would occur annually, with updates to the verification system
- Before initiating the intake CM unit, active clients should be notified that their ongoing eligibility for Title I funds would be verified

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7

Intake Processes

- Individuals determined eligible for Part A services AND that request CM would be asked if their preference for the geographic location or organizational type (e.g., clinic, CBO, minority provider, etc.)
  - Referrals should assigned based on the preference of the individual or randomly assigned if no preference expressed
  - CM agencies should not be assigned new clients in periods in which they have reached maximum caseload capacity
- Intake CMs would follow-up by telephone or other mechanism agreed to by the client within a defined period to determine if the client completed the CM referral, identify any barriers to referral, and assess the client's satisfaction with the services received

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8

Intake Case Managers

- Ideally trained CMs experienced in serving HIV+ clients in Broward County
- ED workers should be able to provide services in English, Spanish, and Creole
- To avoid conflict of interest, ED workers should not provide ongoing CM services

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9

Ongoing Case Managers

- Adopt chronic care model in their practice
- Refocus CM to assist HIV+ individuals to achieve independence and enhance their ability to navigate independently the HIV care system
- Implement a tiered CM system through the intake form and the LOC tool to be administered by the assigned CM agency
- Experienced, trained CMs would conduct an initial CM assessment to assign a LOC, with less experienced and trained CMs assigned to clients with a lower LOC
  - The LOC and intake forms should be streamlined to gather those items most directly predictive of the need for CM services
  - Assess the medical and psychosocial support needs of clients

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10

Key Elements to Success of CMs in Implementing the Chronic Care Model

- Integration of CMs in clinical care planning
- Willingness of clinicians to include CMs as part of the clinical team
  - Case conferences and integration of medical and CM charts
  - Working as a team to address patient needs
- Continued training and other resources that help clients achieve independence
- CM training that helps them to become knowledgeable about HIV disease and treatment

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11

Capping CM Services Based on Level of Care

- Broward County Part A data are not available documenting the relationship between LOC and the number of CM contacts (including telephone and face-to-face) completed per year
- Based on the Oregon Part B Program, it is recommended that ongoing information and referral clients receive no more than six contacts per year
  - Such contact would focus on providing the client with contact information for a specific service
  - Moderate CM clients should not require contact more than 12 times per year
  - Intensive CM clients should not require more than 24 contacts per year
- Additional data regarding the actual patterns of service by LOC should be gathered to determine the prior experience in Broward County before full implementation of capped services

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12

Case Management Model

- The LOC assigned should be considered short term
  - The aim of the care plan's implementation is to strive towards improved independence by the end of each 12-month period of CM
  - Clients receiving intensive CM would have a 12-month period in which to move to moderate CM
  - Moderate CM clients would have a 12-month period to move to ongoing information and referral
- Significant factors impeding the client from moving to a lower LOC should be documented in the client's progress notes
- The care plan should be updated to identify steps to be taken to transition the client to a lower LOC
- The time frame in which the plan will be implemented must be specified in the care plan

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Case Management Model

- Assign CM clients based on CM's expertise in working with complex clients, linguistic capability, and other qualifications
  - Example: addicted clients would optimally be served by credentialed addictions counselors
- The new County information system would be able to electronically transmit the automated referral form to reduce paperwork burden

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Two Uncertainties Remain

- Reauthorization requires a new "medical CM" service category which has not been defined
  - Align the CM model to address the requirements of the reauthorized Modernization Act
- AHCA Medicaid reform contract language for HIV/AIDS specialty managed care organizations
  - Ensure that payer of last requirements are addressed in the provision of CM to Medicaid beneficiaries

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15

Expand the Case Management Team

- To streamline CM functions and support appointment adherence, peers or "near peers" would be employed to provide appointment reminder services, other adherence counseling services, and "case finding" for clients have engaged in care in the previous six months
- It is unclear, however, if peers or near peers would be considered part of a core medical CM or support CM service

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Increase CM Oversight and Monitoring

- CM standards should be reviewed and modified to address the new CM model
- BCHSD staff should expand oversight
  - Add LOC to monthly CM invoices submitted to BCHSD
  - In the first year of implementation, quarterly chart review by BCHSD to ensure accurate chart documentation, LOC assignment, and care planning
  - Application of quality management techniques to improve CM processes
    - Centralized quarterly standardized chart review, discontinuing peer review
    - Benchmark quality reports
    - PDSA (Plan-Do-Study-Act)
    - Corrective Action Plan

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Case Management Workforce Issues

- A long-term training implementation strategy is needed to address the training needs of CMs
  - Continue current basic CM skills training
  - Additional basic CM training should address chart documentation
  - Moderate and advanced training might be arranged via one of the region's accredited social work schools
  - A distance-learning approach would be adopted to reduce the amount of travel time
- HIV medical CM training might be arranged with the AETC or other experienced agency, using a distance learning model
- Credentialing CMs completing a course of training in the CM skills and HIV medical CM might be explored to provide advancement opportunities

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Case Management Workforce Issues

- Earlier CM studies reported high caseloads have impaired quality and contributed to low morale and turnover
- Analysis of six recent months of CM invoices found an average caseload of 46 clients, with caseloads ranging from 20 to 104 clients
- All but one CM agencies had an average caseload of 63 clients or less
  - This average caseload is within the caseloads of most of the Part A and Part B grantees interviewed by POI
- No recommendation is made by POI regarding capping or reducing caseloads due to the results of the analysis

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CM Resource Management

- Shift to a grant-based budget that reflects actual cost of CM services, including supervision and training
  - Retain unit-based invoicing, including LOC, to assess productivity and types of CM services provided
- If the unit payment system is retained conduct a unit based payment cost analysis to ensure that the payment rate approximates costs
- An income cap income should be set at a level that is consistent with Title II (300% FPL)

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CM Resource Management

- Current, ongoing CM clients should be re-determined for Part A eligibility
  - If not, they will be referred to other programs as required
  - Their case should be closed or de-activated
- CMs should systematically review active cases to determine if cases should be closed or deactivated
  - Criteria might include if the client: no longer eligible for Part A services, relocates outside Broward County, stops contact with their assigned ongoing CM, is unable to be reached by telephone or by mail within a six months, declines CM, or is deceased
- CM policies should be set to establish protocols for referral of clients due to the closure of a CM agency, a notification requirement for CM agencies when they have reached their maximum caseload levels, and a wait list for client triage and priority setting

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HANDOUT D3

THE BROWARD COUNTY RYAN WHITE HIV/AIDS TREATMENT MODERNIZATION ACT OF 2006 PART A-FUNDED CASE MANAGEMENT SYSTEM:

A ROAD MAP FOR CHANGE

PREPARED FOR
BROWARD COUNTY
HUMAN SERVICES DEPARTMENT
SUBSTANCE ABUSE AND HEALTH CARE SERVICES
HIV/AIDS SECTION

MARCH 2007

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I. INTRODUCTION

Broward County Human Services Department (BCHSD) contracted with Positive Outcomes, Inc. (POI) to provide technical assistance (TA) to develop recommendations and a work plan outlining steps for reengineering the HIV case management funded by BCHSD with funds from Part A of the Ryan White HIV/AIDS Treatment Modernization Act of 2006. This project built on an earlier TA contract funded by the HIV/AIDS Bureau (HAB) of the Health Resources and Services Administration (HRSA) that supported a process for gathering input from stakeholders.

These activities stem from the findings of several assessments of the Broward County HIV case management system, as well as a system-wide assessment of the HIV delivery and financing system. These assessments concluded that:

- The current HIV case management system no longer meets the requirements of HIV infected indigent Broward County residents.
- While the number of HIV infected Broward County residents has increased sharply, federal and other funds have not kept pace with client demand for HIV clinical and other services. BCHSD received decreased Ryan White CARE Act Title I funds in Fiscal Years (FY) 2004 and 2005, with only a slight increase in FY 2006 funds. With insufficient funds to support the HIV delivery system at its earlier levels and increased service demand, BCHSD worked closely with the Broward County HIV Planning Council to refocus much of its funding to core clinical services. To the extent available, evidence regarding the effectiveness of service categories was used to ensure that Title I were distributed as parsimoniously as possible.
- HAB has directed Part A and other grantees funded by the Ryan White HIV/AIDS Treatment Modernization Act to integrate clinical and case management services to ensure that clients are able to access HIV medical care and adhere to clinical regimens. Case management has shifted in HAB's focus from community-based supportive services to supporting core clinical services. The Ryan White HIV/AIDS Treatment Modernization Act of 2006 has established a new service category, medical case management, which HAB has yet to define. There is highly variable integration of clinical and case management services in Broward County. While some case managers are located in HIV clinics in Broward Clinics, the level of their integration in multidisciplinary care teams is relatively low.
- Case managers are trained inadequately to screen new or ongoing clients for eligibility for Ryan White HIV/AIDS Treatment Modernization Act-funded services, third party insurance, income maintenance programs, or community-based services funded by other sectors. As a result, case managers are conducting highly variable eligibility determination. Multiple points of entry into the HIV delivery systems results in duplicated efforts by HIV programs to assess eligibility for Part A or other funded services, with gaps in services resulting in some clients not receiving services for which they would benefit.
- No system-wide automated client-level case management system is available to assist case managers to conduct eligibility determination. While a client-level system has been instituted, several case management programs in large organizations had not adopted the systems.
- Case managers did not differentiate effectively their clients' acuity levels, thus providing a similar level of case management regarding of the ability of the clients to navigate the HIV delivery system. Acuity level data have not been accompanied Part A invoices to BCHSD,

making it difficult to evaluate the level of case management services required by HIV infected clients of Part A agencies. BCHSD also cannot assess the extent to which case management services contribute to an improvement in the acuity of HIV infected clients.

- Case management programs funded by BCHSD experience substantial workforce issues, including highly variable training and expertise. High turnover has been reported in case manager and supervisory positions. Part A-funded agencies, however, were not required to report to BCHSD when a case management position was vacated. Lack of this information has been it difficult to plan for training of newly hired case managers, assess continuity of case management services, or estimate system-wide decreases in case management capacity.
- Paperwork and reporting burden among case managers has grown significantly. Required forms were not designed to measure effectively case management acuity and did not aid in developing and implementing effective care plans. Data gathered are not automated to provide BCHSD with data needed to establish the relationship between acuity and the number of case management units provided per client.

POI undertook several activities to provide a foundation in developing recommendations for consideration by the BCHSD Substance Abuse and Health Care Services HIV/AIDS Section.

- POI consulted with staff of the HAB Division of Service Systems (DSS) to identify policies and programmatic requirements that must be addressed by Part A-funded case management programs. POI also monitored routinely the various iterations of the reauthorized CARE Act to identify any proposed changes that would have to be reflected in Broward County's reengineered case management system. Following reauthorization of the Ryan White HIV/AIDS Treatment Modernization Act in 2006, POI staff interviewed several HAB staff to attempt to understand HAB's intent in implementing the medical case management service category.
- POI conducted several focus groups of HIV case managers, clinicians, program managers, consumers, and other key stakeholders to identify components of the Broward County HIV case management system that should be sustained or reengineered. POI also met several times with the Case Management Network to gain their input. The groups were asked to identify barriers and facilitators associated with effective case management practice.
- POI conducted a focus group of HIV case management clients to gain their perspective on ways that case management might be reengineered to address their needs.
- Prior to reauthorization, POI contacted CARE Act grantees in other communities regarding best practices and lessons learned related to the organization and financing of case management. Grantees were selected for interview based on their experience with case management payment strategies, use of tiered or acuity-based systems, adoption of strength-based social work theory, or adoption of single-point of entry for eligibility determination. The Part A grantees interviewed include Baltimore, Boston, Chicago, Dallas, Ft. Lauderdale, Houston, Jacksonville, Miami, Orlando, Philadelphia, San Francisco, San Juan, Tampa, and Washington, DC. The Part B grantees interviewed include Arizona, Missouri, North Carolina, New Jersey, Oklahoma, Ohio, Oregon, Pennsylvania, South Carolina, Tennessee, and Washington. The results of this telephone consultation are included in a separate report, *Organization and Financing HIV Case Management: Assessment of Best Practices and Lessons Learned From Title I and Title II Grantees*.

- POI conducted a systematic literature review to identify best practices in HIV case management, application of independence scales among HIV infected individuals. POI also reviewed TA and training materials previously developed by HAB staff or consultants. POI requested and reviewed HIV case management forms used by other grantees. For a project funded separately by HAB, POI staff identified and reviewed automated HIV case management software systems and other automated HIV client-level systems that might be considered by BCHSD. POI staff also participated in a conference call with BCHSD Substance Abuse and Health Care Services HIV/AIDS Section and information technology staff to gain a better understanding of plans for development of a Part A-funded HIV client-level data system.
- POI monitored the rollout of the Florida Medicaid managed care program that requires Medicaid beneficiaries to enroll in a managed care plan. Broward and Duval Counties are the initial rollout counties. Specialty HIV/AIDS managed care plans will contract with the Florida Agency for Health Care Administration (AHCA) to provide an array of clinical services, as well as case management. Medicaid beneficiaries enrolled in case management will shift from Part A-funded services to those offered by case management programs participating in Medicaid specialty HIV/AIDS managed care plans. This shift of beneficiaries is required to adhere to the CARE Act's payer of last resort policies. As of the date of completion of this report, no managed care plans had applied to ACHA for a special HIV/AIDS managed care contract in Broward County.
- BCHSD and POI staff convened several conference calls to shape the criteria for recommendations, identify structural or financing barriers that must be addressed in the recommendations, and explore the strengths and weaknesses of several approaches. Invoice data and Part A-funded case management program budgets were analyzed to assess estimated caseloads, number of case managers funded by Part A, and other relevant process measures.

Based on these activities, POI staff drafted recommendations for review by the HIV Case Management Network and the Planning Council's Priority Setting Committee. Their feedback was incorporated in the revised recommendations described below.

II. CRITERIA CONSIDERED IN DEVELOPING THE RECOMMENDATIONS

POI staff collaborated with BCHSD staff to set several criteria for developing recommendations for a reengineered case management system:

- Provide positive benefits to HIV infected Broward County residents, including supporting their efforts to navigate the HIV care system and attain independence,
- Maximize the positive aspect of the existing case management system,
- Address the findings of case management system assessments completed in the past four years,
- Address the existing case management workforce's training and experience level,
- Achieve administrative simplicity for BCHSD and their subgrantees,
- Adopt forms that are valid, collect the minimum data required to develop a care plan, and easy to administer regardless of the expertise of the case manager,
- Reduce duplicated paperwork through application of a client-level data system to transmit data to agencies serving mutual clients,
- Be budget neutral, as it is anticipated that federal Part A funds will be budget neutral.
- Adhere to the HAB's payer of last resort policies and avoid audit exceptions, and
- Address the White House principles for CARE Act reauthorization, Ryan White HIV/AIDS Treatment Modernization Act language related to case management and Part A requirements, and changes in FL Medicaid coverage of case management services.

Several major new components of the recommended re-engineered HIV case management system were demonstrated to be effective by other Ryan White HIV/AIDS Treatment Modernization Act grantees. The Oregon Department of Health's Part B program's application of the chronic care management model and level of care assignment process were adapted in recommendations below. It should be noted, however, that Oregon's level of care system are used similarly by other Part A and Part B grantees. The Philadelphia Part A's centralized eligibility determination system also was adapted in recommendations below. No other single point of eligibility determination was found to be used by other Part A or Part B grantees.

The rollout of the specialty HIV/AIDS managed care plans was not implemented at the time this report was submitted to BCHSD. It is unclear what impact the implementation of Medicaid-funded case management will have on Part A-funded case management programs. While some programs may benefit from their participation in Medicaid managed care networks, other programs may experience decreased demand for their services as their clients go elsewhere for Medicaid-funded case management.

III. RECOMMENDATIONS

A. Expand and Redefine the Case Management Continuum

R1 Part A-funded case management services should include a continuum of activities including:

- Eligibility determination for CARE Act and other services,
- Information and referral for individuals that are ineligible for Part A services *or* eligible individuals that need minimal services,
- Tiered moderate and intensive case management,
- Rapid triage and referral to an HIV primary care clinic,
- Develop and implement care plans to ensure that clients receive services designed to achieve optimal independence tailored to the clients' requirements and capacity to self-navigate their own care,
- Coordinate with clinicians to ensure that clinical and case management care plans are aligned and coordinated,
- Document services provided to afford BCHSD with the ability to monitor trends in acuity, identify unmet need, ensure high quality of services are provided, and ensure that CARE Act funds are used as the payer of last resort, and
- Engage in clinical adherence services such as arranging for transportation to clinic appointments, behavioral health services to address addictions or mental illness, and housing assistance to ensure stable housing arrangements that promote retention in care.

R2 The case management system will include four tiers: intake and eligibility determination, ongoing information and referral for clients not requiring ongoing case management, ongoing moderate case management, and ongoing intensive case management.

Ra Through a face-to-face interview, intake case managers will assess initially if new clients require ongoing case management. Intake case managers will gather information regarding self-reported needs, current enrollment in HIV medical care, income, family size, and other criteria. The intake case managers will identify new clients requiring rapid engagement in HIV medical care, including individuals that have not previously received HIV medical care or discontinued care. Ideally, clients needing immediate referral to an HIV clinic will be referred and receive medical intake within 24 hours of the face-to-face interview. The ability to refer rapidly clients to such medical intake will be predicated on the availability of open medical intake appointment slots. BCHSD should confer with Part A-funded HIV clinics to determine the feasibility of having open intake appointment slots to meet the 24-hour goal.

Rb To avoid conflict of interest, intake case managers would not provide ongoing direct case management services.

Rc A similar fast track referral process might be explored by BCHSD with Part A-funded detoxification and residential drug treatment programs to ensure rapid access.

Rd If a new client only requires information and referral, the intake case manager will provide information needed by the client, complete documentation of the services provided as required by BCHSD, and check in with the client within two weeks of the referral to ensure that the service was provided by the referred agency. This final activity will be provided if the client provides written consent to be contacted by telephone or email.

Re If ongoing case management is required, the intake case managers will offer the options for selecting a case management program that best meets the client's needs. Options will be offered based on the clients' geographic preference, clinical or community-based setting for case management, availability of case management slots for moderate or intensive clients, expertise in working with clients with behavioral health conditions, and other specified criteria.[1]

Rf In developing the care plan and setting the acuity or level care to be offered, the case manager will use a streamlined level of care instrument. POI has provided BCHSD with an example of such a form. Using a technique from quality management, BCHSD might have several Part A-funded programs test the utility and validity of the form by using a PDSA (Plan-Do-Study-Act) cycle. The form might be tested for a short period, such as one month, by experienced case managers. Data would be collected regarding assignment of the levels of care. Participating case managers would also provide their feedback regarding the form and its application in care plan development. Following testing and refinement of the form, it would be adopted throughout the Part A-funded case management system. Case managers and their supervisors would be trained by BCHSD staff to use the form. Invoice data would be used by BCHSD to monitor the form's ongoing application.

Rg The current intake and care plan forms used by Part A-funded case management agencies would be streamlined to focus the data collected. Barriers to implementation of the care plan would be added to the form. POI has provided specific suggestions to BCHSD regarding refinement of the forms.

Rh The case manager will modify the level of care if changes in the client's needs warrant an increase or decrease in the level. The client's chart must provide documentation substantiating the change in level of care. Level of care reassessment will be undertaken no less than every six months or if a major change in the client's acuity has occurred, including resolution of a problem that has previously contributed to the clients' acuity. Invoice data submitted to BCHSD would include the level of care assigned to the client at the time the invoiced service was provided.

Ri The functions of ongoing case management includes:

- Review of information gathered by the intake case manager;
- Face-to-face psychosocial assessment and reassessment and assessment of the level of care to be assigned (moderate or intensive);

[1] For the purposes of this report, behavioral health conditions include addictions and/or mental illness.

- Development of a comprehensive, individualized care plan;
- Coordination of the services and activities required in implementing the care plan;
- Referral to appropriate agencies required to assist the client in achieving the goals and objectives identified in their care plan;
- Client monitoring to assess the efficacy of the care plan;
- Case conferencing with other members of the care team to clinical or other issues requiring adjustments to the client's case management care plan;
- Periodic re-evaluation and revision of the care plan;
- Identification of barriers to clients' access to needed services and client-specific advocacy, as required to address those barriers;
- Review of client utilization of services;
- Outreach and case finding activities;
- Health education and risk reduction education and counseling;
- Transfer and deactivation processes; and
- Documentation in progress notes, on required forms, and in a database specified by BCHSD.

Rj For clients whose level of care is set at intensive, their care plan will be designed to identify services or other resources to be arranged or provided directly that will reduce the client's level of care to information and referral or moderate within twelve months of the initiation of case management.

Rk Clients requiring intensive case management for greater than twelve months must have documented in their case management chart extenuating circumstances, such as advancing HIV disease or severe and persistent mental illness that has not been addressed successfully through therapeutic intervention.

B. Eligibility Determination

R3 Intake case managers employed and supervised by a single agency would conduct centralized intake and eligibility determination (ED) for individuals entering the Part A-funded system. The intake case managers would conduct intake by telephone, at a centralized office, *or* while out-posted at high volume service sites for face-to-face intake.

R4 The intake case managers would assess eligibility for Part A-funded services, provide information and referral to individuals that are ineligible for Part A services *or* eligible individuals that need minimal services, and refer eligible individuals to Part A-funded case management and other agencies. This activity would replace the "brief" service in the case management model.

R5 The intake case managers would screen for Part A eligibility, as well as for eligibility for entitlement and discretionary programs. They would assist clients to prepare applications for entitlement and other discretionary programs, as required. Clients would not be required to

have applications prepared if they are assessed as being ineligible (e.g., undocumented residents).

R6 BCHSD staff would collaborate with the agency employing intake case managers to develop an eligibility determination screening form. The form would be based on relevant items from the Needs Assessment, Intake Summary, and Initial Intake Forms. As a result, data required to be collected by case managers would decrease significantly.

R7 Intake case managers would have the capacity to determine, through automated reporting systems, current enrollment in entitlement programs or commercial insurance and confirm income through tax records. This process is similar to that used by the hospital districts to determine eligibility for district services.

Ra Individuals or families would be determined to be either: (1) ineligible for Part A services, (2) eligible for other third party health insurance but eligible for Part A services not covered by their health insurer, or (3) otherwise eligible for Part A services.

Rb In light of the need to effectively use other funding sources, families (including HIV-infected mothers and/or fathers in the family unit, HIV-indeterminant children, or HIV-infected children, and/or dependent or emancipated HIV-infected adolescent or youth below the age of 25) would be referred to Children's Diagnostic and Treatment Center (CDTC) for clinical, case management, and other services funded by Part D (Title IV).

R8 Intake case managers would enter Part A eligibility data into a highly secure web-based eligibility verification system, similar to that used by the Medicaid Program. Part A-funded agencies would be required to query that system before a Part A-funded service is provided. BCHSD currently is developing a countywide human service information system that will aid in ED information dissemination, referrals, and other coordinated service activities.

R9 Intake case managers would use an expanded automated HIV/AIDS Resource Directory to make referrals of ineligible individuals to resources outside the HIV-funded care system. BCHSD staff or their contractor would be responsible for maintaining up-to-date information to ensure timely referrals. The Resource Directory would be posted on the Internet to ensure access to the information for HIV infected Broward County residents.

R10 Intake case managers should re-determine eligibility annually and update the verification system.

R11 Prior to initiation of ongoing ED activities, active clients would be notified that their ongoing eligibility for Part A funds would be verified. Such notification would be disseminated through letters to active clients, posting of general information on the Broward Regional Planning Council website, and/or through an informational forum sponsored by the Planning Council.

R12 Individuals determined eligible for Part A-funded services and whom request case management service would be asked if they have a preference for the geographic location or organizational type (e.g., clinic, CBO, minority provider, etc.). Referrals would be serially made based on the preference of the individual or randomly assigned if no preference

expressed. They would not be assigned new clients during periods in which case management agencies have reached maximum caseload capacity.

R13 Intake case managers should be case managers with master's degree in social work or other related professional degree *and* with experience serving HIV infected clients. Intake case managers should ideally provide services in English, Spanish, and Creole. Experience in the provision of HIV case management in Broward County would be a plus.

R14 An emergent or urgent triage policy would be promulgated to ensure rapid ED and referral to ongoing case management.

R15 Intake case managers would follow-up by telephone or other mechanism agreed to by the client within a defined period (e.g., four to six weeks) to determine if the client had completed the case management referral, identify any barriers to referral, and assess the client's satisfaction with the services received.

R16 Intake case managers would be available to provide workshops and/or prepare handbooks for HIV infected individuals regarding factors to consider in purchasing health insurance policies.

R17 Intake case managers would, based on the written authorization of the client, coordinate with legal personnel in preparing materials for administrative appeals related to entitlement program applications or disability claims.

R18 Case managers would refer the client to the intake case management unit in the case that a significant change in clinical status, disability, employability, or other significant change in status that would trigger a change in eligibility for entitlement or discretionary programs. An intake case manager would then assist the client to prepare enrollment application materials.

R19 Case managers would deactivate and close a client's file if the client is: no longer eligible for Part A-funded services, relocates outside Broward County, stops contact with their assigned ongoing case managers and/or is unable to be reached by telephone or through US Postal Service within a six months, or the client declines case management services. The case manager should also deactivate clients documented to be deceased. Such documentation would include a death certificate or written correspondence from the client's medical provider. Case management agencies would be required to retain the files of deactivated or deceased clients for a period no longer than five years.

C. Case Management Model

R20 Adopt a chronic care management approach that involves clients in maintaining independence and sustaining health. This approach would be achieved through early detection and effective management of chronic conditions to prevent deterioration, reduce risk of complications, prevent associated illnesses and enable clients to have the best possible quality of life. A client's ability to follow medical advice, accommodate lifestyle changes, and access appropriate support are factors influencing successful management of HIV and associated conditions including behavioral health conditions. Clients play a

significant role in managing their disease, with individuals varying significantly in their management capacity. To meet these needs, clients must have:

- Basic information about HIV/AIDS disease and its treatment,
- Understanding of and assistance with self-management skill building, and
- Ongoing support from the care team, family, friends, and community.

R21 To achieve the chronic care management model, case management must shift from reactive responses to crises to proactive responses focusing on sustaining health. The model requires determining what care is needed and the care team member's roles and responsibilities are specified in a structured manner. Effective self-management support entails engaging clients in adopting a central role in their care to foster a sense of responsibility for their health. Clients are provided basic information, emotional support, and strategies for living with their chronic illness. Case managers and their clients work together to define problems, set priorities, establish goals, create care plans, and solve problems as they arise. Key components of chronic care management and client self-management include:

- Emphasis on the client's role,
- Standardized assessment,
- Effective, evidence based interventions,
- Care planning through goal-setting and problem solving, and
- Active, sustained follow-up.

Table 1 summarizes the steps to be undertaken in applying the chronic care management model for HIV case managers.

Table 1. Chronic Care Self-Management Model for HIV Case Managers

Step 1: Case management assessment process

- Impact of the illness
- Symptoms of the illness
- Medication side effects
- Lifestyle factors
- Strengths and barriers
- Collaborate with the client to identify factors that will impact his or her capacity for self-management

Step 2: Care planning with the client

- Determine stage of change *(see "Determine Stage of Change" which follows)*
- Determine specific goals
- Prioritize goals
- Identify outcomes
- Determine realistic timeframes
- Select interventions
- Document the care plan

STEP 3: Select the appropriate mix of case management activities based on:

- Context
- Goals
- Availability of resources
- Quality of resources
- Personal capacity

R22 Refocus case management to assist HIV infected individuals to achieve independence and enhance their ability to navigate independently the HIV care system. Several activities will be undertaken to achieve refocused case management. As described earlier, the level of care assigned to a client will be considered short term, with one of the purposes of the care plan's implementation to strive towards an improved level of independence by the end of each 12-month period of case management. Clients receiving intensive case management would have a 12-month period in which to move to moderate case management. In turn, moderate case management clients would have a 12-month period to move to ongoing information and referral. Significant factors impeding the client from moving to a lower level of care must be documented in the client's progress notes. The care plan should be updated to identify steps to be taken to transition the client to a lower level of care. The time frame in which the plan will be implemented must be specified in the care plan. The progress notes and care plan must be co-signed by the case manager's supervisor.

R23 Implement a tiered case management system through application of the intake form and a level of care tool to be administered by the assigned case manager.

R24 Experienced, trained case managers would conduct an initial case management assessment to assign a level of care, with less experienced and trained case managers assigned to clients with a lower level of care. The intake case managers would make a recommendation to the case management program regarding the level of intensity presented by the client.

Ra The intake form would be reviewed to streamline the intake process and gather those items most directly predictive of the need for case management services. The form might also assess clients' strengths, if case managers are trained to assess for and provide strength-based case management.

Rb Assess the medical and psychosocial support needs of clients on at least an annual basis, with reassessment undertaken if a significant improvement or decline in the client's needs identified during face-to-face or telephone visits.

R25 Stratify case management clients by level of care, using a standardized assessment tool. Assign clients to case managers based on their training and experience working with complex clients, linguistic capability, and other unique client needs (e.g., addicted clients that might be assigned to credentialed addictions counselors). To accomplish this recommendation it will be necessary to assess the individual training and expertise of case managers current in the workforce and to assess newly entering case managers as they are hired by Part A-funded case management programs.

Ra Broward County Part A data are not currently availability documenting the relationship between level of care and the number of case management contacts (including telephone and face-to-face) completed per year. Based on the Oregon Part B Program, which has assessed trends in utilization, it is recommended that ongoing information and referral clients receive no more than six contacts per year. Such contact would focus on providing the client with contact information for a specific service. Moderate case management clients should not require contact more than 12 times per year. Intensive case management clients should not require more than 24 contacts per year. Additional data regarding the actual patterns of service by level of care should be gathered to determine the prior experience in Broward County before full implementation of capped services.

Rb Reasons why case management clients received fewer services than specified in R25a should be documented in the clients' charts and co-signed by the case manager's supervisor. Such events as no-shows for appointments should be documented in the chart and the method to reschedule the client should be documented, such as a telephone call made to the client, a letter sent to the client reminding him/her to reschedule the appointment, etc.

R26 Part A-eligible clients would continue to be referred by their case managers to Part A-funded services, using the Service Requirement Form. The information system to be implemented by BCHSD would be designed to provide an electronic transmission of the automated Service Requirement Form to reduce the level of paperwork burden on clients and case managers.

R27 Families (as defined in R7b), emancipated adolescents, and youth between the ages of 18 and 25 currently receiving case management services from Part A-funded agencies would be provided an informational brochure regarding CDTC. They would be asked by their current case management agency if they would like to be transferred to CDTC for ongoing case management and other Part D-funded services. A case management client receiving those services from a Part A-funded program would be ineligible for those services if they also receive Part D-funded case management at CDTC. Part A-funded case management agencies should coordinate with CDTC staff to identify clients that are being dually provided case management services. Any case management declining transfer to CDTC for case management should have a note in their chart, signed by the client or legal custodian, declining transfer.

R28 Based on the Ryan White HIV/AIDS Treatment Modernization Act of 2006 and AHCA Medicaid reform contract language, create a taskforce of case managers, clinicians, consumers, and other key stakeholders to address mechanisms to: (1) align the case management model to address the requirements of the reauthorized CARE Act and (2) ensure that payer of last requirements are addressed in the provision of case management to Medicaid beneficiaries.

R29 The success of case managers in assisting clients to access HIV clinical services and adhering to their treatment regimens is contributed to in large part by HIV clinicians. BCHSD contract language with core medical providers should specify their requirements for

collaborating with case managers, including the nature and frequency of interactions such as periodic case conferences.

R30 The data collected through the invoice would be used to measure the productivity of intake and ongoing case managers.

R31 To establish a baseline for evaluating the impact of changes in the case management system resulting from implementation of this roadmap, BCHSD might sample case management charts of Part A-funded agencies. A standardized chart review instrument would be administered by a trained chart reviewer to determine the proportion of clients in each level of care (including the proportion of clients receiving information and referral only versus moderate or intensive case management). The review would also measure the extent to which chart documentation supports the level of care assigned to the client, the average number of months in which clients remain in the assigned level of care (or documented in the charts), the number of clients that should have been deactivated based on the criteria outlined above, the extent to which the completed forms support the care plan, and the extent to which documents required to demonstrate Part A eligibility are in the chart. The number of charts to be sampled should be determined using the sampling frame posted on the National Quality Center (NQC) website.

D. Ensuring Engagement and Retention

R32 To support appointment adherence, core service providers would be encouraged to employ peers or "near peers" to provide appointment reminder services for core clinical providers, arrange for transportation if required to ensure clinical appointment compliance, and conduct case finding for clients that have not been engaged in care in the previous six months (or other related criteria). Peers or near peers would be supervised by trained, experienced personnel to ensure that they adhere to their organizations' personnel policies and procedures.

R33 Active clients are defined as those individuals or family units that actively seek and receive service, and that have been seen or contacted based on the scheduled outlined in R25b. Inactive clients and/or closed cases are defined as individuals or family members whose case management services have been completed at the provider agency and the client's record has been closed.

R34 Cases should be closed and the client deactivated due to: death of the client, the client and/or client's legal guardian requests that the case be closed, the client makes fraudulent claims about their HIV diagnosis or falsifies documentation, the client is incarcerated in a juvenile detention center, jail, or prison, moved outside of Broward County, the client is "lost to follow-up," or the client exhibits a pattern of abuse of agency staff, property or services.

R35 If a case manager has not had regular visits with their client based on the schedule described R25b, the case manager must document in their progress notes the activities undertaken to contact the client and reengage them in care. Efforts to reengage the client in care should include. Clients for whom the required engagement activities were not successful in reengaging them in care shall be de-activated. A copy of the certified letter, or other

documentation shall be included in the client's chart. The case manager's supervisor shall sign the chart to confirm that a sufficient effort was made to re-engage the client in care.

E. Workforce Issues

Earlier case management studies reported high caseloads have impaired quality and contributed to low morale and turnover. Prior to setting limits on case managers' caseloads, data were evaluated regarding trends in average caseloads within case management agencies.

R36 POI used six months of data from case management invoices to BCHSD to study case management caseloads. Table 2 summarizes the results of the analysis, including average (or mean) invoiced clients within and outside the cap on case management invoices that may be submitted on a monthly basis. A six-month period following the closure of CenterOne was studied. Two approaches to compute caseloads were taken, the number of individual case managers and full-time equivalent (FTE) case managers adjusting to the percent of full-time covered by Part A. Part A-funded case managers had an average caseload of 46 clients, with caseloads ranging from 20 to 104 clients. All case management agencies except for CareResources had an average caseload of 63 clients or less. This average caseload is within the caseloads of most of the Part A and Part B grantees interviewed by POI. No recommendation is made by POI regarding capping or reducing caseloads due to the results of the analysis. We do recommend, however, that additional funds be allocated to CareResources to add an additional case manager.

R37 The impression of high caseloads may be contributed in part due to the number of units of case management that exceed the BCHSD cap. The cap ensures that BCHSD has sufficient funds to support case management throughout the Part A fiscal year, using the unit-based payment system. As described below, the unit-based payment approach has significant disadvantages that might be addressed using a grant budget approach that pays for FTEs rather than units of service.

R38 A long-term strategy is needed to address the training needs of case managers. Current basic case management skills training should be continued. Moderate and advanced training might be arranged through one of the accredited social work schools in the region. A distance-learning approach might be adopted to reduce the amount of time in training.

R39 HIV medical case management training might be arranged with the AIDS Education and Training Center (AETC) or other experienced agency. Distance learning techniques might be used to reduce the amount of time in training.

R40 Credentialing case managers completing a course of training in the case management skills and HIV medical case management might be explored to provide advancement opportunities.

R41 A curriculum would be developed for peers or near-peers regarding the roles and responsibilities of peer workers, basics of HIV, confidentiality and disclosure policies and practices, and other related topics. Alternatively, HAB-funded peer training would be arranged.

F. Payment System

R42 Ongoing case management clients would only be assigned one case manager per month. Clients wishing to transfer to another case manager would have to complete a form requesting transfer. The initial case manager would close and transfer the case to the requested case manager or case management agency.

R43 The current single unit payment system may incentivize case managers to generate case management units up to the monthly unit. Conversely, the cap does not appear to address the need of high intensity clients that need more units of service than allowed in the cap. The payment rate of $12 per 15-minute unit of case management does not reflect the actual direct cost of producing a unit of service. It is recommended that BCHSD use a grant approach that requires case management agencies to submit a fixed budget with identified FTEs and associated direct and indirect costs. When applying for Part A funds, an applicant agency would propose the number of clients to be served. Applicants would be required to document the basis for their costs, including case manager and supervisor salaries and fringe benefits. Funded case management agencies would be required to notify BCHSD of any funded vacancies and submit a plan for a rapid replacement. A quarterly payment cycle would allow BCHSD to debit the agency's payment to adjust for vacancies and to reallocate the unexpended funds to other case management programs or to other service categories.

R44 If retained, the current single unit payment system of $12 per 15-minute unit of case management might be adjusted to reflect multi-tiered case management system. A unit cost analysis should be conducted if the single unit payment system is retained to ensure that the payment rates cover the costs associated with case management. The analysis should be conducted by an entity with demonstrated expertise in HIV case management unit rate calculation. A new rate structure might be tied to the level of care provided. New separate case management unit payment rates might be developed for information and referral and moderate and intensive case management. A 10% indirect cost rate and associated costs (local travel, professional liability insurance, etc.) would be included in the cost estimation. It may be difficult, however, to compute accurately a tiered payment rate. Moreover, since a large portion of the care planning process is subjective, a tiered payment system might incentivize case managers to identify service needs that result in a high level of care score.

R45 A fixed payment rate for case management supervision might be set, based on the direct personnel costs of case management supervisors. Case management supervision standards should be established to ensure that consistent high quality supervision by all Part A case management agencies.

R46 If BCHSD plans to continue to use a unit-based case management system, intake case managers should be paid on a grant-basis in Year 1 to determine the number of units of service provided and ensure that no financial disincentives are introduced that would impact the volume of service or unnecessary referral to case management to provide clients with all the referrals required. This approach will be reviewed at the end of Year 1 to determine if a change in the payment model should be made. Additional information is needed regarding the anticipated number of new and re-determined clients to determine the number of intake case managers required for the Part A case management system.

G. Resource Management

R47 An income cap income might be set at a level that is consistent with the Florida Part B Program (300% FPL).

R48 Criteria might be set for case closure by case management agencies. Based on the criteria, active cases would be systematically reviewed to determine if cases should be closed. This might occur at a three, six, or twelve-month cycle based on the capacity of case managers to re-determine their caseloads.

R49 A case management capacity policy might be set by the grantee to establish protocols for referral of clients due to the closure of a case management agency, a notification requirement for case management agencies when they have reached their maximum caseload levels, and a wait list policy that addresses client triage and priority setting.

H. Standards of Care

R50 HIV case management standards should be reviewed and modified to address the new case management model. The standards should be streamlined, realistic, and measurable. Any newly introduced client-level data system should be designed to ensure that the extent to which the standards are addressed could be measured by data collected.

Table 2. Average Invoiced and Budgeted Full Time Equivalent (FTE) Case Managers (CMs), Unduplicated Clients, and Estimated Average Unduplicated Clients Per Case Manager and the Average Monthly Invoiced Clients That Exceed the Capped CM Invoices

AGENCY	CASELOAD ANALYSIS						CAPPED CM INVOICE ANALYSIS		
	AVERAGE INVOICED MONTHLY CLIENTS	AVERAGE MONTHLY INVOICED CMS	AVERAGE MONTHLY INVOICED CASELOAD	BUDGETED FTE CMS	AVERAGE MONTHLY CASELOAD ADJUSTED FOR BUDGETED FTE CMS	VARIANCE BETWEEN AVERAGE CASELOADS BASED ON BUDGETED FTE CMS VERSUS INVOICED CMS	AVERAGE MONTHLY INVOICED CLIENTS	AVERAGE TOTAL CLIENTS	DIFFERENCE BETWEEN AVERAGE TOTAL CLIENTS VERSUS AVERAGE INVOICED CLIENTS
BCHD	157	8	20	5	**31**	11	157	157	0
BCHD MAI	15	5	3	NA	**NA**	NA	15	15	0
BROWARD HOUSE	333	9	38	5.31	**63**	24	268	268	0
CARE RESOURCE	213	4	51	2.04	**104**	53	183	251	69
MDEI	65	3	26	2.05	**32**	6	63	89	26
MODC	33	2	20	1.68	**20**	0	28	28	0
NBHD	62	3	23	1.67	**37**	14	52	56	5
SBHD	133	3	40	3.87	**34**	-6	116	116	0
Total	981	34	29	21.62	**45**	17	852	951	100
Mean	126	5	28	3.09	**46**	15	110	123	

NA = Not Applicable

RECOMMENDATIONS	When?	Whom?
Expand and Redefine the Case Management Continuum		
R1 Part A-funded case management services should include a continuum of activities including:		
▪ Eligibility determination for CARE Act and other services,		
▪ Information and referral for individuals that are ineligible for Part A services *or* eligible individuals that need minimal services,		
▪ Tiered moderate and intensive case management,		
▪ Rapid triage and referral to an HIV primary care clinic,		
▪ Develop and implement care plans to ensure that clients receive services designed to achieve optimal independence tailored to the clients' requirements and capacity to self-navigate their own care,		
▪ Coordinate with clinicians to ensure that clinical and case management care plans are aligned and coordinated,		
▪ Document services provided to afford BCHSD with the ability to monitor trends in acuity, identify unmet need, ensure high quality of services are provided, and ensure that CARE Act funds are used as the payer of last resort, and		
▪ Engage in clinical adherence services such as arranging for transportation to clinic appointments, behavioral health services to address addictions or mental illness, and housing assistance to ensure stable housing arrangements that promote retention in care.		
R2 The case management system will include four tiers: intake and eligibility determination, ongoing information and referral for clients not requiring ongoing case management, ongoing moderate case management, and ongoing intensive case management.		

Ra	Through a face-to-face interview, intake case managers will assess initially if new clients require ongoing case management. Intake case managers will gather information regarding self-reported needs, current enrollment in HIV medical care, income, family size, and other criteria. The intake case managers will identify new clients requiring rapid engagement in HIV medical care, including individuals that have not previously received HIV medical care or discontinued care. Ideally, clients needing immediate referral to an HIV clinic will be referred and receive medical intake within 24 hours of the face-to-face interview. The ability to refer rapidly clients to such medical intake will be predicated on the availability of open medical intake appointment slots. BCHSD should confer with Part A-funded HIV clinics to determine the feasibility of having open intake appointment slots to meet the 24-hour goal.		
Rb	To avoid conflict of interest, intake case managers would not provide ongoing direct case management services.		
Rc	A similar fast track referral process might be explored by BCHSD with Part A-funded detoxification and residential drug treatment programs to ensure rapid access.		
Rd	If a new client only requires information and referral, the intake case manager will provide information needed by the client, complete documentation of the services provided as required by BCHSD, and check in with the client within two weeks of the referral to ensure that the service was provided by the referred agency. This final activity will be provided if the client provides written consent to be contacted by telephone or email.		
Re	If ongoing case management is required, the intake case managers will offer the options for selecting a case management program that best meets the client's needs. Options will be offered based on the clients' geographic preference, clinical or community-based setting for case management, availability of case management slots for moderate or intensive clients, expertise in working with clients with behavioral health conditions, and other specified criteria.[2]		

[2] For the purposes of this report, behavioral health conditions include addictions and/or mental illness.

Rf	In developing the care plan and setting the acuity or level care to be offered, the case manager will use a streamlined level of care instrument. POI has provided BCHSD with an example of such a form. Using a technique from quality management, BCHSD might have several Part A-funded programs test the utility and validity of the form by using a PDSA (Plan-Do-Study-Act) cycle. The form might be tested for a short period, such as one month, by experienced case managers. Data would be collected regarding assignment of the levels of care. Participating case managers would also provide their feedback regarding the form and its application in care plan development. Following testing and refinement of the form, it would be adopted throughout the Part A-funded case management system. Case managers and their supervisors would be trained by BCHSD staff to use the form. Invoice data would be used by BCHSD to monitor the form's ongoing application.		
Rg	The current intake and care plan forms used by Part A-funded case management agencies would be streamlined to focus the data collected. Barriers to implementation of the care plan would be added to the form. POI has provided specific suggestions to BCHSD regarding refinement of the forms.		
Rh	The case manager will modify the level of care if changes in the client's needs warrant an increase or decrease in the level. The client's chart must provide documentation substantiating the change in level of care. Level of care reassessment will be undertaken no less than every six months or if a major change in the client's acuity has occurred, including resolution of a problem that has previously contributed to the clients' acuity. Invoice data submitted to BCHSD would include the level of care assigned to the client at the time the invoiced service was provided.		
Ri	The functions of ongoing case management includes:		
	▪ Review of information gathered by the intake case manager;		
	▪ Face-to-face psychosocial assessment and reassessment and assessment of the level of care to be assigned (moderate or intensive);		
	▪ Development of a comprehensive, individualized care plan;		
	▪ Coordination of the services and activities required in implementing the care plan;		
	▪ Referral to appropriate agencies required to assist the client in achieving the goals and objectives identified in their care plan;		
	▪ Client monitoring to assess the efficacy of the care plan;		

▪ Case conferencing with other members of the care team to clinical or other issues requiring adjustments to the client's case management care plan;		
▪ Periodic re-evaluation and revision of the care plan;		
▪ Identification of barriers to clients' access to needed services and client-specific advocacy, as required to address those barriers;		
▪ Review of client utilization of services;		
▪ Outreach and case finding activities;		
▪ Health education and risk reduction education and counseling;		
▪ Transfer and deactivation processes; and		
▪ Documentation in progress notes, on required forms, and in a database specified by BCHSD.		
Rj For clients whose level of care is set at intensive, their care plan will be designed to identify services or other resources to be arranged or provided directly that will reduce the client's level of care to information and referral or moderate within twelve months of the initiation of case management.		
Rk Clients requiring intensive case management for greater than twelve months must have documented in their case management chart extenuating circumstances, such as advancing HIV disease or severe and persistent mental illness that has not been addressed successfully through therapeutic intervention.		
Eligibility Determination		
R3 Intake case managers employed and supervised by a single agency would conduct centralized intake and eligibility determination (ED) for individuals entering the Part A-funded system. The intake case managers would conduct intake by telephone, at a centralized office, *or* while out-posted at high volume service sites for face-to-face intake.		
R4 The intake case managers would assess eligibility for Part A-funded services, provide information and referral to individuals that are ineligible for Part A services *or* eligible individuals that need minimal services, and refer eligible individuals to Part A-funded case management and other agencies. This activity would replace the "brief" service in the case management model.		

R5	The intake case managers would screen for Part A eligibility, as well as for eligibility for entitlement and discretionary programs. They would assist clients to prepare applications for entitlement and other discretionary programs, as required. Clients would not be required to have applications prepared if they are assessed as being ineligible (e.g., undocumented residents).		
R6	BCHSD staff would collaborate with the agency employing intake case managers to develop an eligibility determination screening form. The form would be based on relevant items from the Needs Assessment, Intake Summary, and Initial Intake Forms. As a result, data required to be collected by case managers would decrease significantly.		
R7	Intake case managers would have the capacity to determine, through automated reporting systems, current enrollment in entitlement programs or commercial insurance and confirm income through tax records. This process is similar to that used by the hospital districts to determine eligibility for district services.		
Ra	Individuals or families would be determined to be either: (1) ineligible for Part A services, (2) eligible for other third party health insurance but eligible for Part A services not covered by their health insurer, or (3) otherwise eligible for Part A services.		
Rb	In light of the need to effectively use other funding sources, families (including HIV-infected mothers and/or fathers in the family unit, HIV-indeterminant children, or HIV-infected children, and/or dependent or emancipated HIV-infected adolescent or youth below the age of 25) would be referred to Children's Diagnostic and Treatment Center (CDTC) for clinical, case management, and other services funded by Part D (Title IV).		
R8	Intake case managers would enter Part A eligibility data into a highly secure web-based eligibility verification system, similar to that used by the Medicaid Program. Part A-funded agencies would be required to query that system before a Part A-funded service is provided. BCHSD currently is developing a countywide human service information system that will aid in ED information dissemination, referrals, and other coordinated service activities.		

R9	Intake case managers would use an expanded automated HIV/AIDS Resource Directory to make referrals of ineligible individuals to resources outside the HIV-funded care system. BCHSD staff or their contractor would be responsible for maintaining up-to-date information to ensure timely referrals. The Resource Directory would be posted on the Internet to ensure access to the information for HIV infected Broward County residents.		
R10	Intake case managers should re-determine eligibility annually and update the verification system.		
R11	Prior to initiation of ongoing ED activities, active clients would be notified that their ongoing eligibility for Part A funds would be verified. Such notification would be disseminated through letters to active clients, posting of general information on the Broward Regional Planning Council website, and/or through an informational forum sponsored by the Planning Council.		
R12	Individuals determined eligible for Part A-funded services and whom request case management service would be asked if they have a preference for the geographic location or organizational type (e.g., clinic, CBO, minority provider, etc.). Referrals would be serially made based on the preference of the individual or randomly assigned if no preference expressed. They would not be assigned new clients during periods in which case management agencies have reached maximum caseload capacity.		
R13	Intake case managers should be case managers with master's degree in social work or other related professional degree *and* with experience serving HIV infected clients. Intake case managers should ideally provide services in English, Spanish, and Creole. Experience in the provision of HIV case management in Broward County would be a plus.		
R14	An emergent or urgent triage policy would be promulgated to ensure rapid ED and referral to ongoing case management.		
R15	Intake case managers would follow-up by telephone or other mechanism agreed to by the client within a defined period (e.g., four to six weeks) to determine if the client had completed the case management referral, identify any barriers to referral, and assess the client's satisfaction with the services received.		
R16	Intake case managers would be available to provide workshops and/or prepare handbooks for HIV infected individuals regarding factors to consider in purchasing health insurance policies.		

R17 Intake case managers would, based on the written authorization of the client, coordinate with legal personnel in preparing materials for administrative appeals related to entitlement program applications or disability claims.		
R18 Case managers would refer the client to the intake case management unit in the case that a significant change in clinical status, disability, employability, or other significant change in status that would trigger a change in eligibility for entitlement or discretionary programs. An intake case manager would then assist the client to prepare enrollment application materials.		
R19 Case managers would deactivate and close a client's file if the client is: no longer eligible for Part A-funded services, relocates outside Broward County, stops contact with their assigned ongoing case managers and/or is unable to be reached by telephone or through US Postal Service within a six months, or the client declines case management services. The case manager should also deactivate clients documented to be deceased. Such documentation would include a death certificate or written correspondence from the client's medical provider. Case management agencies would be required to retain the files of deactivated or deceased clients for a period no longer than five years.		
Case Management Model		
R20 Adopt a chronic care management approach that involves clients in maintaining independence and sustaining health. This approach would be achieved through early detection and effective management of chronic conditions to prevent deterioration, reduce risk of complications, prevent associated illnesses and enable clients to have the best possible quality of life. A client's ability to follow medical advice, accommodate lifestyle changes, and access appropriate support are factors influencing successful management of HIV and associated conditions including behavioral health conditions. Clients play a significant role in managing their disease, with individuals varying significantly in their management capacity. To meet these needs, clients must have:		
▪ Basic information about HIV/AIDS disease and its treatment,		
▪ Understanding of and assistance with self-management skill building, and		
▪ Ongoing support from the care team, family, friends, and community.		

R21 To achieve the chronic care management model, case management must shift from reactive responses to crises to proactive responses focusing on sustaining health. The model requires determining what care is needed and the care team member's roles and responsibilities are specified in a structured manner. Effective self-management support entails engaging clients in adopting a central role in their care to foster a sense of responsibility for their health. Clients are provided basic information, emotional support, and strategies for living with their chronic illness. Case managers and their clients work together to define problems, set priorities, establish goals, create care plans, and solve problems as they arise. Key components of chronic care management and client self-management include:		
▪ Emphasis on the client's role,		
▪ Standardized assessment,		
▪ Effective, evidence based interventions,		
▪ Care planning through goal-setting and problem solving, and		
▪ Active, sustained follow-up.		
R22 Refocus case management to assist HIV infected individuals to achieve independence and enhance their ability to navigate independently the HIV care system. Several activities will be undertaken to achieve refocused case management. As described earlier, the level of care assigned to a client will be considered short term, with one of the purposes of the care plan's implementation to strive towards an improved level of independence by the end of each 12-month period of case management. Clients receiving intensive case management would have a 12-month period in which to move to moderate case management. In turn, moderate case management clients would have a 12-month period to move to ongoing information and referral. Significant factors impeding the client from moving to a lower level of care must be documented in the client's progress notes. The care plan should be updated to identify steps to be taken to transition the client to a lower level of care. The time frame in which the plan will be implemented must be specified in the care plan. The progress notes and care plan must be co-signed by the case manager's supervisor.		
R23 Implement a tiered case management system through application of the intake form and a level of care tool to be administered by the assigned case manager.		

R24 Experienced, trained case managers would conduct an initial case management assessment to assign a level of care, with less experienced and trained case managers assigned to clients with a lower level of care. The intake case managers would make a recommendation to the case management program regarding the level of intensity presented by the client.		
Ra The intake form would be reviewed to streamline the intake process and gather those items most directly predictive of the need for case management services. The form might also assess clients' strengths, if case managers are trained to assess for and provide strength-based case management.		
Rb Assess the medical and psychosocial support needs of clients on at least an annual basis, with reassessment undertaken if a significant improvement or decline in the client's needs identified during face-to-face or telephone visits.		
R25 Stratify case management clients by level of care, using a standardized assessment tool. Assign clients to case managers based on their training and experience working with complex clients, linguistic capability, and other unique client needs (e.g., addicted clients that might be assigned to credentialed addictions counselors). To accomplish this recommendation it will be necessary to assess the individual training and expertise of case managers current in the workforce and to assess newly entering case managers as they are hired by Part A-funded case management programs.		
Ra Broward County Part A data are not currently availability documenting the relationship between level of care and the number of case management contacts (including telephone and face-to-face) completed per year. Based on the Oregon Part B Program, which has assessed trends in utilization, it is recommended that ongoing information and referral clients receive no more than six contacts per year. Such contact would focus on providing the client with contact information for a specific service. Moderate case management clients should not require contact more than 12 times per year. Intensive case management clients should not require more than 24 contacts per year. Additional data regarding the actual patterns of service by level of care should be gathered to determine the prior experience in Broward County before full implementation of capped services.		

Rb	Reasons why case management clients received fewer services than specified in R25a should be documented in the clients' charts and co-signed by the case manager's supervisor. Such events as no-shows for appointments should be documented in the chart and the method to reschedule the client should be documented, such as a telephone call made to the client, a letter sent to the client reminding him/her to reschedule the appointment, etc.		
R26	Part A-eligible clients would continue to be referred by their case managers to Part A-funded services, using the Service Requirement Form. The information system to be implemented by BCHSD would be designed to provide an electronic transmission of the automated Service Requirement Form to reduce the level of paperwork burden on clients and case managers.		

HANDOUT D4

ATLANTA	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$20,778,941**	**$628,783**	**$21,407,724**	**$2,291,325**	**$123,221**	**$2,414,546**	**$23,822,270**	**85.99%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$534,324	$0	$534,324	$89,479	$41,074	$130,553	$664,877	**2.40%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,983,401	$0	$1,983,401	$63,546	$0	$63,546	$2,046,947	**7.39%**
i. Medical Nutrition Therapy	$146,722	$0	$146,722	$0	$0	$0	$146,722	**0.53%**
j. Mental Health Services	$1,574,886	$0	$1,574,886	$0	$0	$0	$1,574,886	**5.69%**
k. Oral Health Care	$2,316,660	$0	$2,316,660	$0	$0	$0	$2,316,660	**8.36%**
l. Outpatient /Ambulatory Health Services	$13,020,925	$628,783	$13,649,708	$2,138,300	$82,147	$2,220,447	$15,870,155	**57.29%**
m. Substance Abuse Outpatient Care	$1,202,023	$0	$1,202,023	$0	$0	$0	$1,202,023	**4.34%**
2. Support Services Subtotal	**$3,447,393**	**$0**	**$3,447,393**	**$432,536**	**$0**	**$432,536**	**$3,879,929**	**14.01%**
a. Child Care Services	$36,843	$0	$36,843	$0	$0	$0	$36,843	**0.13%**
b. Emergency Financial Assistance	$13,200	$0	$13,200	$0	$0	$0	$13,200	**0.05%**
c. Food Bank/Home Delivered Meals	$1,473,885	$0	$1,473,885	$133,314	$0	$133,314	$1,607,199	**5.80%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$112,740	$0	$112,740	$0	$0	$0	$112,740	**0.41%**
g. Medical Transportation	$252,807	$0	$252,807	$2,630	$0	$2,630	$255,437	**0.92%**
h. Non-Medical Case Management Services	$530,815	$0	$530,815	$274,421	$0	$274,421	$805,236	**2.91%**
i. Other Professional Services	$72,764	$0	$72,764	$0	$0	$0	$72,764	**0.26%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$228,923	$0	$228,923	$0	$0	$0	$228,923	**0.83%**
l. Referral for Health Care and Support Services	$725,416	$0	$725,416	$22,171	$0	$22,171	$747,587	**2.70%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$24,226,334**	**$628,783**	**$24,855,117**	**$2,723,861**	**$123,221**	**$2,847,082**	**$27,702,199**	**100.00%**
4. Non-services Subtotal	**$4,341,513**	**$0**	**$4,341,513**	**$35,552**	**$0**	**$35,552**	**$4,377,065**	**13.64%**
a. Clinical Quality Management	$1,236,350	$0	$1,236,350	$12,823	$0	$12,823	$1,249,173	**3.89%**
b. Recipient Administration	$3,105,163	$0	$3,105,163	$22,729	$0	$22,729	$3,127,892	**9.75%**
5. Total Expenditures	**$28,567,847**	**$628,783**	**$29,196,630**	**$2,759,413**	**$123,221**	**$2,882,634**	**$32,079,264**	**100.00%**

Aggregate FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
Section C: Expenditure Categories	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$341,466,619**	**$7,625,128**	**$349,091,747**	**$29,333,979**	**$1,981,063**	**$31,315,042**	**$380,406,789**	**70.23%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$6,024,943	$196,205	$6,221,148	$466,870	$0	$466,870	$6,688,018	**1.23%**
b. AIDS Pharmaceutical Assistance (LPAP)	$5,589,742	$76,999	$5,666,741	$35,724	$0	$35,724	$5,702,465	**1.05%**
c. Early Intervention Services (EIS)	$18,184,838	$58,769	$18,243,607	$5,184,362	$153,153	$5,337,515	$23,581,122	**4.35%**
d. Health Insurance Premium & Cost Sharing Assistance	$12,477,932	$1,153,955	$13,631,887	$89,920	$41,074	$130,994	$13,762,881	**2.54%**
e. Home and Community-Based Health Services	$4,105,052	$0	$4,105,052	$67,264	$0	$67,264	$4,172,316	**0.77%**
f. Home Health Care	$412,157	$0	$412,157	$0	$0	$0	$412,157	**0.08%**
g. Hospice	$653,601	$0	$653,601	$0	$0	$0	$653,601	**0.12%**
h. Medical Case Management	$102,621,750	$2,517,186	$105,138,936	$12,257,574	$664,256	$12,921,830	$118,060,766	**21.80%**
i. Medical Nutrition Therapy	$5,716,392	$153,204	$5,869,596	$0	$0	$0	$5,869,596	**1.08%**
j. Mental Health Services	$18,280,760	$189,263	$18,470,023	$984,114	$25,297	$1,009,411	$19,479,434	**3.60%**
k. Oral Health Care	$40,443,437	$299,533	$40,742,970	$118,615	$22,650	$141,265	$40,884,235	**7.55%**
l. Outpatient /Ambulatory Health Services	$112,447,423	$2,929,065	$115,376,488	$9,657,392	$724,759	$10,382,151	$125,758,639	**23.22%**
m. Substance Abuse Outpatient Care	$14,508,592	$50,949	$14,559,541	$472,144	$349,874	$822,018	$15,381,559	**2.84%**
2. Support Services Subtotal	**$141,501,720**	**$7,488,547**	**$148,990,267**	**$11,383,866**	**$849,690**	**$12,233,556**	**$161,223,823**	**29.77%**
a. Child Care Services	$83,286	$0	$83,286	$0	$0	$0	$83,286	**0.02%**
b. Emergency Financial Assistance	$18,886,642	$1,424,647	$20,311,289	$120,872	$59,586	$180,458	$20,491,747	**3.78%**
c. Food Bank/Home Delivered Meals	$31,100,241	$3,799,566	$34,899,807	$167,519	$0	$167,519	$35,067,326	**6.47%**
d. Health Education/Risk Reduction	$1,610,459	$0	$1,610,459	$906,969	$0	$906,969	$2,517,428	**0.46%**
e. Housing	$24,933,214	$635,183	$25,568,397	$5,426,956	$697,692	$6,124,648	$31,693,045	**5.85%**
f. Linguistic Services	$201,862	$2,225	$204,087	$70,766	$0	$70,766	$274,853	**0.05%**
g. Medical Transportation	$9,702,487	$167,696	$9,870,183	$167,118	$8,971	$176,089	$10,046,272	**1.85%**
h. Non-Medical Case Management Services	$24,433,343	$309,141	$24,742,484	$2,775,601	$60,623	$2,836,224	$27,578,708	**5.09%**
i. Other Professional Services	$9,467,301	$675,231	$10,142,532	$75,586	$0	$75,586	$10,218,118	**1.89%**
j. Outreach Services	$2,688,578	$50,000	$2,738,578	$801,652	$22,818	$824,470	$3,563,048	**0.66%**
k. Psychosocial Support Services	$9,399,041	$349,958	$9,748,999	$659,624	$0	$659,624	$10,408,623	**1.92%**
l. Referral for Health Care and Support Services	$6,455,672	$74,900	$6,530,572	$211,203	$0	$211,203	$6,741,775	**1.24%**
m. Rehabilitation Services	$176,012	$0	$176,012	$0	$0	$0	$176,012	**0.03%**
n. Respite Care	$1,625	$0	$1,625	$0	$0	$0	$1,625	**0.00%**
o. Substance Abuse Services (residential)	$2,361,957	$0	$2,361,957	$0	$0	$0	$2,361,957	**0.44%**
3. Total Service Expenditures	**$482,968,339**	**$15,113,675**	**$498,082,014**	**$40,717,845**	**$2,830,753**	**$43,548,598**	**$541,630,612**	**100.00%**
4. Non-services Subtotal	**$69,095,560**	**$0**	**$69,095,560**	**$4,174,282**	**$0**	**$4,174,282**	**$73,269,842**	**11.92%**
a. Clinical Quality Management	$16,604,213	$0	$16,604,213	$757,047	$0	$757,047	$17,361,260	**2.82%**
b. Recipient Administration	$52,491,347	$0	$52,491,347	$3,417,235	$0	$3,417,235	$55,908,582	**9.09%**
5. Total Expenditures	**$552,063,899**	**$15,113,675**	**$567,177,574**	**$44,892,127**	**$2,830,753**	**$47,722,880**	**$614,900,454**	**100.00%**

Austin FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
AUSTIN	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$3,720,686**	**$406,325**	**$4,127,011**	**$196,076**	**$16,925**	**$213,001**	**$4,340,012**	**83.96%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$286,313	$28,000	$314,313	$0	$0	$0	$314,313	**6.08%**
c. Early Intervention Services (EIS)	$177,143	$3,769	$180,912	$51,826	$0	$51,826	$232,738	**4.50%**
d. Health Insurance Premium & Cost Sharing Assistance	$321,762	$40,806	$362,568	$0	$0	$0	$362,568	**7.01%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$554,899	$38,975	$593,874	$144,250	$16,925	$161,175	$755,049	**14.61%**
i. Medical Nutrition Therapy	$84,042	$10,799	$94,841	$0	$0	$0	$94,841	**1.83%**
j. Mental Health Services	$251,160	$9,000	$260,160	$0	$0	$0	$260,160	**5.03%**
k. Oral Health Care	$503,818	$50,633	$554,451	$0	$0	$0	$554,451	**10.73%**
l. Outpatient /Ambulatory Health Services	$1,408,904	$188,394	$1,597,298	$0	$0	$0	$1,597,298	**30.90%**
m. Substance Abuse Outpatient Care	$132,645	$35,949	$168,594	$0	$0	$0	$168,594	**3.26%**
2. Support Services Subtotal	**$651,026**	**$43,593**	**$694,619**	**$134,278**	**$0**	**$134,278**	**$828,897**	**16.04%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$69,374	$0	$69,374	$0	$0	$0	$69,374	**1.34%**
c. Food Bank/Home Delivered Meals	$108,218	$4,861	$113,079	$0	$0	$0	$113,079	**2.19%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$155,291	$22,869	$178,160	$0	$0	$0	$178,160	**3.45%**
f. Linguistic Services	$8,695	$0	$8,695	$0	$0	$0	$8,695	**0.17%**
g. Medical Transportation	$32,753	$0	$32,753	$0	$0	$0	$32,753	**0.63%**
h. Non-Medical Case Management Services	$216,761	$15,863	$232,624	$134,278	$0	$134,278	$366,902	**7.10%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$59,934	$0	$59,934	$0	$0	$0	$59,934	**1.16%**
3. Total Service Expenditures	**$4,371,712**	**$449,918**	**$4,821,630**	**$330,354**	**$16,925**	**$347,279**	**$5,168,909**	**100.00%**
4. Non-services Subtotal	**$764,064**	**$0**	**$764,064**	**$31,749**	**$0**	**$31,749**	**$795,813**	**13.34%**
a. Clinical Quality Management	$254,459	$0	$254,459	$2,695	$0	$2,695	$257,154	**4.31%**
b. Recipient Administration	$509,605	$0	$509,605	$29,054	$0	$29,054	$538,659	**9.03%**
5. Total Expenditures	**$5,135,776**	**$449,918**	**$5,585,694**	**$362,103**	**$16,925**	**$379,028**	**$5,964,722**	**100.00%**

Baltimore FY2023 Part A and MAI Expenditure Report

BALTIMORE	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$7,216,628**	**$521,788**	**$7,738,416**	**$583,374**	**$0**	**$583,374**	**$8,321,790**	**62.50%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$114,563	$0	$114,563	$0	$0	$0	$114,563	**0.86%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$79,934	$0	$79,934	$0	$0	$0	$79,934	**0.60%**
e. Home and Community-Based Health Services	$21,167	$0	$21,167	$0	$0	$0	$21,167	**0.16%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$2,222,843	$138,624	$2,361,467	$384,364	$0	$384,364	$2,745,831	**20.62%**
i. Medical Nutrition Therapy	$263,263	$0	$263,263	$0	$0	$0	$263,263	**1.98%**
j. Mental Health Services	$408,690	$0	$408,690	$199,010	$0	$199,010	$607,700	**4.56%**
k. Oral Health Care	$892,092	$0	$892,092	$0	$0	$0	$892,092	**6.70%**
l. Outpatient /Ambulatory Health Services	$2,931,922	$383,164	$3,315,086	$0	$0	$0	$3,315,086	**24.90%**
m. Substance Abuse Outpatient Care	$282,154	$0	$282,154	$0	$0	$0	$282,154	**2.12%**
2. Support Services Subtotal	**$4,380,494**	**$0**	**$4,380,494**	**$613,258**	**$0**	**$613,258**	**$4,993,752**	**37.50%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$505,372	$0	$505,372	$14,584	$0	$14,584	$519,956	**3.90%**
c. Food Bank/Home Delivered Meals	$769,316	$0	$769,316	$0	$0	$0	$769,316	**5.78%**
d. Health Education/Risk Reduction	$0	$0	$0	$84,389	$0	$84,389	$84,389	**0.63%**
e. Housing	$1,223,778	$0	$1,223,778	$56,144	$0	$56,144	$1,279,922	**9.61%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$370,267	$0	$370,267	$0	$0	$0	$370,267	**2.78%**
h. Non-Medical Case Management Services	$616,115	$0	$616,115	$0	$0	$0	$616,115	**4.63%**
i. Other Professional Services	$187,992	$0	$187,992	$0	$0	$0	$187,992	**1.41%**
j. Outreach Services	$388,517	$0	$388,517	$458,141	$0	$458,141	$846,658	**6.36%**
k. Psychosocial Support Services	$319,137	$0	$319,137	$0	$0	$0	$319,137	**2.40%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$11,597,122**	**$521,788**	**$12,118,910**	**$1,196,632**	**$0**	**$1,196,632**	**$13,315,542**	**100.00%**
4. Non-services Subtotal	**$1,777,180**	**$0**	**$1,777,180**	**$94,779**	**$0**	**$94,779**	**$1,871,959**	**12.33%**
a. Clinical Quality Management	$362,212	$0	$362,212	$0	$0	$0	$362,212	**2.38%**
b. Recipient Administration	$1,414,968	$0	$1,414,968	$94,779	$0	$94,779	$1,509,747	**9.94%**
5. Total Expenditures	**$13,374,302**	**$521,788**	**$13,896,090**	**$1,291,411**	**$0**	**$1,291,411**	**$15,187,501**	**100.00%**

Baton Rouge FY2023 Part A and MAI Expenditure Report

BATON ROUGE	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$2,334,684**	**$110,449**	**$2,445,133**	**$249,983**	**$11,098**	**$261,081**	**$2,706,214**	**67.51%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$6,040	$0	$6,040	$0	$0	$0	$6,040	**0.15%**
c. Early Intervention Services (EIS)	$392,751	$0	$392,751	$184,881	$0	$184,881	$577,632	**14.41%**
d. Health Insurance Premium & Cost Sharing Assistance	$7,407	$0	$7,407	$0	$0	$0	$7,407	**0.18%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$969,173	$110,449	$1,079,622	$65,102	$11,098	$76,200	$1,155,822	**28.83%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$182,174	$0	$182,174	$0	$0	$0	$182,174	**4.54%**
k. Oral Health Care	$650,094	$0	$650,094	$0	$0	$0	$650,094	**16.22%**
l. Outpatient /Ambulatory Health Services	$99,156	$0	$99,156	$0	$0	$0	$99,156	**2.47%**
m. Substance Abuse Outpatient Care	$27,889	$0	$27,889	$0	$0	$0	$27,889	**0.70%**
2. Support Services Subtotal	**$1,179,569**	**$0**	**$1,179,569**	**$104,558**	**$18,280**	**$122,838**	**$1,302,407**	**32.49%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$355,805	$0	$355,805	$0	$0	$0	$355,805	**8.88%**
c. Food Bank/Home Delivered Meals	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$210,469	$0	$210,469	$49,273	$12,682	$61,955	$272,424	**6.80%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$249,011	$0	$249,011	$55,285	$5,598	$60,883	$309,894	**7.73%**
h. Non-Medical Case Management Services	$234,923	$0	$234,923	$0	$0	$0	$234,923	**5.86%**
i. Other Professional Services	$127,775	$0	$127,775	$0	$0	$0	$127,775	**3.19%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$1,586	$0	$1,586	$0	$0	$0	$1,586	**0.04%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,514,253**	**$110,449**	**$3,624,702**	**$354,541**	**$29,378**	**$383,919**	**$4,008,621**	**100.00%**
4. Non-services Subtotal	**$610,110**	**$0**	**$610,110**	**$56,362**	**$0**	**$56,362**	**$666,472**	**14.26%**
a. Clinical Quality Management	$196,636	$0	$196,636	$19,841	$0	$19,841	$216,477	**4.63%**
b. Recipient Administration	$413,474	$0	$413,474	$36,521	$0	$36,521	$449,995	**9.63%**
5. Total Expenditures	**$4,124,363**	**$110,449**	**$4,234,812**	**$410,903**	**$29,378**	**$440,281**	**$4,675,093**	**100.00%**

Bergen-Passaic FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
BERGEN-PASSAIC	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$2,681,317**	**$0**	**$2,681,317**	**$113,701**	**$0**	**$113,701**	**$2,795,018**	**82.75%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$103,350	$0	$103,350	$13,202	$0	$13,202	$116,552	**3.45%**
d. Health Insurance Premium & Cost Sharing Assistance	$30,242	$0	$30,242	$0	$0	$0	$30,242	**0.90%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$266,169	$0	$266,169	$0	$0	$0	$266,169	**7.88%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$168,338	$0	$168,338	$0	$0	$0	$168,338	**4.98%**
k. Oral Health Care	$50,896	$0	$50,896	$0	$0	$0	$50,896	**1.51%**
l. Outpatient /Ambulatory Health Services	$1,914,664	$0	$1,914,664	$0	$0	$0	$1,914,664	**56.68%**
m. Substance Abuse Outpatient Care	$147,658	$0	$147,658	$100,499	$0	$100,499	$248,157	**7.35%**
2. Support Services Subtotal	**$450,917**	**$0**	**$450,917**	**$131,850**	**$0**	**$131,850**	**$582,767**	**17.25%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$46,749	$0	$46,749	$0	$0	$0	$46,749	**1.38%**
d. Health Education/Risk Reduction	$0	$0	$0	$47,707	$0	$47,707	$47,707	**1.41%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$42,696	$0	$42,696	$0	$0	$0	$42,696	**1.26%**
h. Non-Medical Case Management Services	$306,822	$0	$306,822	$84,143	$0	$84,143	$390,965	**11.57%**
i. Other Professional Services	$37,482	$0	$37,482	$0	$0	$0	$37,482	**1.11%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$17,168	$0	$17,168	$0	$0	$0	$17,168	**0.51%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,132,234**	**$0**	**$3,132,234**	**$245,551**	**$0**	**$245,551**	**$3,377,785**	**100.00%**
4. Non-services Subtotal	**$536,476**	**$0**	**$536,476**	**$0**	**$0**	**$0**	**$536,476**	**13.71%**
a. Clinical Quality Management	$200,000	$0	$200,000	$0	$0	$0	$200,000	**5.11%**
b. Recipient Administration	$336,476	$0	$336,476	$0	$0	$0	$336,476	**8.60%**
5. Total Expenditures	**$3,668,710**	**$0**	**$3,668,710**	**$245,551**	**$0**	**$245,551**	**$3,914,261**	**100.00%**

Boston FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
BOSTON	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$7,061,534**	**$0**	**$7,061,534**	**$456,832**	**$0**	**$456,832**	**$7,518,366**	**59.53%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$157,344	$0	$157,344	$0	$0	$0	$157,344	**1.25%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$4,185,223	$0	$4,185,223	$456,832	$0	$456,832	$4,642,055	**36.76%**
i. Medical Nutrition Therapy	$1,191,859	$0	$1,191,859	$0	$0	$0	$1,191,859	**9.44%**
j. Mental Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Oral Health Care	$1,527,108	$0	$1,527,108	$0	$0	$0	$1,527,108	**12.09%**
l. Outpatient /Ambulatory Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$4,719,333**	**$0**	**$4,719,333**	**$391,830**	**$0**	**$391,830**	**$5,111,163**	**40.47%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$223,793	$0	$223,793	$38,493	$0	$38,493	$262,286	**2.08%**
c. Food Bank/Home Delivered Meals	$876,608	$0	$876,608	$0	$0	$0	$876,608	**6.94%**
d. Health Education/Risk Reduction	$316,820	$0	$316,820	$0	$0	$0	$316,820	**2.51%**
e. Housing	$1,379,616	$0	$1,379,616	$0	$0	$0	$1,379,616	**10.92%**
f. Linguistic Services	$36,224	$0	$36,224	$0	$0	$0	$36,224	**0.29%**
g. Medical Transportation	$174,952	$0	$174,952	$0	$0	$0	$174,952	**1.39%**
h. Non-Medical Case Management Services	$880,236	$0	$880,236	$179,490	$0	$179,490	$1,059,726	**8.39%**
i. Other Professional Services	$50,581	$0	$50,581	$75,586	$0	$75,586	$126,167	**1.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$780,503	$0	$780,503	$98,261	$0	$98,261	$878,764	**6.96%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$11,780,867**	**$0**	**$11,780,867**	**$848,662**	**$0**	**$848,662**	**$12,629,529**	**100.00%**
4. Non-services Subtotal	**$1,510,029**	**$0**	**$1,510,029**	**$137,073**	**$0**	**$137,073**	**$1,647,102**	**11.54%**
a. Clinical Quality Management	$335,074	$0	$335,074	$35,681	$0	$35,681	$370,755	**2.60%**
b. Recipient Administration	$1,174,955	$0	$1,174,955	$101,392	$0	$101,392	$1,276,347	**8.94%**
5. Total Expenditures	**$13,290,896**	**$0**	**$13,290,896**	**$985,735**	**$0**	**$985,735**	**$14,276,631**	**100.00%**

Charlotte-Gastonia FY2023 Part A and MAI Expenditure Report

Charlotte	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$4,045,357**	**$198,975**	**$4,244,332**	**$361,700**	**$96,641**	**$458,341**	**$4,702,673**	**92.57%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$9,828	$0	$9,828	$78,815	$0	$78,815	$88,643	**1.74%**
d. Health Insurance Premium & Cost Sharing Assistance	$692,775	$99,487	$792,262	$0	$0	$0	$792,262	**15.60%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$472,088	$0	$472,088	$133,720	$0	$133,720	$605,808	**11.92%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$46,207	$0	$46,207	$0	$0	$0	$46,207	**0.91%**
k. Oral Health Care	$869,772	$0	$869,772	$0	$0	$0	$869,772	**17.12%**
l. Outpatient /Ambulatory Health Services	$1,954,687	$99,488	$2,054,175	$149,165	$96,641	$245,806	$2,299,981	**45.27%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$377,557**	**$0**	**$377,557**	**$0**	**$0**	**$0**	**$377,557**	**7.43%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$12,519	$0	$12,519	$0	$0	$0	$12,519	**0.25%**
c. Food Bank/Home Delivered Meals	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$173,736	$0	$173,736	$0	$0	$0	$173,736	**3.42%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$49,072	$0	$49,072	$0	$0	$0	$49,072	**0.97%**
l. Referral for Health Care and Support Services	$142,230	$0	$142,230	$0	$0	$0	$142,230	**2.80%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,422,914**	**$198,975**	**$4,621,889**	**$361,700**	**$96,641**	**$458,341**	**$5,080,230**	**100.00%**
4. Non-services Subtotal	**$701,427**	**$0**	**$701,427**	**$59,738**	**$0**	**$59,738**	**$761,165**	**13.03%**
a. Clinical Quality Management	$103,054	$0	$103,054	$9,894	$0	$9,894	$112,948	**1.93%**
b. Recipient Administration	$598,373	$0	$598,373	$49,844	$0	$49,844	$648,217	**11.10%**
5. Total Expenditures	**$5,124,341**	**$198,975**	**$5,323,316**	**$421,438**	**$96,641**	**$518,079**	**$5,841,395**	**100.00%**

Cleveland FY2023 Part A and MAI Expenditure Report

CLEVELAND	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,039,048**	**$116,413**	**$3,155,461**	**$342,240**	**$0**	**$342,240**	**$3,497,701**	**80.87%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$279,241	$0	$279,241	$0	$0	$0	$279,241	**6.46%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$54,365	$0	$54,365	$0	$0	$0	$54,365	**1.26%**
f. Home Health Care	$11,717	$0	$11,717	$0	$0	$0	$11,717	**0.27%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$877,632	$116,413	$994,045	$192,240	$0	$192,240	$1,186,285	**27.43%**
i. Medical Nutrition Therapy	$76,013	$0	$76,013	$0	$0	$0	$76,013	**1.76%**
j. Mental Health Services	$267,929	$0	$267,929	$0	$0	$0	$267,929	**6.19%**
k. Oral Health Care	$249,789	$0	$249,789	$0	$0	$0	$249,789	**5.78%**
l. Outpatient /Ambulatory Health Services	$1,222,362	$0	$1,222,362	$150,000	$0	$150,000	$1,372,362	**31.73%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$798,962**	**$28,674**	**$827,636**	**$0**	**$0**	**$0**	**$827,636**	**19.13%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$2,873	$0	$2,873	$0	$0	$0	$2,873	**0.07%**
c. Food Bank/Home Delivered Meals	$87,062	$0	$87,062	$0	$0	$0	$87,062	**2.01%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$115,597	$0	$115,597	$0	$0	$0	$115,597	**2.67%**
h. Non-Medical Case Management Services	$342,080	$0	$342,080	$0	$0	$0	$342,080	**7.91%**
i. Other Professional Services	$196,357	$28,674	$225,031	$0	$0	$0	$225,031	**5.20%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$54,993	$0	$54,993	$0	$0	$0	$54,993	**1.27%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,838,010**	**$145,087**	**$3,983,097**	**$342,240**	**$0**	**$342,240**	**$4,325,337**	**100.00%**
4. Non-services Subtotal	**$605,416**	**$0**	**$605,416**	**$38,026**	**$0**	**$38,026**	**$643,442**	**12.95%**
a. Clinical Quality Management	$159,466	$0	$159,466	$0	$0	$0	$159,466	**3.21%**
b. Recipient Administration	$445,950	$0	$445,950	$38,026	$0	$38,026	$483,976	**9.74%**
5. Total Expenditures	**$4,443,426**	**$145,087**	**$4,588,513**	**$380,266**	**$0**	**$380,266**	**$4,968,779**	**100.00%**

Columbus FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
COLUMBUS	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$2,781,175**	**$0**	**$2,781,175**	**$304,900**	**$0**	**$304,900**	**$3,086,075**	**80.24%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$106,346	$0	$106,346	$304,900	$0	$304,900	$411,246	**10.69%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,281,192	$0	$1,281,192	$0	$0	$0	$1,281,192	**33.31%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$400,298	$0	$400,298	$0	$0	$0	$400,298	**10.41%**
k. Oral Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Outpatient /Ambulatory Health Services	$993,339	$0	$993,339	$0	$0	$0	$993,339	**25.83%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$759,974**	**$0**	**$759,974**	**$0**	**$0**	**$0**	**$759,974**	**19.76%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$25,748	$0	$25,748	$0	$0	$0	$25,748	**0.67%**
c. Food Bank/Home Delivered Meals	$101,266	$0	$101,266	$0	$0	$0	$101,266	**2.63%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$260,838	$0	$260,838	$0	$0	$0	$260,838	**6.78%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$1,317	$0	$1,317	$0	$0	$0	$1,317	**0.03%**
h. Non-Medical Case Management Services	$370,805	$0	$370,805	$0	$0	$0	$370,805	**9.64%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,541,149**	**$0**	**$3,541,149**	**$304,900**	**$0**	**$304,900**	**$3,846,049**	**100.00%**
4. Non-services Subtotal	**$694,088**	**$0**	**$694,088**	**$0**	**$0**	**$0**	**$694,088**	**15.29%**
a. Clinical Quality Management	$233,210	$0	$233,210	$0	$0	$0	$233,210	**5.14%**
b. Recipient Administration	$460,878	$0	$460,878	$0	$0	$0	$460,878	**10.15%**
5. Total Expenditures	**$4,235,237**	**$0**	**$4,235,237**	**$304,900**	**$0**	**$304,900**	**$4,540,137**	**100.00%**

Dallas FY2023 Part A and MAI Expenditure Report

DALLAS	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$12,436,476**	**$374,717**	**$12,811,193**	**$1,113,400**	**$12,234**	**$1,125,634**	**$13,936,827**	**76.39%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$714,150	$0	$714,150	$35,724	$0	$35,724	$749,874	**4.11%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$1,563,669	$0	$1,563,669	$0	$0	$0	$1,563,669	**8.57%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$991,023	$0	$991,023	$114,942	$0	$114,942	$1,105,965	**6.06%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$200,920	$0	$200,920	$0	$0	$0	$200,920	**1.10%**
k. Oral Health Care	$1,994,610	$0	$1,994,610	$109,355	$0	$109,355	$2,103,965	**11.53%**
l. Outpatient /Ambulatory Health Services	$6,866,160	$374,717	$7,240,877	$853,379	$12,234	$865,613	$8,106,490	**44.44%**
m. Substance Abuse Outpatient Care	$105,944	$0	$105,944	$0	$0	$0	$105,944	**0.58%**
2. Support Services Subtotal	**$3,984,159**	**$20,000**	**$4,004,159**	**$302,150**	**$0**	**$302,150**	**$4,306,309**	**23.61%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$758,434	$0	$758,434	$0	$0	$0	$758,434	**4.16%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$348,824	$0	$348,824	$0	$0	$0	$348,824	**1.91%**
f. Linguistic Services	$13,381	$0	$13,381	$0	$0	$0	$13,381	**0.07%**
g. Medical Transportation	$1,205,029	$0	$1,205,029	$0	$0	$0	$1,205,029	**6.61%**
h. Non-Medical Case Management Services	$1,334,147	$0	$1,334,147	$302,150	$0	$302,150	$1,636,297	**8.97%**
i. Other Professional Services	$124,244	$20,000	$144,244	$0	$0	$0	$144,244	**0.79%**
j. Outreach Services	$32,749	$0	$32,749	$0	$0	$0	$32,749	**0.18%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$165,726	$0	$165,726	$0	$0	$0	$165,726	**0.91%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$1,625	$0	$1,625	$0	$0	$0	$1,625	**0.01%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$16,420,635**	**$394,717**	**$16,815,352**	**$1,415,550**	**$12,234**	**$1,427,784**	**$18,243,136**	**100.00%**
4. Non-services Subtotal	**$2,212,686**	**$0**	**$2,212,686**	**$156,184**	**$0**	**$156,184**	**$2,368,870**	**11.49%**
a. Clinical Quality Management	$591,039	$0	$591,039	$27,268	$0	$27,268	$618,307	**3.00%**
b. Recipient Administration	$1,621,647	$0	$1,621,647	$128,916	$0	$128,916	$1,750,563	**8.49%**
5. Total Expenditures	**$18,633,321**	**$394,717**	**$19,028,038**	**$1,571,734**	**$12,234**	**$1,583,968**	**$20,612,006**	**100.00%**

Denver FY2023 Part A and MAI Expenditure Report

DENVER	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$4,775,407**	**$0**	**$4,775,407**	**$294,122**	**$0**	**$294,122**	**$5,069,529**	**76.91%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$251,637	$0	$251,637	$70,646	$0	$70,646	$322,283	**4.89%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,529,984	$0	$1,529,984	$118,118	$0	$118,118	$1,648,102	**25.00%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$277,576	$0	$277,576	$54,341	$0	$54,341	$331,917	**5.04%**
k. Oral Health Care	$832,541	$0	$832,541	$0	$0	$0	$832,541	**12.63%**
l. Outpatient /Ambulatory Health Services	$1,687,806	$0	$1,687,806	$0	$0	$0	$1,687,806	**25.60%**
m. Substance Abuse Outpatient Care	$195,863	$0	$195,863	$51,017	$0	$51,017	$246,880	**3.75%**
2. Support Services Subtotal	**$1,481,992**	**$0**	**$1,481,992**	**$40,273**	**$0**	**$40,273**	**$1,522,265**	**23.09%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$368,797	$0	$368,797	$0	$0	$0	$368,797	**5.59%**
c. Food Bank/Home Delivered Meals	$251,739	$0	$251,739	$0	$0	$0	$251,739	**3.82%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$368,797	$0	$368,797	$0	$0	$0	$368,797	**5.59%**
f. Linguistic Services	$16,681	$0	$16,681	$0	$0	$0	$16,681	**0.25%**
g. Medical Transportation	$124,005	$0	$124,005	$0	$0	$0	$124,005	**1.88%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$45,972	$0	$45,972	$0	$0	$0	$45,972	**0.70%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$306,001	$0	$306,001	$40,273	$0	$40,273	$346,274	**5.25%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$6,257,399**	**$0**	**$6,257,399**	**$334,395**	**$0**	**$334,395**	**$6,591,794**	**100.00%**
4. Non-services Subtotal	**$1,054,875**	**$0**	**$1,054,875**	**$59,225**	**$0**	**$59,225**	**$1,114,100**	**14.46%**
a. Clinical Quality Management	$350,891	$0	$350,891	$19,741	$0	$19,741	$370,632	**4.81%**
b. Recipient Administration	$703,984	$0	$703,984	$39,484	$0	$39,484	$743,468	**9.65%**
5. Total Expenditures	**$7,312,274**	**$0**	**$7,312,274**	**$393,620**	**$0**	**$393,620**	**$7,705,894**	**100.00%**

Detroit FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
DETROIT	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$6,300,297**	**$175,669**	**$6,475,966**	**$686,185**	**$77,024**	**$763,209**	**$7,239,175**	**78.13%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$1,765,239	$0	$1,765,239	$322,677	$0	$322,677	$2,087,916	**22.54%**
d. Health Insurance Premium & Cost Sharing Assistance	$68,704	$0	$68,704	$0	$0	$0	$68,704	**0.74%**
e. Home and Community-Based Health Services	$31,515	$0	$31,515	$0	$0	$0	$31,515	**0.34%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,535,239	$0	$1,535,239	$0	$0	$0	$1,535,239	**16.57%**
i. Medical Nutrition Therapy	$215,640	$0	$215,640	$0	$0	$0	$215,640	**2.33%**
j. Mental Health Services	$254,214	$0	$254,214	$0	$0	$0	$254,214	**2.74%**
k. Oral Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Outpatient /Ambulatory Health Services	$2,429,746	$175,669	$2,605,415	$363,508	$77,024	$440,532	$3,045,947	**32.88%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$1,900,910**	**$125,000**	**$2,025,910**	**$0**	**$0**	**$0**	**$2,025,910**	**21.87%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$494,778	$40,000	$534,778	$0	$0	$0	$534,778	**5.77%**
c. Food Bank/Home Delivered Meals	$472,664	$0	$472,664	$0	$0	$0	$472,664	**5.10%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$74,776	$0	$74,776	$0	$0	$0	$74,776	**0.81%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$528,547	$70,000	$598,547	$0	$0	$0	$598,547	**6.46%**
h. Non-Medical Case Management Services	$187,567	$0	$187,567	$0	$0	$0	$187,567	**2.02%**
i. Other Professional Services	$65,228	$15,000	$80,228	$0	$0	$0	$80,228	**0.87%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$77,350	$0	$77,350	$0	$0	$0	$77,350	**0.83%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$8,201,207**	**$300,669**	**$8,501,876**	**$686,185**	**$77,024**	**$763,209**	**$9,265,085**	**100.00%**
4. Non-services Subtotal	**$822,233**	**$0**	**$822,233**	**$77,108**	**$0**	**$77,108**	**$899,341**	**8.85%**
a. Clinical Quality Management	$239,216	$0	$239,216	$37,381	$0	$37,381	$276,597	**2.72%**
b. Recipient Administration	$583,017	$0	$583,017	$39,727	$0	$39,727	$622,744	**6.13%**
5. Total Expenditures	**$9,023,440**	**$300,669**	**$9,324,109**	**$763,293**	**$77,024**	**$840,317**	**$10,164,426**	**100.00%**

District of Columbia FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
DISTRICT OF COLUMBIA	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$15,497,490**	**$506,502**	**$16,003,992**	**$1,676,506**	**$0**	**$1,676,506**	**$17,680,498**	**62.48%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$4,585,793	$0	$4,585,793	$421,699	$0	$421,699	$5,007,492	**17.69%**
d. Health Insurance Premium & Cost Sharing Assistance	$86,000	$0	$86,000	$0	$0	$0	$86,000	**0.30%**
e. Home and Community-Based Health Services	$126,233	$0	$126,233	$0	$0	$0	$126,233	**0.45%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$3,087,162	$506,502	$3,593,664	$323,214	$0	$323,214	$3,916,878	**13.84%**
i. Medical Nutrition Therapy	$354,715	$0	$354,715	$0	$0	$0	$354,715	**1.25%**
j. Mental Health Services	$629,163	$0	$629,163	$258,239	$0	$258,239	$887,402	**3.14%**
k. Oral Health Care	$1,606,730	$0	$1,606,730	$0	$0	$0	$1,606,730	**5.68%**
l. Outpatient /Ambulatory Health Services	$4,674,341	$0	$4,674,341	$536,916	$0	$536,916	$5,211,257	**18.42%**
m. Substance Abuse Outpatient Care	$347,353	$0	$347,353	$136,438	$0	$136,438	$483,791	**1.71%**
2. Support Services Subtotal	**$10,306,209**	**$0**	**$10,306,209**	**$312,226**	**$0**	**$312,226**	**$10,618,435**	**37.52%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$2,674,916	$0	$2,674,916	$0	$0	$0	$2,674,916	**9.45%**
c. Food Bank/Home Delivered Meals	$1,733,796	$0	$1,733,796	$0	$0	$0	$1,733,796	**6.13%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$707	$0	$707	$707	**0.00%**
g. Medical Transportation	$321,109	$0	$321,109	$2,417	$0	$2,417	$323,526	**1.14%**
h. Non-Medical Case Management Services	$3,045,914	$0	$3,045,914	$0	$0	$0	$3,045,914	**10.76%**
i. Other Professional Services	$419,366	$0	$419,366	$0	$0	$0	$419,366	**1.48%**
j. Outreach Services	$259,370	$0	$259,370	$3,981	$0	$3,981	$263,351	**0.93%**
k. Psychosocial Support Services	$1,851,738	$0	$1,851,738	$305,121	$0	$305,121	$2,156,859	**7.62%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$25,803,699**	**$506,502**	**$26,310,201**	**$1,988,732**	**$0**	**$1,988,732**	**$28,298,933**	**100.00%**
4. Non-services Subtotal	**$3,266,783**	**$0**	**$3,266,783**	**$107,689**	**$0**	**$107,689**	**$3,374,472**	**10.65%**
a. Clinical Quality Management	$539,886	$0	$539,886	$0	$0	$0	$539,886	**1.70%**
b. Recipient Administration	$2,726,897	$0	$2,726,897	$107,689	$0	$107,689	$2,834,586	**8.95%**
5. Total Expenditures	**$29,070,482**	**$506,502**	**$29,576,984**	**$2,096,421**	**$0**	**$2,096,421**	**$31,673,405**	**100.00%**

Ft. Lauderdale FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
FORT LAUDERDALE	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$10,016,434**	**$0**	**$10,016,434**	**$271,651**	**$454,874**	**$726,525**	**$10,742,959**	**75.08%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$253,904	$0	$253,904	$0	$0	$0	$253,904	**1.77%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$464,470	$0	$464,470	$0	$0	$0	$464,470	**3.25%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$783,648	$0	$783,648	$142,776	$125,000	$267,776	$1,051,424	**7.35%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$130,950	$0	$130,950	$56,317	$0	$56,317	$187,267	**1.31%**
k. Oral Health Care	$2,333,887	$0	$2,333,887	$0	$0	$0	$2,333,887	**16.31%**
l. Outpatient /Ambulatory Health Services	$6,019,732	$0	$6,019,732	$0	$0	$0	$6,019,732	**42.07%**
m. Substance Abuse Outpatient Care	$29,843	$0	$29,843	$72,558	$329,874	$402,432	$432,275	**3.02%**
2. Support Services Subtotal	**$2,827,116**	**$153,801**	**$2,980,917**	**$585,189**	**$0**	**$585,189**	**$3,566,106**	**24.92%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$978,721	$153,801	$1,132,522	$0	$0	$0	$1,132,522	**7.91%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Non-Medical Case Management Services	$1,720,528	$0	$1,720,528	$585,189	$0	$585,189	$2,305,717	**16.11%**
i. Other Professional Services	$127,867	$0	$127,867	$0	$0	$0	$127,867	**0.89%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$12,843,550**	**$153,801**	**$12,997,351**	**$856,840**	**$454,874**	**$1,311,714**	**$14,309,065**	**100.00%**
4. Non-services Subtotal	**$1,707,285**	**$0**	**$1,707,285**	**$171,292**	**$0**	**$171,292**	**$1,878,577**	**11.61%**
a. Clinical Quality Management	$576,503	$0	$576,503	$56,514	$0	$56,514	$633,017	**3.91%**
b. Recipient Administration	$1,130,782	$0	$1,130,782	$114,778	$0	$114,778	$1,245,560	**7.69%**
5. Total Expenditures	**$14,550,835**	**$153,801**	**$14,704,636**	**$1,028,132**	**$454,874**	**$1,483,006**	**$16,187,642**	**100.00%**

Ft. Worth FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
FORT WORTH	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$3,309,968**	**$0**	**$3,309,968**	**$219,267**	**$0**	**$219,267**	**$3,529,235**	**76.95%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$83,625	$0	$83,625	$0	$0	$0	$83,625	**1.82%**
c. Early Intervention Services (EIS)	$234,305	$0	$234,305	$112,163	$0	$112,163	$346,468	**7.55%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$516,681	$0	$516,681	$65,677	$0	$65,677	$582,358	**12.70%**
i. Medical Nutrition Therapy	$120,099	$0	$120,099	$0	$0	$0	$120,099	**2.62%**
j. Mental Health Services	$77,195	$0	$77,195	$0	$0	$0	$77,195	**1.68%**
k. Oral Health Care	$539,952	$0	$539,952	$0	$0	$0	$539,952	**11.77%**
l. Outpatient /Ambulatory Health Services	$1,738,111	$0	$1,738,111	$41,427	$0	$41,427	$1,779,538	**38.80%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$938,681**	**$0**	**$938,681**	**$118,623**	**$0**	**$118,623**	**$1,057,304**	**23.05%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$110,090	$0	$110,090	$15,074	$0	$15,074	$125,164	**2.73%**
c. Food Bank/Home Delivered Meals	$312,048	$0	$312,048	$0	$0	$0	$312,048	**6.80%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$324,897	$0	$324,897	$60,073	$0	$60,073	$384,970	**8.39%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Non-Medical Case Management Services	$170,000	$0	$170,000	$0	$0	$0	$170,000	**3.71%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$21,646	$0	$21,646	$0	$0	$0	$21,646	**0.47%**
l. Referral for Health Care and Support Services	$0	$0	$0	$43,476	$0	$43,476	$43,476	**0.95%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,248,649**	**$0**	**$4,248,649**	**$337,890**	**$0**	**$337,890**	**$4,586,539**	**100.00%**
4. Non-services Subtotal	**$633,127**	**$0**	**$633,127**	**$44,866**	**$0**	**$44,866**	**$677,993**	**12.88%**
a. Clinical Quality Management	$214,226	$0	$214,226	$17,022	$0	$17,022	$231,248	**4.39%**
b. Recipient Administration	$418,901	$0	$418,901	$27,844	$0	$27,844	$446,745	**8.49%**
5. Total Expenditures	**$4,881,776**	**$0**	**$4,881,776**	**$382,756**	**$0**	**$382,756**	**$5,264,532**	**100.00%**

Hartford FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
HARTFORD	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$1,832,301**	**$89,161**	**$1,921,462**	**$151,064**	**$22,650**	**$173,714**	**$2,095,176**	**76.91%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$183,681	$0	$183,681	$0	$0	$0	$183,681	**6.74%**
d. Health Insurance Premium & Cost Sharing Assistance	$16,043	$0	$16,043	$0	$0	$0	$16,043	**0.59%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$708,629	$0	$708,629	$43,558	$0	$43,558	$752,187	**27.61%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$80,239	$0	$80,239	$0	$0	$0	$80,239	**2.95%**
k. Oral Health Care	$105,409	$20,000	$125,409	$9,260	$22,650	$31,910	$157,319	**5.78%**
l. Outpatient /Ambulatory Health Services	$617,771	$69,161	$686,932	$98,246	$0	$98,246	$785,178	**28.82%**
m. Substance Abuse Outpatient Care	$120,529	$0	$120,529	$0	$0	$0	$120,529	**4.42%**
2. Support Services Subtotal	**$578,532**	**$0**	**$578,532**	**$50,353**	**$0**	**$50,353**	**$628,885**	**23.09%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$70,263	$0	$70,263	$0	$0	$0	$70,263	**2.58%**
c. Food Bank/Home Delivered Meals	$90,158	$0	$90,158	$0	$0	$0	$90,158	**3.31%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$214,673	$0	$214,673	$50,353	$0	$50,353	$265,026	**9.73%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$140,421	$0	$140,421	$0	$0	$0	$140,421	**5.15%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$63,017	$0	$63,017	$0	$0	$0	$63,017	**2.31%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$2,410,833**	**$89,161**	**$2,499,994**	**$201,417**	**$22,650**	**$224,067**	**$2,724,061**	**100.00%**
4. Non-services Subtotal	**$356,070**	**$0**	**$356,070**	**$35,542**	**$0**	**$35,542**	**$391,612**	**12.57%**
a. Clinical Quality Management	$89,275	$0	$89,275	$11,847	$0	$11,847	$101,122	**3.25%**
b. Recipient Administration	$266,795	$0	$266,795	$23,695	$0	$23,695	$290,490	**9.32%**
5. Total Expenditures	**$2,766,903**	**$89,161**	**$2,856,064**	**$236,959**	**$22,650**	**$259,609**	**$3,115,673**	**100.00%**

Houston FY2023 Part A and MAI Expenditure Report

HOUSTON	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$15,906,253**	**$1,108,325**	**$17,014,578**	**$2,334,656**	**$17,780**	**$2,352,436**	**$19,367,014**	**76.57%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$2,327,502	$0	$2,327,502	$0	$0	$0	$2,327,502	**9.20%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$1,700,122	$479,154	$2,179,276	$0	$0	$0	$2,179,276	**8.62%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,446,311	$63,063	$1,509,374	$181,745	$116	$181,861	$1,691,235	**6.69%**
i. Medical Nutrition Therapy	$338,531	$0	$338,531	$0	$0	$0	$338,531	**1.34%**
j. Mental Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Oral Health Care	$166,371	$30,429	$196,800	$0	$0	$0	$196,800	**0.78%**
l. Outpatient /Ambulatory Health Services	$9,902,416	$535,679	$10,438,095	$2,152,911	$17,664	$2,170,575	$12,608,670	**49.85%**
m. Substance Abuse Outpatient Care	$25,000	$0	$25,000	$0	$0	$0	$25,000	**0.10%**
2. Support Services Subtotal	**$5,744,512**	**$180,337**	**$5,924,849**	**$0**	**$0**	**$0**	**$5,924,849**	**23.43%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$3,643,482	$180,337	$3,823,819	$0	$0	$0	$3,823,819	**15.12%**
c. Food Bank/Home Delivered Meals	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$354,410	$0	$354,410	$0	$0	$0	$354,410	**1.40%**
h. Non-Medical Case Management Services	$1,524,148	$0	$1,524,148	$0	$0	$0	$1,524,148	**6.03%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$222,472	$0	$222,472	$0	$0	$0	$222,472	**0.88%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$21,650,765**	**$1,288,662**	**$22,939,427**	**$2,334,656**	**$17,780**	**$2,352,436**	**$25,291,863**	**100.00%**
4. Non-services Subtotal	**$2,200,182**	**$0**	**$2,200,182**	**$0**	**$0**	**$0**	**$2,200,182**	**8.00%**
a. Clinical Quality Management	$377,634	$0	$377,634	$0	$0	$0	$377,634	**1.37%**
b. Recipient Administration	$1,822,548	$0	$1,822,548	$0	$0	$0	$1,822,548	**6.63%**
5. Total Expenditures	**$23,850,947**	**$1,288,662**	**$25,139,609**	**$2,334,656**	**$17,780**	**$2,352,436**	**$27,492,045**	**100.00%**

Indianapolis FY2023 Part A and MAI Expenditure Report

Indianapolis	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$2,305,181**	**$82,502**	**$2,387,683**	**$97,147**	**$0**	**$97,147**	**$2,484,830**	**58.05%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$119,616	$8,235	$127,851	$0	$0	$0	$127,851	**2.99%**
c. Early Intervention Services (EIS)	$1,309,937	$0	$1,309,937	$51,461	$0	$51,461	$1,361,398	**31.80%**
d. Health Insurance Premium & Cost Sharing Assistance	$24,353	$0	$24,353	$0	$0	$0	$24,353	**0.57%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Medical Nutrition Therapy	$58,894	$0	$58,894	$0	$0	$0	$58,894	**1.38%**
j. Mental Health Services	$137,762	$0	$137,762	$0	$0	$0	$137,762	**3.22%**
k. Oral Health Care	$54,343	$0	$54,343	$0	$0	$0	$54,343	**1.27%**
l. Outpatient /Ambulatory Health Services	$600,276	$74,267	$674,543	$45,686	$0	$45,686	$720,229	**16.83%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$1,474,951**	**$85,441**	**$1,560,392**	**$175,748**	**$59,586**	**$235,334**	**$1,795,726**	**41.95%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$587,146	$16,336	$603,482	$0	$59,586	$59,586	$663,068	**15.49%**
c. Food Bank/Home Delivered Meals	$632,698	$64,680	$697,378	$0	$0	$0	$697,378	**16.29%**
d. Health Education/Risk Reduction	$0	$0	$0	$57,231	$0	$57,231	$57,231	**1.34%**
e. Housing	$133,210	$0	$133,210	$0	$0	$0	$133,210	**3.11%**
f. Linguistic Services	$393	$2,225	$2,618	$70,059	$0	$70,059	$72,677	**1.70%**
g. Medical Transportation	$98,549	$2,200	$100,749	$0	$0	$0	$100,749	**2.35%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$21,076	$0	$21,076	$48,458	$0	$48,458	$69,534	**1.62%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$1,879	$0	$1,879	$0	$0	$0	$1,879	**0.04%**
3. Total Service Expenditures	**$3,780,132**	**$167,943**	**$3,948,075**	**$272,895**	**$59,586**	**$332,481**	**$4,280,556**	**100.00%**
4. Non-services Subtotal	**$659,892**	**$0**	**$659,892**	**$46,873**	**$0**	**$46,873**	**$706,765**	**14.17%**
a. Clinical Quality Management	$208,372	$0	$208,372	$16,302	$0	$16,302	$224,674	**4.50%**
b. Recipient Administration	$451,520	$0	$451,520	$30,571	$0	$30,571	$482,091	**9.67%**
5. Total Expenditures	**$4,440,024**	**$167,943**	**$4,607,967**	**$319,768**	**$59,586**	**$379,354**	**$4,987,321**	**100.00%**

Jacksonville FY2023 Part A and MAI Expenditure Report

JACKSONVILLE	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,692,973**	**$182,780**	**$3,875,753**	**$480,342**	**$0**	**$480,342**	**$4,356,095**	**79.20%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$119,831	$0	$119,831	$0	$0	$0	$119,831	**2.18%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$614,614	$182,780	$797,394	$0	$0	$0	$797,394	**14.50%**
e. Home and Community-Based Health Services	$5,075	$0	$5,075	$0	$0	$0	$5,075	**0.09%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,287,527	$0	$1,287,527	$480,342	$0	$480,342	$1,767,869	**32.14%**
i. Medical Nutrition Therapy	$124,249	$0	$124,249	$0	$0	$0	$124,249	**2.26%**
j. Mental Health Services	$172,386	$0	$172,386	$0	$0	$0	$172,386	**3.13%**
k. Oral Health Care	$924,548	$0	$924,548	$0	$0	$0	$924,548	**16.81%**
l. Outpatient /Ambulatory Health Services	$444,743	$0	$444,743	$0	$0	$0	$444,743	**8.09%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$1,143,737**	**$0**	**$1,143,737**	**$0**	**$0**	**$0**	**$1,143,737**	**20.80%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$154,341	$0	$154,341	$0	$0	$0	$154,341	**2.81%**
d. Health Education/Risk Reduction	$4,932	$0	$4,932	$0	$0	$0	$4,932	**0.09%**
e. Housing	$23,324	$0	$23,324	$0	$0	$0	$23,324	**0.42%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$25,863	$0	$25,863	$0	$0	$0	$25,863	**0.47%**
h. Non-Medical Case Management Services	$192,470	$0	$192,470	$0	$0	$0	$192,470	**3.50%**
i. Other Professional Services	$262,653	$0	$262,653	$0	$0	$0	$262,653	**4.78%**
j. Outreach Services	$224,637	$0	$224,637	$0	$0	$0	$224,637	**4.08%**
k. Psychosocial Support Services	$11,380	$0	$11,380	$0	$0	$0	$11,380	**0.21%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$244,137	$0	$244,137	$0	$0	$0	$244,137	**4.44%**
3. Total Service Expenditures	**$4,836,710**	**$182,780**	**$5,019,490**	**$480,342**	**$0**	**$480,342**	**$5,499,832**	**100.00%**
4. Non-services Subtotal	**$441,158**	**$0**	**$441,158**	**$0**	**$0**	**$0**	**$441,158**	**7.43%**
a. Clinical Quality Management	$38,048	$0	$38,048	$0	$0	$0	$38,048	**0.64%**
b. Recipient Administration	$403,110	$0	$403,110	$0	$0	$0	$403,110	**6.79%**
5. Total Expenditures	**$5,277,868**	**$182,780**	**$5,460,648**	**$480,342**	**$0**	**$480,342**	**$5,940,990**	**100.00%**

Jersey City FY2023 Part A and MAI Expenditure Report

Jersey City	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,793,854**	**$0**	**$3,793,854**	**$281,564**	**$0**	**$281,564**	**$4,075,418**	**89.62%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$13,129	$0	$13,129	$0	$0	$0	$13,129	**0.29%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,708,036	$0	$1,708,036	$67,787	$0	$67,787	$1,775,823	**39.05%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$123,306	$0	$123,306	$0	$0	$0	$123,306	**2.71%**
k. Oral Health Care	$112,841	$0	$112,841	$0	$0	$0	$112,841	**2.48%**
l. Outpatient /Ambulatory Health Services	$1,807,502	$0	$1,807,502	$213,777	$0	$213,777	$2,021,279	**44.45%**
m. Substance Abuse Outpatient Care	$29,040	$0	$29,040	$0	$0	$0	$29,040	**0.64%**
2. Support Services Subtotal	**$316,207**	**$0**	**$316,207**	**$155,738**	**$0**	**$155,738**	**$471,945**	**10.38%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$129,660	$0	$129,660	$0	$0	$0	$129,660	**2.85%**
c. Food Bank/Home Delivered Meals	$99,875	$0	$99,875	$0	$0	$0	$99,875	**2.20%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$20,696	$0	$20,696	$0	$0	$0	$20,696	**0.46%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$65,976	$0	$65,976	$0	$0	$0	$65,976	**1.45%**
j. Outreach Services	$0	$0	$0	$155,738	$0	$155,738	$155,738	**3.42%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,110,061**	**$0**	**$4,110,061**	**$437,302**	**$0**	**$437,302**	**$4,547,363**	**100.00%**
4. Non-services Subtotal	**$373,191**	**$0**	**$373,191**	**$0**	**$0**	**$0**	**$373,191**	**7.58%**
a. Clinical Quality Management	$70,848	$0	$70,848	$0	$0	$0	$70,848	**1.44%**
b. Recipient Administration	$302,343	$0	$302,343	$0	$0	$0	$302,343	**6.14%**
5. Total Expenditures	**$4,483,252**	**$0**	**$4,483,252**	**$437,302**	**$0**	**$437,302**	**$4,920,554**	**100.00%**

Kansas City FY2023 Part A and MAI Expenditure Report

Kanas City	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$2,749,497**	**$70,470**	**$2,819,967**	**$188,367**	**$0**	**$188,367**	**$3,008,334**	**83.14%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$371,209	$0	$371,209	$0	$0	$0	$371,209	**10.26%**
d. Health Insurance Premium & Cost Sharing Assistance	$16,449	$0	$16,449	$0	$0	$0	$16,449	**0.45%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,516,116	$31,043	$1,547,159	$144,867	$0	$144,867	$1,692,026	**46.76%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$56,391	$0	$56,391	$0	$0	$0	$56,391	**1.56%**
k. Oral Health Care	$157,832	$11,198	$169,030	$0	$0	$0	$169,030	**4.67%**
l. Outpatient /Ambulatory Health Services	$587,524	$28,229	$615,753	$43,500	$0	$43,500	$659,253	**18.22%**
m. Substance Abuse Outpatient Care	$43,976	$0	$43,976	$0	$0	$0	$43,976	**1.22%**
2. Support Services Subtotal	**$538,269**	**$13,392**	**$551,661**	**$58,508**	**$0**	**$58,508**	**$610,169**	**16.86%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Education/Risk Reduction	$237,999	$0	$237,999	$18,012	$0	$18,012	$256,011	**7.08%**
e. Housing	$145,352	$13,392	$158,744	$0	$0	$0	$158,744	**4.39%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$154,918	$0	$154,918	$40,496	$0	$40,496	$195,414	**5.40%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,287,766**	**$83,862**	**$3,371,628**	**$246,875**	**$0**	**$246,875**	**$3,618,503**	**100.00%**
4. Non-services Subtotal	**$583,583**	**$0**	**$583,583**	**$33,015**	**$0**	**$33,015**	**$616,598**	**14.56%**
a. Clinical Quality Management	$177,345	$0	$177,345	$11,375	$0	$11,375	$188,720	**4.46%**
b. Recipient Administration	$406,238	$0	$406,238	$21,640	$0	$21,640	$427,878	**10.10%**
5. Total Expenditures	**$3,871,349**	**$83,862**	**$3,955,211**	**$279,890**	**$0**	**$279,890**	**$4,235,101**	**100.00%**

Las Vegas FY2023 Part A and MAI Expenditure Report

LAS VEGAS	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$4,173,862**	**$202,773**	**$4,376,635**	**$304,352**	**$14,500**	**$318,852**	**$4,695,487**	**79.96%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$619,324	$10,000	$629,324	$0	$0	$0	$629,324	**10.72%**
d. Health Insurance Premium & Cost Sharing Assistance	$3,988	$0	$3,988	$0	$0	$0	$3,988	**0.07%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,980,574	$84,000	$2,064,574	$159,078	$14,500	$173,578	$2,238,152	**38.11%**
i. Medical Nutrition Therapy	$411,863	$90,839	$502,702	$0	$0	$0	$502,702	**8.56%**
j. Mental Health Services	$178,338	$17,934	$196,272	$0	$0	$0	$196,272	**3.34%**
k. Oral Health Care	$23,964	$0	$23,964	$0	$0	$0	$23,964	**0.41%**
l. Outpatient /Ambulatory Health Services	$943,333	$0	$943,333	$145,274	$0	$145,274	$1,088,607	**18.54%**
m. Substance Abuse Outpatient Care	$12,478	$0	$12,478	$0	$0	$0	$12,478	**0.21%**
2. Support Services Subtotal	**$1,110,465**	**$0**	**$1,110,465**	**$66,605**	**$0**	**$66,605**	**$1,177,070**	**20.04%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$165,097	$0	$165,097	$0	$0	$0	$165,097	**2.81%**
c. Food Bank/Home Delivered Meals	$267,791	$0	$267,791	$0	$0	$0	$267,791	**4.56%**
d. Health Education/Risk Reduction	$191,959	$0	$191,959	$43,748	$0	$43,748	$235,707	**4.01%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$7,648	$0	$7,648	$0	$0	$0	$7,648	**0.13%**
g. Medical Transportation	$326,340	$0	$326,340	$0	$0	$0	$326,340	**5.56%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$151,630	$0	$151,630	$22,857	$0	$22,857	$174,487	**2.97%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,284,327**	**$202,773**	**$5,487,100**	**$370,957**	**$14,500**	**$385,457**	**$5,872,557**	**100.00%**
4. Non-services Subtotal	**$902,378**	**$0**	**$902,378**	**$74,804**	**$0**	**$74,804**	**$977,182**	**14.27%**
a. Clinical Quality Management	$290,660	$0	$290,660	$24,816	$0	$24,816	$315,476	**4.61%**
b. Recipient Administration	$611,718	$0	$611,718	$49,988	$0	$49,988	$661,706	**9.66%**
5. Total Expenditures	**$6,186,705**	**$202,773**	**$6,389,478**	**$445,761**	**$14,500**	**$460,261**	**$6,849,739**	**100.00%**

Los Angeles FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
LOS ANGELES	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$28,556,224**	**$0**	**$28,556,224**	**$0**	**$0**	**$0**	**$28,556,224**	**68.05%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$3,014,300	$0	$3,014,300	$0	$0	$0	$3,014,300	**7.18%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$2,614,732	$0	$2,614,732	$0	$0	$0	$2,614,732	**6.23%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$9,064,884	$0	$9,064,884	$0	$0	$0	$9,064,884	**21.60%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$109,422	$0	$109,422	$0	$0	$0	$109,422	**0.26%**
k. Oral Health Care	$7,188,786	$0	$7,188,786	$0	$0	$0	$7,188,786	**17.13%**
l. Outpatient /Ambulatory Health Services	$6,564,100	$0	$6,564,100	$0	$0	$0	$6,564,100	**15.64%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$9,414,977**	**$0**	**$9,414,977**	**$3,308,121**	**$685,010**	**$3,993,131**	**$13,408,108**	**31.95%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$2,614,115	$0	$2,614,115	$0	$0	$0	$2,614,115	**6.23%**
c. Food Bank/Home Delivered Meals	$3,381,611	$0	$3,381,611	$0	$0	$0	$3,381,611	**8.06%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$336,381	$0	$336,381	$2,986,005	$685,010	$3,671,015	$4,007,396	**9.55%**
f. Linguistic Services	$3,300	$0	$3,300	$0	$0	$0	$3,300	**0.01%**
g. Medical Transportation	$603,552	$0	$603,552	$0	$0	$0	$603,552	**1.44%**
h. Non-Medical Case Management Services	$1,464,979	$0	$1,464,979	$322,116	$0	$322,116	$1,787,095	**4.26%**
i. Other Professional Services	$537,627	$0	$537,627	$0	$0	$0	$537,627	**1.28%**
j. Outreach Services	$473,412	$0	$473,412	$0	$0	$0	$473,412	**1.13%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$37,971,201**	**$0**	**$37,971,201**	**$3,308,121**	**$685,010**	**$3,993,131**	**$41,964,332**	**100.00%**
4. Non-services Subtotal	**$5,013,681**	**$0**	**$5,013,681**	**$367,569**	**$0**	**$367,569**	**$5,381,250**	**11.37%**
a. Clinical Quality Management	$715,193	$0	$715,193	$0	$0	$0	$715,193	**1.51%**
b. Recipient Administration	$4,298,488	$0	$4,298,488	$367,569	$0	$367,569	$4,666,057	**9.86%**
5. Total Expenditures	**$42,984,882**	**$0**	**$42,984,882**	**$3,675,690**	**$685,010**	**$4,360,700**	**$47,345,582**	**100.00%**

Memphis FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
MEMPHIS	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$4,232,823**	**$0**	**$4,232,823**	**$485,660**	**$0**	**$485,660**	**$4,718,483**	**79.41%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$6,974	$0	$6,974	$0	$0	$0	$6,974	**0.12%**
c. Early Intervention Services (EIS)	$302,765	$0	$302,765	$165,378	$0	$165,378	$468,143	**7.88%**
d. Health Insurance Premium & Cost Sharing Assistance	$240,339	$0	$240,339	$0	$0	$0	$240,339	**4.04%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,301,689	$0	$1,301,689	$0	$0	$0	$1,301,689	**21.91%**
i. Medical Nutrition Therapy	$140,384	$0	$140,384	$0	$0	$0	$140,384	**2.36%**
j. Mental Health Services	$407,289	$0	$407,289	$20,118	$0	$20,118	$427,407	**7.19%**
k. Oral Health Care	$517,953	$0	$517,953	$0	$0	$0	$517,953	**8.72%**
l. Outpatient /Ambulatory Health Services	$1,254,754	$0	$1,254,754	$300,164	$0	$300,164	$1,554,918	**26.17%**
m. Substance Abuse Outpatient Care	$60,676	$0	$60,676	$0	$0	$0	$60,676	**1.02%**
2. Support Services Subtotal	**$1,129,075**	**$0**	**$1,129,075**	**$94,313**	**$0**	**$94,313**	**$1,223,388**	**20.59%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$503,935	$0	$503,935	$0	$0	$0	$503,935	**8.48%**
c. Food Bank/Home Delivered Meals	$349,317	$0	$349,317	$28,272	$0	$28,272	$377,589	**6.35%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$115,698	$0	$115,698	$0	$0	$0	$115,698	**1.95%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$42,968	$0	$42,968	$66,041	$0	$66,041	$109,009	**1.83%**
k. Psychosocial Support Services	$117,157	$0	$117,157	$0	$0	$0	$117,157	**1.97%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,361,898**	**$0**	**$5,361,898**	**$579,973**	**$0**	**$579,973**	**$5,941,871**	**100.00%**
4. Non-services Subtotal	**$945,688**	**$0**	**$945,688**	**$102,100**	**$0**	**$102,100**	**$1,047,788**	**14.99%**
a. Clinical Quality Management	$315,229	$0	$315,229	$34,000	$0	$34,000	$349,229	**5.00%**
b. Recipient Administration	$630,459	$0	$630,459	$68,100	$0	$68,100	$698,559	**9.99%**
5. Total Expenditures	**$6,307,586**	**$0**	**$6,307,586**	**$682,073**	**$0**	**$682,073**	**$6,989,659**	**100.00%**

Miami FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
MIAMI	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$17,727,221**	**$0**	**$17,727,221**	**$776,018**	**$813,314**	**$1,589,332**	**$19,316,553**	**81.16%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$1,110	$0	$1,110	$0	$0	$0	$1,110	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$324,143	$0	$324,143	$0	$0	$0	$324,143	**1.36%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$5,864,807	$0	$5,864,807	$271,005	$374,265	$645,270	$6,510,077	**27.35%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$56,046	$0	$56,046	$3,380	$0	$3,380	$59,426	**0.25%**
k. Oral Health Care	$3,631,549	$0	$3,631,549	$0	$0	$0	$3,631,549	**15.26%**
l. Outpatient /Ambulatory Health Services	$7,848,156	$0	$7,848,156	$501,603	$439,049	$940,652	$8,788,808	**36.93%**
m. Substance Abuse Outpatient Care	$1,410	$0	$1,410	$30	$0	$30	$1,440	**0.01%**
2. Support Services Subtotal	**$3,717,576**	**$723,098**	**$4,440,674**	**$44,114**	**$0**	**$44,114**	**$4,484,788**	**18.84%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$1,979,132	$723,098	$2,702,230	$0	$0	$0	$2,702,230	**11.35%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$191,281	$0	$191,281	$7,616	$0	$7,616	$198,897	**0.84%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$71,730	$0	$71,730	$0	$0	$0	$71,730	**0.30%**
j. Outreach Services	$117,183	$0	$117,183	$36,498	$0	$36,498	$153,681	**0.65%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$1,358,250	$0	$1,358,250	$0	$0	$0	$1,358,250	**5.71%**
3. Total Service Expenditures	**$21,444,797**	**$723,098**	**$22,167,895**	**$820,132**	**$813,314**	**$1,633,446**	**$23,801,341**	**100.00%**
4. Non-services Subtotal	**$2,608,220**	**$0**	**$2,608,220**	**$326,679**	**$0**	**$326,679**	**$2,934,899**	**10.98%**
a. Clinical Quality Management	$600,000	$0	$600,000	$100,000	$0	$100,000	$700,000	**2.62%**
b. Recipient Administration	$2,008,220	$0	$2,008,220	$226,679	$0	$226,679	$2,234,899	**8.36%**
5. Total Expenditures	**$24,053,017**	**$723,098**	**$24,776,115**	**$1,146,811**	**$813,314**	**$1,960,125**	**$26,736,240**	**100.00%**

Middlesex-Somerset-Hunterdon FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
MIDDLESEX	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$1,713,956**	**$0**	**$1,713,956**	**$195,523**	**$0**	**$195,523**	**$1,909,479**	**78.65%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$1,951	$0	$1,951	$0	$0	$0	$1,951	**0.08%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,122,090	$0	$1,122,090	$195,523	$0	$195,523	$1,317,613	**54.27%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$74,402	$0	$74,402	$0	$0	$0	$74,402	**3.06%**
k. Oral Health Care	$66,416	$0	$66,416	$0	$0	$0	$66,416	**2.74%**
l. Outpatient /Ambulatory Health Services	$232,887	$0	$232,887	$0	$0	$0	$232,887	**9.59%**
m. Substance Abuse Outpatient Care	$216,210	$0	$216,210	$0	$0	$0	$216,210	**8.91%**
2. Support Services Subtotal	**$518,218**	**$0**	**$518,218**	**$0**	**$0**	**$0**	**$518,218**	**21.35%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$99,842	$0	$99,842	$0	$0	$0	$99,842	**4.11%**
c. Food Bank/Home Delivered Meals	$95,939	$0	$95,939	$0	$0	$0	$95,939	**3.95%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$73,603	$0	$73,603	$0	$0	$0	$73,603	**3.03%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$6,777	$0	$6,777	$0	$0	$0	$6,777	**0.28%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$167,661	$0	$167,661	$0	$0	$0	$167,661	**6.91%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$74,396	$0	$74,396	$0	$0	$0	$74,396	**3.06%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$2,232,174**	**$0**	**$2,232,174**	**$195,523**	**$0**	**$195,523**	**$2,427,697**	**100.00%**
4. Non-services Subtotal	**$391,973**	**$0**	**$391,973**	**$35,446**	**$0**	**$35,446**	**$427,419**	**14.97%**
a. Clinical Quality Management	$130,267	$0	$130,267	$11,815	$0	$11,815	$142,082	**4.98%**
b. Recipient Administration	$261,706	$0	$261,706	$23,631	$0	$23,631	$285,337	**9.99%**
5. Total Expenditures	**$2,624,147**	**$0**	**$2,624,147**	**$230,969**	**$0**	**$230,969**	**$2,855,116**	**100.00%**

Minneapolis FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
MINNEAPOLIS	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$3,440,791**	**$0**	**$3,440,791**	**$342,636**	**$14,203**	**$356,839**	**$3,797,630**	**67.15%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$340,044	$0	$340,044	$0	$0	$0	$340,044	**6.01%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$84,361	$0	$84,361	$0	$0	$0	$84,361	**1.49%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,942,148	$0	$1,942,148	$271,666	$14,203	$285,869	$2,228,017	**39.39%**
i. Medical Nutrition Therapy	$43,999	$0	$43,999	$0	$0	$0	$43,999	**0.78%**
j. Mental Health Services	$139,903	$0	$139,903	$0	$0	$0	$139,903	**2.47%**
k. Oral Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Outpatient /Ambulatory Health Services	$786,507	$0	$786,507	$70,970	$0	$70,970	$857,477	**15.16%**
m. Substance Abuse Outpatient Care	$103,829	$0	$103,829	$0	$0	$0	$103,829	**1.84%**
2. Support Services Subtotal	**$1,405,941**	**$452,128**	**$1,858,069**	**$0**	**$0**	**$0**	**$1,858,069**	**32.85%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$761,617	$452,128	$1,213,745	$0	$0	$0	$1,213,745	**21.46%**
d. Health Education/Risk Reduction	$75,110	$0	$75,110	$0	$0	$0	$75,110	**1.33%**
e. Housing	$398,170	$0	$398,170	$0	$0	$0	$398,170	**7.04%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$93,389	$0	$93,389	$0	$0	$0	$93,389	**1.65%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$77,655	$0	$77,655	$0	$0	$0	$77,655	**1.37%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,846,732**	**$452,128**	**$5,298,860**	**$342,636**	**$14,203**	**$356,839**	**$5,655,699**	**100.00%**
4. Non-services Subtotal	**$742,872**	**$0**	**$742,872**	**$41,323**	**$0**	**$41,323**	**$784,195**	**12.18%**
a. Clinical Quality Management	$175,322	$0	$175,322	$12,571	$0	$12,571	$187,893	**2.92%**
b. Recipient Administration	$567,550	$0	$567,550	$28,752	$0	$28,752	$596,302	**9.26%**
5. Total Expenditures	**$5,589,604**	**$452,128**	**$6,041,732**	**$383,959**	**$14,203**	**$398,162**	**$6,439,894**	**100.00%**

Nashville FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
NASHVILLE	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$2,848,438**	**$0**	**$2,848,438**	**$243,720**	**$45,042**	**$288,762**	**$3,137,200**	**76.66%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$378,258	$0	$378,258	$32,173	$45,042	$77,215	$455,473	**11.13%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,186,454	$0	$1,186,454	$161,956	$0	$161,956	$1,348,410	**32.95%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$307,500	$0	$307,500	$4,443	$0	$4,443	$311,943	**7.62%**
k. Oral Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Outpatient /Ambulatory Health Services	$976,226	$0	$976,226	$45,148	$0	$45,148	$1,021,374	**24.96%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$395,496**	**$536,987**	**$932,483**	**$0**	**$22,818**	**$22,818**	**$955,301**	**23.34%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$24,954	$0	$24,954	$0	$0	$0	$24,954	**0.61%**
c. Food Bank/Home Delivered Meals	$64,363	$327,397	$391,760	$0	$0	$0	$391,760	**9.57%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$64,533	$0	$64,533	$0	$0	$0	$64,533	**1.58%**
f. Linguistic Services	$2,800	$0	$2,800	$0	$0	$0	$2,800	**0.07%**
g. Medical Transportation	$106,195	$0	$106,195	$0	$0	$0	$106,195	**2.59%**
h. Non-Medical Case Management Services	$69,580	$0	$69,580	$0	$0	$0	$69,580	**1.70%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$22,818	$22,818	$22,818	**0.56%**
k. Psychosocial Support Services	$0	$209,590	$209,590	$0	$0	$0	$209,590	**5.12%**
l. Referral for Health Care and Support Services	$63,071	$0	$63,071	$0	$0	$0	$63,071	**1.54%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,243,934**	**$536,987**	**$3,780,921**	**$243,720**	**$67,860**	**$311,580**	**$4,092,501**	**100.00%**
4. Non-services Subtotal	**$499,785**	**$0**	**$499,785**	**$30,577**	**$0**	**$30,577**	**$530,362**	**11.47%**
a. Clinical Quality Management	$124,686	$0	$124,686	$12,405	$0	$12,405	$137,091	**2.97%**
b. Recipient Administration	$375,099	$0	$375,099	$18,172	$0	$18,172	$393,271	**8.51%**
5. Total Expenditures	**$3,743,719**	**$536,987**	**$4,280,706**	**$274,297**	**$67,860**	**$342,157**	**$4,622,863**	**100.00%**

Nassau-Suffolk FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
NASSAU-SUFFOLK	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$3,248,446**	**$30,764**	**$3,279,210**	**$273,561**	**$0**	**$273,561**	**$3,552,771**	**72.79%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$103,356	$30,764	$134,120	$0	$0	$0	$134,120	**2.75%**
c. Early Intervention Services (EIS)	$41,133	$0	$41,133	$0	$0	$0	$41,133	**0.84%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,705,282	$0	$1,705,282	$163,500	$0	$163,500	$1,868,782	**38.29%**
i. Medical Nutrition Therapy	$217,609	$0	$217,609	$0	$0	$0	$217,609	**4.46%**
j. Mental Health Services	$871,217	$0	$871,217	$110,061	$0	$110,061	$981,278	**20.11%**
k. Oral Health Care	$302,905	$0	$302,905	$0	$0	$0	$302,905	**6.21%**
l. Outpatient /Ambulatory Health Services	$6,944	$0	$6,944	$0	$0	$0	$6,944	**0.14%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$1,228,345**	**$10,000**	**$1,238,345**	**$86,197**	**$3,373**	**$89,570**	**$1,327,915**	**27.21%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$128,730	$10,000	$138,730	$0	$0	$0	$138,730	**2.84%**
c. Food Bank/Home Delivered Meals	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$490,297	$0	$490,297	$86,197	$3,373	$89,570	$579,867	**11.88%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$609,318	$0	$609,318	$0	$0	$0	$609,318	**12.48%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,476,791**	**$40,764**	**$4,517,555**	**$359,758**	**$3,373**	**$363,131**	**$4,880,686**	**100.00%**
4. Non-services Subtotal	**$783,625**	**$0**	**$783,625**	**$63,076**	**$0**	**$63,076**	**$846,701**	**14.78%**
a. Clinical Quality Management	$263,464	$0	$263,464	$21,213	$0	$21,213	$284,677	**4.97%**
b. Recipient Administration	$520,161	$0	$520,161	$41,863	$0	$41,863	$562,024	**9.81%**
5. Total Expenditures	**$5,260,416**	**$40,764**	**$5,301,180**	**$422,834**	**$3,373**	**$426,207**	**$5,727,387**	**100.00%**

New Haven FY2023 Part A and MAI Expenditure Report

NEW HAVEN	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,287,180**	**$0**	**$3,287,180**	**$348,897**	**$0**	**$348,897**	**$3,636,077**	**77.36%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$32,988	$0	$32,988	$0	$0	$0	$32,988	**0.70%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,404,183	$0	$1,404,183	$348,897	$0	$348,897	$1,753,080	**37.30%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$704,515	$0	$704,515	$0	$0	$0	$704,515	**14.99%**
k. Oral Health Care	$144,952	$0	$144,952	$0	$0	$0	$144,952	**3.08%**
l. Outpatient /Ambulatory Health Services	$225,776	$0	$225,776	$0	$0	$0	$225,776	**4.80%**
m. Substance Abuse Outpatient Care	$774,766	$0	$774,766	$0	$0	$0	$774,766	**16.48%**
2. Support Services Subtotal	**$1,044,304**	**$14,070**	**$1,058,374**	**$5,933**	**$0**	**$5,933**	**$1,064,307**	**22.64%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$183,729	$0	$183,729	$0	$0	$0	$183,729	**3.91%**
c. Food Bank/Home Delivered Meals	$190,340	$14,070	$204,410	$5,933	$0	$5,933	$210,343	**4.48%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$221,056	$0	$221,056	$0	$0	$0	$221,056	**4.70%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$78,747	$0	$78,747	$0	$0	$0	$78,747	**1.68%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$370,432	$0	$370,432	$0	$0	$0	$370,432	**7.88%**
3. Total Service Expenditures	**$4,331,484**	**$14,070**	**$4,345,554**	**$354,830**	**$0**	**$354,830**	**$4,700,384**	**100.00%**
4. Non-services Subtotal	**$742,319**	**$0**	**$742,319**	**$48,694**	**$0**	**$48,694**	**$791,013**	**14.40%**
a. Clinical Quality Management	$241,493	$0	$241,493	$13,392	$0	$13,392	$254,885	**4.64%**
b. Recipient Administration	$500,826	$0	$500,826	$35,302	$0	$35,302	$536,128	**9.76%**
5. Total Expenditures	**$5,073,803**	**$14,070**	**$5,087,873**	**$403,524**	**$0**	**$403,524**	**$5,491,397**	**100.00%**

New Orleans FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
NEWORLEANS	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$4,103,437**	**$300,000**	**$4,403,437**	**$545,032**	**$0**	**$545,032**	**$4,948,469**	**59.33%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$77,669	$0	$77,669	$0	$0	$0	$77,669	**0.93%**
c. Early Intervention Services (EIS)	$9,680	$0	$9,680	$22,080	$0	$22,080	$31,760	**0.38%**
d. Health Insurance Premium & Cost Sharing Assistance	$29,550	$0	$29,550	$0	$0	$0	$29,550	**0.35%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,593,196	$200,000	$1,793,196	$484,485	$0	$484,485	$2,277,681	**27.31%**
i. Medical Nutrition Therapy	$62,619	$0	$62,619	$0	$0	$0	$62,619	**0.75%**
j. Mental Health Services	$752	$0	$752	$0	$0	$0	$752	**0.01%**
k. Oral Health Care	$1,622,932	$100,000	$1,722,932	$0	$0	$0	$1,722,932	**20.66%**
l. Outpatient /Ambulatory Health Services	$421,488	$0	$421,488	$38,467	$0	$38,467	$459,955	**5.51%**
m. Substance Abuse Outpatient Care	$285,551	$0	$285,551	$0	$0	$0	$285,551	**3.42%**
2. Support Services Subtotal	**$2,439,282**	**$873,837**	**$3,313,119**	**$78,936**	**$0**	**$78,936**	**$3,392,055**	**40.67%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$463,724	$200,000	$663,724	$0	$0	$0	$663,724	**7.96%**
c. Food Bank/Home Delivered Meals	$339,101	$223,837	$562,938	$0	$0	$0	$562,938	**6.75%**
d. Health Education/Risk Reduction	$41,916	$0	$41,916	$0	$0	$0	$41,916	**0.50%**
e. Housing	$365,756	$200,000	$565,756	$0	$0	$0	$565,756	**6.78%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$232,857	$0	$232,857	$0	$0	$0	$232,857	**2.79%**
h. Non-Medical Case Management Services	$491,309	$200,000	$691,309	$78,936	$0	$78,936	$770,245	**9.23%**
i. Other Professional Services	$346,604	$0	$346,604	$0	$0	$0	$346,604	**4.16%**
j. Outreach Services	$49,964	$50,000	$99,964	$0	$0	$0	$99,964	**1.20%**
k. Psychosocial Support Services	$65,379	$0	$65,379	$0	$0	$0	$65,379	**0.78%**
l. Referral for Health Care and Support Services	$42,672	$0	$42,672	$0	$0	$0	$42,672	**0.51%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$6,542,719**	**$1,173,837**	**$7,716,556**	**$623,968**	**$0**	**$623,968**	**$8,340,524**	**100.00%**
4. Non-services Subtotal	**$989,909**	**$0**	**$989,909**	**$218**	**$0**	**$218**	**$990,127**	**10.61%**
a. Clinical Quality Management	$164,813	$0	$164,813	$0	$0	$0	$164,813	**1.77%**
b. Recipient Administration	$825,096	$0	$825,096	$218	$0	$218	$825,314	**8.85%**
5. Total Expenditures	**$7,532,628**	**$1,173,837**	**$8,706,465**	**$624,186**	**$0**	**$624,186**	**$9,330,651**	**100.00%**

New York FY2023 Part A and MAI Expenditure Report

NEW YORK	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$38,677,241**	**$364,453**	**$39,041,694**	**$5,080,482**	**$31,326**	**$5,111,808**	**$44,153,502**	**54.72%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$5,657,036	$196,205	$5,853,241	$466,870	$0	$466,870	$6,320,111	**7.83%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$1,108,816	$0	$1,108,816	$1,383,834	$0	$1,383,834	$2,492,650	**3.09%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$18,706,625	$168,248	$18,874,873	$3,229,778	$31,326	$3,261,104	$22,135,977	**27.43%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$3,532,773	$0	$3,532,773	$0	$0	$0	$3,532,773	**4.38%**
k. Oral Health Care	$945,111	$0	$945,111	$0	$0	$0	$945,111	**1.17%**
l. Outpatient /Ambulatory Health Services	$1,190,732	$0	$1,190,732	$0	$0	$0	$1,190,732	**1.48%**
m. Substance Abuse Outpatient Care	$7,536,148	$0	$7,536,148	$0	$0	$0	$7,536,148	**9.34%**
2. Support Services Subtotal	**$33,060,929**	**$1,470,044**	**$34,530,973**	**$2,004,013**	**$0**	**$2,004,013**	**$36,534,986**	**45.28%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$1,470,619	$0	$1,470,619	$0	$0	$0	$1,470,619	**1.82%**
c. Food Bank/Home Delivered Meals	$8,847,847	$900,000	$9,747,847	$0	$0	$0	$9,747,847	**12.08%**
d. Health Education/Risk Reduction	$643,310	$0	$643,310	$0	$0	$0	$643,310	**0.80%**
e. Housing	$11,912,802	$0	$11,912,802	$2,004,013	$0	$2,004,013	$13,916,815	**17.25%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$320,002	$0	$320,002	$0	$0	$0	$320,002	**0.40%**
h. Non-Medical Case Management Services	$2,071,622	$0	$2,071,622	$0	$0	$0	$2,071,622	**2.57%**
i. Other Professional Services	$4,006,448	$570,044	$4,576,492	$0	$0	$0	$4,576,492	**5.67%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$3,788,279	$0	$3,788,279	$0	$0	$0	$3,788,279	**4.69%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$71,738,170**	**$1,834,497**	**$73,572,667**	**$7,084,495**	**$31,326**	**$7,115,821**	**$80,688,488**	**100.00%**
4. Non-services Subtotal	**$11,536,466**	**$0**	**$11,536,466**	**$718,036**	**$0**	**$718,036**	**$12,254,502**	**13.18%**
a. Clinical Quality Management	$3,000,000	$0	$3,000,000	$0	$0	$0	$3,000,000	**3.23%**
b. Recipient Administration	$8,536,466	$0	$8,536,466	$718,036	$0	$718,036	$9,254,502	**9.96%**
5. Total Expenditures	**$83,274,636**	**$1,834,497**	**$85,109,133**	**$7,802,531**	**$31,326**	**$7,833,857**	**$92,942,990**	**100.00%**

Newark FY2023 Part A and MAI Expenditure Report

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	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
NEWark	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$7,186,819**	**$0**	**$7,186,819**	**$905,488**	**$0**	**$905,488**	**$8,092,307**	**74.78%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$21,202	$0	$21,202	$0	$0	$0	$21,202	**0.20%**
d. Health Insurance Premium & Cost Sharing Assistance	$38,477	$0	$38,477	$0	$0	$0	$38,477	**0.36%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$3,261,382	$0	$3,261,382	$777,387	$0	$777,387	$4,038,769	**37.32%**
i. Medical Nutrition Therapy	$105,482	$0	$105,482	$0	$0	$0	$105,482	**0.97%**
j. Mental Health Services	$751,296	$0	$751,296	$0	$0	$0	$751,296	**6.94%**
k. Oral Health Care	$774,257	$0	$774,257	$0	$0	$0	$774,257	**7.16%**
l. Outpatient /Ambulatory Health Services	$1,580,841	$0	$1,580,841	$128,101	$0	$128,101	$1,708,942	**15.79%**
m. Substance Abuse Outpatient Care	$653,882	$0	$653,882	$0	$0	$0	$653,882	**6.04%**
2. Support Services Subtotal	**$2,653,813**	**$0**	**$2,653,813**	**$75,000**	**$0**	**$75,000**	**$2,728,813**	**25.22%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$165,872	$0	$165,872	$0	$0	$0	$165,872	**1.53%**
c. Food Bank/Home Delivered Meals	$158,163	$0	$158,163	$0	$0	$0	$158,163	**1.46%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$896,034	$0	$896,034	$75,000	$0	$75,000	$971,034	**8.97%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$231,601	$0	$231,601	$0	$0	$0	$231,601	**2.14%**
h. Non-Medical Case Management Services	$803,353	$0	$803,353	$0	$0	$0	$803,353	**7.42%**
i. Other Professional Services	$353,022	$0	$353,022	$0	$0	$0	$353,022	**3.26%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$45,768	$0	$45,768	$0	$0	$0	$45,768	**0.42%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$9,840,632**	**$0**	**$9,840,632**	**$980,488**	**$0**	**$980,488**	**$10,821,120**	**100.00%**
4. Non-services Subtotal	**$1,521,529**	**$0**	**$1,521,529**	**$173,026**	**$0**	**$173,026**	**$1,694,555**	**13.54%**
a. Clinical Quality Management	$385,419	$0	$385,419	$57,675	$0	$57,675	$443,094	**3.54%**
b. Recipient Administration	$1,136,110	$0	$1,136,110	$115,351	$0	$115,351	$1,251,461	**10.00%**
5. Total Expenditures	**$11,362,161**	**$0**	**$11,362,161**	**$1,153,514**	**$0**	**$1,153,514**	**$12,515,675**	**100.00%**

Norfolk FY2023 Part A and MAI Expenditure Report

NORFOLK	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,327,669**	**$0**	**$3,327,669**	**$412,920**	**$0**	**$412,920**	**$3,740,589**	**78.68%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$194,137	$0	$194,137	$412,920	$0	$412,920	$607,057	**12.77%**
d. Health Insurance Premium & Cost Sharing Assistance	$148,563	$0	$148,563	$0	$0	$0	$148,563	**3.12%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,519,929	$0	$1,519,929	$0	$0	$0	$1,519,929	**31.97%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$14,908	$0	$14,908	$0	$0	$0	$14,908	**0.31%**
k. Oral Health Care	$286,548	$0	$286,548	$0	$0	$0	$286,548	**6.03%**
l. Outpatient /Ambulatory Health Services	$1,163,584	$0	$1,163,584	$0	$0	$0	$1,163,584	**24.48%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$1,013,445**	**$0**	**$1,013,445**	**$0**	**$0**	**$0**	**$1,013,445**	**21.32%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$145,253	$0	$145,253	$0	$0	$0	$145,253	**3.06%**
c. Food Bank/Home Delivered Meals	$77,075	$0	$77,075	$0	$0	$0	$77,075	**1.62%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$108,444	$0	$108,444	$0	$0	$0	$108,444	**2.28%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$284,276	$0	$284,276	$0	$0	$0	$284,276	**5.98%**
h. Non-Medical Case Management Services	$363,160	$0	$363,160	$0	$0	$0	$363,160	**7.64%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$35,237	$0	$35,237	$0	$0	$0	$35,237	**0.74%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,341,114**	**$0**	**$4,341,114**	**$412,920**	**$0**	**$412,920**	**$4,754,034**	**100.00%**
4. Non-services Subtotal	**$782,432**	**$0**	**$782,432**	**$0**	**$0**	**$0**	**$782,432**	**14.13%**
a. Clinical Quality Management	$189,919	$0	$189,919	$0	$0	$0	$189,919	**3.43%**
b. Recipient Administration	$592,513	$0	$592,513	$0	$0	$0	$592,513	**10.70%**
5. Total Expenditures	**$5,123,546**	**$0**	**$5,123,546**	**$412,920**	**$0**	**$412,920**	**$5,536,466**	**100.00%**

Orange County FY2023 Part A and MAI Expenditure Report

ORANGE COUNTY	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,257,043**	**$272,961**	**$3,530,004**	**$432,053**	**$43,578**	**$475,631**	**$4,005,635**	**65.69%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$185,632	$0	$185,632	$0	$0	$0	$185,632	**3.04%**
d. Health Insurance Premium & Cost Sharing Assistance	$92,000	$0	$92,000	$0	$0	$0	$92,000	**1.51%**
e. Home and Community-Based Health Services	$384,237	$0	$384,237	$0	$0	$0	$384,237	**6.30%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$720,697	$241,395	$962,092	$432,053	$43,578	$475,631	$1,437,723	**23.58%**
i. Medical Nutrition Therapy	$364,475	$31,566	$396,041	$0	$0	$0	$396,041	**6.49%**
j. Mental Health Services	$10,042	$0	$10,042	$0	$0	$0	$10,042	**0.16%**
k. Oral Health Care	$505,744	$0	$505,744	$0	$0	$0	$505,744	**8.29%**
l. Outpatient /Ambulatory Health Services	$994,216	$0	$994,216	$0	$0	$0	$994,216	**16.30%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$2,092,107**	**$0**	**$2,092,107**	**$0**	**$0**	**$0**	**$2,092,107**	**34.31%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$22,000	$0	$22,000	$0	$0	$0	$22,000	**0.36%**
c. Food Bank/Home Delivered Meals	$203,905	$0	$203,905	$0	$0	$0	$203,905	**3.34%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$391,586	$0	$391,586	$0	$0	$0	$391,586	**6.42%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$289,552	$0	$289,552	$0	$0	$0	$289,552	**4.75%**
h. Non-Medical Case Management Services	$361,019	$0	$361,019	$0	$0	$0	$361,019	**5.92%**
i. Other Professional Services	$85,458	$0	$85,458	$0	$0	$0	$85,458	**1.40%**
j. Outreach Services	$22,418	$0	$22,418	$0	$0	$0	$22,418	**0.37%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$716,169	$0	$716,169	$0	$0	$0	$716,169	**11.74%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,349,150**	**$272,961**	**$5,622,111**	**$432,053**	**$43,578**	**$475,631**	**$6,097,742**	**100.00%**
4. Non-services Subtotal	**$773,923**	**$0**	**$773,923**	**$44,188**	**$0**	**$44,188**	**$818,111**	**11.83%**
a. Clinical Quality Management	$241,980	$0	$241,980	$21,780	$0	$21,780	$263,760	**3.81%**
b. Recipient Administration	$531,943	$0	$531,943	$22,408	$0	$22,408	$554,351	**8.02%**
5. Total Expenditures	**$6,123,073**	**$272,961**	**$6,396,034**	**$476,241**	**$43,578**	**$519,819**	**$6,915,853**	**100.00%**

Orlando FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	ORLANDO
ORLANDO	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$7,591,473**	**$0**	**$7,591,473**	**$728,898**	**$0**	**$728,898**	**$8,320,371**	**80.70%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$821,392	$0	$821,392	$0	$0	$0	$821,392	**7.97%**
c. Early Intervention Services (EIS)	$0	$0	$0	$306,200	$0	$306,200	$306,200	**2.97%**
d. Health Insurance Premium & Cost Sharing Assistance	$31,643	$0	$31,643	$0	$0	$0	$31,643	**0.31%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$2,332,305	$0	$2,332,305	$0	$0	$0	$2,332,305	**22.62%**
i. Medical Nutrition Therapy	$38,616	$0	$38,616	$0	$0	$0	$38,616	**0.37%**
j. Mental Health Services	$43,697	$0	$43,697	$0	$0	$0	$43,697	**0.42%**
k. Oral Health Care	$1,769,777	$0	$1,769,777	$0	$0	$0	$1,769,777	**17.17%**
l. Outpatient /Ambulatory Health Services	$2,551,372	$0	$2,551,372	$422,698	$0	$422,698	$2,974,070	**28.85%**
m. Substance Abuse Outpatient Care	$2,671	$0	$2,671	$0	$0	$0	$2,671	**0.03%**
2. Support Services Subtotal	**$1,915,344**	**$0**	**$1,915,344**	**$74,360**	**$0**	**$74,360**	**$1,989,704**	**19.30%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$94,974	$0	$94,974	$0	$0	$0	$94,974	**0.92%**
c. Food Bank/Home Delivered Meals	$207,591	$0	$207,591	$0	$0	$0	$207,591	**2.01%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$90,070	$0	$90,070	$0	$0	$0	$90,070	**0.87%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$97,458	$0	$97,458	$0	$0	$0	$97,458	**0.95%**
k. Psychosocial Support Services	$0	$0	$0	$74,360	$0	$74,360	$74,360	**0.72%**
l. Referral for Health Care and Support Services	$1,417,350	$0	$1,417,350	$0	$0	$0	$1,417,350	**13.75%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$7,901	$0	$7,901	$0	$0	$0	$7,901	**0.08%**
3. Total Service Expenditures	**$9,506,817**	**$0**	**$9,506,817**	**$803,258**	**$0**	**$803,258**	**$10,310,075**	**100.00%**
4. Non-services Subtotal	**$1,047,821**	**$0**	**$1,047,821**	**$71,716**	**$0**	**$71,716**	**$1,119,537**	**9.80%**
a. Clinical Quality Management	$306,349	$0	$306,349	$14,326	$0	$14,326	$320,675	**2.81%**
b. Recipient Administration	$741,472	$0	$741,472	$57,390	$0	$57,390	$798,862	**6.99%**
5. Total Expenditures	**$10,554,638**	**$0**	**$10,554,638**	**$874,974**	**$0**	**$874,974**	**$11,429,612**	**100.00%**

Philadelphia FY2023 Part A and MAI Expenditure Report

PHILADELPHIA	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$14,497,844**	**$56,480**	**$14,554,324**	**$1,681,119**	**$0**	**$1,681,119**	**$16,235,443**	**75.62%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$478,083	$0	$478,083	$0	$0	$0	$478,083	**2.23%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$5,409,338	$29,945	$5,439,283	$1,344,091	$0	$1,344,091	$6,783,374	**31.59%**
i. Medical Nutrition Therapy	$77,999	$0	$77,999	$0	$0	$0	$77,999	**0.36%**
j. Mental Health Services	$637,494	$0	$637,494	$0	$0	$0	$637,494	**2.97%**
k. Oral Health Care	$792,048	$21,950	$813,998	$0	$0	$0	$813,998	**3.79%**
l. Outpatient /Ambulatory Health Services	$6,489,118	$4,585	$6,493,703	$337,028	$0	$337,028	$6,830,731	**31.81%**
m. Substance Abuse Outpatient Care	$613,764	$0	$613,764	$0	$0	$0	$613,764	**2.86%**
2. Support Services Subtotal	**$3,892,543**	**$1,342,442**	**$5,234,985**	**$0**	**$0**	**$0**	**$5,234,985**	**24.38%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$1,383,085	$492,932	$1,876,017	$0	$0	$0	$1,876,017	**8.74%**
c. Food Bank/Home Delivered Meals	$393,923	$550,926	$944,849	$0	$0	$0	$944,849	**4.40%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$590,052	$205,539	$795,591	$0	$0	$0	$795,591	**3.71%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$564,159	$88,045	$652,204	$0	$0	$0	$652,204	**3.04%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$429,109	$5,000	$434,109	$0	$0	$0	$434,109	**2.02%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$532,215	$0	$532,215	$0	$0	$0	$532,215	**2.48%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$18,390,387**	**$1,398,922**	**$19,789,309**	**$1,681,119**	**$0**	**$1,681,119**	**$21,470,428**	**100.00%**
4. Non-services Subtotal	**$2,323,577**	**$0**	**$2,323,577**	**$205,361**	**$0**	**$205,361**	**$2,528,938**	**10.54%**
a. Clinical Quality Management	$476,263	$0	$476,263	$16,713	$0	$16,713	$492,976	**2.05%**
b. Recipient Administration	$1,847,314	$0	$1,847,314	$188,648	$0	$188,648	$2,035,962	**8.48%**
5. Total Expenditures	**$20,713,964**	**$1,398,922**	**$22,112,886**	**$1,886,480**	**$0**	**$1,886,480**	**$23,999,366**	**100.00%**

Phoenix FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	phoenix
PHOENIX	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$6,958,943**	**$300,125**	**$7,259,068**	**$429,141**	**$0**	**$429,141**	**$7,688,209**	**78.32%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$211,764	$0	$211,764	$0	$0	$0	$211,764	**2.16%**
d. Health Insurance Premium & Cost Sharing Assistance	$1,739,064	$150,000	$1,889,064	$0	$0	$0	$1,889,064	**19.24%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,458,573	$0	$1,458,573	$409,500	$0	$409,500	$1,868,073	**19.03%**
i. Medical Nutrition Therapy	$512,249	$0	$512,249	$0	$0	$0	$512,249	**5.22%**
j. Mental Health Services	$209,962	$0	$209,962	$0	$0	$0	$209,962	**2.14%**
k. Oral Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Outpatient /Ambulatory Health Services	$2,797,796	$150,125	$2,947,921	$19,641	$0	$19,641	$2,967,562	**30.23%**
m. Substance Abuse Outpatient Care	$29,535	$0	$29,535	$0	$0	$0	$29,535	**0.30%**
2. Support Services Subtotal	**$1,878,876**	**$0**	**$1,878,876**	**$228,830**	**$20,606**	**$249,436**	**$2,128,312**	**21.68%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$70,431	$0	$70,431	$0	$0	$0	$70,431	**0.72%**
c. Food Bank/Home Delivered Meals	$185,955	$0	$185,955	$0	$0	$0	$185,955	**1.89%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$89,403	$0	$89,403	$0	$0	$0	$89,403	**0.91%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$204,640	$0	$204,640	$0	$0	$0	$204,640	**2.08%**
h. Non-Medical Case Management Services	$494,111	$0	$494,111	$228,830	$20,606	$249,436	$743,547	**7.57%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$95,145	$0	$95,145	$0	$0	$0	$95,145	**0.97%**
l. Referral for Health Care and Support Services	$739,191	$0	$739,191	$0	$0	$0	$739,191	**7.53%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$8,837,819**	**$300,125**	**$9,137,944**	**$657,971**	**$20,606**	**$678,577**	**$9,816,521**	**100.00%**
4. Non-services Subtotal	**$1,241,053**	**$0**	**$1,241,053**	**$0**	**$0**	**$0**	**$1,241,053**	**11.22%**
a. Clinical Quality Management	$294,429	$0	$294,429	$0	$0	$0	$294,429	**2.66%**
b. Recipient Administration	$946,624	$0	$946,624	$0	$0	$0	$946,624	**8.56%**
5. Total Expenditures	**$10,078,872**	**$300,125**	**$10,378,997**	**$657,971**	**$20,606**	**$678,577**	**$11,057,574**	**100.00%**

Portland FY2023 Part A and MAI Expenditure Report

PORTLAND	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$2,599,433**	**$105,000**	**$2,704,433**	**$152,032**	**$0**	**$152,032**	**$2,856,465**	**77.42%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$168,447	$10,000	$178,447	$0	$0	$0	$178,447	**4.84%**
d. Health Insurance Premium & Cost Sharing Assistance	$33,707	$0	$33,707	$0	$0	$0	$33,707	**0.91%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,200,137	$25,000	$1,225,137	$152,032	$0	$152,032	$1,377,169	**37.33%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$273,229	$0	$273,229	$0	$0	$0	$273,229	**7.41%**
k. Oral Health Care	$22,910	$20,000	$42,910	$0	$0	$0	$42,910	**1.16%**
l. Outpatient /Ambulatory Health Services	$745,501	$50,000	$795,501	$0	$0	$0	$795,501	**21.56%**
m. Substance Abuse Outpatient Care	$155,502	$0	$155,502	$0	$0	$0	$155,502	**4.21%**
2. Support Services Subtotal	**$744,225**	**$88,967**	**$833,192**	**$0**	**$0**	**$0**	**$833,192**	**22.58%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Food Bank/Home Delivered Meals	$88,149	$0	$88,149	$0	$0	$0	$88,149	**2.39%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$94,993	$68,967	$163,960	$0	$0	$0	$163,960	**4.44%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Non-Medical Case Management Services	$150,398	$0	$150,398	$0	$0	$0	$150,398	**4.08%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$410,685	$20,000	$430,685	$0	$0	$0	$430,685	**11.67%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$3,343,658**	**$193,967**	**$3,537,625**	**$152,032**	**$0**	**$152,032**	**$3,689,657**	**100.00%**
4. Non-services Subtotal	**$594,667**	**$0**	**$594,667**	**$0**	**$0**	**$0**	**$594,667**	**13.88%**
a. Clinical Quality Management	$199,478	$0	$199,478	$0	$0	$0	$199,478	**4.66%**
b. Recipient Administration	$395,189	$0	$395,189	$0	$0	$0	$395,189	**9.22%**
5. Total Expenditures	**$3,938,325**	**$193,967**	**$4,132,292**	**$152,032**	**$0**	**$152,032**	**$4,284,324**	**100.00%**

Riverside-San Bernardino FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
RIVERSIDE-SAN BERNADINO	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$3,431,936**	**$0**	**$3,431,936**	**$360,013**	**$0**	**$360,013**	**$3,791,949**	**61.59%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$531,383	$0	$531,383	$360,013	$0	$360,013	$891,396	**14.48%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$336,797	$0	$336,797	$0	$0	$0	$336,797	**5.47%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$589,212	$0	$589,212	$0	$0	$0	$589,212	**9.57%**
i. Medical Nutrition Therapy	$89,212	$0	$89,212	$0	$0	$0	$89,212	**1.45%**
j. Mental Health Services	$220,300	$0	$220,300	$0	$0	$0	$220,300	**3.58%**
k. Oral Health Care	$962,742	$0	$962,742	$0	$0	$0	$962,742	**15.64%**
l. Outpatient /Ambulatory Health Services	$384,299	$0	$384,299	$0	$0	$0	$384,299	**6.24%**
m. Substance Abuse Outpatient Care	$317,991	$0	$317,991	$0	$0	$0	$317,991	**5.16%**
2. Support Services Subtotal	**$2,365,260**	**$0**	**$2,365,260**	**$0**	**$0**	**$0**	**$2,365,260**	**38.41%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$52,245	$0	$52,245	$0	$0	$0	$52,245	**0.85%**
c. Food Bank/Home Delivered Meals	$724,991	$0	$724,991	$0	$0	$0	$724,991	**11.77%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$237,849	$0	$237,849	$0	$0	$0	$237,849	**3.86%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$510,090	$0	$510,090	$0	$0	$0	$510,090	**8.28%**
h. Non-Medical Case Management Services	$721,156	$0	$721,156	$0	$0	$0	$721,156	**11.71%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$118,929	$0	$118,929	$0	$0	$0	$118,929	**1.93%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,797,196**	**$0**	**$5,797,196**	**$360,013**	**$0**	**$360,013**	**$6,157,209**	**100.00%**
4. Non-services Subtotal	**$1,067,099**	**$0**	**$1,067,099**	**$109,670**	**$0**	**$109,670**	**$1,176,769**	**16.05%**
a. Clinical Quality Management	$343,095	$0	$343,095	$37,316	$0	$37,316	$380,411	**5.19%**
b. Recipient Administration	$724,004	$0	$724,004	$72,354	$0	$72,354	$796,358	**10.86%**
5. Total Expenditures	**$6,864,295**	**$0**	**$6,864,295**	**$469,683**	**$0**	**$469,683**	**$7,333,978**	**100.00%**

Sacramento FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
SACRAMENTO	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$2,531,081**	**$130,079**	**$2,661,160**	**$188,634**	**$3,033**	**$191,667**	**$2,852,827**	**86.62%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$4,112	$15,000	$19,112	$0	$0	$0	$19,112	**0.58%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,120,212	$95,079	$1,215,291	$188,634	$3,033	$191,667	$1,406,958	**42.72%**
i. Medical Nutrition Therapy	$18,792	$20,000	$38,792	$0	$0	$0	$38,792	**1.18%**
j. Mental Health Services	$507,670	$0	$507,670	$0	$0	$0	$507,670	**15.41%**
k. Oral Health Care	$280,619	$0	$280,619	$0	$0	$0	$280,619	**8.52%**
l. Outpatient /Ambulatory Health Services	$418,549	$0	$418,549	$0	$0	$0	$418,549	**12.71%**
m. Substance Abuse Outpatient Care	$181,127	$0	$181,127	$0	$0	$0	$181,127	**5.50%**
2. Support Services Subtotal	**$390,524**	**$50,000**	**$440,524**	**$0**	**$0**	**$0**	**$440,524**	**13.38%**
a. Child Care Services	$12,900	$0	$12,900	$0	$0	$0	$12,900	**0.39%**
b. Emergency Financial Assistance	$91,845	$10,000	$101,845	$0	$0	$0	$101,845	**3.09%**
c. Food Bank/Home Delivered Meals	$54,292	$0	$54,292	$0	$0	$0	$54,292	**1.65%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$19,129	$0	$19,129	$0	$0	$0	$19,129	**0.58%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$115,374	$0	$115,374	$0	$0	$0	$115,374	**3.50%**
h. Non-Medical Case Management Services	$84,074	$40,000	$124,074	$0	$0	$0	$124,074	**3.77%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$12,910	$0	$12,910	$0	$0	$0	$12,910	**0.39%**
3. Total Service Expenditures	**$2,921,605**	**$180,079**	**$3,101,684**	**$188,634**	**$3,033**	**$191,667**	**$3,293,351**	**100.00%**
4. Non-services Subtotal	**$520,353**	**$0**	**$520,353**	**$28,101**	**$0**	**$28,101**	**$548,454**	**14.28%**
a. Clinical Quality Management	$173,559	$0	$173,559	$7,692	$0	$7,692	$181,251	**4.72%**
b. Recipient Administration	$346,794	$0	$346,794	$20,409	$0	$20,409	$367,203	**9.56%**
5. Total Expenditures	**$3,441,958**	**$180,079**	**$3,622,037**	**$216,735**	**$3,033**	**$219,768**	**$3,841,805**	**100.00%**

San Antonio FY2023 Part A and MAI Expenditure Report

SAN ANTONIO	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,848,919**	**$199,900**	**$4,048,819**	**$272,328**	**$80,297**	**$352,625**	**$4,401,444**	**78.08%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$96,000	$0	$96,000	$0	$0	$0	$96,000	**1.70%**
b. AIDS Pharmaceutical Assistance (LPAP)	$105,806	$10,000	$115,806	$0	$0	$0	$115,806	**2.05%**
c. Early Intervention Services (EIS)	$156,295	$35,000	$191,295	$154,700	$35,000	$189,700	$380,995	**6.76%**
d. Health Insurance Premium & Cost Sharing Assistance	$702,668	$0	$702,668	$0	$0	$0	$702,668	**12.47%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$302,272	$25,000	$327,272	$0	$0	$0	$327,272	**5.81%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$332,125	$20,000	$352,125	$85,698	$25,297	$110,995	$463,120	**8.22%**
k. Oral Health Care	$554,673	$0	$554,673	$0	$0	$0	$554,673	**9.84%**
l. Outpatient /Ambulatory Health Services	$1,519,424	$94,900	$1,614,324	$0	$0	$0	$1,614,324	**28.64%**
m. Substance Abuse Outpatient Care	$79,656	$15,000	$94,656	$31,930	$20,000	$51,930	$146,586	**2.60%**
2. Support Services Subtotal	**$908,470**	**$117,021**	**$1,025,491**	**$169,922**	**$40,000**	**$209,922**	**$1,235,413**	**21.92%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$229,207	$35,000	$264,207	$0	$0	$0	$264,207	**4.69%**
c. Food Bank/Home Delivered Meals	$52,064	$0	$52,064	$0	$0	$0	$52,064	**0.92%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$115,637	$4,021	$119,658	$0	$0	$0	$119,658	**2.12%**
h. Non-Medical Case Management Services	$66,812	$20,000	$86,812	$169,922	$40,000	$209,922	$296,734	**5.26%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$444,750	$58,000	$502,750	$0	$0	$0	$502,750	**8.92%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$4,757,389**	**$316,921**	**$5,074,310**	**$442,250**	**$120,297**	**$562,547**	**$5,636,857**	**100.00%**
4. Non-services Subtotal	**$695,208**	**$0**	**$695,208**	**$81,426**	**$0**	**$81,426**	**$776,634**	**12.11%**
a. Clinical Quality Management	$134,440	$0	$134,440	$26,479	$0	$26,479	$160,919	**2.51%**
b. Recipient Administration	$560,768	$0	$560,768	$54,947	$0	$54,947	$615,715	**9.60%**
5. Total Expenditures	**$5,452,597**	**$316,921**	**$5,769,518**	**$523,676**	**$120,297**	**$643,973**	**$6,413,491**	**100.00%**

San Diego FY2023 Part A and MAI Expenditure Report

SAN DIEGO	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$4,422,616**	**$0**	**$4,422,616**	**$410,945**	**$0**	**$410,945**	**$4,833,561**	**48.05%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$207,239	$0	$207,239	$0	$0	$0	$207,239	**2.06%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$1,497,643	$0	$1,497,643	$193,812	$0	$193,812	$1,691,455	**16.81%**
i. Medical Nutrition Therapy	$34,397	$0	$34,397	$0	$0	$0	$34,397	**0.34%**
j. Mental Health Services	$1,012,017	$0	$1,012,017	$137,461	$0	$137,461	$1,149,478	**11.43%**
k. Oral Health Care	$171,165	$0	$171,165	$0	$0	$0	$171,165	**1.70%**
l. Outpatient /Ambulatory Health Services	$1,232,173	$0	$1,232,173	$0	$0	$0	$1,232,173	**12.25%**
m. Substance Abuse Outpatient Care	$267,982	$0	$267,982	$79,672	$0	$79,672	$347,654	**3.46%**
2. Support Services Subtotal	**$5,086,311**	**$0**	**$5,086,311**	**$140,042**	**$0**	**$140,042**	**$5,226,353**	**51.95%**
a. Child Care Services	$33,543	$0	$33,543	$0	$0	$0	$33,543	**0.33%**
b. Emergency Financial Assistance	$57,486	$0	$57,486	$52,721	$0	$52,721	$110,207	**1.10%**
c. Food Bank/Home Delivered Meals	$467,213	$0	$467,213	$0	$0	$0	$467,213	**4.64%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$1,926,782	$0	$1,926,782	$0	$0	$0	$1,926,782	**19.15%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$140,927	$0	$140,927	$0	$0	$0	$140,927	**1.40%**
h. Non-Medical Case Management Services	$610,775	$0	$610,775	$54,526	$0	$54,526	$665,301	**6.61%**
i. Other Professional Services	$284,652	$0	$284,652	$0	$0	$0	$284,652	**2.83%**
j. Outreach Services	$433,303	$0	$433,303	$32,795	$0	$32,795	$466,098	**4.63%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$1,131,630	$0	$1,131,630	$0	$0	$0	$1,131,630	**11.25%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$9,508,927**	**$0**	**$9,508,927**	**$550,987**	**$0**	**$550,987**	**$10,059,914**	**100.00%**
4. Non-services Subtotal	**$1,139,384**	**$0**	**$1,139,384**	**$71,816**	**$0**	**$71,816**	**$1,211,200**	**10.75%**
a. Clinical Quality Management	$150,993	$0	$150,993	$25,963	$0	$25,963	$176,956	**1.57%**
b. Recipient Administration	$988,391	$0	$988,391	$45,853	$0	$45,853	$1,034,244	**9.18%**
5. Total Expenditures	**$10,648,311**	**$0**	**$10,648,311**	**$622,803**	**$0**	**$622,803**	**$11,271,114**	**100.00%**

San Francisco FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
Section C: Expenditure Categories	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$7,525,019**	**$0**	**$7,525,019**	**$470,330**	**$0**	**$470,330**	**$7,995,349**	**60.46%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$152,770	$0	$152,770	$0	$0	$0	$152,770	**1.16%**
d. Health Insurance Premium & Cost Sharing Assistance	$31,899	$0	$31,899	$0	$0	$0	$31,899	**0.24%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$271,003	$0	$271,003	$0	$0	$0	$271,003	**2.05%**
g. Hospice	$653,601	$0	$653,601	$0	$0	$0	$653,601	**4.94%**
h. Medical Case Management	$2,261,519	$0	$2,261,519	$140,106	$0	$140,106	$2,401,625	**18.16%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$1,099,249	$0	$1,099,249	$0	$0	$0	$1,099,249	**8.31%**
k. Oral Health Care	$849,123	$0	$849,123	$0	$0	$0	$849,123	**6.42%**
l. Outpatient /Ambulatory Health Services	$2,205,855	$0	$2,205,855	$330,224	$0	$330,224	$2,536,079	**19.18%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$4,521,056**	**$707,292**	**$5,228,348**	**$0**	**$0**	**$0**	**$5,228,348**	**39.54%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$891,166	$308,705	$1,199,871	$0	$0	$0	$1,199,871	**9.07%**
c. Food Bank/Home Delivered Meals	$508,170	$250,000	$758,170	$0	$0	$0	$758,170	**5.73%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$239,907	$0	$239,907	$0	$0	$0	$239,907	**1.81%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$10,419	$0	$10,419	$0	$0	$0	$10,419	**0.08%**
h. Non-Medical Case Management Services	$1,765,765	$0	$1,765,765	$0	$0	$0	$1,765,765	**13.35%**
i. Other Professional Services	$322,233	$28,219	$350,452	$0	$0	$0	$350,452	**2.65%**
j. Outreach Services	$303,051	$0	$303,051	$0	$0	$0	$303,051	**2.29%**
k. Psychosocial Support Services	$480,345	$120,368	$600,713	$0	$0	$0	$600,713	**4.54%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$12,046,075**	**$707,292**	**$12,753,367**	**$470,330**	**$0**	**$470,330**	**$13,223,697**	**100.00%**
4. Non-services Subtotal	**$1,331,159**	**$0**	**$1,331,159**	**$75,081**	**$0**	**$75,081**	**$1,406,240**	**9.61%**
a. Clinical Quality Management	$194,528	$0	$194,528	$0	$0	$0	$194,528	**1.33%**
b. Recipient Administration	$1,136,631	$0	$1,136,631	$75,081	$0	$75,081	$1,211,712	**8.28%**
5. Total Expenditures	**$13,377,234**	**$707,292**	**$14,084,526**	**$545,411**	**$0**	**$545,411**	**$14,629,937**	**100.00%**

San Jose FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
SAN JOSE	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$1,501,062**	**$0**	**$1,501,062**	**$222,470**	**$0**	**$222,470**	**$1,723,532**	**63.74%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$401,308	$0	$401,308	$0	$0	$0	$401,308	**14.84%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$230,086	$0	$230,086	$0	$0	$0	$230,086	**8.51%**
k. Oral Health Care	$480,515	$0	$480,515	$0	$0	$0	$480,515	**17.77%**
l. Outpatient /Ambulatory Health Services	$389,153	$0	$389,153	$222,470	$0	$222,470	$611,623	**22.62%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$980,653**	**$0**	**$980,653**	**$0**	**$0**	**$0**	**$980,653**	**36.26%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$5,528	$0	$5,528	$0	$0	$0	$5,528	**0.20%**
c. Food Bank/Home Delivered Meals	$359,579	$0	$359,579	$0	$0	$0	$359,579	**13.30%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$23,637	$0	$23,637	$0	$0	$0	$23,637	**0.87%**
h. Non-Medical Case Management Services	$591,909	$0	$591,909	$0	$0	$0	$591,909	**21.89%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$2,481,715**	**$0**	**$2,481,715**	**$222,470**	**$0**	**$222,470**	**$2,704,185**	**100.00%**
4. Non-services Subtotal	**$433,012**	**$0**	**$433,012**	**$35,094**	**$0**	**$35,094**	**$468,106**	**14.76%**
a. Clinical Quality Management	$140,337	$0	$140,337	$11,365	$0	$11,365	$151,702	**4.78%**
b. Recipient Administration	$292,675	$0	$292,675	$23,729	$0	$23,729	$316,404	**9.97%**
5. Total Expenditures	**$2,914,727**	**$0**	**$2,914,727**	**$257,564**	**$0**	**$257,564**	**$3,172,291**	**100.00%**

San Juan FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
SAN JUAN	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$6,748,086**	**$0**	**$6,748,086**	**$847,670**	**$0**	**$847,670**	**$7,595,756**	**77.66%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$353,712	$0	$353,712	$353,712	**3.62%**
d. Health Insurance Premium & Cost Sharing Assistance	$2,862	$0	$2,862	$441	$0	$441	$3,303	**0.03%**
e. Home and Community-Based Health Services	$239,331	$0	$239,331	$67,264	$0	$67,264	$306,595	**3.13%**
f. Home Health Care	$129,437	$0	$129,437	$0	$0	$0	$129,437	**1.32%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$813,164	$0	$813,164	$62,418	$0	$62,418	$875,582	**8.95%**
i. Medical Nutrition Therapy	$589,669	$0	$589,669	$0	$0	$0	$589,669	**6.03%**
j. Mental Health Services	$498,772	$0	$498,772	$55,046	$0	$55,046	$553,818	**5.66%**
k. Oral Health Care	$154,830	$0	$154,830	$0	$0	$0	$154,830	**1.58%**
l. Outpatient /Ambulatory Health Services	$4,257,732	$0	$4,257,732	$308,789	$0	$308,789	$4,566,521	**46.69%**
m. Substance Abuse Outpatient Care	$62,289	$0	$62,289	$0	$0	$0	$62,289	**0.64%**
2. Support Services Subtotal	**$2,095,934**	**$0**	**$2,095,934**	**$89,553**	**$0**	**$89,553**	**$2,185,487**	**22.34%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$40,314	$0	$40,314	$0	$0	$0	$40,314	**0.41%**
c. Food Bank/Home Delivered Meals	$155,518	$0	$155,518	$0	$0	$0	$155,518	**1.59%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$379,412	$0	$379,412	$0	$0	$0	$379,412	**3.88%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$247,843	$0	$247,843	$12,973	$0	$12,973	$260,816	**2.67%**
h. Non-Medical Case Management Services	$758,270	$0	$758,270	$76,580	$0	$76,580	$834,850	**8.54%**
i. Other Professional Services	$32,051	$0	$32,051	$0	$0	$0	$32,051	**0.33%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$176,012	$0	$176,012	$0	$0	$0	$176,012	**1.80%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$306,514	$0	$306,514	$0	$0	$0	$306,514	**3.13%**
3. Total Service Expenditures	**$8,844,020**	**$0**	**$8,844,020**	**$937,223**	**$0**	**$937,223**	**$9,781,243**	**100.00%**
4. Non-services Subtotal	**$1,025,311**	**$0**	**$1,025,311**	**$82,472**	**$0**	**$82,472**	**$1,107,783**	**10.17%**
a. Clinical Quality Management	$98,320	$0	$98,320	$0	$0	$0	$98,320	**0.90%**
b. Recipient Administration	$926,991	$0	$926,991	$82,472	$0	$82,472	$1,009,463	**9.27%**
5. Total Expenditures	**$9,869,331**	**$0**	**$9,869,331**	**$1,019,695**	**$0**	**$1,019,695**	**$10,889,026**	**100.00%**

Seattle FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
SEATTLE	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$2,068,735**	**$65,648**	**$2,134,383**	**$121,921**	**$0**	**$121,921**	**$2,256,304**	**36.00%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$121,921	$0	$121,921	$121,921	**1.95%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Oral Health Care	$1,358,391	$0	$1,358,391	$0	$0	$0	$1,358,391	**21.67%**
l. Outpatient /Ambulatory Health Services	$710,344	$65,648	$775,992	$0	$0	$0	$775,992	**12.38%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$3,729,632**	**$65,648**	**$3,795,280**	**$216,282**	**$17**	**$216,299**	**$4,011,579**	**64.00%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$96,198	$0	$96,198	$0	$0	$0	$96,198	**1.53%**
c. Food Bank/Home Delivered Meals	$1,300,871	$65,648	$1,366,519	$0	$0	$0	$1,366,519	**21.80%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$743,456	$0	$743,456	$0	$0	$0	$743,456	**11.86%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$27,108	$0	$27,108	$0	$0	$0	$27,108	**0.43%**
h. Non-Medical Case Management Services	$1,413,689	$0	$1,413,689	$216,282	$17	$216,299	$1,629,988	**26.01%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$148,310	$0	$148,310	$0	$0	$0	$148,310	**2.37%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,798,367**	**$131,296**	**$5,929,663**	**$338,203**	**$17**	**$338,220**	**$6,267,883**	**100.00%**
4. Non-services Subtotal	**$917,771**	**$0**	**$917,771**	**$0**	**$0**	**$0**	**$917,771**	**12.77%**
a. Clinical Quality Management	$181,649	$0	$181,649	$0	$0	$0	$181,649	**2.53%**
b. Recipient Administration	$736,122	$0	$736,122	$0	$0	$0	$736,122	**10.24%**
5. Total Expenditures	**$6,716,138**	**$131,296**	**$6,847,434**	**$338,203**	**$17**	**$338,220**	**$7,185,654**	**100.00%**

St. Louis FY2023 Part A and MAI Expenditure Report

ST LOUIS	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
	CURRENT FY	PRIOR FY CARRYOVER	PART A TOTAL	CURRENT FY	PRIOR FY CARRY-OVER	MAI TOTAL		
1. Core Medical Services Subtotal	**$3,059,389**	**$289,859**	**$3,349,248**	**$107,429**	**$3,456**	**$110,885**	**$3,460,133**	**56.38%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
c. Early Intervention Services (EIS)	$0	$0	$0	$107,429	$3,456	$110,885	$110,885	**1.81%**
d. Health Insurance Premium & Cost Sharing Assistance	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$2,800,567	$257,954	$3,058,521	$0	$0	$0	$3,058,521	**49.84%**
i. Medical Nutrition Therapy	$35,000	$0	$35,000	$0	$0	$0	$35,000	**0.57%**
j. Mental Health Services	$66,607	$25,649	$92,256	$0	$0	$0	$92,256	**1.50%**
k. Oral Health Care	$72,919	$0	$72,919	$0	$0	$0	$72,919	**1.19%**
l. Outpatient /Ambulatory Health Services	$84,296	$6,256	$90,552	$0	$0	$0	$90,552	**1.48%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$2,044,560**	**$353,497**	**$2,398,057**	**$278,462**	**$0**	**$278,462**	**$2,676,519**	**43.62%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$424,491	$131,337	$555,828	$0	$0	$0	$555,828	**9.06%**
c. Food Bank/Home Delivered Meals	$589,435	$69,120	$658,555	$0	$0	$0	$658,555	**10.73%**
d. Health Education/Risk Reduction	$98,413	$0	$98,413	$21,607	$0	$21,607	$120,020	**1.96%**
e. Housing	$606,496	$124,416	$730,912	$146,095	$0	$146,095	$877,007	**14.29%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$64,960	$3,430	$68,390	$0	$0	$0	$68,390	**1.11%**
h. Non-Medical Case Management Services	$9,077	$0	$9,077	$0	$0	$0	$9,077	**0.15%**
i. Other Professional Services	$63,742	$8,294	$72,036	$0	$0	$0	$72,036	**1.17%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$42,849	$0	$42,849	$5,700	$0	$5,700	$48,549	**0.79%**
l. Referral for Health Care and Support Services	$145,097	$16,900	$161,997	$105,060	$0	$105,060	$267,057	**4.35%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,103,949**	**$643,356**	**$5,747,305**	**$385,891**	**$3,456**	**$389,347**	**$6,136,652**	**100.00%**
4. Non-services Subtotal	**$469,004**	**$0**	**$469,004**	**$41,879**	**$0**	**$41,879**	**$510,883**	**7.69%**
a. Clinical Quality Management	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Recipient Administration	$469,004	$0	$469,004	$41,879	$0	$41,879	$510,883	**7.69%**
5. Total Expenditures	**$5,572,953**	**$643,356**	**$6,216,309**	**$427,770**	**$3,456**	**$431,226**	**$6,647,535**	**100.00%**

Tampa-St. Petersburg FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
TAMPA	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$8,134,379**	**$446,680**	**$8,581,059**	**$0**	**$0**	**$0**	**$8,581,059**	**90.10%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$82,808	$0	$82,808	$0	$0	$0	$82,808	**0.87%**
c. Early Intervention Services (EIS)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Insurance Premium & Cost Sharing Assistance	$705,720	$0	$705,720	$0	$0	$0	$705,720	**7.41%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$2,641,269	$330,000	$2,971,269	$0	$0	$0	$2,971,269	**31.20%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$423,777	$116,680	$540,457	$0	$0	$0	$540,457	**5.67%**
k. Oral Health Care	$794,621	$0	$794,621	$0	$0	$0	$794,621	**8.34%**
l. Outpatient /Ambulatory Health Services	$3,022,976	$0	$3,022,976	$0	$0	$0	$3,022,976	**31.74%**
m. Substance Abuse Outpatient Care	$463,208	$0	$463,208	$0	$0	$0	$463,208	**4.86%**
2. Support Services Subtotal	**$308,533**	**$0**	**$308,533**	**$634,275**	**$0**	**$634,275**	**$942,808**	**9.90%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$148,382	$0	$148,382	$0	$0	$0	$148,382	**1.56%**
c. Food Bank/Home Delivered Meals	$0	$0	$0	$0	$0	$0	$0	**0.00%**
d. Health Education/Risk Reduction	$0	$0	$0	$634,275	$0	$634,275	$634,275	**6.66%**
e. Housing	$160,151	$0	$160,151	$0	$0	$0	$160,151	**1.68%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Non-Medical Case Management Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
i. Other Professional Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$8,442,912**	**$446,680**	**$8,889,592**	**$634,275**	**$0**	**$634,275**	**$9,523,867**	**100.00%**
4. Non-services Subtotal	**$1,161,672**	**$0**	**$1,161,672**	**$70,475**	**$0**	**$70,475**	**$1,232,147**	**11.46%**
a. Clinical Quality Management	$171,150	$0	$171,150	$0	$0	$0	$171,150	**1.59%**
b. Recipient Administration	$990,522	$0	$990,522	$70,475	$0	$70,475	$1,060,997	**9.86%**
5. Total Expenditures	**$9,604,584**	**$446,680**	**$10,051,264**	**$704,750**	**$0**	**$704,750**	**$10,756,014**	**100.00%**

West Palm Beach FY2023 Part A and MAI Expenditure Report

	PART A AWARD			MAI AWARD			PART A + MAI TOTAL AWARD	Percent
WEST PALM BEACH	**CURRENT FY**	**PRIOR FY CARRYOVER**	**PART A TOTAL**	**CURRENT FY**	**PRIOR FY CARRY-OVER**	**MAI TOTAL**		
1. Core Medical Services Subtotal	**$4,491,053**	**$287,547**	**$4,778,600**	**$300,305**	**$99,867**	**$400,172**	**$5,178,772**	**76.06%**
a. AIDS Drug Assistance Program (ADAP) Treatments	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. AIDS Pharmaceutical Assistance (LPAP)	$1,563	$0	$1,563	$0	$0	$0	$1,563	**0.02%**
c. Early Intervention Services (EIS)	$577,120	$0	$577,120	$151,732	$69,655	$221,387	$798,507	**11.73%**
d. Health Insurance Premium & Cost Sharing Assistance	$2,080,261	$186,728	$2,266,989	$0	$0	$0	$2,266,989	**33.29%**
e. Home and Community-Based Health Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
f. Home Health Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Hospice	$0	$0	$0	$0	$0	$0	$0	**0.00%**
h. Medical Case Management	$898,623	$55,496	$954,119	$148,573	$30,212	$178,785	$1,132,904	**16.64%**
i. Medical Nutrition Therapy	$0	$0	$0	$0	$0	$0	$0	**0.00%**
j. Mental Health Services	$127,588	$0	$127,588	$0	$0	$0	$127,588	**1.87%**
k. Oral Health Care	$278,694	$45,323	$324,017	$0	$0	$0	$324,017	**4.76%**
l. Outpatient /Ambulatory Health Services	$527,204	$0	$527,204	$0	$0	$0	$527,204	**7.74%**
m. Substance Abuse Outpatient Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
2. Support Services Subtotal	**$1,415,326**	**$33,278**	**$1,448,604**	**$181,790**	**$0**	**$181,790**	**$1,630,394**	**23.94%**
a. Child Care Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
b. Emergency Financial Assistance	$25,604	$0	$25,604	$0	$0	$0	$25,604	**0.38%**
c. Food Bank/Home Delivered Meals	$348,711	$0	$348,711	$0	$0	$0	$348,711	**5.12%**
d. Health Education/Risk Reduction	$0	$0	$0	$0	$0	$0	$0	**0.00%**
e. Housing	$213,374	$0	$213,374	$0	$0	$0	$213,374	**3.13%**
f. Linguistic Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
g. Medical Transportation	$78,683	$0	$78,683	$0	$0	$0	$78,683	**1.16%**
h. Non-Medical Case Management Services	$468,954	$33,278	$502,232	$68,738	$0	$68,738	$570,970	**8.39%**
i. Other Professional Services	$280,000	$0	$280,000	$0	$0	$0	$280,000	**4.11%**
j. Outreach Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
k. Psychosocial Support Services	$0	$0	$0	$113,052	$0	$113,052	$113,052	**1.66%**
l. Referral for Health Care and Support Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
m. Rehabilitation Services	$0	$0	$0	$0	$0	$0	$0	**0.00%**
n. Respite Care	$0	$0	$0	$0	$0	$0	$0	**0.00%**
o. Substance Abuse Services (residential)	$0	$0	$0	$0	$0	$0	$0	**0.00%**
3. Total Service Expenditures	**$5,906,379**	**$320,825**	**$6,227,204**	**$482,095**	**$99,867**	**$581,962**	**$6,809,166**	**100.00%**
4. Non-services Subtotal	**$1,042,301**	**$0**	**$1,042,301**	**$90,382**	**$0**	**$90,382**	**$1,132,683**	**14.26%**
a. Clinical Quality Management	$347,434	$0	$347,434	$29,142	$0	$29,142	$376,576	**4.74%**
b. Recipient Administration	$694,867	$0	$694,867	$61,240	$0	$61,240	$756,107	**9.52%**
5. Total Expenditures	**$6,948,680**	**$320,825**	**$7,269,505**	**$572,477**	**$99,867**	**$672,344**	**$7,941,849**	**100.00%**

Health Insurance Premium Assistance Program

ACA Insurance Open Enrollment

November 1st – December 15th

for Coverage beginning 1/1

December 16th – January 15th

for Coverage beginning 2/1

Step #1: Enroll In an APPROVED Health Insurance Plan (required)

For assistance with enrolling in Insurance: call 1-844-441-4422 or visit: https://enroll.brhpc.org

Step #2: Enroll In Premium Assistance @ Enroll.BRHPC.org (required)

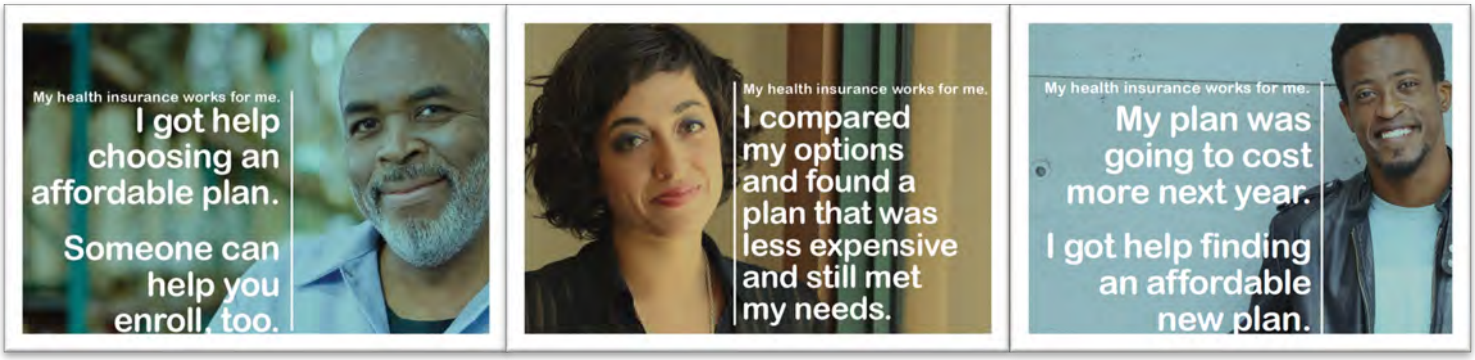
- Clients MUST directly enroll in the premium assistance program every year at https://enroll.brhpc.org or by calling 1-844-441-4422. Anyone who has not directly enrolled in the program will be disenrolled for 2026 and NO future payments will be made.
- If you are enrolled in BlueOptions Platinum (24J01-05, -08, or -21S) or Silver (24J01-03 or -19S), you MUST choose a NEW PLAN for 2026 to continue receiving premium assistance.

Step #3: Use *CVS Copay Card When You Fill A Prescription (required)*

For medication copayment assistance, the call Pharmacy Help Desk at 1-800-364-6331

Step #4: *Recertify Eligibility Annually & Don't Let It Expire (required)*

If your eligibility expires, your premium payments will no longer be made by the program.
For State of Florida Drug Assistance Program eligibility assistance, call 1-844-381-2327.



BRHPC

For premium assistance program enrollment or payment questions, contact: Broward Regional Health Planning Council or our enrollment partner, American Exchange at **1-844-441-4422.**

HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES

1. The Council, its members, and the public recognize and respect the committee process adopted by this Council. The Council, its members, and the public recognize that full discussion and analysis of issues occurs at the committee level rather than at Council meetings.

2. Before a member can make a motion or speak in debate, the member must be recognized by the Chair as having the exclusive right to be heard at that time.

3. All speakers are expected to address the Council in a respectful manner to respect time limits, to speak briefly and to the point, and to stay on agenda. All other persons in attendance should not interrupt the speaker who is recognized by the Chair as having the floor.

4. If the member who made the motion claims the floor and has not already spoken on the question, that member is entitled to be recognized in preference to other members.

5. No person is entitled to the floor a second time in debate on the same item as long as any other person who desires the floor has not spoken on the item.

6. Speakers should restrict comments and debate to the pending question or motion. Speakers must address their remarks to the Chair and maintain a courteous tone. The Chair may impose time limits on debate or discussion to ensure efficient conduct of Council business.

7. Members should not name service providers and/or persons during any discussion unless the service provider or person is identified in the subject of the motion or agenda item. Specific concerns regarding service providers should be directed towards the Grantee, outside of the meeting.

8. Members of the public may only address the Council upon recognition by the Chair. They are subject to the same rules of conduct expected of Council members.

9. No alcohol or drug use (unless prescribed by a licensed physician), is permitted at Council meetings, grantee or support staff offices.

10. No abusive language, threats of violence, or possession of weapons are permitted in Council meetings, grantee or staff offices.

11. Repeated violation of these meeting rules may result in no further recognition of the offending member or attendee by the Chair at that meeting. Any serious breach of conduct which disrupts the Council's meeting may subject the offender to removal from the meeting, administrative or legal process.

Revised 7/24/14

CONSEJO DE PLANEACIÓN DE SERVICIOS DE SALUD VIH
REGLAS BÁSICAS DE LA REUNIÓN

1. Los miembros deberán aceptar y respetar el proceso de comité adoptado por este Consejo. Las discusiones y el análisis en pleno de los temas tendrán lugar a nivel de comité y no en las reuniones plenarias del Consejo.

2. Antes de que un miembro pueda iniciar una moción o de que una persona pueda hablar en un debate, el Presidente de la reunión deberá reconocer que él o ella tienen el derecho exclusivo de hablar en ese momento dado.

3. Se espera que todos los ponentes se dirijan al Consejo de una manera respetuosa, que no se interrumpa al ponente con derecho al habla en el momento, que cuando se hable se haga de forma clara y concisa, y que se mantenga la agenda.

4. Si el miembro que inicia una moción no ha hablado todavía y reclama su derecho a hablar sobre un asunto, él/ella tendrán el derecho a que con preferencia se les reconozca.

5. Nadie tendrá derecho a reclamar el habla por una segunda vez, en un debate sobre el mismo tema, cuando otra persona que no ha hablado todavía, desea hacerlo.

6. Los debates deben ceñirse a los asuntos o mociones que estén pendientes. Al hablar, los ponentes deben referirse al Presidente, y mantener un tono cortés.

7. Los miembros del público solo podrán dirigirse al Consejo cuando hayan sido reconocidos por el Presidente de la reunión. Estarán sujetos a las mismas reglas de conducta que se esperan de los miembros del Consejo. Se establecerán límites de tiempo según sea necesario para garantizar que los asuntos del Consejo cursen de manera eficiente.

8. Miembros del público sólo podrán dirigir el Consejo a partir del reconocimiento por el Presidente. Están sujetos a las mismas reglas de conducta que se espera de los miembros del Consejo.

9. No estará permitido el uso de bebidas alcohólicas o de drogas en las reuniones del Consejo y tampoco en las oficinas del personal de soporte y donatarios.

10. No está permitido el uso de lenguaje abusivo, amenazas de violencia y posesión de armas en las reuniones del Consejo ni en las oficinas del personal de soporte y donatarios.

11. La repetida violación de estas reglas básicas dará como resultado que el Presidente de la reunión deje de reconocer al derecho a participación del ofensor o miembro de la audiencia. Cualquier violación de conducta grave, que perturbe la reunión de Consejo, terminará en la remoción del ofensor, de la reunión.

KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO

1. Manm-yo dwe rekonèt epi respekte pwosesis komite-a ke Konsèy-la adopte. Diskisyon ak analiz total pwoblèm-yo fèt nan nivo komite-a; li pa fèt pandan rankont tout Konsèy-la.

2. Anvan yon manm ka fè yon pwopozisyon oswa nenpòt ki moun gen dwa pale pandan yon deba, fòk Prezidan Komite-a bali dwa esklizif pou fè moun tande-li nan moman sa-a.

3. Yo atann-yo aske tout moun k'ap pale ak Konsèy-la fè-li avèk respè, pou pèsonn pa koupe moun ke Konsèy-la bay dwa pale lapawòl, pou moun k'ap pale-a respekte kantite tan yo ba-li pou pale-a, pou li di sa l'ap di-a rapidman epi avèk presizyon, epi pou li respekte ajanda-a.

4. Si manm ki fè pwopozisyon-an mande pou li pale epi si li poko pale sou keksyon-an deja, li gen priyorite sou lòt manm-yo.

5. Pèsonn moun pa gen dwa pran lapawòl de fwa sou yon menm sijè si gen lòt moun ki poko pale epi ki vle esprime tèt-yo.

6. Deba-a dwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-a dwe adrese sa l'ap di-a bay Prezidan Komite-a epi pale sou yon ton ki make ak respè.

7. Manm piblik-la dwe pale ak Konsèy-la sèlman si Prezidan Konsèy-la bay-yo lapawòl. Yo dwe respektè menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesesè pou zafè Konsèy-la byen mache, yo gen dwa bay-yo yon limit tan pou yo pale.

8. Manm nan piblik la sèlman pou adrese a konsèy sou rekonèsans sou chèz la. Yo ka tonbe anba menm lòd de kondwit ki te espere nan manm konsèy yo.

9. Itilizasyon alkòl ak dwòg (sòf si se yon doktè lisansye ki preskri-li), entèdi nan rankont Konsèy-la oswa nan biwo estaf sipò-a oswa Resevè-a.

10. Vye langaj, menas vyolans, oswa posesyon zam entèdi nan rankont Konsèy-la oswa nan biwo estaf-la oswa Resevè-a.

11. Vyolasyon repete règleman rankont-yo ap lakòz yon manm oswa lòt moun k'ap asiste rankont-lan pa kapab patisipe ankò. Nenpòt ki move kondwit serye ki twouble rankont-la ap lakòz yo mete moun-nan deyò.

Acronym List

ACA: The Patient Protection and Affordable Care Act

ADAP: AIDS Drugs Assistance Program

Administration HUD: U.S Department of Housing and Urban Development

IW: Integrated Workgroup

AETC: AIDS Education and Training Center

AHF: AIDS Health Care Foundation

AIDS: Acquired Immuno-Deficiency Syndrome

ART: Antiretroviral Therapy

ARV: Antiretrovirals

BARC: Broward Addiction Recovery Center

BCFHC: Broward Community and Family Health Centers

BH: Behavioral Health

BRHPC: Broward Regional Health Planning Council, Inc.

CBO: Community-Based Organization

CDC: Centers for Disease Control and Prevention

CDTC: Children's Diagnostic and Treatment Center

CEC: Community Empowerment Committee

CIED: Client Intake and Eligibility Determination

CLD: Client Level Data

CQI: Continuous Quality Improvement

CQM: Clinical Quality Management

CTS: Counseling and Testing Site

eHARS: Electronic HIV/AIDS Reporting System

EIIHA: Early Intervention of Individuals Living with HIV/AIDS

EFA: Emergency Financial Assistance

EMA: Eligible Metropolitan Area

FDOH: Florida Department of Health

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

HAB: HIV/AIDS Bureau

HHS: U.S. Department of Health and Human Services

HICP: Health Insurance Continuation Program

HIV: Human Immunodeficiency Virus

HIV HSSS: HIV Human Services Software System

HIVPC: Broward County HIV Health Services Planning Council

HOPWA: Housing Opportunities for People with AIDS

HRSA: Health Resources Services Administration

IDU: Intravenous Drug User

JLP: Jail Linkage Program

LPAP: Local AIDS Pharmaceutical Assistance Program

MAI: Minority AIDS Initiative

MCDC: Membership/Council Development Committee

MCM: Medical Case Management

MH: Mental Health

MNT: Medical Nutrition Therapy

MOU: Memorandum of Understanding

NBHD: North Broward Hospital District (Broward Health)

NGA: Notice of Grant Award

NHAS: National HIV/AIDS Strategy

NMCM: Non-Medical Case Management

NOFO: Notice of Funding Opportunity

nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University

nPEP: Non-occupational Post-Exposure Prophylaxis

OAHS: Outpatient Ambulatory Health Services

OHC: Oral Health Care

PCN: Policy Clarification Notic

PE: Provide Enterprise

PLWH: People Living with HIV

PLWHA: People Living with HIV/AIDS

PrEP: Pre-Exposure Prophylaxis

PRISM: Patient Reporting Investigating Surveillance System

PROACT: Participate, Retain, Observe, Adhere, Communicate and Teamwork is DOH- Broward's treatment adherence program.

PSRA: Priority Setting & Resource Allocations

QI: Quality Improvement

QIP: Quality Improvement Project

QM: Quality Management

QMC: Quality Management Committee

RSR: Ryan White Services Report

RWHAP: Ryan White HIV/AIDS Program

RWPA: Ryan White Part A

SBHD: South Broward Hospital District (Memorial Healthcare System)

SCHIP: State Children's Health Insurance Program

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TB: Tuberculosis

TGA: Transitional Grant Area

VA: United States Department of Veteran Affairs

VL: Viral Load

VLS: Viral Load Suppression

WICY: Women, Infants, Children, and Youth

Frequently Used Terms

Recipient: Government department designated to administer Ryan White Part A funds and monitor contracts.

Planning Council Support (PCS) Staff/'Staff': Provides professional staff support, meeting coordination, and information to the HIVPC, its standing and ad-Hoc Committees, Chair, and Recipient.

Clinical Quality Management (CQM) Support Staff: Provides professional support, meeting coordination, and technical assistance to assist the Recipient through analysis of performance measures and other data with the implementation of activities designed to improve patient care, health outcomes, and patient satisfaction throughout the system of care.

Provider/Sub-Recipient: Agencies contracted to provide HIV Core and Support services to consumers.

Consumer/Client/Patient: A person who is an eligible recipient of services under the Ryan White Act.