Ryan White Program Report – April 2020

1. **Part A Expenditure Report**   **Attachment A**

   - Expenditure Report

2. **Part A Utilization Report**   **Attachment B**

   - Utilization Report

3. **Clinical Quality Management (CQM) Update**   **Attachment C**

   - CQM Report

4. **Other Updates**

   - **Part A**

     o We received a notice of a partial award from HRSA on 2/10/20 for grant year 20/21. We received BOS approval for acceptance of the award on 3/10/20. The final full award notice was received on 4/15/20 from HRSA and is scheduled to go before the BOS for approval for acceptance on 5/19/20.

     o The current contracts are set to expire on 2/28/2021. We are in the process of going out for RFP for the contracts beginning 3/1/2021.

   - **Coronavirus Aid, Relief, and Economic Security (CARES) Act**

     o The (CARES) Act was signed into law on 3/27/20. The CARES Act is an economic relief package of over $2 trillion to protect the American people from the public health and economic impacts of COVID-19. As a result of this enactment, we received a notice of award under the CARES Act on 4/15/2020. This item is scheduled to go before the BOS for approval for acceptance on 5/19/20.

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- **Ending the HIV Epidemic NOA**

    o We received the Notice of Award for the Ending the HIV Epidemic (EHE) funding from HRSA on 2/26/20. We also received BOS approval for acceptance of the award on 4/7/2020. This item is going out for RFP and pending contracts accordingly.

- **Ryan White Conference**

    o The Ryan White Conference is going to be held August 11 – 14 this year at the Marriott Marquis Washington, DC.
    o We have not received any information to date that this has been cancelled, postponed or changed.

Ryan White Program Expenditure
## *Report February 2020

ATTACHMENT A

COLUMN A	COLUMN B	COLUMN C	COLUMN D	COLUMN E	COLUMN F	COLUMN G	COLUMN H
Service Category	Allocations	Average Exp Per Month (12/12)	Expended YTD	Remaining YTD	% Expended YTD	Target % as of Feb 20	Variance
Out/Amb Medical	378,796.00	31,566.33	443,863.46	-65,067.46	117.18%	91.67%	25.51%
Mental Health	462,013.00	38,501.08	352,104.25	109,908.75	76.21%	91.67%	-15.46%
Med Case Mgmt	851,380.00	70,948.33	768,529.29	82,850.71	90.27%	91.67%	-1.40%
Substance Abuse	378,810.00	31,567.50	336,360.00	42,450.00	88.79%	91.67%	-2.87%
Medical Nutirtion Therapy	167,720.00	13,976.67	164,790.56	2,929.44	98.25%	91.67%	6.59%
Dental	1,151,380.00	95,948.33	1,108,160.80	43,219.20	96.25%	91.67%	4.58%
Home/Comm Based	123,743.00	10,311.92	112,554.93	11,188.07	90.96%	91.67%	-0.71%
EIS - Part A	469,339.00	39,111.58	413,580.95	55,758.05	88.12%	91.67%	-3.55%
Case Mgmt (non-Med)	947,026.00	78,918.83	848,703.66	98,322.34	89.62%	91.67%	-2.05%
Food	541,670.00	45,139.17	554,077.46	-12,407.46	102.29%	91.67%	10.62%
Housing	280,703.00	23,391.92	236,912.28	43,790.72	84.40%	91.67%	-7.27%
Transportation	444,921.00	37,076.75	451,538.50	-6,617.50	101.49%	91.67%	9.82%
Psychosocial	155,170.00	12,930.83	122,145.86	33,024.14	78.72%	91.67%	-12.95%
(EFA) Emergency Financial Ass	38,000.00	3,166.67	13,524.84	24,475.16	35.59%	91.67%	-56.07%
EIS MAI	446,317.00	37,193.08	389,665.52	56,651.48	87.31%	91.67%	-4.36%
TOTALS	6,836,988.00	569,749.00	6,316,512.36	520,475.64	92.39%	91.67%	0.72%

LEGEND

|	
Column A	Current funded RWP services established by IEHPC at PSRA
Column B	Current RWP service allocations established by IEHPC at PSRA
Column C	Estimated monthly expenditure amounts based on entire allocations. Formula = Column B / 12
Column D	Actual year-to-date expenditures of RWP Part A services as reported by RWP Part A providers
Column E	Actual year-to-date of amounts remaining. Formula = Column B - Column D
Column F	Percentage of year-to-date of funds expended. Formula = Column D / Column B
Column G	Target Percent that should be expended (ex: Jan is the 11th month of program yr,11/12=91.6700%)
Column H	Variance between Optimal Percent and Acutal Percent of funds expended. Formula = Column G - Column F
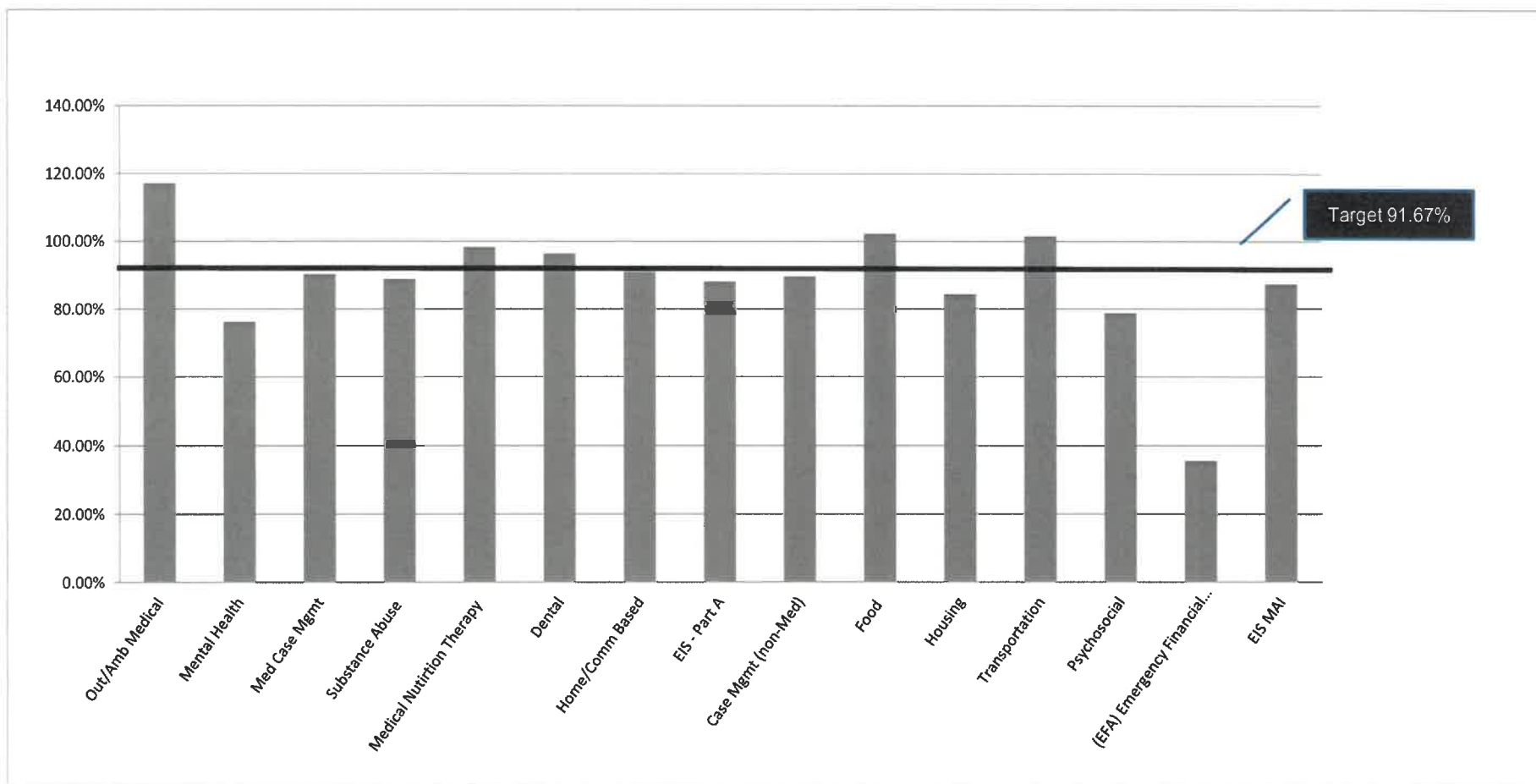
Target 91.67%

ATTACHMENT B

SERVICE UNIT DELIVERY					
Service Category	Planned Units	Actual Units Delv'd*	% of Total Units Delv'd vs. Planned	Target % For This Time of Year	Variance From Target
Out/Amb Medical	4,857	5,485	113%	100%	12.9%
Mental Health	21,497	19,533	91%	100%	-9.1%
Med Case Mgmt	13,422	21,704	162%	100%	61.7%
Substance Abuse	22,162	27,269	123%	100%	23.0%
Dental	20,571	16,544	80%	100%	-19.6%
Medical Nutrition Therapy	5,450	8,926	164%	100%	63.8%
Home/Comm Based	11,784	11,949	101%	100%	1.4%
Case Mgmt (non-Med)	46,919	58,836	125%	100%	25.4%
Food	42,505	38,395	90%	100%	-9.7%
Housing	8,370	13,274	159%	100%	58.6%
Transportation	22,461	24,450	109%	100%	8.9%
Psychosocial	7,791	13,616	175%	100%	74.8%
EFA	1,148	1,928	168%	100%	67.9%
EIS Part A	27,817	32,911	118%	100%	18.3%
EIS MAI	27,970	34,588	124%	100%	23.7%

Black Bar = Target %

Green Bar = % of Total Clients Served vs. Planned
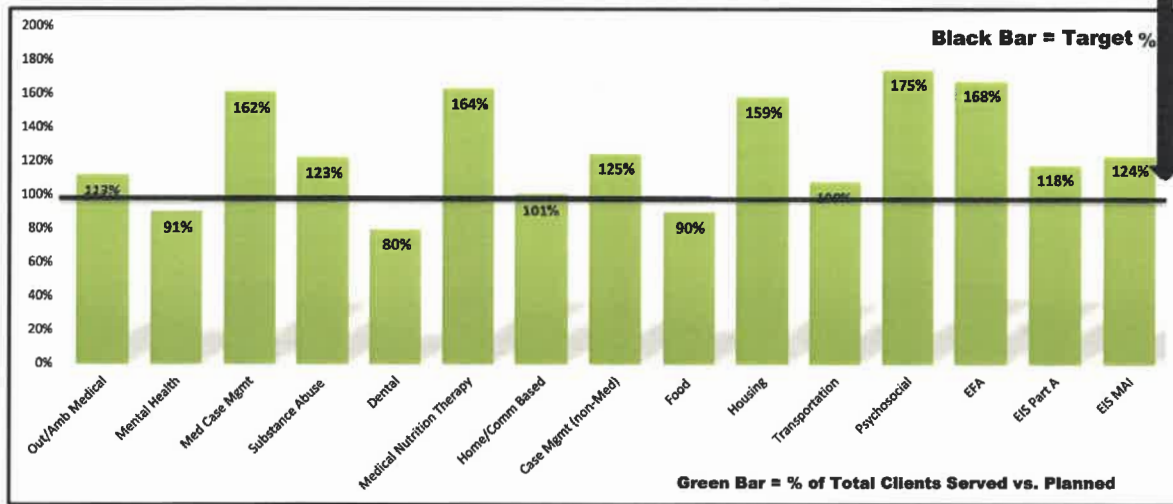
CLIENT DELIVERY					
Service Category	Planned Clients	Actual Clients Served*	% of Total Clients Served vs. Planned	Target % For This Time of Year	Variance From Target
Out/Amb Medical	201	292	145%	100%	45%
Mental Health	266	274	103%	100%	3%
Med Case Mgmt	986	1,252	127%	100%	27%
Substance Abuse	262	267	102%	100%	2%
Dental	1,012	844	83%	100%	-17%
Medical Nutrition Therapy	265	274	103%	100%	3%
Home/Comm Based	15	29	193%	100%	93%
Case Mgmt (non-Med)	2,242	2,232	100%	100%	0%
Food	795	1,281	161%	100%	61%
Housing	351	559	159%	100%	59%
Transportation	1,236	1,683	136%	100%	36%
Psychosocial	137	163	119%	100%	19%
EFA	43	44	102%	100%	2%
EIS Part A	5,191	5,093	98%	100%	-2%
EIS MAI	4,506	5,023	111%	100%	11%
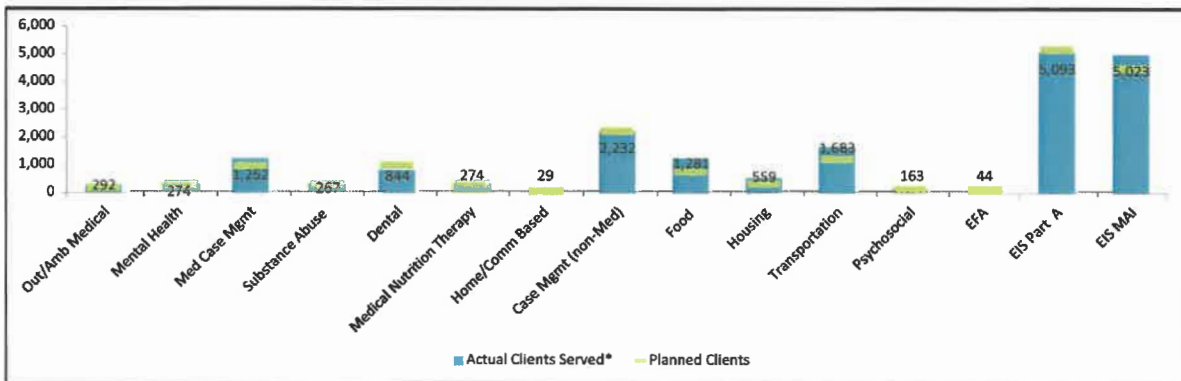
Actual Clients Served*   Planned Clients

Items updated since the last report are bolded.

TOPIC	ACTIVITY	CURRENT STATUS
INFRASTRUCTURE		
TGA CQM Plan	• Update/Revise	• **The RWP completed an updated draft of the TGA-wide CQM Plan for 2020-2022 to reflect the new developments to the CQM Program including: membership in the California Regional Group (CARG), RSBTGA infrastructure, subrecipient CQM requirements, and quality improvement collaborations that may contribute to the NHAS, CA's Getting to Zero Plan, and the EHE using Ryan White and county surveillance data.** • **The plan was introduced to the CQM Quality Group at our CQM Meeting on January 21st where subrecipient feedback was encouraged.** • **As a current partner and co-lead of the California Regional Group, Laura Moore (RSBTGA CQM Lead) is looking to represent Riverside and San Bernardino County as a single community partner under CARG.**
CQM Workgroup	• CQM Workgroup Meetings	• **The RWP has met with subrecipients to discuss quality management and quality improvement efforts going into 2020. Ideas surrounding CQM staffing and CQM contract requirements.** • **The RWP, with Norcott Consulting Inc., hosted a CQM development week on January 21st to plan and discuss CQM activities within the TGA. More specifically, CARG involvement, Discussion of new target populations: Transgender, Homeless, Mental Health/Substance Abuse, New Part A Contract language, RSBTGA CQM Review with Provider Survey, ARIES Report Review, and potential focus groups.**
Collaboration	• HIV Prevention / STD / Surveillance / Communicable Disease Investigators	• **The RWP is actively seeking involvement with SB County prevention staff to ensure cross-part collaboration in the field of HIV and AIDS.**
	• Obtain Data from Surveillance	• **The RWP will be seeking various reports from County Surveillance programs for PSRA and the Part A Grant Application. San Bernardino County has yet to fill the Epidemiologist position.**
	• Obtain planning data from State	• **The RWP will be requesting ADAP and Medi-Cal data from the state for PSRA and application processes.**
	• Obtain planning data from non-Part A providers	• **The RWP is revising the methodology for the annual Resource Gap Analysis.** • **The RWP will be requesting data from non-Part A providers for PSRA Resource Gap analysis and 2021 grant application.**
	• Ending+Disparities ECHO Collaborative	• **The Ending+Disparities ECHO Collaborative is ending in June; however, the California Regional Group (CARG) is continuing quality efforts throughout 2021.** • **CARG is now known as the only established Quality Group in the state of California. Numerous agencies, federal and state, have requested more information and more collaboration with CARG in the EHE Plan and Ryan White CQM Programs.** • **CARG membership is growing and will include agencies from the 8 targeted counties in the EHE Plan.** • **CARG's 2020 Kick-Off Call was January 15th. Our next meeting is May 13th.**

Items updated since the last report are bolded.

Standards of Care	• Provide guidance re HRSA and program requirements and distribute revised standards to providers as appropriate.	• Ongoing → Continue to assist committee by providing service provider contact info and reviewing revisions to ensure HRSA and program requirements are met.
Resource Guide	• Ensure the availability of a resource guide	• **In our efforts to increase education and awareness of services offered within the TGA, the RWP will be discussing the design and implementation of a new comprehensive RW Factsheet that will assist subrecipients in collaborating, referring, and linking clients to care. Services offered outside of the TGA (Los Angeles, San Diego, etc.) will also be recommended as many people tested in our TGA do not necessarily reside in our TGA. These networks and partnerships will ensure continuous efforts in HIV treatment within the county and state.**
National Monitoring Standards (NMS)	• Determine TA needs associated with NMS	• **Provider self-audits were received November 15th for 2019 mid-year review to prepare for year-end.** • **The RWP is expecting TA requests after the 19/20 Year-End Program Monitoring Process, as new monitoring tools have been developed to better align with the NMS and the current Standards of Care. Subrecipient feedback and TA needs will be one of the CQM Program's quality improvement projects for FY20/21.**
Affordable Care Act (ACA)	• Continuous assessment of impact of ACA on RWP service providers	• RW staff analyze ARIES data periodically to assess changes in utilization and client insurance status. Providers are also polled periodically to gather information on the impact of the ACA on the RWP system of care and its clients.
	• Develop ACA-related reports for IEHPC planning	• RWP included the latest available ACA data and info in reports at the 2019 PSRA and for the FY 20/21 Part A Grant Application. • RWP will continue to monitor changes related to ACA and anticipate, when possible, necessary changes to the RWP system. Findings will be reported to PC when available/applicable.

CAPACITY BUILDING		
Case Management / Outreach	• Trainings	• The RWP will include Case Management and Outreach training in the revised CQM Plan and visit agencies to provide TA as needed.

Quality Improvement (QI)	• Trainings	• **Current QI Trainings/PDSA's:**
		    a. **Monthly Utilization Reporting**
		    b. **Program Monitoring**
		    c. **CQM Program Development**
		    d. **ARIES Report Review**
		• **More training and building capacity in QI as it relates to our TGA-wide Clinical Quality Management Plan will be conducted pending TGA needs.**

Improve Access to Data	• ARIES TL Calls	• **The RWP conducts ARIES TL Calls as needed or requested by subrecipients.**

EVALUATION / MONITORING		
Program Monitoring	• Conduct On-site Program Visits	• **The RWP has begun the next round (19/20) of onsite monitoring visits February 2020 to assess compliance with NMS and IEHPC Standards of Care (eligibility and non-eligibility). Site visit**

Items updated since the last report are bolded.

		dates, notification letters, instructions, and tools have been distributed to each subrecipient and client sample lists were created at the end of January/Early February. Due to COVID-19, we were unable to complete monitoring, but will resume once we are able to visit the various sites. • **The RWP revised the format of the RW monitoring tools to reflect the format of the tools provided by the California State Office of AIDS. Potential NEW monitoring elements for 2020/2021 were introduced during on-site visits (Viral Load, CD4, quality management/improvement, and service forms).** • **The RWP will pilot a "Desk Review" component for 2019, which allows subrecipients to safely submit Agency-level elements (documents, policies, and procedures) to the RWP for monitoring prior to their scheduled on-site visit. This opens up on-site visits to focus on client-level and service elements as well as site elements.**
	• Review and approve provider corrective action plans related to year-end on-site visits.	• All Corrective Action Plans (CAPs) and findings have been entered into a tracking system, which allow RWP to track the status of findings and ensure that remedies are in place. All 2019 CAPs will be reviewed during the 2020 monitoring cycle.
	• ARIES	• **The RWP conducted a Mid-Year ARIES Data Review for all subrecipients. Results showed that all agencies are entering all RSR required data elements into ARIES as required.**
EIIHA (Unaware)	• Monitor EIIHA clients via ARIES	• 19/20 Mid-Year EIS reports were due November 8, 2019. These data are used to ensure reporting processes are adequate for reporting of service delivery and outcomes to HRSA.
Client Satisfaction	• Conduct a client satisfaction survey	• SBCDPH assisted with the online development of a Ryan White Client Survey: http://wp.sbcounty.gov/dph/survey/. This survey is more general, but designed so clients can quickly and briefly respond to services received year-round. Results will be generated and distributed on a quarterly basis, provided enough data are collected. A more comprehensive client satisfaction survey will be available online around summer 2020, with service specific questions, so that clients can provide more feedback about their services. Year-end aggregate results will be distributed annually.
Outcomes / Measures	• Develop/revise list of elements and baseline measures	• Baselines and measures have been updated to reflect the end of FY2019-2020. • Updated measures have been applied to the HIV Continuum of Care.
	• The RWP	• The RWP is in contact with the California Department of Public Health (CDPH) and ARIES to revamp and solidify reliable ARIES QM Reports for Linkage to Care, Retention in Care, Prescription of ART, and Viral Load Suppression. a. *New Retention measure: 2 care visits at least 90 days apart, with 1 visit being with a Provider with prescribing privileges in a 12-month period.* • **More detailed Outcome Measures have been and will continue to be discussed and recorded during CQM and CARG meetings. The RWP hopes to build a Performance Measure portfolio with corresponding methodologies to share will all subrecipients.** • The RWP is adapting a HAB Measures Report and Gap List from AHF-Hollywood. These documents will aide RSBTGA subrecipients in tracking health outcomes for clients in a specific service category

Items updated since the last report are bolded.

		(e.g. mental health, substance abuse) or clients with poor outcomes. These reports will then assist subrecipients in QI development.
Comp Plan	• Assist IEHPC with monitoring/evaluating Comp Plan goals/objectives	• The PC Liaison coordinated development of the plan in collaboration with the California Office of AIDS. The plan was released by the state in October 2016. See the Office of AIDS site for the document. • PC should review and incorporate the concepts into local activities • A review call with HRSA and CDC was scheduled January 23rd. Participants included representatives from HRSA, CDC, the state, and the three partnering districts, including ours. Planning Councils were encouraged to have representatives on the call as well.
REPORTING		
Conditions of Award/ Application	• **Submit CY 2019 RSR reports / client data**	• Due February 19, 2020 - Submitted
	• **Submit FY 19/20 Annual Progress Report**	• Due May 2020
	• **Submit FY 19/20 Final Expenditure Table**	• Due May 2020
	• **Submit FY 19/20 FFR**	• Due July 2020
	• **Submit FY 19/20 Part A Program Terms Rpt**	• Due 90 Days after receipt of Final Award
	• **Submit FY 19/20 Core Services Waiver**	• Due Aug 2020
	• **Submit FY 20/21 Part A Application**	• Due September 2020
	• **Submit FY 20/21 Unobligated Balance Rpt**	• December 31, 2020
Program Monitoring	• Report aggregate results to IEHPC	• Aggregate results for FY 19/20 close-out complete.
Client Satisfaction	• Report agency-specific Client Sat. results to providers and aggregate results to PC	• N/A
PSRA Reports	• Resource Gap Analysis • Client Profile Reports (including Outcomes) • Epidemiology Reports • ACA Data/Info • Allocation / Expenditure History • Service Dashboards	• **The RWP will assist PC Support in compiling reports for their priority setting and resource allocation in June 2020, according to report requests from the IEHPC. Dates tentatively scheduled June 24-25, 2020.**