

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING AGENDA

WEDNESDAY, OCTOBER 25, 2023 11:00AM TO 1:00PM

ELECTRONIC MEETING VIA ZOOM VIDEO CONFERENCING

ELECTRONIC – ONLINE MEETING

Note: all times are approximate				
11:05 am	Call to Order and Moment of Silence Welcome and Introductions			
11:10 am	3. Adopt Agenda for October 25, 20234. Approve Minutes for September 27, 2023			
11:15 am	5. Ryan White HIV/AIDS Program (RWHAP) – Reports & Financial Oversight			
11:30 am	6. Other Business Carry-over Funds Motion			
12:15 pm	7. Announcements and Adjournment			

NEXT COMPREHENSIVE PLANNING
COMMITTEE (CPC) MEETING:

WEDNESDAY NOVEMBER 15, 2023
11AM TO 1PM
ELECTRONIC MEETING VIA ZOOM VIDEO
CONFERENCING (ONLINE)



COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, SEPTEMBER 27, 2023 – 11:00AM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL							
COMMISSIONERS	PRESENT	ABSENT	COMMITTEE MEMBERS	PRESENT	NT ABSENT		
Carney, Misty	Х						
Clark, Lamont (Gov. Co-Chair)	Х						
Copley, Mackenzie (Chair)	Х						
DeMartino, Peter		Х					
Palmer, Kentrell (Kenny)		Х					
Ramos, Claudia	Х		COMMUNITY PARTNERS/GUESTS PRESENT		ABSENT		
Shaw-Richardson, Re'ginald	Х						
			Stuckey, Christopher	X			
RYAN WHITE RECIPIENT STAFF	PRESENT	ABSENT					
Edmonds, Jason	Х						
Smith, Avemaria (Recipient)	Х		CONSULTANTS	PRESENT	ABSENT		
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT		
Price Ashley	Х		Bailey, Patrice	Х			
Orban, Julie	Х		Johnson, Alan	Х			

HIGHLIGHTS

NOTE: This is a draft version of the September 27, 2023, Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the October 25, 2023, meeting and made available thereafter.

AGENDA

ITEM	DISCUSSION			
Call to Order	Mackenzie C. called the meeting to order at 11:07 am, followed by a moment of silence and introductions.			
Review and Adoption of the Agenda	There were no changes to the September 27, 2023, Meeting Agenda. Therefore, Mackenzie assumed the motion to adopt the agenda as presented.			



Review and			
Approval of the			
Minutes			

There were no changes made to the August 23, 2023, Meeting Minutes. Therefore, Mackenzie assumed the motion to approve the meeting minutes as presented.

Avemaria S. presented the Recipient Report

The Part A and Part A MAI report is being presented for the month of July for Grant Year 33. The full award is in the amount of \$32,652,189.00.

FISCAL STATUS

Twenty-three (23) of the twenty-six (26) providers have submitted payment requests that were processed, and three (3) providers have not submitted an invoice for Part A and Part A MAI in July.

PART A FISCAL SUMMARY

Part A expenditures are at 39% and should be at 42%.

Service areas affected by unprocessed invoices were Early Intervention Services (EIS), Substance Abuse Services – Outpatient (SASO), Psychosocial Support Services (PSS), Medical Case Management (MCM), Medical Transportation Services (MT), and Outreach Services (OS).

The service spending 30% below expected was Health Insurance Premium and Cost Sharing Assistance (HIPCSA.

Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight

The service spending 30% above expected was Mental Health Services (MHS) due to the partially funded Pay Per Service FTE's.

PART A MAI FISCAL SUMMARY

Part A MAI expenditures were at 29% and should be at 42%.

Service areas affected by unprocessed invoices were Outpatient Ambulatory Health Services (OAHS), Early Intervention Services (EIS), Psychosocial Support Services (PSS), Mental Health Services (MHS), Medical Case Management (MCM), and Substance Abuse Services – Outpatient (SASO).

Services spending 30% below expected were Medical Case Management (MCM), Psychosocial Support Services (PSS), and Substance Abuse Services – Outpatient (SASO).

RECIPIENT REPORT

The Recipient requested follow-up to the recommendation to include Non-Medical Case Management and Medical Transportation to MAI programs and make Substance Abuse Outpatient services optional. Lamont indicated that he surveyed the commissioners, and the recommendation was approved unanimously with a 20 to 1 vote.

The Recipient is preparing to submit the FY24 Non-Competing Continuation (NCC) Progress Report, which is due on October 2, 2023.

HRSA approved the Recipient's FY22 final carryover request, and the Notice of Grant Award has been received.



The Recipient's FY22 RWHAP Part A Formula UOB Penalty Waiver was approved by HRSA.

The District is preparing to close out FY23 and startup FY24.

The Recipient staff will begin reviewing subrecipient expenditure levels and assess the need to right size grant awards to avoid lapse of finding.

HAHSTA is working internally to continue working during the anticipated Government shut down.

PSRA Recap

Lamont noted that he sent a recap of the PSRA meeting and indicated what it may look like in GY24. Mackenzie acknowledged Avemaria and her team for all the work that went into satisfying the data request and composing the presentation.

New Projects

Other Business

Mackenzie would like to re-examine the PSRA process, and the information included in the report. He will begin by reviewing the Needs Assessment and bring his findings to the next meeting with a plan of action. He may also engage the George Washington University (GW) research team for input.

Mackenzie would also like to receive monthly reports on prevention spending. Avemaria explained the structure of the HAHSTA Administration and which division has stewardship over prevention spending and allocations. She will submit a request to have someone from the Prevention Division present or submit a report on the spending.

ANNOUNCEMENTS/OTHER DISCUSSION

Mackenzie shared his experience as vice chair of the CPC and noted that since moving into the chair position, the vice chair position is still open. Anyone who's interested should contact him or Lamont.

Last Wednesday, Mackenzie was appointed to the Presidential Advisory Council on HIV and AIDS in Charleston West Virginia. He accredited the COHAH as the reason he was able to be considered for the opportunity.

HANDOUTS

- September 27, 2023, Comprehensive Planning Committee (CPC) Meeting Agenda
- August 23, 2023, Comprehensive Planning Committee (CPC) Meeting Minutes
- Recipient Reports for July 2023

MEETING ADJOURNED		NEVE	WEDNESDAY, OCTOBER 25, 2023	
	12:02 pm	NEXT MEETING	11:00am to 1:00pm	
			ZOOM CONFERENCE AND VIDEO CALL	



Date: October 25, 2023

To: Comprehensive Planning Committee (CPC)

From: Ryan White HIV/AIDS Program (RWHAP) Recipient Staff

Re: Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding)

Year 33 - Reporting Period: August 1 - 31, 2023

Part A and Part A MAI. The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 32 includes two components: Part A and Part A Minority AIDS Initiative (MAI). These reports are designed to report distinctly on the associated program activities. For GY 33 the recipient received the full award in the amount \$32,652,189.00.

Notes on Overview. The fiscal spreadsheets list the service categories by Part and jurisdiction and identifies the reported expenditure as a proportion of expected-to-date. The COHAH has requested an explanation of those service categories with a 30% variance from the target percentage.

FISCAL STATUS

For Part A and Part A MAI in August 2023, of the twenty-six (26) providers, twenty-four (24) submitted payment requests that were processed, and two (2) providers have not yet submitted August 2023 invoices.

SERVICE DELIVERY CHALLENGES

DC: No challenges.

MD: No challenges.

VA: No challenges.

PART A FISCAL SUMMARY

Part A expenditures are 43% and should be 50%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

Early Intervention Services (EIS)

Oral Health Care (OH)



Substance Abuse Services – Outpatient (SASO)
Medical Case Management (MCM)
Non-Medical Case Management (NMCM)
Medical Nutrition Therapy (MNT)
Medical Transportation Services (MT)
Outreach Services (OS)
Psychosocial Support Services (PSS)

Services 30% below expected:

Health Insurance Premium and Cost Sharing Assistance
(HIPCSA)
Housing Services (HS)
Psychosocial Support Services (PSS)

Services 30% above expected:

N/A

PART A MAI FISCAL SUMMARY

Part A MAI expenditures are 34% and should be 50%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

Early Intervention Services (EIS)
Mental Health Services (MHS)
Medical Case Management (MCM)
Substance Abuse Services - Outpatient (SASO)
Psychosocial Support Services (PSS)

Services 30% below expected:

Early Intervention Services (EIS)
Medical Case Management (MCM)
Psychosocial Support Services (PSS)
Substance Abuse Services – Outpatient (SASO)



N/A			

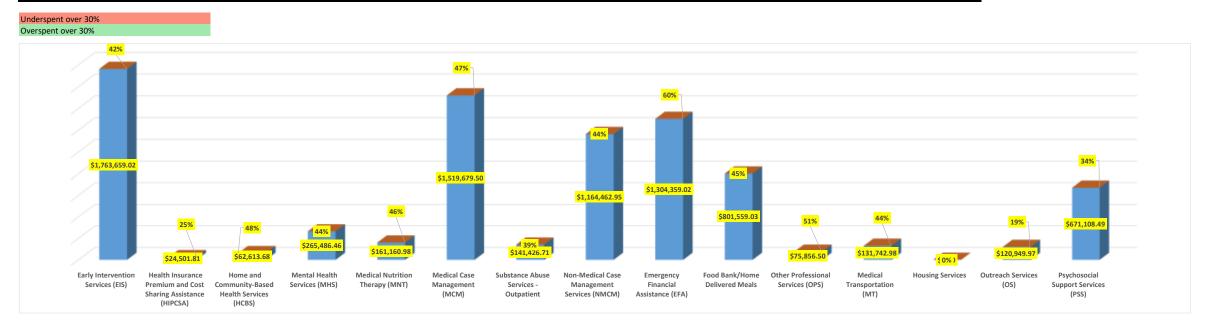
RECIPIENT REPORT

- **1. FY22 Final Carryover Request**: HRSA approved the Recipient's FY22 final carryover request. The Recipient received the updated Notice of Award in September.
- **2. Reprogramming Request:** The Recipient submitted a motion for the planned use of FY22 carryover funds to the CPC in October.
- **3. Ryan White Jurisdictional Meeting:** Regional Health Department Collaboration. The Health Departments for Maryland, Virginia, and Washington, DC met in Richmond, VA on October 12th. The Ryan White Program representatives from the regional collaboration will meet in November to discuss streamlining the administrative process for site visits and funding levels for shared providers.
- **4. Part A RFA Re-Release:** Recipient staff are preparing to re-release the Part A RFA to expand the Ryan White Provider Network by creating new and/or expanded access points for Ryan White eligible customers seeking core medical and supportive services within the Washington, DC EMA.

Washington, DC EMA Part A Grant Year 33 Report through August 2023

Jurisdiction	Current Award - Finalized	Expenditures	Remaining Balance	Percent Spent	Comments
District of Columbia - Part A	18,251,285	8,200,822	10,050,463	45%	
District of Columbia - MAI	1,407,837	659,838	747,999	47%	
District of Columbia Subtotal	19,659,122	8,860,660	10,798,462	45%	
Northern Virginia Part A	1,867,364	630,015	1,237,349	34%	
Northern Virginia MAI	273,540	79,787	193,753	29%	
Northern Virginia Subtotal	2,140,904	709,802	1,431,102	33%	
Suburban Maryland - Part A	3,170,440	1,243,978	1,926,462	39%	
Suburban Maryland MAI	295,454	-	295,454	0%	
Suburban Maryland Subtotal	3,465,894	1,243,978	2,221,916	36%	
West Virginia - Part A	402,454	108,442	294,012	27%	
West Virginia Subtotal	402,454	108,442	294,012	27%	
TOTAL Part A	23,691,543	10,183,257	13,508,286	43%	
TOTAL MAI	2,174,586	739,625	1,434,961	34%	

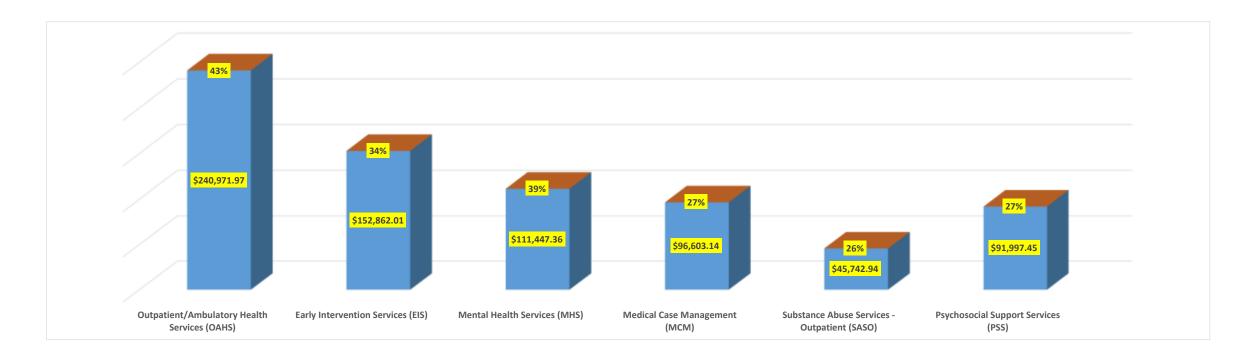
SERVICE CATEGORY	ALLOCATED		EXPENDITURES TO DATE								
				Reported \$							
	Current AWARDS	DC	MD	VA	WVA	Total	Reported %	Expected \$	Expected %	Comments	
Outpatient/Ambulatory Health Services											
(OAHS)	\$3,518,909.00	\$ 1,187,436.82	\$ 196,767.03	\$ 37,012.34		\$ 1,421,216.19	40%	\$1,759,454.50	50%		
Oral Health Care	\$1,166,943.00	\$ 359,650.88	\$ 169,676.92	\$ 24,146.27		\$ 553,474.07	47%	\$583,471.50	50%		
Early Intervention Services (EIS)	\$4,183,396.81	\$1,422,878.50	\$91,023.98	\$249,756.54		\$1,763,659.02	42%	\$2,091,698.41	50%		
Health Insurance Premium and Cost										Staff vacancies, underutilitzed	
Sharing Assistance (HIPCSA)	\$97,606.00	\$2,635.91	\$5,571.81		\$16,294.09	\$24,501.81	25%	\$48,803.00	50%	services	
Home and Community-Based Health											
Services (HCBS)	\$130,667.00	\$62,613.68				\$62,613.68	48%	\$65,333.50	50%		
Mental Health Services (MHS)	\$597,644.00	\$241,037.32		\$24,449.14		\$265,486.46	44%	\$298,822.00	50%	Actively monitoring spending	
Medical Nutrition Therapy (MNT)	\$351,311.00	\$138,480.24	\$22,236.00		\$444.74	\$161,160.98	46%	\$175,655.50	50%		
Medical Case Management (MCM)	\$3,240,782.00	\$979,383.51	\$432,665.79	\$78,394.04	\$29,236.16	\$1,519,679.50	47%	\$1,620,391.00	50%		
Substance Abuse Services - Outpatient	\$358,347.00	\$120,579.79		\$20,846.92		\$141,426.71	39%	\$179,173.50	50%		
Non-Medical Case Management Services											
(NMCM)	\$2,622,576.00	\$888,614.72	\$200,619.37	\$75,228.86		\$1,164,462.95	44%	\$1,311,288.00	50%		
										Actively monitoring spending; providers reported a decrease in	
Emergency Financial Assistance (EFA)	\$2,180,276.00	\$1,255,173.31			\$49,185.71	\$1,304,359.02	60%	\$1,090,138.00	50%	community resources coupled with inflation costs	
Food Bank/Home Delivered Meals	\$1,791,153.00	\$801,559.03			φ49,100.71	\$801.559.03	45%	\$895,576.50	50%	innation costs	
Other Professional Services (OPS)	\$150,000.00	\$75,856.50				\$75,856.50	51%	\$75,000.00		Actively monitoring spending	
Medical Transportation (MT)	\$300,946.00	\$83,873.02	\$23,901.73	\$13,168.23	\$10,800.00	\$131,742.98	44%	\$150,473.00	50%		
Housing Services	\$375,068.08	ψ00,070.02	Ψ20,901.73	ψ10,100.23	ψ10,000.00	\$0.00	0%	\$187,534.04	50%		
Outreach Services (OS)	\$650,498.20	\$53,539.72	\$64,928.61		\$2,481.64	\$120,949.97	19%	\$325,249.10	50%		
Psychosocial Support Services (PSS)	\$1,975,420.00	\$527,509.48	\$36,586.44		Ψ2,401.04	\$671,108.49	34%	\$987,710.00	50%		
TOTAL	\$23,691,543.09		\$1,243,977.68	\$630,014.91	\$108,442.34	\$ 10,183,257.36	43%	\$11,845,771.55	50%		



PART A MAI Washington, DC EMA Part A Grant Year 33 Report through August 2023

SERVICE CATEGORY	AWARDS		EXPENDITURES TO DATE									
	Current Budget	Reported \$										
		DC	MD	VA	Total	Reported %	Expected \$	Expected %	Comments			
Outpatient/Ambulatory Health Services												
(OAHS)	\$561,644.00	\$228,230.09		\$12,741.88	\$240,971.97	43%	\$280,822.00	50%				
Early Intervention Services (EIS)	\$450,138.00	\$123,979.10		\$28,882.91	\$152,862.01	34%	\$225,069.00	50%				
Mental Health Services (MHS)	\$287,976.00	\$110,933.94		\$513.42	\$111,447.36	39%	\$143,988.00	50%				
Medical Case Management (MCM)	\$354,160.00	\$94,649.12		\$1,954.02	\$96,603.14	27%	\$177,080.00	50%				
Substance Abuse Services - Outpatient									Unprocessed invoices; staff			
(SASO)	\$178,515.00	\$45,742.94			\$45,742.94	26%	\$89,257.50	50%	vacancies			
Psychosocial Support Services (PSS)	\$342,153.00	\$56,302.42		\$35,695.03	\$91,997.45	27%	\$171,076.50	50%	Unprocessed invoices			
TOTAL	\$2,174,586.00	\$659,837.61	\$0.00	\$79,787.26	\$739,624.87	34%	\$1,087,293.00	50%				

Underspent over 30% Overspent over 30%



Greater Washington Eligible Metropolitan Area

Jurisdiction: District of Columbia Services Report-DC

Period Covered: Mar 01, 2023 - February 29,2024

HRSA Service Areas for Grant Year 33	Quart	er 1	Quarte	er 2	Quar	ter 3	Quart	er 4	Cumulativ	ve Total
Core Medical Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Early Intervention Services	1,520	5,700	1,475	4,825					2,995	10,525
Oral Health Services	134	229	139	241					273	470
Outpatient/Ambulatory Health Services	672	2,698	625	2,529					1,297	5,227
Medical Nutrition Therapy (including supplements)	176	482	141	622					317	1,104
Mental Health Service	162	1,297	122	743					284	2,040
Substance Abuse Outptient Care	79	158	188	465					267	623
Medical Case Management (including Treatment Adherance)	476	4,370	508	4,134					984	8,504
	Quart	er 1	Quarte	er 2	Quar	ter 3	Quart	er 4	Cumulativ	ve Total
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Emergency Financial Assistance	612	1,344	633	1,381					1,245	2,725
Non-Medical Case Management	592	3,935	656	4,551					1,248	8,486
Food Bank/Home Delivered Meals	409	67,108	415	70,113					824	137,221
Medical Transportation	326	1,402	267	964					593	2,366
Linguistics	0	0	0	0					0	0
Psychosocial Support Services	258	1,200	222	1,209					480	2,409
Home & Community-based Heath Services	5	6	0	0					5	6
Outreach Services	17	17	0	0					17	17
Other Professional Services	1	0	5	5					6	5

Notes:

Date of Report:10/4/2023 Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

Greater Washington Eligible Metropolitan Area Jurisdiction: Northern Virginia Services Report-VA

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33	Qua	rter 1	Qua	rter 2	Qu	arter 3	Qua	rter 4	Cumula	tive Total
Core Medical Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Outpatient Ambulatory Health Services	59	370	62	9 643	}				121	1,013
Early Intervention Services	315	1,403	316	1,223					631	2,626
Medical Case Management	98	385	84	460					182	845
Substance Abuse Outpatient Care	3	7	4	25					7	32
Oral Health Care	71	171	54	153					125	324
Mental Health Services	4	27	11	73					15	100
	Qua	rter 1	Qua	rter 2	Qu	arter 3	Qua	rter 4	Cumula	tive Total
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Psychosocial Support Services	78	448	66	431					144	879
Non-Medical Case Management	54	116	44	137	•				98	253
Medical Transportation	58	321	25	137	,				83	458

Notes:

Date of Report: 10/4/2023 Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

Greater Washington Eligible Metropolitan Area

Jurisdiction: Suburban Maryland Services Report-MD

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33	Quart	er 1	Quart	er 2	Quar	ter 3	Quar	ter 4	Cumulative	e Total
Core Medical Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Oral Health Services	132	296	116	223					248	519
Outpatient Ambulatory Health Services	111	451	88	343					199	794
Medical Case Management (including Treatment Adherence	150	1,089	184	1,346					334	2,435
Medical Nutrition Therapy (including supplements)	-	-	34	46					34	46
Mental Health Services	0	0	-	-					-	-
Substance Abuse Outpatient Care	0	0	-	-					-	-
Home and Community-based Health Services	0	0	-	-					-	-
Health Insurance Premium	20	24	17	20					37	44
Early Intervention Services	6	8	7	9					13	17
	Quart	er 1	Quart	er 2	Quai	rter3	Qaur	ter 4	Cumulative	e Total
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Psychosocial Support Services	14	39	13	31					27	70
Medical Transportation	34	201	64	309					98	510
Non-Medical Case Management	113	539	175	801					288	1,340
Outreach Services	2	2	36	73					38	75

Notes:

Date of Report: 10/4/2023 Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

Greater Washington Eligible Metropolitan Area Jurisdiction: West Virginia Services Report-WVA

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33

	Quart	er 1	Quart	er 2	Quar	ter 3	Quar	ter 4	Cumulati	ve Total
Core Medical Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Medical Nutrition Therapy (including supplements)	5	7	9	19					14	26
Health Insurance Premium	-	-	13	50					13	50
Medical Case Management (including Treatment Adherance)	133	289	119	248					252	537

	Quarter 1		Quarter 2		Quarter 3		Quarter4		Cumulative Total	
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Emergency Financial Assistance	20	32	10	11					30	43
Medical Transportation	-	-	13	64					13	64
Outreach Services	14	17	5	6					19	23

Notes:

Date of Report: 10/4/2023 Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

Greater Washington Eligible Metropolitan Area

Jurisdiction: WDC EMA-MAI

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33

	Quart	er 1	Quart	ter 2	Quar	ter 3	Quar	er 4	Cumulativ	ve Total
Core Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Outpatient Ambulatory Health Services	62	450	51	540					113	990
Mental Health	65	317	57	223					122	540
Medical Case Management (including Treatment Adnerance	79	456	54	508					133	964
Substance Abuse Services Outpatient	16	43	19	46					35	89
Early Intervention Services	389	1,191	304	873					693	2,064

	Quart	er 1	Quart	er 2	Quar	ter 3	Quar	ter 4	Cumulati	ve Total
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Psychosocial Support Services	42	121	30	94					72	215

Notes:

Date of Report: 10/4/2023 Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:



MOTION FORM

<u>Instructions:</u> The Committee Chair or another Commissioner making a motion for consideration by the Planning Commission shall complete this form and submit it to Planning Commission staff.

Standing Commi	ittee of Origin:	Comprehensi Committee	ive Pla	nning		Date Mov	red:	
Mo								
Subject:	Use of Carryove	r Funds in GY3	33		•			
MOTION STATUS			AYES	Nayes	ABST.	DATE OF VOTE:	CHAIR SIGNATURE:	
Committee:	Passed	☐ Failed						
EOC Action:	☐ Passed	☐ Failed						
COHAH Action:	☐ Passed	☐ Failed						
Documents Attached:								

1. Text of the motion:

The recipient was approved to carryover \$852,666 of the GY32 unobligated balance for use in GY33. This funding will support new and expanded HIV care access points for persons with HIV. We plan to allocate \$271,351 to Outpatient Ambulatory Health Services, \$316,576 to Medical Case Management, \$248,739 to Non-Medical Case Management and \$16,000 to Early Intervention Services. The service category amounts are within COHAH's approved allocations for GY33.

- 2. Purpose of the motion / Need for the action
 The purpose of this motion is to provide a rationale on the planned use of carryover funds for GY33.
- Research completed prior to formulating recommended action
 A review of the GY 33 continuation awards, Part A sub-recipient provider network, surveillance data, and
 RW program data supports the recommended use of funds.
- Alternative strategies explored and reasons why the recommended action is preferable.
 There are no alternative solutions. The recommended action will increase access to RW services in the WDC EMA.