



The Washington, D.C. Regional Planning Commission on Health and HIV (COHAH) will invigorate planning for HIV prevention and care programs that will demonstrate effectiveness, innovation, accountability, and responsiveness to our community.

**COMPREHENSIVE PLANNING COMMITTEE (CPC)**  
**MEETING MINUTES**  
**WEDNESDAY, SEPTEMBER 26, 2018 @ 3:00 PM**  
**DC HEALTH-HAHSTA – 899 N. CAPITOL ST. NE; 4<sup>TH</sup> FLOOR; WASHINGTON, DC 20002**

<b>ATTENDEES/ROLL CALL</b>					
<b>Commissioners</b>	<b>Present</b>	<b>Absent</b>	<b>Administrative Agents</b>	<b>Present</b>	<b>Absent</b>
Copley, Mackenzie	X		Barmer, David	CC	
DeMartino, Peter	X		Simmons, Michelle		X
McBride, Dennis		X	Puranik, Rashmi	CC	
Morse, Ka'leef	X		Agar, Tim		X
Padmore, Gerald, <i>Chair</i>	X		Avellanet, Felix	CC	
Pannell, Altmann		X	Hayes-Cozier, Ravinia	CC	
Shaw-Richardson, Re'ginald	X				
<b>HAHSTA</b>			<b>Planning Commission Staff</b>		
Jason Edmonds	X		Lamont Clark	X	
Rony Mohram		X	Patrice Bailey	X	
Ward, Carroll	CC				
<b>HAHSTA/Administrative Agents</b>			<b>Guests</b>		
Barnes, Clover	X				
Fortune, Ebony	X				

<b>AGENDA</b>	
<b>Item</b>	<b>Discussion</b>
<b>Call to Order</b>	Gerald P. called the meeting to order at 3:08 pm, followed by a moment of silence and introductions.
<b>Review and Approval of the Agenda</b>	Mackenzie Copley motioned to approve the September 26, 2018 Comprehensive Planning Committee (CAC) Meeting Agenda. Peter DeMartino seconded the motion. The motion was approved.



<p><b>Review and Approval of the Minutes</b></p>	<p>Mackenzie C. motioned to approve the August 22, 2018 Comprehensive Planning Committee (CPC) Meeting Minutes. Peter D. seconded the motion. The motion was approved.</p>
<p><b>Committee Review of Financial Documents</b></p>	<p>Gerald led the discussion on the financial reports. Gerald and Mackenzie agreed that a half hour of time be taken at the CPC meeting to flush out any problems presented in the reports. Establish “take aways”, if any, in the form of slides to be presented at the General Body meeting, in addition to the jurisdiction’s reports.</p> <p>Kaleef M. introduced Jason Edmonds, Administrative Specialist in the Care and Treatment Division. Jason E. will be responsible for the Roll-up effective October 1, 2018. All are encouraged to ask questions and talk about likes and dislikes, so that he can shape the Roll-up moving forward. Peter D. asked what the deadline is for submitting data. Kaleef indicated that the data should be submitted two weeks before the meeting. Grants Management intends to have a final report by the second Friday of the month. HAHSTA will have an internal meeting the third week of the month to make corrections to the report so it will be cleaned and accurate in time for the CPC meeting the fourth week of the month. Gerald would like to see month-to-month variances on the report. Mackenzie would like to see an expenditure over allocation calculation so that spending can be determined relative to the annual budget.</p> <p>Peter asked what the committee is responsible for besides the financial report review. Kaleef indicated that the committee is also responsible for the Priority Setting and Resource Allocations (PRSA) process and funding stream analysis. Peter asked if there are any specific trainings or items to be considered currently. Lamont C. indicated that immediately after one PSRA is completed, preparation for the next PSRA should begin and when new or interesting information is discovered, it should be shared.</p>
<p><b>Ryan White HIV/AIDS Program (RWHAP) Jurisdictional Reports &amp; Financial Oversight</b></p>	<p><b><u>Carroll Ward presented the District of Columbia and West Virginia report.</u></b></p> <p><b>Available Funding / Status of Contracts / Implementation Progress</b>      For the month of July, (12) of (12) invoices were received. One of (12) invoices is pending and awaiting processing.</p> <p><b>Challenges to Service Delivery</b>      During the grant period there were some technical difficulties and challenges that one agency experienced with the Enterprise Grants Management System (EGMS). HAHSTA’s fiscal staff continues to work with sub-recipients to ensure that invoicing continues to go according to the process.</p> <p><b>Fiscal Summary</b>      Washington, DC Part A expenditures are at 33.6% and should be at 41.7%.      Part A MAI expenditures are at 29.9% and should be at 41.7%. The small allocation for the Other Professional Services category is overspent and has seen increased</p>



utilization through the month of July. A reprogramming request to increase the funding allocation for Other Professional Services was approved at the August commission meeting. The areas noted as underspent by 30% or more also overlap with the services impacted by unprocessed invoices.

**Note:** The DC allocation and award for Housing Case Management and Referral is reported on the unit based cost sheet which thereby skews the total expenditure amounts on the DC fiscal report.

**Service areas affected by unprocessed invoices are** Medical Case Management-MAI, Psychosocial Support Services Psychosocial Support Services-MAI, Outpatient Ambulatory Health Services-MAI, Early Intervention Services, Early Intervention Services-MAI, Medical Nutrition Therapy, Substance Abuse Services MAI and Medical Transportation Services.

**Services spending at 30% below expected are:** Medical Case Management (MCM), including, Treatment Adherence Services, Home and Community-Based Health Services, Medical Transportation, Psychosocial Support Services, Mental Health Services-MAI, Substance Abuse Services-MAI, Outpatient Ambulatory Health Services-MAI.

**The service spending at 30% above expected is** Other Professional Services

West Virginia Part A expenditures are at 45% and should be at 41.7%

**Unprocessed invoices did not affect other service areas.**

Mackenzie indicated that the Part A expenditures appear to be extremely underspent. When you consider that only half the amount of allocated money has been awarded it brings the percentage down from 33.6% to about 18%. Is there a plan to get that money spent? Ebony F. indicated that the adjustment was made in the allocation column, but not in the awards column. As of July, the money has been allocated but not awarded and until the money is actually given, it will not be reflected as an award. The same is true on the MAI sheet. Those changes have not been made but if you match it to what has been approved by the reprogramming, it evens out. Mackenzie asked if there is any concern about the 20% underspent of the initial allocation. Ebony indicated that once the provider receives the increase, they would be able to spend against it. It will be on the August report.

**Ravinia Hayes-Cozier presented the Suburban MD report**

**Available Funding / Status of Contracts / Implementation Progress**

This Suburban Maryland report represents expenses for July 2018. Nine of nine invoices have been received and are being processed. All contracts have been signed by providers for the second portion of the contract. The reported expenditure percentages reflect funds from the first grant award.



### **Fiscal Summary**

In July 2018, financial report submission includes expenses from nine of our nine sub recipients. The overall expense at the end of July is at 29.5% and should be at 41.7%

**Part A expenditures are at 27.1 % and should be at 41.7%.** Suburban Maryland received additional money in Medical Case Management (MCM) during the month of August which brought the underspent expenditure rate in MCM to 44.1%. The current rate for July would have been overspent by 14% if the additional MCM funds were not included. The underspent expenditure percentage rate is expected to level off during the course of the next couple of months as the MCM dollars have now been placed into the agencies budget.

Underspending is in Medical Case Management and Medical Nutrition Therapy. Overspending is in Health Insurance Cost Premium.

**Part A MAI expenditures are at 40.1% and should be at 41.7%.**

One program will be fully staffed by the first week in October. The second program is going through an overall agency transition and they have been asked to refer clients to some of the other partners so the clients can continue to receive Medical Nutrition Therapy service. In terms of MAI mental health, there have been several meetings with providers with the MAI to talk about how to better services in mental health as we have seen a dramatic increase in service need. We have also made some financial adjustments to assure their ability to provide the extra responsibility in service.

Mackenzie asked if money should be taken out of Medical Nutrition Therapy and put into the overspent Health Insurance Premiums. Ravinia indicated that they are considering adding funds to the Medical Nutrition Therapy service that is doing well, helping those agencies that do not have Medical Nutrition and increasing Health Insurance Cost Premiums.

Kaleef asked about the reprogramming request in Linguistic Services. Ravinia indicated that an adjustment to the \$30,043 should have been submitted to the budget in August. Linguistic Services are provided to the entire agency, not exclusively Ryan White services. Therefore, moving \$15,000 from Linguistic Services into Outreach Services is being requested. The remaining \$15,043 will be used for updating materials, translations on the website for the services and make those available to all of their grantees and other Suburban Maryland individuals that might need the information. Ravinia made a request to reallocate 50% of linguistic service money to Outreach Services. The request was approved and Mackenzie made a motion to present it to the Commission. The motion was seconded by Peter. The motion was approved by the committee.



	<p><b><u>Rashmi Puranik presented the Northern Virginia report</u></b></p> <p><b>Available Funding / Status of Contracts / Implementation Progress</b>          Sub-recipient initial awards based on the first and second partial awards were made and the schedules have been finalized. Eight of eight invoices have been received from providers.</p> <p><b>Challenges to Service Delivery</b>          None noted</p> <p><b>Fiscal Summary:</b>          Overall spending through July is at 30% for Part A and 36% through May for MAI of the full 12 month award. Part A spending is at or near target for Early Intervention Services, Medical Case Management, Legal Services, and Outreach. Spending is higher than expected in Linguistic services, the outstanding third-party bills have now been received by the recipient. Spending is much lower than expected for EFA Food and Meds and Medical Transportation due to year-end stockpiling and spending in Health Insurance Co-pays is slightly lower than expected due to late third-party billings. MAI spending was much higher than expected in all the MAI service areas through May. The required 100% documentation was received from the MAI provider and has been reviewed. A Corrective Action Plan (CAP) had been issued to the provider with a plan of action to resolve the MAI issues by the end of August, which has been received. A response to the response has been drafted. Michelle will give an update at the next CPC meeting. The MAI June &amp; July expenses have not been billed to HAHSTA and are not part of this MAI report. The July invoice was received prior to a response to the CAP from the MAI provider and has been held because the July invoice has the same issues as before.</p> <p>Part A expenditures are at 30.1 % and should be at 41.7 %.</p> <p>Mackenzie asked if NVRC is concerned about the underspending in EFA at 3.3%. Rashmi indicated that a provider was re-awarded for EFA and just started billing in August. Going forward, it will increase and EFA will spend down by the end of the grant year.</p>
<p><b>Recipient Report</b></p>	<p><b><u>Clover Barnes presented the Recipient Report</u></b></p> <p><b>Regional Services (Unit Based Costs or UBC).</b> All vendors with unit based costs contracts in GY 27 have executed option year contracts for GY 28. Expenditures through July 2018 are reflected in the EMA wide fiscal roll up. Overall expenditures for UBC are at 57% through July 2018 and is expected to be at 41.7%. Substance abuse is lower than expected due to underutilization and billing. Medicaid and several other NIH funded sources are out and the providers cannot find enough people to give the service to. There have been application submissions to the solicitation. Hopefully more people will be added to the provider list. A reprogramming request to address underspending and reallocate funds was approved in August. A new solicitation for entrance into the Ryan White Provider Network for Regional Services closed earlier this</p>

	<p>month. Evaluation of that submission is underway and results will be released in October.</p> <p><b>Part A Application.</b> The Ryan White Part A Application was successfully submitted on September 20, 2018 for \$33,671,731 as per HRSA’s directive. Mackenzie asked if the amount was based on an increase of the number of people. Clover indicated that the amount is determined by a complicated formula used by HRSA. Its arbitrary until the award comes.</p> <p><b>HRSA Site Visit.</b> The DC EMA is currently scheduled for a comprehensive site visit, May 21-24, 2019.</p>
<p><b>Other Business</b></p>	<p>“Take Away” hand-out will include the following information:</p> <ul style="list-style-type: none"> <li>• Roll-Up Report will not be provided anymore, but can be requested.</li> <li>• PSRA planning. Need to start talking and planning the PSRA process. Encourage committee membership.</li> <li>• Reprogramming of Linguistic Services.</li> </ul> <p>Mackenzie asked if there will be a PSRA process for Prevention. Kaleef indicated that some changes have to be made to the orientation to include the seven funding areas the District has under the CDC. Other areas will be discussed at a later date when there is more prevention engagement. Next PSRA should start in April not in June or July.</p>

**ANNOUNCEMENTS/OTHER DISCUSSION**

Thursday, September 27, 2018, First Executive Meeting  
 NOVA Pride - Bull Run Park - Saturday, September 29, 2018 11:00am – 8:00pm

**HANDOUTS**

- Comprehensive Planning Committee (CPC) Meeting Agenda dated 9/26/2018
- Comprehensive Planning Committee (CPC) Meeting Minutes, Wednesday, August 22, 2018
- Suburban Maryland Fiscal Narrative Report (Part A and Part A MAI Funding) Year 28 Reporting Period: July 1 thru July 31, 2018
- NVRC Fiscal Narrative Report (Part A and Part A MAI Funding) Year 28 Reporting Period: July 1 thru July 31, 2018 (First Quarter)
- Washington DC and West Virginia Monthly Fiscal Narrative Report (Part A and Part A MAI Funding) Year 28 Reporting Period: July 1 thru July 31, 2018
- Recipient Report EMA Wide Roll Up CARE Act Part A Grant Year 28, through July 2018

<p><b>MEETING        ADJOURNED</b></p>	<p>4:17 pm</p>
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<b>NEXT MEETING</b>	October 24, 2018 3:00 pm – 5:00 pm DC Health-HAHSTA 899 N. Capitol St., NE, 4 <sup>th</sup> Floor Washington, DC 20002
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**UBC- Subtotal** **Report through July 2018**

Service Area	Allocations			Awards			Expenditures to Date		
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Expected	Expected
<b>Core Medical Services Subtotal</b>	<b>10,892,239</b>	<b>(500,000)</b>	<b>10,392,239</b>	<b>2,179,000</b>	<b>-</b>	<b>2,179,000</b>	<b>1,140,897</b>	<b>907,917</b>	<b>41.7%</b>
Outpatient/Ambulatory Health Services (OAH)	3,713,264	(500,000)	3,213,264	1,155,000	-	1,155,000	598,570	481,250	41.7%
Oral Health Care	3,465,713	-	3,465,713	735,000	-	735,000	412,228	306,250	41.7%
Mental Health Services	2,475,508	-	2,475,508	208,300	-	208,300	112,500	86,792	41.7%
Substance Abuse Services - Outpatient	1,237,754	-	1,237,754	80,700	-	80,700	17,599	33,625	41.7%
<b>Support Services Subtotal</b>	<b>4,978,596</b>	<b>500,000</b>	<b>5,478,596</b>	<b>3,275,500</b>	<b>-</b>	<b>3,275,500</b>	<b>1,970,006</b>	<b>1,364,792</b>	<b>41.7%</b>
Non-Medical Case Management Services (NMCM)	3,713,264	-	3,713,264	1,768,500	-	1,768,500	992,688	736,875	41.7%
Food Bank/Home Delivered Meals	990,205	500,000	1,490,205	1,395,000	-	1,395,000	930,778	581,250	41.7%
Housing Case Management and Referral	275,127	-	275,127	112,000	-	112,000	46,540	46,667	41.7%
<b>TOTAL: Human Care Agreements</b>	<b>15,870,835</b>	<b>-</b>	<b>15,870,835</b>	<b>5,454,500</b>	<b>-</b>	<b>5,454,500</b>	<b>3,110,902</b>	<b>2,372,305</b>	<b>57.0%</b>



Part A, MAI and UBC Totals

Report through July 2018

Service Area	Allocations			Awards			Exposures to Date	
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	
<b>Core Medical Services Subtotal</b>	<b>19,263,059</b>	<b>535,740</b>	<b>19,800,798</b>	<b>10,326,139</b>	<b>100,156</b>	<b>10,426,295</b>	<b>3,605,431</b>	<b>34.6%</b>
Outpatient/Ambulatory Health Services (OAHHS)	4,530,506	(500,000)	4,030,506	1,937,114	-	1,937,114	813,906	11.6%
Oral Health Care	3,465,713	-	3,465,713	735,000	-	735,000	412,228	4.4%
Early Intervention Services	1,186,001	499,899	1,685,900	1,256,533	(794)	1,255,739	432,859	7.5%
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPC/SALI)	420,277	(1,791)	418,486	143,359	-	143,359	62,103	0.9%
Home and Community-Based Health Services	275,127	16,782	291,909	190,909	100,950	291,859	76,815	1.7%
Mental Health Services	2,760,011	-	2,760,011	483,328	-	483,328	238,356	2.9%
Medical Nutrition Therapy	496,086	-	496,086	459,053	-	459,053	100,204	2.7%
Medical Case Management (MCM), including Treatment Adherence Services	4,827,979	520,850	5,348,829	4,944,711	-	4,944,711	1,414,647	29.6%
Substance Abuse Services - Outpatient	1,301,358	-	1,301,358	176,132	-	176,132	45,310	1.1%
<b>Support Services Subtotal</b>	<b>7,957,481</b>	<b>1,364,260</b>	<b>9,321,741</b>	<b>6,286,164</b>	<b>794</b>	<b>6,286,958</b>	<b>3,024,532</b>	<b>37.6%</b>
Non-Medical Case Management Services (NMCM)	3,713,264	-	3,713,264	1,768,500	-	1,768,500	592,688	10.6%
Emergency Financial Assistance	989,271	667,895	1,657,166	1,037,498	-	1,037,498	405,116	6.2%
Food Bank/Home Delivered Meals	90,205	500,000	1,490,205	1,395,000	-	1,395,000	930,778	8.3%
Other Professional Services	268,125	6,097	274,222	162,032	-	162,032	64,773	1.0%
Linguistic Services	120,128	22,678	142,806	112,541	-	112,541	46,595	0.7%
Medical Transportation	300,469	28,318	328,787	282,663	-	282,663	70,605	1.7%
Outreach Services	432,977	36,470	469,447	469,447	-	469,447	161,771	2.8%
Psychosocial Support Services	846,365	108,802	955,167	914,933	794	915,727	290,544	5.3%
Housing Case Management and Referral	275,127	-	275,127	112,000	-	112,000	46,540	1.7%
Administrative Services - WV Only	31,550	-	31,550	31,550	-	31,550	15,122	0.2%
<b>TOTAL</b>	<b>27,232,539</b>	<b>1,900,000</b>	<b>29,132,539</b>	<b>16,612,303</b>	<b>100,950</b>	<b>16,713,253</b>	<b>6,629,963</b>	<b>100.2%</b>

## **COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING AGENDA**

**WEDNESDAY SEPTEMBER 26, 2018 – 3:00PM TO 5:00PM**

**DC HEALTH HEADQUARTERS - HAHSTA**

**899 N. CAPITOL ST., NE; 4<sup>TH</sup> FLOOR; WASHINGTON, DC 20002**

**Note: all times are approximate**

<b>3:05 pm</b>	<ol style="list-style-type: none"> <li>1. Call To Order and Moment of Silence</li> <li>2. Welcome and Introductions</li> <li>3. Approve Agenda for September 26, 2018</li> <li>4. Approve Minutes from August 22, 2018</li> </ol>
<b>3:10 pm</b>	5. Committee Review of Financial Documents
<b>3:30 pm</b>	6. Ryan White HIV/AIDS Program (RWHAP) – Jurisdictional Reports & Financial Oversight <ul style="list-style-type: none"> <li>• Suburban Maryland Administrative Agent Report</li> <li>• Northern Virginia Administrative Agent Report</li> <li>• DC and West Virginia Administrative Agent Report</li> <li>• RWHAP Recipient Report</li> </ul>
<b>4:30 pm</b>	7. Other Business
<b>4:55 pm</b>	8. Announcements and Adjournment
<b><u>NEXT COMPREHENSIVE PLANNING            COMMITTEE (CPC) MEETING:</u></b>	<b>Wednesday October 24, 2018            3pm-5pm</b>

### **CONFERENCE CALL INFORMATION:**

**Dial In #: 1-866-809-0886**

**Participant Code: 8289221#**



Date: September 13, 2018

To: Comprehensive Planning Committee

From: Suburban Maryland Ryan White Part A

Re: Fiscal Narrative Report (Part A and Part A MAI Funding)  
Year 28 - Reporting Period: July 1 thru July 31, 2018

**Available Funding / Status of Contracts / Implementation Progress**

This Suburban Maryland report represents expenses for July 2018, 9 of 9 invoices have been received and are being processed. All contracts have been submitted to of our providers for signature. The expenditure percentages below reflect funds from our first grant award.

**Fiscal Summary**

In July 2018, financial report submission includes expenses from 9 of our 9 sub recipients. Our overall expense at the end of July is **29.5%** and should be **41.7**

**Part A expenditures are 27.1 % and should be 41.7%.** (Overall Expenditure rates by funding source for the reporting period). "Suburban Maryland received an additional 1,094,819 in Medical Case Management during the month of August which brought our underspent expenditure rate in MCM to 44.1%". "Our current rate for July would have been 14% overspent without the additional MCM funds included". We anticipate the underspent expenditure percentage rate to level off during the course of the next couple of months as the MCM dollars have now been placed into the agencies budget.

**Service areas affected by unprocessed invoices (N/A)**

Services 30% below expected: Medical Case Management (44.1%)  
Medical Nutritional Therapy

Services 30% above expected: Health Insurance Cost Premiums.

**Part A MAI expenditures are 40.1% and should be 41.7%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices (N/A)**

Services 30% below expected: None

Services 30% above expected: Mental Health



Northern Virginia Regional Commission  
 3040 Williams Drive, Suite 200, Fairfax, VA 22031  
 703/642-0700

**Date: September 19, 2018**

**To: Comprehensive Planning Committee**

**From: Northern Virginia Regional Commission**

**Re: Fiscal Narrative Report (Part A and Part A MAI Funding)  
 Year 28 - Reporting Period: July 01, 2018-July 31, 2018**

**Available Funding / Status of Contracts / Implementation Progress**

Sub-recipient initial awards based on the first and second partial awards were made and the Schedules have been finalized. The Sub-recipient awards based on the Final award received from HAHSTA have been made and the Schedules are being finalized. Services were implemented March 1, 2018.

**Challenges to Service Delivery**

None noted

**Fiscal Summary:**

Overall spending thru July is at 30% for Part A and 36% (thru May) for MAI of the full 12 month award.

Part A spending is at or near target for Early Intervention Services, Medical Case Management, Legal Services, and Outreach. Spending is higher than expected in Linguistic services, the outstanding third-party bills have now been received by the recipient. Spending is much lower than expected for EFA Food and Meds and Medical Transportation due to year-end stockpiling and spending in Health Insurance Co-pays is slightly lower than expected due to late third-party billings.

MAI spending was much higher than expected in all the MAI service areas through May. 100% documentation for MAI received from the MAI provider had been reviewed and a corrective action plan had been issued to the provider with a plan of action to resolve the MAI issues by the end of August.

The MAI June & July expenses have not been billed to HAHSTA and are not part of this MAI report. The disallowances totaled the equivalent of the June invoice which will not be processed until all the MAI issues have been resolved by the MAI provider. The July invoice was received prior to a response to the corrective action plan from the MAI provider and has been held as the July invoice has the same issues as before. A response from the MAI provider for the corrective action plan has been received and is being reviewed by NVRC staff.

**Unit Based Cost Expenditures N/A**

Service Category	Amount Expended	% Expended

Part A expenditures are 30.1% and should be 41.7%.

Service areas affected by unprocessed invoices: N/A

Services 15% below expected

EFA Food & Meds

Services 15% above expected


Part A MAI expenditures are 35.9% through May

Service areas affected by unprocessed invoices:

June & July MAI Invoices have not been processed (See Fiscal Summary)

Services 15% below expected


Services 15% above expected:


September 26, 2018

To: Comprehensive Planning Committee (CPC)

From: Ryan White Part A Grantee Staff

Re: **Monthly Fiscal Narrative Report (Part A and Part A MAI Funding)  
Grant Year 28 - Reporting Period: July 1 – July 31, 2018**

### Available Funding / Status of Contracts / Implementation Progress

The District of Columbia and West Virginia will report expenses for July 01, 2018 through July 31, 2018. For the month of July (12) of (12) invoices were received, (1) of (12) invoices is pending and awaiting processing.

### Challenges to Service Delivery

During the grant period there were some technical difficulties and challenges that one agency did experience with the Enterprise Grants Management System (EGMS). However, the agency along with HAHSTA staff were able to work through those issues and invoice in a timely manner. HAHSTA's fiscal staff will continue to work with sub-recipients to ensure that the invoicing continues to go according to the process.

### Fiscal Summary

**Washington, DC Part A expenditures are 33.6% and should be 41.7%, Part A MAI expenditures are 29.9% and should be 41.7%.** (Overall Expenditure rates by funding source for the reporting period). The small allocation for the other professional services category is overspent and has seen increased utilization through the month of July. A reprogramming request was approved at the August commission meeting to increase the funding allocation for other professional services. The areas noted as underspent by 30 or more percent also overlap with the services impacted by unprocessed invoices. **Note:** The DC allocation and award for Housing Case Management and Referral is reported on the unit based cost sheet which thereby skews the total expenditure amounts on the DC fiscal report.

### **Service areas affected by unprocessed invoices**

Medical Case Management-MAI
Psychosocial Support Services
Psychosocial Support Services-MAI
Outpatient Ambulatory Health Services-MAI
Early Intervention Services
Early Intervention Services-MAI
Medical Nutrition Therapy

Substance Abuse Services-MAI
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Medical Transportation Services
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**Services 30% below expected**

Medical Case Management (MCM), including Treatment Adherence Services
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Home and Community-Based Health Services
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Medical Transportation
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Psychosocial Support Services
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Mental Health Services-MAI
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Substance Abuse Services-MAI
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Outpatient Ambulatory Health Services-MAI
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**Services 30% above expected**

Other Professional Services
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**West Virginia Part A expenditures are 45% and should be 41.7%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices**

N/A
-----

**Services 30% below expected**

N/A
-----

**Services 30% above expected**

N/A
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# RECIPIENT REPORT

September 27, 2018

To: Comprehensive Planning Committee (CPC)

From: Ryan White Recipient Staff

Re: Monthly Recipient Report

Attached are the monthly fiscal reports for Grant Year 28 (March 1, 2018 - February 28, 2019). This report is based on the allocations of funds by jurisdiction, sub-part (Part A and Part A MAI) and service categories developed by the Recipient from information provided by the former RW Planning Council and members.

**Part A and Part A MAI.** The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 28 includes two components: Part A and Part A Minority AIDS Initiative (MAI). These reports are designed to report distinctly on the associated program activities. The final RWHAP Part A Grant award for Year 28 was received on May 22, 2018. The total Part A award for Grant Year 28 is **\$32,068,315**.

**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 Planning Council has requested an explanation of those service categories with a discrepancy greater than 30%.

**Regional Services (Unit Based Costs).** All vendors with unit based costs contracts in GY 27 have executed option year contracts for GY 28. Expenditures through July 2018 are reflected in the EMA wide fiscal roll up. Overall expenditures for UBC are at 57% through June 2018 and is expected to be 41.7%. Substance abuse is lower than expected due to underutilization and billing. A reprogramming request to address underspending and reallocate funds was approved in August. A new solicitation for entrance into the RW Provider Network for Regional Services closed earlier this month. Evaluation of that submission is underway and results will be released in October.

**Note.** The amounts in the current column reflect the amount of funds that are loaded to current vendor contracts. All funding available for unit-based costs will not be awarded at this time because a portion of those funds are earmarked for the new solicitation, additionally funds are added to contracts based on utilization and expenditure rates.

1. **Part A Application.** The Ryan White Part A Application was successfully submitted on September 20, 2018. The application funding amount was \$33,671,731.
2. **HRSA Site Visit.** The DC EMA is currently scheduled for a comprehensive site visit May 21-24, 2019.



The schedule for quarterly utilization reports

<b>Quarter</b>	<b>Months</b>	<b>To be Reported</b>
First	March – May	July 2018
Second	June -- August	October 2018
Third	September – November	January 2019
Fourth	December – February	April 2019

HEALTH

Report through July 2018

Regionwise	Current Distribution - Finalized	Expenditures	Variance	Percent
District of Columbia - Part A	2,465,024	828,112	1,636,912	33.6%
District of Columbia - MAI	1,146,033	342,824	803,209	29.9%
District of Columbia - UBC	5,454,500	3,110,902	2,343,598	57.0%
District of Columbia Subtotal	<b>9,065,557</b>	<b>4,281,838</b>	<b>4,783,719</b>	<b>47.2%</b>
Northern Virginia - Part A	1,877,674	565,646	1,312,028	30.1%
Northern Virginia -- MAI	423,004	151,853	271,151	35.9%
Northern Virginia Subtotal	<b>2,300,678</b>	<b>717,499</b>	<b>1,583,179</b>	<b>31.2%</b>
Suburban Maryland - Part A	4,098,897	1,112,740	2,986,157	27.1%
Suburban Maryland -- MAI	901,071	361,664	539,407	40.1%
Suburban Maryland Subtotal	<b>4,999,968</b>	<b>1,474,404</b>	<b>3,525,564</b>	<b>29.5%</b>
West Virginia - Part A	347,050	156,222	190,828	45.0%
West Virginia Subtotal	<b>347,050</b>	<b>156,222</b>	<b>190,828</b>	<b>45.0%</b>
TOTAL -- Part A	8,788,645	2,662,720	6,125,926	30.3%
TOTAL -- MAI	2,470,108	856,341	1,613,767	34.7%
TOTAL -- UBC	5,454,500	3,110,902	2,343,598	57.0%
TOTAL Subtotal	<b>16,713,253</b>	<b>6,629,963</b>	<b>10,083,290</b>	<b>39.7%</b>

District of Columbia - Part A

Report through July 2018

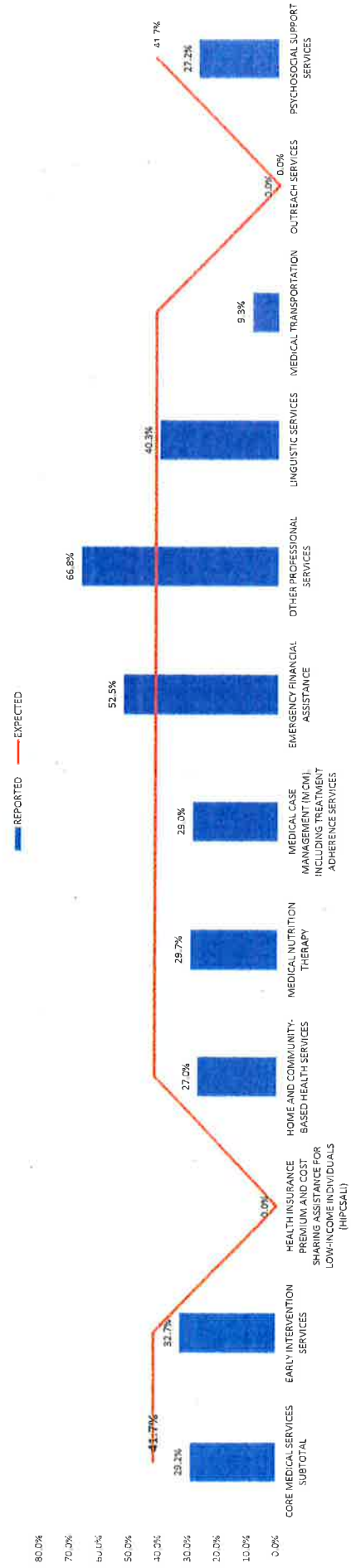
Service Area	Allocations		Awards		Expenditures to Date			Unspent		Variance	
	Initial	Adjust	Current	Initial	Adjust	Reported	Expected	Amount	Percent	Amount	Percent
<b>Core Medical Services Subtotal</b>	2,869,179	39,040	2,908,219	1,627,994	100,950	505,269	720,393	1,223,675	70.8%	(215,124)	(29.9%)
Early Intervention Services	196,519	522,258	718,777	243,777	-	79,808	101,574	163,969	67.3%	(21,766)	(21.4%)
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPCSALI)	275,127	-	275,127	-	-	-	-	-	0.0%	-	0.0%
Home and Community-Based Health Services	275,127	16,782	291,909	190,909	100,950	78,815	121,608	213,044	73.0%	(42,792)	(35.2%)
Medical Nutrition Therapy	157,215	-	157,215	118,182	-	35,049	49,243	83,133	70.3%	(14,194)	(28.8%)
Medical Case Management (MCM), including Treatment Adherence Services	1,965,191	(500,000)	1,465,191	1,075,126	-	311,567	447,969	763,529	71.0%	(136,372)	(30.4%)
<b>Support Services Subtotal</b>	786,076	766,341	1,552,417	736,080	-	322,843	306,700	413,237	56.1%	16,143	5.3%
Emergency Financial Assistance	432,342	631,326	1,063,668	450,000	-	236,439	187,500	213,562	47.5%	48,939	26.1%
Other Professional Services	117,911	6,087	124,008	11,818	-	7,892	4,924	3,926	33.2%	2,968	60.3%
Linguistic Services	78,808	-	78,808	48,343	-	19,505	20,143	28,838	59.7%	(938)	(3.2%)
Medical Transportation	39,304	20,910	60,214	14,090	-	1,308	5,871	12,781	90.7%	(4,562)	(17.7%)
Outreach Services	-	-	-	-	-	-	-	-	0.0%	-	0.0%
Psychosocial Support Services	117,911	108,008	225,919	211,829	-	57,688	88,262	154,131	72.8%	(30,564)	(34.6%)
<b>TOTAL</b>	3,655,256	866,361	4,521,617	2,364,074	460,950	826,112	1,827,893	1,836,912	66.4%	(199,981)	(19.4%)

Underspent  
Overspent

Note:

For Housing Case Management and Referral Allocation please refer to DC - UBC Housing Case Management and Referral Allocation entries

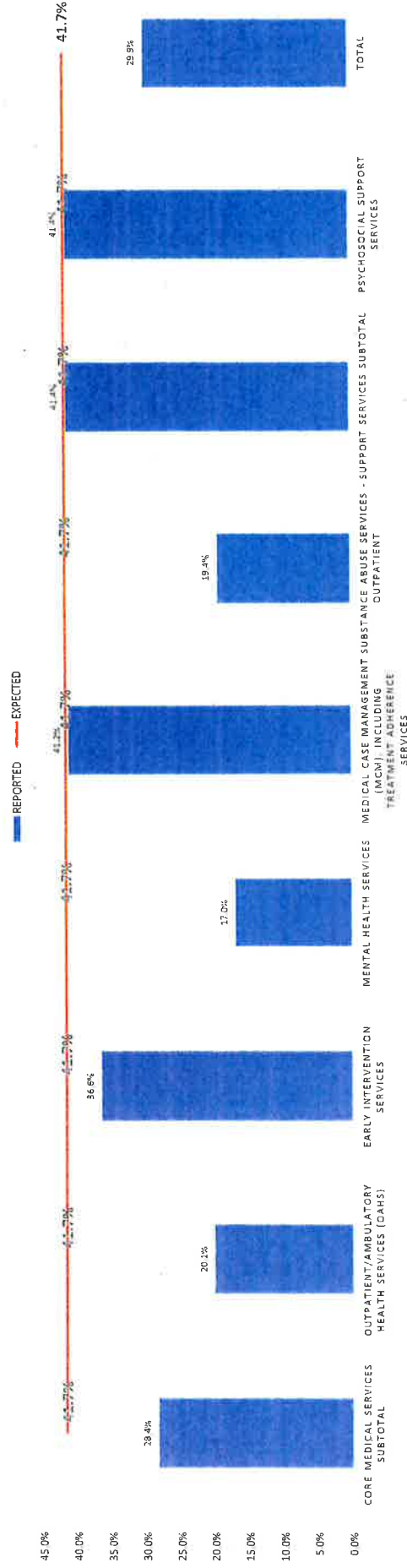
DISTRICT OF COLUMBIA - PART A



Service Area	Allocations		Amounts		Expenditures to Date		Unspent		Variance			
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Expected	Amount	Percent		
<b>Core Medical Services Subtotal</b>	992,380	-	992,380	1,010,391	-	1,010,391	286,730	420,996	723,661	71.6%	(134,266)	(31.9%)
Outpatient/Ambulatory Health Services (OAHHS)	404,881	-	404,881	369,753	-	369,753	74,314	154,064	286,439	79.9%	(79,750)	(51.8%)
Early Intervention Services	185,020	-	185,020	229,859	-	229,859	84,022	95,775	145,837	63.4%	(11,753)	(12.3%)
Mental Health Services	108,129	-	108,129	98,654	-	98,654	16,748	41,106	81,906	83.0%	(24,357)	(59.3%)
Medical Case Management (MCM), including Treatment Adherence Services	248,696	-	248,696	234,643	-	234,643	96,607	97,768	138,036	58.8%	(1,161)	(1.2%)
Substance Abuse Services - Outpatient	45,654	-	45,654	77,482	-	77,482	15,039	32,284	62,443	80.6%	(17,245)	(53.4%)
<b>Support Services Subtotal</b>	160,991	-	160,991	135,642	-	135,642	56,093	56,518	79,549	58.6%	(424)	(0.8%)
Psychosocial Support Services	160,991	-	160,991	135,642	-	135,642	56,093	56,518	79,549	58.6%	(424)	(0.8%)
<b>TOTAL</b>	<b>1,163,371</b>	<b>-</b>	<b>1,163,371</b>	<b>1,146,633</b>	<b>-</b>	<b>1,146,633</b>	<b>342,824</b>	<b>477,898</b>	<b>803,209</b>	<b>70.1%</b>	<b>(134,689)</b>	<b>(28.2%)</b>

Underspent  
Overspent

DISTRICT OF COLUMBIA - MAI



District of Columbia - Unit Based Costs (UBC)

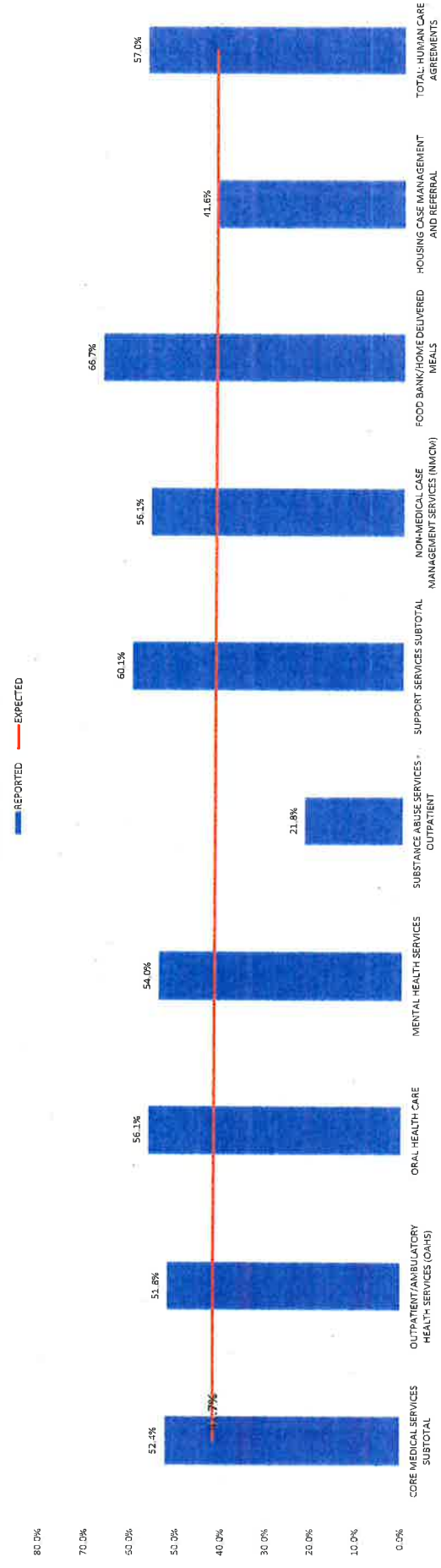
Report through July 2018

Service Area	Initial		Adjust		Current		Awards		Expenditures to Date		Unspent		Variance			
	Initial	Adjust	Initial	Adjust	Current	Current	Adjust	Current	Reported	Expected	Amount	Percent	Amount	Percent		
<b>Core Medical Services Subtotal</b>	10,892,239	(500,000)	2,179,000	-	10,392,239	65.5%	2,179,000	39.9%	1,140,897	52.4%	907,917	41.7%	1,038,103	47.6%	232,980	25.7%
Outpatient/Ambulatory Health Services (OAH)	3,713,264	(500,000)	1,155,000	-	3,213,264	58.9%	1,155,000	21.2%	598,570	51.8%	481,250	41.7%	556,430	48.2%	117,320	24.4%
Oral Health Care	3,465,713	-	735,000	-	3,465,713	63.5%	735,000	13.5%	412,298	56.1%	306,250	41.7%	322,772	43.9%	105,978	34.6%
Mental Health Services	2,475,508	-	2,475,508	-	2,475,508	45.4%	2,475,508	3.8%	112,500	54.0%	86,792	41.7%	95,800	46.0%	25,708	29.6%
Substance Abuse Services - Outpatient	1,237,754	-	1,237,754	-	1,237,754	22.7%	80,700	1.5%	17,699	21.6%	33,625	41.7%	63,101	78.2%	(16,026)	(47.7%)
<b>Support Services Subtotal</b>	4,978,586	500,000	3,275,500	-	5,478,586	34.5%	3,275,500	60.1%	1,970,006	60.1%	1,364,792	41.7%	1,305,495	39.9%	605,214	44.3%
Non-Medical Case Management Services (NMC)	3,713,264	-	1,768,500	-	3,713,264	68.1%	1,768,500	32.4%	992,888	58.1%	736,875	41.7%	775,813	43.9%	265,813	34.7%
Food Bank/Home Delivered Meals	990,205	500,000	1,490,205	-	1,490,205	27.3%	1,395,000	25.6%	930,778	58.7%	581,250	41.7%	464,222	33.3%	349,528	60.1%
Housing Case Management and Referral	275,127	-	275,127	-	275,127	5.0%	112,000	2.1%	46,540	41.8%	46,687	41.7%	65,460	58.4%	(127)	(0.3%)
<b>TOTAL: Human Case Agreements</b>	16,870,035	-	5,454,500	-	16,870,835	100.0%	5,454,500	100.0%	3,110,902	57.8%	2,272,706	41.7%	2,363,595	43.6%	333,394	36.9%

Underspent  
Overspent

Note: UBC Housing Case Management and Referral Allocation entries - DC Only

DISTRICT OF COLUMBIA - UBC

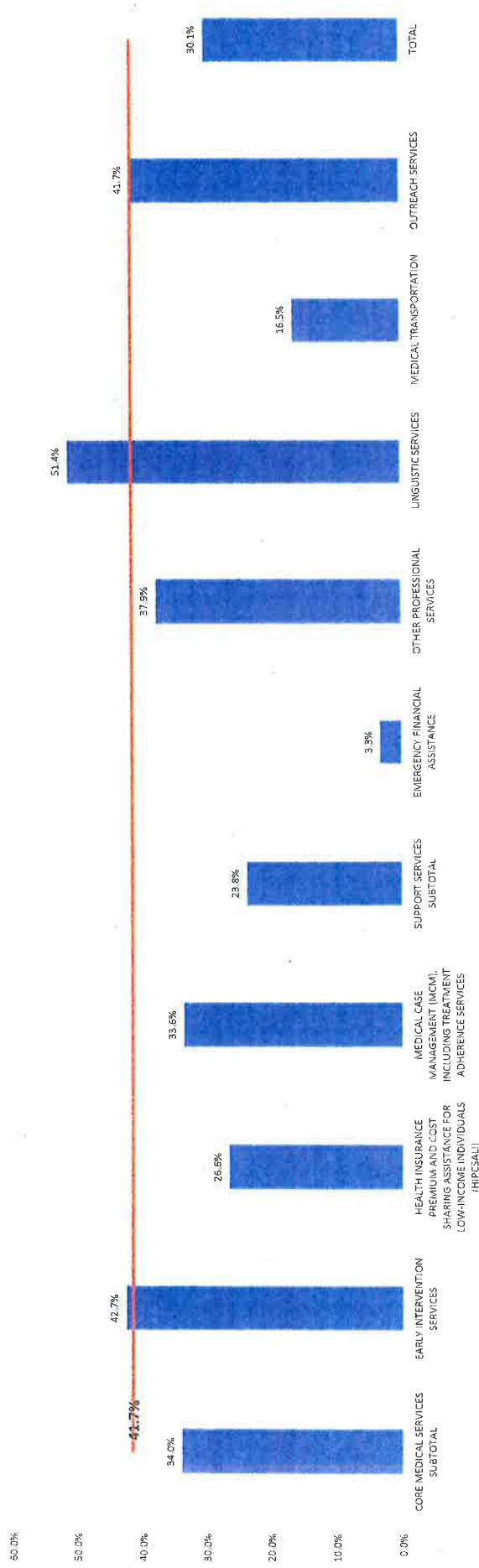


Service Area	Allocations			Awards			Expenditures to Date			Unspent		Variance	
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Expected	Amount	Percent	Amount	Percent	
<b>Core Medical Services Subtotal</b>	1,267,430	(97,125)	1,170,305	1,170,305	-	1,170,305	397,507	487,627	772,798	66.0%	(90,120)	(18.5%)	
Early Intervention Services	122,049	(21,565)	100,484	100,484	-	100,484	42,897	41,868	57,587	57.3%	1,029	2.5%	
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPC/SALI)	75,107	(1,791)	73,316	73,316	-	73,316	18,530	30,548	53,766	73.4%	(11,018)	(36.1%)	
Medical Case Management (MCM), including treatment Adherence Services	1,070,274	(73,769)	996,505	996,505	-	996,505	335,080	415,210	661,425	66.4%	(80,130)	(19.9%)	
<b>Support Services Subtotal</b>	610,244	97,125	707,369	707,369	-	707,369	188,139	294,737	539,230	76.2%	(126,598)	(43.0%)	
Emergency Financial Assistance	206,544	30,569	237,113	237,113	-	237,113	7,768	98,797	229,348	96.7%	(91,032)	(92.1%)	
Other Professional Services	150,214	-	150,214	150,214	-	150,214	56,881	62,589	93,333	62.1%	(5,708)	(8.1%)	
Linguistic Services	-	52,721	52,721	52,721	-	52,721	27,090	21,967	28,631	48.6%	5,123	23.3%	
Medical Transportation	131,437	7,408	138,845	138,845	-	138,845	22,844	57,852	115,001	83.5%	(35,008)	(60.5%)	
Outreach Services	122,049	6,427	128,476	128,476	-	128,476	53,559	53,532	74,917	58.3%	27	0.1%	
<b>TOTAL</b>	<b>1,877,674</b>	<b>-</b>	<b>1,877,674</b>	<b>1,877,674</b>	<b>-</b>	<b>1,877,674</b>	<b>565,646</b>	<b>782,364</b>	<b>1,312,828</b>	<b>69.9%</b>	<b>(216,718)</b>	<b>(27.7%)</b>	

Underspent  
Overspent

NORTHERN VIRGINIA - PART A

REPORTED EXPECTED



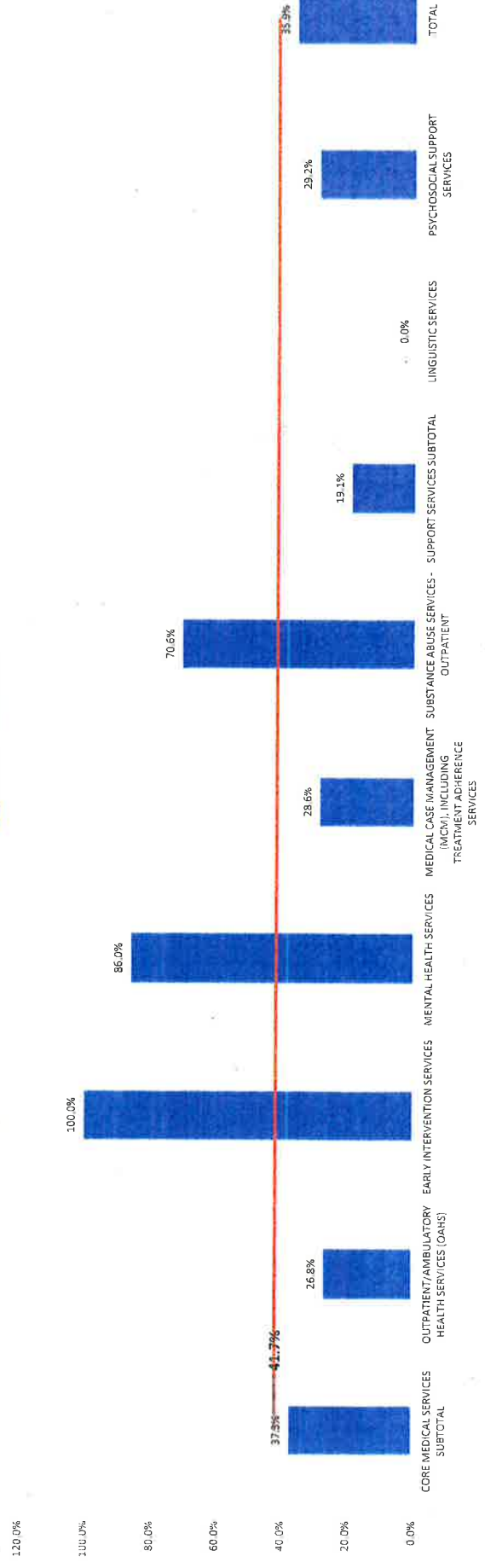
Northern Virginia - MAI Report through July 2018

Service Area	Allocations		Awards		Expenditures to Date		Unspent		Variance	
	Initial	Adjust	Initial	Adjust	Reported	Expected	Amount	Percent	Amount	Percent
<b>Core Medical Services Subtotal</b>	390,526	(794)	389,732	(794)	145,453	162,388	244,239	62.7%	(16,895)	(10.4%)
Outpatient/Ambulatory Health Services (OAHs)	211,772	-	211,772	-	56,823	88,238	154,949	73.2%	(31,415)	(35.6%)
Early Intervention Services	19,086	(794)	18,292	(794)	18,291	7,622	1	0.0%	10,669	140.0%
Mental Health Services	30,000	-	30,000	-	25,780	12,500	4,210	14.0%	13,290	106.3%
Medical Case Management (MCM), including Treatment Adherence Services	111,718	-	111,718	-	31,917	46,549	79,801	71.4%	(14,632)	(31.4%)
Substance Abuse Services - Outpatient	17,950	-	17,950	-	12,672	7,479	5,278	29.4%	5,193	69.4%
<b>Support Services Subtotal</b>	32,478	794	33,272	794	6,360	13,863	26,912	80.9%	(7,503)	(54.1%)
Linguistic Services	11,477	-	11,477	-	-	4,782	11,477	100.0%	(4,782)	(100.0%)
Psychosocial Support Services	21,001	794	21,795	794	6,360	9,081	15,435	70.8%	(2,721)	(30.0%)
<b>TOTAL</b>	423,994	-	423,994	-	151,853	176,252	271,151	64.3%	(24,395)	(13.6%)

Underspent  
Overspent

NORTHERN VIRGINIA - MAI

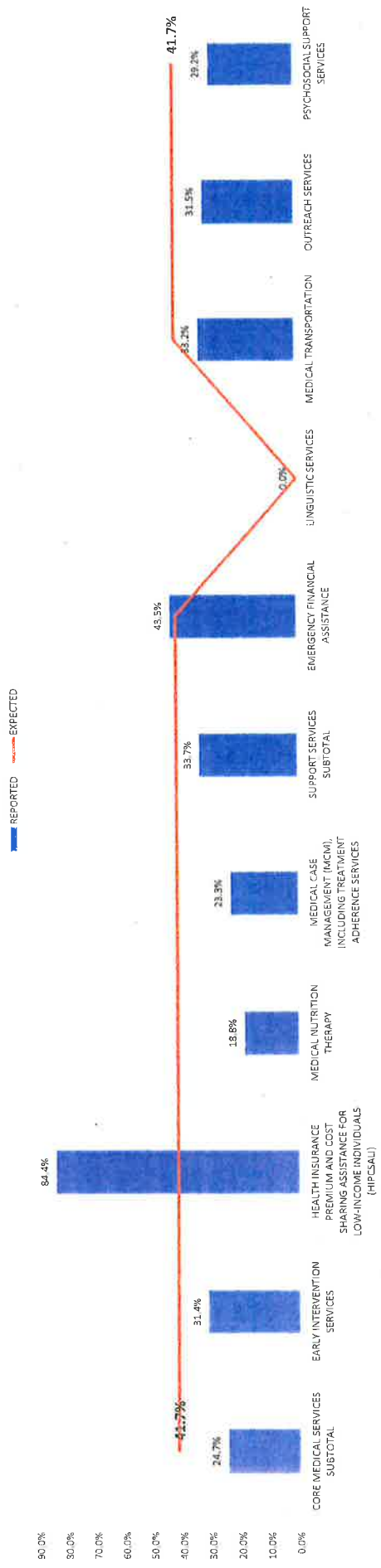
REPORTED EXPECTED



Service Area	Allocations		Awards		Expenditures to Date			Unspent		Variance		
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Expected	Amount	Percent	Amount	Percent
<b>Core Medical Services Subtotal</b>	1,892,695	1,094,619	2,987,314	2,987,314	-	2,987,314	738,041	1,244,714	2,249,273	75.3%	(506,674)	(40.7%)
Early Intervention Services	480,684	-	480,684	480,684	-	480,684	150,843	200,285	329,841	68.6%	(49,442)	(24.7%)
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPCSALI)	30,043	-	30,043	30,043	-	30,043	25,343	12,518	4,700	15.6%	12,826	102.5%
Medical Nutrition Therapy	330,471	-	330,471	330,471	-	330,471	82,050	137,696	258,421	81.2%	(75,646)	(54.9%)
Medical Case Management (MCM), including treatment Adherence Services	1,051,497	1,094,619	2,146,116	2,146,116	-	2,146,116	468,804	894,215	1,646,312	76.7%	(394,411)	(44.1%)
<b>Support Services Subtotal</b>	1,111,583	-	1,111,583	1,111,583	-	1,111,583	374,699	463,160	736,884	66.3%	(88,461)	(19.1%)
Emergency Financial Assistance	270,385	-	270,385	270,385	-	270,385	117,665	112,660	152,720	56.5%	5,005	4.4%
Linguistic Services	30,043	(30,043)	-	-	-	-	-	-	-	0.0%	-	0.0%
Medical Transportation	90,128	-	90,128	90,128	-	90,128	29,952	37,553	60,176	66.8%	(7,601)	(20.2%)
Outreach Services	300,428	30,043	330,471	330,471	-	330,471	104,215	137,686	226,256	88.5%	(33,481)	(24.3%)
Psychosocial Support Services	420,599	-	420,599	420,599	-	420,599	122,866	175,250	287,733	70.8%	(52,384)	(29.8%)
<b>TOTAL</b>	3,004,278	1,094,619	4,098,897	4,098,897	-	4,098,897	1,112,740	1,707,874	2,986,157	72.9%	(595,134)	(34.8%)

Underspent  
Overspent

MARYLAND - PART A





Suburban Maryland - MAI

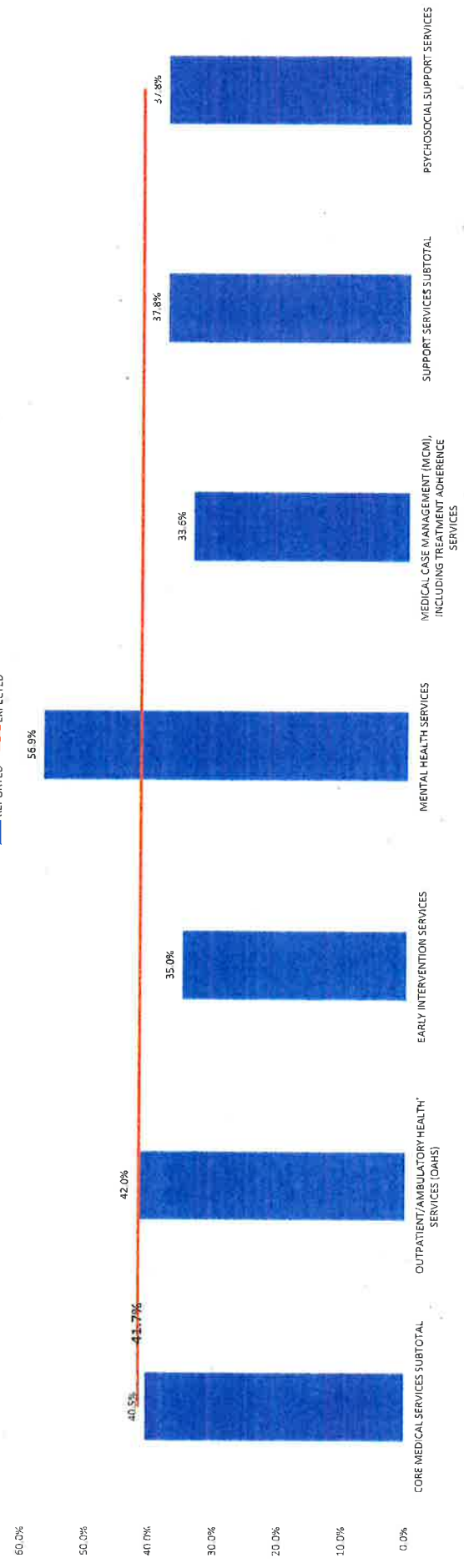
Report through July 2018

Service Area	Allocations		Awards		Expenditures to Date		Unspent		Variance	
	Initial	Adjust	Current	Adjust	Reported	Expected	Amount	Percent	Amount	Percent
<b>Core Medical Services Subtotal</b>	775,209	-	775,209	-	314,138	323,004	451,071	59.5%	(8,866)	(2.7%)
Outpatient/Ambulatory Health Services (OAHS)	200,589	-	200,589	-	84,200	83,579	116,389	58.0%	621	0.7%
Early Intervention Services	182,643	-	182,643	-	63,898	76,101	118,645	65.0%	(12,103)	(15.9%)
Mental Health Services	146,374	-	146,374	-	83,918	60,989	63,056	43.1%	22,329	36.6%
Medical Case Management (MCM), including Treatment Adherence Services	245,603	-	245,603	-	82,622	102,335	162,981	66.4%	(19,712)	(19.3%)
<b>Support Services Subtotal</b>	125,862	-	125,862	-	47,526	52,443	78,336	62.2%	(4,916)	(9.4%)
Psychosocial Support Services	125,862	-	125,862	-	47,526	52,443	78,336	62.2%	(4,916)	(9.4%)
<b>TOTAL</b>	901,071	-	901,071	-	361,664	375,445	639,407	69.9%	(13,781)	(3.7%)

Underspent  
Overspent

MARYLAND - MAI

REPORTED EXPECTED



West Virginia - Part A

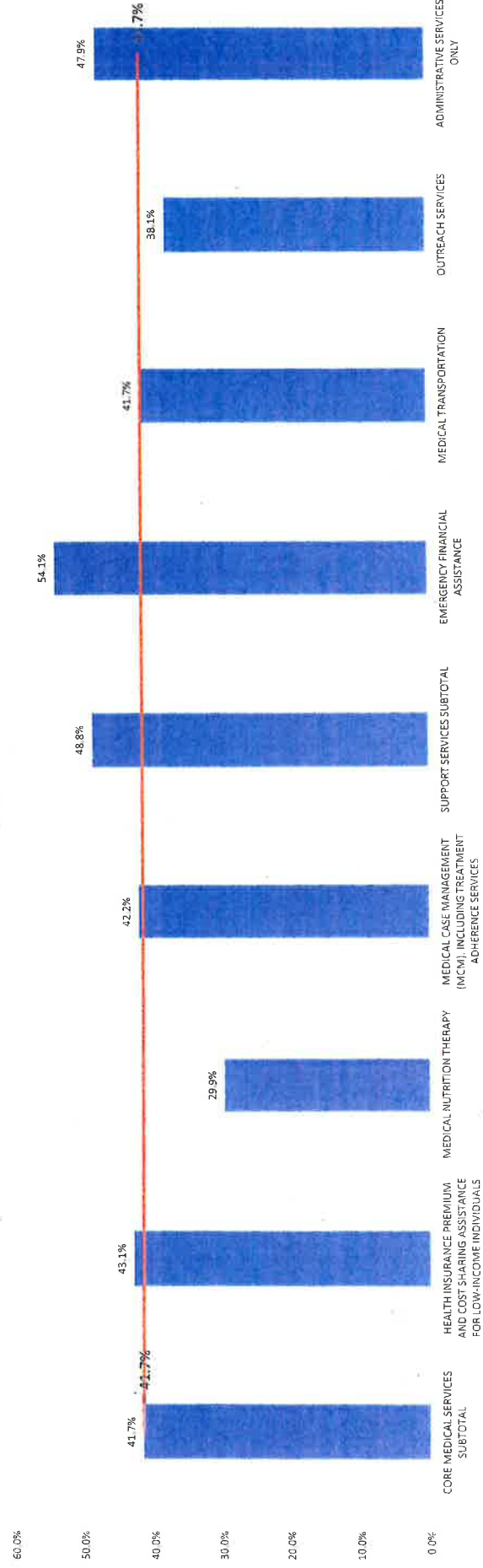
Report through July 2018

Service Area	Allocations		Awards		Expenditures to Date		Unspent		Variance	
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Expected	Amount	Percent
<b>Core Medical Services Subtotal</b>	185,400	-	185,400	185,400	-	185,400	77,356	77,250	108,044	58.3%
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPCSALI)	40,000	-	40,000	40,000	-	40,000	17,230	16,667	22,770	56.9%
Medical Nutrition Therapy	10,400	-	10,400	10,400	-	10,400	3,105	4,333	7,295	70.1%
Medical Case Management (MCM), including treatment Adherence Services	135,000	-	135,000	135,000	-	135,000	57,021	56,250	77,979	57.8%
<b>Support Services Subtotal</b>	161,650	-	161,650	161,650	-	161,650	78,866	67,354	92,784	51.2%
Emergency Financial Assistance	80,000	-	80,000	80,000	-	80,000	43,247	33,333	36,753	45.9%
Medical Transportation	39,600	-	39,600	39,600	-	39,600	16,500	16,500	23,100	58.3%
Outreach Services	10,500	-	10,500	10,500	-	10,500	3,997	4,375	6,503	61.9%
Administrative Services -WV Only	31,550	-	31,550	31,550	-	31,550	15,122	13,146	16,428	52.1%
<b>TOTAL</b>	<b>347,050</b>	<b>-</b>	<b>347,050</b>	<b>347,050</b>	<b>-</b>	<b>347,050</b>	<b>155,222</b>	<b>144,504</b>	<b>190,828</b>	<b>55.0%</b>

Underspent  
Overspent

WEST VIRGINIA- PART A

REPORTED EXPECTED



**Part A - Subtotal (12 month Reporting Period)**

**Report through July 2018**

Service Area	Initial		Current		Adjust		Awards		Expenses to Date		Unspent		Variance	
	Initial	Adjust	Current	Adjust	Initial	Adjust	Current	Percent	Reported	Percent	Amount	Percent	Amount	Percent
<b>Core Medical Services Subtotal</b>	<b>6,214,704</b>	<b>1,036,534</b>	<b>7,251,238</b>	<b>100,950</b>	<b>5,971,013</b>	<b>100,950</b>	<b>6,071,963</b>	<b>69.1%</b>	<b>1,718,173</b>	<b>28.3%</b>	<b>4,353,790</b>	<b>71.7%</b>	<b>(811,812)</b>	<b>(32.1%)</b>
Early Intervention Services	799,252	500,693	1,299,945	-	824,945	-	824,945	9.4%	273,548	33.2%	551,397	66.8%	(70,179)	(20.4%)
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPCSALI)	420,277	(1,791)	418,486	-	143,359	-	143,359	1.6%	62,103	43.3%	81,256	56.7%	2,371	4.0%
Home and Community-Based Health Services	275,127	16,782	291,909	100,950	190,909	100,950	291,859	3.3%	78,815	27.0%	213,044	73.0%	(42,792)	(35.2%)
Medical Nutrition Therapy	498,086	-	498,086	-	459,053	-	459,053	5.2%	100,204	21.8%	358,849	78.2%	(91,068)	(47.6%)
Medical Case Management (MCM), including Treatment Adherence Services	4,221,962	520,850	4,742,812	-	4,352,747	-	4,352,747	49.5%	1,203,502	27.6%	3,149,245	72.4%	(610,143)	(33.6%)
<b>Support Services Subtotal</b>	<b>2,669,553</b>	<b>863,466</b>	<b>3,533,019</b>	<b>-</b>	<b>2,716,682</b>	<b>-</b>	<b>2,716,682</b>	<b>30.9%</b>	<b>944,547</b>	<b>34.8%</b>	<b>1,772,135</b>	<b>65.2%</b>	<b>(187,404)</b>	<b>(16.8%)</b>
Emergency Financial Assistance	989,271	661,895	1,651,166	-	1,037,498	-	1,037,498	11.8%	405,116	33.0%	632,382	61.0%	(27,175)	(6.3%)
Other Professional Services	268,125	6,097	274,222	-	162,032	-	162,032	1.8%	64,773	40.0%	97,259	60.0%	(2,740)	(4.1%)
Linguistic Services	108,651	22,678	131,329	-	101,064	-	101,064	1.1%	46,595	46.1%	54,469	53.9%	4,485	10.7%
Medical Transportation	300,469	28,318	328,787	-	282,663	-	282,663	3.2%	70,605	25.0%	212,058	75.0%	(47,171)	(40.1%)
Outreach Services	432,977	36,470	469,447	-	469,447	-	469,447	5.3%	161,771	34.5%	307,676	65.5%	(33,832)	(17.3%)
Psychosocial Support Services	538,510	108,008	646,518	-	632,428	-	632,428	7.2%	180,564	28.6%	451,864	71.4%	(82,948)	(31.5%)
<b>TOTAL</b>	<b>8,884,258</b>	<b>1,900,000</b>	<b>10,784,258</b>	<b>100,950</b>	<b>8,687,695</b>	<b>100,950</b>	<b>8,788,645</b>	<b>100.0%</b>	<b>2,662,720</b>	<b>30.3%</b>	<b>8,125,928</b>	<b>93.7%</b>	<b>(1,103,313)</b>	<b>(12.5%)</b>

MAI - Subtotal

Report through July 2018

Service Area	Allocations		Awards		Expenditures to Date		Unspent		Variance	
	Initial	Adjust	Initial	Adjust	Current	Reported	Amount	Percent	Amount	Percent
<b>Core Medical Services Subtotal</b>	<b>2,158,115</b>	<b>(794)</b>	<b>2,176,126</b>	<b>(794)</b>	<b>2,175,332</b>	<b>746,361</b>	<b>1,428,971</b>	<b>65.7%</b>	<b>(160,027)</b>	<b>(17.7%)</b>
Outpatient/Ambulatory Health Services (OAHHS)	817,242	-	782,114	-	782,114	215,336	566,778	72.5%	(110,545)	(33.9%)
Early Intervention Services	386,749	(794)	431,588	(794)	430,794	166,311	264,483	61.4%	(13,186)	(7.3%)
Mental Health Services	284,503	-	275,028	-	275,028	125,856	149,172	54.2%	11,261	9.8%
Medical Case Management (MCM), including Treatment										
Adherence Services	606,017	-	591,964	-	591,964	211,146	380,818	64.3%	(35,506)	(14.4%)
Substance Abuse Services - Outpatient	63,604	-	95,432	-	95,432	27,711	67,721	71.0%	(12,052)	(30.3%)
<b>Support Services Subtotal</b>	<b>319,331</b>	<b>794</b>	<b>293,982</b>	<b>794</b>	<b>294,776</b>	<b>109,980</b>	<b>184,796</b>	<b>62.7%</b>	<b>(12,844)</b>	<b>(10.5%)</b>
Linguistic Services	11,477	-	11,477	-	11,477	-	11,477	100.0%	(4,782)	(100.0%)
Psychosocial Support Services	307,854	794	282,505	794	283,299	109,980	173,319	61.2%	(8,061)	(6.8%)
<b>TOTAL</b>	<b>2,477,446</b>	<b>-</b>	<b>2,470,108</b>	<b>-</b>	<b>2,470,108</b>	<b>856,341</b>	<b>1,613,767</b>	<b>65.3%</b>	<b>(172,871)</b>	<b>(16.8%)</b>

**UBC- Subtotal** Report through July 2018

Service Area	Allocations			Awards			Expenditures to Date			Unspent		Variance	
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Expected	Amount	Percent	Amount	Percent	
<b>Core Medical Services Subtotal</b>	<b>10,892,239</b>	<b>(500,000)</b>	<b>10,392,239</b>	<b>2,179,000</b>	-	<b>2,179,000</b>	<b>1,140,897</b>	<b>907,917</b>	<b>1,038,103</b>	<b>47.6%</b>	<b>232,980</b>	<b>25.7%</b>	
Outpatient/Ambulatory Health Services (OAHs)	3,713,264	(500,000)	3,213,264	1,155,000	-	1,155,000	598,570	481,250	556,430	48.2%	117,320	24.4%	
Oral Health Care	3,465,713	-	3,465,713	735,000	-	735,000	412,228	306,250	322,772	43.9%	105,978	34.6%	
Mental Health Services	2,475,508	-	2,475,508	208,300	-	208,300	112,500	86,792	95,800	46.0%	25,708	29.6%	
Substance Abuse Services - Outpatient	1,237,754	-	1,237,754	80,700	-	80,700	17,599	33,625	63,101	78.2%	(16,026)	(47.7%)	
<b>Support Services Subtotal</b>	<b>4,978,596</b>	<b>500,000</b>	<b>5,478,596</b>	<b>3,275,500</b>	-	<b>3,275,500</b>	<b>1,970,006</b>	<b>1,364,792</b>	<b>1,305,495</b>	<b>39.9%</b>	<b>605,214</b>	<b>44.3%</b>	
Non-Medical Case Management Services (NMC/M)	3,713,264	-	3,713,264	1,768,500	-	1,768,500	992,688	736,875	775,813	43.9%	255,813	34.7%	
Food Bank/Home Delivered Meals	990,205	500,000	1,490,205	1,395,000	-	1,395,000	930,778	581,250	464,222	33.3%	349,528	60.1%	
Housing Case Management and Referral	275,127	-	275,127	112,000	-	112,000	46,540	46,667	65,460	58.4%	(127)	(0.3%)	
<b>TOTAL: Human Care Agreements</b>	<b>15,870,835</b>	<b>-</b>	<b>15,870,835</b>	<b>5,454,500</b>	<b>-</b>	<b>5,454,500</b>	<b>3,140,982</b>	<b>2,272,908</b>	<b>2,343,598</b>	<b>43.0%</b>	<b>338,194</b>	<b>36.9%</b>	

Service Area	Allocations			Awards			Expenditures to Date		Unspent		Variance	
	Initial	Adjust	Current	Initial	Adjust	Current	Reported	Amount	Percent	Amount	Percent	
<b>Core Medical Services Subtotal</b>	<b>19,265,058</b>	<b>535,740</b>	<b>19,800,798</b>	<b>10,326,139</b>	<b>100,156</b>	<b>10,426,295</b>	<b>3,605,431</b>	<b>6,820,864</b>	<b>65.4%</b>	<b>(738,859)</b>	<b>(17.0%)</b>	
Outpatient/Ambulatory Health Services (OAHs)	4,530,506	(500,000)	4,030,506	1,937,114	-	1,937,114	813,906	1,123,208	58.0%	6,775	0.8%	
Oral Health Care	3,465,713	-	3,465,713	735,000	-	735,000	412,228	322,772	43.9%	105,978	34.6%	
Early Intervention Services	1,186,001	489,889	1,685,900	1,256,533	(794)	1,255,739	439,889	815,880	65.0%	(83,365)	(15.9%)	
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals (HIPCSALI)	420,277	(1,791)	418,486	143,359	-	143,359	62,103	81,256	56.7%	2,371	4.0%	
Home and Community-Based Health Services	275,127	16,782	291,909	190,909	100,950	291,859	78,815	213,044	73.0%	(42,792)	(35.2%)	
Mental Health Services	2,760,011	-	2,760,011	483,328	-	483,328	238,356	244,972	50.7%	36,970	18.4%	
Medical Nutrition Therapy	498,086	-	498,086	459,053	-	459,053	100,204	358,849	78.2%	(91,068)	(47.6%)	
Medical Case Management (MCM), including Treatment Adherence Services	4,827,979	520,850	5,348,829	4,944,711	-	4,944,711	1,414,647	3,530,064	71.4%	(645,649)	(31.3%)	
Substance Abuse Services - Outpatient	1,301,358	-	1,301,358	176,132	-	176,132	45,310	130,822	74.3%	(28,078)	(38.3%)	
<b>Support Services Subtotal</b>	<b>7,967,481</b>	<b>1,364,260</b>	<b>9,331,741</b>	<b>6,286,164</b>	<b>794</b>	<b>6,286,958</b>	<b>3,024,532</b>	<b>3,262,426</b>	<b>51.9%</b>	<b>404,966</b>	<b>15.5%</b>	
Non-Medical Case Management Services (NMCM)	3,713,264	-	3,713,264	1,768,500	-	1,768,500	992,668	775,813	43.9%	255,813	34.7%	
Emergency Financial Assistance	989,271	661,895	1,651,166	1,037,498	-	1,037,498	405,116	632,382	61.0%	(27,175)	(6.3%)	
Food Bank/Home Delivered Meals	990,205	500,000	1,490,205	1,395,000	-	1,395,000	930,778	464,222	33.3%	349,528	60.1%	
Other Professional Services	288,125	6,097	294,222	162,032	-	162,032	64,773	97,259	60.0%	(2,740)	(4.1%)	
Linguistic Services	120,128	22,678	142,806	112,541	-	112,541	46,595	65,946	58.6%	(297)	(0.6%)	
Medical Transportation	300,469	28,318	328,787	282,663	-	282,663	70,605	212,068	75.0%	(47,171)	(40.1%)	
Outreach Services	432,977	36,470	469,447	469,447	-	469,447	161,771	307,676	65.5%	(33,832)	(17.3%)	
Psychosocial Support Services	846,365	108,802	955,167	914,933	794	915,727	290,544	625,183	68.3%	(91,009)	(23.9%)	
Housing Case Management and Referral	275,127	-	275,127	112,000	-	112,000	46,540	65,460	58.4%	(127)	(0.3%)	
Administrative Services -WW Only	31,550	-	31,550	31,550	-	31,550	15,122	16,428	52.1%	1,976	15.0%	
<b>TOTAL</b>	<b>27,232,539</b>	<b>1,900,000</b>	<b>29,132,539</b>	<b>16,612,303</b>	<b>100,950</b>	<b>16,713,253</b>	<b>6,629,963</b>	<b>10,083,290</b>	<b>39.7%</b>	<b>(333,892)</b>	<b>(4.8%)</b>	