

**Sacramento County  
Department of Health Services  
HIV Health Services Planning Council  
Executive Committee**  
[www.sacramento-tga.com](http://www.sacramento-tga.com)

Meeting Agenda

April 13, 2023, 3:00 p.m. to 5:00 p.m.

**Meeting Location –**

**4600 Broadway, Sacramento, CA 95820  
2<sup>nd</sup> Floor Conference/Community Room 2020**

**Facilitator:** Richard Benavidez – Council Chair

**Scribe:** Danielle Caravella – Staff

**Meeting Invitees:**

- Richard Benavidez – Council Chair
- Kristina Kendricks-Clark – Vice Chair & QAC Chair
- Melissa Willett – AdAC Chair
- Zach B. - ACC Chair
- Chelle Gossett – Recipient
- Jake Bradley-Rowe – PAC Chair
- Ronnie Miranda - NAC Chair
- Michael Ungeheuer – Gov Chair

- Open to the Public

Public Comment: This provides opportunities for the public to address the Council as a whole in order to listen to opinions regarding matters within the jurisdiction of the Council during Regular meetings and regarding items on the Agenda at all other meetings. Public Comment time limit is three (3) minutes.

\*Action Items

| Topic                        | Presenter | Start Time and Length |
|------------------------------|-----------|-----------------------|
| Welcome and Introductions    | Benavidez | 3:00 pm               |
| Announcements                | All       |                       |
| Public Comments-Agenda Items | Benavidez |                       |
| April 2023 Agenda*           | Benavidez |                       |

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|  |  |           |
|--|--|-----------|
| Minutes of March 2023*   | Benavidez  |           |
| Recipient Report:<br><ul style="list-style-type: none"> <li>➤ FY22 Feb. Part A Monthly Fiscal Report*</li> <li>➤ FY22 Feb. Part B Monthly Fiscal Report</li> <li>➤ SOA Ending the HIV Epidemic Update</li> <li>➤ HRSA Part A Ending the Epidemic Update</li> </ul>   | Gammell  |           |
| Committee/Work Group Updates<br><ul style="list-style-type: none"> <li>➤ Administrative Assessment Committee <ul style="list-style-type: none"> <li>➤ FY22 AdAC Year-End Review 6/15/2023</li> </ul> </li> <li>➤ Affected Communities Committee <ul style="list-style-type: none"> <li>➤ Community Outreach</li> <li>➤ ACC Overview*</li> <li>➤ FY23 Workplan</li> </ul> </li> <li>➤ Priorities and Allocations <ul style="list-style-type: none"> <li>➤ FY23 Re-Allocations*</li> <li>➤ PAC Overview*</li> <li>➤ FY23 PAC Workplan</li> <li>➤ FY23 General Directives*</li> <li>➤ FY23 Service Directives*</li> </ul> </li> <li>➤ Quality Advisory Committee <ul style="list-style-type: none"> <li>➤ QAC Overview*</li> <li>➤ FY23 QAC Workplan</li> </ul> </li> <li>➤ Needs Assessment Committee <ul style="list-style-type: none"> <li>➤ NAC Overview*</li> <li>➤ FY23 NAC Workplan</li> </ul> </li> <li>➤ Governance</li> </ul> | <p style="text-align: center;">Willett</p> <p style="text-align: center;">Zach B.</p> <p style="text-align: center;">Bradley-Rowe</p> <p style="text-align: center;">Kendricks-Clark</p> <p style="text-align: center;">Miranda</p> <p style="text-align: center;">Ungeheuer</p> | As Needed |
| Set Planning Council Agenda for April 26, 2023*  | All  | As Needed |
| Public Comments-Non-Agenda Items   | All  |           |
| Technical Assistance   | Benavidez  |           |
| Adjournment  | Benavidez  | 5:00 pm   |

Attachments:

- Minutes of March 2023\*
- FY22 Feb. Part A Monthly Fiscal Report\*

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- FY22 Feb. Part B Monthly Fiscal Report
- ACC Overview\*
- FY23 ACC Workplan
- FY23 Re-Allocations Memo
- PAC Memo\*
- PAC Overview\*
- FY23 PAC Workplan
- FY23 General Directives\*
- FY23 Service Directives\*
- QAC Overview\*
- FY23 QAC Workplan
- NAC Overview\*
- FY23 NAC Workplan
- Planning Council Agenda for April 26, 2023\*

**Next Meeting: May 11, 2023**

## **HIV HEALTH SERVICES PLANNING COUNCIL Executive Committee**

### **Meeting Minutes**

March 9, 2023, 3:00 p.m. to 5:00 p.m.

### **Meeting Location:**

Sacramento Sexual Health Center, 4600 Broadway, Conference Room 2020, Sacramento, CA 95820

**Facilitator:** Richard Benavidez –Council Chair

**Scribe:** Paula Gammell – County Staff

### **Committee Member Attendees:**

Zach B. – ACC Chair, Melissa Willett – AdAC Chair, Kristina Kendricks-Clark – Vice Chair, Richard Benavidez – Council Chair,

**Members Excused:** Jake Bradley-Rowe –PAC Chair, Michael Ungeheuer – Governance Chair, and Ronnie Miranda – NAC Chair, and Chelle Gossett - Recipient

**Members Absent:** N/A

**Guests:** N/A

| Topic                                     | Minutes   |
|---|---|
| Welcome, Introductions, and Announcements | <p>The meeting began at 3:15 p.m.</p> <p>The Sacramento LGBT Center is providing Mpox vaccines through June.</p> <p>ACC coordinated with Gilead to host a community educational event on March 8, 2023, in recognition of both Women and Girls HIV/AIDS Awareness Day as well as National Black HIV/AIDS Awareness Day.</p> <p>Gilead is also hosting an event on March 15, 2023, titled "Treatment Options to Help Support Different HIV Populations".</p> |
| Public Comments-Agenda Items              | N/A   |
| March 2023 Agenda Review*                 | <p>A copy of the March 2023 Agenda was presented for review and approval. Motion to approve the Agenda as presented was made by Kristina Kendricks-Clark with a second by Melissa Willett. The motion passed with a majority.</p> <p>Approved: Kendricks-Clark, Willett, Benavidez, and Zach B.<br/> Opposed: None<br/> Abstained: None</p>   |
| February 2023 Minutes Review*             | <p>A copy of the February 2023 Committee Minutes was presented for review and approval. A motion to approve the Minutes as presented was made by Zach B with a second by Richard Benavidez. The motion passed with a majority.</p> <p>Approved: Kendricks-Clark, Willett, Benavidez, and Zach B.<br/> Opposed: None<br/> Abstained: None</p>  |

| Topic  | Minutes  |
|--|--|
| <p>Recipient Report:</p> <ul style="list-style-type: none"> <li>➤ FY22 Jan. 2023 Part A Monthly Fiscal Report*</li> <br/> <li>➤ FY22 Jan. 2023 Part B Monthly Fiscal Report</li> <br/> <li>➤ SOA Ending the HIV Epidemic Update</li> <br/> <li>➤ HRSA Part A Ending the Epidemic Update</li> </ul> | <p>Paula Gammell presented the FY22 January 2023 Part A Monthly Fiscal Report for review and approval. The contracts for the 2<sup>nd</sup> Reallocation have been processed and the allocations on the Fiscal Reports have been updated accordingly. Kristina Kendricks-Clark motioned to accept the FY22 January 2023 Part A Monthly Fiscal Report as presented and Melissa Willett seconded the motion. The motion passed with a majority.</p> <p style="padding-left: 40px;">Approved: Kendricks-Clark, Willett, Benavidez, and Zach B.<br/> Opposed: None<br/> Abstained: None</p> <p>Paula Gammell presented the FY22 January 2023 Part B Monthly Report for informational purposes. Yolo County is underspending. Members wondered why Yolo County appeared to be underspending at such a high rate. Paula informed that the organization had requested to hire an additional medical case manager but the process has been delayed. Had another medical case manager been hired, the expenditures would have increased.</p> <p>Paula Gammell shared that the van is operational and providing services in the community. To build rapport with clientele, van staff have been providing food, water bowls, and collars/leashes for the client's pets.</p> <p>The Sacramento Sexual Health Clinic is providing HIV services five days a week. There is a concern that demand will exceed the Clinic's capacity to provide services. The County has already begun internal discussions to address the situation.</p> |

| Topic   | Minutes  |
|---|--|
| <p>Committee/Work Group Updates</p> <ul style="list-style-type: none"> <li>➤ Administrative Assessment Committee</li> <li>➤ Affected Communities Committee</li> <li>➤ Priorities and Allocations</li> <li>➤ Quality Advisory Committee</li> <li>➤ Needs Assessment Committee</li> <li>➤ Governance</li> </ul> | <p>Melissa Willett shared that AdAC will next meet on June 15<sup>th</sup> for the FY22 year-end review.</p> <p>To address reflectiveness needs, Zach B. shared that ACC is currently recruiting new non-aligned consumers who are recipients of Part A services.</p> <p>PAC will meet next on April 5, 2023, to re-visit the FY23 allocations due to changes in agencies providing services as a result of the recent RFP.</p> <p>QAC met and reviewed its Overview, Work Plan, and discussed the limitations of the Post Card Survey.</p> <p>NAC met and reviewed its Overview, Work Plan, and discussed the limitations of the Needs Assessment Survey. Additionally, a draft of the FY22 Needs Assessment report has been presented to the Recipient who is in the process of editing the document.</p> <p>Governance has no updates at this time.</p> |
| <p>March 22, 2023, HHSPC Agenda*</p>  | <p>A draft copy of the March 22, 2023, HHSPC Agenda was presented for review and approval. Motion to approve the Agenda as presented was made by Zach B. and seconded by Melissa Willett. After discussion, it was suggested to delete the Council Staff Assessment from the attachments as it is a function of the Executive Committee. An amended motion to accept the agenda with the</p>   |

| Topic                | Minutes   |
|----------------------|---|
|                      | <p>changes discussed was made by Zach B. and Melissa Willett seconded the amended motion. The motion passed with a majority.</p> <p>Approved: Willett, Benavidez, and Zach B.<br/> Opposed: None<br/> Abstained: None<br/> Notes: Kristina Kendricks-Clark left the meeting prior to the Council Agenda discussion.</p> |
| Technical Assistance | Please reach out to Richard Benavidez or Kristina Kendricks-Clark if you need technical assistance.   |
| Public Comment       | ACC is coordinating several upcoming Community Education Programs. A schedule will be forthcoming.  |
| Adjournment          | The meeting adjourned at 4:30 p.m.  |



Part A Only

| <b>EL DORADO COUNTY - Feb. 2023</b>     | <b>Approved Budget</b> | <b>Current Month</b> | <b>Cumulative Expenses</b> | <b>% Shade</b> | <b>Percentage Used</b> | <b>Remaining Balance</b> |
|---|------------------------|----------------------|----------------------------|----------------|------------------------|--------------------------|
| <b>Service Category</b>                 |                        |                      |                            |                |                        |                          |
| Oral Health                             | \$24,673               | \$0                  | \$3,598                    |                | 14.6%                  | \$ 21,075                |
| Health Insurance Premium & Cost Sharing | \$4,849                | \$0                  | \$926                      |                | 19.1%                  | \$ 3,923                 |
| Medical Case Management                 | \$133,000              | \$12,986             | \$130,794                  |                | 98.3%                  | \$ 2,206                 |
| Medical Transportation Services         | \$3,834                | \$0                  | \$5,544                    |                | 144.6%                 | \$ (1,710)               |
| Emergency Financial Assistance          | \$14,845               | \$0                  | \$18,822                   |                | 126.8%                 | \$ (3,977)               |
| <b>Sub-Total El Dorado Counties</b>     | <b>\$181,201</b>       | <b>\$12,986</b>      | <b>\$159,685</b>           |                | <b>88.1%</b>           | <b>\$ 21,516</b>         |

| <b>PLACER COUNTY - February 2023</b>    | <b>Approved Budget</b> | <b>Current Month</b> | <b>Cumulative Expenses</b> | <b>% Shade</b> | <b>Percentage Used</b> | <b>Remaining Balance</b> |
|---|------------------------|----------------------|----------------------------|----------------|------------------------|--------------------------|
| <b>Service Category</b>                 |                        |                      |                            |                |                        |                          |
| Oral Health                             | \$2,329                | \$2,530              | \$2,530                    |                | 108.6%                 | \$ (201)                 |
| Health Insurance Premium & Cost Sharing | \$4,869                | \$77                 | \$114                      |                | 2.3%                   | \$ 4,755                 |
| Medical Case Management                 | \$141,268              | \$13,195             | \$136,234                  |                | 96.4%                  | \$ 5,034                 |
| Medical Transportation Services         | \$20,891               | \$1,788              | \$19,087                   |                | 91.4%                  | \$ 1,804                 |
| Emergency Financial Assistance          | \$36,240               | \$0                  | \$40,295                   |                | 111.2%                 | \$ (4,055)               |
| <b>Sub-Total Placer County</b>          | <b>\$205,597</b>       | <b>\$17,590</b>      | <b>\$198,260</b>           |                | <b>96.4%</b>           | <b>\$ 7,337</b>          |

|  |
|--|
| <b>Missing Invoices</b><br>Transportation, Emergency Financial Assistance, and Oral Health |
|--|

|           |  |                    |
|-----------|--|--------------------|
| Under 5%  |  | <b>0-94%</b>       |
| Within 5% |  | <b>95-105%</b>     |
| Over 5%   |  | <b>106% - Over</b> |

Part A Only

| SACRAMENTO COUNTY - February 2023                            | Approved Budget         | Current Month | Cumulative Expenses | % Shade | Percentage Used | Remaining Balance |
|--|-------------------------|---------------|---------------------|---------|-----------------|-------------------|
| 1 <b>Ambulatory/Outpatient Care</b>                          | \$476,408               | \$19,967      | \$367,634           |         | 77.17%          | \$108,774         |
| SS: Ambulatory/Outpatient Medical Care                       | \$419,010               | \$19,967      | \$324,304           |         | 77.40%          | \$94,706          |
| SS: Vendor paid viral/load resistance lab test               | \$57,398                | \$0           | \$43,330            |         | 75.49%          | \$14,068          |
| 2 <b>AIDS Pharmaceutical Assistance</b>                      | Not Funded at this Time |               |                     |         |                 |                   |
| 3 <b>Health Insurance Prem. &amp; Cost Sharing Asst.</b>     | \$10,821                | \$0           | \$6,304             |         | 58.26%          | \$4,517           |
| 4 <b>Oral Health</b>   | \$269,174               | \$0           | \$269,174           |         | 100.00%         | \$0               |
| 5 <b>Medical Case Management</b>                             | \$1,024,117             | \$76,353      | \$983,376           |         | 96.02%          | \$40,741          |
| SS: MAI  | \$184,117               | \$4,585       | \$184,117           |         | 100.00%         | \$0               |
| SS: Office Based Services inc. Pediatric Treatment Adherence | \$494,662               | \$63,172      | \$488,462           |         | 98.75%          | \$6,200           |
| SS: Field/In-Home Services                                   | \$334,000               | \$6,877       | \$298,751           |         | 89.45%          | \$35,249          |
| SS: Case Mgmt. Child Care                                    | \$11,338                | \$1,719       | \$12,045            |         | 106.24%         | -\$707            |
| 6 <b>Case Management (Non-Medical)</b>                       | \$45,082                | \$2,288       | \$45,082            |         | 100.00%         | \$0               |
| 7 <b>Food Bank/Home Delivered Meals</b>                      | Part B Only             |               |                     |         |                 |                   |
| 8 <b>Mental Health Services</b>                              | \$464,789               | \$33,978      | \$464,789           |         | 100.00%         | \$0               |
| 9 <b>Psychosocial Support Services</b>                       | Not Funded at this Time |               |                     |         |                 |                   |
| 10 <b>Medical Transportation Services</b>                    | \$76,079                | \$11,035      | \$73,488            |         | 96.59%          | \$2,591           |
| 11 <b>Substance Abuse Services - Outpatient</b>              | \$159,661               | \$1,993       | \$159,661           |         | 100.00%         | \$0               |
| 12 <b>Substance Abuse Services - Residential</b>             | \$58,408                | \$0           | \$57,968            |         | 99.25%          | \$440             |
| 13 <b>Housing</b>  | \$15,861                | \$1,359       | \$9,821             |         | 61.92%          | \$6,040           |
| 14 <b>Child Care Services</b>                                | \$20,000                | \$1,577       | \$20,000            |         | 100.00%         | \$0               |
| 15 <b>Emergency Financial Assistance</b>                     | \$13,862                | \$0           | \$11,292            |         | 81.46%          | \$2,570           |
| 16 <b>Medical Nutritional Therapy</b>                        | \$5,660                 | \$630         | \$3,036             |         | 53.65%          | \$2,624           |
| 17 <b>Health Education/Risk Reduction</b>                    | \$11,334                | \$988         | \$11,334            |         | 100.00%         | \$0               |
| 18 <b>Outreach Services</b>                                  | \$14,981                | \$0           | \$14,980            |         | 100.00%         | \$1               |
| 19 <b>Outreach Services MAI</b>                              | Part B Only             |               |                     |         |                 |                   |
| 20 <b>Linguistic Services</b>                                | Not Funded at this Time |               |                     |         |                 |                   |
| 21 <b>Home &amp; Community Based Health Services</b>         | Not Funded at this Time |               |                     |         |                 |                   |
| 22 <b>Home Health Care</b>                                   | Not Funded at this Time |               |                     |         |                 |                   |
| 23 <b>Hospice</b>  | Not Funded at this Time |               |                     |         |                 |                   |
| 24 <b>Legal Services</b>                                     | Not Funded at this Time |               |                     |         |                 |                   |
| 25 <b>Permanency Planning</b>                                | Not Funded at this Time |               |                     |         |                 |                   |
| 26 <b>Referral for Health Care &amp; Support Services</b>    | Not Funded at this Time |               |                     |         |                 |                   |
| 27 <b>Rehabilitation Services</b>                            | Not Funded at this Time |               |                     |         |                 |                   |
| 28 <b>Respite Care</b>                                       | Not Funded at this Time |               |                     |         |                 |                   |
| 29 <b>ADAP</b>   | Not Funded at this Time |               |                     |         |                 |                   |
| 30 <b>Early Intervention Services</b>                        | Not Funded at this Time |               |                     |         |                 |                   |
| <b>Sub-Total Sacramento County</b>                           | \$2,666,237             | \$150,169     | \$2,497,940         |         | 93.69%          | \$168,297         |
| <b>Sub-Total TGA Direct Service Expenditures</b>             | \$3,053,035             | \$180,744     | \$2,855,884         |         | 93.54%          | \$197,151         |

Priority Number

|  |                    |                  |                    |  |               |                  |
|--|--------------------|------------------|--------------------|--|---------------|------------------|
| Recipient - Grantee Admin                      | \$351,840          | \$49,916         | \$302,781          |  | 86.06%        | \$49,059         |
| Recipient - Quality Mgmt                       | \$175,919          | \$8,232          | \$114,531          |  | 65.10%        | \$61,388         |
| <b>Grand- Total Direct Services, Recipient</b> | <b>\$3,580,794</b> | <b>\$238,892</b> | <b>\$3,273,196</b> |  | <b>91.41%</b> | <b>\$307,598</b> |

| Missing Invoices        |  |
|-------------------------|--|
| Recipient Expenses      |  |
| Labs                    |  |
| Medical Case Management |  |
| Health Insurance        |  |

| February  |             |
|-----------|-------------|
| Under 5%  | 0-94%       |
| Within 5% | 95-105%     |
| Over 5%   | 106% - Over |

## Part B Only

| YOLO COUNTY - February 2023<br>Service Category | Approved Budget  | Current Month | Cumulative Expenses | % Shade | Percentage Used | Remaining Balance |
|---|------------------|---------------|---------------------|---------|-----------------|-------------------|
| Oral Health                                     | \$7,500          | \$0           | \$0                 |         | 0.0%            | \$ 7,500          |
| Medical Case Management                         | \$110,769        | \$0           | \$70,701            |         | 63.8%           | \$ 40,067         |
| Medical Transportation Services                 | \$3,094          | \$0           | \$1,965             |         | 63.5%           | \$ 1,129          |
| Emergency Financial Assistance                  | \$1,002          | \$0           | \$343               |         | 34.2%           | \$ 659            |
| Food Bank/Home Delivered Meals                  | \$5,465          | \$0           | \$4,275             |         | 78.2%           | \$ 1,190          |
| <b>Sub-Total Yolo County</b>                    | <b>\$127,829</b> | <b>\$0</b>    | <b>\$77,285</b>     |         | <b>60.5%</b>    | <b>\$ 50,545</b>  |

| Missing Invoices   |
|--|
| Oral Health, Medical Case Management, Medical Transportation, Emergency Financial Assistnace, and Food Bank/Home Delivered Meals |

|           |  |             |
|-----------|--|-------------|
| Under 5%  |  | 0-94%       |
| Within 5% |  | 95-105%     |
| Over 5%   |  | 106% - Over |

**Part B Only**

Priority Number

| SACRAMENTO COUNTY - February 2023 |  | Approved Budget | Current Month | Cumulative Expenses     | % Shade | Percentage Used | Remaining Balance |
|-----------------------------------|--|-----------------|---------------|-------------------------|---------|-----------------|-------------------|
| 1                                 | <b>Ambulatory/Outpatient Care</b>                            | \$442,130       | \$45,167      | \$442,130               | Green   | 100.00%         | \$0               |
|                                   | SS: Ambulatory/Outpatient Medical Care                       | \$442,130       | \$45,167      | \$442,130               | Green   | 100.00%         | \$0               |
|                                   | SS: Vendor paid viral load resistance lab test               |                 |               |                         |         |                 |                   |
| 2                                 | <b>AIDS Pharmaceutical Assistance</b>                        |                 |               |                         |         |                 |                   |
| 3                                 | <b>Health Insurance Premium &amp; Cost Sharing Asst.</b>     |                 |               |                         |         |                 |                   |
| 4                                 | <b>Oral Health</b>   | \$253,097       | \$17,091      | \$253,456               | Green   | 100.14%         | -\$359            |
| 5                                 | <b>Medical Case Management</b>                               | \$57,326        | \$4,594       | \$52,094                | Red     | 90.87%          | \$5,232           |
|                                   | SS: MAI - Part A Only  |                 |               |                         |         |                 |                   |
|                                   | SS: Office Based Services inc. Pediatric Treatment Adherence |                 |               |                         |         |                 |                   |
|                                   | SS: Field/In-Home Services                                   | \$57,326        | \$4,594       | \$52,094                | Red     | 90.87%          | \$5,232           |
|                                   | SS: Case Mgmt Child Care                                     |                 |               |                         |         |                 |                   |
| 6                                 | <b>Case Management (Non-Medical)</b>                         | \$73,876        | \$6,565       | \$73,876                | Green   | 100.00%         | \$0               |
| 7                                 | <b>Food Bank - Part B Only</b>                               | \$11,982        | \$0           | \$13,049                | Yellow  | 108.90%         |                   |
| 8                                 | <b>Mental Health Services</b>                                | \$90,247        | \$10,264      | \$85,787                | Green   | 95.06%          | \$4,460           |
| 9                                 | <b>Psychosocial Support Services</b>                         |                 |               |                         |         |                 |                   |
| 10                                | <b>Medical Transportation Services</b>                       | \$117,991       | \$2,878       | \$127,838               | Yellow  | 108.35%         | -\$9,847          |
| 11                                | <b>Substance Abuse Services - Outpatient</b>                 |                 |               |                         |         |                 |                   |
| 12                                | <b>Substance Abuse Services - Residential</b>                |                 |               |                         |         |                 |                   |
| 13                                | <b>Housing</b>   | \$15,340        | \$0           | \$15,304                | Green   | 99.77%          | \$36              |
| 14                                | <b>Child Care Services</b>                                   |                 |               |                         |         |                 |                   |
| 15                                | <b>Emergency Financial Assistance</b>                        |                 |               |                         |         |                 |                   |
| 16                                | <b>Medical Nutritional Therapy</b>                           | \$9,701         | \$0           | \$9,701                 | Green   | 100.00%         | \$0               |
| 17                                | <b>Health Education/Risk Reduction</b>                       | \$25,300        | \$576         | \$25,252                | Green   | 99.81%          | \$48              |
| 18                                | <b>Outreach Services</b>                                     |                 |               |                         |         |                 |                   |
| 19                                | <b>Outreach Services MAI - Part B Only</b>                   | \$43,569        | \$3,617       | \$24,252                | Red     | 55.66%          | \$19,317          |
| 20                                | <b>Linguistic Services</b>                                   |                 |               | Not Funded at this Time |         |                 |                   |
| 21                                | <b>Home &amp; Community Based Health Services</b>            |                 |               | Not Funded at this Time |         |                 |                   |
| 22                                | <b>Home Health Care</b>                                      |                 |               | Not Funded at this Time |         |                 |                   |
| 23                                | <b>Hospice</b>   |                 |               | Not Funded at this Time |         |                 |                   |
| 24                                | <b>Legal Services</b>  |                 |               | Not Funded at this Time |         |                 |                   |
| 25                                | <b>Permanency Planning</b>                                   |                 |               | Not Funded at this Time |         |                 |                   |
| 26                                | <b>Referral for Health Care &amp; Support Services</b>       |                 |               | Not Funded at this Time |         |                 |                   |
| 27                                | <b>Rehabilitation Services</b>                               |                 |               | Not Funded at this Time |         |                 |                   |
| 28                                | <b>Respite Care</b>  |                 |               | Not Funded at this Time |         |                 |                   |
| 29                                | <b>ADAP</b>  |                 |               | Not Funded at this Time |         |                 |                   |
| 30                                | <b>Early Intervention Services</b>                           |                 |               | Not Funded at this Time |         |                 |                   |
|                                   | <b>Sub-Total Sacramento County</b>                           | \$1,140,559     | \$90,752      | \$1,122,738             | Green   | 98.44%          | \$17,821          |
|                                   | <b>Sub-Total TGA Direct Service Expenditures</b>             | \$1,268,388     | \$90,752      | \$1,200,023             | Red     | 94.61%          | \$68,365          |

|  |             |          |             |     |        |           |
|--|-------------|----------|-------------|-----|--------|-----------|
| <b>Recipient Administration</b>          | \$131,841   | \$3,266  | \$104,833   | Red | 79.51% | \$27,008  |
| <b>Recipient Quality Management</b>      | \$63,853    | \$4,559  | \$55,251    | Red | 86.53% | \$8,602   |
| <b>Grand- Total Direct Services, FAA</b> | \$1,464,082 | \$98,576 | \$1,360,107 | Red | 92.90% | \$103,976 |

**Missing Invoices**  
 Recipient Expenses

|           |        | February    |               |
|-----------|--------|-------------|---------------|
| Under 5%  | Red    | 0-94%       | Underspending |
| Within 5% | Green  | 95-105%     | On Target     |
| Over 5%   | Yellow | 106% - Over | Overspending  |

| TGA Direct Service Expenditures by \$ Source | Approved Budget | Current Month | Accumulative Expenditures | % Shade | % Used | Remaining Balance |
|--|-----------------|---------------|---------------------------|---------|--------|-------------------|
| <b>Part B</b>                                | \$1,224,819     | \$94,959      | \$1,175,771               | Green   | 96.00% | \$49,048          |
| <b>Part B MAI Outreach</b>                   | \$43,569        | \$3,617       | \$24,252                  | Red     | 55.66% | \$19,317          |

HIV Health Services Planning Council  
**AFFECTED COMMUNITIES COMMITTEE**  
~~(916) 876-5548~~ — [hiv-hspsc@saccounty.net](mailto:hiv-hspsc@saccounty.net)  
[www.sacramento-tga.com](http://www.sacramento-tga.com)

## COMMITTEE OVERVIEW

### **Mission Statement:**

The Affected Communities Committee addresses issues facing the HIV/AIDS community and advises the Planning Council on the affairs of the community. The mission of the Committee is to recruit, involve, and empower people living with and those affected by HIV/AIDS in the strategic planning and advocacy of HIV/AIDS care and services. The Committee encourages an environment of trust and safety, and will achieve its goals with the support of Planning Council support staff.

### **Committee Responsibilities:**

The Affected Communities Committee (ACC) is the primary route through which the HIV Health Services Planning Council (Council) and its committee(s) access input from individuals living with or affected by HIV/AIDS. To fulfill this role, the ACC will:

- 1) Be available to review and provide feedback on policy, program, and funding decisions made by the Council to ensure that decisions are acceptable by service consumers and those otherwise affected by HIV/AIDS.
- 2) Identify and present emerging issues/challenges/barriers relating to service delivery and access to appropriate Council committees.
- 3) Identify and present challenges and barriers as they relate to involving individuals living with or affected by HIV/AIDS in the planning processes to appropriate Council committees.
- 4) Educate the HIV/AIDS community and populations most impacted by HIV/AIDS on the purpose and functions of the Council.
- 5) Recruit people living with HIV/AIDS (PLWH/A) and individuals affected by HIV/AIDS to participate on the Council and its committees.
- 6) Organize and host consumer forums on topics of interest to people living with or affected by HIV/AIDS.
- 7) Coordinate HIV Health Services Planning Council Meeting Training Schedule

### **Desired Experience of Members:**

To fulfill its responsibilities, it is necessary for ACC to have a diverse membership that understands and can actively voice the views of a variety of affected communities. Members should be able to use personal networks to disseminate information or mobilize individuals for action. To ensure thorough

representation, the ACC seeks people living with or affected by HIV/AIDS from a number of communities, including but not limited to, race, ethnicity, gender, gender identity, sexual orientation, age, disability, social class, religion, national origin, ancestry, veteran status, and/or political beliefs. ACC values and practices respect for the talents, beliefs, backgrounds, and ways of living of its members.

In gathering the above representation, the ACC seeks participation from residents of Sacramento County, El Dorado County, and Placer County.

**Expectations of Members:**

ACC relies on an active membership to generate ideas and develop strategies for moving ideas forward. For this reason, members must be aware of emerging and existing health and service issues that are impacting people living with HIV/AIDS in the region. To advance the goals of ACC, it is expected that members will:

- 1) Regularly attend and actively participate in ACC meetings;
- 2) Review meeting materials prior to arriving at the meeting;
- 3) Gather information from consumers on how services could be improved.
- 4) Express ideas on how ACC and the Council might be able to better serve the needs of people living with HIV/AIDS.
- 5) Report the activities and decisions of the ACC and the Council to your community affiliations;
- 6) Play an active role in identifying and attracting diverse individuals interested in participating in the service planning processes.

**Meetings:**

The Affected Communities Committee typically meets on the first Monday of the month from 3:00 – 4:00 p.m. Contact Council Staff for current schedule and location.

**Contact Information:**

Staff support is provided by [Angelina Olweny who can be contacted at \(916\) 325-1630, Angelina.olweny@valleyvision.org](mailto:Angelina.Olweny@valleyvision.org) ~~Paula Gammell who can be contacted at (916) 876-5548, [gammellp@saccounty.net](mailto:gammellp@saccounty.net)~~, or [www.sacramento-tga.com](http://www.sacramento-tga.com).



Richard Benavidez, Chair

Approved: ~~3/23/22~~



**HIV Health Services Planning Council  
Affected Communities Committee  
FY 2023-2024 WORK PLAN**

| <b>DATE/<br/>TIMELINE</b> | <b>ACTIVITY</b>  | <b>MATERIALS</b>  |
|---------------------------|--|---|
| March 2023                | <ul style="list-style-type: none"> <li>• Women &amp; Girls AIDS Awareness Day (3/10)</li> <li>• National Native HIV/AIDS Awareness Day (3/20)</li> <li>• Review Outreach Calendar</li> <li>• Review Training Calendar</li> <li>• ACC Community Forum</li> </ul>              | <ul style="list-style-type: none"> <li>• Outreach Calendar</li> <li>• Training Calendar</li> </ul>  |
| April 2023                | <ul style="list-style-type: none"> <li>• Review/Approve Spring Positive Advocate</li> </ul>  | <ul style="list-style-type: none"> <li>• Spring Positive Advocate</li> </ul>  |
| May 2023                  | <ul style="list-style-type: none"> <li>• Host Community Presentation</li> </ul>  | <ul style="list-style-type: none"> <li>• Outreach Flier</li> </ul>  |
| June 2023                 | <ul style="list-style-type: none"> <li>• Prepare for Summer Health Fairs</li> <li>• Caribbean American HIV/AIDS Awareness Day (6/8)</li> <li>• National HIV Testing Day (6/27)</li> <li>• Approve Summer Positive Advocate</li> <li>• Host Community Presentation</li> </ul> | <ul style="list-style-type: none"> <li>• Calendar of Outreach Events</li> <li>• Summer Positive Advocate</li> <li>• Outreach Flier</li> </ul> |
| July 2023                 | <ul style="list-style-type: none"> <li>• Host Community Presentation</li> </ul>  | <ul style="list-style-type: none"> <li>• Outreach Flier</li> </ul>  |
| August 2023               | <ul style="list-style-type: none"> <li>• Review Outreach Calendar</li> <li>• Review Training Calendar</li> </ul>   | <ul style="list-style-type: none"> <li>• Outreach Calendar</li> <li>• Training Calendar</li> </ul>  |
| September 2023            | <ul style="list-style-type: none"> <li>• Host Community Presentation</li> </ul>  | <ul style="list-style-type: none"> <li>• Outreach Flier</li> </ul>  |
| October 2023              | <ul style="list-style-type: none"> <li>• Approve Fall Positive Advocate</li> <li>• Report on Effectiveness of Outreach Efforts</li> <li>• National Latinx HIV/AIDS Awareness Day (10/15)</li> </ul>  | <ul style="list-style-type: none"> <li>• Fall Positive Advocate</li> </ul>  |
| November 2023             | <ul style="list-style-type: none"> <li>• Host Community Presentation</li> </ul>  | <ul style="list-style-type: none"> <li>• Outreach Flier</li> </ul>  |
| December 2023             | <ul style="list-style-type: none"> <li>• World AIDS Day (12/1)</li> <li>• Approve Winter Positive Advocate</li> </ul>  | <ul style="list-style-type: none"> <li>• Winter Positive Advocate</li> <li>• Outreach Calendar</li> </ul>                                     |



|               |   |  |
|---------------|---|--|
|               | <ul style="list-style-type: none"> <li>• Review Outreach Calendar</li> <li>• Review Training Calendar</li> </ul>  | <ul style="list-style-type: none"> <li>• Training Calendar</li> </ul>  |
| February 2024 | <ul style="list-style-type: none"> <li>• Draft/Approve Work Plan</li> <li>• African American AIDS Awareness Day (2/7)</li> <li>• Committee Self-Assessment</li> <li>• Review Outreach Calendar</li> <li>• Review HHSPC Training Calendar</li> </ul> | <ul style="list-style-type: none"> <li>• Draft Work Plan</li> <li>• Committee Assessment Tool</li> <li>• Outreach Calendar</li> <li>• Training Calendar</li> </ul> |

**STRATEGIES from the CA Integrated HIV Surveillance, Prevention and Care Plan**

The following Strategies from the California Integrated HIV Surveillance, Prevention and Care Plan, known as, Laying a Foundation for Getting to Zero apply to the ongoing work conducted by the Affected Communities Committee in the Sacramento Transitional Grant Area:

Strategy L: Increase General HIV Education and Awareness and Reduce Stigma Around HIV, Sexual Orientation, and Gender Identity.

- Activity L2: Work with Service Providers to Develop Clear and Consistent Messaging around HIV Statewide
- Activity L3: Continue Widespread Condom Promotion and Distribution

Strategy N: Enhance Collaborations and Community Involvement.

- Activity N1: Improve Utilization of Community Engagement Strategies at Both State and Local Levels, Especially Involving PLWH

**County Executive**

Ann Edwards

**Deputy County Executive**

Chevon Kothari  
Social Services



**Department of Health Services**

Timothy W. Lutz, Director

**Divisions**

Behavioral Health Services  
Primary Health  
Public Health  
Departmental Administration

**County of Sacramento**

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March 30, 2023

MEMO TO: HIV Health Services Planning Council

FROM: Chelle Gossett  
Recipient, Ryan White CARE Program Coordinator

RE: FY 2023 Allocation Areas to Review

The FY23 Allocations were determined in September 2022, at the same time the FY23 RFP had been in process. While determining the initial allocations for FY23 with the partial award from HRSA, the recipient identified some areas where the Planning Council (PC) might like to review. These areas are identified below. The areas are for Part A services in the Sacramento TGA and does not pertain to/include Part B Yolo County.

1. Health Education/Risk Reduction-There was \$4,768 allocated by the PC to Health Education/Risk Reduction. However, no one applied for the service during the RFP. There is no service provider for this service. If the Council wishes to proceed with funding this category, the Recipient will need to release a Letter of Intent (LOI) process for this service.
2. Non-Medical Case Management-The PC allocated \$54,582 to Non-Medical Case Management. This was flat funding from the prior fiscal year. In the prior fiscal year, there were two providers for Non-Medical Case Management. Upon conclusion of the RFP process, there are now three providers. The Planning Council may want to review the allocation and decide if the flat funding is still where the committee wants to stay.
3. Food Bank/Home Delivered Meals- This is the first year the PC has allocated Part A funds to this service category in several years. As a reminder, HRSA's PCN 16-02 and the Sacramento TGA's Service Standard SSC12, the Food Bank/Home Delivered Meals service category includes the provision of essential non-food items that are limited to personal hygiene products and household cleaning supplies.

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**Division of Public Health**

Olivia Kasirye, MD, MS  
Public Health Officer



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# HIV Health Services Planning Council

9616 Micron Ave, Suite 930  
Sacramento, Ca 95827  
(916) 875-5881  
Fax (916) 875-5888



April 5, 2023

TO: Sacramento TGA HIV Health Services Planning Council  
Executive Committee

FROM: Priorities and Allocations Committee Chair

RE: FY23 Allocations

Dear Council:

The recipient submitted a memo (attached) to the Priorities and Allocations Committee (PAC) on April 5, 2023, identifying three service categories that may need allocation re-considerations based on the recent Request for Proposals (RFP) results.

In consideration of the Recipient's Memo and further discussion, PAC voted to de-fund the Health Education/Risk Reduction Service Category as there was no applicant during the RFP process, which just concluded several months ago. Given the RFP process just concluded, it was determined that there should not be a Letter of Intent issued, as any agency that had wanted to apply, would have already done so.

As Health Education/Risk Reduction was de-funded, those funds were voted to be applied to Non-Medical Case Management. As a result of the RFP, there are three agencies that passed the RFP process to be award funds; compared to two in prior year(s).

No action was taken in regard to Food Bank/Home Delivered Meals. It was considered informational in nature.

Respectfully,

A handwritten signature in black ink, appearing to read 'Jake Bradley-Rowe', written over a horizontal line.

Jake Bradley-Rowe

HIV Health Services Planning Council  
**PRIORITIES AND ALLOCATIONS COMMITTEE**  
(916) 876-5548 -- hiv-hspsc@sacounty.net

COMMITTEE OVERVIEW

**Statement of Purpose:**

The purpose of the Priorities and Allocations Committee (PAC) is to support the mission of the HIV Health Services Planning Council. To this end, PAC shall review and act on data and information to establish proposals for the annual funding priorities and service allocations for Ryan White CARE Act funds.

**Statement of Values:**

The PAC is dedicated to considering the following values in recommending service priorities and funding allocations:

- Compassion – Assisting those who cannot support themselves
- Equity – Relatively equal portions with attention paid to severe need
- Fairness – Similar cases treated in a similar fashion
- Utilitarianism – Greatest good for the greatest number
- Nuanced Inclusiveness – Since there are real differences among participants regarding both need and ability, a process for assessing these differences will be developed, thereby allowing for differential distribution.

**Committee Responsibilities:**

PAC is the body through which the HIV Health Services Planning Council receives recommendations on how best to utilize Ryan White funds throughout the TGA. To provide sensible recommendations, PAC is charged with:

- 1) Reviewing quantitative and qualitative information on service needs, use, costs, outcomes; and availability (internal and external to Ryan White);
- 2) Determining which services are most needed by people living with HIV (regardless of funding source) and establishing service category priorities;
- 3) Projecting annual need for essential services;
- 4) Calculating reasonable allocation allotments for essential services;
- 5) Developing annual funding request;
- 6) Sets directives for service delivery in order to increase access by special populations or otherwise ensure fair distribution of resources.
- 7) Revising annual allocations based upon actual award/changes in actual service cost or utilization patterns.

**Desired Experience of Members:**

Because PAC must assess and consider a wide range of inputs, desired membership qualities are broad. Desired experience includes:

- Understanding of issues impacting people living with HIV;
  - Service consumers
  - Service providers

- Budgeting expertise, or a willingness to learn the process;
- Familiarity with the health and human service delivery community;
- Recipient staff.

**Expectations of Members:**

PAC provides critical recommendations to the Council regarding the use of Ryan White funds. It is imperative that members


- 1) Commit to regularly attend and actively participate in PAC meetings;
- 2) Thoroughly review meeting materials prior to arriving at the meeting;
- 3) Abide by approved policies and procedures when discussing priorities and allocations;
- 4) Provide recommendations on how reviewed material should play into the priority setting and allocation processes;
- 5) Consider all data prior to making decisions and provide unbiased input;
- 6) Offer prioritization and allocation proposals justified by reviewed data/information;
- 7) Identify additional data needs;
- 8) Identify methods for improving processes;
- 9) Suggest ideas on how services could best be delivered;
- 10) Continually identify individuals who may be interested in membership on PAC.

**Meetings:**

Unless otherwise indicated, the Priorities and Allocations Committee meets on the first Wednesday of the months of March, May, July, September, and January, from 9:00 a.m. – 11:00 a.m., second Monday of every month, from 10:00 a.m. – Noon, at the Sacramento County Health Center, 4600 Broadway, Conference Room 2020, Sacramento, CA 95817.

**Contact Information:**

Staff support is provided by Angelina Olweny who can be reached at (916) 325-1630 or [Angelina.olweny@valleyvision.org](mailto:Angelina.olweny@valleyvision.org) ~~Paula Gammell who can be reached at (916) 876-5548 or [gammellp@saccounty.net](mailto:gammellp@saccounty.net).~~

Signed:   
Richard Benavidez, Chair

Date: 05/25/22

**HIV Health Services Planning Council  
Priorities and Allocations Committee  
FY 2023-24 WORK PLAN**

| <b>MEETING DATE</b> | <b>ACTIVITY</b>  | <b>MATERIALS</b>   |
|---------------------|--|--|
| March 2023          | <ul style="list-style-type: none"> <li>• No meeting</li> </ul>   |  |
| April 2023          | <ul style="list-style-type: none"> <li>• Part A Grant Award Notice Update</li> <li>• FY23 Allocation Updates If Needed</li> <li>• Update PAC Overview</li> <li>• Update PAC Work Plan</li> <li>• FY23 Service Directives</li> <li>• FY23 General Directives</li> </ul>                           | <ul style="list-style-type: none"> <li>• Grant Award Notice</li> <li>• Allocation and Reduction Scenarios</li> <li>• PAC Overview</li> <li>• FY23 PAC Work Plan</li> <li>• FY23 Service Directives</li> <li>• FY23 General Directives</li> </ul>   |
| May 2023            | <ul style="list-style-type: none"> <li>• Part A Grant Award Notice Update</li> <li>• FY23 Allocation Updates If Needed</li> <li>• Begin Work on FY24-25 Grant Application and Reduction Scenarios</li> <li>• PAC Process Training</li> <li>• Begin Work on FY24-25 Service Priorities</li> </ul> | <ul style="list-style-type: none"> <li>• Grant Award Notice</li> <li>• Historical Prior-Year Utilization Documents</li> <li>• Historical Allocation Scenarios</li> <li>• Allocation and Reduction Scenarios</li> <li>• Service Priority Ranking Historical Data</li> <li>• Service Priorities Worksheet</li> </ul> |
| July 2023           | <ul style="list-style-type: none"> <li>• Continue/Finalize Work on FY23-24 Grant Application and Reduction Scenarios</li> <li>• Conduct PAC Training</li> </ul>  | <ul style="list-style-type: none"> <li>• Historical Prior-Year Utilization Documents</li> <li>• Historical Allocation Scenarios</li> <li>• Allocation and Reduction Scenarios Worksheet</li> </ul>   |
| September 2023      | <ul style="list-style-type: none"> <li>• FY23 Reallocation</li> <li>• FY24 Service Directives</li> <li>• FY24 General Directives</li> </ul>  | <ul style="list-style-type: none"> <li>• FY23 Fiscal Agent Reallocation Recommendations</li> <li>• FY24 Service Directives</li> <li>• FY24 General Directives</li> </ul>   |
| December 2023       | <ul style="list-style-type: none"> <li>• Second Re-allocation (if needed)</li> </ul>   | <ul style="list-style-type: none"> <li>• FY23 Fiscal Agent Reallocation Recommendations</li> </ul>   |

**STRATEGIES (from the CA Integrated HIV Surveillance, Prevention and Care Plan)**

The following Strategies from the California Integrated HIV Surveillance, Prevention and Care Plan, known as, Laying a Foundation for Getting to Zero apply to the ongoing work conducted by the Priorities and Allocations Committee in the Sacramento Transitional Grant Area:

Strategy D: Improve Linkage to Care

- Activity D3: Expand Use of Patient/ Client Navigation Programs

Strategy E: Improve Retention in Care

- Activity E3: Increase the Number of Californians Living with HIV Who are Enrolled in Health Insurance Coverage

Strategy O: Further Leverage Existing Resources to Better Meet the Needs of People at Risk for and Living with HIV in California

- Activity O1: Ensure the most Appropriate Distribution of Funds in Order to Best Meet the Needs of People at Risk for and Living with HIV in California

**HIV Health Services Planning Council**  
**General Directives Fiscal Year 202~~32~~-202~~43~~**  
**(Here after, known as Current Fiscal Year)**

**General Directive 1**

The service provider must have a process in place that documents that Ryan White is the payer of last resort, that no other resources are available, and that all appropriate referrals were made for eligible services.

**General Directive 2**

All Ryan White Care service categories will be provided in a manner that provides for 100% access and 0% disparity to all populations.

**General Directive 3**

With the exception of ambulatory care, behavioral/mental health, oral health, childcare and substance abuse/use services, clients cannot access services outside of their county of residence without referral and prior authorization through the Medical Case Management system.

**General Directive 4**

As the Priorities and Allocations committee develops alternate funding scenarios based on possible funding losses, the Recipient shall choose the nearest approved allocation scenario to fund provider contracts for the Current Fiscal Year.

The grant award will determine which scenario is to be used by the Recipient. The Recipient shall use the scenarios approved by PAC and the Council and the approved percent variances. In the Current Fiscal Year, it will be:

- If the grant award is within 5% higher or lower of the ***application requested amount***, the Recipient will pro-rate the increases/decreases pro-rated across all service categories.
- If the award is 1% to 5% less than the prior fiscal year ***actual award***, the Council approved prior fiscal year Flat Funding scenario shall be used and pro-rated across all service categories, with the exception of Pediatric Treatment Adherence which will remain at the prior fiscal year Allocation.
- If the award is 6% - 13% less than the prior fiscal year ***actual award***, the 10% Council approved reduction scenario shall be used and pro-rated across all service categories, with the exception of Pediatric Treatment Adherence, which will remain at the prior fiscal year Allocation.



- If the award is 14% or more less than the prior fiscal year **actual award**, the Recipient will consult the HIV Health Services Planning Council's Priorities and Allocation Committee to develop a final Current Fiscal Year Allocation plan.
- If the award is within 5% higher than the prior fiscal year **actual award**, the 5% increase scenario shall be used and pro-rated across all service categories.

**General Directive 5**

The Affordable Care Act (ACA) ensures that all legal U.S. residents are able to obtain affordable health care coverage, regardless of any pre-existing conditions. Legal California residents are able to get affordable private health care coverage from a variety of plans through Covered CA. There are Penalties if residents do not get coverage.

The service provider must have a process in place that documents that the client has been informed of the ACA requirements and that appropriate referrals were made for ACA enrollment.

**General Directive 6**

The Federal Ryan White HIV/AIDS Program defines eligibility for the program as an individual (1) with a medical diagnosis of HIV/AIDS and (2) who is low-income as defined by the State.

The California State Department of Public Health, under the Budget Act of 2019, shall apply the same financial eligibility requirements for its various HIV Care Program, which is formulated by using the Modified Adjusted Gross Income (MAGI) that does not exceed 500% of the Federal Poverty Level per year, based on family size and household income.

To maintain compliance with the State and Federal Government, the Sacramento TGA adopts the same financial eligibility requirements.

**General Directive 7**

All Ryan White funded providers shall make telehealth/tele-services available for medical case management, non-medical case management, outpatient ambulatory care, behavioral/mental health and/or other telehealth/tele-service appropriate services.

Adopted:



Richard Benavidez, Chair

Date: 05/25/22

## Sacramento TGA

### Service Category Directives, FY 202~~32~~-202~~43~~

#### **Medical Transportation Services Directive 1**

Medical Transportation funds shall be used for the reimbursement of volunteer drivers or for the purchase of ride share or public transportation fare (Light Rail or Bus pass).

Based on client acuity, transportation funds must be prioritized by means of transport so as to preserve the most cost effective means such as

- family, friends and other sources of transport for which the RW Agency does not incur any direct cost.
- volunteer services
- public transit (to include Para-Transit) or gas voucher
- ride share (such as Lyft or Uber)
- taxi service

#### **Medical Case Management Directive 1**

Medical Case Management is a fundamental approach to efficient and effective intervention whether provided as an office based or as a home or field deployed strategy.

#### **Medical Case Management Directive 2**

All agencies providing Ryan White-funded Medical Case Management services are either "Field Based" or "Office Based" to ensure that proper billing occurs. Any agency designated as "field-based" **must** offer clients the alternative of meeting case management staff at locations outside the agency's normal place of business office and convenient for the client.

#### **Housing Directive 1**

Ryan White Funds may be used for short-term or emergency housing defined as necessary to gain or maintain access to medical care and must be administered in accordance with U.S. Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau, Policy Clarification Notice 16-02, as well as, Sacramento TGA Service Standard 15 – Housing Assistance Services.

Rent Subsidy and Emergency Housing services will be administered through the TGA's case management system.

Clients may receive rent subsidy assistance services once each fiscal year unless additional assistance is authorized by the Recipient. Eligible Ryan White clients must meet the following criteria for eligibility for rent subsidy assistance:

1. Be in medical care and compliant with their case management plan.
2. Provide proof of pending eviction or 3-day notice of eviction.

3. Provide landlord name and tax identification information.

Emergency Housing may include motels, hotels, rooming houses, etc.

- a. Emergency housing payments may be utilized on an emergency or transitional basis for no more than 14 nights per year, at the most reasonable rate available in the community for emergency per-diem housing which meets acceptability standards, unless specific contractual agreements with funding sources provide extensions. Provision of assistance beyond this 14-night cap will require the TGA's Recipient approval.
- b. This assistance will be accompanied by a documented plan to obtain more permanent housing and such medical case management and advocacy as is needed to pursue the plan.

Adopted:



Richard Benavidez, Chair

Date: ~~05/25/22~~

HIV Health Services Planning Council  
**QUALITY ADVISORY COMMITTEE**  
~~(916) 876-5548~~ -- [hiv-hspsc@sacounty.net](mailto:hiv-hspsc@sacounty.net)

COMMITTEE OVERVIEW

**Mission Statement:**

The Quality Advisory Committee (QAC) will seek to ensure the quality, consistency, and cost effectiveness with which Ryan White funded services are delivered to consumers by developing and monitoring standards to be utilized by providers delivering Ryan White services.

**Committee Responsibilities:**

QAC is responsible for developing service recommendations that impact how providers deliver services to consumers on a daily basis. To accomplish its task, QAC:

- 1) Provides oversight of the Ryan White Quality Management program
- 2) Researches methods and practices by which services are delivered in Ryan White funded service categories;
- 3) Seeks input from service providers on realistic expectations on how services could be provided, with a focus on quality assurance and cost effectiveness;
- 4) Seeks input from consumers on what is expected or needed when accessing services;
- 5) Identifies standards by which services should be delivered;
- 6) Creates category-specific service standards;
- 7) Periodically reviews service standards for ongoing relevance;
- 8) Develops and reviews performance indicators to ensure that services are achieving desired quality outcomes.
- 9) One member of the Quality Advisory Committee will participate in the Ryan White CARE Program's Continuous Quality Improvement Program.

**Desired Experience of Members:**

QAC must be able to draw on a balance of experiences from both providers and consumers of services. Specific skills include:

- Provider experience (delivery of direct service);
  - Representation from a broad range of services, including medical, dental, psychosocial, and support services
- Consumer experience (accessing direct service);
- Program development and evaluation;
- Quality management;
- Recipient staff.

**Expectations of Members:**

QAC relies on its regular members to determine the fairness and consistency of service standards in its effort to develop functional service standards. Therefore, members are expected to:

- 1) Consistently attend and actively participate in QAC meetings;
- 2) Review meeting materials prior to arriving at the meeting;
- 3) Identify service categories, or areas of service delivery needing service standards;
- 4) Propose ideas and language for standards under consideration by the Committee;

- 5) Facilitate access to stakeholders of service standards;
- 6) Critique suggestions offered by other Committee members and non-Committee members;
- 7) Continually identify individuals who may be interested in membership on QAC.
- 8) As needed, identify individuals with expertise on developing specific service standards.

**Meetings:**

Unless otherwise indicated, the Quality Advisory Committee meets quarterly on the first Tuesday of the month, in March, June, September, and December ~~meets on the first Tuesday of each month~~ from 2:00 p.m. – 3:00 p.m. at the Sacramento County Health Center, 4600 Broadway, Conference Room 2020, Sacramento, CA 95823.

**Contact Information:**

Staff support is provided by Angelina Olweny who can be contacted at (916) 325-1630 or [Angelina.olweny@valleyvision.org](mailto:Angelina.olweny@valleyvision.org) ~~Paula Gammell who can be contacted at (916) 876-5548 or [gammellp@saccounty.net](mailto:gammellp@saccounty.net)~~.

Approved by the HIV Health Services Planning Council on:



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Richard Benavidez, Chair

Date: 6/22/22

HIV Health Services Planning Council  
 QUALITY ADVISORY COMMITTEE  
 FY 2023-2024 WORK PLAN

| MEETING DATE   | ACTIVITY   | MATERIALS   |
|----------------|--|---|
| March 2023     | <ul style="list-style-type: none"> <li>• Data Entry Update for Post Card Survey</li> <li>• Conduct Committee Self-Assessment</li> <li>• Approve 2023-2024 Work Plan</li> </ul>   | <ul style="list-style-type: none"> <li>• Committee Self-Assessment</li> </ul>   |
| June 2023      | <ul style="list-style-type: none"> <li>• Review 2022 Performance Outcomes from the Recipient</li> <li>• Continue updating Service Standards</li> <li>• FY22 Client Satisfaction Survey Results Report</li> <li>• FY22 Service Post Card Survey Results Report</li> <li>• Begin Updating Service Standards</li> </ul> | <ul style="list-style-type: none"> <li>• 2022 Performance Outcomes</li> <li>• Draft Service Standards</li> <li>• FY22 Client Satisfaction Survey Results Report</li> <li>• FY22 Service Post Card Survey Results Report</li> <li>• Draft Service Standards</li> </ul> |
| September 2023 | <ul style="list-style-type: none"> <li>• Quality Management Program Update from the Recipient</li> <li>• Continue Updating Service Standards</li> <li>• Determine FY23 Post Card Survey Sample Size</li> </ul>   | <ul style="list-style-type: none"> <li>• Draft Service Standards</li> <li>• Service Survey letter and Post Card Services Worksheet</li> </ul>   |
| December 2023  | <ul style="list-style-type: none"> <li>• Prepare FY 2024 Work Plan</li> <li>• Review &amp; Identify All Service Standards needing updates</li> <li>• Plan for Service Survey</li> <li>• Distribute FY23 Post Card Survey to Providers</li> </ul>   | <ul style="list-style-type: none"> <li>• Draft 2024 Work Plan</li> <li>• Service Standards Service Survey</li> </ul>  |

**STRATEGIES (from the California Integrated HIV Surveillance, Prevention, and Care Plan)**

The following Strategies from the California Integrated HIV Surveillance, Prevention, and Care Plan, known as, Laying a Foundation for Getting to Zero apply to the ongoing work conducted by the Quality Advisory Committee in the Sacramento Transitional Grant Area:

- Strategy E: Improve Retention in Care
- Activity E1: Expand Provider Education to Improve Capacity to Retain Clients
  - Activity E3: Increase the Number of California Living with HIV Who Are Enrolled in Health Insurance Coverage

- Activity E4: Improve Integrated of Basic Substance Abuse/Mental Health Interventions with HIV Care Settings

Strategy F: Improve Overall Quality of HIV-Related Care

- Activity F1: Improve Cultural Competency of Medical and Service Providers
- Activity F2: Expand the Use of Treatment Adherence Interventions
- Activity F3: explore Establishing Standards of Care for Services Provided through Ryan White HIV/AIDS Program Funding, and Take Other Actions to Ensure that High-Quality Care can be Measured and is Tracked
- Activity F4: Encourage Housing Evaluation as a Routine Part of Medical Assessment

Strategy I: Improve Case Management for PLWH with High Need

- Activity I1: Increase Case Management Services for PLWH with Demonstrated Need from Diagnosis through Viral Suppression
- Activity I2: Work with Transitional Case Management Programs for PLWH Leaving Correctional Facilities

Strategy K: Increase and Improve HIV Prevention and Support Services for People Who Use Drugs

- Activity K3: Implement Harm Reduction-based Models of HIV Prevention and Care Services that Integrate Other Health Services Critical to People Who Use Drugs
- Activity K4: Encourage Naloxone Programs throughout the State

Strategy N: Enhance Collaborations and Community Involvement

- Activity N5: Improve Partnerships Between Local Health Departments and Primary Care Providers

HIV Health Services Planning Council  
**NEEDS ASSESSMENT COMMITTEE**  
~~(916) 876-5548~~ — ~~hiv-hspsc@saccounty.net~~

COMMITTEE OVERVIEW

**Statement of Purpose:**

The purpose of the Needs Assessment Committee (NAC) is to support the mission of the HIV Health Services Planning Council. The goal of the NAC is to define and quantify specific needs of the HIV community in the Sacramento Transitional Grant Area (TGA). NAC will provide an updated yearly report on area needs for use by the Planning Council and the Priorities and Allocation Committee in the annual priority setting and allocation processes.

**Committee Responsibilities:**

NAC is the primary entity through which the Council receives documentation of service needs of people living with HIV in the TGA. To provide this information, NAC is charged with:

- 1) Developing and implementing methods by which a comprehensive understanding of the service needs of PLWHA can be acquired at least once every three years;
- 2) Determining capabilities and capacities of service providers at least once every three years;
- 3) Annually updating needs assessment findings with studies of special populations/populations with special needs;
- 4) Analyzing and organizing findings for reporting to PAC, Council, and other appropriate entities.

**Desired Experience of Members:**

NAC membership requires a host of talents, skills, and experiences.

Particular needs include:

- Epidemiologists
- Researchers
- Statisticians
- Database designers
- People living with HIV (including Ryan White service consumers)
- HIV service providers (both within and external to the Ryan White service community)
  - Particularly medical, medical case management, outreach and testing providers
- Recipient staff



**Expectations of Members:**

NAC relies on its members to identify areas in need of investigation and develop strategies for completing studies. To be effective, members are expected to:

- 1) Regularly attend and actively participate in NAC meetings;
- 2) Review meeting materials prior to arriving at the meeting;
- 3) Identify areas that need to be further examined in order for the TGA to gain a better understanding of the service needs and capabilities in the region;
- 4) Propose strategies for conducting needs and capacity assessment studies;
- 5) Provide feedback on tools and methodology used for implementation of studies;
- 6) Facilitate access to communities being studied; and,
- 7) Continually identify individuals who may be interested in membership on NAC.

**Meetings:**

Unless otherwise indicated, the Needs Assessment Committee meets quarterly on the first Tuesday of the month, in March, June, September and December, from 3:00 p.m. – 4:30 p.m. at the Sacramento County Health Center, 4600 Broadway, Conference Room 2020, Sacramento, CA 95823.

**Contact Information:**

Staff support is provided by [Angelina Olweny who can be contacted at \(916\) 325-1630 or Angelina.olweny@valleyvision.org](mailto:Angelina.Olweny@valleyvision.org) ~~Paula Gammell who can be contacted at (916) 876-5548 or gammellp@saccounty.net.~~

Approved by the HIV Health Services Planning Council on:



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Richard Benavidez, Chair

Dated: 06/22/22

## HIV Health Services Planning Council NEEDS ASSESSMENT COMMITTEE 2023-24 WORK PLAN

Note: Committee meets quarterly

| MEETING DATE   | ACTIVITY   | MATERIALS   |
|----------------|--|---|
| March 2023     | <ul style="list-style-type: none"> <li>• Review/Update Survey Tool</li> <li>• Needs Assessment Survey Discussion/Progress</li> <li>• Prepare work plan for 2023</li> </ul> | <ul style="list-style-type: none"> <li>• Survey Update</li> <li>• FY22 Work Plan</li> <li>• FY23 Draft Work Plan</li> </ul> |
| June 2023      | <ul style="list-style-type: none"> <li>• Review/Update/Finalize Survey Tool if applicable</li> <li>• Needs Assessment Survey Discussion/Progress</li> </ul>                | <ul style="list-style-type: none"> <li>• Needs Assessment Tool if applicable</li> </ul>                                     |
| September 2023 | <ul style="list-style-type: none"> <li>• Review/Update/Finalize Survey Tool if applicable</li> <li>• Needs Assessment Survey Discussion/Progress</li> </ul>                | <ul style="list-style-type: none"> <li>• Needs Assessment Tool if applicable</li> </ul>                                     |
| December 2023  | <ul style="list-style-type: none"> <li>• Finalize strategies for Targeted or full NA</li> <li>• Conduct Committee Self-Assessment</li> </ul>                               | <ul style="list-style-type: none"> <li>• Committee Self-Assessment Tool</li> </ul>  |

### STRATEGIES (from the California Integrated HIV Surveillance, Prevention and Care Plan)

The following Strategies from the California Integrated HIV Surveillance, Prevention and Care Plan, known as, Laying a Foundation for Getting to Zero apply to the ongoing work conducted by the Needs Assessment Committee in the Sacramento Transitional Grant Area:

Strategy D: Improve Linkage to Care

- Activity D4: Identify Barriers to Linkage to Care and Develop Strategies to Address Them

**Sacramento County  
Department of Health Services  
HIV Health Services Planning Council**  
[www.sacramento-tga.com](http://www.sacramento-tga.com)

**Meeting Agenda**

April 26, 2023, 10:00 AM – 12:00 PM

**Meeting Location –**

**4600 Broadway, Sacramento, CA 95820  
2<sup>nd</sup> Floor Conference/Community Room 2020**

**Facilitator:** Richard Benavidez, Council Chair

**Scribe:** Danielle Caravella, County Staff

**Meeting Invitees:**

- HIV Health Services Planning Council Members
- Open to the Public

Public Comment: This provides opportunities for the public to address the Council as a whole in order to listen to opinions regarding matters within the jurisdiction of the Council during Regular meetings and regarding items on the Agenda at all other meetings. Public Comment time limit is three (3) minutes.

**\*Action Items**

| <b>Topic</b>                                     | <b>Presenter</b> | <b>Start Time and Length</b> |
|--|------------------|------------------------------|
| Welcome and Introductions                        | Benavidez        | 10:00 am                     |
| Announcements                                    | All              | As Needed                    |
| Public Comments-Agenda Items-3 Minute Time Limit | All              |                              |
| April 2023 Agenda*                               | Benavidez        |                              |
| Minutes of March 2023*                           | Benavidez        |                              |
| State Office of AIDS April 2023 Update           | Pulupa           |                              |
| Mechanics of the Planning Council                | Gammell          |                              |

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|  |  |              |          |
|--|--|--------------|----------|
| CPG/HIV/STI Prevention Updates   | All  | As<br>Needed |          |
| Recipient Report: <ul style="list-style-type: none"> <li>➤ FY22 Feb. Part A Monthly Fiscal Report*</li> <li>➤ FY22 Feb. Part B Monthly Fiscal Report</li> <li>➤ SOA Ending the HIV Epidemic Update</li> <li>➤ HRSA Part A Ending the Epidemic Update</li> </ul>  | Gammell  |              |          |
| Committee/Work Group Updates <ul style="list-style-type: none"> <li>➤ Administrative Assessment Committee             <ul style="list-style-type: none"> <li>➤ FY22 AdAC Year-End Review 6/15/23</li> </ul> </li> <li>➤ Affected Communities Committee             <ul style="list-style-type: none"> <li>➤ ACC Overview*</li> <li>➤ FY23 ACC Workplan</li> <li>➤ Reflectiveness</li> </ul> </li> <li>➤ Priorities and Allocations             <ul style="list-style-type: none"> <li>➤ FY23 Re-allocations*</li> <li>➤ PAC Overview*</li> <li>➤ FY23 PAC Workplan</li> <li>➤ FY23 General Directives*</li> <li>➤ FY23 Service Directives*</li> </ul> </li> <li>➤ Executive Committee</li> <li>➤ Quality Advisory Committee             <ul style="list-style-type: none"> <li>➤ QAC Overview*</li> <li>➤ FY23 QAC Workplan</li> </ul> </li> <li>➤ Needs Assessment Committee             <ul style="list-style-type: none"> <li>➤ NAC Overview*</li> <li>➤ FY23 NAC Workplan</li> </ul> </li> <li>➤ Governance</li> </ul> | Willett<br><br>Zach B.<br><br><br><br>Bradley-Rowe<br><br><br><br><br><br>Benavidez<br><br>Kendricks-Clark<br><br><br>Miranda<br><br>Ungeheuer |              |          |
| Self-Assessment Findings   | Caravella  |              |          |
| Binder Updates   | Caravella  |              |          |
| Public Comments-Non-Agenda Items   | All  |              |          |
| Technical Assistance   | Benavidez  |              |          |
| Adjournment  | Benavidez  |              | 12:00 pm |

**Sacramento County**  
**Department of Health Services**  
**HIV Health Services Planning Council**  
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**Attachments:**

- Minutes of March 2023\*
- April 2023 OA Voice Update
- FY22 February Part A Monthly Fiscal Report\*
- FY22 February Part B Monthly Fiscal Report
- ACC Overview\*
- FY23 ACC Workplan
- FY23 Re-Allocations
- PAC Memo\*
- PAC Overview\*
- FY23 PAC Workplan
- FY23 General Directives\*
- FY23 Service Directives\*
- QAC Overview\*
- FY23 QAC Workplan
- NAC Overview\*
- FY23 NAC Workplan
- Self-Assessment Findings

**NEXT MEETING: May 24, 2023**