

Sacramento County Department of Health Services
HIV Health Services Planning Council
Priorities and Allocations Committee
www.sacramento-tga.com

Meeting Agenda*

June 7, 2023, 9:00 AM – 11:00 AM

Meeting Location:

4600 Broadway, Sacramento, CA 95820
2nd Floor Conference/Community Room 2020

Facilitator: Jake Bradley-Rowe, Committee Chair

Scribe: Angelina Olweny – Council Staff

Meeting Invitees:

- Priorities and Allocations Committee Members
- Open to the Public

Topic	Presenter	Start Time	Length
Welcome and Introductions	Bradley-Rowe	9:00 AM	As Needed
Announcements	All	As Needed	
Public Comments –Agenda Items			
June Agenda Review*	Bradley-Rowe		
May 2023 Minutes Review*	Bradley-Rowe		
Conflict of Interest	Bradley-Rowe		
FY24 Service Priorities*	Bradley-Rowe		
PAC Overview*	Bradley-Rowe		
Technical Assistance	Bradley-Rowe		
Public Comment – Non Agenda Items	Bradley-Rowe		
Adjourn	Bradley-Rowe		

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*Action Items

Attachments:

- Minutes of May, 2023*
- Conflict of Interest Breakdown
- FY24 Service Priorities*
- PAC Overview*
- PAC Reference Manual Updated 5.22.23
- FY20-22 Cost Per Client Per Service
- FY20-22 Utilization by County

NEXT MEETING: September 6, 2023

January 3, 2024

HIV HEALTH SERVICES PLANNING COUNCIL – Priorities and Allocation Committee (PAC)

Meeting Minutes

May 3, 2023, 9:00 a.m. to 11:00 a.m.

Meeting Location: 4600 Broadway, Sacramento, CA 95820, Community Room 2020

Facilitator: Jake Bradley-Rowe, Chair

Scribe: Danielle Caravella, Council Staff

Committee Member Attendees:

Dennis Poupart, Jake Bradley-Rowe, Josh Kooman, Liane Bruckstein, Melissa Willett, and Zach B.

Members Excused: Chelle Gossett, Ronnie Miranda, Tami Emslie, and Richard Benavidez

Members Absent: Keshia Lynch

Guests: Angelina Olweny

Topic	Minutes
Welcome, Introductions and Announcements	<p>The meeting began at 9:06 a.m.</p> <p>Sunburst Projects will be hosting its annual golf tournament on May 13th, for more information please visit https://sunburstprojects.org/. The last day to register will be May 8th.</p> <p>NorCal AIDS Cycle will take place May 20-21 departing from Oak Park Community Center. There will be a friends and family night on May 20th from 3-9 pm for \$45 and dinner will be served. The closing ceremony will be held in Old Sacramento. Sierra Foothills AIDS Foundation will be hosting a fundraiser on 5/5 at Bolt Bar to raise money for NorCal AIDS Cycle. There will also be a poster party the next day to prepare for the race.</p> <p>Harm Reduction Services is participating in the Big Day of Giving and will be using its funds to purchase tents for unhoused individuals.</p> <p>Paula asked everyone to say their names when they are making motions to help Angelina the new staff person, as she learns who everyone is.</p>
Public Comments-Agenda Items	N/A

Agenda and Minutes*

The Agenda was presented for review and approval. Dennis Poupart motioned to approve the Agenda as presented with a second by Zach B. An edit was made to remove the FY22 True-Up as an action item, as it did not need to be acted on by the committee. Dennis Poupart amended his motion to accept the change and Zach B. seconded the amended motion. The motion passed with a majority.

Approve: Poupart, Bradley-Rowe, Kooman, Bruckstein, Willett, and Zach B.

Oppose: None

Abstain: None

A copy of the April 2023 Minutes was presented for review and approval with a comment to fix an error in Melissa Willetts's name in the conflict of interest section. Dennis Poupart motioned to approve the Minutes as discussed with a second by Liane Bruckstein. The motion passed with a majority.

Approve: Poupart, Bradley-Rowe, Kooman, Bruckstein, Willett, and Zach B.

Oppose: N/A

Abstain: N/A

Topic	Minutes
Conflict of Interest	Conflicts of interest were not necessary for this meeting, as no action was taken. Members were advised to refer to the minutes for a list of the conflicts of interest.
PAC Training	<p>Paula Gammell gave a presentation on the Priority Setting and Resource Allocation Process Overview. By the end of the training participants should be familiar with:</p> <ul style="list-style-type: none"> • Priority Setting and Resource Allocation Processes • Priority Setting • Fundable Core Services • Fundable Support Services • Resource Allocation • Ensuring Appropriate Recommendations
FY22 True Up	Paula Gammell discussed the purpose of the year-end True-Up and why it has been done historically. Because of the way the contracts are written funds are needed to be trued up at the end of the fiscal year to best match the amounts in the contracts. Moving forward, steps are being taken to eliminate some of this tedious work. The differences between Part A & B funding and their requirements were discussed.
July Meeting Discussion*	Danielle Caravella discussed that the next PAC meeting falls on July 5 th the day after a holiday. It was discussed that meetings were previously scheduled to meet every month, but canceled when there was no business to conduct. To reduce the public perception that meetings were often canceled, it was decided to move the PAC schedule to when historically there was business to conduct. The meeting day was also changed at this time, to allow more time for documents to go to Exec after PAC meets. By doing this, the new schedule for July will most likely cause issues, due to the holiday. A recommendation was made to instead hold the meetings in June instead of July. Dennis Poupart made a motion to change the next meeting from July to June and Melissa Willett seconded the motion. There was discussion that this will continue to be an issue each year.

	<p>Dennis Poupart amended his motion to change the overall PAC meeting schedule to remove July and instead meet in June. Melissa Willett seconded the amended motion. The motion passed with a majority.</p> <p>Approve: Poupart, Bradley-Rowe, Bruckstein, Willett, and Zach B.</p> <p>Oppose: N/A</p> <p>Abstain: Kooman</p>
Technical Assistance	If in need of technical assistance, members can reach out to the Council Chair, Richard Benavidez, or Council Staff for assistance.
Public Comment –Non-Agenda Items	Members suggested it would be helpful to include the next couple of meetings on the agenda instead of just the next meeting.
Adjournment	10:37 a.m. Next Meeting will be on June 7, 2023

Service Priority Historical Data for FY10 - FY22 with Planning for FY23

SERVICE CATEGORY	Core	Support	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
Ambulatory/Outpatient Medical Care	X		1	1	1	1	1	1	1	1	1	
AIDS Pharmaceutical Assistance	X										2	
Health Insurance Premium Payments	X		3	3	3	3	3	3	3	3	3	
Oral Health Care	X		4	4	4	4	4	4	4	4	4	
Medical Case Management Services (including Pediatric Treatment Adherence Counseling)	X		6	6	6	5	5	5	5	5	5	
Case Management (Non-Medical)		X	7	7	7	6	6	6	6	6	6	
Food Bank/Home Delivered Meals		X				14	14	14	14	14	7	
Mental Health Services	X		5	5	5	7	7	7	7	7	8	
Psycho-Social Support		X					Part B				9	
Medical Transportation Services		X	8	8	8	8	8	8	8	8	10	
Substance Abuse Services - Outpatient	X		9	9	9	9	9	9	9	9	11	
Substance Abuse Services – Residential		X	17	17	17	10	10	10	10	10	12	
Housing Assistance		X	Part of DEFA		10	11	11	11	11	11	13	
Child Care Services		X	11	11	11	12	12	12	12	12	14	
Emergency Financial Assistance		X	12	12	12	13	13	13	13	13	15	
Medical Nutritional Therapy	X		13	13	13	15	15	15	15	15	16	
Health Education Risk Reduction		X	14	14	14	16	16	16	16	16	17	
Outreach Services		X	15	15	16	18	18	18	18	18	18	
Outreach MAI Services		X	16	16	15	17	17	17	17	17	19	
Treatment Adherence - Pediatric	X		10	10	Now Part of MCM							

HIV Health Services Planning Council
PRIORITIES AND ALLOCATIONS COMMITTEE

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, ~~June~~ ~~July~~, September, and January, from 9:00 a.m. – 11:00 a.m., 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

Signed: 
Richard Benavidez, Chair

Date: [04/26/2023](#)

Child Care

NOTES: *Outcome Data: 1. Overall 67.5% of the client stated the question was not applicable. Of the 25 respondents answering yes or no, 32% (8 clients) stated child care was made available to them.

Allocation and Utilization Data Child Care

Year	2020	2021	2022	3 yr % Change
Allocation	\$25,209	\$27,122	\$30,931	0.23%
\$ Spent	\$25,200	\$27,108	\$20,000	-0.21%
\$ Difference	\$9	\$14	\$10,931	
Total Clients	17	12	9	-0.47%
Units of Service	22,909	24,644	18,433	-0.20%
Cost per Encounter	\$47.46	\$51.05	\$43.76	-0.08%
Cost per Client	\$1,482.33	\$2,259.01	\$2,222.22	0.50%

Sacramento

Child Care Clients

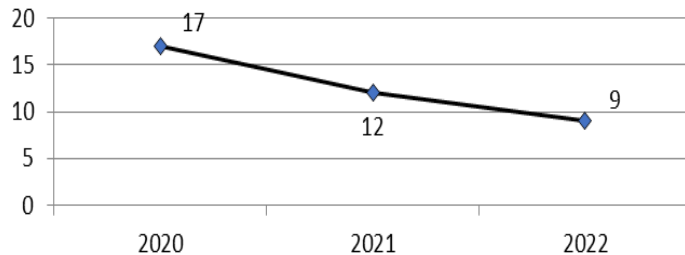
Demographic Data	2021		2022	
	n	%	n	%
Black	7	58.3%	5	55.6%
White	2	16.7%	4	44.4%
American Indian/ Alaskan Native	0	0.0%	0	0.0%
Native Hawaiian/ Pacific Islander	0	0.0%	0	0.0%
Asian	0	0.0%	0	0.0%
Latino(a)	3	25.0%	2	22.2%
Male	1	8.3%	2	22.2%
Female	11	91.7%	7	77.8%
Transgender	0	0.0%	0	0.0%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Child Care

0	-	Linked to Care (w/in 30 days)
9	100%	In Medical Care
3	33.3%	Retained In Care
9	100%	Virally Suppressed
9	100%	On Drug Therapy
9	100%	Stably/Permanently Housed
9	100%	Total Unduplicated Clients

Child Care Total Clients



FY22 Child Care Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Child care providers will comply with child care service standards*	100%	100%
Client with children under age 15, living in the home, will be made award of child care services** See Note 1 above	75%	32%
Clients surveyed, who requested child care services for medical or support service appointments, will report that referrals or financial assistance was made available	100%	Only one response which stated Not Applicable.

Directives: General Directives 1, 2, 3, and 5

**Emergency Financial Assistance (EFA) –
Other Critical Need**

**Allocation and Utilization Data
Other Critical Need**

Year	2020	2021	2022	3 yr % Change
Allocation	\$72,199	\$82,111	\$66,449	-0.08%
\$ Spent	\$81,664	\$71,866	\$85,063	0.04%
\$ Difference	(\$9,465)	\$10,245	-\$18,614	
Total Clients	273	141	147	-0.46%
Units of Service	74,731	65,343	77,606	0.04%
Cost per Encounter	\$75.06	\$66.05	\$105.41	0.40%
Cost per Client	\$299.13	\$509.69	\$578.66	0.93%

Sacramento TGA and Yolo County

NOTES:

EFA Other Critical Need Clients

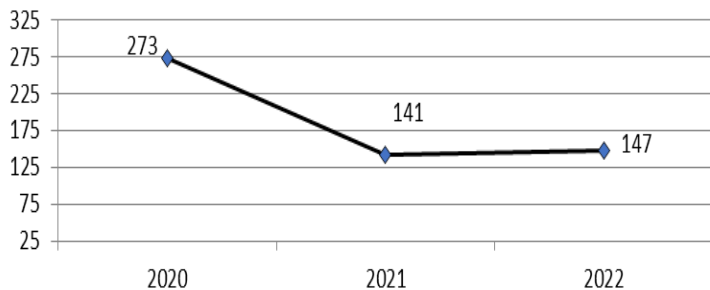
Demographic Data	2021		2022	
	n	%	n	%
Black	23	16.3%	28	19.0%
White	86	61.0%	111	75.5%
American Indian/ Alaskan Native	1	0.7%	1	0.7%
Native Hawaiian/ Pacific Islander	2	1.4%	1	0.7%
Asian	3	2.1%	6	4.1%
Latino(a)	26	18.4%	24	16.3%
Male	106	75.2%	101	68.7%
Female	31	22.0%	43	29.3%
Transgender	4	2.8%	3	2.0%

Wait Lists 2022: None reported

**FY22 NHAS Performance Indicators
Other Critical Need**

4	80.00%	Linked to Care (w/in 30 days)
136	92.52%	In Medical Care
48	32.65%	Retained In Care
121	82.31%	Virally Suppressed
146	99.32%	On Drug Therapy
130	88.44%	Stably/Permanently Housed
147	100.00%	Total Unduplicated Clients

**EFA - Other Critical Need
Total Clients**



**FY22 Emergency Financial Assistance
Outcome Data**

Performance Indicator	Outcome Goal	Actual Outcome
Providers will comply with applicable Emergency Financial Assistance service standards	100%	100%

Directives: General Directives 1, 2, 3, and 5

Food Bank/Home Delivered Meals

NOTES: Food Bank/Home Delivered Meals expended \$16,165 in Cares Act COVID Funding in FY20 and \$36,775 in FY21.

Allocation and Utilization Data Food Bank/Home Delivered Meals

Year	2020	2021	2022	3 yr % Change
Allocation	\$15,087	\$53,326	\$17,447	0.16%
\$ Spent	\$34,836	\$51,460	\$19,045	-0.45%
\$ Difference	(\$19,749)	\$1,866	(\$1,598)	
Total Clients	390	405	265	-0.32%
Units of Service	18,813	51,460	19,516	0.04%
Cost per Encounter	\$35.91	\$53.03	\$44.39	0.24%
Cost per Client	\$89.32	\$127.06	\$71.87	-0.20%

Sacramento and Yolo County

FB/HDM Service Category

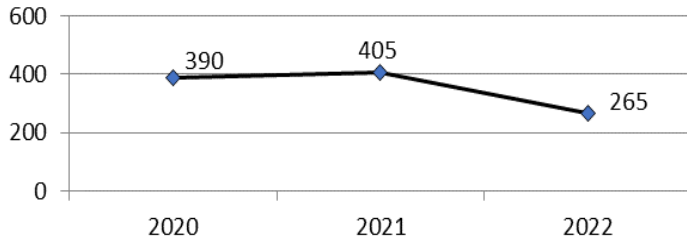
Demographic Data	2021		2022	
	n	%	n	%
Black	143	35.3%	90	34.0%
White	143	35.3%	162	61.1%
American Indian/ Alaskan Native	5	1.2%	5	1.9%
Native Hawaiian/ Pacific Islander	3	0.7%	2	0.8%
Asian	12	3.0%	6	2.3%
Latino(a)	99	24.4%	78	29.4%
Male	273	67.4%	211	79.6%
Female	120	29.6%	49	18.5%
Transgender	12	3.0%	5	1.9%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Food Bank/Home Delivered Meals

12	75.00%	Linked to Care (w/in 30 days)
248	93.58%	In Medical Care
110	41.51%	Retained In Care
222	83.77%	Virally Suppressed
251	94.72%	On Drug Therapy
206	77.74%	Stably/Permanently Housed
265	100.00%	Total Unduplicated Clients

Food Bank/Home Delivered Meals Total Clients



FY22 Food Bank/Home Delivered Meals Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
100% of providers offering Food Bank/Home Delivered Meals will comply with Food and Nutrition service standards.	100%	96.6%
60% of clients receiving Food Bank/Home Delivered Meal services will report that these services have allowed them to better manage living with HIV/AIDS.	60%	100%
60% of clients receiving Food Bank/Home Delivered Meal services will report improved quality of life.	60%	100%
60% of clients receiving Food Bank/Home Delivered Meal services will report improved ability to remain in medical care.	60%	92.9%

Directives: General Directives 1, 2, 3, and 5

Health Education and Risk Reduction

NOTES:

Allocation and Utilization Data Health Education and Risk Reduction Services

Year	2020	2021	2022	3 yr % Change
Allocation	\$29,048	\$31,037	\$36,634	0.26%
\$ Spent	\$29,211	\$26,237	\$36,585	0.25%
\$ Difference	(\$163)	\$4,800	\$49	
Total Clients	293	191	235	-0.20%
Units of Service	753	740	1,289	0.71%
Cost per Encounter	\$66.09	\$59.36	\$110.53	0.67%
Cost per Client	\$99.70	\$137.37	\$155.68	0.56%

Sacramento

Health Education/Risk Reduction Clients

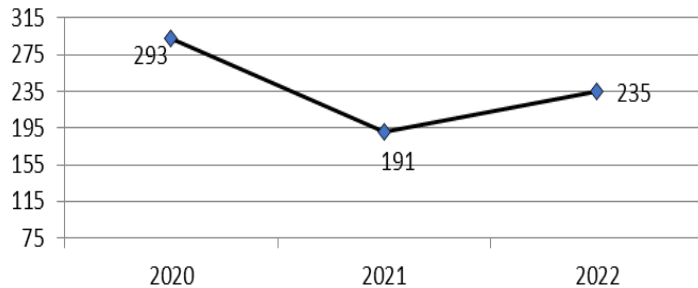
Demographic Data	2021		2022	
	n	%	n	%
Black	45	23.6%	59	25.1%
White	76	39.8%	161	68.5%
American Indian/ Alaskan Native	3	1.6%	7	3.0%
Native Hawaiian/ Pacific Islander	3	1.6%	2	0.9%
Asian	10	5.2%	6	2.6%
Latino(a)	54	28.3%	73	31.1%
Male	156	81.7%	205	87.2%
Female	28	14.7%	24	10.2%
Transgender	7	3.7%	6	2.6%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Health Education/Risk Reduction

28	65.12%	Linked to Care (w/in 30 days)
217	92.34%	In Medical Care
44	18.72%	Retained In Care
146	62.13%	Virally Suppressed
214	91.06%	On Drug Therapy
145	61.70%	Stably/Permanently Housed
235	100.00%	Total Unduplicated Clients

Health Education Risk Reduction Total Clients



FY22 Health Education and Risk Reduction Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Health Education and Risk Reduction (PCRS) providers will comply with Health Education and Risk Reduction service standards	100%	100%

Directives: General Directives 1, 2, 3, and 5

Health Insurance and Cost-Sharing Assistance

NOTES:

Allocation and Utilization Data Health Insurance and Cost-Sharing Assistance

Year	2020	2021	2022	3 yr % Change
Allocation	\$15,628	\$14,360	\$20,539	0.31%
\$ Spent	\$7,803	\$9,583	\$10,231	0.31%
\$ Difference	\$7,825	\$4,777	\$10,308	
Total Clients	9	9	11	0.22%
Units of Service	7,094	8,711	9,322	0.31%
Cost per Encounter	\$339.25	\$416.63	\$365.41	0.08%
Cost per Client	\$866.98	\$1,064.73	\$930.12	0.07%

Sacramento TGA and Yolo

Health Insurance and Cost-Sharing Assistance Clients

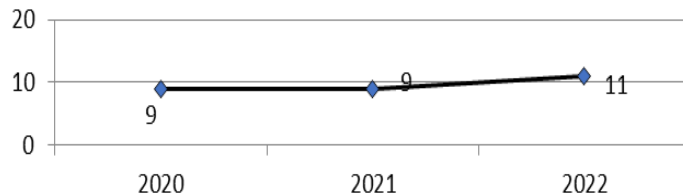
Demographic Data	2021		2022	
	n	%	n	%
Black	2	22.2%	0	0.0%
White	4	44.4%	11	100.0%
American Indian/ Alaskan Native	0	0.0%	0	0.0%
Native Hawaiian/ Pacific Islander	0	0.0%	0	0.0%
Asian	0	0.0%	0	0.0%
Latino(a)	3	33.3%	3	27.3%
Male	7	77.8%	10	90.9%
Female	2	22.2%	1	9.1%
Transgender	0	0.0%	0	0.0%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Health Insurance/Cost-Sharing Asst.

0	-	Linked to Care (w/in 30 days)
10	90.91%	In Medical Care
3	27.27%	Retained In Care
9	81.82%	Virally Suppressed
11	100.00%	On Drug Therapy
9	81.82%	Stably/Permanently Housed
11	100.00%	Total Unduplicated Clients

Health Insurance and Cost-Sharing Assistance Total Clients



FY22 Health Insurance and Cost-Sharing Assistance Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Health Insurance Premium and Cost-Sharing Assistance providers will comply with service standards	100%	95.7%
Referrals and linkages to services shall be documented	100%	100%
HIV+ clients who don't have an identified primary care provider will receive a referral to an appropriate physician/clinic	100%	95.7%
Clients receiving assistance will indicate payments had been processed/approved	100%	100%

Directives: General Directives 1, 2, 3, and 5

Housing

NOTES: Housing expenditures from Cares Act COVID Funding in FY20 were \$5,739.46 and \$18,323.55 in FY21.

Allocation and Utilization Data Housing

Year	2020	2021	2022	3 yr % Change
Allocation	\$26,977	\$56,517	\$37,201	0.38%
\$ Spent	\$16,326	\$42,370	\$25,261	0.55%
\$ Difference	\$10,651	\$14,146	\$11,940	
Total Clients	17	41	22	0.29%
Units of Service	1,018	30,111	16,032	14.75%
Cost per Encounter	\$229.94	\$596.76	\$328.07	0.43%
Cost per Client	960.35	\$1,033.42	\$1,148.23	-0.77%

Sacramento TGA and Yolo Counties

Housing Clients

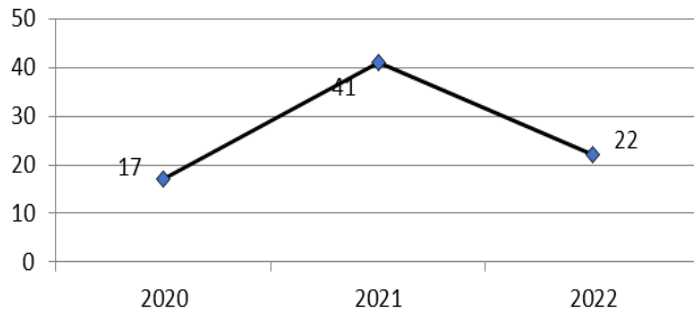
Demographic Data	2021		2022	
	n	%	n	%
Black	10	24.4%	9	40.9%
White	22	53.7%	12	54.5%
American Indian/ Alaskan Native	0	0.0%	1	4.5%
Native Hawaiian/ Pacific Islander	0	0.0%	0	0.0%
Asian	1	2.4%	0	0.0%
Latino(a)	8	19.5%	5	22.7%
Male	33	80.5%	18	81.8%
Female	8	19.5%	1	4.5%
Transgender	0	0.0%	3	13.6%

Wait Lists 2022: Yes – The highest report was 15 clients in July 2022

FY22 NHAS Performance Indicators Housing

0	-	Linked to Care (w/in 30 days)
20	90.91%	In Medical Care
10	45.45%	Retained In Care
17	77.27%	Virally Suppressed
22	100.00%	On Drug Therapy
8	36.36%	Stably/Permanently Housed
22	100.00%	Total Unduplicated Clients

Housing Total Clients



FY22 Housing Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Providers will comply with applicable Housing Assistance service standards	100%	98.55
Clients surveyed who received housing assistance will report improvements in or maintenance of their general health status and/or quality of life	60%	88.9%

Directives: General Directives 1, 2, 3, and 5; Housing Service Directive 1

Medical Case Management including MAI and Pediatric Treatment Adherence

Pediatric Treatment Adherence is a Sacramento County funded service

NOTES: In FY20, MCM expended \$12, 64.64 in direct service COVID funding and \$2,481.13 in FY21.

**Allocation and Utilization Data
Medical Case Management**

Year	2020	2021	2022	3 yr % Change
Allocation	\$1,200,866	\$1,317,152	\$1,363,753	0.14%
\$ Spent	\$1,194,578	\$1,254,887	\$926,701	-0.22%
\$ Difference	\$6,288	\$62,265	\$437,052	
Total Clients	1,724	1547	1592	-0.08%
Units of Service	83,207	93,528	69,382	-0.17%
Cost per Encounter	\$64.37	\$67.62	\$46.25	-0.28%
Cost per Client	\$692.91	\$811.17	\$567.15	-0.18%

Sacramento TGA and Yolo County

Medical Case Management Clients

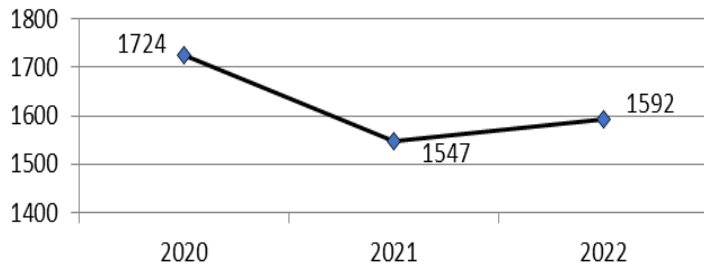
Demographic Data	2021		2022	
	n	%	n	%
Black	414	26.8%	461	29.0%
White	643	41.6%	1030	64.7%
American Indian/ Alaskan Native	17	1.1%	32	2.0%
Native Hawaiian/ Pacific Islander	15	1.0%	13	0.8%
Asian	55	3.6%	56	3.5%
Latino(a)	403	26.1%	407	25.6%
Male	1192	77.1%	1232	77.4%
Female	313	20.2%	316	19.8%
Transgender	42	2.7%	44	2.8%

Wait Lists 2022: None reported

**FY22 NHAS Performance Indicators
Medical Case Management**

41	66.13%	Linked to Care (w/in 30 days)
1354	85.05%	In Medical Care
416	26.13%	Retained In Care
1161	72.93%	Virally Suppressed
1456	91.46%	On Drug Therapy
1225	76.95%	Stably/Permanently Housed
1592	100.00%	Total Unduplicated Clients

**Medical Case Management
Total Clients**



FY22 Medical Case Management Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
MCM clients will have a care plan developed based upon assessment	95%	94.75%
MCM clients will be assessed using an acuity scale	95%	94.5%
MCM clients surveyed who received MCM services will report adherence to their anti-retroviral drug treatment plans.	60%	94.1%
MCM clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic	100%	100%
Pediatric clients receiving treatment adherence services will adhere to medication program.	75%	90%

Directives: General Directives 1, 2, 3, 5; Medical Case Mgmt Service Directives: 1 and 2

Medical Nutritional Therapy

NOTES: The Nutrition provider experienced a staffing shortage during FY22 and was unable to provide Nutritionist services for a period of time. This contributed to a reduction in client served.

Allocation and Utilization Data Medical Nutritional Therapy

Year	2020	2021	2022	3 yr % Change
Allocation	\$52,827	\$56,709	\$69,880	0.32%
\$ Spent	\$52,766	\$56,708	\$12,737	-0.76%
\$ Difference	\$61	\$0	\$57,143	
Total Clients	162	114	66	-0.59%
Units of Service	1,498	1,039	197	-0.87%
Cost per Encounter	\$135.64	\$145.78	\$153.46	0.13%
Cost per Client	\$325.72	\$497.44	\$192.99	-0.41%

Sacramento

Medical Nutritional Therapy Clients

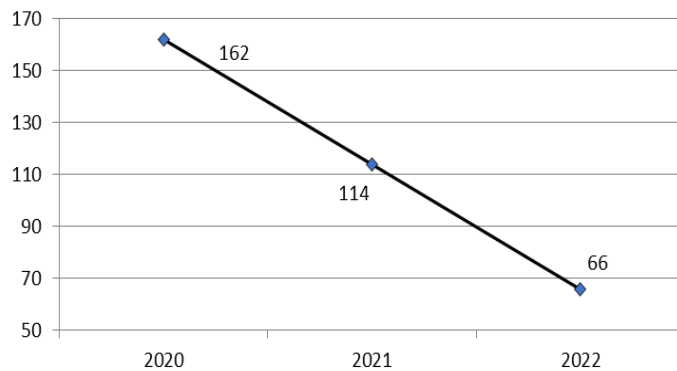
Demographic Data	2021		2022	
	n	%	n	%
Black	40	35.1%	27	40.9%
White	29	25.4%	34	51.5%
American Indian/ Alaskan Native	0	0.0%	1	1.5%
Native Hawaiian/ Pacific Islander	0	0.0%	1	1.5%
Asian	6	5.3%	3	4.5%
Latino(a)	39	34.2%	15	22.7%
Male	80	70.2%	51	77.3%
Female	33	28.9%	15	22.7%
Transgender	1	0.9%	0	0.0%

Wait Lists 2022: Yes, due to staffing shortage.

FY22 NHAS Performance Indicators Medical Nutritional Therapy

1	50.00%	Linked to Care (w/in 30 days)
60	90.91%	In Medical Care
22	33.33%	Retained In Care
57	86.36%	Virally Suppressed
61	92.42%	On Drug Therapy
54	81.82%	Stably/Permanently Housed
66	100.00%	Total Unduplicated Clients

Medical Nutritional Therapy Total Clients



FY22 Medical Nutritional Therapy Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Medical Nutritional Therapy providers will comply with Medical Nutritional Therapy service standards	100%	100%
Clients receiving medical nutritional therapy will have an individualized nutritional plan developed within 60 days of assessment by the licensed registered dietitian.	100%	100%

Directives: General Directives 1, 2, 3, and 5

Medical Transportation Services

NOTES: In FY21, Transportation expended \$1,400 in direct service COVID funding.

Allocation and Utilization Data Medical Transportation

Year	2020	2021	2022	3 yr % Change
Allocation	\$186,367	\$204,769	\$202,821	0.09%
\$ Spent	\$153,482	\$189,146	\$232,012	0.51%
\$ Difference	\$32,885	\$15,623	(\$29,191)	
Total Clients	426	468	525	0.23%
Units of Service	105,413	131,502	144,348	0.37%
Cost per Encounter	\$39.24	\$48.38	\$47.88	0.22%
Cost per Client	\$360.29	\$404.16	\$441.93	0.23%

Sacramento TGA and Yolo County

Medical Transportation Clients

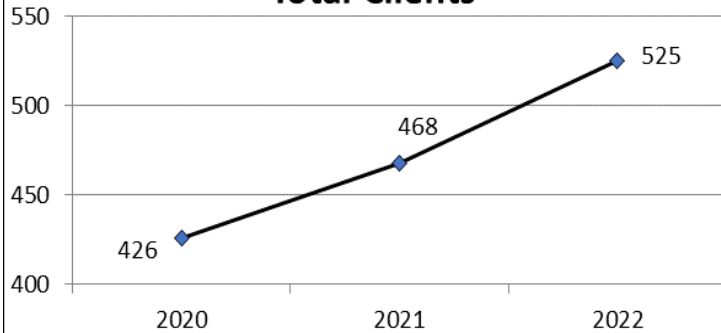
Demographic Data	2021		2022	
	n	%	n	%
Black	127	27.1%	143	27.2%
White	211	45.1%	354	67.4%
American Indian/ Alaskan Native	3	0.6%	10	1.9%
Native Hawaiian/ Pacific Islander	5	1.1%	5	1.0%
Asian	7	1.5%	13	2.5%
Latino(a)	115	24.6%	124	23.6%
Male	343	73.3%	379	72.2%
Female	113	24.1%	136	25.9%
Transgender	12	2.6%	10	1.9%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Medical Transportation

12	54.55%	Linked to Care (w/in 30 days)
475	90.48%	In Medical Care
171	32.57%	Retained In Care
416	79.24%	Virally Suppressed
505	96.19%	On Drug Therapy
419	79.81%	Stably/Permanently Housed
525	100.00%	Total Unduplicated Clients

Medical Transportation Total Clients



FY22 Medical Transportation Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Medical Transportation service providers will comply with Medical Transportation service standards	100%	98.5%
Clients surveyed who showed evidence of need for medical transportation services will received medical transportation to HIV related care appointments	75%	75%

Directives: General Directives 1, 2, 3, and 5; Medical Transportation Service Directive 1

Mental Health

NOTES: El Dorado, Placer and Yolo Counties providers reimburse for services to non-Ryan White funded providers who serve their clients. However no clients received mental health services in the rural counties in FY22.

Allocation and Utilization Data Mental Health

Year	2020	2021	2022	3 yr % Change
Allocation	\$522,498	\$608,229	\$479,036	-0.08%
\$ Spent	\$440,260	\$558,936	\$550,577	0.25%
\$ Difference	\$82,238	\$49,293	(\$71,541)	
Total Clients	696	433	501	-0.28%
Units of Service	5,216	8,178	9,690	0.86%
Cost per Encounter	\$113.00	\$143.46	\$122.92	0.09%
Cost per Client	\$632.56	\$1,290.85	\$1,098.96	0.74%

Sacramento TGA

Mental Health Clients

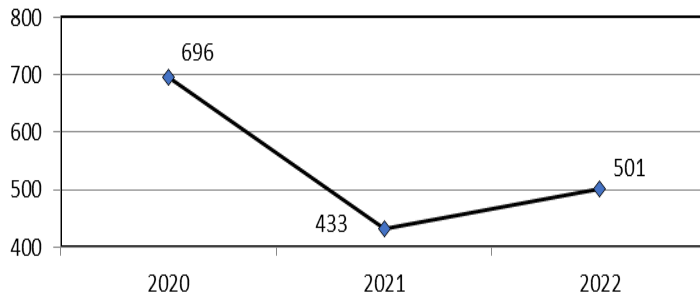
Demographic Data	2021		2022	
	n	%	n	%
Black	117	27.0%	134	26.7%
White	215	49.7%	344	68.7%
American Indian/ Alaskan Native	3	0.7%	7	1.4%
Native Hawaiian/ Pacific Islander	3	0.7%	5	1.0%
Asian	10	2.3%	11	2.2%
Latino(a)	85	19.6%	107	21.4%
Male	324	74.8%	380	75.8%
Female	100	23.1%	110	22.0%
Transgender	9	2.1%	11	2.2%

Wait Lists 2022: Yes – Therapy 15-18 people reported in Oct. 2022. Psychiatry 15 -18 people reported in Nov 2022. Weeks: 2 -6 depending on service.

FY22 NHAS Performance Indicators Mental Health

10	90.91%	Linked to Care (w/in 30 days)
448	89.42%	In Medical Care
170	33.93%	Retained In Care
417	83.23%	Virally Suppressed
463	92.42%	On Drug Therapy
408	81.44%	Stably/Permanently Housed
501	100.00%	Total Unduplicated Clients

Mental Health Total Clients



FY22 Mental Health Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Mental health providers will comply with Mental Health service standards.	100%	95.6%
Clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic.	100%	100%
Clients who receive Mental Health services will report a decrease in symptoms that initiated referral into mental health services.	60%	90%
Clients surveyed who received mental health counseling will report improved functionality.	60%	100%

Directives: General Directives 1, 2, and 5

Non-Medical Case Management Services

NOTES: *1 client missing in FY21: Client Demographics. Outcome Data: Benefits and Enrollment workers were not completing care plans during FY22 resulting in 14.7% of charts reviewed complying with service standards.

Allocation and Utilization Data Case Management Non-Medical

Year	2020	2021	2022	3 yr % Change
Allocation	\$101,540	\$136,084	\$128,458	0.27%
\$ Spent	\$82,797	\$133,212	\$118,958	0.44%
\$ Difference	\$18,743	\$2,872	\$9,500	
Total Clients	752	1107	1158	0.54%
Units of Service	2,553	5,851	6,613	1.59%
Cost per Encounter	\$70.59	\$119.28	\$41.64	-0.41%
Cost per Client	\$100.10	\$120.34	\$102.73	0.03%

Sacramento

Case Management Non-Medical Clients

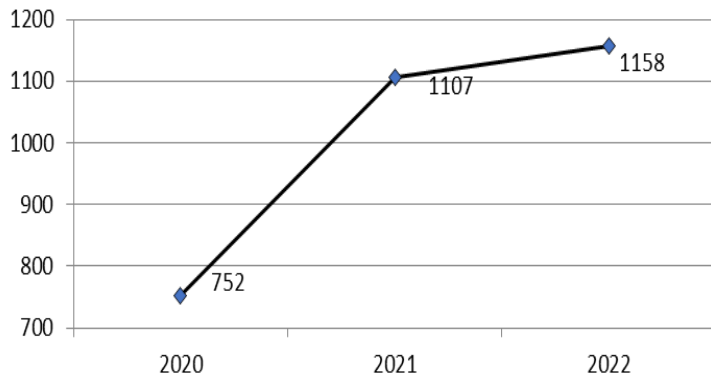
Demographic Data	2021		2022	
	n	%	n	%
Black	266	24.0%	321	27.7%
White	451	40.7%	762	65.8%
American Indian/ Alaskan Native	14	1.3%	16	1.4%
Native Hawaiian/ Pacific Islander	11	1.0%	5	0.4%
Asian	42	3.8%	54	4.7%
Latino(a)	322	29.1%	309	26.7%
Male	890	80.4%	904	78.1%
Female	186	16.8%	224	19.3%
Transgender	30	2.7%	30	2.6%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Case Management Non-Medical

26	70.27%	Linked to Care (w/in 30 days)
1012	87.39%	In Medical Care
308	26.60%	Retained In Care
894	77.20%	Virally Suppressed
1051	90.76%	On Drug Therapy
888	76.68%	Stably/Permanently Housed
1158	100.00%	Total Unduplicated Clients

Non-Medical Case Management Total Clients



FY22 Case Management Non-Medical Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Benefits and Enrollment Case Management charts reviewed will comply with Case Management (non-medical) service standards	90%	14.7%
People requesting Benefits and Enrollment case management will receive advice and assistance in obtaining needed services	95%	100%
Clients receiving services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits	95%	100%
Clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic	100%	100%
Clients surveyed who received Case Management (non-medical) services will report improved quality of life	60%	83.3%

Directives: General Directives 1, 2, 3, and 5

Oral Health Care

NOTES: El Dorado, Placer and Yolo Counties providers reimburse for services to non-Ryan White funded providers who serve their clients.

Allocation and Utilization Data Oral Health

Year	2020	2021	2022	3 yr % Change
Allocation	\$470,670	\$628,695	\$638,716	0.36%
\$ Spent	\$336,532	\$515,487	\$530,695	0.58%
\$ Difference	\$134,138	\$113,208	\$108,021	
Total Clients	481	613	634	0.32%
Units of Service	111,829	126,310	159,296	0.42%
Cost per Encounter	\$279.05	\$442.69	\$313.65	0.12%
Cost per Client	\$699.65	\$840.93	\$837.06	0.20%

Sacramento TGA and Yolo Counties

Oral Health Clients

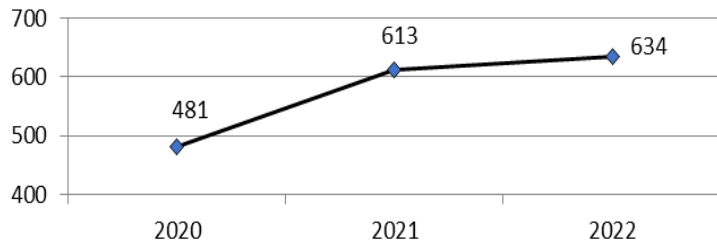
Demographic Data	2021		2022	
	n	%	n	%
Black	156	25.4%	156	24.6%
White	271	44.2%	440	69.4%
American Indian/ Alaskan Native	7	1.1%	10	1.6%
Native Hawaiian/ Pacific Islander	4	0.7%	5	0.8%
Asian	20	3.3%	23	3.6%
Latino(a)	155	25.3%	164	25.9%
Male	475	77.5%	513	80.9%
Female	116	18.9%	104	16.4%
Transgender	22	3.6%	17	2.7%

Wait Lists 2022: 30-60 days in Jan. 2023

FY22 NHAS Performance Indicators Oral Health Care

8	88.89%	Linked to Care (w/in 30 days)
576	90.85%	In Medical Care
202	31.86%	Retained In Care
532	83.91%	Virally Suppressed
580	91.48%	On Drug Therapy
499	78.71%	Stably/Permanently Housed
634	100.00%	Total Unduplicated Clients

Oral Health Total Clients



FY22 Oral Health Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Providers will comply with dental care service standards	100%	100%
Clients receiving specialty dental services will receive appropriate dental care as determined by County authorization review	100%	100%
Clients receiving Oral Health Care will report improved oral health through self-report.	60%	100%

Directives: General Directives 1, 2, and 5

Outpatient Ambulatory Medical Care including Lab Visits

NOTES: El Dorado, Placer and Yolo Counties providers reimburse for services to non-Ryan White funded providers who serve their clients.
National Viral Suppression Rate: <https://www.cdc.gov/hiv/statistics/overview/in-us/viral-suppression.html>

**Allocation and Utilization Data
Ambulatory Care**

Year	2020	2021	2022	3 yr % Change
Allocation	\$934,475	\$935,603	\$841,016	-0.10%
\$ Spent	\$983,826	\$852,313	\$829,922	-0.16%
\$ Difference	-\$49,351	\$83,289	\$11,094	
Total Clients	1,758	1754	1794	0.02%
Units of Service	55,896	42,316	67,037	0.20%
Cost per Encounter	\$152.96	\$202.26	\$114.39	-0.25%
Cost per Client	\$559.63	\$485.93	\$462.61	-0.17%

Sacramento TGA and Yolo Counties

Outpatient Ambulatory Care and Labs

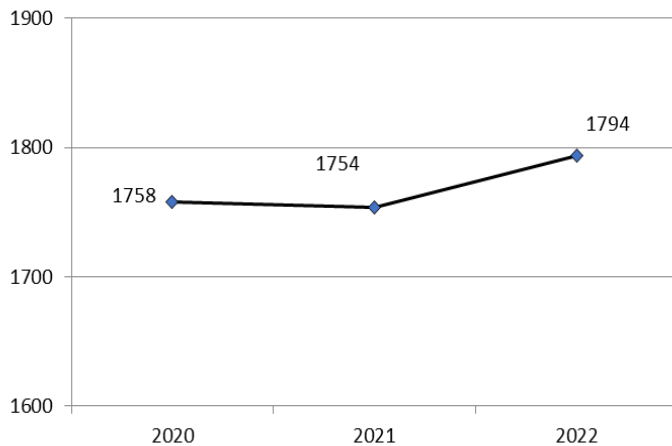
Demographic Data	2021		2022	
	n	%	n	%
Black	480	27.4%	502	28.0%
White	741	42.2%	1169	65.2%
American Indian/ Alaskan Native	15	0.9%	32	1.8%
Native Hawaiian/ Pacific Islander	16	0.9%	13	0.7%
Asian	67	3.8%	78	4.3%
Latino(a)	435	24.8%	460	25.6%
Male	1346	76.7%	1391	77.5%
Female	362	20.6%	356	19.8%
Transgender	46	2.6%	47	2.6%

Wait Lists 2022: Yes

**FY22 NHAS Performance Indicators
Outpatient Ambulatory Care**

44	64.71%	Linked to Care (w/in 30 days)
1538	85.73%	In Medical Care
428	23.86%	Retained In Care
1307	72.85%	Virally Suppressed
1585	88.35%	On Drug Therapy
1275	71.07%	Stably/Permanently Housed
1794	100.00%	Total Unduplicated Clients

**Ambulatory Care
Total Clients**



FY22 Ambulatory Care - Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
100% of primary care services offered will meet PHS guidelines	100%	100%
Number/Percentage of persons with HIV Viral Load Suppression will exceed National standards National Rate is 65%	95%	1307/1794 72.85%
WICY Ambulatory Care Expenditures meet standard established by CDC	18.3%	28.12%

Directives: General Directives 1, 2, and 5

Outreach Services

Includes MAI and Non-MAI Outreach Services

NOTES: Figures and Outcomes below are for all Outreach Service clients (both MAI and Non-MAI clients).

Allocation and Utilization Data Outreach Services

Year	2020	2021	2022	3 yr % Change
Allocation	\$101,383	\$127,147	\$61,075	-0.40%
\$ Spent	\$83,601	\$40,329	\$39,232	-0.53%
\$ Difference	\$17,782	\$86,818	\$21,843	
Total Clients	962	379	388	-0.60%
Units of Service	1,928	615	1,049	-0.46%
Cost per Encounter	\$59.33	\$28.66	\$56.53	-0.05%
Cost per Client	\$86.90	\$106.41	\$101.11	0.16%

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Outreach Services Clients

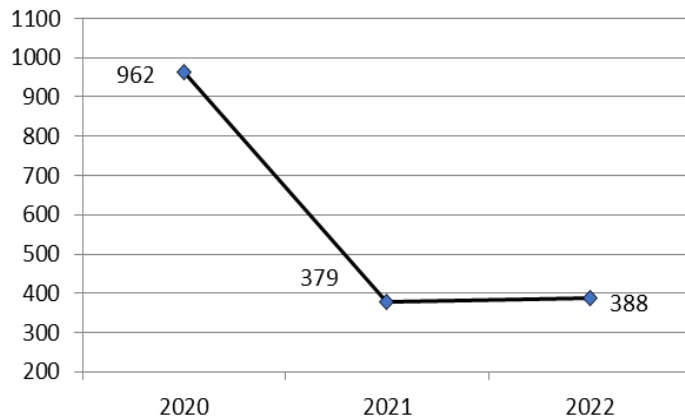
Demographic Data	2021		2022	
	n	%	n	%
Black	115	30.3%	136	35.1%
White	148	39.1%	232	59.8%
American Indian/ Alaskan Native	7	1.8%	7	1.8%
Native Hawaiian/ Pacific Islander	3	0.8%	4	1.0%
Asian	17	4.5%	9	2.3%
Latino(a)	89	23.5%	106	27.3%
Male	306	80.7%	301	77.6%
Female	63	16.6%	75	19.3%
Transgender	10	2.6%	12	3.1%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Outreach Services

12	60.00%	Linked to Care (w/in 30 days)
339	87.37%	In Medical Care
106	27.32%	Retained In Care
273	70.36%	Virally Suppressed
339	87.37%	On Drug Therapy
262	67.53%	Stably/Permanently Housed
388	100.00%	Total Unduplicated Clients

Outreach Services Total Clients



FY22 Outreach Services Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Outreach, both MAI and Non-MAI, providers will comply with Outreach service standards	100%	97.9%
All referrals and linkages to services for HIV+ clients receiving Outreach services shall be documented	100%	100%
HIV+ clients who do not have an identified primary care provider at initial contact will receive a referral to an appropriate physician or clinic	100%	100%

Directives: General Directives 1, 2, 3, and 5

Substance Abuse - Outpatient

NOTES:

Allocation and Utilization Data Substance Abuse - Outpatient

Year	2020	2021	2022	3 yr % Change
Allocation	\$200,981	\$198,631	\$201,661	0.00%
\$ Spent	\$200,981	\$185,204	\$159,665	-0.21%
\$ Difference	\$0	\$13,427	\$41,996	
Total Clients	220	152	146	-0.34%
Units of Service	3,055	3,795	5,899	0.93%
Cost per Encounter	\$74.49	\$68.65	\$80.64	0.08%
Cost per Client	\$913.55	\$1,218.45	\$1,093.59	0.20%

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Outpatient Substance Abuse Clients

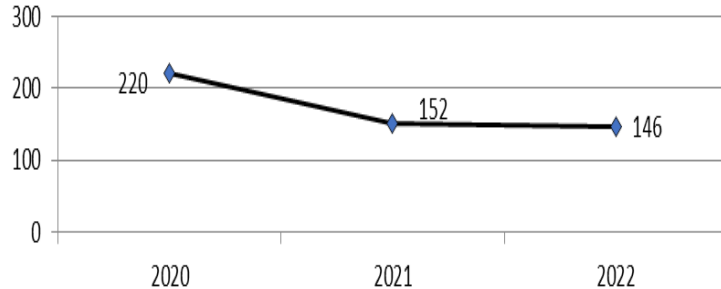
Demographic Data	2021		2022	
	n	%	n	%
Black	28	18.4%	36	24.7%
White	81	53.3%	100	68.5%
American Indian/ Alaskan Native	3	2.0%	5	3.4%
Native Hawaiian/ Pacific Islander	1	0.7%	0	0.0%
Asian	3	2.0%	5	3.4%
Latino(a)	36	23.7%	39	26.7%
Male	127	83.6%	127	87.0%
Female	21	13.8%	17	11.6%
Transgender	4	2.6%	2	1.4%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Outpatient Substance Abuse

2	40.00%	Linked to Care (w/in 30 days)
131	89.73%	In Medical Care
52	35.62%	Retained In Care
108	73.97%	Virally Suppressed
139	95.21%	On Drug Therapy
93	63.70%	Stably/Permanently Housed
146	100.00%	Total Unduplicated Clients

Substance Abuse - Outpatient Total Clients



FY22 Outpatient Substance Abuse Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Substance abuse providers will deliver services according to Standards of Care	100%	100%
Clients who do not have an identified primary care provider will receive a referral upon completion of substance abuse treatment	100%	100%
Clients will have a current care plan in their files	80%	100%
Clients surveyed who received outpatient substance abuse services will reduce risk behaviors for substance use as measured by self-report	60%	100%
Clients surveyed who received outpatient substance abuse services will reduce risk behaviors for transmission of HIV and other communicable diseases as measured by self-report	60%	No responses

Directives: General Directives 1, 2, and 5

Substance Abuse - Residential

NOTES:

Allocation and Utilization Data Substance Abuse Residential

Year	2020	2021	2022	3 yr % Change
Allocation	\$54,944	\$54,302	\$63,408	0.15%
\$ Spent	\$11,642	\$25,187	\$58,408	4.02%
\$ Difference	\$43,302	\$29,115	\$5,000	
Total Clients	6	9	19	2.17%
Units of Service	1,398	2,460	9,672	5.92%
Cost per Encounter	\$200.73	\$434.26	\$149.76	-0.25%
Cost per Client	\$1,940.40	\$2,798.56	\$3,074.10	0.58%

Sacramento TGA

Residential Substance Abuse Clients

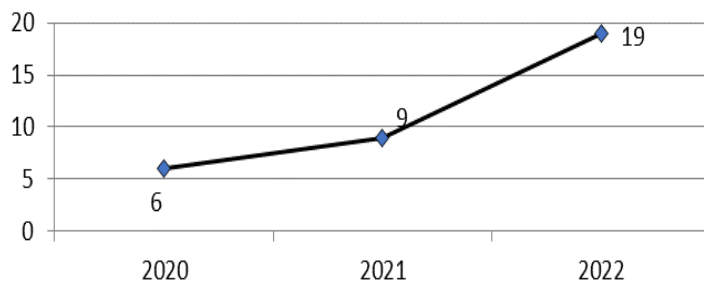
Demographic Data	2021		2022	
	n	%	n	%
Black	2	22.2%	2	10.5%
White	4	44.4%	15	78.9%
American Indian/ Alaskan Native	0	0.0%	2	10.5%
Native Hawaiian/ Pacific Islander	0	0.0%	0	0.0%
Asian	0	0.0%	0	0.0%
Latino(a)	3	33.3%	6	31.6%
Male	7	77.8%	18	94.7%
Female	1	11.1%	1	5.3%
Transgender	1	11.1%	0	0.0%

Wait Lists 2022: None reported

FY22 NHAS Performance Indicators Residential Substance Abuse

0	0.00%	Linked to Care (w/in 30 days)
17	89.47%	In Medical Care
6	31.58%	Retained In Care
15	78.95%	Virally Suppressed
19	100.00%	On Drug Therapy
9	47.37%	Stably/Permanently Housed
19	100.00%	Total Unduplicated Clients

Substance Abuse - Residential Total Clients



FY22 Residential Substance Abuse Services Outcome Data

Performance Indicator	Outcome Goal	Actual Outcome
Residential substance abuse providers will deliver services according to Standards of Care	100%	100%
Clients entering residential substance abuse treatment will complete residential treatment program	25%	60%
Clients who do not have an identified primary care provider will receive a referral to an appropriate physician or clinic upon completion of substance abuse treatment	100%	100%
Clients will have a current care plan in their files	80%	100%

Directives: General Directives 1, 2, and 5

Sacramento TGA
 Three Year Cost Per Client Per Service and Encounter
 Fiscal Years 2020, 2021 and 2022

Service Category	2020				2021				2022			
	UDC	Cost Per Client	Encounters	Cost per Encounter	UDC	Cost Per Client	Encounters	Cost per Encounter	UDC	Cost Per Client	Encounters	Cost per Encounter
Ambulatory Care	1,758	\$559.63	6,432	\$152.96	1,754	\$741.83	6,433	\$202.26	1,794	\$462.61	7,255	\$114.39
Medical Case Mgmt	1,724	\$692.91	18,558	\$64.37	1,547	\$811.17	18,558	\$67.62	1,592	\$567.15	19,522	\$46.25
Child Care	17	\$1,482.33	531	\$47.46	12	\$2,259.01	531	\$51.05	9	\$2,222.22	457	\$43.76
Emergency Financial Assistance	273	\$299.13	1,088	\$75.06	141	\$509.69	1,088	\$66.05	147	\$578.66	807	\$105.41
Food Bank	390	\$89.32	970	\$35.91	405	\$127.01	970	\$53.03	265	\$71.87	429	\$44.39
Health Education/ Risk Reduction	293	\$99.70	442	\$66.09	191	\$137.37	442	\$59.36	235	\$155.68	331	\$110.53
Health Insurance Premium Payment and Cost-Sharing	9	\$866.98	23	\$339.25	9	\$1,064.73	23	\$416.63	11	\$930.12	28	\$365.40
Housing Services	17	\$960.35	71	\$229.94	41	\$1,033.42	71	\$596.76	22	\$1,148.23	77	\$328.07
Medical Nutrition Therapy	162	\$325.72	389	\$135.65	114	\$497.44	389	\$145.78	66	\$192.99	83	\$153.46
Medical Transportation	426	\$360.29	3,911	\$39.24	468	\$404.29	3,911	\$48.38	525	\$441.93	4,846	\$47.88
Mental Health	696	\$632.56	3,896	\$113.00	433	\$1,290.85	3,896	\$143.46	501	\$1,098.96	4,479	\$122.92
Oral Health	481	\$699.65	1,206	\$279.05	613	\$870.93	1,206	\$442.69	634	\$837.06	1,692	\$313.65
Outreach Services	962	\$86.90	1,409	\$59.33	379	\$106.41	1,407	\$28.66	388	\$101.11	694	\$56.53
Substance Abuse Residential	6	\$1,940.40	58	\$200.73	9	\$2,798.56	58	\$434.26	19	\$3,074.10	390	\$149.76
Substance Abuse Outpatient	220	\$913.55	2,698	\$74.49	152	\$1,218.45	2,698	\$68.65	146	\$1,093.59	1,980	\$80.64
Case Mgmt (Non-Medical)	752	\$110.10	1,173	\$70.58	1,107	\$126.39	1,173	\$119.28	1,158	\$102.73	2,857	\$41.64

THREE YEAR TREND ANALYSIS BY COUNTY OF UNDUPLICATED CLIENTS BY SERVICE CATEGORY
FOR FISCAL YEARS 2020, 2021 and 2022

5/30/2023

<i>Sacramento</i>	<u>FY20</u>					<u>FY21</u>					<u>FY22</u>				
	UDC	Unit of Services (UOS)	Expenditures	Average Cost per UOS	Cost Per Client	UDC	Unit of Services (UOS)	Expenditures	Average Cost per UOS	Cost Per Client	UDC	Unit of Services (UOS)	Expenditures	Average Cost per UOS	Cost Per Client
Ambulatory Care	1,757	53,991.52	\$981,787.90	\$18.18	\$558.79	1,754	41,913.06	\$1,300,729	\$31.03	\$741.58	1,762	67,036.60	\$829,922.16	\$12.38	\$471.01
Medical Case Management	1,550	64,308.83	\$865,402.19	\$13.46	\$558.32	1,383	73,322.83	\$928,524	\$12.66	\$671.38	1,431	69,382.08	\$902,906.30	\$13.01	\$630.96
Case Mgmt - Non-Medical	752	2,553.00	\$82,796.77	\$32.43	\$110.10	1,106	5,845.00	\$139,343	\$23.84	\$125.99	1,127	6,612.99	\$118,957.70	\$17.99	\$105.55
Child Care Services	17	22,908.75	\$25,199.63	\$1.10	\$1,482.33	12	24,643.75	\$27,108	\$1.10	\$2,259.01	9	18,433.25	\$19,999.98	\$1.08	\$2,222.22
Emergency Financial Assistance	105	10,114.31	\$11,125.74	\$1.10	\$105.96	55	18,990.51	\$20,890	\$1.10	\$379.81	38	77,606.00	\$85,062.82	\$1.10	\$2,238.50
Food Bank/Home Delivered Meals	351	30,630.50	\$30,630.50	\$1.00	\$87.27	343	43,211.00	\$43,211	\$1.00	\$125.98	199	19,515.68	\$19,044.68	\$0.98	\$95.70
Health Education & Risk Reduction	293	752.66	\$29,211.27	\$38.81	\$99.70	191	740.00	\$26,237	\$35.46	\$137.37	235	1,289.00	\$36,585.47	\$28.38	\$155.68
Health Insurance Premium and Cost-Sharing Assistance	3	3,056.23	\$3,361.85	\$1.10	\$1,120.62	4	4,082.34	\$4,491	\$1.10	\$1,122.64	5	9,322.42	\$10,231.34	\$1.10	\$2,046.27
Housing Services	15	13,987.36	\$14,555.95	\$1.04	\$970.40	36	26,280.92	\$38,540	\$1.47	\$1,070.56	22	16,032.29	\$25,261.05	\$1.58	\$1,148.23
Medical Nutrition	162	1,498.00	\$52,765.88	\$35.22	\$325.72	114	1,039.00	\$56,708	\$54.58	\$497.44	66	197.00	\$12,737.36	\$64.66	\$192.99
Medical Transportation	318	92,411.16	\$139,255.26	\$1.51	\$437.91	356	110,459.27	\$166,287	\$1.51	\$467.10	383	144,348.08	\$232,011.61	\$1.61	\$605.77
Mental Health Services	696	5,215.10	\$440,260.26	\$84.42	\$632.56	433	8,178.25	\$558,936	\$68.34	\$1,290.85	489	9,689.50	\$550,577.41	\$56.82	\$1,125.93
Oral Health Care	470	92,215.10	\$314,956.79	\$3.42	\$670.12	602	100,185.10	\$486,971	\$4.86	\$808.92	626	159,296.00	\$530,694.82	\$3.33	\$847.76
Outreach Services	962	1,921.00	\$83,601.06	\$43.52	\$86.90	379	615.00	\$40,329	\$65.58	\$106.41	388	1,049.00	\$39,232.05	\$37.40	\$101.11
Substance Abuse - Residential*	6	1,398.00	\$11,642.40	\$8.33	\$1,940.40	9	2,460.00	\$25,187	\$10.24	\$2,798.56	19	9,672.00	\$58,407.90	\$6.04	\$3,074.10
Substance Abuse - Outpatient	220	3,054.75	\$200,980.99	\$65.79	\$913.55	152	3,795.05	\$185,204	\$48.80	\$1,218.45	146	5,898.50	\$159,664.80	\$27.07	\$1,093.59
Total UDC	2,328	400,016.27	\$3,287,534.44	\$8.22	\$1,412.17	2,294	465,761.08	\$4,048,696	\$8.69	\$1,764.91	2,196	615,380.39	\$3,631,297.45	\$5.90	\$1,653.60

THREE YEAR TREND ANALYSIS BY COUNTY OF UNDUPLICATED CLIENTS BY SERVICE CATEGORY
FOR FISCAL YEARS 2020, 2021 and 2022

5/30/2023

<i>El Dorado</i>	<u>FY20</u>					<u>FY21</u>					<u>FY22</u>				
	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client
Ambulatory Care	3	689.96	\$758.96	\$1.10	\$252.99										
Medical Case Mgmt	62	5,616.00	\$137,927.00	\$24.56	\$2,224.63	59	7,330.00	\$139,997	\$19.10	\$2,372.83	60	9,389.00	\$130,795.82	\$13.93	\$2,179.93
Emergency Financial Assistance	54	22,075.05	\$24,282.55	\$1.10	\$449.68	28	9,993.82	\$10,993	\$1.10	\$392.61	52	27,040.44	\$29,744.48	\$1.10	\$572.01
Food Bank/Home Delivered Meals (COVID funding)						15	2,000.00	\$2,000	\$1.00	\$133.33					
Health Insurance Premium and Cost-Sharing Assistance	4	2,856.93	\$3,142.62	\$1.10	\$785.66	4	4,545.27	\$5,000	\$1.10	\$1,249.95	2	897.82	\$987.60	\$1.10	\$493.80
Housing Services (COVID funding)	2	1,770.00	\$1,770.00	\$1.00	\$885.00	4	2,830.00	\$2,830	\$1.00	\$707.50					
Medical Transportation	40	2,800.00	\$3,080.00	\$1.10	\$77.00	22	2,050.00	\$2,255	\$1.10	\$102.50	47	8,440.00	\$9,284.00	\$1.10	\$197.53
Oral Health Care	8	12,322.00	\$13,554.20	\$1.10	\$1,694.28	9	22,764.00	\$25,040	\$1.10	\$2,782.27	6	4,627.20	\$5,089.92	\$1.10	\$848.32
Totals	65	48,129.94	\$184,515.32	\$3.83	\$2,838.70	59	51,513.09	\$188,115	\$3.65	\$3,188.40	61	50,394.46	\$175,901.83	\$3.49	\$2,883.64

THREE YEAR TREND ANALYSIS BY COUNTY OF UNDUPLICATED CLIENTS BY SERVICE CATEGORY
FOR FISCAL YEARS 2020, 2021 and 2022

5/30/2023

<i>Placer</i>	<u>FY20</u>					<u>FY21</u>					<u>FY22</u>				
	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client
Ambulatory Care	1	1,163.00	\$1,279.30	\$1.10	\$1,279.30	1	403.00	\$443	\$1.10	\$443.30					
Medical Case Mgmt	64	11,846.00	\$123,784.00	\$10.45	\$1,934.13	54	10,861.00	\$122,189	\$11.25	\$2,262.76	62	13,065.00	\$136,234.17	\$10.43	\$2,197.33
Emergency Financial Assistance	62	37,138.14	\$40,851.95	\$1.10	\$658.90	57	36,244.65	\$39,869	\$1.10	\$699.46	55	39,369.27	\$43,070.83	\$1.09	\$783.11
Food Bank/home Delivered Meals (COVID funding)	8	1,450.00	\$1,450.00	\$1.00	\$181.25	3	550.00	\$550	\$1.00	\$183.33					
Health Insurance Premium and Cost-Sharing Assistance	2	1,180.34	\$1,298.37	\$1.10	\$649.19	1	83.78	\$92	\$1.10	\$92.16	4	124.72	\$113.87	\$0.91	\$28.47
Housing (COVID funding)						1	1,000.00	\$1,000	\$1.00	\$1,000.00					
Medical Transportation	55	9,523.00	\$10,475.30	\$1.10	\$190.46	55	16,716.00	\$18,388	\$1.10	\$334.32	55	17,402.00	\$19,142.20	\$1.10	\$348.04
Oral Health Care	3	7,292.00	\$8,021.20	\$1.10	\$2,673.73	1	1,151.00	\$1,266	\$1.10	\$1,266.10	1	2,300.00	\$2,530.00	\$1.10	\$2,530.00
Totals	73	69,592.48	\$187,160.13	\$2.69	\$2,563.84	70	67,009.43	\$183,797	\$2.74	\$2,625.67	65	72,260.99	\$201,091.07	\$2.78	\$3,093.71

THREE YEAR TREND ANALYSIS BY COUNTY OF UNDUPLICATED CLIENTS BY SERVICE CATEGORY
FOR FISCAL YEARS 2020, 2021 and 2022

5/30/2023

<i>Yolo</i>	<u>FY20</u>					<u>FY21</u>					<u>FY22</u>				
	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client	UDC	UOS	Expenditures	Average Cost per UOS	Cost Per Client
Ambulatory Care															
Medical Case Mgmt	68	2,187.00	\$67,464.65	\$30.85	\$992.13	39	2,014.00	\$64,177	\$31.87	\$1,645.56	55	2,430.00	\$79,169.78	\$32.58	\$1,439.45
Emergency Financial Assistance	52	5,403.54	\$5,403.54	\$1.00	\$103.91	1	114.00	\$114	\$1.00	\$114.00	3	680.16	\$680.16	\$1.00	\$226.72
Food Bank/Home Delivered Meals	33	2,755.40	\$2,755.40	\$1.00	\$83.50	45	5,698.72	\$5,699	\$1.00	\$126.64	35	5,995.68	\$5,995.68	\$1.00	\$171.31
Health Insurance Premium and Cost-Sharing Assistance															
Housing															
Medical Transportation	16	671.40	\$671.40	\$1.00	\$41.96	39	2,276.69	\$2,277	\$1.00	\$125.00	31	2,124.16	\$2,124.16	\$1.00	\$125.00
Oral Health						1	2,210.00	\$2,210	\$1.00	\$2,210.00	1	445.00	\$445.00	\$1.00	\$445.00
Total	68	11,017.34	\$76,295.00	\$6.92	\$1,121.99	64	12,313.41	\$74,476	\$6.05	\$1,163.69	55	11,675.00	\$88,414.78	\$7.57	\$1,607.54

ALL PROVIDERS

Service Category	All Providers UDC	Rural Providers UDC	Sac UDC	All Providers UOS	Rural Provider UOS	Sac UOS	All Providers Expenditures	Rural Provider Expenditures	Sac Expenditures
Ambulatory Care	1,932	#REF!	#REF!	49,834	#REF!	#REF!	\$ 1,025,731.61	#REF!	#REF!
Medical Case Mgmt	1,152	#REF!	#REF!	97,309	#REF!	#REF!	\$ 1,125,687.25	#REF!	#REF!
Case Mgmt (Non-Medical)	980		980	3,776		3776	\$ 159,572.01		\$ 159,572.01
Child Care	37		37	32,445		32445	\$ 35,689.50		\$ 35,689.50
Emergency Financial Assistance	241	#REF!	#REF!	67,517	#REF!	#REF!	\$ 73,755.19	#REF!	#REF!
Food Bank	518	#REF!	#REF!	65,476	#REF!	#REF!	\$ 65,475.67	#REF!	#REF!
Health Education/ Risk Reduction	142		142	387		387	\$ 42,160.44		\$ 42,160.44
Health Insurance Premium Payment and Cost-Sharing	33	#REF!	#REF!	20,265	#REF!	#REF!	\$ 22,250.43	#REF!	#REF!
Housing Services	143	#REF!	#REF!	663,873	#REF!	#REF!	\$ 730,255.52	#REF!	#REF!
Medical Nutritional Therapy	364		364	15,129		15129	\$ 43,741.38		\$ 43,741.38
Medical Transportation	563	#REF!	#REF!	162,512	#REF!	#REF!	\$ 206,930.91	#REF!	#REF!
Mental Health	738	#REF!	#REF!	6,450	#REF!	#REF!	\$ 488,839.64	#REF!	#REF!
Oral Health	553	#REF!	#REF!	127,888	#REF!	#REF!	\$ 615,472.04	#REF!	#REF!
Outreach Services	297		297	3,954		3954	\$ 162,692.93		\$ 162,692.93
Substance Abuse Residential	62		62	263,584		263584	\$ 334,679.04		\$ 334,679.04
Substance Abuse Outpatient	310		310	5,532		5532	\$ 223,184.61		\$ 223,184.61

All Providers Encounters	Rural Provider Encounters	Sac Encounters
6,764	29	6735
15,190	2847	12343
1,619		1619
170		170
473		473
1,000	274	726
195		195
55	18	37
1,166	41	1125
749		749
3,303	315	2988
3,764	#REF!	#REF!
3,863	29	3834
661		661
174		174
2,478		2478