

Attachment A

FY 17 Sacramento TGA Implementation Plan

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Ambulatory Outpatient Medical Care		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 1		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: D, F, G, H; Activities: D.1.,D.2.,F.1.,F.2.,G.1.,G.2.,H.4.				\$ 381,809	\$ 398,370		
Service Category Goal: 1: Increase access to care and Improve Health Outcomes for PLWH in the Sacramento TGA									
Service Category Goal: 2: Reduce HIV-Related Disparities and Health Inequities in the Sacramento TGA									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided		Provide the approximate amount of funds to be used to provide this service.	
				Target	Actual	Target	Actual	Allocation	Expenditure
1A1: Provide culturally and linguistically appropriate Ambulatory Outpatient Medical services.		01005: 1 20-minute primary care visit with HCP		853	1,106	1,475	2,354	261,663	\$ 273,467
1A2: Provide screening to 95% of clients reporting symptoms of opportunistic infection and treatment to all who consent. Outcome: 100%		01006: 1 20-minute specialty care visit with HCP		25	24	357	228	63,893	\$ 46,264
1A3: 100% of primary care services offered will meeting PHS guidelines. Outcome: 100%		01007: 1 medication adherence session as part of medical visit		25	24	46	152	8,292	\$ 30,842
1A4: Adhere to all relevant standards of care and service directives as approved by the Planning Council.		01008r: Vendor paid HCP primary care dollar in rural counties		7	-	2,572	-	2,829	\$ -
1B1: Number/Percent of clients accessing services will be reflective of the TGA's proportion of PLWH/A by race/ethnicity. See Attachment E		01009: 1 20-minute HCP specialty care dollar		20	14	4,546	4,068	5,000	\$ 4,475
1B2: Number/Percent of clients accessing services will be reflective of the TGA's proportion of WICY living with HIV/AIDS. See Attachment E		01009r: 1 20-minute HCP specialty care dollar in rural counties		5	16	1,160	2,865	1,276	\$ 3,152
1B3: All service objectives identified for Goal A and B will also apply to rural counties.		01010r: 1 vendor paid lab dollar in rural counties		4	4	1,647	1,674	1,811	\$ 1,841

Outpatient Ambulatory Care Continued:

	01010: 1 vendor lab dollar	162	177	18,417	13,293	20,259	\$	14,622
	01011: 1 vendor paid viral load lab test	128	147	10,633	11,312	11,696	\$	12,443
	01012: 1 vendor paid viral for genotype4/phenotype lab	12	35	4,627	10,241	5,090	\$	11,265
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)								
a. (Pick Outcome from dropdown list in the cell to the right)	HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.	2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %		
		1503/1972	76.22%	1711/2074	82.5%	947/1932	49.0%	
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %		
		1630/1972	82.66%	1763/2074	85%	1632/1932	84.5%	
c. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy.	2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %		
		1934/1972	98.07%	1867/2074	90%	1883/1932	97.5%	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable								
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input checked="" type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed								

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report			
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018				
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018				
Service Category Name: ADAP/Prescription Medications - Not Funded at this Time		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Serice Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 2		Current Comprehensive Plan Strategy: Not applicable at this time				0	0
Service Category Goal: N/A							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target	Actual	Target	Actual
2A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.				0	0	0	0
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)				Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
b. (Pick Outcome from dropdown list in the cell to the right)				Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
c. (Pick Outcome from dropdown list in the cell to the right)				Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy	<input type="checkbox"/> Virally Suppressed

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Health Insurance and Cost-Sharing Assistance		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 3		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: E, F, J; Activities: E.3,F.2.,J.1.				\$ 19,100	\$ 21,842
Service Category Goal: 1: Increase access to care and Improve Health Outcomes for PLWH in the Sacramento TGA							
Service Category Goal: 2: Reduce HIV-Related Disparities and Health Inequities in the Sacramento TGA							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target	Actual	Target	Actual
3A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.		11028: 1 vendor paid insurance dollar		8	19	4545	17363
						\$ 5,000	\$ 19,099
3A2: 100% of referrals and linkages to services for HIV+ clients receiving Health Insurance Premium and Cost-Sharing Assistance services shall be documented. Outcome: 100%		11028r: 1 vendor paid insurance dollar in rural counties		4	5	1242	731
						\$ 1,366	\$ 804
3A3: 100% of clients receiving Health Insurance Premium and Cost-Sharing Assistance will report payments having been processed and approved and avoided the cancellation of health insurance benefits. Outcome: 100%		11033: 1 vendor paid medical visit co-pay		8	0	4545	0
						\$ 5,000	\$ -
3A4: 100% of clients receiving assistance in the form of co-pays or deductible payments will maintain access to medical care. Outcome: 100%		11033r: 1 vendor paid medical visit co-pay in rural counties		6	3	1242	974
						\$ 1,366	\$ 1,071
3A5: 100% of Health Insurance premium and Cost-Sharing Assistance Providers will adhere to Health Insurance Premium and Cost-Sharing Assistance service standards. Outcome: 90.9%		11034: 1 vendor paid deductible payment		8	5	4545	789
						\$ 5,000	\$ 868
3A6: 100% of HIV+ clients who do not have an identified primary care provider will receive a referral to an appropriate physician or clinic. Outcome: 100%		11034r: 1 vendor paid deductible payment in rural counties		3	0	1244	0
						\$ 1,368	\$ -

Health Insurance Premium and Cost-Sharing Assistance Continued:

5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)				
a. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral Load test during the measurement year.	2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
		39/44 88.64%	26/31 85%	27/33 81.8%
b. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable				
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed				

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Oral Health		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 4		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: D, F, G, H; Activities: D.1.,D.2.,F.1.,F.2.,G.1.,G.2.,H.4.				\$ 416,117	\$ 435,997		
Service Category Goal: 4A: To Provide access to dental care to improve health status of PLWH/A who have no dental insurance coverage or who have been denied coverage of a specific treatment through Medi-Cal. 4B: To provide access to dental care to improve health status of PLWH/A who have no dental insurance coverage or who have been denied coverage of a specific treatment through Medi-Cal in rural counties. All service objectives identified for Goal A will also apply to this goal.									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual	Allocation	Expenditure
4A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.		02001: 1 dental care visit		365	436	2,781	2,373		
4A2: Provide emergency dental care.		02002: 1 vendor paid dental dollar		91	86	90,909	101,138		
4A3: Provide necessary outpatient diagnostic and surgical (Dental specialty) procedures.		02002r: 1 vendor paid dental dollar in rural counties		12	12	19,835	22,795		
4A4: 60% of clients receiving Oral Health Care will report improved oral health through self report. Outcome: 100%									
4A5: 100% of clients receiving specialty dental services will receive appropriate dental care as determined by County authorization review. Outcome: 81.5%									
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)									
a. (Pick Outcome from dropdown list in the cell to the right)		HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				508/625 81.28%		323/392 82.5%		303/553 84.8%	
b. (Pick Outcome from dropdown list in the cell to the right)		HAB Oral Care Measures: Oral Health Services: Dental Treatment Plan		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				625/625 100%		392/392 100%		553/553 100%	
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable									
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input checked="" type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy		<input type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report					
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018						
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018						
Service Category Name: Mental Health		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 5		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: E; Activities: E.4.				\$ 456,279	\$ 446,905		
<p>Service Category Goal: 5A: To provide a variety of services aimed at improving or maintaining an individual's or family's health and ability to effectively cope and maximize</p> <p>5B: To provide psychiatric interventions to people with HIV to manage symptoms of mental illness or life crises as a result of their HIV.</p> <p>5C: Improve access to HIV medical care services by clients receiving mental health services.</p> <p>5D: To provide psychiatric interventions to HIV+ clients in rural counties to manage symptoms of mental illness or life crises as a result of their HIV. All service objectives identified for Goals A, B and C will also apply to this goal.</p>									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual	Allocation	Expenditure
5A1: Provide continuum of mental health counseling and therapeutic services to PLWH/A and to affected persons deemed eligible.		03001: 1-hour adult psychological		705	366	4,757	2,843	\$ 291,031	\$ 198,948
5A2: 100% of Mental Health Service Providers will comply with Mental Health service standards. Outcome: 87.9%		03020: 1 hour child psychological		52	53	581	820	\$ 27,501	\$ 35,978
5A3: 60% of clients receiving mental health counseling will report improved functionality. Outcome: 100% of respondents reported improved functionality.		03040: 1/2-hour adult psychiatric		426	312	1,277	785	\$ 60,900	\$ 89,349
5B1: Support primary care and mental health treatment programs by evaluating, diagnosing and treating PLWH/A clients as required through a licensed psychiatrist, which may include administration and monitoring of psychotropic medications needed as a result of client's HIV.		03042: each adult attending group		39	44	181	113	\$ 11,903	\$ 13,244
5B2: 60% of clients receiving psychiatric services will report increased functionality within 90 days of start of treatment. Outcome: 100% of respondents reported improved functionality.		03048: 1 15-minute Mental Health Other Encounter		185	308	899	1,067	\$ 59,919	\$ 109,076

Mental Health Continued:

5C1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.	03042r: 1 hour adult attending group	1	0	455	0	\$ 500	\$ -
5C2: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%	03045r: 1 vendor paid adult individual-psychological dollar in rural counties	4	2	4114	283	\$ 4,525	\$ 311
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)	HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.	2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
		698/918	76.03%	758/919	82.5%	368/701	52.5%
b. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input checked="" type="checkbox"/> Retained in Care <input type="checkbox"/> Prescribed Antiretroviral Therapy <input type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Medical Case Management including Pediatric Treatment Adherence Services		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 6		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: F, I; Activities: F.1, I.1.				\$ 888,428	\$ 890,905
Service Category Goal: 6A: To Provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A.							
6B: Maintain or improve health status and quality of life of clients accessing integrated medical case management.							
6C: To provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target	Actual	Target	Actual
6A1: 95% of clients will be assessed using an acuity scale. Outcome: 100%		14011: 1 15-minute Office-based face-to-face encounter		512	605	5,112	3,820
						\$ 92,849	\$ 48,842
6A2: 95% of clients will have a care plan developed based upon acuity scale assessment. Outcome: 99.2%		14012: 1 15-minute Office-based other encounter		279	687	1,884	6,252
						\$ 39,158	\$ 93,598
6A3: 100% of clients will receive medical case management follow-up. Outcome: Data unavailable		14020: 1 15-minute Field-based face-to-face encounter		237	325	23,277	18,496
						\$ 317,522	\$ 209,719
6A4: 70% of clients receiving medical case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%		14021: 1 15-minute Field-based other encounter		222	332	8,810	22,371
						\$ 124,637	\$ 252,755
6A5: 95% of medical case management charts will comply with medical case management service standards. Outcome: 90.6%		14022: 1 15-minute Field-based Child Care face-to-face Encounter		120	45	1,343	435
						\$ 16,973	\$ 4,701
6A6: At least 35% of Sacramento County's Medical Case Management funds will be spent on field-based medical case management services. Outcome: 83% of the TGA's Medical Case Management funds were spent on field-based services.		14023: 1 15-minute Field-based Child Care Other encounter		34	55	1,479	2,864
						\$ 19,090	\$ 31,610

Medical Case Management Continued:

6B1: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%	14020r: 1 15-minute Field-based face-to-face encounter in Rural County	112	124	5,304	6,500	\$ 77,173	\$ 90,644
6B2: Offer field-based medical case management visit to newly diagnosed PLWH/A who do not seek care within six months of their initial intake.	14021r: 1 15-minute Field-based other encounter in Rural County	151	150	12,649	11,281	\$ 178,517	\$ 149,283
6C1: All Objectives above apply to rural county medical case management as well.	11051: 1-Pediatric medication adherence session	25	24	93	76	\$ 22,509	\$ 9,754
6D1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.							
6D2: Adhere to all relevant standards of care and service directives as approved by the Planning Council.							
6D3: Percent of clients accessing services will be reflective of the TGA's proportion of WICY living with HIV/AIDS. Outcome: Data unavailable							
6D4: 85% of Pediatric client will receive HIV medication adherence counseling at least twice in a six month period. Outcome 91.6%							
6D5: 100% of Medical Adherence (Pediatric) providers will dispense medications (including prescriptions for antiretroviral agents for HIV) according to PHS guidelines. Outcome: 100%							
6D6: 100% of Pediatric clients will receive their needed medication within 48 hours. Outcome: 100%							
6D7: 75% clients receiving treatment adherence services will adhere to medication program. Outcome: 91.6%							
6D8: 100% of clients receiving treatment adherence services will be assessed for sensitivities, resistance, and side effects at least once every six months by a Registered Nurse and a Pharmacist. Outcome: 100%							

Medical Case Management Continued:

6D9: 70% of clients receiving treatment adherence services will show improved health indicators. Outcome: 91.6%							
6D10: 100% of Pediatric clients receiving medication adherence counseling will maintain routine medical care (2 HIV+ visits per year at least three months apart). Outcome: 100%							

5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)

Medical Case Management:				
		2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
a. (Pick Outcome from dropdown list in the cell to the right)	HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart who received Medical Case Management Services.	791/1319 59.97%	871/1056 82.5%	513/1138 45.1%
b. (Pick Outcome from dropdown list in the cell to the right)	HHS Measure: Viral Load Suppression Among Persons in HIV Medical Care: Number/Percentage of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML, at last HIV Viral load test during the measurement year who received Medical Case Management Services.	1018/1319 77.18%	898/1056 85%	895/1138 78.7%
Pediatric Treatment Adherence:				
a. (Pick Outcome from dropdown list in the cell to the right)	HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart who received Pediatric Treatment Adherence Services.	22/23 95.7%	21/26 82.5%	See Medical Case Management
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy who received Pediatric Treatment Adherence Services.	23/23 100%	23/26 90%	24/24 100%
c. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year who received Pediatric Treatment Adherence Services.	19/23 82.6%	22/26 85%	22/24 91.6%
c. (Pick Outcome from dropdown list in the cell to the right)				

6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable

Diagnosed Linked to Care Retained in Care Prescribed Antiretroviral Therapy Virally Suppressed

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report			
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018				
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018				
Service Category Name: Case Management (non-Medical)		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 7		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: I, J; Activities: I.1.,J.1.				\$ 58,040	\$ 58,040
Service Category Goal: 7A: To Provide culturally appropriate, comprehensive Benefits and Enrollment case management services to eligible PLWH/A. 7B: Maintain or improve health status and quality of life of clients accessing integrated Benefits and Enrollment case management services. 7C: To provide culturally appropriate, comprehensive Benefits and Enrollment case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided	
				Target	Actual	Target	Actual
7A1: 100% of clients will receive non-medical case management follow-up. Outcome: 100%		12019: 1 15-minute Office-based face-to-face benefits counseling		415	460	1,699	1,613
						\$ 37,131	\$ 56,106
7A2: 95% of clients receiving Benefits and Enrollment case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%		12020: 1 15-minute Office-based benefits counseling other encounter		42	31	1,089	62
						\$ 20,909	\$ 1,935
7A3: 90% of non-medical case management charts will comply with non-medical case management service standards. Outcome: 81.6%							
7A4: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%							
7A5: Offer Benefits and Enrollment case management visits to newly diagnosed PLWH/A who seek medical care.							

Case Management (non-Medical) Continued:

5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)				
a. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: Number/Percentage of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy.	2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
		1402/1482 94.60%	411/457 90%	949/980 96.9%
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression; Number/Percentage of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML, at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
		1238/1482 83.54%	388/457 85%	806/980 82.2%
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable				
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed				

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Medical Transportation Services		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 8		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: D; Activities: D.1, D.2, D.4.				\$ 80,547	\$ 96,008		
Service Category Goal: 8A: To assist PLWH/A in accessing HIV primary care and other services through the provision of assisted and unassisted transportation services.									
8B: To assist PLWH/A, in rural counties, in accessing HIV primary care and other services through the provision of assisted and unassisted transportation services. All services objectives identified for Goal A will also apply to this goal.									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual	Allocation	Expenditure
8A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.		11050: Vendor paid one-way trips		102	102	16,885	27,198		
8A2: To enable PLWH/A to access medical and other HRSA approved essential services.		11025: Vendor paid transportation dollar		323	395	35,227	43,796		
8A3: 100% of transportation service providers will comply with Medical Transportation service standards. Outcome: 86.5%		11025r: Vendor paid transportation dollar in rural counties		85	109	10,759	12,880		
8A4: 75% of clients showing evidence of need for transportation services will receive transportation for HIV/AIDS related care appointments. Outcome: 86%		11055: 1 - 15 minutes Face to Face Transportation Service		50	31	1,534	1,956		
				11056: 1 - 15 minutes Other Transportation Service Encounter		15	28	625	1,136
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)									
a. (Pick Outcome from dropdown list in the cell to the right)		HAB Systems-Level Measures: Linkage to HIV Medical Care within 30 days		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				75/76 98.7%		362/426 85%		17/17 100%	
b. (Pick Outcome from dropdown list in the cell to the right)		HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				305/437 69.79%		351/426 82.5%		247/563 43.9%	
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable									
<input type="checkbox"/> Diagnosed		<input checked="" type="checkbox"/> Linked to Care		<input checked="" type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy		<input type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Substance Abuse Services - Outpatient		<input checked="" type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 9		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: E, K; Activities: E.4,K.3, K.6.				\$ 210,633	\$ 208,714		
Service Category Goal: 9A: To provide drug and alcohol outpatient treatment for PLWH/A ready to begin treatment, and harm reduction services for those who are not yet ready to begin treatment, in order to increase their opportunities for appropriately accessing HIV primary care and medical therapies and improving health outcomes.									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual	Allocation	Expenditure
9A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.		08001: addition assessment		234	126	351	141	\$ 12,216	\$ 5,402
9A2: Provide outpatient treatment designed to reduce or eliminate alcohol and drug use/abuse by PLWH/A in order to allow initiation of or improve adherence to HIV medication regimens.		08005: 1-hour outpatient counseling		362	216	1,771	662	\$ 69,567	\$ 27,033
9A3: 100% of all substance abuse outpatient service providers will deliver services according to Substance Abuse service standards. Outcome: 81.6%		08006: 90-minute group counseling		176	125	986	559	\$ 32,454	\$ 20,987
9A4: 60% of clients entering outpatient substance abuse services will reduce risk behaviors by self report. Outcome: 74.2% of respondents reported reduced risk behaviors.		08007: 1-hour individual family/significant other counseling		2	1	1	3	\$ 100	\$ 398
		08023: 15-minute intern/other encounter		177	270	2,049	3,795	\$ 93,924	\$ 140,039
		08025: Each HIV+ individual attending a group sessions		15	30	20	197	\$ 2,372	\$ 14,855

Substance Abuse - Outpatient Continued:

<p>9A8: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%</p>							
<p>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</p>							
<p>a. (Pick Outcome from dropdown list in the cell to the right)</p>	<p>HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.</p>	<p>2016 Baseline: Numerator/Denominator, % 241/327 73.7%</p>	<p>Target: Numerator/Denominator, % 271/328 82.5%</p>	<p>Actual: Numerator/Denominator, % 163/310 52.6%</p>			
<p>b. (Pick Outcome from dropdown list in the cell to the right)</p>	<p>HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.</p>	<p>2016 Baseline: Numerator/Denominator, % 262/327 80.12%</p>	<p>Target: Numerator/Denominator, % 279/328 85%</p>	<p>Actual: Numerator/Denominator, % 251/310 81%</p>			
<p>c. (Pick Outcome from dropdown list in the cell to the right)</p>		<p>2016 Baseline: Numerator/Denominator, %</p>	<p>Target: Numerator/Denominator, %</p>	<p>Actual: Numerator/Denominator, %</p>			
<p>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</p>							
<p><input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input checked="" type="checkbox"/> Retained in Care <input type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed</p>							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report							
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018								
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018								
Service Category Name: Housing		<input type="checkbox"/> Part A Core		<input checked="" type="checkbox"/> Part A Support		<input type="checkbox"/> MAI Core		<input type="checkbox"/> MAI Support		Total Service Category Funds	
								Allocation		Expenditure	
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other											
Service Category Priority Number: 10		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9, 11; Strategy: D, I; Activities: D.4,I.1.						\$ 21,000		\$ 12,216	
Service Category Goal: 10A: Provide treatment adherence services to pediatric PLWH/A and their families to improve clients' health outcomes.											
1. Objectives:		2. Service Unit Definition:		3. Quantity:				4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be		Provide the approximate amount of funds to be used to			
				Target	Actual	Target	Actual	Allocation		Expenditure	
10A1: 100% of providers will comply with applicable Housing Assistance service standards.		11016: Vendor paid lodging dollar		36	24	19,091	11,106	\$ 21,000		\$ 12,216	
10A2: 100% of clients receiving housing assistance will maintain routine medical care (2 HIV+ visits per year at least three months apart). Outcome: 45.45%		11016r: Vendor paid lodging dollar in Rural Counties		-	-	-	-	\$ -		\$ -	
10A3: 60% of clients receiving housing assistance will report improvements on or maintenance of their general health status and/or quality of life. Outcome: No responses were received											
10A4: 85% of all clients receiving housing assistance ill report improved or stable housing as compared to their housing situation in the previous year. Outcome: No responses were received											
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)											
a. (Pick Outcome from dropdown list in the cell to the right)		HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %			
				30/44 68.18%	30/36 82.5%		65/143 45.5%				
b. (Pick Outcome from dropdown list in the cell to the right)		HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %			
				29/44 65.9%	31/36 85%		109/143 76.2%				
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %			
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable											
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input checked="" type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy		<input checked="" type="checkbox"/> Virally Suppressed			

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Child Care Services		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
				Allocation		Expenditure	
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 11		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: D, I; Activities: D.4, I.1.				\$ 35,696	\$ 35,691
Service Category Goal: 11A: Provide financial support for child care for children of PLWH/A (or families of youth PLWH/A) in order to improve clients' ability to access and maintain primary and support service care.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target	Actual	Target	Actual
						Allocation	Expenditure
11A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.		11026: 1 Vendor Paid Child Care Dollar		35	37	32,451	32,445
						\$ 35,696	\$ 35,691
11A2: 100% of Child Care service providers will comply with Child Care service standards. Outcome: 100%							
11A3: 100% of clients requesting Child Care services for medical or support service appointment will have referrals or financial assistance made available. Outcome: No responses were received							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)		HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	
				28/35 80%		31/38 81.6%	
				Actual: Numerator/Denominator, %		19/37 51.4%	
b. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	
				Actual: Numerator/Denominator, %			
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input checked="" type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy	
<input type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Emergency Financial Assistance		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
				Allocation		Expenditure			
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 12		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: D, I; Activities: D.4, I.1.				\$ 45,785	\$ 68,619		
Service Category Goal: 12A: To provide short-term and emergency assistance payments to address emergency financial difficulties of clients in order to provide stability needed to access or maintain HIV care and treatment services.									
12B: To provide short-term and emergency assistance payments to address emergency financial difficulties of clients in order to provide stability needed to access or maintain HIV care and treatment services in rural counties.									
12C: To stabilize living situations to ensure maintenance of medical care and treatment adherence through the provision of short-term housing assistance.									
12D: To stabilize living situations to ensure maintenance of medical care and treatment adherence through the provision of short-term housing assistance in rural counties. All service objectives identified for Goal A will also apply to this goal.									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual		
						Allocation	Expenditure		
12A1: Document and track all service provision to clients through the web-based database in order to		11029: Other critical need		80	69	18,182	21,608		
12A2: Provide prescription medication reimbursements.		11029r: Other critical need in Rural Counties		77	128	23,441	40,774		
12A3: Provide financial assistance for other non-Ryan White funded critical needs.									
12A4: 100% of providers will comply with applicable Emergency Financial Assistance service standards.									
Outcome: 100%									
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)									
a. (Pick Outcome from dropdown list in the cell to the right)		HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart. (Other Critical Need)		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				117/183 63.93%		118/145 81.6%		96/241 40%	
b. (Pick Outcome from dropdown list in the cell to the right)									
c. (Pick Outcome from dropdown list in the cell to the right)									
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable									
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input checked="" type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy		<input type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Medical Nutritional Therapy		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 13		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: D, F, G, H: Activities: D.1.,D.2.,F.1.,F.2.,G.1.,G.2.,H.4.				\$ 10,000	\$ 10,000		
Service Category Goal: 13A: To maintain or improve the health status and quality of life of clients accessing Medical Nutritional Therapy.									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual	Allocation	Expenditure
13A1: Document and track all service provisions to clients through the web-based database in order to prevent client from withdrawing from care.		23001: 1 15-minute Medical Nutritional Therapy face-to-face		0	0	0	0		
13A2: 100% of providers will comply with applicable Medical Nutritional Therapy service standards. Outcome: 85.7%		23002: 1 15-minute Medical Nutritional Therapy other encounter		0	0	0	0		
13A3: 70% of client receiving Medical Nutritional Therapy will maintain routine medical care. Outcome: 89.6%		23003: 1 Vendor Paid Nutrition Voucher dollar		25	184	9090	9,091		
13A4: 100% of clients receiving Medical Nutritional Therapy will have an individualized nutritional plan developed within 60 days of assessment by a licensed registered dietitian. Outcome: 100%									
13A5: 100% of clients will be reassessed as needed at six months with a copy of the reassessment maintained in the client's record, signed and dated by the client and dietitian. Outcome: 100%									
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)									
a. (Pick Outcome from dropdown list in the cell to the right)		HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				364/421 86.5%		21/25 85%		313/364 86%	
b. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable									
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy		<input checked="" type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Health Education and Risk Reduction Services		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 14		Current Comprehensive Plan Strategy: Objective: 2, 3, 4, 6; Strategy: C, D; Activities: C.3, D.1, D.2., D.3., D.4.				\$ 4,769	\$ 4,769
Service Category Goal: 14A: To maintain or improve health status and quality of life for clients accessing Health Education and Risk Reduction services.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target		Actual	
				Target		Actual	
				Allocation		Expenditure	
14A1: Provide Health Education counseling to HIV+ clients to improve their health.		19001: 1 PCRS 15-minute face-to-face		5	40	26	110
						\$ 2,384	\$ 3,624
14A2: Provide Risk Reduction counseling to prevent HIV+ clients from transmitting HIV.		19002: 1 PCRS 15-minute other encounter		10	23	18	34
						\$ 2,385	\$ 1,145
14A3: 100% of Health Education and Risk Reduction (PCRS) providers will comply with Health Education and Risk Reduction services standards. Outcome: 50%							
14B1: 100% of newly identified HIV+ clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%							
14B2: 100% of all referrals and activities taken to follow-up with high-risk HIV- and HIV+ clients shall be documented. Outcome: 100%							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)		HAB Systems-Level Measures: Linkage to HIV Medical Care within 30 days		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	
				75/76 98.7%		13/15 85%	
				26/26 100%			
b. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed <input checked="" type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input type="checkbox"/> Prescribed Antiretroviral Therapy <input type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report				
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018					
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018					
Service Category Name: Outreach Services		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds			
						Allocation	Expenditure		
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other									
Service Category Priority Number: 15		Current Comprehensive Plan Strategy: Objective: 2, 4, 6; Strategy: D; Activities: D.1, D.2, D.3, D.4.				\$ 17,172	\$ 17,172		
Service Category Goal: 15A: Identify HIV+ clients who are not in medical care. 15B: Maintain or improve health status and quality of life for HIV+ clients by assisting them in accessing care. 15C: Provide referrals to medical and support services to assist clients in overcoming barriers to care.									
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:			
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be			
				Target	Actual	Target	Actual	Allocation	Expenditure
15A1: Document and track all service provision to HIV+ clients through the web-based database in order to prevent clients from withdrawing from care.		06005: 1 15-minute Outreach face-to-face		12	20	826	536		
						\$ 8,586	\$ 15,065		
15A2: 100% of all referrals and linkages to services for HIV+ clients receiving Outreach services shall be documented. Outcome 100%		06006: 1 15-minute Outreach other encounter		20	39	763	87		
						\$ 8,586	\$ 2,108		
15A3: 100% of HIV+ clients who do not have an identified primary care provider will receive a referral to an appropriate physician or clinic. Outcome: 100%									
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)									
a. (Pick Outcome from dropdown list in the cell to the right)		HAB Systems-Level Measures: Linkage to HIV Medical Care within 30 days		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
				75/76 98.7%		27/32 85%		6/6 100%	
b. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable									
<input type="checkbox"/> Diagnosed		<input checked="" type="checkbox"/> Linked to Care		<input type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy		<input type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Outreach Services - MAI		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
				Allocation		Expenditure	
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 16		Current Comprehensive Plan Strategy: Objective: 2, 4, 6; Strategy: D; Activities: D.1, D.2, D.3, D.4.				\$ 3,597	\$ 3,597
Service Category Goal: 16A: Identify MAI HIV+ clients who are not in medical care. 16B: Maintain or improve health status and quality of life for MAI HIV+ clients by assisting them in accessing care. 16C: Provide referrals to medical and support services to assist MAI clients in overcoming barriers to care.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target	Actual	Target	Actual
16A1: Document and track all service provision to MAI HIV+ clients through the web-based database in order to prevent clients from withdrawing from care.		06007: 1 15-minute MAI face-to-face		2	20	65	249
				\$ 1,798	\$ 2,726		
16A2: 100% of all referrals and linkage to services for MAI HIV+ clients receiving Outreach services shall be documented. Outcome: 100%		06008: 1 15-minute MAI other encounter		2	29	66	71
				\$ 1,799	\$ 871		
16A3: 100% of MAI HIV+ clients who do not have an identified primary care provider will receive a referral to an appropriate physician or clinic. Outcome: 100%							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)		HAB Systems-Level Measures: Linkage to HIV Medical Care within 30 days		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
				75/76 98.7%		3/4 85%	6/6 100%
b. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
c. (Pick Outcome from dropdown list in the cell to the right)				2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed		<input checked="" type="checkbox"/> Linked to Care		<input type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy	
						<input type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Substance Abuse Services - Residential		<input type="checkbox"/> Part A Core	<input checked="" type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
				Allocation		Expenditure	
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 17		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: E, K; Activities: E.4,K.3., K.6.				\$ 56,765	\$ 51,081
Service Category Goal: 17A: To provider residential drug and alcohol treatment to PLWH/A ready to begin treatment in order to increase their opportunities for appropriately accessing HIV primary care and medication therapies and improving health outcome							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be	
				Target	Actual	Target	Actual
17A1: Document and track all service provision to clients through the web-based database in order to prevent clients from withdrawing from care.		08002: 1 physical assessment		21	24	35.56	27
						\$ 4,267	\$ 3,240
17A2: Provide residential treatment programs for clients who require intensive alcohol/drug treatment.		08004: 1 hour residential detox		21	24	7751.49	7942
						\$ 46,819	\$ 47,841
17A3: 100% of substance abuse service provides will deliver services according to Substance Abuse service standards. Outcome: 89.5%		08009r - 1 hour rural residential detox		2	0	5162.73	0
						\$ 5,679	\$ -
17A4: 25% of clients entering residential substance abuse treatment will complete residential treatment program. Outcome: 66% of clients completed detox services. 54.3% completed residential substance abuse treatment services.							
17A5: 100% of residential substance abuse clients who do not have a primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 91.94%							

Substance Abuse Residential Continued:

5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service				
a. (Pick Outcome from dropdown list in the cell to the right)	HHS Measure: Retention in HIV Medical Care: Number/Percent of HIV+ Ambulatory Care patients, regardless of age, with two visits during the measurement year at least three months apart.	2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
		24/36 66.67%	15/18 82.5%	33/62 53.2%
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
		28/36 77.78%	15/18 85%	44/62 71%
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable				
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input checked="" type="checkbox"/> Retained in Care <input type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed				

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report			
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018				
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018				
Service Category Name: Medical Case Management - MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input checked="" type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input checked="" type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 6		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: F, I; Activities: F.1, I.1.				\$ 102,341	\$ 93,060
Service Category Goal: 6A: To Provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A.							
6B: Maintain or improve health status and quality of life of clients accessing integrated medical case management.							
6C: To provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided	
				Target	Actual	Target	Actual
6A1: 70% of clients will be assessed using an acuity scale. Outcome: 100%		14024: 1 15-minute MAI face-to-face encounter		101	148	9,864	4,583
						\$ 76,756	\$ 43,795
6A2: 70% of clients will have a care plan developed based upon acuity scale assessment. Outcome: 99.2%		14025: 1 15-minute MAI other encounter		40	176	3,288	5,862
						\$ 25,585	\$ 49,265
6A3: 100% of clients will receive medical case management follow-up. Outcome: 100%							
6A4: 70% of clients receiving medical case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%							
6A5: 70% of medical case management charts will comply with medical case management service standards. Outcome: 83.9%							
6A6: At least 35% of Sacramento County's Medical Case Management funds will be spent on field-based medical case management services. Outcome: 100%							

MAI Medical Case Management Continued:

6B1: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%							
6B2: Offer field-based medical case management visit to newly diagnosed PLWH/A who do not seek care within six months of their initial intake.							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, % 208/310 67.1%	Target: Numerator/Denominator, % 120/141 85%	Actual: Numerator/Denominator, % 136/185 73.5%			
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy who received MAI Medical Case Management Services.	2016 Baseline: Numerator/Denominator, % 302/310 97.4%	Target: Numerator/Denominator, % 127/141 90%	Actual: Numerator/Denominator, % 183/185 98.9%			
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %	Target: Numerator/Denominator, %	Actual: Numerator/Denominator, %			
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report			
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018				
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018				
Service Category Name: Medical Case Management - MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input checked="" type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 6		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: F, I; Activities: F.1, I.1.				\$ 34,140	\$ 46,496
Service Category Goal: 6A: To Provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A. 6B: Maintain or improve health status and quality of life of clients accessing integrated medical case management. 6C: To provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided	
				Target	Actual	Target	Actual
6A1: 70% of clients will be assessed using an acuity scale. Outcome: 100%		14024: 1 15-minute MAI face-to-face encounter		35	83	3164	2499
						\$ 25,605	\$ 22,746
6A2: 70% of clients will have a care plan developed based upon acuity scale assessment. Outcome: 99.2%		14025: 1 15-minute MAI other encounter		15	87	1055	2692
						\$ 8,535	\$ 23,751
6A3: 100% of clients will receive medical case management follow-up. Outcome: 100%							
6A4: 70% of clients receiving medical case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%							
6A5: 70% of medical case management charts will comply with medical case management service standards. Outcome: 83.9%							
6A6: At least 35% of Sacramento County's Medical Case Management funds will be spent on field-based medical case management services. Outcome: 100%							

MAI Medical Case Management Continued:

6B1: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%							
6B2: Offer field-based medical case management visit to newly diagnosed PLWH/A who do not seek care within six months of their initial intake.							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, % 118/173 68.2%	Target: Numerator/Denominator, % 43/50 85%	Actual: Numerator/Denominator, % 74/94 78.7%			
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy who received MAI Medical Case Management Services.	2016 Baseline: Numerator/Denominator, % 170/173 98.3%	Target: Numerator/Denominator, % 45/50 90%	Actual: Numerator/Denominator, % 91/94 96.8%			
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, % 	Target: Numerator/Denominator, % 	Actual: Numerator/Denominator, % 			
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report			
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018				
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018				
Service Category Name: Medical Case Management - MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input checked="" type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 6		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: F, I; Activities: F.1, I.1.				\$ 6,913	\$ 2,118
Service Category Goal: 6A: To Provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A. 6B: Maintain or improve health status and quality of life of clients accessing integrated medical case management. 6C: To provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided	
				Target	Actual	Target	Actual
6A1: 70% of clients will be assessed using an acuity scale. Outcome: 100%		14024: 1 15-minute MAI face-to-face encounter		10	11	587	121
6A2: 70% of clients will have a care plan developed based upon acuity scale assessment. Outcome: 99.2%		14025: 1 15-minute MAI other encounter		4	14	196	90
6A3: 100% of clients will receive medical case management follow-up. Outcome: 100%							
6A4: 70% of clients receiving medical case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%							
6A5: 70% of medical case management charts will comply with medical case management service standards. Outcome: 83.9%							
6A6: At least 35% of Sacramento County's Medical Case Management funds will be spent on field-based medical case management services. Outcome: 100%							

MAI Medical Case Management Continued:

6B1: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%							
6B2: Offer field-based medical case management visit to newly diagnosed PLWH/A who do not seek care within six months of their initial intake.							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, % 12/17 70.6%	Target: Numerator/Denominator, % 11/14 85%	Actual: Numerator/Denominator, % 11/15 73.3%			
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy who received MAI Medical Case Management Services.	2016 Baseline: Numerator/Denominator, % 	Target: Numerator/Denominator, % 	Actual: Numerator/Denominator, % 14/15 93.3%			
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, % 	Target: Numerator/Denominator, % 	Actual: Numerator/Denominator, % 			
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report		<input checked="" type="checkbox"/> Annual Progress Report			
Grantee Name: Sacramento Transitional Grant Area			Fiscal Year: 2017-2018				
Budget Period: 3/1/2017 - 2/28/2018			Time Frame: 3/1/2017 - 2/28/2018				
Service Category Name: Medical Case Management - MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input checked="" type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input checked="" type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 6		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: F, I; Activities: F.1, I.1.				\$ 6,700	\$ 10,857
Service Category Goal: 6A: To Provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A. 6B: Maintain or improve health status and quality of life of clients accessing integrated medical case management. 6C: To provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided	
				Target	Actual	Target	Actual
6A1: 70% of clients will be assessed using an acuity scale. Outcome: 100%		14024: 1 15-minute MAI face-to-face encounter		6	9	700	788
6A2: 70% of clients will have a care plan developed based upon acuity scale assessment. Outcome: 99.2%		14025: 1 15-minute MAI other encounter		2	11	235	771
6A3: 100% of clients will receive medical case management follow-up. Outcome: 100%							
6A4: 70% of clients receiving medical case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%							
6A5: 70% of medical case management charts will comply with medical case management service standards. Outcome: 83.9%							
6A6: At least 35% of Sacramento County's Medical Case Management funds will be spent on field-based medical case management services. Outcome: 100%							

MAI Medical Case Management Continued:

<p>6B1: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%</p>							
<p>6B2: Offer field-based medical case management visit to newly diagnosed PLWH/A who do not seek care within six months of their initial intake.</p>							
<p>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</p>							
<p>a. (Pick Outcome from dropdown list in the cell to the right)</p>	<p>HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.</p>	<p>2016 Baseline: Numerator/Denominator, % 12/16 75%</p>		<p>Target: Numerator/Denominator, % 6/8 85%</p>		<p>Actual: Numerator/Denominator, % 6/11 54.6%</p>	
<p>b. (Pick Outcome from dropdown list in the cell to the right)</p>	<p>HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy who received MAI Medical Case Management Services.</p>	<p>2016 Baseline: Numerator/Denominator, % 16/16 100%</p>		<p>Target: Numerator/Denominator, % 7/8 90%</p>		<p>Actual: Numerator/Denominator, % 10/11 90.9%</p>	
<p>c. (Pick Outcome from dropdown list in the cell to the right)</p>		<p>2016 Baseline: Numerator/Denominator, %</p>		<p>Target: Numerator/Denominator, %</p>		<p>Actual: Numerator/Denominator, %</p>	
<p>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</p>							
<p><input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed</p>							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name: Medical Case Management - MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input checked="" type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input checked="" type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Priority Number: 6		Current Comprehensive Plan Strategy: Objective: 6, 7, 8, 9; Strategy: F, I; Activities: F.1, I.1.				\$ 5,288	\$ 2,853
Service Category Goal: 6A: To Provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A. 6B: Maintain or improve health status and quality of life of clients accessing integrated medical case management. 6C: To provide culturally appropriate, comprehensive medical case management services to eligible PLWH/A in rural counties. All services objectives identified for Goals A, B and C will also apply to this goal.							
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above		Define the service unit to be provided		Number of people to be served		Total Number of service units to be provided	
				Target	Actual	Target	Actual
6A1: 70% of clients will be assessed using an acuity scale. Outcome: 100%		14024: 1 15-minute MAI face-to-face encounter		2	3	631	152
6A2: 70% of clients will have a care plan developed based upon acuity scale assessment. Outcome: 99.2%		14025: 1 15-minute MAI other encounter		1	4	211.1	190
6A3: 100% of clients will receive medical case management follow-up. Outcome: 100%							
6A4: 70% of clients receiving medical case management services will be referred to all appropriate (non-Ryan White) entitlement programs to maximize benefits. Outcome: 100%							
6A5: 70% of medical case management charts will comply with medical case management service standards. Outcome: 83.9%							
6A6: At least 35% of Sacramento County's Medical Case Management funds will be spent on field-based medical case management services. Outcome: 100%							

MAI Medical Case Management Continued:

6B1: 100% of clients who do not have an identified primary care provider at intake will receive a referral to an appropriate physician or clinic. Outcome: 100%							
6B2: Offer field-based medical case management visit to newly diagnosed PLWH/A who do not seek care within six months of their initial intake.							
5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)							
a. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: HIV Viral Load Suppression: Number/Percent of HIV+ patients, regardless of age, with an HIV viral load less than 200 copies/ML at last HIV Viral load test during the measurement year.	2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
		7/7 100%		2/3 85%		4/4 100%	
b. (Pick Outcome from dropdown list in the cell to the right)	HAB Core Measures: Prescription of HIV Antiretroviral Therapy: No/% of HIV+ patients, regardless of age, prescribed HIV antiretroviral therapy who received MAI Medical Case Management Services.	2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
		7/7 100%		2/3 90%		4/4 100%	
c. (Pick Outcome from dropdown list in the cell to the right)		2016 Baseline: Numerator/Denominator, %		Target: Numerator/Denominator, %		Actual: Numerator/Denominator, %	
6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable							
<input type="checkbox"/> Diagnosed <input type="checkbox"/> Linked to Care <input type="checkbox"/> Retained in Care <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy <input checked="" type="checkbox"/> Virally Suppressed							

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other							
Service Category Name: Clinical Quality Management Activities - Part A		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Service Category Priority Number: N/A		Current Comprehensive Plan Strategy: N/A				\$ 159,160	\$ 151,913
Service Category Name: Clinical Quality Management Activities - Part A MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Service Category Priority Number: N/A		Current Comprehensive Plan Strategy: N/A				\$ 9,140	\$ 9,140
Service Goal: Assess the extent to which HIV health services are consistent with PHS guidelines and develop strategies for ensuring that such services are consistent with the guidelines for improvement in the access to and quality of HIV health services.							
Service Category Name: Grantee Administration - Part A		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Service Category Priority Number: N/A		Current Comprehensive Plan Strategy: N/A				\$ 318,322	\$ 235,242
Service Category Name: Grantee Administration - Part A MAI		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Service Category Priority Number: N/A		Current Comprehensive Plan Strategy: N/A				\$ 18,280	\$ 18,280
1. Objectives:		2. Service Unit Definition:		3. Quantity:		4. Funds:	
List quantifiable time-limited objectives related to the service priorities listed above	Define the service unit to be provided	Number of people to be served		Total Number of service units to be		Provide the approximate amount of funds to be used to	
		Target	Actual	Target	Actual	Allocation	Expenditure
1: All activities associated with the Grantee's support of HIV Health Services Planning Council activities including development of applications for Part A funds, on-going evaluation and development of standards for clinical quality management program, preparation of routine programmatic and Planning Council reports, and compliance with grant conditions are included in the Administrative expenses. an outside contract is used for some identified PC activities, including consultants for Needs Assessment, Comprehensive Plans and Grant Writing assistance.	HIV Health Services Planning Council						
	Grantee Administration						
<input type="checkbox"/> Diagnosed		<input type="checkbox"/> Linked to Care		<input type="checkbox"/> Retained in Care		<input type="checkbox"/> Prescribed Antiretroviral Therapy	
						<input type="checkbox"/> Virally Suppressed	

Ryan White Part A Implementation Plan: Service Category Table

Reporting Requirement:		<input type="checkbox"/> Program Terms Report			<input checked="" type="checkbox"/> Annual Progress Report		
Grantee Name: Sacramento Transitional Grant Area				Fiscal Year: 2017-2018			
Budget Period: 3/1/2017 - 2/28/2018				Time Frame: 3/1/2017 - 2/28/2018			
Service Category Name:		<input type="checkbox"/> Part A Core	<input type="checkbox"/> Part A Support	<input type="checkbox"/> MAI Core	<input type="checkbox"/> MAI Support	Total Service Category Funds	
						Allocation	Expenditure
Rounding Error						\$	(2.00)
Service Category Priority Number: NA		Current Comprehensive Plan Strategy:		NA	\$	3,366,021	\$ 3,329,885

Ryan White Part A Implementation Plan: HIV Care Continuum Table					
Grantee Name: Sacramento Transitional Grant Area		Fiscal Year: 2017		Time Frame: 3/1/2017 - 2/28/2018	
Stages of the HIV Care Continuum	Goal	Outcome			Service Category (One or more may apply)
I. Diagnosed	90%	HIV Positivity*		Late Diagnosis*	Sacramento Ryan White funds do not support Testing and therefore cannot report "Diagnosed" within the Ryan White system. However, 76 clients served by Ryan White were newly diagnosed in 2016. 2017 figures will not be available until July 2018.
		Baseline: %, Numerator/Denominator	Target: %, Numerator/Denominator	Actual: %, Numerator/Denominator	
		N/A	N/A	N/A	
II. Linked to Care	85.0%	Linkage to HIV Medical Care* within 90 days of Diagnosis			Medical Transportation, Outreach, MAI Outreach (for newly diagnosed clients only), Health Education and Risk Reduction Services
		Baseline: %, Numerator/Denominator	Target: %, Numerator/Denominator	Actual: %, Numerator/Denominator	
		103/148 69.6%	65/76 85%	Ryan White: 55/94 58.5% w/in 30 days TGA Epi: 91/94 97% within 1 year	
III. Retained in Care	90.0%	HAB Core Measure: Gap in HIV Medical Visits*			Outpatient Ambulatory Care, Oral Health, Mental Health, Medical Case Management, Medical Transportation, Outpatient Substance Abuse, Housing, Child Care, Emergency Financial Assistance, Residential Substance Abuse
		Baseline: %, Numerator/Denominator	Target: %, Numerator/Denominator	Actual: %, Numerator/Denominator	
		1309/1674 78.2%	1773/1970 90%	Ryan White: 1,019/2,454 41.52% TGI Epi: 2,487/4,363 57%	
IV. Prescribed ART	90.0%	HAB Core Measure: Prescription of Antiretroviral Therapy (ART) Among Persons in HIV Medical Care*			Outpatient Ambulatory Care, Medical Case Management, Non-Medical Case Management, Outpatient Substance Abuse, MAI Medical Case Management
		Baseline: %, Numerator/Denominator	Target: %, Numerator/Denominator	Actual: %, Numerator/Denominator	
		2118/2654 79.8%	2,388/2654 90%	Ryan White: 2,334/2,454 95.11% TGA Epi: Not tracked	
V. Virally Suppressed	80.0%	HAB Core Measure: HIV Viral Load Suppression Among Persons in HIV Medical Care*			Outpatient Ambulatory Care, Health Insurance Premium and Cost Sharing Assistance, Medical Case Management, Non-Medical Case Management, Outpatient Substance Abuse, Housing, Medical Nutritional Therapy, Residential Substance Abuse, MAI Medical Case Management
		Baseline: %, Numerator/Denominator	Target: %, Numerator/Denominator	Actual: %, Numerator/Denominator	
		2159/2654 81.4%	2255/2654 85%	Ryan White: 2,102/2,454 85.66% TGA Epi: 2,967/4,363 68%	

Note: Ryan White actual figures are for clients still active at year-end.

- HAB Core Measures: HIV Viral Load Suppression
- HAB Core Measures: Prescription of HIV Antiretroviral Therapy
- HAB Core Measures: HIV Medical Visit Frequency
- HAB Core Measures: Gap in HIV Medical Visits
- HAB Core Measures: Pneumocystis jiroveci Pneumonia (PCP) Prophylaxis
- HHS Measure: HIV Postivity
- HHS Measure: Retention in HIV Medical Care
- HHS Measure: Late HIV Diagnosis
- HHS Measure: Viral Load Suppression Among Persons in HIV Medical Care
- HHS Measure: Housing Status
- HHS Measure: Antiretroviral Therapy (ART) Among Persons in HIV Medical Care
- HHS Measure: Linkage to HIV Medical Care
- HAB ADAP Measures: ADAP: Application Determination
- HAB ADAP Measures: ADAP: Eligibility Recertification
- HAB ADAP Measures: ADAP: Formulary
- HAB ADAP Measures: ADAP: Inappropriate Antiretroviral Regimen Components Resolved by ADAP
- HAB Oral Care Measures: Oral Health Services: Dental and Medical History
- HAB Oral Care Measures: Oral Health Services: Dental Treatment Plan
- HAB Oral Care Measures: Oral Health Services: Oral Health Education
- HAB Oral Care Measures: Oral Health Services: Periodontal Screening or Examination
- HAB Oral Care Measures: Oral Health Services: Phase 1 Treatment Plan Completion
- Modified HAB ADAP measures (i.e. clients enrolled in the LPAP)
- HAB/ HHS Linked to Care Measure
- HAB Systems-Level Measures: HIV Positivity
- HAB Systems-Level Measures: Housing Status

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- HAB Systems-Level Measures: Linkage to HIV Medical Care
- HAB Systems-Level Measures: Late HIV Diagnosis
- HAB MCM Care Plan Measure: Medical Case Management: Care Plan
- HAB MCM Care Plan Measure: Gap in HIV medical visits
- HAB MCM Care Plan Measure: HIV Medical Visit Frequency
- HAB MCM Measure: Medical Case Management: Care Plan
- HAB MCM Measure: Gap in HIV medical visits
- HAB MCM Measure: HIV Medical Visit Frequency
- HHS Housing Measure
- HAB Systems-Level Housing Measure
- HAB Systems-Level Late Diagnosis Measure
- HAB Systems- Level HIV test results
- HHS Linkage to HIV Medical Care