



County of San Diego

NICK MACCHIONE, FACHE

AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

WILMA J. WOOTEEN, M.D., M.P.H.

PUBLIC HEALTH OFFICER

3851 ROSECRANS STREET, MAIL STOP P-578

HIV PLANNING GROUP (HPG) PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE MEETING PACKET

Thursday, February 09, 2023 3:00 PM

NOTE: This meeting is audio and video recorded.

Online meeting

A quorum for this committee is 7

Committee Members: Beth Davenport, Alberto Cortes, Felipe Garcia-Bigley, Pam Highfill, Dr. Delores Jacobs (Chair), Cinnamen Kubricky, Chris Mueller, Raul Robles, James Rucker, Karla Quezada-Torres, Regina Underwood, Rhea Van Brocklin, Freddy Villafan

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Continuation of Remote Meetings for Brown Act Boards and Commissions

State law requires local agency legislative bodies (which includes the HPG) to comply with the state's open meeting law referred to as the Ralph M. Brown Act (also called the "Brown Act"). Since March 2020, most legislative bodies have been operating under Executive Orders which suspended certain Brown Act provisions on teleconferencing allowing members to participate remotely. That Executive Order ended on September 30, 2021.

As of October 1, 2021, AB 361 allows for a continuation of teleconference meetings in certain circumstances. Following is a summary of AB 361 and its impact on public meetings and the steps required to utilize the teleconferencing option offered in AB 361.

At the next meeting, the HPG or Committee will need to take the actions detailed below if the members desire to continue meeting remotely.

I. Ordinary Brown Act Rules for Teleconferencing ("General Teleconferencing Rule")

Under the ordinary operation of the Brown Act (Gov. Code §54953(b)) a legislative body may use teleconferencing under the following circumstances:

- a. Post agendas at all teleconference locations;
- b. All teleconferenced locations are listed in the notice and agenda of the meeting;
- c. At least a quorum of members are located within the jurisdiction of the legislative body; and
- d. Members of the public are allowed to speak at each teleconferenced location.

II. Governor's Executive Orders Authorized Simplified Teleconferencing Rules, But These Ended on Sept. 30, 2021.

The County and other legislative bodies throughout the state have been using a simplified teleconferencing method, authorized by the Governor's Executive Orders related to the COVID-19 pandemic. This allowed members of legislative bodies attend meetings remotely without following the General Teleconferencing Rule set forth above.

III. New Teleconferencing Method Available Effective October 1, 2021, and Actions HPG and Committees Can Take ("Special Teleconferencing Rule")

Effective October 1, 2021, AB 361 amends Government Code section 54953 to add subsection (e) which allows suspension of the General Teleconferencing Rule listed above if any of the following circumstances exist (underlining added):

- a. There is a proclaimed state of emergency and state or local officials have imposed or recommended measures to promote social distancing; or
- b. Legislative body, during a proclaimed state of emergency, holds a meeting for the purposes of determining by majority vote, that as a result of the emergency meeting in person would present imminent risks to the health or safety of attendees; or

- c. Legislative body, during a proclaimed state of emergency, has previously determined (by majority vote) that as a result of the emergency meeting in person would present imminent risks to the health or safety of attendees.

After the first meeting, to continue to suspend the General Teleconferencing Rule and use the Special Teleconferencing Rule, the legislative body must make findings, at least every 30 days after that first meeting. The specific findings required are: 1) that legislative body has reconsidered the circumstances of the state of emergency; and 2) i. the state of emergency continues to directly impact the ability of members to meet safely in person; or ii. state or local officials continue to impose or recommend measures to promote social distancing.

IV. Operation of the Special Teleconferencing Rule

If a Brown Act body suspends the General Teleconferencing Rule as allowed under subsection (e), then the legislative body must (underlining added):

- a. Notice the meeting as otherwise required by the Brown Act;
- b. Agenda must identify and include an opportunity for all persons to attend via a call-in option or an internet based service option;
- c. Allow members of the public to access meetings and an opportunity to address the legislative body directly as provided in the notice (call in or internet);
- d. Conduct teleconferenced meetings in a manner that protects the statutory and constitutional rights of the parties;
- e. In the event of a disruption that prevents broadcasting or call-in or internet based service; actions cannot be taken. Any action taken during a disruption may be challenged pursuant to 54960.1;
- f. If a legislative body provides a timed public comment period for each agenda item, it cannot close the public comment period for the agenda or the ability to register on that item until the timed public comment period has elapsed (not likely applicable);
- g. If a legislative body provides a general public comment period, public comment must remain open until public comment period closes; and
- h. If a legislative body provides public comment on each agenda item, it must allow a reasonable time to register and speak (so likely until the matter is voted on).

V. Dr. Wooten has Issued a Social Distancing Recommendation, So Findings Have Been Met In Order to Use the Special Teleconferencing Rule

As of October 1, 2021, the elements to meet under the Special Teleconferencing Rule have been met. There is currently a State of Emergency and Dr. Wooten, the County's Public Health Officer, released a health recommendation on September 23, 202, which stated that utilizing teleconferencing options for public meetings is an effective and recommended social distancing measure to facilitate participation in public affairs and encourage participants to protect themselves and others from the COVID-19 disease.

VI. Next Steps

Under AB 361, on or after October 1, 2021, the first meeting of a legislative body under AB 361 can occur under the Special Teleconferencing Rule without anything

in particular on the agenda. In this case, Staff should note to the board that it is meeting pursuant to the Special Teleconferencing Rule and staff will bring back any future findings the board may need to take to continue to operate under the Special Teleconferencing Rule (i.e. within 30 days).

Alternatively, if time allows and the Chair approves, when the HPG or Committee first meets, an item will be placed on the agenda to determine whether the board wants to utilize the Special Teleconference Rule and if so, to adopt the initial Resolution.



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HEALTH OFFICER TELECONFERENCING RECOMMENDATION

COVID-19 disease prevention measures, endorsed by the Centers for Disease Control and Prevention, include vaccinations, facial coverings, increased indoor ventilation, handwashing, and physical distancing (particularly indoors).

Since March 2020, local legislative bodies—such as commissions, committees, boards, and councils—have successfully held public meetings with teleconferencing as authorized by Executive Orders issued by the Governor. Using technology to allow for virtual participation in public meetings is a social distancing measure that may help control transmission of the SARS-CoV-2 virus. Public meetings bring together many individuals (both vaccinated and potentially unvaccinated), from multiple households, in a single indoor space for an extended time. For those at increased risk for infection, or subject to an isolation or quarantine order, teleconferencing allows for full participation in public meetings, while protecting themselves and others from the COVID-19 virus.

Utilizing teleconferencing options for public meetings is an effective and recommended social distancing measure to facilitate participation in public affairs and encourage participants to protect themselves and others from the COVID-19 disease. This recommendation is further intended to satisfy the requirement of the Brown Act (specifically Gov't Code Section 54953(e)(1)(A)), which allows local legislative bodies in the County of San Diego to use certain available teleconferencing options set forth in the Brown Act.

September 23, 2021


Wilma J. Wooten, M.D., M.P.H.
Public Health Officer
County of San Diego

Conflict of Interest Priority Setting and Resource Allocation Committee

Name	Conflict of Interest
Acevedo, Allan	<ul style="list-style-type: none"> • None
Cortes, Alberto	<ul style="list-style-type: none"> • Medical Nutrition Therapy • Emergency Financial Assistance • Food Bank/Home Delivered Meals
Davenport, Beth	<ul style="list-style-type: none"> • Mental Health • Non-Medical Case Management • Medical Case Management • Peer Navigation
Garcia-Bigley, Felipe	<ul style="list-style-type: none"> • EIS: Minority AIDS Initiative • Early Intervention Services, Regional Services • Home-Based Health Care Coordination • Medical Case Management • Mental Health Counseling/Therapy • Mental Health: Psychiatric Medication Management • Non-Medical Case Management Service • Oral Health • Outpatient Ambulatory Health Services: Medical Specialty • Outpatient Ambulatory Health Services: Primary Care • Peer Navigation (Referral for Healthcare and Support Services) • Transportation: Assisted and Non-Assisted
Highfill, Pam	<ul style="list-style-type: none"> • Substance Use Treatment: Residential
Jacobs, Dr. Delores	<ul style="list-style-type: none"> • None
Kubricky, Cinnamen	<ul style="list-style-type: none"> • None
Mueller, Chris	<ul style="list-style-type: none"> • Medical Case Management, including Treatment Adherence Services • Outpatient/Ambulatory Health Services (Primary Care) • Medical Transportation • Non-Medical Case Management Service • Medical Specialty • Psychiatric Services
Quezada-Torres, Karla	<ul style="list-style-type: none"> • None
Robles, Raul	<ul style="list-style-type: none"> • None

Name	Conflict of Interest
Rucker, James	<ul style="list-style-type: none"> • EIS: Minority AIDS Initiative • Early Intervention Services, Regional Services • Home-Based Health Care Coordination • Medical Case Management • Mental Health Counseling/Therapy • Mental Health: Psychiatric Medication Management • Non-Medical Case Management Service • Oral Health • Outpatient Ambulatory Health Services: Medical Specialty • Outpatient Ambulatory Health Services: Primary Care • Peer Navigation (Referral for Healthcare and Support Services) • Transportation: Assisted and Non-Assisted
Underwood, Regina	<ul style="list-style-type: none"> • Medical Case Management, including Treatment Adherence Services • Mental Health Services • Substance Abuse Outpatient Care • Medical Transportation • Non-Medical Case Management Service • Outreach Services • Peer Navigation • EIS: Regional • EIS: Minority AIDS Initiative
Van Brocklin, Rhea	<ul style="list-style-type: none"> • Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF)
Villafan, Freddy	<ul style="list-style-type: none"> • Medical Case Management • Substance Use Disorder Treatment: Residential • Transportation: Assisted and Unassisted



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PUBLIC HEALTH OFFICER

DRAFT AGENDA SAN DIEGO HIV PLANNING GROUP PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)

Thursday, February 9, 2023 3:00 PM
Meeting by WebEx

This meeting is audio and video recorded.

The Charge of the Priority Setting and Resource Allocation Committee: To review, analyze and consider available data and make recommendations to the HIV Planning Group based upon that data regarding service priorities, service delivery, and funding allocation by service category, including the commitment to addressing racial/ethnic disparities for Black/African American MSM (retention in care, viral load suppression), Latinx MSM (late and simultaneous diagnoses) and transgender/Non-Binary persons (lack of data and non-representative participation).

A quorum for this committee is seven (7)

Committee members: Beth Davenport, Alberto Cortes, Felipe Garcia-Bigley, Pam Highfill, Dr. Delores Jacobs (Chair), Cinnamon Kubricky, Chris Mueller, Raul Robles, James Rucker (co-chair), Karla Quezada-Torres, Regina Underwood, Rhea Van Brocklin, Freddy Villafan

Participants Requesting Spanish Translation: (Must notify support staff 96 hours in advance). You will receive an email with the number to call in.

Participantes que soliciten interpretacion en español: (debe notificar al personal de apoyo con 96 horas de antelacion). Recibirán un correo electronico con el numero de llamada designado.

1. Call to order; introductions; comments from the Chair
2. Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)
 - a) Find that the HPG has reconsidered the circumstances of the State of Emergency
 - b) Find that State and local officials continue to recommend measures to promote social distancing.
3. Reminders:
 - **Review of committee charge**
 - **Committee members Conflicts of interest:** disclose areas of financial interest (e.g., employment); refrain from participation in related votes
 - **Areas that are NOT the purview of this committee:** selection of contractors;

contract details; how contractors implement contracted services (staff salaries, etc.)
These are the sole purview of the Recipient.

- **Focus on service priorities, not on specific service providers**
 - **Rules for the meeting** (as necessary): committee members are limited to 2 minutes per comment and limited to two comments per item; public comments are welcome at the beginning and prior to each agenda item, limited to two minutes so that all have an opportunity to participate
4. Public comment on non-agenda items (for members of the public)
 5. Sharing our concerns (for committee members)
 6. Approve the meeting agenda for February 9, 2023.
 7. Approve the meeting minutes from January 12, 2023 and Review follow-up items from the minutes
 8. Review committee attendance
 9. Old Business:
 - a) Getting to Zero (GTZ) Community Action Plan:
 1. Expand Ryan White funded mental health services capacity: Increasing rapid access to regional availabilities, decreasing wait times
 2. Explore the feasibility and cost of creating walk-in medical services, mental health services, and substance use treatment services
 - b) **Expenditure data review for the PSRAC process for FY23-24 is now complete.**
(Process for review of previous year (FY22-23) reallocations and data upon which they were based compared to approved budget for upcoming ((FY23-24) year and accompanying data to address potential needs/changes which may be required). Recipient reallocations reviewed and approved by HPG.
 10. Routine Business
 - a) Review Monthly and YTD expenditures and examine for any recommended reallocations. (FYI: This step is for reallocations before November of each year and begins again in March of each year.)
 - i. Review of over/under spending
 - b) Review Monthly and YTD service utilization report
 - c) COVID-19/Monkeypox update
 - d) Affordable Care Act (ACA) update
 - e) HIV Prevention update
 - f) PARS Report
 - g) Review the PSRAC FY 23 Work Plan
 11. New Business
 - a) **Action Item:** Approve the recommendation(s) for the reallocation of Part A funds in FY FY 23-24 (the fiscal year beginning March 1st).
 - b) Review **Co-occurring conditions, poverty, and insurance data** and discuss findings
 12. Suggested items for the PSRAC agenda
 13. Next Meeting: Thursday, **March 9, 2023** Location: TBD
 14. Announcements
 15. Adjournment

Principles for PSRA Decision-Making process	Criteria for the PSRA Decision-Making process
<p>Principles Guiding Decision Making (Priorities should reflect the Principles)</p> <ol style="list-style-type: none"> 1. Decisions are made in an open, transparent process 2. Decisions are based on documented needs (Needs assessment, etc.) 3. Decisions are based on overall needs within the service area, not narrow single focus concerns 4. Decisions include reports from the Needs Assessment committee of the HIV Planning Group. 5. Services should be responsive to the epidemiology of HIV in San Diego, including demographics and region 6. Services must be culturally and linguistically appropriate and responsive 7. Services should focus on the needs of low-income, underserved, and disproportionately impacted populations 8. Services should minimize disparities in the availability and quality of treatment for HIV/AIDS 9. Equitable access to services should be provided across subpopulations and regions 	<p>Criteria for Priority Setting</p> <ol style="list-style-type: none"> 1. Documented Need based on: <ol style="list-style-type: none"> a. Epidemiology of San Diego epidemic (Epi data) b. Needs and unmet needs expressed in needs assessment, including the needs expressed by consumers, not in care and/or from historically underserved communities (Needs assessment data) 2. Minimize disparities in the availability and quality of treatment for HIV/AIDS (Demographic service utilization data compared to HIV/AIDS demographic) 3. Quality, outcome effectiveness, and cost-effectiveness of services (Measured by service category outcomes, CQM, and client satisfaction data by service category) 4. Consumer preferences or priorities for interventions or services, particularly for populations with severe need, historically underserved communities, or those who know their status but are not in care 5. Consistency with the continuum of care

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SAN DIEGO HIV PLANNING GROUP (HPG) PRIORITY SETTING and RESOURCE ALLOCATION COMMITTEE (PSRAC)

Thursday, January 12, 2023
3:00 PM – 5:00 PM

WebEx Meeting DRAFT MINUTES

Quorum is Seven (7)

Committee Members Present: Alberto Cortes / Dr. Beth Davenport / Felipe Garcia-Bigley / Pam Highfill / Dr. Delores Jacobs (Chair) / Cinnamen Kubricky / Karla Quezada-Torres / Raul Robles / James Rucker / Regina Underwood / Rhea Van Brocklin / Freddy Villafan /

Committee Members Absent: Chris Mueller

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 3:01 p.m. and noted that a quorum was established.	
2. Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)	<p>All votes at the meeting were taken by roll call; committee members' names were called out verbally, then individual voice votes were noted and recorded.</p> <p>Action: Continuance of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)</p> <ul style="list-style-type: none"> a. Find that the HPG has reconsidered the circumstances of the State of Emergency b. Find that State and local officials continue recommending measures to promote social distancing. <p>Motion/Second/Count (M/S/C): Van Brocklin/ Davenport</p> <p>Abstentions: Jacobs</p> <p>Motion carries</p>	
3. Reminders	Dr. Delores reviewed the conflict of interest, the committee's purview, the focus on service priorities, and the meeting rules with participants.	

Agenda Item	Action	Follow-up
4. Public Comment on non-agenda items (for members of the public)	A member of the public commented that the Recipient's service utilization data is incomplete and needs to be accessible for consumers to follow. They also suggested that the data should be presented for the entire year instead of monthly.	
5. Sharing our concerns (for committee members).	<ul style="list-style-type: none"> • A committee member requested to have a presentation about Fentanyl. • A committee member commented that the SDG&E rates are rising, and there may be a higher demand for emergency assistance to pay utilities. • A committee member commented about equitable access to primary care and supportive services and how it differs from reality and should be addressed. • Alfredo de Jesus requested additional information about the removal from the HPG. 	<p>HPG Staff will look for someone to provide a presentation on Fentanyl use.</p> <p>HPG Staff will contact Alfredo de Jesus regarding the removal from the HPG.</p>
6. Action: Review and approve the agenda for January 12, 2023	<p>Action: Approve the January 12, 2023 meeting agenda as presented.</p> <p>M/S/C: Van Brocklin/Davenport 11/0</p> <p>Abstentions: Jacobs</p> <p>Motion carries</p>	
7. Approve the meeting minutes from December 8, 2022;	<p>Action: Approved December 8, 2022; meeting minutes as presented</p> <p>M/S/C: Highfill/Villafan 9/0</p> <p>Abstentions: Jacobs/Kubricky</p> <p>Motion carries</p> <p>HPG Staff noted that committee members are allowed to vote to approve minutes even if they were absent from that meeting.</p>	
a. Follow-up items	<p>Pending items for the next meeting:</p> <ul style="list-style-type: none"> • HPG Staff will request from the Recipient's office information to update the comparison data sheet by adding the following year's budget total to allow immediate comparison and update the comments section, including a detailed description of the reason for the reallocation 	

Agenda Item	Action	Follow-up
	<ul style="list-style-type: none"> HPG will work on a list of existing services 	
8. Review committee attendance	Reviewed, Dr. Jacobs reminded members to get in touch with committee members if they see 3 – 4 absences.	
9. Old Business		
a. Getting to Zero (GTZ) Community Action Plan		
1. Expand Ryan White funded mental health services capacity: Increasing rapid access to regional availabilities, decreasing wait times	The PSRAC committee oversees this item of the GTZ Action Plan. In the coming meetings, the feasibility of this request will be discussed.	
2. Explore the feasibility and cost of creating walk-in medical services, mental health services, and substance use treatment services	Dr. Jacobs discussed HPG actions moving forward to fund housing at full capacity and increase capacity for mental health.	
b. Discussion item: Expenditure data review for the PSRAC process: Process for review of previous year reallocations and data upon which they were based and compare to approved upcoming (next year) and accompanying data thus far to forecast potential needs/changes which may be required	Tabled	
1) Any reallocation recommendation from the Recipient	To be discussed in agenda item 11. a.	
10. Routine Business		
a) Review Monthly and YTD expenditures and examine for any recommended reallocations	Public comment: <ul style="list-style-type: none"> A member of the public recommended a review of new clients be divided by month and included the previous year by month to see trends. 	HPG Staff will look to see if there is information on women and children who

Agenda Item	Action	Follow-up
a) Review of over/under spending	<ul style="list-style-type: none"> A member questioned about the information on women and children that are newly diagnosed <p>There are 25 clients are on a waiting list, and 128 are in PARS.</p> <p>The review included data through November 2022. There is an action going to the HPG for reallocation for FY 23, the next fiscal year. In addition, there are continued lower expenditures in Primary Care, Medical Specialty, Psychiatric Medication Management, and Oral Health.</p>	are newly diagnosed
b) Review Monthly and YTD service utilization report	Data through Dec. 2022 was presented. There were 3,156 clients served, which is a 10% decline compared to the previous year. Viral suppression for RW clients with a viral load test was 90%.	
c) COVID-19/Monkeypox (MPOX) update	The MPOX state of emergency will likely conclude for California and has already concluded in San Diego County. The MPOX Task Force will continue to meet regularly. Vaccine uptake in the Latinx and African American populations is where efforts are concentrated.	
d) Affordable Care Act (ACA) update	No report	
e) HIV Prevention update	A testing report will be provided next month.	
f) Review the PSRAC FY 23 Work Plan	Reviewed	
11. New Business		
a) Action Item: Approve the recommendation(s) for the reallocation of Part A funds in FY 23 (next fiscal year; March 1, 2023 – February 28, 2024).	The committee reviewed the Recipient recommendations for reallocation for FY 23 will go to HPG needing motions and seconds from the floor. The details were included in the Action Item Info Sheet in the meeting materials packet.	Forward to the HPG for action on January 25, 2023.
b) Discuss and plan for the three components of the Needs Assessment process <ol style="list-style-type: none"> Survey of HIV Impact (for PLWH and those at risk) 	The PSRAC recommends that the HPG conduct a Survey of HIV Impact as part of the needs assessment process this year by a consultant.	

Agenda Item	Action	Follow-up
c) Provider Survey		
d) Regional Community Meetings/Focus Groups	The committee recommended conducting regional community meetings/focus groups, also done by a consultant. This is a consideration if in-person meetings occur.	
12. Suggested items for the PSRAC agenda	None.	
13. Next Meeting: Thursday February 9, 2023 Location: WebEx		
14. Announcements	<p>Rodney von Jaeger, HPG Support Staff Lead, will retire at the end of January 2023. Thank you for all you have done!</p> <p>Project PEARL is looking for attendees to join their Spanish cohort. The Spanish-speaking cohort will begin on January 20, 2023, in person. Contact Christie's Place to sign up.</p> <p>The Women's Conference is scheduled for March 11, 2023. Contact Christie's Place to sign up. https://awomansvoice.info/</p>	
15. Adjournment	Meeting adjourned at 4:28 PM	

HIV PLANNING GROUP
12-MONTH COMMITTEE TRACKING
Feb 2022 - Jan 2023

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE																				Total
PSRAC	Feb	Mar	Apr	May	2-Jun	9-Jun	16-Jun	23-Jun	30-Jun	7-Jul	14-Jul	21-Jul	28-Jul	4-Aug	8-Sep	13-Oct	Nov	Dec	Jan	
Total meetings	1	1	1	1	1	1	1	1	0	1	1	1	1	1	1	1	0	1	1	11
Member																				
Jacobs, Dr. Delores ^C	*	*	*	*	*	*	*	*	NM	*	1	*	*	*	*	*	NM	*	*	0
Cortes, Alberto	*	*	*	1	1	1	*	*	NM	*	*	1	*	*	1	*	NM	*	*	2
Davenport, Beth	*	*	*	1	1	*	1	*	NM	*	*	*	*	*	*	*	NM	*	*	1
Garcia-Bigley, Felipe															*	*	NM	*	*	0
Highfill, Pam		1	*	*	*	*	*	1	NM	*	*	*	*	*	*	*	NM	*	*	1
Kubricky, Cinammon ^U	*	*	1	*	*	*	*	1	NM	*	*	*	*	*	*	*	NM	1	*	2
Mueller, Chris	*	*	*	1	*	*	*	*	NM	*	*	1	*	*	*	1	NM	*	1	3
Robles, Raul	1	*	1	*	*	1	1	1	NM	*	1	1	1	*	*	*	NM	1	*	3
Rucker, James	*	1	*	*	*	*	*	1	NM	*	*	*	*	*	1	*	NM	*	*	2
Quezada-Torres, Karla	*	1	*	*	*	*	*	*	NM	*	*	*	*	1	*	*	NM	*	*	2
Underwood, Regina	*	*	*	*	*	*	*	*	NM	*	*	*	*	*	*	*	NM	*	*	0
Van Brocklin, Rhea	*	1	*	*	*	*	*	*	NM	*	*	*	*	*	*	*	NM	*	*	1
Villafan, Freddy															*	*	NM	*	*	0

Absence from all weekly meetings in a month = absence for the month

To vote, a member may not miss 4 consecutive months or 6 total months in a 12 month period.

U = Unaffiliated Consumer

= number of absences

CC = Co-Chair

U = Unaffiliated Consumer

= number of absences

C = Chair

1 = Absence

N = Non-HPG member

CC = Co-Chair

NM = Committee did not meet

* = present

Service Categories	FY 23 Priority Ranking	Ryan White Part A Allocations FY 22			Comments	Ryan White Part A RW 2023-24 HPG Allocation as of 08/11/22
		RW 2022-23 HPG Allocation as of 08/11/21	HPG Approved Actions +/-	RW 2022-23 HPG Total as of today		
Outpatient Ambulatory Health Services: Primary Care	1	1,307,630.00	\$ (475,000.00)	832,630.00	\$275,000 decrease by HPG 03/23/22 \$100,000 decrease by HPG 08/10/22 \$100,000 decrease by HPG 09/28/22	962,630.00
Outpatient Ambulatory Health Services: Medical Specialty	2	383,386.00	(190,000.00)	193,386.00	\$110,000 decrease by HPG 03/23/22 \$30,000 decrease by HPG 07/27/22 \$50,000 decrease by HPG 09/28/22	273,386.00
Psychiatric Medication Management	3	28,036.00	-	28,036.00		28,036.00
Oral Health	4	300,940.00	(100,000.00)	200,940.00	\$100,000 decrease by HPG 07/27/22	300,940.00
Medical Case Management	5	1,268,338.00	93,512.00	1,361,850.00	\$50,000 increase by HPG 08/10/22 \$43,512 increase by HPG 10/26/22	1,268,338.00
Non-Medical Case Management	6	392,021.00	60,360.00	452,381.00	\$50,000 increase by HPG 08/10/22 \$10,360 increase by HPG 10/26/22	392,021.00
Case Management-Non-Medical for Housing NEW	7	250,000.00	(250,000.00)	-	\$250,000 decrease by HPG 10/26/22	250,000.00
Housing: Emergency Housing	8	280,000.00	798,235.00	1,078,235.00	\$250,000 increase by HPG 03/23/22 \$100,000 increase by HPG 07/27/22 \$150,000 increase by HPG 09/28/22 \$298,235 increase by HPG 10/26/22	530,000.00
Housing: Location, Placement and Advocacy Services NEW	9	100,000.00	(100,000.00)	-	\$100,000 decrease by HPG 10/26/22	100,000.00
Housing: Partial Assistance Rental Subsidy (PARS)	10	667,507.00	100,000.00	767,507.00	\$100,000 increase by HPG 06/22/22	807,507.00
Coordinated HIV Services for Women, Infants, Children, Youth, and Families (WICYF)	11	943,317.00	50,000.00	993,317.00	\$50,000 increase by HPG 09/28/22	943,317.00
Childcare Services	11a	-	-	-		
Early Intervention Services: Regional Services	12	800,386.00	-	800,386.00		800,386.00
Health Education & Risk Reduction	12a	-	-	-		
Outreach Services	12b	-	-	-		
Referral Services	12c	-	-	-		
Health Education and Risk Reduction (Stand Alone)	13	-	-	-		-
Referral to Health and Supportive Services (Peer Navigation)	14	300,000.00	100,000.00	400,000.00	\$100,000 increase by HPG 06/22/22.	400,000.00

Mental Health: Counseling/Therapy & Support Groups	15	761,062.00	297,893.00	1,058,955.00	\$160,000 increase by HPG 03/23/22 \$140,000 increase by HPG 06/22/22 \$50,000 decrease by HPG 09/28/22 \$47,893 increase by HPG 10/26/22	1,061,062.00
Psychosocial Support Services	16	-	-	-	\$30,000 increase by HPG 06/22/22 \$30,000 increase by HPG 07/27/22 \$60,000 decrease by HPG 10/26/22	60,000.00
Substance Abuse Services: Outpatient	17	269,959.00	45,168.00	315,127.00	\$45,168 increase by HPG 06/22/22.	315,127.00
Substance Abuse Services: Residential	18	-	-	-		-
Home-based Health Care Coordination	19	228,500.00		228,500.00		228,500.00
Transportation: Assisted and Unassisted	20	127,830.00	25,000.00	152,830.00	\$15,000 increase by HPG 06/22/22 \$10,000 increase by HPG 10/26/22	142,830.00
Food Services: Food Bank/Home-Delivered Meals	21	536,073.00	-	536,073.00		536,073.00
Medical Nutrition Therapy	22	35,542.00		35,542.00		35,542.00
Legal Services	23	285,265.00		285,265.00		285,265.00
Emergency Financial Assistance	24	53,730.00	(25,000.00)	28,730.00	\$25,000 decrease by HPG 03/23/22.	28,730.00
Home Health Care	25	-		-		-
Early Intervention Services: HIV Counseling and Testing	26	-		-		-
Cost-Sharing Assistance	27	-	-	-		-
Hospice	28	-		-		-
Subtotal		9,319,522.00	430,168.00	9,749,690.00		9,749,690.00
Ryan White Part A Minority AIDS Initiative (MAI)		RW 2022-23 Allocation as of 08/11/21	HPG Approved Actions +/-	RW 2022-23 MAI Total as of today	Comments	RW 2022-23 Allocation as of 08/11/21
Case Management (Non-Medical)		562,901.00	1,337.00	76,180.00	\$1,337 increase HPG	574,238.00
Medical Case Management				260,529.00		
Mental Health Services				149,066.00		
Outreach Services				42,892.00		
Substance Abuse Services (Outpatient)				35,572.00		
Housing: Emergency Housing		100,000.00	-	100,000.00		100,000.00
Multi-Disciplinary Team						
Targeted Client Advocacy						
Subtotal		662,901.00	1,337.00	664,238.00		674,238.00
TOTAL		9,982,423.00	431,505.00	10,413,928.00		10,423,928.00

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE 2023 WORKPLAN

<p><u>January 12, 2023</u></p> <ul style="list-style-type: none"> • Discuss and plan for the three components of the Needs Assessment process <ul style="list-style-type: none"> ○ Regional Community Meetings (timeframe) ○ Survey of HIV Impact planning (2023) ○ Provider Survey (timeframe) • Special data needs from the Recipient • Review service categories that underspend (monthly) • Service utilization report (monthly report) 	<p><u>June 15, 2023</u></p> <ul style="list-style-type: none"> • Review data on HIV Care Continuum/ Unaware Estimate & discuss findings <ul style="list-style-type: none"> ○ incl. data on RW clients vs. all clients ○ Incl. data on viral suppression rates in the African American/Black population (incl. of RW clients vs. all clients) • Review data on Unmet Need Estimate and discuss findings • Annual report on percent of individuals linked to care, and retention rates and viral suppression • Review service categories that underspend (monthly) • Service utilization report (monthly report)
<p><u>February 9, 2023</u></p> <ul style="list-style-type: none"> • Review Co-occurring conditions, poverty, and insurance • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<p><u>June 22, 2023</u></p> <ul style="list-style-type: none"> • Review YTD data on service utilization and discuss findings • Summarize/Finalize data on HIV Care Continuum/Unaware Estimate • Summarize/Finalize data on regional focus groups • Review service categories that underspend(monthly) • Service utilization report (monthly report)
<p><u>March 9, 2023</u></p> <ul style="list-style-type: none"> • Review Integrated (Comprehensive) Plan/Getting to Zero Plan goals related to PSRAC • Summarize/finalize data on co-occurring conditions, poverty, and insurance. • Address change in FY 23 Part A funding (if needed) • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<p><u>June 29, 2023</u></p> <ul style="list-style-type: none"> • No meeting (Thursday before Independence Day weekend)
<p><u>April 13, 2023</u></p> <ul style="list-style-type: none"> • Address change in FY 23 Part A funding (if needed) • Review regional distribution of RWTEA Part A services & discuss findings • Review data on Ryan White service eligibility criteria & other service guidelines and discuss findings 	<p><u>July 6, 2023</u></p> <ul style="list-style-type: none"> • Review any additional data that is available • Review/finalize summary data findings Recommendations with justifications to HIV Planning Group for service priority ranking, and how services should be organized and delivered in FY 24

<ul style="list-style-type: none"> • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<ul style="list-style-type: none"> • Review updated HIV/AIDS Epidemiology data & discuss findings (if available) • PARS Report • Review service categories that underspend (monthly) • Service utilization report (monthly report)
<p><u>May 11, 2023</u></p> <ul style="list-style-type: none"> • Review updated HIV/AIDS Epidemiology data & discuss findings (if available) • PARS Report • Review 2021 Survey of HIV Impact data & discuss findings, esp. Out-Of-Care data • Summarize/Finalize data on regional distribution of RWTEA Part A services • Summarize/Finalize data on Ryan White service eligibility criteria and other service guidelines • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<p><u>July 13, 2023, July 20, 2022 and July 27, 2023 (if needed)</u></p> <ul style="list-style-type: none"> • Summarize updated HIV/AIDS Epidemiology data (if available) • Review all data findings and summaries • Complete recommendations with justifications for changes in funding allocations for FY 24
<p><u>June 1, 2023</u></p> <ul style="list-style-type: none"> • Review HRSA and Ryan White Part A guidelines (PCN 1602) • Summarize/finalize data on HIV Epidemiology • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<p><u>August 3 and/or 10, 2023 (if needed)</u></p> <ul style="list-style-type: none"> • As needed for FY 24 priority setting and budget allocation process (next fiscal year) and/or FY 23 reallocations (current fiscal year) • PARS Report • Review service categories that underspend (monthly) • Service utilization report (monthly report)
<p><u>June 8, 2023</u></p> <ul style="list-style-type: none"> • Review information on non-Ryan White services in the community, esp. mental health and drug and alcohol services. (County's budget includes some of this detail) https://www.sandiegocounty.gov/openbudget/ • Review data on regional focus groups and GTZ Action Plan Community Feedback Report and discuss findings • PARS Report 	<p><u>September 7 and/or October 12, 2023</u></p> <ul style="list-style-type: none"> • Debrief the FY 24 priority setting and budget allocation process • Develop 2024 PSRAC work plan • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report)