



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

MEETING PACKET

THURSDAY, SEPTEMBER 14, 2023, 3:00 PM – 5:00 PM
COUNTY OPERATIONS CENTER (COC)
5570 OVERLAND AVE. (ROOM 1047) SAN DIEGO, CA 92123

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).

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Meeting Location & Directions:

Priority Setting & Resource Allocation Committee

Thursday, September 14, 2023

3:00 PM - 5:00 PM

County Operations Center

5570 Overland Ave.

San Diego, CA 92123

(Room 1047 - Medical Examiner's Office)



Parking is **free**. 3-hour visitor parking is available in the parking lot and parking structure. For County business exceeding 3 hours, please park in the numbered spaces in the parking structure.

FROM I-163 SOUTH:

1. Take I-163 North to Exit 8 for Kearny Villa Road.
2. Keep right, follow signs for Kearny Villa Road.
3. Turn right onto Chesapeake Dr.
4. County Operations Center will be on your right.

FROM I-15 SOUTH:

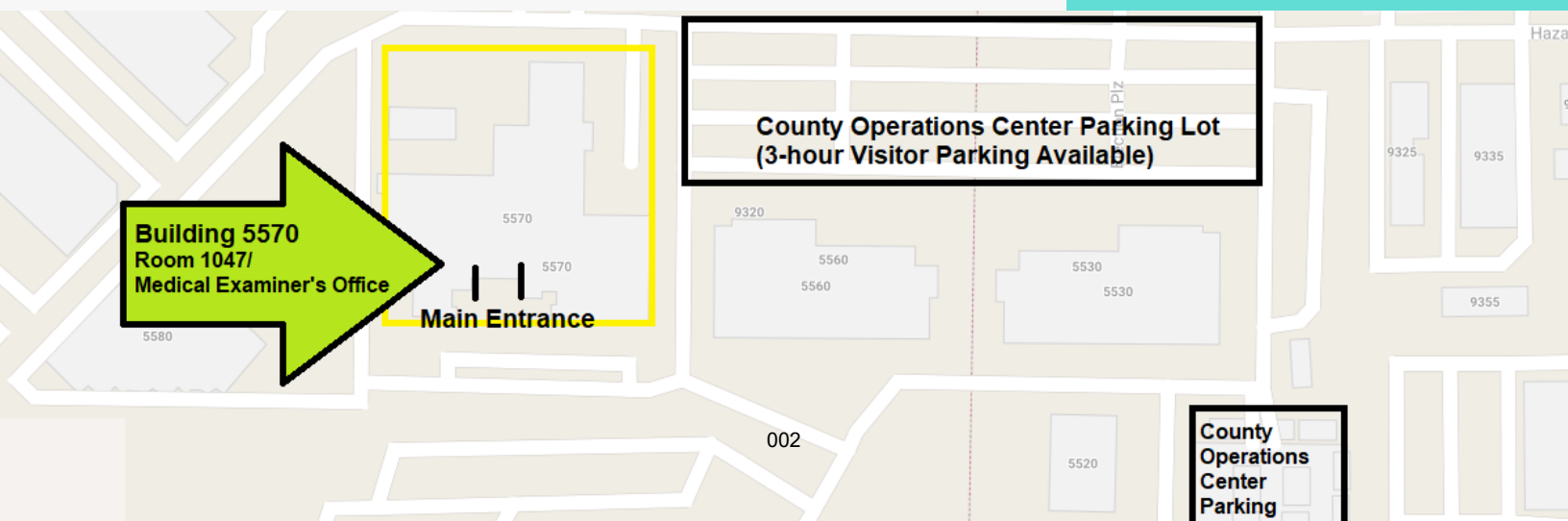
1. Take I-15 North to Exit 10 for Clairemont Mesa Blvd.
2. Turn left onto Clairemont Mesa Blvd.
3. Turn right onto Overland Ave.
4. Continue straight to stay on Overland Ave.



PUBLIC TRANSPORTATION

MTS Bus Routes:

25, 235, 928





FROM TROLLEY & BUS:

1. Take the Blue Trolley Line to the Balboa Avenue Transit Center.
2. Walk to Balboa Ave & Moraga Ave bus stop (about 7-minute walk, 0.3 miles).
3. Take Route 27 bus from Balboa Ave & Moraga Ave to Complex Dr & Clairemont Mesa Blvd.
4. Head north on Complex Dr.
5. Cross the street and turn right on Clairemont Mesa Blvd (after U.S. Bank Branch on the right).
6. Cross the street and turn left onto Overland Ave. and head north.
7. Building 5570/Medical Examiner's Office will be on the left side at the end of the cul-de-sac.

FROM BUS:

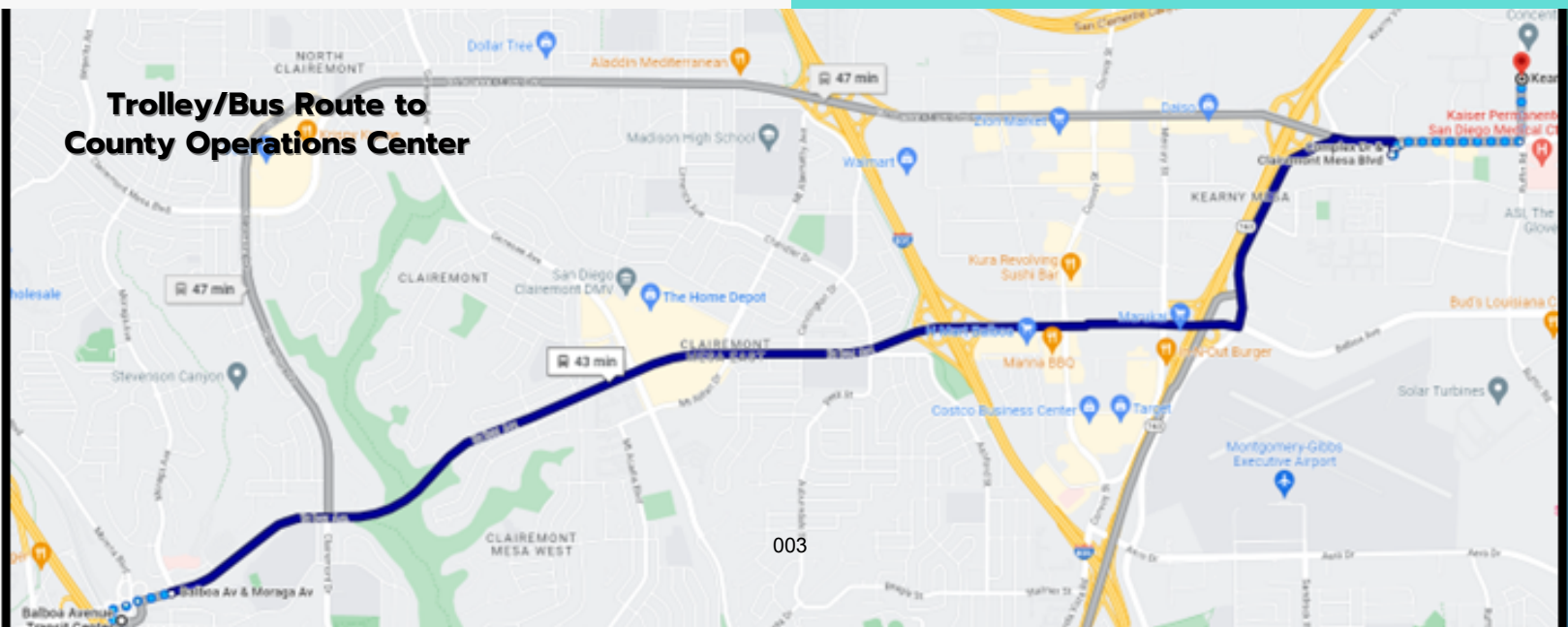
From Ruffin Road:

1. Walk north towards Ruffin Road.
2. Turn left on Hazard Way.
3. Enter through County Operations Center entrance/black gate and head further west. Access to County Operations Center buildings will be on your **left**.

From Overland Ave.:

1. Walk north on Overland Ave.
2. Building 5570/Medical Examiner's Office will be on the **left** side at the end of the cul-de-sac.

Trolley/Bus Route to County Operations Center



Conflict of Interest Priority Setting and Resource Allocation Committee

Name	<u>Conflict of Interest</u>
Carroll, Reginald	<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 Services • 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

Name	<u>Conflict of Interest</u>
Robles, Raul	<ul style="list-style-type: none"> • None
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"> • Substance Use Disorder Treatment: Residential • Transportation: Assisted and Unassisted



SAN DIEGO HIV PLANNING GROUP (HPG)
PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)
MEETING AGENDA
THURSDAY, SEPTEMBER 14, 2023, 3:00 PM – 5:00 PM
COUNTY OPERATIONS CENTER (COC)
5570 OVERLAND AVE. (ROOM 1047) SAN DIEGO, CA 92123

To participate remotely via Webex:

<https://sdcountyca.webex.com/sdcountyca/j.php?MTID=m3164bde6157c02086b181cc0195b269a>

Join the meeting via phone: 1-470-238-5742 US Toll / 52-55-6722-5298 Mexico Toll

Meeting ID: 2632 417 1877

Password: PSRAC.20

Language translation services are available upon request at least 96 hours prior to the meeting.
Please contact HPG Support Staff via e-mail at hpg.hhsa@sdcounty.ca.gov.

A quorum for this meeting is seven (7)

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

ORDER OF BUSINESS

1. Call to order, roll call, comments from the chair
2. Reminders
 - a. **Review of Committee Charge**
 - b. **Committee members' Conflicts of Interest:** Disclose areas of financial interest (e.g., employment); Refrain from participation in related votes
 - c. **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.
 - d. **Focus on service priorities, not on specific service providers.**
 - e. **Rules for the meeting** (as necessary): Committee members are limited to two (2) minutes per comment and limited to two (2) 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.
3. Public comment on non-agenda items (for members of the public)
4. Sharing our concerns (for committee members)
5. **ACTION:** Approve the Priority Setting & Resource Allocation Committee agenda for September 14, 2023

6. **ACTION:** Approve the Priority Setting & Resource Allocation Committee Minutes for July 20 and July 27, 2023
7. Review follow-up items from the last meeting
8. Old Business:
 - a. Clarify the process for the two-year budget
9. New Business:
 - a. **ACTION:** Recommendations for FY 23 reallocations (current fiscal year, March 1, 2023 – February 29, 2024)
 - b. Debrief the FY 24 priority setting and budget allocation process
 - c. **ACTION:** Review and approve the 2024 PSRAC work plan
10. Routine Business:
 - a. Review Monthly and Year to Date expenditures and assess for recommended reallocations
 - b. Partial Assistance Rent Subsidy Program (PARS) and Emergency Housing update
 - c. Review Monthly and TYD service utilization report
11. Suggested items for the future committee agenda
12. Announcements
13. Next meeting date: **November 9, 2023, from 3:00 PM – 5:00 PM.**
Location: **Southeast Live Well Center, 5101 Market St., San Diego, CA 92114 (Tubman Chavez Room A)**
14. 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 & RESOURCE ALLOCATION COMMITTEE (PSRAC)
MEETING MINUTES
THURSDAY, JULY 20, 2023, 1:00 PM – 5:00 PM
COUNTY ADMINISTRATION CENTER (CAC)
1600 PACIFIC HYW. (ROOM 310) SAN DIEGO, CA 92101

To participate remotely via Webex:

<https://sdcountyca.webex.com/sdcountyca/j.php?MTID=m9a35733bede30590df54a20d468ed3ca>

Join the meeting via phone: 1-470-238-5742 US Toll / 52-55-6722-5298 Mexico Toll

Meeting ID: 2632 436 1943

Password: PSRAC.BA23

Language translation services are available upon request at least 96 hours prior to the meeting. Please contact HPG Support Staff at 619-403-8809 or via e-mail at hpg.hhsa@sdcounty.ca.gov.

Quorum is Eight (8)

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

Members Absent: Alberto Cortes

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 1:13 PM and noted that an in-person quorum was established.	
2. Reminders:	Dr. Jacobs reviewed the conflict-of-interest policy and the purview of the committee. James Rucker read the committee charge.	
3. Public Comment on non-agenda items	None	
4. Sharing our concerns	Committee members noted the following: <ul style="list-style-type: none">• Emergency services utilization may increase because the cost of utilities is increasing.	

Agenda Item	Action	Follow-up
	<ul style="list-style-type: none"> A request from landlords for insurance are increasing and may hurt tenants in the future Healthcare facilities are noting that more people need to be vaccinated 	
5. Action: Review and approve the agenda for July 20, 2023	Action: Approve the July 20, 2023 meeting agenda as presented. Motion/Second/County (M/S/C): Van Brocklin/Mueller 11/0 Abstentions: Jacobs Motion carries	
6. Approve the meeting minutes from June 22, 2023;	Action: Approved June 22, 2023; meeting minutes as presented M/S/C: Rucker/Highfill 10/0 Abstentions: Jacobs Motion carries	
7. Review follow-up items from the last meeting minutes	No data is currently available for the requested Partial Assistance Rental Subsidy (PARS) report, but it will be available at the next meeting.	
8. Old Business: None		
a) Summarize/finalize information on non-Ryan White services in the community.	The committee reviewed and approved the key data findings (KF) document for non-Ryan White mental health and substance use treatment services in the community.	Forward the KF document to the HPG.
9. New Business		
a) Summarize/finalize data on the HIV Care Continuum	The committee reviewed and approved the KF document for HIV Care Continuum.	Forward the KF document to the HPG.
b) Summarize/finalize data on Unaware Estimate/Unmet Need Estimate	The committee reviewed and approved the KF document for the Unaware estimate/unmet needs estimate.	Forward the KF document to the HPG.
c) Summarize/finalize data Overall Key Findings	Dr. Ken Riley reviewed the Overall Key Finding document, which summarizes all the previous KF documents. The committee approved the Overall KF document as presented.	Forward the KF document to the HPG.

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Agenda Item	Action	Follow-up
d) Recommendations for FY 23 reallocations	None currently	
e) ACTION: Recommendations with justifications for changes in funding allocation for FY24 (next fiscal year; March 1, 2024 – February 28, 2025) in level-funding and reduction-funding scenarios	Action: Increase funding to Outpatient Ambulatory Health Services: Primary Care (priority #1) by \$250,000 from \$852,630 to \$1,102,630 M/S/C: Kubricky/Villafan 7/2 Abstentions: Garcia-Bigley, Jacobs, Mueller, Rucker Motion carries	
	Action: Decrease funding to Outpatient Ambulatory Health Services: Medical Specialty (priority #2) by \$78,386 from \$273,386 to \$195,000 M/S/C: Van Brocklin/Carroll 9/0 Abstentions: Garcia-Bigley, Jacobs, Mueller, Rucker Motion carries	
	Action: Decrease funding to Oral Health (priority #3) by \$40,000 from \$200,940 to \$160,940 . M/S/C: Kubricky/Mueller 9/1 Abstentions: Garcia-Bigley, Jacobs, Rucker Motion carries	
	Action: Increase funding to Medical Case Management (priority #4) by \$6,662 from \$1,168,338 to \$1,175,000 . M/S/C: Highfill/Carroll 5/1 Abstentions: Davenport, Garcia-Bigley, Jacobs, Mueller, Rucker, Underwood, Villafan Motion carries	
	Action: Level-funding for Non-Medical Case Management (priority #5) at \$392,021 . M/S/C: Carroll/Highfill 7/0 Abstentions: Davenport, Garcia-Bigley, Jacobs, Mueller, Rucker, Underwood Motion carries	
	Action: Level-funding for Non-Medical Case Management for Housing (priority #6) at \$250,000 . M/S/C: Carroll/Quezada- Torres 6/0 Abstentions: Highfill, Jacobs, Kubricky, Mueller, Underwood, Villafan Motion carries	
	Action: Increase funding to Emergency Housing (priority #7) by \$300,000 from \$1,010,000 to \$1,310,000 .	

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Agenda Item	Action	Follow-up
	M/S/C: Mueller/Villafan 11/0 Abstentions: Jacobs, Underwood Motion carries	
	Action: Level-funding to Housing Location, Placement, and Advocacy Services (priority #8) at \$100,000. M/S/C: Villafan/Garcia-Bigley 9/0 Abstentions: Jacobs, Underwood, Van Brocklin Motion carries	
	Action: Level-funding for Partial Assistance Rental Subsidy (PARS) (priority #9) at \$807,507. M/S/C: Kubricky/Robles 11/0 Abstentions: Carroll, Jacobs Motion carries	
	Action: Decrease funding to Mental Health Counseling/Therapy and Support Groups (priority #10) by \$61,062 from \$1,061,062 to \$1,000,000. M/S/C: Kubricky/Carroll Motion withdrawn by maker and second	
	Action: Decrease funding to Mental Health: Counseling/Therapy and Support Groups (priority #10) by \$161,062 from \$1,061,062 to \$900,000. M/S/C: Kubricky/Carroll 6/0 Abstentions: Davenport, Garcia-Bigley, Highfill, Jacobs, Rucker, Underwood Motion carries	
	Action: Level-funding to Substance Use Treatment Services: Outpatient (priority #11) at \$270,127. M/S/C: Van Brocklin/Kubricky 10/0 Abstentions: Highfill, Jacobs, Underwood Motion carries	
	Action: Level-funding to Mental Health: Psychiatric Medication Management (priority #12) at \$13,036 M/S/C: Carroll/Robles 4/6 Abstentions: Garcia-Bigley, Jacobs, Rucker Motion fails	
	Action: Decrease funding to Mental Health: Psychiatric Medication (priority #12) by \$7,036 from \$13,036 to \$6,000. M/S/C: Highfill/Quezada-Torres 8/0 Abstentions: Carroll, Garcia-Bigley, Jacobs, Mueller, Rucker,	

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Agenda Item	Action	Follow-up
	Motion carries	
	Action: Increase funding to Coordinated HIV Services for Women, Infants, Children, Youth, and Families by \$49,840 from \$943,317 to \$993,157 . M/S/C: Kubricky/Robles 10/0 Abstentions: Carroll, Jacobs, Van Brocklin, Motion carries	
	Action: Level-funding for Early Intervention Services: Regional Services (priority #14) at \$800,368 . M/S/C: Carroll/ Motion fails for lack of a second	
	Action: Increase funding for Early Intervention Services: Regional Services (priority #14) by \$9,614 from \$800,368 to \$810,000 . M/S/C: Van Brocklin/Mueller 5/0 Abstentions: Carroll, Garcia-Bigley, Highfill, Jacobs, Rucker, Underwood, Villafan Motion carries	
	Action: Decrease funding to Peer Navigation (Referral for Health Care and Support Services) (priority #16) by \$100,000 from \$400,000 to \$300,000 . M/S/C: Highfill/Kubricky 6/1 Abstentions: Davenport, Garcia-Bigley, Jacobs, Rucker, Underwood, Villafan Motion carries	
	Action: Level- funding for psychosocial support Services (priority #17) at \$46,744 . M/S/C: Carroll/Villafan 6/0 Abstentions: Garcia-Bigley, Jacobs, Rucker Underwood, Van Brocklin, Villafan Motion carries	
f) ACTION: Recommendations with justifications to HIV Planning Group for how services should be organized and delivered in FY 24 (next fiscal year)	Tabled	

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Agenda Item	Action	Follow-up
10. Routine Business		
a. Review Monthly and YTD expenditures and examine for any recommended reallocations.	Tabled reports are included in the meeting materials packet.	
a. Partial Assistance Rent Subsidy Program (PARS) and Emergency Housing update	Tabled	
b. Review Monthly and TYD service utilization report	Tabled reports are included in the meeting materials packet.	
11. Suggested items for the PSRAC agenda	None	
12. Announcements	None	
13. Next Meeting:	Date: Thursday, July 27, 2022 Location: County Administration Center (CAC) 1600 Pacific Highway, Room 310, San Diego, CA 92101 AND via WebEx	
14. Adjournment	Adjourned at 4:55 PM	

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Members Absent: Alberto Cortes

Agenda Item	Action	Follow-up
1. Call to order	Dr. Jacobs called the meeting to order at 1:06 p.m. and noted that an in-person quorum was established.	
2. Reminders:	Dr. Jacobs reviewed conflicts of interest and the purview of the committee; Felipe Garcia-Bigley read the committee charge.	
3. Public Comment on non-agenda items (for members of the public)	None	
4. Sharing our concerns (for committee members)	None	

Agenda Item	Action	Follow-up
5. Action: Review and approve the agenda for July 20, 2023	Action: Approve the July 20, 2023 meeting agenda as presented. M/S/C: Rucker/Kubricky 8/0 Abstentions: Jacobs Motion carries	
6. Review follow-up items from the last meeting minutes	<p>Maritza Herrera provided a report on the service category Partial Assistance Rental Subsidy (PARS):</p> <ul style="list-style-type: none"> As of June 2023, there are 44 clients on the waitlist (3 person increase), 6 new applications, and 3 went on the waitlist (previously 41 clients), 9 are applying for a second term with PARS Demographics: Primarily male, over 45 years old, from the Central region Unduplicated clients on PARS: 113 clients total, 89 identified as male, 20 female, 4 transgender No trends were noted compared to previous years <p>The committee requested information on how many people come off PARS each month to be included in future reports.</p> <p>Regarding data on the number of females who tested positive, this is difficult to assess as previously tests were run at the Public Health lab at the Rosecrans facility; now, they are sent to a commercial lab.</p>	
7. Old Business		
a) ACTION: Recommendations with justifications for changes in funding allocation for FY24 (next fiscal year; March 1, 2024 – February 28, 2025) in level-funding and reduction-	Action: Zero funding for Substance Use Treatment Services: Residential (priority #18) at \$0 . M/S/C: Villafan/Muller 9/0 Abstentions: Highfill, Jacobs Motion carries	
	Action: Level-funding for Home-based Health Care Coordination (priority #19) at \$228,500 . M/S/C: Kubricky/Van Brocklin 7/0 Abstentions: Garcia-Bigley, Jacobs, Rucker Motion carries	
	Action: Decrease funding to Transportation (priority #20) by \$20,000 from \$142,830 to \$122,830 . M/S/C: Van Brocklin/Raul Robles 5/0 Abstentions: Garcia-Bigley, Jacobs, Mueller, Rucker, Villafan, Underwood Motion carries	

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Agenda Item	Action	Follow-up
funding scenarios	Action: Level-funding to Food Services: Food Bank/Home Delivered Meals (priority #21) at \$536,073 M/S/C: Highfill/Mueller 10/0 Abstentions: Jacobs Motion carries	
	Action: Level-funding to Medical Nutrition Therapy (priority #22) at \$35,542. M/S/C: Van Brocklin/Garcia-Bigley 10/0 Abstentions: Jacobs Motion carries	
	Action: Level-funding to Legal Services (priority #23) at \$285,265. M/S/C: Mueller/Robles 8/0 Abstentions: Jacobs, Villafan Motion carries	
	Action: Level-funding to Emergency Financial Assistance (priority #24) at \$36,856. M/S/C: Mueller/Robles 9/0 Abstentions: Jacobs, Villafan Motion carries	
	Action: Zero funding to Medical Nutrition Therapy (priority #25) at \$0 , Zero funding to Early Intervention Services: HIV Counseling and Testing (priority #26) at \$0 , Zero funding to Cost sharing (priority #27) at \$0 , and Zero funding to Hospice (priority #28) at \$0. M/S/C: Van Brocklin/Rucker 10/0 Abstentions: Jacobs Motion carries	
	Action: For Outpatient Ambulatory Health Service: Primary Care (priority #1), in the FY 24 level-funding allocation scenario, maintain the present amount and consider this a service category most watched for savings as the Recipient identifies ongoing savings. M/S/C: Kubricky, Van Brocklin, 6-0 Abstentions: Garcia-Bigley, Jacobs, Muller, Villafan, Underwood Motion carries	
	Action: Decrease funding to Medical Case Management (priority #4) by \$6,662 from \$1,151,853 to \$1,145,191. M/S/C: Kubricky/Villafan 5/0 Abstentions: Davenport, Garcia-Bigley, Jacobs, Rucker, Underwood	

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Agenda Item	Action	Follow-up
	Motion carries	
	Action: Decrease funding to Non-Medical Case Management for Housing (priority #6) by \$50,000 from \$250,000 to \$200,000 . M/S/C: Davenport/Robles 7/0 Abstentions: Carroll, Jacobs, Van Brocklin, Villafan Motion carries	
	Action: Decrease funding to Emergency Housing (priority #7) by \$173,515 from \$1,010,000 to \$1,183,515 . M/S/C: Mueller/Highfill 9/0 Abstentions: Carroll, Jacobs, Villafan Motion carries	
	Action: Decrease funding to Mental Health: Counseling/Therapy & Support Group (priority #10) by \$42,970 from \$1,061,062 to \$1,018,092 . M/S/C: Van Brocklin/Robles 2/3 Abstentions: Davenport, Garcia-Bigley, Jacobs, Rucker, Underwood, Villafan Motion fails	
	Action: Decrease funding to Substance Use Treatment Services: Outpatient (priority #11) by \$10,000 from \$270,127 to \$260,127 . M/S/C: Villafan/Robles 5/3 Abstentions: Jacobs, Kubricky, Underwood Motion carries	
	Action: Decrease funding to Coordinated HIV Services for Women, Infants, Children, Youth, and Families (priority #13) by \$32,970 from \$993,157 to \$960,187 . M/S/C: Carroll/Highfill 3/7 Abstentions: Jacobs, Underwood, Van Brocklin Motion fails	
	Action: Decrease funding to Medical Case Management (priority #4) by \$16,485 from \$1,145,191 to \$1,128,706 . M/S/C: Highfill/Robles 6/0 Abstentions: Carroll, Davenport Garcia-Bigley, Jacobs, Mueller, Underwood Motion carries	
	Action: Decrease funding to Emergency Housing (priority #7) by \$16,485 from \$1,168,388 to \$1,151,853 . M/S/C: Garcia-Bigley/Highfill 10/0 Abstentions: Carroll, Jacobs	

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Agenda Item	Action	Follow-up
	Motion carries	
	Action: For the FY 24 Reduction funding scenario, allocations reduce funding overall by 1.5%, decreasing funding to service categories with \$300,000 or greater. M/S/C: Carroll Motion fails for lack of a second	
	Action: For the FY 24 Reduction funding scenario allocations reduce funding overall by 1.5%, decreasing funding to Medical Specialty (priority #2) by \$78,386 from \$273,386 to \$195,000 ; decrease funding to Oral Health (priority #3) by \$40,000 from \$200,940 to \$160,940 ; and decrease funding to Emergency Housing (priority #7) by \$29,818 from \$1,183,515 to \$1,153,697 M/S/C: Van Brocklin/Robles 7/2 Abstentions: Garcia Bigley, Jacobs, Rucker Motion carries	
	Action: For the Minority AIDS Initiative (MAI) funding, distribute the \$674,238 as follows: \$574,238 to Multi-disciplinary Teams and \$100,000 to Emergency Housing. M/S/C: Kubricky/Robles Abstentions: Garcia-Bigley, Jacobs, Rucker, Underwood Motion carries	
8. New Business		
a. ACTION: Recommendations for FY 23 reallocations	None currently	
b. ACTION: Recommendations with justifications to HIV Planning Group for how services should be organized and delivered in FY 24 (next fiscal year,	The committee recommended forwarding the following recommendations to the Strategies and Standards Committee: <ul style="list-style-type: none"> Recommend that dental primary care and specialty providers assess clients' transportation needs when making appointments and provide information to clients on available transportation services. For Mental Health: Counseling and Therapy services: Ensure that both telehealth and in-person appointments need to be available within reasonable time frames. Ensure that the client's urgent mental health needs are responded to and offered potential 	HPG Support Staff will forward the recommendations to the Strategies and Standards Committee.

For any inquiries, please send an email to HPG.HHSA@sdcounty.ca.gov
You may also visit our website at sdplanning.org

Agenda Item	Action	Follow-up
March 1, 2024 – February 28, 2025)	intake appointments within 24 hours and non-urgent requests are responded to and provided potential intake appointments within two (2) weeks. <ul style="list-style-type: none">• Ensure that appointments are available at standard-of-care frequencies for clients in active, ongoing mental health treatment service (typically weekly or every two weeks).	
9. Routine Business		
a. Review Monthly and YTD expenditures	Tabled; the reports were included in the meeting materials packet.	
a. Partial Assistance Rent Subsidy Program (PARS) and Emergency Housing update	Noted in agenda item 6. Follow-up items from the previous meeting.	
b. Review Monthly and TYD service utilization report	Tabled; the reports were included in the meeting materials packet.	
10. Suggested items for the PSRAC agenda	None	
11. Announcements	The PSRA process is completed and August 2023 meetings of the PSRAC will not be needed.	
12. Next Meeting:	Thursday, September 14, 2023 3:00 – 5:00 p.m. Location: County Operation Center, 5570 Overland Ave. San Diego, CA 92123, Room 1047 Medical Examiner's Office	
13. Adjournment	Adjourned at 4:20 p.m.	

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Debrief of FY 24 Priority Setting and Resource Allocation (PSRA) Process

The following questions are related to the FY 24 PSRA process (*completed in August 2023*):

1. What worked about this year's process?	
2. What could be improved for next year?	
a. Stakeholders/participants/consumer involvement	
b. Pace	
c. Data available	
d. Materials	
e. Process	
f. Interaction	
g. Other	

The following information is provided for reference and is related to the FY 23 PSRA process (*completed in August 2022*):

	Last Year's Comments
1. What worked about the FY 23 PSRA process?	<ul style="list-style-type: none">a. Data was used to support decisions, and the committee took time to analyze the data.b. The learning the process was very helpful.c. Everyone was very patient.d. Meeting every week, working through the process.

Debrief of FY 24 Priority Setting and Resource Allocation (PSRA) Process

- e. Clarification from the Chair HPG and providers of what the need for services in the community to help understand the process.
- f. The dedication of the committee to make the work happen.
- g. Participation of consumers
- h. Rich conversations about what is needed and the critical topics for people living with HIV.
- i. The pace of the meeting was faster, and the group completed the prioritization earlier than expected.
- j. The budgeting review went smoothly.
- k. The HPG staff had a better structure in keeping the committee on task and respectful of time.

	Last Year's Recommendations / Comments	Addressed? Yes / No	How were last year's comments addressed?
2. What could be improved for next year?	a. Frustration with not having updated HIV epidemiology data available. The committee asked how to proactively advocate getting reports and supporting data on time before the PSRA process.		<hr/> <i>Response: COVID-19 demands and understaffing in the Epidemiology Branch had been a challenge in getting data on time, but the County is in the process of increasing capacity/adding new staff.</i>
	b. Small print of data/information, too much information, and data not being well explained or displayed.		<hr/> <i>Response:</i> <i>i. HPG staff support attempts to display information/data more graphically.</i> <i>ii. HPG staff are available at meetings to review data and/or materials 30 minutes before each meeting.</i>
	c. Create a one-page summary that includes services categories information that explains the following: expenditures look like and what has been funded, and the key findings of the need's assessments.		<hr/> <i>Response:</i> <i>i. The key findings of the Needs Assessment currently exist, is reviewed by the PSRAC annually, and is included in the Combined Key Data Findings document which is available on the HPG website or by printed copy on request. Additionally, the findings from the Needs Assessment are summarized by service</i>

Debrief of FY 24 Priority Setting and Resource Allocation (PSRA) Process

category in a summary document and is summarized in an Overall Key Findings document.

- ii. An Expenditures report is included in every meeting materials packet for the Steering Committee, Priority Setting and Resource Allocation Committee and the HIV Planning Group meetings. Recipient staff is available at those meetings to review expenditures and answer questions regarding expenditures.*

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"> • No meeting scheduled
<p><u>February 9, 2023</u></p> <ul style="list-style-type: none"> • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<p><u>June 22, 2023 (4-hour meeting for review of data)</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 2021 Survey of HIV Impact data & discuss findings, esp. Out-Of-Care data • Review HRSA and Ryan White Part A guidelines (PCN 1602) • Review YTD data on service utilization and discuss findings • 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 • Summarize/Finalize data on HIV Care Continuum/Unaware Estimate • Summarize/finalize data on HIV Epidemiology • Summarize/Finalize data on regional distribution of RWTEA Part A services

	<ul style="list-style-type: none"> Summarize/Finalize data on Ryan White service eligibility criteria and other service guidelines Summarize/Finalize data on regional focus groups Review service categories that underspend(monthly) Service utilization report (monthly report)
<u>March 9, 2023</u> <ul style="list-style-type: none"> Review Co-occurring conditions, poverty, and insurance Review Integrated (Comprehensive) Plan/Getting to Zero Plan goals related to PSRAC Address change in FY 23 Part A funding (if needed) PARS Report Review service categories that underspend(monthly) Service utilization report (monthly report) 	<u>June 29, 2023</u> <ul style="list-style-type: none"> No meeting (Thursday before Independence Day weekend)
<u>April 13, 2023</u> <ul style="list-style-type: none"> No meeting scheduled 	<u>July 6, 2023</u> <ul style="list-style-type: none"> No meeting scheduled
<u>May 11, 2023</u> <ul style="list-style-type: none"> Address change in FY 23 Part A funding (if needed) Summarize/finalize data on co-occurring conditions, poverty, and insurance. Review data on regional distribution of RWTEA Part A services & discuss findings Review data on Ryan White service eligibility criteria & other service guidelines and discuss findings Review updated HIV/AIDS Epidemiology data & discuss findings (if available) PARS Report Review service categories that underspend(monthly) Service utilization report (monthly report) 	<u>July 20, 2023 (4-hour meeting for FY 24 priority setting budget allocation)</u> <ul style="list-style-type: none"> Summarize updated HIV/AIDS Epidemiology data (if available) Review/summarize 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 Review all data findings and summaries Complete recommendations with justifications for changes in funding allocations for FY 24
<u>June 1, 2023</u> <ul style="list-style-type: none"> No meeting scheduled 	<u>July 27, 2023 (if needed)</u> <ul style="list-style-type: none"> As needed to complete the FY 24 priority setting and budget allocation process (next fiscal year) and/or FY 23 reallocations (current fiscal year) Review/summarize any additional data that is available PARS Report Review service categories that underspend (monthly)

	<ul style="list-style-type: none"> • Service utilization report (monthly report)
<p><u>June 8, 2023 4-hour meeting to review data</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 the percent of individuals linked to care, retention rates, and viral suppression • Review 2021 Survey of HIV Impact data & discuss findings, esp. Out-Of-Care data • Review HRSA and Ryan White Part A guidelines (PCN 1602) • Review YTD data on service utilization and discuss findings 	<p><u>September 14, 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)
	<p><u>October 12, 2023</u></p> <ul style="list-style-type: none"> • No meeting scheduled
	<p><u>November 9, 2023</u></p> <ul style="list-style-type: none"> • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report) •
	<p><u>December 14, 2023</u></p> <ul style="list-style-type: none"> • No meeting scheduled

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE 2024 WORKPLAN

<p><u>January 11, 2024</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 (2024) ○ Provider Survey (timeframe) • Review service categories that underspend (monthly) • Service utilization report (monthly report) 	<p><u>July 4, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled - (Independence Day)
<p><u>February 15, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled 	<p><u>July 11, 2024 (4-hour meeting for FY 25 priority setting budget allocation)</u></p> <ul style="list-style-type: none"> • Summarize updated HIV/AIDS Epidemiology data • Review/summarize any available additional data • 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 25 • Review all data findings and summaries • Complete recommendations with justifications for changes in funding allocations for FY 25
<p><u>March 14, 2024</u></p> <ul style="list-style-type: none"> • Address change in FY 24 Part A funding (if needed) • Review data on Co-occurring conditions, poverty, and insurance • Plan/Getting to Zero Plan goals related to PSRAC. • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report) 	<p><u>July 18, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled
<p><u>April 11, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled 	<p><u>July 25, 2024 (if needed)</u></p> <ul style="list-style-type: none"> • As needed to complete the FY 25 priority setting and budget allocation process (next fiscal year) and/or FY 24 reallocations (current fiscal year) • Review/summarize any available additional data • PARS Report • Review service categories that underspend (monthly) • Service utilization report (monthly report)

<p><u>May 9, 2024</u></p> <ul style="list-style-type: none"> • Address change in FY 24 Part A funding (if needed) • Summarize/finalize data on co-occurring conditions, poverty, and insurance. • Review data on the regional distribution of RWTEA Part A services and discuss findings • Review data on Ryan White's service eligibility criteria and other service guidelines and discuss findings • Review updated HIV/AIDS Epidemiology data and discuss findings (if available) • PARS Report • Review service categories that underspend(monthly) • FY 24 Reallocations (if needed) • Service utilization report (monthly report) 	<p><u>August 8, 2024</u></p> <p>No meeting scheduled</p>
<p><u>June 6, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled 	<p><u>September 7, 2024</u></p> <ul style="list-style-type: none"> • Debrief the FY 25 priority setting and budget allocation process • Review the 2026 PSRAC work plan • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report)
<p><u>June 13, 2024 4-hour meeting to review data</u></p> <ul style="list-style-type: none"> • Review data on the HIV Care Continuum/ Unaware Estimate and 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 • Review the 2023 Survey of HIV Impact data & discuss findings, esp. Out-Of-Care data • Review data on regional focus groups and GTZ Action Plan Community Feedback Report and discuss findings • • Review HRSA and Ryan White Part A guidelines (PCN 1602) • Review YTD data on service utilization and discuss findings • FY 24 Reallocations (if needed) 	<p><u>October 10, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled

<p><u>June 20, 2024 (4-hour meeting for review of data)</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 • Review the 2023 Survey of HIV Impact data and discuss findings, esp. Out-Of-Care data • Review HRSA and Ryan White Part A guidelines (PCN 1602) • Review YTD data on service utilization and discuss findings • Review information on non-Ryan White services in the community, esp. mental health and drug and alcohol services. <p>(The county's budget includes some of this detail.)</p> <p>https://www.sandiegocounty.gov/openbudget/</p> <ul style="list-style-type: none"> • Summarize/Finalize data on HIV Care Continuum/Unaware Estimate • Summarize/finalize data on HIV Epidemiology • Summarize/Finalize data on the regional distribution of RWTEA Part A services • Summarize/Finalize data on Ryan White's service eligibility criteria and other service guidelines • Summarize/Finalize data on regional focus groups • Review service categories that underspend(monthly) • FY 24 Reallocations (if needed) <p>Service utilization report (monthly report)</p>	<p><u>November 14, 2024</u></p> <ul style="list-style-type: none"> • PARS Report • Review service categories that underspend(monthly) • Service utilization report (monthly report)
<p><u>June 27, 2024</u></p> <ul style="list-style-type: none"> • No meeting 	<p><u>December 12, 2024</u></p> <ul style="list-style-type: none"> • No meeting scheduled

RW 2023-24 PART A AWARD INFORMATION	
Funding Source	Total RW 2023-24 Award
Part A	11,299,699.00
Part A MAI	773,155.00
TOTAL AWARD AMOUNT	12,072,854.00

RW 2023-24
YEAR TO DATE EXPENDITURE AND SAVINGS BREAK-DOWN AS OF
JULY 2023

FY23-24 ALLOCATION BREAK DOWN							
Funding Source	Admin. \$	Admin. %	CQM \$	CQM %	RW 202324 Service dollars	Total	CORE Medical Services
Part A	1,129,969	10%	315,170	3%	9,854,560	11,299,699	70%
Part A MAI	66,977	9%	32,932	4%	673,246	773,155	
TOTAL	1,196,945.90		348,102.00		10,527,806.10	12,072,854.00	70%

Ryan White Part A Allocations											
Service Categories	HRSA Ranking	Priority Ranking	RW 2023-24 HPG Allocation as of 08/11/22	%	HPG Approved Actions +/-	RW 2023-24 HPG Total as of today	%	RW 2023-24 Year to Date Expenditure	RW 2023-24 Year-to-Date - The % below is the % of the Budget Spent 41.67 of Year Elapsed/Invoiced)	RW 2023-24 Balance	Comments
Outpatient Ambulatory Health Services: Primary Care	1l	1	962,630.00	10%	\$ (110,000.00)	852,630.00	9%	629,253.13	74%	223,376.87	\$110,000 decrease by HPG 01/26/23
Outpatient Ambulatory Health Services: Medical Specialty	1l	2	273,386.00	3%		273,386.00	3%	26,115.59	10%	247,270.41	
Psychiatric Medication Management	1j	3	28,036.00	84%	(15,000.00)	13,036.00	0%	2,160.99	17%	10,875.01	\$15,000 decrease by HPG 01/26/23
Oral Health	1k	4	300,940.00	84%	(100,000.00)	200,940.00	2%	62,048.78	31%	138,891.22	\$100,000 decrease by HPG 01/26/23
Medical Case Management	1h	5	1,268,338.00	13%	(100,000.00)	1,168,338.00	12%	514,251.62	44%	654,086.38	\$100,000 decrease by HPG 01/26/23
Case Management-Non-Medical for Housing NEW		7	250,000.00	3%	-	250,000.00					
Housing: Emergency Housing	2e	8	530,000.00	5%	480,000.00	1,010,000.00	10%	502,718.60	50%	507,281.40	\$430,000 increase by HPG 01/26/23 \$50,000 increase by Recipient 07/11/23
Housing: Location, Placement and Advocacy Services NEW		9	100,000.00	1%	-	100,000.00					
Housing: Partial Assistance Rental Subsidy (PARS)	2e	10	807,507.00	100%		807,507.00	8%	318,068.57	39%	489,438.43	
Non-Medical Case Management	2h	6	392,021.00	4%		392,021.00	4%	177,203.42	45%	214,817.58	
Coordinated HIV Services for Women, Infants, Children, Youth, and Families (WICYF)	1c	11	943,317.00	10%		943,317.00	10%	397,933.46	42%	545,383.54	
Childcare Services	2a	11a	-	0%		-	0%	-	0%	-	
Early Intervention Services: Regional Services	1c	12	800,386.00	8%	-	800,386.00	8%	346,446.69	43%	453,939.31	
Health Education & Risk Reduction	2d	12a	-	0%		-	0%	-	0%	-	
Outreach Services	2j	12b	-	0%		-	0%	-	0%	-	
Referral Services	2l	12c	-	0%		-	0%	-	0%	-	
Referral to Health and Supportive Services (Peer Navigation)		14	400,000.00	4%		400,000.00	4%	115,826.60	29%	284,173.40	
Mental Health: Counseling/Therapy & Support Groups	1j	15	1,061,062.00	11%		1,061,062.00	11%	348,298.94	33%	712,763.06	
Psychosocial Support Services		16	60,000.00	1%	(13,256.00)	46,744.00	0%	-	0%	46,744.00	\$60,000 decrease by HPG 01/26/23 \$75,759 increase by HPG 04/26/23 \$29,015 decrease by Recipient 07/11/23 \$45,000 decrease by HPG 01/26/23
Substance Abuse Services: Outpatient	1m	17	315,127.00	3%	(45,000.00)	270,127.00	3%	110,177.20	41%	159,949.80	
Substance Abuse Services: Residential	2o	18	-	0%	-	-	0%	-	0%	-	

Service Categories	HRSA Ranking	Priority Ranking	RW 2023-24 HPG Allocation as of 08/11/22	%	HPG Approved Actions +/-	RW 2023-24 HPG Total as of today	%	RW 2023-24 Year to Date Expenditure	RW 2023-24 Year-to-Date - The % below is the % of the Budget Spent 41.67 of Year Elapsed/Invoiced)	RW 2023-24 Balance	Comments
Home-based Health Care Coordination	1e	19	228,500.00	2%		228,500.00	2%	112,620.08	49%	115,879.92	
Transportation: Assisted and Unassisted	2g	20	142,830.00	1%		142,830.00	1%	57,031.68	40%	85,798.32	
Food Services: Food Bank/Home-Delivered Meals	2c	21	536,073.00	5%	-	536,073.00	5%	203,262.55	38%	332,810.45	
Medical Nutrition Therapy	1i	22	35,542.00	0%		35,542.00	0%	16,625.74	47%	18,916.26	
Legal Services	2i	23	285,265.00	3%		285,265.00	3%	135,197.57	47%	150,067.43	
Emergency Financial Assistance	2b	24	28,730.00	0%	8,126.00	36,856.00	0%	19,242.10	52%	17,613.90	\$8,126 increase by Recipient 06/07/23
Home Health Care	1f	25	-	0%		-	0%	-	0%	-	
Early Intervention Services: HIV Counseling and Testing	1c	26	-	0%		-	0%	-	0%	-	
Cost-Sharing Assistance	1d	27	-	0%	-	-	0%	-	0%	-	
Hospice	1g	28	-	0%		-	0%	-	0%	-	
Subtotal			9,749,690.00	356%	104,870.00	9,854,560.00	96%	4,094,483.31	42%	5,760,076.69	
Ryan White Part A Minority AIDS Initiative (MAI)			RW 2023-24 Allocation as of 08/11/22		HPG Approved Actions +/-	RW 2023-24 MAI Total as of today	%	RW 2023-24 Year to Date Expenditure	RW 2023-24 Year-to-Date - The % below is the % of the Budget Spent 41.67 of Year Elapsed/Invoiced)	RW 2023-24 Balance	Comments
Case Management (Non-Medical)			71,333.00		-	71,333.00	11%	27,393.97	38%	43,939.03	
Medical Case Management			258,925.00		-	258,925.00	38%	86,261.65	33%	172,663.35	
Mental Health Services			175,739.00		-	175,739.00	26%	32,667.84	19%	143,071.16	
Outreach Services			23,337.00		-	23,337.00	3%	15,970.37	68%	7,366.63	
Substance Abuse Services (Outpatient)			43,912.00		-	43,912.00	7%	28,816.77	66%	15,095.23	
Housing: Emergency Housing			100,000.00		-	100,000.00	15%	53,855.17	54%	46,144.83	
Subtotal			673,246.00		-	673,246.00	100%	244,965.77	36%	428,280.23	
TOTAL			10,422,936.00		104,870.00	10,527,806.00		4,339,449.08	41%	6,188,356.92	

CORE and Support Services allocation break-down

	Total Allocation	Total Expenditure	Total Balance
CORE Medical Services	4,687,977.00	1,947,298.94	2,740,678.06
Support Services	5,166,583.00	2,147,184.37	3,019,398.63
TOTAL	9,854,560.00	4,094,483.31	5,760,076.69

0.00 variance

YEAR TO DATE EXPENDITURE AND SAVINGS BREAK-DOWN AS OF JUNE 2023

RW 2223 & 2324 SERVICE DOLLAR ALLOCATIONS AND EXPENDITURES

Funding Source	RW 2022/2023 & RW 2023/2024 Service Dollars	Contract YTD Expenditure	% of Year Invoiced	% Spent	Balance	Comments
Ryan White Part B						
Outpatient Ambulatory Health Services (Medical)	407,426.00	-	33.32%	0%	407,426.00	Part A Payment Summary, Part B tracking as of July 2023 invoices.
Early Intervention Services (Expanded HIV Testing)	-	-	33.32%	-	-	
Early Intervention Services (Focused Testing)	187,900.00	71,455.87	33.32%	38%	116,444.13	Part B Payment Summary as of July 2023 invoices.
Medical Case Management (Emergency Financial Assistance)	88,858.00	41,459.00	33.32%	47%	47,399.00	Part B Payment Summary as of July 2023 invoices.
Housing (Substance Abuse Services-Residential)	259,316.00	180,557.76	33.32%	70%	78,758.24	Part B Payment Summary as of July 2023 invoices.
Non-medical Case Management (Rep Payee)	25,000.00	13,382.18	33.32%	54%	11,617.82	Part B Payment Summary as of July 2023 invoices.
CoSD Medical Case Management	403,173.24	132,430.26	33.32%	33%	270,742.98	Per Q1 April to June 2023 Qtrly invoice
CoSD Early Intervention Services	396,482.82	137,339.11	33.32%	35%	259,143.71	Per Q1 April to June 2023 Qtrly invoice
Ryan White Part B Total	1,768,156.06	576,624.18		33%	1,191,531.88	
Ryan White Part B-MAI Bridge	39,330.00	28,814.18	33%	73%	10,515.82	Part B-MAI Payment Summary as of July 2023 invoices.
Prevention 2023						
<i>Counseling and Testing</i>	180,000.00	94,965.24	58.31%	53%	85,034.76	Prevention Payment Summary as of July 2023 invoices.
<i>Evaluation/ Linkage Activities/ Needs Assessment</i>	966,008.00	439,029.61	58.31%	45%	526,978.39	Prevention Payment Summary as of July 2023 invoices.
Prevention Total	1,146,008.00	533,994.85			612,013.15	
CDPH Ending the HIV Epidemic- Component A	\$4,496,525	814,725.28	100%	18%	3,681,799.72	Per Payment Summary as of July 2023 invoices.
CDPH Ending the HIV Epidemic- Component C	\$240,000	-	0%	0.00%	240,000.00	CDPH EHE Comp C No Contract.
HRSA Ending the HIV Epidemic- 20-078 FY2324	\$2,555,761	671,737.00	41.65%	26.28%	1,884,024.00	HRSA EHE Payment Summary as of July 2023
TOTAL	10,245,780.06	2,625,895.49		26%	7,619,884.57	

SUMMARY OF SERVICES FOR FY23

Mar. 1, 2023 - Feb. 29 2024

RYAN WHITE SERVICES		Aug	End of Year Total	Prior Year Total
FY 2023-2024				
Total clients served each month	Clients	1366		
New clients in FY23	Clients	141	2,540	2,588
Returning FY23 clients	Clients	1225		
VIRAL LOAD SUPPRESSION				
Virally suppressed	Clients	1,087		
% Virally suppressed		94%		
With Test	Tests	1,161		
Without Test	Tests	205		
PART-A SERVICES				
Outpatient Ambulatory Health Services: HIV Primary Care*	Visits	208	1,171	833
	Clients	173	649	505
Outpatient Ambulatory Health Services: Medical Specialty Care	Visits	0	0	133
	Clients	0	0	69
Psychiatric Medication Management	Visits	2	8	9
	Clients	2	6	7
Oral Health Care: Dental Care	Visits	70	539	546
	Clients	63	243	265
Early Intervention/Integrated Services for Women, Children & Families: Coordinated Care	Visits	83	1,334	1,113
	Clients	35	137	128
Early Intervention/Integrated Services for Women, Children & Families: Childcare	Visits	1	14	48
	Clients	1	3	36
Early Intervention Services: Regional Services	Visits	873	4,806	4,048
	Clients	354	876	885
Early Intervention Services: Peer Navigation Services	Visits	69	1,523	461
	Clients	39	254	116
Early Intervention Services: Outreach Services	Visits	0	0	0
	Clients	0	0	0
Medical Case Management Services	Visits	999	6,236	5,246
	Clients	416	703	680
Home-based Health Care Coordination	Visits	87	460	406
	Clients	27	41	39
Case Management -Non-Medical	Visits	445	2,503	2,635
	Clients	202	299	303

*Includes Part B funded services

SUMMARY OF SERVICES FOR FY23

Mar. 1, 2023 - Feb. 29 2024

RYAN WHITE SERVICES		Aug	End of Year Total	Prior Year Total
Mental Health Services: Counseling/Therapy	Visits	312	1,958	1,592
	Clients	129	267	189
Substance Abuse Treatment Services – Residential*	Visits	0	36	62
	Clients	0	15	21
Substance Abuse Treatment Services - Outpatient	Visits	346	1,844	1,933
	Clients	50	83	76
Housing Services: Partial Assistance Rental Subsidy	Visits	90	581	656
	Clients	90	113	123
Medical Transportation Services - Assisted	Visits	0	3	4
	Clients	0	3	2
Medical Transportation Services - Unassisted	Visits	252	1,610	1,786
	Clients	166	318	374
Housing Services: Emergency Housing Assistance	Visits	52	410	476
	Clients	46	237	294
Food Services: Food Bank/ Home Delivered Meals	Meals	3443	14,570	17,220
	Clients	143	177	160
Medical Nutrition Therapy	Visits	18	81	68
	Clients	18	54	48

SUMMARY OF SERVICES FOR FY23

Mar. 1, 2023 - Feb. 29 2024

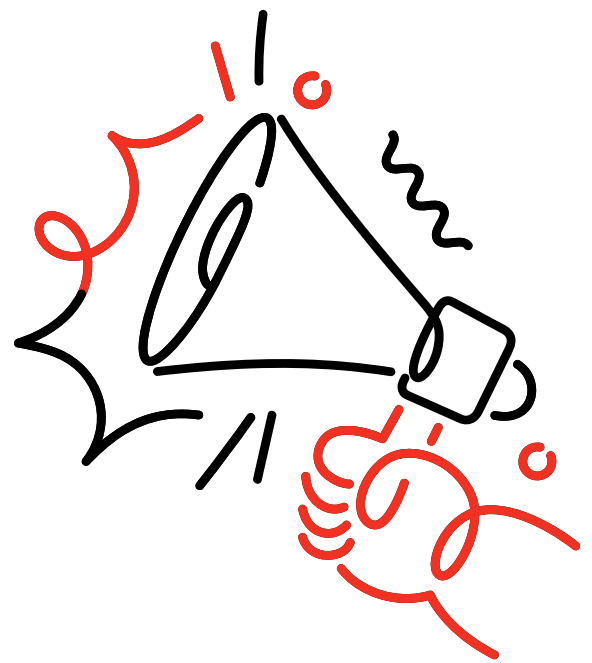
RYAN WHITE SERVICES		Aug	End of Year Total	Prior Year Total
PART-A SERVICES continued				
Legal Services	Visits	18	85	91
	Clients	18	79	67
Emergency Financial Assistance	Visits	4	364	146
	Clients	4	106	51
Internet Access	Visits	0	1	1
	Clients	0	1	1
Internet Equipment	Visits	6	32	4
	Clients	6	13	2
Collateral Contacts	Visits	232	1,289	1,457
	Clients	120	349	450
MAI SERVICES				
Medical Case Management Services	Visits	140	883	581
	Clients	59	123	110
Mental Health Services: Therapy/Counseling	Visits	48	264	456
	Clients	26	64	68
Substance Abuse Treatment Services - Outpatient	Visits	75	415	107
	Clients	37	83	22
Faciliated Referrals	Visits	0	0	0
	Clients	0	0	0
Outreach Encounters	Visits	0	0	0
	Clients	0	0	0
Medical Transportation Services - Assisted	Visits	0	0	0
	Clients	0	0	0
Medical Transportation Services - Unassisted	Visits	0	0	0
	Clients	0	0	0
Case Management -Non-Medical	Visits	73	489	539
	Clients	40	76	80

SUMMARY OF SERVICES FOR FY22

Mar. 1, 2022- Feb. 28, 2023

CLIENT DEMOGRAPHICS	Number of Clients	% of Client Total	Client Total
FY 2023-2024			
Race/Ethnicity			
White (not Hispanic)	571	22.48%	
Black or African American (not Hispanic)	303	11.93%	
Hispanic or Latino(a)	1506	59.29%	
Asian	34	1.34%	
American Indian/Alaska Native	13	0.51%	
Multi-Race	30	1.18%	
Native Hawaiian/Pacific Islander	8	0.31%	
Race data not in ARIES	75	2.95%	2,540
Gender			
Male	1,994	78.50%	
Female	448	17.64%	
Transgender FTM	2	0.08%	
Transgender MTF	94	3.70%	
Other	2	0.08%	
Client Refused to Report	0	0.00%	2,540
Age Categories			
< 2	19	0.75%	
02-12	9	0.35%	
13-24	53	2.09%	
25-44	938	36.93%	
45-64	1232	48.50%	
65 and over	289	11.38%	2,540
Poverty Level			
<138%	2,002	78.82%	
138-199%	281	11.06%	
200-299%	183	7.20%	
300-399%	46	1.81%	
400-499%	15	0.59%	
>500%	13	0.51%	
Financial data not in ARIES	0	0.00%	2,540
HRSA Housing Status			
Stable/Permanent	1,005	39.57%	
Temporary	274	10.79%	
Unstable	159	6.26%	
Housing Status not in ARIES	1102	43.39%	2,540
Insurance Status			
Private	47	1.85%	
Medicaid	462	18.19%	
Medicare	82	3.23%	
Other	336	13.23%	
No Insurance	166	6.54%	
Insurance not in ARIES	1447	56.97%	2,540
San Diego Region			
Central	856	33.70%	
East	164	6.46%	
South Bay	480	18.90%	
Southeast	220	8.66%	
North Coastal	271	10.67%	
North Inland	146	5.75%	
North Central	168	6.61%	
Zip Code may be outside SD County	10	0.39%	
Zip Code not in ARIES	225	8.86%	2,540

DR. A. BRAD TRUAX AWARDS



2023 Call for Nominations

Due by **3:30 PM** on
Sunday, October 1, 2023

Each year, the **San Diego HIV Planning Group** recognizes individuals who have served the community and made outstanding contributions to the fight against the HIV/AIDS epidemic.

This award is named in honor of Dr. A. Brad Truax and in memory of his tireless dedication to the prevention and treatment of HIV/AIDS. Dr. Truax chaired the first advisory board on HIV/AIDS in San Diego County. He was a persistent and diplomatic person who encouraged people with different interests and agendas to work together to achieve goals that benefit the community.

The Selection Committee, composed of former Dr. A. Brad Truax Award winners, will select one (1) individual to receive the Dr. A. Brad Truax Award. Awards will be presented at a reception honoring all nominees on **World AIDS Day, Friday, December 1, 2023**.

From all nominations, awards are given in three (3) service categories:

- HIV Education, Prevention, and/or Counseling and Testing
- HIV Care, Treatment, and/or Support Services for persons living with HIV/AIDS
- HIV Planning, Advocacy, or Policy Development related to HIV education, prevention, counseling, testing, care, treatment, and/or support services

Who is Eligible:

- A volunteer, board member, or staff person who has provided service within the last year that improves the quality of life of people living with HIV/AIDS in San Diego.
- If the nominee is employed by an HIV service provider, the nomination must be for service above and beyond what is expected for their paid position.

Nomination Procedure:

- Submit the **Nomination Form** (print or typed).
- Attach relevant supporting information (limit to 3 pages).
- Include a high-resolution picture of the nominee.
- All nominations are due **by 3:30 PM on October 1, 2023**.

Please submit the nomination by email to **HPG.HHSA@sdcounty.ca.gov** with the subject line: **"Truax Nomination"**

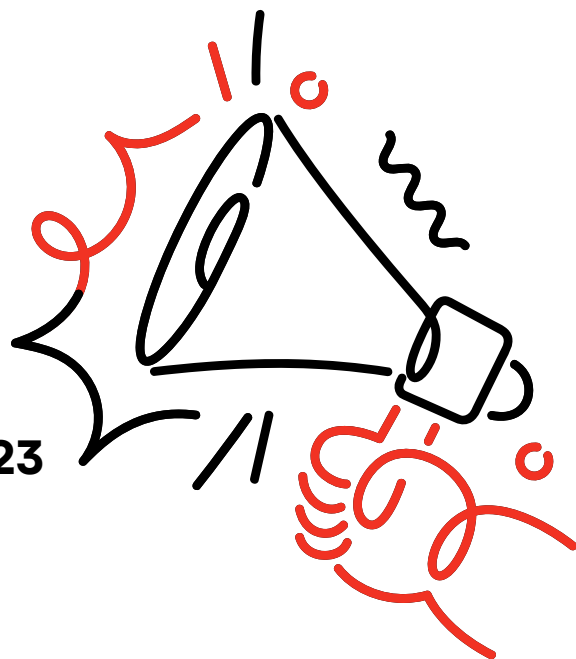


Scan QR Code
for Nomination
Form

Who Can Nominate:

- Anyone may submit a nomination.
- Self-nominations must include a letter of recommendation from a third party.

DR. A. BRAD TRUAX AWARDS



Convocatoria de Nominaciones 2023

Vencimiento antes de **las 3:30 p. m.**
del domingo 1 de octubre de 2023

Cada año, **el Grupo de Planificación del VIH de San Diego** reconoce a las personas que han servido a la comunidad y han hecho contribuciones sobresalientes a la lucha contra la epidemia del VIH/SIDA. Extendemos una cordial invitación a todos los miembros de la comunidad para participar en la presentación de nominaciones.

Este premio lleva el nombre en honor al Dr. A. Brad Truax y en memoria de su incansable dedicación a la prevención y tratamiento del VIH/SIDA. El Dr. Truax presidió la primera junta asesora sobre VIH/SIDA en el condado de San Diego. Fue una persona persistente y diplomática que alentó a personas con diferentes intereses y agendas a trabajar juntas para lograr objetivos que beneficien a la comunidad.

El Comité de Selección, compuesto por ex ganadores del Premio Dr. A. Brad Truax, seleccionará a una (1) persona para recibir el Premio Dr. A. Brad Truax. Los premios se entregarán en una recepción en honor a todos los nominados en **el Día Mundial del SIDA, el viernes 1 de diciembre de 2023**.

De todas las nominaciones, los premios se otorgan en tres (3) categorías de servicio:

- Educación, prevención y/o asesoramiento y pruebas del VIH
- Servicios de atención, tratamiento y/o apoyo para personas que viven con VIH/SIDA
- Planificación, defensa o desarrollo de políticas relacionadas con la educación, prevención,
- asesoramiento, pruebas, atención, tratamiento y / o servicios de apoyo del VIH

Procedimiento de nominación:

- Envíe el formulario de nominación.
- Adjunte información de apoyo relevante (límite a 3 páginas).
- Incluye una imagen de alta resolución del nominado.
- Todas las nominaciones deben presentarse antes de **las 3:30 PM del 1 de octubre de 2023**.

Por favor, envíe la nominación por correo electrónico a **HPG.HHSA@sdcounty.ca.gov** con el asunto: **"Nominación Truax"**



Escanear
código QR
para la
nominación
Forma

Quién es elegible:

- Un voluntario, miembro de la junta o miembro del personal que ha brindado servicio en el último año que mejora la calidad de vida de las personas que viven con VIH/SIDA en San Diego.
- Si el nominado es empleado por un proveedor de servicios de VIH, la nominación debe ser para el servicio más allá de lo que se espera para su puesto remunerado.

Quién puede nominar:

- Cualquier persona puede presentar una nominación.
- Las autonominaciones deben incluir una carta de recomendación de un tercero.



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

APPENDIX

(Page 039-041)

ASSEMBLY BILL (AB) 2449: JUST CAUSE AND EMERGENCY CIRCUMSTANCES (2023)

If the physical attendance quorum requirement is met, AB 2449 permits a member who is not physically present to request virtual attendance at the local legislative body's meeting under two circumstances:

(1) for "just cause" and (2) due to "emergency circumstances".

Qualifying Reason	Provisions to attend remotely	Requirements/Limitations
Just Cause	<ul style="list-style-type: none">• There is a childcare or caregiving need (for a child, parent, grandparent, grandchild, sibling, spouse, or domestic partner) that requires the member to participate remotely• A contagious illness prevents the member from attending the meeting in• There is a need related to a defined physical or mental disability that is not otherwise accommodated for• Traveling while on official business of the legislative body or another state or local agency	A member is limited to two (2) virtual attendances based on "just cause" per calendar year
Emergency Circumstances	<p>"A physical or family medical emergency that prevents a member from attending the meeting in person."</p> <p>A member is not required to disclose any medical diagnosis or disability, or any personal medical information that is already exempt from existing law.</p>	<p>A member of the legislative body must make a request to the body to allow the member to meet remotely due to an emergency circumstance, and further must provide a general description of the circumstance justifying such attendance.</p> <p>A request from a member to attend remotely due to an emergency circumstance requires that the legislative body take action and approve the remote attendance at the start of the meeting for the member to be allowed to participate remotely for that meeting*.</p>

**If the request does not allow sufficient time to be placed on the agenda as a proposed action item, then the legislative body may take action at the beginning of the meeting.*

ADDITIONAL REQUIREMENTS FOR A MEMBER PARTICIPATING REMOTELY:

In addition to making a request either for "just cause" or due to an "emergency circumstance" for remote appearance, AB 2449 imposes the following three (3) additional requirements on legislative body members seeking to appear remotely at public meetings:

1. Before any action is taken during the meeting, the member **must** publicly disclose whether any other individuals 18 years of age or older are present in the room at the remote location with the member, and the general nature of the member's relationship with any such individuals.
2. A member of the legislative body participating from a remote location must participate through both audio **and** visual technology.
3. A member's remote participation cannot be for more than three (3) consecutive months or 20 percent of the regular meetings for the local agency within a calendar year. And if the legislative body regularly meets fewer than ten (10) times per calendar year, a member's participation from a remote location cannot be for more than two meetings.

AB 2449 Checklist

(Applicable January 1, 2023 to December 31, 2025)

Procedures for Public Participation

- ☐ Public must be able to remotely hear, visually observe, and address the legislative body either remotely or in person in real time
- ☐ Public must have the opportunity to participate via: 1) two-way audio or 2) a telephonic service with a webcasting service
- ☐ Public cannot be required to submit comments prior to the meeting

Procedures for Member to Teleconference from a Remote Location

- ☐ Member must participate through both audio and visual technology
- ☐ Member must disclose adults who are present in the room at the remote location with the member and the general nature of the relationship with those individuals
- ☐ Member must submit a general description of the need to teleconference to the legislative body at the earliest opportunity (do not disclose any medical diagnosis or disability)
- ☐ Member may teleconference for just cause. Just cause is limited to 2 meetings per calendar year (see "Limits per Member" below). Just cause is defined as:
 - Child care or caregiving need of a child, parent, grandparent, grandchild, sibling, spouse or domestic partner
 - Contagious illness that prevents member from attending in person
 - A need related to a physical or mental disability
 - Travel on official business of the legislative body or another state or local agency
- ☐ Member may teleconference due to emergency circumstances, which requires approval of the legislative body and which is defined as a physical or family medical emergency that prevents a member from participating in person
- ☐ Limits per Member: Just cause and emergency circumstances cannot be invoked collectively for more than: 1) two meetings if the legislative body has fewer than 10 meetings per calendar year, or 2) three consecutive months or 20 percent of regular meetings per calendar year if the legislative body has 10 or more meetings per year. Just cause cannot be invoked more than twice per calendar year.

Procedures for the Board/Commission/Committee/Group

- ☐ Include instructions on the agenda how the public can participate remotely
- ☐ A quorum of the members of the legislative body must participate in person at the noticed location that is open to the public
- ☐ A majority of the membership must approve a request by a member to teleconference due to emergency circumstances; include the request on the agenda if received in time
- ☐ All votes must be taken by roll call
- ☐ Meeting must be stopped and no action taken if the broadcast of the meeting or ability of the public to comment is disrupted

TELECONFERENCING RULES UNDER THE BROWN ACT

	Default Rule	Declared Emergency (AB 361)	Just Cause (AB 2449)	Emergency Circumstance (AB 2449)
In person participation	Required	Not Required	Required	Required
Member participation via teleconferencing	Audio or Audio-visual	Audio or Audio-visual	Audio-visual	Audio-visual
Required (minimum) opportunities for public participation	In-Person	Call-In or internet-based	Call-in or internet-based <u>and</u> in person	Call-in or internet-based <u>and</u> in person
Disruption of broadcast or public's ability to comment	Meeting can proceed	No further action taken	No further action taken	No further action taken
Reason must be approved by legislative body	No	Yes (Initial findings and renewed findings every 30 days)	No, but general description to be provided by legislative body	Yes and general description to be provided to legislative body
Votes must be taken by roll call	Yes	Yes	Yes	Yes
Member's remote location included on agenda	Yes	No	No	No
Declared emergency and health official's recommendations for social distancing	No	Yes	No	No
Annual limits	None	None	Twice per calendar year (limits for emergency circumstances also apply for collective number of times AB 2449 can be used per year)	3 consecutive months/ 20% of regular meetings per calendar year; or 2 meetings per calendar year if body meets less than 10 times per year (collectively with just cause)
Effective Dates	Ongoing	Expires 12/31/2023	Expires 12/31/2025	Expires 12/31/2025