



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

**THURSDAY, NOVEMBER 13, 2025, 3:00 PM – 5:00 PM
County Operations Center,
5560 Overland Ave, San Diego, CA 92123.
Conference Room 172**

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 (PSRAC)

Thursday, November 13, 2025

3:00 PM - 5:00 PM

County Operations Center

5560 Overland Ave.

San Diego, CA 92123

(Training Room 172)



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:

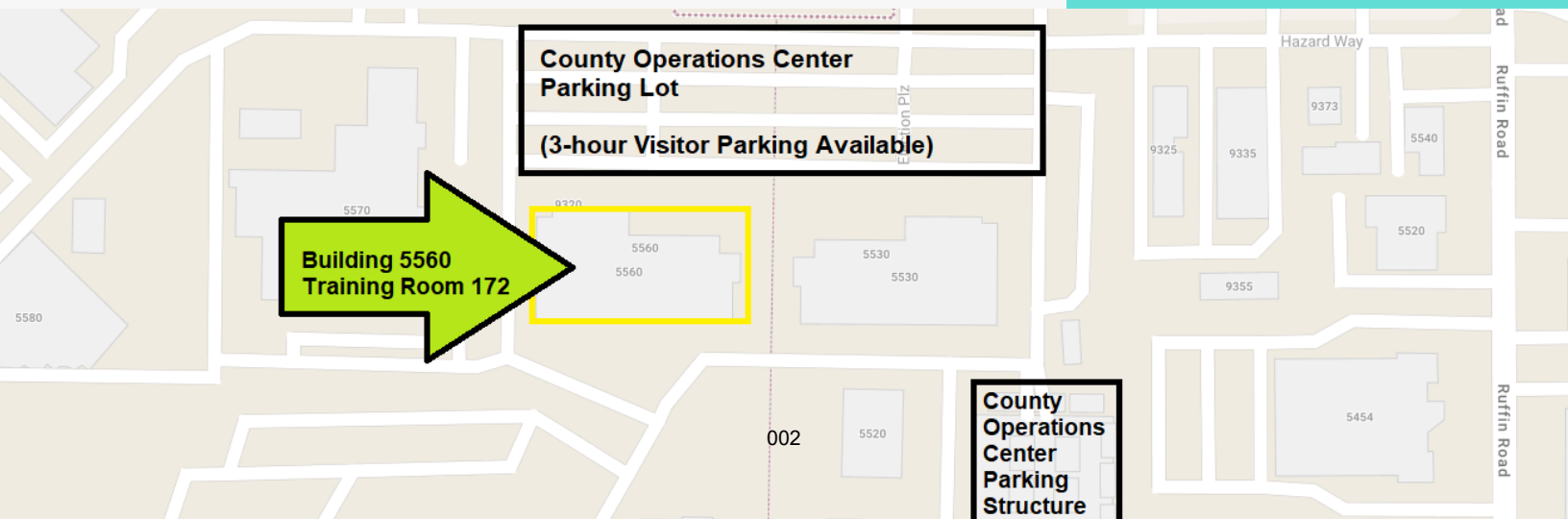
1. Take I-15 North to Exit 10 for Clairemont Mesa Blvd.
2. Turn left onto Clairemont Mesa Blvd.
3. Turn right onto Overland Ave.
4. Continue straight to stay on Overland Ave.



PUBLIC TRANSPORTATION

MTS Bus Routes:

25, 235, 928





Training Room 172

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. Enter east through County Operations Center entrance/black gate. **Building 5560** will be on your left.

FROM BUS:

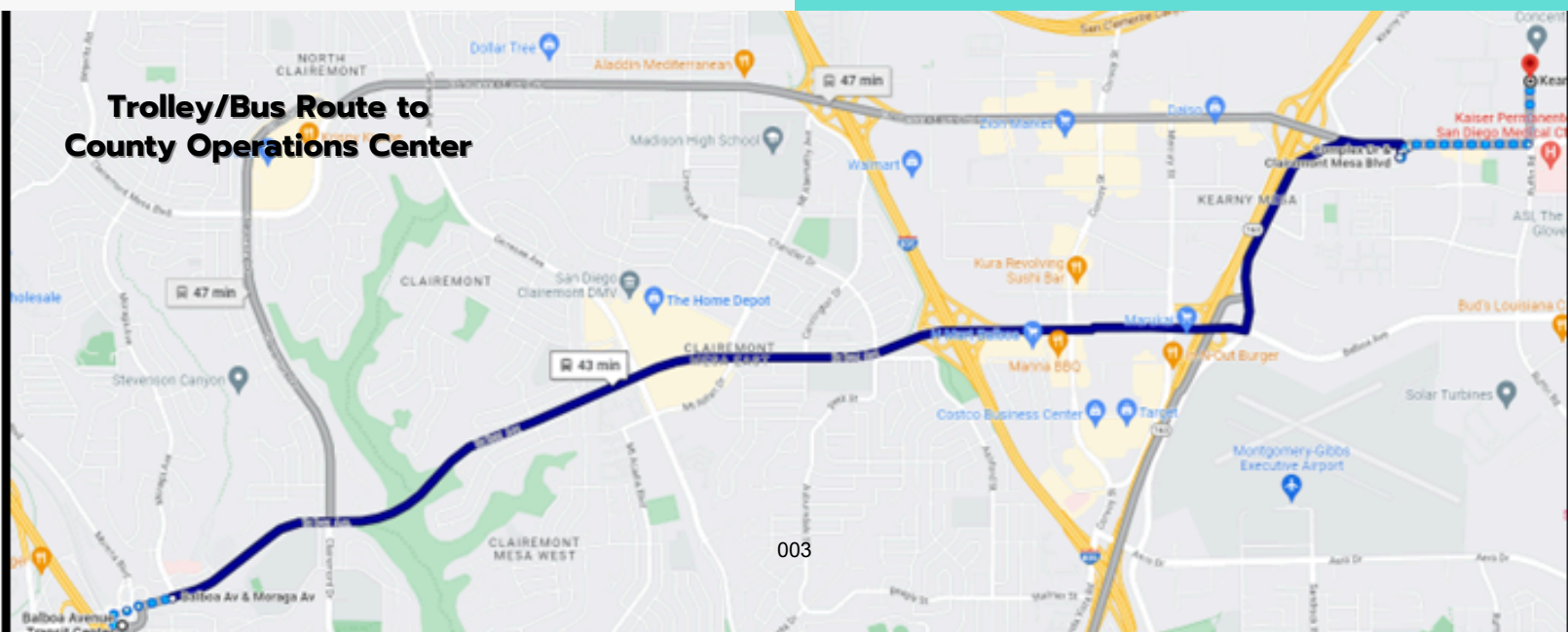
From Ruffin Road:

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. Enter east through County Operations Center entrance/black gate.
3. Turn left on pedestrian walkway. **Building 5560** will be on your **left**.

Trolley/Bus Route to County Operations Center



[illegible]

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)



Thursday, November 13, 2025, 3:00 PM – 5:00 PM
County Operations Center,
5560 Overland Ave, San Diego, CA 92123.
Conference Room 172

To participate remotely via Zoom:

<https://us06web.zoom.us/j/82979385521?pwd=ucUoVVtBupxbdBxoHszYHHIP2luoC.1>

Join the meeting via phone: 1-669-444-9171 United States Toll.

Meeting ID: 829 7938 5521

Password: PSRAC

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: Dr. Beth Davenport | Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Kalee Garland | Pamuela Halliwell | Dr. Delores Jacobs | Cinnamen Kubricky | Eva Matthews | Marco Aguirre Mendoza | Chris Mueller | Rhea Van Brocklin (Chair) | Joe Westcott

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 NOT the purview of this committee:** Selection of contractors; contract details; how contractors implement contracted services (e.g., staff salaries). 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 (2) 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 PSRAC agenda for November 13, 2025
6. **ACTION:** Approve the PSRAC minutes for June 13, 27, July 17, 24, 31, and August 7, 2025
7. Old Business:
 - a. **ACTION:** Recommendations for how services should be organized and delivered in FY 26 (March 1, 2025 – February 28, 2026)

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)

8. New Business:

- a. **ACTION:** Recommendations for FY 25 reallocations (current fiscal year, March 1, 2025 – February 28, 2026)
- b. Debrief the FY 26 priority setting and budget allocation process.
- c. **ACTION:** Review and approval of the 2026 PSRAC work plan

9. Routine Business:

- a. Review Monthly and Year-to-Date expenditures and assess for recommended reallocations
- b. Partial Assistance Rent Subsidy (PARS) and Emergency Housing update
- c. Review of the Monthly and Year-to-Date service utilization report
- d. Committee Attendance
 - i. Discussed and approved new attendance policy for PSRAC

10. Suggested items for the future committee agenda

11. Announcements

Next meeting date: January 8, 2026, from 3:00 PM – 5:00 PM

Location: County Operations Center, 5560 Overland Ave, San Diego, CA 92123
(Training Room 171)

12. Adjournment

Principles for PSRA Decision-Making Process	Criteria for the PSRA Decision-Making Process
Principles Guiding Decision Making (Priorities should reflect the Principles) <ol style="list-style-type: none">1. Decisions are made in an open, transparent process2. Decisions are based on documented needs (Needs assessment, etc.)3. Decisions are based on overall needs within the service area, not narrow single focus concerns4. 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 region6. Services must be culturally and linguistically appropriate and responsive7. Services should focus on the needs of low-income, underserved, and disproportionately impacted populations8. Services should minimize disparities in the availability and quality of treatment for HIV/AIDS9. Equitable access to services should be provided across subpopulations and regions	Criteria for Priority Setting <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 care5. Consistency with the continuum of care

For more information, visit our website at www.sdplanning.org



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**SAN DIEGO HIV PLANNING GROUP (HPG)
PRIORITY SETTING AND RESOURCE ALLOCATION COMMITTEE**

ACTION ITEM INFORMATION SHEET

**Recommendations for Reallocation for FY 25-26
(03-01-2025 to 02-28-2026)**

DATE: November 13, 2025

ITEM: Approve recipient recommendations for reallocating Part A funds to provide short-term food assistance to eligible Ryan White clients

BACKGROUND: Emergency Financial Assistance (EFA) is one of the allowable service categories that can be funded using Ryan White. It can be used to provide limited one-time or short-term assistance to support clients with an urgent need for essential items or services necessary to improve health outcomes, including food vouchers.

To meet the needs of clients who are experiencing food insecurity due to the volatility of Supplemental Nutrition Assistance Program (SNAP) benefits and escalating costs of living in San Diego County, the HIV, STD and Hepatitis Branch (HSHB) has researched the monthly allowance under SNAP as well as the average cost of groceries for adults living in San Diego County. Based upon that research, HSHB recommends deploying food vouchers at a value of \$100 per week per eligible adult or dependent minor. These grocery vouchers will be distributed to eligible clients through Case Management programs as well as a few other services. The food vouchers and client agreements will prohibit clients from using the vouchers to purchase alcohol, tobacco, or any item other than food or hygiene supplies.

To be eligible for EFA, clients must be a current Ryan White participant or enroll in the program before receiving a voucher, and they must attest to a need for short-term support for food purchases. Use of food vouchers will be tracked through HIV Care Connect and will prohibit clients from accessing food vouchers from more than one provider.

HSHB has identified \$445,250 in savings in Part A and an additional \$260,000 in Ryan White Part B and HRSA Ending the HIV Epidemic, bringing the total to \$705,250. This funding will provide 7,234 food vouchers to eligible clients during November and December 2025.

To support this request, HSHB is recommending a reduction in Outpatient Ambulatory Health Services (OAHS) by \$445,250. This reduction is possible due to under expenditure in this category and will not impact the availability of Outpatient Ambulatory Services for the remainder of the grant period.

RECOMMENDATIONS:

1. **Action Item:** Decrease Outpatient Ambulatory Health Services by \$445,250 from \$1,821,037 to \$1,375,787.
2. **Action Item:** Increase Emergency Financial Assistance by \$445,250 from \$61,856 to \$507,106.

RW 2025-26 PART A AWARD INFORMATION

Funding Source	Total RW 2025-26 Award
Part A	11,941,254.00
Part A MAI	812,482.00
TOTAL AWARD AMOUNT	12,753,736.00

RW 2025-26
YEAR TO DATE EXPENDITURE AND
SAVINGS BREAK-DOWN
Through August 2025

FY25-26 ALLOCATION BREAK DOWN

Funding Source	Admin. \$	Admin. %	CQM \$	CQM %	RW 2025-26 Service dollars	Total	CORE Medical Services	Support Services
Part A	1,149,330	10%	335,660	3%	10,456,264	11,941,254	46.05%	53.95%
Part A MAI	81,248	10%	34,092	4%	697,142	812,482		
TOTAL	1,230,577.80		369,752.07		11,153,406.13	12,753,736.00	49%	51%

Ryan White Part A Allocations

% Elapsed

50%

Service Categories	HRSA Ranking	Priority Ranking	RW 2025-26 HPG Initial Allocation	%	HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Outpatient Ambulatory Health Services: Primary Care	1l	1	1,102,630.00	11%	718,407.00	1,821,037.00	17%	706,238.47	39%	1,114,798.53	
Outpatient Ambulatory Health Services: Medical Specialty	1l	2	195,000.00	2%	-	195,000.00	2%	97,327.03	50%	97,672.97	
Psychiatric Medication Management	1j	12	6,000.00	0%	7,500.00	13,500.00	0%	3,805.93	28%	9,694.07	
Oral Health	1k	3	160,940.00	2%	97,847.00	258,787.00	2%	116,971.46	45%	141,815.54	
Medical Case Management	1h	4	1,151,853.00	12%	(122,000.00)	1,029,853.00	10%	483,896.68	47%	545,956.32	
Non-Medical Case Management for Housing		6	200,000.00	2%	-	200,000.00		7,459.93	4%	-	
Housing: Emergency Housing	2e	9	1,183,515.00	12%	203,717.00	1,387,232.00	13%	549,722.25	40%	837,509.75	
Housing: Location, Placement and Advocacy Services		8	100,000.00	1%	(100,000.00)	-		-	0%	-	
Housing: Partial Assistance Rental Subsidy (PARS)	2e	7	850,507.00	9%	104,000.00	954,507.00	9%	415,036.95	43%	539,470.05	
Non-Medical Case Management	2h	5	392,021.00	4%	(85,000.00)	307,021.00	3%	155,456.09	51%	151,564.91	
Coordinated HIV Services for Women, Infants, Children, Youth, and Families (WICYF)	1c	13	993,157.00	10%	70,000.00	1,063,157.00	10%	492,604.91	46%	570,552.09	
Childcare Services	2a		-	0%	-	-	0%	-	0%	-	
Early Intervention Services: Regional Services	1c	14	790,000.00	8%	(42,000.00)	748,000.00	7%	355,435.67	48%	392,564.33	
Health Education & Risk Reduction	2d	14a	-	0%	-	-	0%	-	0%	-	
Outreach Services	2j	14b	-	0%	-	-	0%	-	0%	-	
Referral Services	2l	14c	-	0%	-	-	0%	-	0%	-	
Referral to Health and Supportive Services (Peer Navigation)		16	260,000.00	3%	(61,148.00)	198,852.00	2%	82,779.57	42%	116,072.43	

008

Ryan White Part A Allocations						% Elapsed		50%			
Service Categories	HRSA Ranking	Priority Ranking	RW 2025-26 HPG Initial Allocation	%	HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Mental Health: Counseling/Therapy	1j	10	810,000.00	8%	(230,000.00)	580,000.00	6%	275,960.74	48%	304,039.26	
Psychosocial Support Services		17	46,744.00	0%	-	46,744.00	0%	-	0%	-	
Substance Use Services: Outpatient	1m	11	313,127.00	3%	41,010.00	354,137.00	3%	159,299.85	45%	194,837.15	
Substance Abuse Services: Residential	2o	18	-	0%	-	-	0%	-	0%	-	
Home-based Health Care Coordination	1e	19	228,500.00	2%	(15,000.00)	213,500.00	2%	93,898.51	44%	119,601.49	
Transportation: Assisted and Unassisted	2g	20	151,830.00	2%	(60,000.00)	91,830.00	1%	42,539.93	46%	49,290.07	
Food Services: Food Bank/Home-Delivered Meals	2c	21	536,073.00	5%	97,090.00	633,163.00	6%	204,919.65	32%	428,243.35	
Medical Nutrition Therapy	1i	22	35,542.00	0%	-	35,542.00	0%	18,656.86	52%	16,885.14	
Legal Services	2i	23	285,265.00	3%	-	285,265.00	3%	149,784.39	53%	135,480.61	
Emergency Financial Assistance	2b	24	61,856.00	1%	-	61,856.00	1%	23,170.07	37%	38,685.93	
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			9,854,560.00	100%	624,423.00	10,478,983.00	98%	4,434,964.94	42%	6,044,018.06	
Ryan White Part A Minority AIDS Initiative (MAI)			RW 2025-26 HPG Initial Allocation		HPG & Recipient Approved Actions +/-	RW 2025-26 HPG Adjusted Allocation	%	RW 2025-26 Year to Date Expenditure	RW 2025-26 Year-to-Date - % Expenditure/Budget)	RW 2025-26 Balance	Comments
Multi-Disciplinary Team			593,182.00		-	593,182.00	86%	231,031.30	39%	362,150.70	
Housing: Emergency Housing			100,000.00		-	100,000.00	14%	22,308.59	22%	77,691.41	
Subtotal			693,182.00		-	693,182.00	100%	253,339.89	37%	439,842.11	
TOTAL			10,547,742.00		624,423.00	11,172,165.00		4,688,304.83	42%	6,483,860.17	

CORE and Support Services Allocation Breakdown						
	Total Allocation	% Allocated	Total Expenditure	% Spent	Total Balance	% Balance
CORE Medical Services	4,825,976.50	46.1%	1,986,263.28	41.2%	2,839,713.22	58.8%
Support Services	5,653,005.00	53.9%	2,230,351.43	39.5%	3,422,653.57	60.5%
TOTAL	10,478,981.50		4,216,614.71		6,262,366.79	

Debrief of FY 26 Priority Setting and Resource Allocation (PSRA) Process

1. What worked with 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	

HIV PLANNING GROUP
6-MONTH COMMITTEE TRACKING
Nov 2024 - Oct 2025

PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE																
PSRAC	Nov	Dec	Jan	Feb	Mar	April	May	12-Jun	26-Jun	17-Jul	24-Jul	31-Jul	7-Aug	Sep	Oct	#
Total meetings	1		1	0	1	0	0	1	1	1	1	1	1	0	0	6
(10) Members																
Aguirre Mendoza, Marco	*		JC	NQ	JC	NM	NQ	1	*	1	*	*	*	NQ	NQ	0
Jacobs, Dr. Delores	*		1	NQ	*	NM	NQ	*	*	*	1	*	1	NQ	NQ	2
Davenport, Beth	*		*	NQ	*	NM	NQ	*	*	*	*	*	1	NQ	NQ	1
Fleming, Tyra ^{cc}	*		*	NQ	*	NM	NQ	*	*	*	1	*	*	NQ	NQ	0
Garcia-Bigley, Felipe	*		*	NQ	*	NM	NQ	*	*	*	*	*	*	NQ	NQ	0
Kubricky, Cinnamen	*		JC	NQ	*	NM	NQ	*	*	*	*	*	1	NQ	NQ	1
Luna, Sergio								*	*	*	1	*	*	NQ	NQ	0
Matthews, Eva			*	NQ	JC	NM	NQ	*	*	1	*	*	*	NQ	NQ	0
Mueller, Chris	*		*	NQ	*	NM	NQ	*	*	*	*	*	*	NQ	NQ	0
Van Brocklin, Rhea ^c	1		*	NQ	*	NM	NQ	*	1	*	*	*	*	NQ	NQ	1

To remain in good standing and eligible to vote, the committee member may not miss 3 consecutive meetings or 6 meetings within 12 months.

* = Present

1 = Absent for the month

1 = Absence when there are multiple meetings that month. Member needs to attend at least one (1) meeting for attendance to count for that month.

JC = Just Cause

EC = Emergency Circumstance

NM = No Meeting

NQ = No Quorum



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

APPENDIX

(Page 013 - 015)

ASSEMBLY BILL (AB) 2302: THE USE OF JUST CAUSE AND EMERGENCY CIRCUMSTANCES (2025)

(An Amendment to AB 2449)

If the physical attendance quorum requirement is met, AB 2302 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
<p>“Just Cause”</p>	<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 person. 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. 	<p>A member is limited to <u>two (2)</u> virtual attendances due to “just cause” per calendar year.</p>
<p>“Emergency Circumstances”</p>	<p><i>“A physical or family medical emergency that prevents a member from attending the meeting in person.”</i></p> <p>A member is <u>not</u> 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:</p> <ol style="list-style-type: none"> Make a request to the body to allow the member to meet remotely due to an emergency circumstance; and Provide a general description of no more than 20 words of the circumstance justifying such attendance. <p>A request from a member to attend remotely requires that the legislative body take action and <u>approve</u> the remote attendance at the start of the meeting for the member to be allowed to participate remotely for that meeting¹.</p>

¹If 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 2302 imposes the following three (3) additional requirements on legislative body members seeking to appear remotely at public meetings:

- The member:
 - Notifies the legislative body at the earliest opportunity possible, including at the start of a regular meeting, of their need to participate remotely for just cause, including a general description of the circumstances relating to their need to appear remotely at the given meeting. **OR**
 - Requests the legislative body to allow them to participate in the meeting remotely due to emergency circumstances and the legislative body takes action to approve the request. (See “requirements/limitations” for the use of emergency circumstances.)
- The member shall publicly disclose at the meeting before any action is taken, 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.
- The member shall participate through both audio and visual technology.



DR. A. BRAD TRUAX **AWARDS**

THE 36TH ANNUAL DR. A. BRAD TRUAX AWARDS

DECEMBER

MONDAY

01

3:00-5:00 PM

3909 Centre St., San Diego, CA
92103


The Dr. A. Brad Truax Award was created to honor the memory of Dr. Truax and his tireless dedication to the prevention and treatment of HIV/AIDS in San Diego.

Come recognize and celebrate the incredible contributions made by those who go above and beyond in the field of HIV work and the fight against the HIV/AIDS epidemic.

TO REGISTER PLEASE VISIT

<https://tinyurl.com/Truax2025>





DR. A. BRAD TRUAX **AWARDS**

LA 36TH ENTREGA ANUAL DE LOS PREMIOS DR. A. BRAD TRUAX

DICIEMBRE

LUNES

01

3:00-5:00 PM

3909 Centre St., San Diego, CA
92103

El premio Dr. A. Brad Truax fue creado para honrar la memoria del Dr. Truax y su incansable dedicación a la prevención y el tratamiento del VIH/SIDA en San Diego.

Acompáñanos al evento para reconocer y celebrar las increíbles contribuciones realizadas por aquellos que van más allá en el campo del trabajo sobre el VIH y la lucha contra la epidemia del VIH/SIDA

PARA REGISTRARSE, VISITE

<https://tinyurl.com/Truax2025>

