



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

**THURSDAY, JULY 31, 2025, 1:00 PM – 4:00 PM  
Southeastern Live Well Center  
5101 Market St, San Diego, CA 92114  
Tubman Chavez Room A**

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

Meeting Location & Directions:  
**Priority Setting & Resource Allocation**  
**(PSRAC)**

Thursday, July 31, 2025

1:00 PM - 4:00 PM

**Southeast Live Well Center**

5101 Market St.

San Diego, CA 92114 Tubman Chavez Rm A



Visitor/Employee parking available in parking structure. Main entrance can be accessed by exiting the parking structure on the 2nd floor and walking down the sidewalk to the left.

**FROM I-805 SOUTH:**

1. Head northwest on I-805 North.
2. Take exit 12B for Market St.
3. Turn right onto Market St.
4. The destination will be on your right.

**FROM I-805 NORTH:**

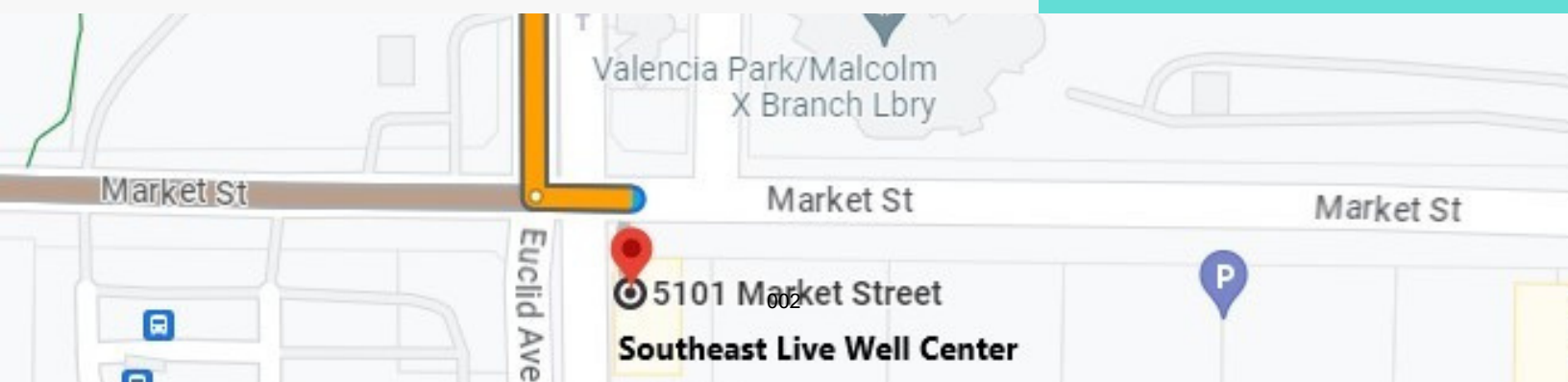
1. Head southeast on I-805 South.
2. Take exit 13A for CA-94-E/M L King Jr. Fwy.
3. Merge onto CA-94 E.
4. Take exit 4A for Euclid Ave.
5. Turn left onto Euclid Ave.
6. Use the left 2 lanes to turn left onto Market St.
7. The destination will be on your right.



**PUBLIC  
TRANSPORTATION**

**MTS Trolley:**  
Orange Line

**MTS Bus Routes:**  
3, 4, 5, 13, 60, 916,  
917 and 955



# PSRAC CONFLICT OF INTEREST (COI) Sheet

	Davenport, Beth	Fleming, Tyra	Garcia Bigley, Felipe	Jacobs, Delores	Kubricky, Cinnamen	Luna, Sergio	Matthews, Eva	Mendoza Aguirre, Marco	Mueller, Chris	Van Brocklin, Rhea
CHS: WICYF*										
Early Intervention Services: Regional Services										
Early Intervention Services: Minority AIDS Initiative										
Emergency Financial Assistance										
Food Services: Food Bank/Home Delivered Meals										
Home-Based Health Care Coordination										
Medical Case Management										
Medical Nutrition Services										
Mental Health: Counseling / Groups / Therapy										
Mental Health: Psychiatric Medication Management										
Non-Medical Case Management										
Oral Health										
Outpatient Ambulatory Health Services: Medical Specialty										
Outpatient Ambulatory Health Services: Primary Care										
Outreach Services										
Peer Navigation**										
Substance Use Disorder Treatment: Outpatient										
Substance Use Disorder Treatment: Residential										
Transportation: Assisted and Unassisted										

\*Coordinated HIV Services for Women, Infants, Children, Youth and Families

\*\*Referral for Healthcare and Support Services

Fleming, Tyra  
Jacobs, Delores  
Kubricky, Cinnamen

Luna, Sergio  
Mendoza Aguirre, Marco

## PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)



Thursday, July 31, 2025, 1:00 PM – 4:00 PM  
Southeastern Live Well Center.  
5101 Market St, San Diego, CA 92114.  
Tubman Chavez Room A

To participate remotely via Zoom:

<https://us06web.zoom.us/j/82979385521?pwd=ucUoVVtBupxbdBxothszYHHIP2luoC.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](mailto:hpg.hhsa@sdcounty.ca.gov).

**A quorum for this meeting is six (6)**

**Committee Members:** Dr. Beth Davenport | Tyra Fleming (Co-Chair) | Felipe Garcia-Bigley | Dr. Delores Jacobs | Cinnamon Kubricky | Sergio Luna | Eva Matthews | Marco Aguirre Mendoza | Chris Mueller | Rhea Van Brocklin (Chair)

### 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 July 31, 2025
6. 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

## PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE (PSRAC)

### 7. Old Business:

#### a. **None**

### 8. New Business:

- a. **ACTION:** Recommendations for FY 25 reallocations (current fiscal year, March 1, 2025 – February 28, 2026)
- b. **ACTION:** Recommendations for budget allocations in level-funding and reduction-funding scenarios for (next fiscal year, FY 26, March 1, 2026 – February 28, 2027)
- c. **ACTION:** Recommendations for how services should be organized and delivered in FY 26 (March 1, 2026 – February 28, 2027)
- d. Review service categories that underspend (monthly)

### 9. Suggested items for the future committee agenda

### 10. Announcements

**Next meeting date:** August 7, 2025, from 1:00 PM – 4:00 PM (if needed)

**Location:** *County Operations Center, 5560 Overland Ave, San Diego, CA 92123.  
Conference Room 171 and Via Zoom*

### 11. Adjournment

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

For more information, visit our website at [www.sdplanning.org](http://www.sdplanning.org)

HPG FY 26 Part A & MAI Allocation Worksheet

														Level Scenario Remaining Balance 0			Reduction Scenario Amount		
Level Scenario Remaining Balance \$0														FY26 PSRAC Recommendations			PSRAC Recommendations for FY 26 Reduced Funding Scenario		
SERVICE CATEGORY	FY 26 Priority Rank	FY 22			FY 23			FY 24			FY 25			FY 26			FY 26		
		Allocated	Expended	% Budget Spent (Expended vs Allocated)	Allocated	Expended	% Budget Spent (Expended vs Allocated)	Allocated	Expended	% Budget Spent (Expended vs Allocated)	Allocated	Expended through June 2025	% Budget Spent (Expended vs Allocated)	Approved FY 25 Allocations	PROPOSED CHANGES (+ / -)	Proposed Revisions to FY 25 Allocations	Approved Allocations (based on FY 25)	PROPOSED REDUCTIONS	Approved FY 26 Allocations (if funding is reduced)
OAHS: Primary Care	1	1,307,630	1,058,990	103%	1,102,630	1,104,470	100%	1,928,742	1,192,323	62%	1,821,037	590,114	32%	1,821,037		1,821,037	1,821,037		1,821,037
OAHS: Medical Specialty	2	383,386	194,080	80%	374,097	127,702	34%	195,000	147,641	76%	195,000	19,455	10%	195,000		195,000	195,000		195,000
Oral Health	3	300,940	151,952	76%	174,728	171,165	98%	241,571	168,489	70%	260,940	87,446	34%	260,940		260,940	260,940		260,940
Medical Case Management	9	1,268,338	1,313,568	94%	1,352,083	1,310,697	97%	1,151,853	1,128,937	98%	1,079,853	276,598	26%	1,079,853		1,079,853	1,079,853		1,079,853
Non-Medical Case Management	10	392,021	407,487	85%	437,236	419,105	96%	392,021	363,421	93%	352,021	80,202	23%	352,021		352,021	352,021		352,021
Non-Medical Case Management for Housing	11	250,000	-	0%	-	-		-	-		200,000	-		200,000		200,000	200,000		200,000
Housing: Partial Assistance Rental Subsidy (PARS)	4	667,507	772,975	97%	807,506	749,109	93%	850,507	627,612	74%	850,507	271,285	32%	850,507		850,507	850,507		850,507
Housing Location, Placement and Advocacy Services	12	100,000	-	0%	-	-		-	-		-	-		-		-	-		-
Housing: Emergency Housing	5	280,000	1,044,260	97%	1,250,000	1,177,673	94%	1,127,722	1,023,223	91%	933,515	343,430	37%	933,515		933,515	933,515		933,515
Mental Health: Counseling/Therapy & Support Groups	6	761,062	736,499	95%	975,970	877,060	90%	729,000	664,090	91%	580,000	176,005	30%	580,000		580,000	580,000		580,000
Substance Use Tx Services: Outpatient	7	269,959	255,037	81%	288,587	267,982	93%	313,127	312,838	100%	313,127	82,659	26%	313,127		313,127	313,127		313,127
Mental Health: Psychiatric Medication Management	8	28,036	5,486	20%	13,036	7,466	57%	17,394	13,712	79%	13,500	3,472	26%	13,500		13,500	13,500		13,500
Coordinated HIV Services for Women, Infants, Children, Youth, and Families (CHS: WICYF) (Formerly "Early Intervention Services (EIS): Countywide Services for Women, Children & Families)	13	943,317	993,157	100%	993,327	993,294	100%	993,157	992,942	100%	993,157	327,097	33%	993,157		993,157	993,157		993,157
*Early Intervention Services																			
*Medical Case Management																			
*Non-Medical Case Management																			
*Mental Health																			
*Childcare services	13a																		
*Outreach to WICYF																			
*Peer Navigation for WICYF																			
*Transportation for WICYF																			
Early Intervention Services (EIS): Regional Services	15	800,386	833,533	97%	860,304	818,327	95%	790,000	730,061	92%	773,000	221,240	29%	773,000		773,000	773,000		773,000
*Health Education & Risk Reduction	15a																		
*Outreach Services	15b																		
*Referral Services	15c																		

HPG FY 26 Part A & MAI Allocation Worksheet

														Level Scenario Remaining Balance 0			Reduction Scenario Amount		
Level Scenario Remaining Balance \$0														FY26 PSRAC Recommendations			PSRAC Recommendations for FY 26 Reduced Funding Scenario		
SERVICE CATEGORY	FY 26 Priority Rank	FY 22			FY 23			FY 24			FY 25			FY 26			FY 26		
Health Education and Risk Reduction	16	-	-		-	-		-	-		-	-		-		-	-		-
Peer Navigation (Referral for Health Care and Support Srvs.)	14	300,000	248,378	78%	402,231	307,871	77%	213,200	195,353	92%	193,093	73,830	38%	193,093		193,093	193,093		193,093
Psychosocial Support Services	17	-	-		-	-		-	-		46,744	-	0%	46,744		46,744	46,744		46,744
Substance Use Tx Services: Residential	18	-	-		-	-		-	-		-	-		-		-	-		-
Home-based Health Care Coordination	19	228,500	193,490	85%	228,500	207,239	91%	155,380	107,677	69%	228,500	55,982	24%	228,500		228,500	228,500		228,500
Transportation - Assisted & Unasst.	20	127,830	121,345	79%	169,057	126,021	75%	151,830	137,890	91%	101,830	22,869	22%	101,830		101,830	101,830		101,830
Food Services: Food Bank/Home Delivered Meals	21	536,073	530,043	100%	531,573	467,213	88%	536,073	535,362	100%	536,073	129,391	24%	536,073		536,073	536,073		536,073
Medical Nutrition Therapy	22	35,542	35,319	99%	35,542	34,397	97%	35,542	33,693	95%	35,542	10,345	29%	35,542		35,542	35,542		35,542
Legal Services	23	285,265	279,142	98%	285,265	284,652	100%	285,265	285,233	100%	285,265	93,291	33%	285,265		285,265	285,265		285,265
Emergency Financial Assistance	24	53,730	33,833	100%	68,356	57,486	84%	79,660	67,238	84%	61,856	17,467	28%	61,856		61,856	61,856		61,856
Home Health Care	25	-	-		-	-		-	-		-	-		-		-	-		-
Early Intervention Services: HIV Counseling and Testing	26	-	-		-	-		-	-		-	-		-		-	-		-
Cost-Sharing Assistance	27	-	-		-	-		-	-		-	-		-		-	-		-
Hospice	28	-	-		-	-		-	-		-	-		-		-	-		-
Part A TOTALS		9,319,522	9,208,574	94%	10,350,028	9,508,928	92%	10,187,043	8,727,736	86%	9,854,560	2,882,179	29%	9,854,560	-	9,854,560	9,854,560	-	9,854,560
Minority AIDS Initiative (MAI)		-																	
Multi-Disciplinary Team		562,902	469,826	82%	573,246	498,266	87%	593,183	511,851	86%	576,971	125,469	22%	576,971	-	576,971	576,971		576,971
Targeted Client Advocacy		-	-											-		-	-		
Emergency Housing		100,000	99,455	99%	100,000	52,722	53%	100,000	92,377	92%	97,267	-	0%	97,267	-	97,267	97,267		97,267
MAI TOTALS		662,902	569,280	85%	673,246	550,988	82%	693,183	604,228	87%	674,238	125,469	19%	674,238	-	674,238	674,238	-	674,238
GRAND TOTALS		9,982,424	9,777,854	94%	11,023,274	10,059,915	91%	10,880,226	9,331,964	86%	10,528,798	3,007,648	29%	10,528,798	-	10,528,798	10,528,798	-	10,528,798

# APPENDIX

(Page 009)



# 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><b>“Just Cause”</b></p>	<ul style="list-style-type: none"> <li>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.</li> <li>A contagious illness prevents the member from attending the meeting in person.</li> <li>There is a need related to a defined physical or mental disability that is not otherwise accommodated for.</li> <li>Traveling while on official business of the legislative body or another state or local agency.</li> </ul>	<p>A member is limited to <u>two (2)</u> virtual attendances due to “just cause” per calendar year.</p>
<p><b>“Emergency Circumstances”</b></p>	<p><b><i>“A physical or family medical emergency that prevents a member from attending the meeting in person.”</i></b></p> <p>A member is <b><i>not</i></b> required to disclose any medical diagnosis or disability, or any personal medical information that is already exempt from existing law.</p>	<p><b>A member of the legislative body must:</b></p> <ol style="list-style-type: none"> <li>Make a request to the body to allow the member to meet remotely due to an emergency circumstance; and</li> <li>Provide a general description of no more than 20 words of the circumstance justifying such attendance.</li> </ol> <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 meeting<sup>1</sup>.</p>

<sup>1</sup>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 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.

# Some Tips on RW Budgeting Process

1. Take a look at how categories spent out during the last fiscal year. In our case, this would be FY24.
2. Take a look at how the category is currently spending during this current fiscal year, FY25.
3. Compare the historical spending of the category FY20-23. Has more utilization occurred? This would show the category increasing in expenses as the years progress. Or has utilization declined and the funding has not been expended as the years progress?
4. What other factors from all the data reviewed could be affecting the monetary changes? Look at the RW Key Findings documents for data points as to why utilization has increased/decreased.
5. If you need clarification about spending levels or have additional questions about the data, you can request a point of information and ask the recipient, planning group support staff, or other committee members (if they are not conflicted).
6. Remember that if your agency receives Ryan White funding for a service category, you are conflicted and should abstain from voting on that category.
7. When you are ready to make a motion, please state the funding amount (Dollar Amount) you are recommending the category to be, and the justification for your motion. Include in your justification specific data in the key findings spreadsheet, as well as any data regarding previous years' spend out of that category.
8. It is okay to group multiple categories together per motion if it is presumed the funding level will stay the same. You will still need to include the data justification and funding amounts in that motion.



# San Diego HIV Planning Group FY26 **PRIORITY SETTING & BUDGET ALLOCATION**



**Your voice matters!** Help shape how funding is used in your community. Join us for the HIV Planning Group's upcoming budget allocation meetings and make sure your priorities are heard. This is an opportunity to use your voice in the discussion about services, programs, and resources for people living with and impacted by HIV/AIDS in San Diego.

## MEETING SCHEDULE

### Priority Setting & Resource Allocation Committee

1:00 PM - 4:00 PM

- June 12, 2025 • June 26, 2025
- July 10, 2025 • July 17, 2025 • July 24, 2025 • July 31, 2025
- August 7, 2025

### HIV Planning Group

2:00 PM - 5:00 PM

- August 6, 2025 • August 13, 2025 • August 27, 2025

**For Locations and More Information**



Visit Our Website  
[www.SDPlanning.org](http://www.SDPlanning.org)

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Or email us at  
[HPG.HHSA@sdcounty.ca.gov](mailto:HPG.HHSA@sdcounty.ca.gov)

