FY 2008 Part B & MAI Expenditures Report OMB No. 0915-xxxx Expiration Date:

Detailed instructions for completing and submitting this report can be found in the Electronic Handbooks and download from the web; https://grants.hrsa.gov/webexternal/Login.asp

| Section A: Identifying Information | |
|---|--|
| ~ Enter Name of Grantee Here ~ | |
| ~ Enter Preparer's Name Here ~ | |
| ~ Enter Preparer's Phone Number Here ~ | |
| ~ Enter Preparer's Email Address Here ~ | |

| Section B: FY 2008 Award Information | Award Amount | Prior Year Carryover | Total Avail. Funds |
|---|-----------------|-------------------------|-----------------------|
| 1. Part B Base Award | | | |
| 2. Part B ADAP Earmark Award | | | |
| 3. Part B Supplemental Award | | | |
| 4. Total Part B ADAP + Supplemental Award | \$0 | \$0 | \$0 |
| 5. Part B Emerging Communities Award | | | |
| 6. Total Part B Award | \$0 | \$0 | \$0 |
| 7. Part B MAI Award | | | |
| 8. Total Part B + MAI Award | \$0 | \$0 | \$0 |

| Section C: Part B Expenditures by Program Component | 1. Base Award | | | 2. ADAP Earmark + Supplemental | | | 3. Emerging Communities Award | | 4. Total Prior Year Carryover | | 5. Total | | |
|---|---------------|-----------|----------|--------------------------------|-----------|----------|-------------------------------|-----------|-------------------------------|--------|----------|--------|---------|
| Section C. Fait B Expenditures by Frogram Component | Award | Carryover | Percent* | Award | Carryover | Percent* | Award | Carryover | Percent* | Amount | Percent | Amount | Percent |
| Part B AIDS Drug Assistance Program Subtotal | \$0 | | | \$0 | | | \$0 | | | \$0 | | \$0 | |
| a. ADAP Services | | | | | | | | | | | | \$0 | |
| b. Health Insurance to Provide Medications | | | | | | | | | | | | \$0 | |
| c. ADAP Access/Adherence/Monitoring Services | | | | | | | | | | | | \$0 | |
| . Part B Health Insurance Premium & Cost Sharing Assistance | | | | | | | | | | | | \$0 | |
| . Part B Home and Community-based Health Services | | | | | | | | | | | | \$0 | - |
| . Part B HIV Care Consortia Services (Provide detail in Sec. D, Column 1 & 4) 1 | \$0 | \$0 | | | | | | | | | | \$0 | - |
| . Part B State Direct Services (Provide detail in Sec. D, Column 2 & 4)1 | \$0 | \$0 | | | | | | | | | | \$0 | |
| . Part B Clinical Quality Management ² | | | | | | | | | | | | \$0 | |
| . Part B Grantee Planning & Evaluation Activities ³ | | | | | | | | | | | | \$0 | |
| Grantee Administration ³ | | | | | | | | | | | | \$0 | |
| . Column Totals | \$0 | | | \$0 | | | \$0 | | | \$0 | | \$0 | |
| 0.Total Part B Expenditures | 90 | | | | | | | | | | | | |

| Section D: Breakdown for Consortia, State Direct Services | 1. Consortia⁵ | | 2. Direct Services | | 3. Emerging Communities ⁶ | | 4. Prior Year Carryover | | 5. Total | |
|--|---------------|---------|--------------------|---------|--------------------------------------|---------|-------------------------|---------|----------|---------|
| and Emerging Communities | Award | Percent | Award | Percent | Award | Percent | Amount | Percent | Amount | Percent |
| 1. Core Medical Services Sub-total ⁷ | \$0 | | \$0 | | \$0 | | \$0 | | \$0 | |
| a. Outpatient /Ambulatory Health Services | | | | | | | | | \$0 | |
| b. AIDS Drug Assistance Program (ADAP) Treatments | | | | | | | | | \$0 | |
| c. AIDS Pharmaceutical Assistance (local) | | | | | | | | | \$0 | |
| d. Oral Health Care | | | | | | | | | \$0 | |
| e. Early Intervention Services | | | | | | | | | \$0 | |
| f. Health Insurance Premium & Cost Sharing Assistance | | | | | | | | | \$0 | |
| g. Home Health Care | | | | | | | | | \$0 | |
| h. Home and Community-based Health Services | | | | | | | | | \$0 | |
| i. Hospice Services | | | | | | | | | \$0 | |
| j. Mental Health Services | | | | | | | | | \$0 | |
| k. Medical Nutrition Therapy | | | | | | | | | \$0 | |
| l. Medical Case Management (including Treatment Adherence) | | | | | | | | | \$0 | |
| m. Substance Abuse Services–outpatient | | | | | | | | | \$0 | |
| 2. Support Services Sub-total | \$0 | | \$0 | | \$0 | | \$0 | | \$0 | |
| a. Case Management (non-Medical) | | | | | | | | | \$0 | |
| b. Child Care Services | | | | | | | | | \$0 | |
| c. Emergency Financial Assistance | | | | | | | | | \$0 | |
| d. Food Bank/Home-Delivered Meals | | | | | | | | | \$0 | |
| e. Health Education/Risk Reduction | | | | | | | | | \$0 | |
| f. Housing Services | | | | | | | | | \$0 | |
| g. Legal Services | | | | | | | | | \$0 | |
| h. Linguistics Services | | | | | | | | | \$0 | |
| i. Medical Transportation Services | | | | | | | | | \$0 | |
| j. Outreach Services | | | | | | | | | \$0 | |
| k. Psychosocial Support Services | | | | | | | | | \$0 | |
| l. Referral for Health Care/Supportive Services | | | | | | | | | \$0 | |
| m. Rehabilitation Services | | | | | | | | | \$0 | |
| n. Respite Care | | | | | | | | | \$0 | |
| o. Substance Abuse Residential Services | | | | | | | | | \$0 | |
| p. Treatment Adherence Counseling | | | | | | | | | \$0 | |
| 3. Total | \$0 | | \$0 | | \$0 | | \$0 | | \$0 | |

| | MAI AWARD | | | | | | |
|--|-----------|---------|------------|----------|--------|---------|--|
| | AWA | ARD | PRIOR FY C | ARRYOVER | TO | ΓAL | |
| Section E: MAI Expenditures by Program Component | Amount | Percent | Amount | Percent | Amount | Percent | |
| Education to increase minority participation in ADAP | | | | | | | |
| Outreach to increase minority participation in ADAP | | | | | | | |
| 3. Clinical Quality Management ² | | | | | | | |
| 4. Grantee Planning & Evaluation Activities ³ | | | | | | | |
| 5. Grantee Administration ³ | | | | | | | |
| 6. Total MAI Expenditures | \$0 | 0% | \$0 | 0% | \$0 | 0% | |

^{*} Percentage is calculated on the combined total of the current Fiscal Year award plus prior year carryover amount.

FOR OFFICE USE ONLY:

☐ Grantee received waiver for 75% core medical services requirement.

⁽¹⁾ In the Base Award column ONLY, this cell will automatically calculate based on the detail you provide in Section D.

⁽²⁾ May not exceed 5% of the Part B award, or 3 million, whichever amount is smaller.

⁽³⁾ May not exceed 10% of the Part B award for either Planning & Evaluation or Grantee Admin. Additionally, the combined costs for these two categories may not exceed 15% of the Part B award.

⁽⁵⁾ All services in this column are considered Supprt Services.

⁽⁶⁾ In the Emerging Communities Column ONLY, the Total Allocations should equal the combined total of Rows 4 + 5 in Section C, Column 3.

FY 2008 Part B & MAI Expenditures Report Automatic Calculation of Part B Core Medical & Support Services Expenditures

~ Enter Name of Grantee Here ~

NOTE: This table is for reference only and is provided for grantees to automatically calculate their total Core Medical Service allocations/percentages across all Part B service dollars. The figures below reflect the amounts entered in the Expenditures Report (green tab).

| Core Medical Services Expenditures | Amount | Percentage (Amount / Total Service Expenditures) |
|--|--------|---|
| ADAP (H14) | \$0 | |
| Home-and Community-based Health Services (H19) | \$0 | |
| Health Insurance Premium & Cost Sharing Assistance (H18) | \$0 | |
| State-Direct Services: Core Medical Services (D30) | \$0 | |
| Emerging Communities: Core Medical Services (F30) | \$0 | |
| Total Core Medical Services Expenditures | \$0 | |

| Support Services Expenditures | Amount | Percent |
|---|--------|---------|
| Consortia Services (H20) | \$0 | |
| State-Direct Services: Support Services (D44) | \$0 | |
| Emerging Communities: Support Services (F44) | \$0 | |
| MAI Allocations for Education + Outreach Services (B66 + B67) | \$0 | |
| Total Support Services Expenditures | \$0 | |

| Total Part B <u>Services</u> Expenditures \$0 | Total Part B <u>Services</u> Expenditures | \$0 |
|---|---|-----|
|---|---|-----|