FY 2017 RWHAP Part B (X07) and MAI Allocations Report

Instructions are located in EHB: https://grants.hrsa.gov/webexternal/Login.asp

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

Section B: Reporting Year Award Information	
1. Part B Base Award	
2. Part B ADAP Earmark Award	
3. Part B ADAP Supplemental Award	
4. Total ADAP Award (ADAP Base + Supplemental)	\$0
5. Part B Emerging Communities Award	
6. Total Part B X07 Funds	\$0
7. Part B MAI Award	
8. Total Part B X07 Award	\$0

Section C: Part B Allocations by Program Component		1. Base Award		2. ADAP + ADAP Supplemental Award		3. Emerging Communities Award (EC)		4. Total	
	Amount	Percentage	Amount	Percentage	Amount	Percentage	Amount	Percentage	
1. Part B AIDS Drug Assistance Program Subtotal	\$0		\$0		\$0		\$0	-	
a. ADAP Services							\$0	-	
b. Health Insurance to Provide Medications							\$0	-	
c. ADAP Access/Adherence/Monitoring Services							\$0	-	
2. Part B Health Insurance Premium & Cost Sharing Assistance							\$0	-	
3. Part B Home and Community-based Health Services							\$0	-	
4a. Part B HIV Care Consortia/EC services (Provide detail in Section D, Column 1 or 3) ¹	\$0				\$0		\$0	-	
4b. Part B HIV Care Consortia Administration ²							\$0	-	
5. Part B State Direct Services (Provide detail in Section D, Column 2) ¹	\$0						\$0	-	
6. Part B Clinical Quality Management ³							\$0	-	
7. Part B Recipient Planning & Evaluation Activities ⁴							\$0	-	
8. Recipient Administration ⁴							\$0	-	
9. Column Totals	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	-	
10.Total Part B X07 Allocations ⁵	\$0								

Section D: Breakdown for Consortia, State Direct Services and Emerging	1. Cons	sortia ⁷	2. Direct	Services	3. Emerging (Communities	4. Total	
Communities	Amount	Percentage	Amount	Percentage	Amount	Percentage	Amount	Percentage
1. Core Medical Services Sub-total	\$0		\$0		\$0		\$0	
a. AIDS Drug Assistance Program (ADAP) Treatments								
b. AIDS Pharmaceutical Assistance (LPAP)							\$0	
c. Early Intervention Services							\$0	
d. Health Insurance Premium & Cost Sharing Assistance							\$0	
e. Home and Community-based Health Services							\$0	
f. Home Health Care							\$0	
g. Hospice							\$0	
h. Medical Case Management (including Treatment Adherence Services)							\$0	
i. Medical Nutrition Therapy							\$0	
j. Mental Health Services							\$0	
k. Oral Health Care							\$0	
I. Outpatient /Ambulatory Health Services							\$0	
m. Substance Abuse Outpatient Care							\$0	
2. Support Services Sub-total	\$0		\$0		\$0		\$0	
a. Child Care Services							\$0	
b. Emergency Financial Assistance							\$0	
c. Food Bank/Home-Delivered Meals							\$0	
d. Health Education/Risk Reduction							\$0	
e. Housing							\$0	
f. Linguistics Services							\$0	
g. Medical Transportation							\$0	
h. Non-Medical Case Management Services							\$0	
i. Other Professional Services							\$0	
j. Outreach Services							\$0	
k. Psychosocial Support Services							\$0	
I. Referral for Health Care and Support Services							\$0	
m. Rehabilitation Services							\$0	
n. Respite Care							\$0	
o. Substance Abuse Services - residential							\$0	
3. Total Services Allocations	\$0		\$0		\$0		\$0	

	MAI A	ward
Section E: MAI Allocations by Program Component	Amount	Percentage
Education to increase minority participation in ADAP		
Outreach to increase minority participation in ADAP		
3. Clinical Quality Management ³		
4. Recipient Planning & Evaluation Activities ⁴		
5. Recipient Administration ⁴		
6. Total MAI Allocations	\$0	0.00%

FOR OFFICE USE ONLY:

Recipient received waiver for 75% core medical services requirement.

- Footnotes:

 (1) The total services amounts will automatically be calculated based on the details you provide in Section D, column 1 or 2 or 3.

 (2) Consortia/Emerging Communities Administration, Planning and Evaluation costs may not exceed 10% of their respective total funds.

 (3) Clinical Quality Management may not exceed 5% of the Part B X07 award, or 3 million, whichever amount is smaller.

 (4) Planning & Evaluation or Recipient Administration may not exceed 10% of the Part B X07 award. Additionally, the combined costs for these two categories may not exceed 15% of the Part B X07 award.

 (5) This amount must equal the recipient's total Part B X07 Award.

 (7) All services in this column are considered Support Services.

LEGISLATIVE REQUIREMENTS CHECKLIST

INSTRUCTIONS: Recipients and Project Officers should use the following table to help determine whether or not the various Part B legislative spending requirements have been met. For more information on each of these requirements, please refer to the Ryan White HIV/AIDS Treatment Extension Act of 2009.

Amount

\$0

CORE MEDICAL SERVICES

ADAP (H16)

Percentage (Amount / Total Service Allocations)

			7		
Home-and Community-based Health Services (H21)	\$0				
Health Insurance Premium & Cost Sharing Assistance (H20)	\$0				
State-Direct Services: Core Medical Services (D33)	\$0				
Emerging Communities: Core Medical Services (F33)	\$0		1		
Total Core Medical Services Allocations	\$0		1		
			_		
Support Services Allocations	Amount	Percent			
Consortia Services (B22) + Consortia Administration (B23)	\$0				
State-Direct Services: Support Services (D47)	\$0		1		
Emerging Communities: Support Services (F47)	\$0		1		
MAI Allocations for Education + Outreach Services (B67 + B68)	\$0		1		
Total Support Services Allocations	\$0				
Total Service Allocations	\$0				
CLINICAL QUALITY MANAGEMENT					
				\$0	(Capped Amount)
otal Clinical Quality Management allocations must be 5% of the total X07 awa	rd or \$3 million (whiche	ever is smaller.)		**	
Fotal Clinical Quality Management allocations must be 5% of the total X07 awa fo the right in red, is the maximum (Capped Amount) that may be allocated to million) as well as the amount of Current Fiscal Year dollars allocated (CQM Allo check to make sure the Allocations do not exceed the Capped Amount.	Clinical Quality Manage	ement (the lessor of I		\$0	(CQM Allocations)
To the right in red, is the maximum (Capped Amount) that may be allocated to nillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Alloheck to make sure the Allocations do not exceed the Capped Amount.	Clinical Quality Manage ocations) on Clinical Qua	ement (the lessor of I		·	(CQM Allocations)
to the right in red, is the maximum (Capped Amount) that may be allocated to nillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Alloheck to make sure the Allocations do not exceed the Capped Amount.	Clinical Quality Manage ocations) on Clinical Qua	ement (the lessor of I		·	(CQM Allocations)
to the right in red, is the maximum (Capped Amount) that may be allocated to nillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount.	Clinical Quality Manage ocations) on Clinical Qua	ement (the lessor of I ality Management (H	25+B69). Please	·	(CQM Allocations) (Planning & Evaluation)
to the right in red, is the maximum (Capped Amount) that may be allocated to nillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount. PLANNING AND EVALUATION / RECIPIENT ADMINISTRATION otal Part B X07 Planning and Evaluation allocations and total Recipient Administratic funding stream as long as the combined total of each is 10% or less of the total X07 award.	Clinical Quality Manage ocations) on Clinical Quality Manage ocations on Clinical Quality Manage ocations and on the ocations much do not necessarily neotal XO7 award. In additional XO7 award. In additional XO7 award.	ement (the lessor of I ality Management (H st each be 10% or les eed to be 10% of each tion, Planning and	\$0 \$0	\$0	(Planning & Evaluation)
To the right in red, is the maximum (Capped Amount) that may be allocated to nillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount. PLANNING AND EVALUATION / RECIPIENT ADMINISTRATION Total Part B X07 Planning and Evaluation allocations and total Recipient Administratic than the total X07 award. Planning and Evaluation and Recipient Administratic	Clinical Quality Manage ocations) on Clinical Quality Manage ocations on Clinical Quality Manage ocations and on the ocations much do not necessarily neotal XO7 award. In additional XO7 award. In additional XO7 award.	ement (the lessor of I ality Management (H st each be 10% or les eed to be 10% of each tion, Planning and	25+B69). Please	\$0	
To the right in red, is the maximum (Capped Amount) that may be allocated to million) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount. PLANNING AND EVALUATION / RECIPIENT ADMINISTRATION Total Part B X07 Planning and Evaluation allocations and total Recipient Administratic funding stream as long as the combined total of each is 10% or less of the total X07 award.	Clinical Quality Manage ocations) on Clinical Quality Manage ocations on Clinical Quality of the Cotal X07 award. In addit texceed 15% of the tot ivided by the Total X07 H27 + B71) / 111. Please the combined Planning the Combined Planning	st each be 10% or les teach be 10% or les teach be 10% of each tion, Planning and al XO7 award. award (H26 + B70) / e e check to make sure t and Evaluation and	\$0 \$0	\$0	(Planning & Evaluation) (Recipient Administration) (Planning & Evaluation + Recipien
To the right in red, is the maximum (Capped Amount) that may be allocated to inillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount. PLANNING AND EVALUATION / RECIPIENT ADMINISTRATION Fotal Part B X07 Planning and Evaluation allocations and total Recipient Administration than the total X07 award. Planning and Evaluation and Recipient Administration funding stream as long as the combined total of each is 10% or less of the to Evaluation and Recipient Administration allocations combined must not to the right in red, is the percentage of Planning and Evaluation allocations dil11 and Recipient Administration allocations divided by the Total X07 award (Hese percentage are not greater than 10%. Also shown is the percentage of Recipient Administration allocations divided by the Total X07 Award (H26 + HZ sure this percentage is not greater than	Clinical Quality Manage ocations) on Clinical Quality Manage ocations on Clinical Quality of the control of the	st each be 10% or les teach be 10% or les teach be 10% of each tion, Planning and al XO7 award. award (H26 + B70) / e e check to make sure t and Evaluation and	\$0 \$0	\$0 0.0% 0.0%	(Planning & Evaluation) (Recipient Administration)
to the right in red, is the maximum (Capped Amount) that may be allocated to inillion) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount. PLANNING AND EVALUATION / RECIPIENT ADMINISTRATION Total Part B X07 Planning and Evaluation allocations and total Recipient Administratic funding stream as long as the combined total of each is 10% or less of the total X07 award. Planning and Evaluation allocations combined must not a Evaluation and Recipient Administratic funding stream as long as the combined total of each is 10% or less of the total X07 award (Hother Evaluation and Recipient Administration allocations divided by the Total X07 award (Hother Evaluation Administration allocations divided by the Total X07 Award (Hother Haman) Recipient Administration allocations divided by the Total X07 Award (Hother Haman) SONSORTIA ADMINISTRATION	Clinical Quality Manage ocations) on Clinical Quality Manage ocations on Clinical Quality Manage ocations muon do not necessarily ne otal X07 award. In addit exceed 15% of the tot ivided by the Total X07 H27 + B71) / I11. Please the combined Planning 27 + B70 + B71) / I11. Pl 15%.	st each be 10% or les set each be 10% or les set to be 10% of each tion, Planning and al X07 award. award (H26 + B70) / e check to make sure ; and Evaluation and Please check to make	\$0 \$0	\$0 0.0% 0.0%	(Planning & Evaluation) (Recipient Administration) (Planning & Evaluation + Recipien
To the right in red, is the maximum (Capped Amount) that may be allocated to million) as well as the amount of Current Fiscal Year dollars allocated (CQM Allocheck to make sure the Allocations do not exceed the Capped Amount. PLANNING AND EVALUATION / RECIPIENT ADMINISTRATION Total Part B X07 Planning and Evaluation allocations and total Recipient Administratic funding stream as long as the combined total of each is 10% or less of the te Evaluation and Recipient Administration allocations combined must not to the right in red, is the percentage of Planning and Evaluation allocations di 111 and Recipient Administration allocations divided by the Total X07 award (k 126 + K).	Clinical Quality Manage ocations) on Clinical Quality Manage ocations on Clinical Quality Manage ocations muon do not necessarily ne otal X07 award. In addit exceed 15% of the tot ivided by the Total X07 H27 + B71) / I11. Please the combined Planning 27 + B70 + B71) / I11. Pl 15%.	st each be 10% or les set each be 10% or les set to be 10% of each tion, Planning and al X07 award. award (H26 + B70) / e check to make sure ; and Evaluation and Please check to make	\$0 \$0	\$0 0.0% 0.0%	(Planning & Evaluation) (Recipient Administration) (Planning & Evaluation + Recipient

\$0

0.0%

(EC Administration)

EC administration allocations must be 10% or less than the total EC funds.

To the right in red, is the percentage of EC administration allocations divided by the EC award (F27 / I8). Please check to make sure this percentage does not exceed 10%.

INSTRUCTIONS FOR FY 2017 RWHAP PART B SUPPLEMENTAL PROGRAM AWARD

Please print this sheet to review the instructions.

Supplemental Allocations Report

Recipients shall provide an Supplemental Allocations Report (blue tab) for the FY 2017 Ryan White HI\
Supplemental Program Award using the following template format provided.

Do not enter information into the gray cells, as they contain formulas and will automatically pop

Recipient Name: Enter the name of the recipient using the name from the Notice of Award (NoA).

Preparer Name: Enter the name of the preparer.

Preparer Phone Number: Enter the phone number (including area code) of the preparer.

FY 2017 RWHAP Part B Supplemental Program Award: Enter the FY 2017 RWHAP Part B Supplem NoA.

Section A: Planned Funding by Program Component

Enter the amounts allocated from the RWHAP Part B Supplemental Award using the components listed RWHAP Part B HIV Care Consortia (# 4a) & RWHAP Part B State Direct Services (# 5) are automatica of Funding.

Section B: Breakdown of Funding

Enter the amount breakdown for funding for Core Medical Services and Support Services.

እርፈዋ services delivered for or through Consortia (including Core Medical Services) are deemed to be S

- 2. AIDS Drug Assistance Program (ADAP) Treatments funding is accounted for in Section A.
- 3. Health Insurance and Home/Community Based Health are not allowed as a Direct Service. If these they are accounted for in Planned Funding by Program Component (Section A).

Core Medical Calculation

This calculation sheet (yellow tab) provides an overview of the funding for FY 2017 RWHAP Part B Sup Core Medical & Support Services. Amounts for this tab will auto-populated from the Supplemental Alloc

Recipient Name: Enter the name of the recipient using the name from the NoA.

Reminder: The 75/25 Core Medical Services Requirement applies to the RWHAP Part B Supplementa

Reci Prei

FY 2017 RWHAP Part B Supplemental Prog

Preparer Pho

Section A: Planned Funding by Program Component

- 1. RWHAP Part B Supplemental AIDS Drug Assistance Program Subtotal
- a. ADAP Services
- b. Health Insurance to Provide Medications
- c. ADAP Access/Adherence/Monitoring Services
- 2. RWHAP Part B Supplemental Health Insurance Premium & Cost Sharing Assistance
- 3. RWHAP Part B Supplemental Home and Community-based Health Services
- 4a. RWHAP Part B Supplemental HIV Care Consortia (Provide detail in Section B)
- 4b. RWHAP Part B Supplemental HIV Care Consortia/EC Administration
- 5. RWHAP Part B Supplemental State Direct Services (Provide detail in Section B)
- 6. RWHAP Part B Supplemental Clinical Quality Management 1
- 7. RWHAP Part B Supplemental Recipient Planning & Evaluation Activities²
- 8. Recipient Administration²
- 9. Total RWHAP Part B Supplemental Program Funding Amounts

Section B: Breakdown for Consortia, State Direct Services, and Emerging Communities Final Fund

10. Core Medical Services Sub-total

- a. AIDS Drug Assistance Program (ADAP) Treatments
- b. AIDS Pharmaceutical Assistance (LPAP)
- c. Early Intervention Services
- d. Health Insurance Premium & Cost Sharing Assistance
- e. Home and Community-based Health Services
- f. Home Health Care
- g. Hospice
- h. Medical Case Management (including Treatment Adherence Services)
- i. Medical Nutrition Therapy
- j. Mental Health Services
- k. Oral Health Care
- I. Outpatient /Ambulatory Health Services
- m. Substance Abuse Outpatient Care

11. Support Services Sub-total

- a. Child Care Services
- b. Emergency Financial Assistance
- c. Food Bank/Home-Delivered Meals
- d. Health Education/Risk Reduction
- e. Housing
- f. Linguistics Services
- g. Medical Transportation Services
- h. Non-Medical Case Management Services
- i. Other Professional Services
- j. Outreach Services
- k. Psychosocial Support Services
- I. Referral for Health Care and Support Services
- m. Rehabilitation Services
- n. Respite Care
- o. Substance Abuse Residential Services

12. Total Funding Amounts

- (1) May not exceed 5% of the FY 2017 RWHAP Part B Supplemental Program award, or \$3 million, v
- (2) May not use more than 10% of the FY 2017 RWHAP Part B Supplemental Program award for eith
- (3) All services in this column are considered Support Services.

cations Report			

Total FY 2017 RWHAP Part B Supplemental Program Award						
Amount	Percent					
\$0						
\$0						
Φυ						
# 0						
\$0						
	-					
\$0	0.00%					

Cons	ortia³	Direc	t Services	
Amount	Percent	Amount Percent		
\$0		\$0		

\$0		\$0	
	-		
	-		
	-		
	1		
\$0		\$0	

mount is smaller.

and Evaluation or Recipient Administration; additionally, the

Automatic Calculation of FY 2017 RWHAP Part B Supplemental Progra Core Medical & Support Services

Recipient Name:

This table is provided for grantees to automatically calculate their total Core Medical S B Supplemental Program Award service dollars.

The figures below reflect the amounts entered in the Suppl Allocations Report (yellow

Core Medical Services Allocations	Amount
ADAP (B12)	\$0
Health Insurance Premium & Cost Sharing Assistance (B16)	\$0
Home-and Community-based Health Services (B17)	\$0
State-Direct Services: Core Medical Services (D29)	\$0
Total Core Medical Services Allocations	\$0

Support Services Allocations	Amount
Consortia Services (B18) + Consortia Administration (B19)	\$0
State-Direct Services: Support Services (D43)	\$0
Total Support Services Allocations	\$0

Total FY 2017 RWHAP Part B Supplemental Program Award	\$0	
Core Medical & Support Services Allocations Amount	φυ	

ım Award Allocations

Service allocations/percentages across all FY 2017 RWHAP Part

tab).		
lauı.		

Percentage (Amount / Total Service Allocations)

Percent	

--