Part B X08 Allocations Report

FYXXXX RWHAP Part B Supplemental Program Award Allocations Report

Recipient Name		
Preparer Name		
Preparer Phone Number		

FY XXXX RWHAP Part B Supplemental Program Award

Section A: Planned Funding by Program Component	Total RWHAP Part B Supplemental Program Award		
	Amou nt	Perce nt	
1. RWHAP Part B Supplemental AIDS Drug Assistance Program Subtotal	\$0		
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 for Low Income Individuals			
3. RWHAP Part B Supplemental Home and Community-Based Health Services			
4a RWHAP Part B Supplemental HIV Care Consortia (Provide detail in Section B)	\$0	••	
4b. RWHAP Part B Supplemental HIV Care Consortia Administration	\$0	:	
5. RWHAP Part B Supplemental State Direct Services (Provide detail in Section B)	\$0	•	
6. RWHAP Part B Supplemental Clinical Quality Management ¹			
7. RWHAP Part B Supplemental Recipient Planning & Evaluation Activities ²			
8. Recipient Administration ²			
9. Total RWHAP Part B Supplemental Program Funding Amounts	\$0	0.00%	

ection B: Breakdown for Consortia and	Consortia ³	Direct	Combined
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			Services		To	tal
State Direct Services Final Funding	Amou nt	Perce nt	Amou nt	Perce nt	Amou nt	Perce nt
1. Core Medical Services Sub-total	\$0		\$0			
a. AIDS Drug Assistance Program (ADAP) Treatments						
b. AIDS Pharmaceutical Assistance (LPAP)						
c. Early Intervention Services						
d. Health Insurance Premium & Cost Sharing Assistance for Low Income Individuals						
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						
2. Support Services Sub-total	\$0		\$0			
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 Services (Residential)						
3. Total Funding Amounts	\$0		\$0			

(1) May not exceed 5% of the FY XXXX RWHAP Part B Supplemental Program	
award, or \$3 million, whichever amount is smaller.	
(2) May not use more than 10% of the FY XXXX RWHAP Part B Supplemental	
Program award for either Planning and Evaluation or Recipient Administration;	
additionally, the combined costs for these two categories may not exceed 15%	
of the FY XXXX RWHAP Part B Supplemental award.	

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