

Ryan White HIV/AIDS Program Part A: It All Adds Up! December 13, 2018

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Health Resources and Services Administration (HRSA) Overview

- Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically vulnerable through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities
- Every year, HRSA programs serve tens of millions of people, including people living with HIV/AIDS, pregnant women, mothers and their families, and those otherwise unable to access quality health care



HIV/AIDS Bureau Vision and Mission

Vision

Optimal HIV/AIDS care and treatment for all.

Mission

Provide leadership and resources to assure access to and retention in high quality, integrated care, and treatment services for vulnerable people living with HIV/AIDS and their families.



Ryan White HIV/AIDS Program

- Provides comprehensive system of HIV primary medical care, medications, and essential support services for low-income people living with HIV
 - More than half of people living with diagnosed HIV in the United States – more than 550,000 people – receive care through the Ryan White HIV/AIDS Program
- Funds grants to states, cities/counties, and local community based organizations
 - Recipients determine service delivery and funding priorities based on local needs and planning process
- Payor of last resort statutory provision: RWHAP funds may not be used for services if another state or federal payer is available
- 84.9% of Ryan White HIV/AIDS Program clients were virally suppressed in 2016, exceeding national average of 55%



Source: HRSA. Ryan White HIV/AIDS Program Annual Client-Level Data Report 2015; CDC. HIV Surveillance Supplemental Report 2016;21(No. 4)



Learning Objectives



At the conclusion of this activity, the participant will be able to:

1. Identify the statutory and program guidance documents relevant for the Ryan White HIV/AIDS Program (RWHAP) for Part A recipients.
2. Review the major RWHAP Part A legislative and programmatic requirements.
3. Understand the necessary components of a budget that meet RWHAP Part A legislative and programmatic requirements.

Agenda

- I. Statutory and Program Guidance
- II. Administration and Program Requirements
- III. Fiscal Requirements
- IV. Budget and Budget Narrative



I. Statutory and Program Guidance



- Title XXVI of the Public Health Service Act, 42 USC. Section 300ff-11s as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (P.L.111-87).
- 45 CFR Part 75 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for the U.S. Department of Health and Human Services Awards
- Department of Health and Human Services (HHS) Grants Policy Statement
- HRSA/HAB policy clarification notices, letters, and guidelines.
- Office of Inspector General (OIG) reports and recommendations
- Manuals and Guidelines issued by HRSA/HAB including the National Monitoring Standards
- National HIV/AIDS Strategy



I. Statutory and Program Guidance

Ryan White HIV/AIDS Treatment Extension Act of 2009

- Amounts provided will be expended on core medical services, support services, administrative and clinical quality management
- At least 75% of HIV services funds must be used on core medical services (unless core medical services waiver approved)
- Limit of 10% administration
- Limit of 5% CQM or \$3 million, whichever is less
- Unallowable costs
- Services are provided regardless of the client's ability to pay



I. Statutory and Program Guidance

45 CFR 75

- Cost Principles
- Administrative Requirements
- Audit Requirements



I. Statutory and Program Guidance

HHS Grants Policy Statement and Policy Clarification Notices

- **Grants Policy Statement:** Includes general terms and conditions for HHS discretionary grants and cooperative agreements. It also provides information about the grants process and authorities.
- **Policy Clarification Notices (PCNs):** HRSA/HAB develops policies that implement the legislation, providing guidance to recipients in understanding and implementing legislative requirements.



I. Statutory and Program Guidance

National Monitoring Standards

- Provide a compilation of all major Ryan White HIV/AIDS Program documents used for compliance, oversight, and expectations
- Assist recipients in meeting Federal requirements for program and fiscal management, monitoring, and reporting

Note

Administrative/Program, Fiscal, Clinical Quality Management and Subrecipient Site Visit Monitoring Tools were developed to check for compliance against the National Monitoring Standards.



I. Statutory and Program Guidance

Administrative/Program Requirements

1. Allowable Uses of Part A Service Funds
2. Core Medical Services
3. Support Services and Other Service Requirements
4. Quality Management
5. Administration
6. Other Service Requirements
7. Prohibitions and Additional Requirements
8. Chief Elected Official (CEO) Agreements & Assurances
9. Minority AIDS Initiative
10. Data Reporting Requirements



I. Statutory and Program Guidance

Fiscal Requirements

1. Limitations on Use
2. Unallowable Costs
3. Income from Fees
4. Imposition and Assessment of Client Charges
5. Financial Management
6. Property Standards
7. Cost Principles
8. Audit Requirements
9. Matching or Costs Sharing/MOE
10. Fiscal Procedures
11. Unobligated Balances
12. Monitoring Sub-recipients
13. Unobligated Balances



I. Statutory and Program Guidance

Clinical Quality Management Requirements

1. Limitations on Use of Part A Funds
2. Use Grant Funds
3. Unallowable Costs
4. HRSA/HAB Universal Standards and Part A Monitoring Standards
5. HIV/AIDS Bureau Performance Measures



II. Administrative and Program Requirements



1. Allowable Uses of Part A Service Funds
2. Core Medical Services
3. Support Services and Other Service Requirements
4. Quality Management
5. Administration
6. Other Service Requirements
7. Prohibitions and Additional Requirements
8. Chief Elected Official (CEO) Agreements & Assurances
9. Minority AIDS Initiative
10. Data Reporting Requirements

II. Administrative and Program Requirements

1. Allowable Uses of Part A Service Funds

- Core medical services
- Support services
- Clinical quality management
- Administrative activities



II. Administrative and Program Requirements

2. Core Medical Services

- Outpatient and ambulatory health services
- AIDS Drug Assistance Program (ADAP) Treatments
- AIDS Pharmaceutical Assistance LPAP, CPCP)
- Oral health care
- Early intervention services (EIS)
- Substance abuse outpatient care
- Mental health services
- Medical case management, including treatment adherence
- Health insurance premium & cost sharing assistance for low-income individuals
- Home health care
- Home & community-based health services
- Medical nutrition therapy
- Hospice services



II. Administrative and Program Requirements

3. Support Services

- Non-Case management services
- Child care services
- Emergency financial assistance
- Food bank/home-delivered meals
- Health education/risk reduction
- Housing
- Other services (legal)
- Linguistic services
- Medical transportation
- Outreach services
- Psychosocial support services
- Referral for health care/supportive services
- Rehabilitative services
- Respite Care
- Substance abuse services- residential
- Treatment adherence counseling



II. Administrative and Program Requirements

4. Clinical Quality Management (CQM)

The RWHAP requires the establishment of a clinical quality management (CQM) program. A CQM program is the coordination of activities aimed at improving patient care, health outcomes, and patient satisfaction.

It is important to know the difference between Quality Improvement (QI) and Quality Assurance (QA). You **CANNOT** charge QA to CQM. QA can only be charged to administration.



II. Administrative and Program Requirements

4. CQM Costs – PCN 15-02

Activity	Quality Assurance (Administrative Costs)	Clinical Quality Management
Performance measurement prioritization and alignment with other RWHAP Parts in the service area		X
Development of Service Standards	X	
Data extraction for clinical quality management purposes (collect, aggregate, analyze, and report on measurement data)		X
Chart audits/reviews	X	X
Monitoring site visits	X	If the purpose for the site visit is to assess or monitor the CQM Program
Extracting data for reporting to internal and external stakeholders	X	
Electronic health records interface with other providers; system operations	X	
CQM committee in planning for quality improvement projects		X



II. Administrative and Program Requirements

5. Administration – PCN 15-01

Costs subject to the 10% administrative cap include:

- Routine grant administration and monitoring activities
- Computer hardware and software
- Development and establishment of reimbursement and accounting systems
- Preparation of routine programmatic (RSR) and financial reports
- Compliance with terms and conditions and audit requirements
- Recipient's subaward procedures
- Subrecipient monitoring
- Reporting on subawards and funding reallocation activities
- Related payroll, audit and general legal services
- Planning Council support



III. Fiscal Requirements



1. **Limitations on Use**
2. **Unallowable Costs**
3. **Income from Fees**
4. Imposition and Assessment of Client Charges
5. **Financial Management**
6. Property Standards
7. **Cost Principles**
8. Audit Requirements
9. Matching or Costs Sharing/MOE
10. Fiscal Procedures
11. Unobligated Balances
12. Monitoring Sub-recipients
13. Unobligated Balances

III. Fiscal Requirements

1. Limitations on Use

- 10% cap on administrative costs (includes indirect cost)
- Subrecipient administrative cost capped at 10% in the aggregate
- CQM limited to 5% or \$3million dollars, whichever is less
- HIV services expenditures must be at least 75% for core medical services (unless recipient has a core medical services waiver)

III. Fiscal Requirements

1. Limitations on Use

Salary Limitations (Appropriations Act 2018)

- Salaries charged to HHS grants are capped at \$189,600 annually
- Individual's base salary, exclusive of fringe benefits and outside income earned
- Applies to subrecipients

III. Fiscal Requirements

2. Unallowable Costs

- Construction
- Cash payments intended recipients of RWHAP services
- International travel
- PrEP or PEP medications or related medical services*
- Syringe Service Programs*
- Payment for any item of service that can reasonably be expected to be paid under any State compensation program, insurance policy, any Federal or State health benefits program, or by an entity that provides health services on a prepaid basis
- Development of materials designed to promote or encourage intravenous drug use or sexual activity materials that promote IDU or sexual activity



III. Fiscal Requirements

3. Income from fees

- Program income is any income that is generated for a recipient or subrecipient by the grant or earned as a result of the grant
- Recipients and subrecipients must aggressively pursue payment from Medicaid and Medicare
- Subrecipients report to the recipients collection and use of program income to further program objectives
- Recipients monitor subrecipients use of program income
- Recipients do not collect program income from subrecipients



III. Fiscal Requirements

5. Financial Management

- Financial Policies and Procedures
- Proper documentation
- Process and timeframe for payment/reimbursement
- Track all funds including income and expenses that are awarded, generated, and expended on activities pertaining to the Ryan White Part A Program using general accounting practices
- Tracking by funding stream Part A – formula, supplemental and MAI
- Tracking by category – administration, clinical quality management, core and support services



III. Fiscal Requirements

7. Cost Principles

- **Allowability §75.403**
- **Allocability §75.405**
- **Reasonableness §75.404**



IV. Budget and Budget Narrative



RWHAP Part A Budget information consists of two components:

- SF-424A Budget Information for Non-Construction Programs (included in the application package)
- Budget Narrative/Justification

IV. Budget and Budget Narrative

Standard Form 424-A – Non-Construction Programs

- Identifies award amounts in the appropriate budget class categories for the current period of performance.
 - **Budget Categories** – Differ by RWHAP Part
 - Part A and MAI Administration
 - Part A and MAI Clinical Quality Management
 - and Part A and MAI HIV Services
 - **Object Class Categories** –
Personnel, Fringe Benefits, Travel, Equipment, Supplies, Contracts, Other, Indirect Costs, and Program income.



IV. Budget and Budget Narrative

Budget Requirements: SF-424A

OMB Number: 4040-0006
Expiration Date: 01/31/2019

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Part A & MAI Administration	93.914	\$		\$		\$
2. Part A & MAI CQM	93.914					
3. Part A & MAI HIV Services	93.914					
4.						

Cannot exceed ceiling amount



IV. Budget and Budget Narrative

SF - 424A

Budget Categories

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	Part A and MAI Administration	Part A and MAI CQM	Part A and MAI HIV Services		
a. Personnel	\$	\$	\$	\$	\$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					\$
j. Indirect Charges					\$
k. TOTALS (sum of 6i and 6j)	\$	\$	\$	\$	\$
7. Program Income	\$	\$	\$	\$	\$

Object Class - Explain costs within the budget narrative

Budget Categories

Contractual total = CRC amounts

Admin Amt = Is not greater than 10% of the award amount

CQM Amt = total listed on allocations table is ≤ 5% or \$3 million, whichever is less

Recipients do not collect program income from subrecipients.



Standard Form 424A (Rev. 7-97)
Prescribed by GMP (Circular A-102) Page 1A

IV. Budget and Budget Narrative

RWHAP PART A BUDGET SUMMARY							
APPLICANT:							
FISCAL YEAR:							
	Part A			Minority AIDS Initiative (MAI)			Total
Object Class Categories	Administration	Quality Management	HIV Services	Administration	Quality Management	HIV Services	
a. Personnel							\$0.00
b. Fringe Benefits							\$0.00
c. Travel							\$0.00
d. Equipment							\$0.00
e. Supplies							\$0.00
f. Contractual							\$0.00
g. Other							\$0.00
Direct Charges	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indirect Charges							\$0.00
TOTALS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Program Income							\$0.00

Budget Summary	Part A Admin	Part A PC Support	Part A CQM	MAI Admin	MAI CQM	+
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IV. Budget and Budget Narrative

PART A ADMINISTRATIVE BUDGET				
APPLICANT:				
FISCAL YEAR:				
Personnel				
Salary <i>[Insert total annual salary]</i>	FTE <i>[Insert as decimal]</i>	Name, Position <i>[Insert name, position title]</i>	Budget Impact Justification <i>[Description of duties, impact on program goals and outcomes, payment source for balance of FTE]</i>	Amount
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Personnel Total				\$ -
Fringe Benefits				
Percentage <i>[Insert as %]</i>	Components <i>[List components that comprise the fringe benefit rate]</i>			Amount
				\$ -
				\$ -
Fringe Benefit Total				\$ -
Travel				
Local				
Mileage Rate	Number of Miles	Name, Position of Traveler(s)	Travel Expenses/Budget Impact Justification <i>[Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals]</i>	Amount
Local Travel Sub-Total				\$ -
Long Distance				
Type of Travel	Name, Position of Traveler(s)	Travel Expenses/Budget Impact Justification <i>[Lodging, parking, per diem, etc., and the impact of the travel on program objectives/goals]</i>		Amount
Long Distance Travel Sub-Total				\$ -
Travel Total				\$ -
Equipment				
<i>[Equipment is defined as a unit cost of \$5,000 or more and a useful life of 1 or more years. (If your agency uses a different definition, please defer to your agency's definition.)]</i>				
			Budget Impact Justification	



IV. Budget and Budget Narrative

Personnel

- For each requested position, provide the following information:
 - Name of staff member occupying the position, if available (vacant)
 - Position title
 - Annual salary
 - Percentage of time budgeted for this program (FTE)
 - Total months of salary budgeted
 - Total salary (adjusted to federal salary limitation) requested
- Provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives



IV. Budget and Budget Narrative

Salary Rate Limitation Example:

- Individual's full time salary: \$255,000

50% of time will be devoted to project	
Direct salary:	\$127,500
Fringe (25% of salary):	\$31,875
Total:	\$159,375

- Amount that may be claimed on the federal RWHAP award due to the legislative salary limitation:

Individual's base full time salary *adjusted* to Executive Level II: \$189,600

50% of time will be devoted to project	
Direct salary:	\$94,800
Fringe (25% of salary):	\$23,700
Total:	\$118,500



IV. Budget and Budget Narrative

Equipment and Supplies

Equipment- has a useful life of more than 1 year and acquisition cost of \$5,000 or more per unit purchased.

Supplies- separate items into three categories: office supplies (e.g., paper, pencils), medical supplies (e.g., syringes, blood tubes, gloves), and educational supplies (e.g., brochures, videos).



IV. Budget and Budget Narrative

Indirect Cost

Indirect costs (Facilities and Administration or F&A) means costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved.



IV. Budget and Budget Narrative

Indirect Cost

- Governmental departments or agency units receiving more than \$35M in federal funds MUST have a federally negotiated indirect cost rate agreement (NICRA)
- Recipients that do not have a federal NICRA may do one of the following:
 - Direct cost all expenses, or
 - Negotiate a rate with the Federal Government in accordance with 45 CFR part 75



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