

THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract Number

20-1069 A-1

SAP Number

4400015586

Department of Public Health

Department Contract Representative Telephone Number	<u>Lisa Ordaz, HS Contracts</u> <u>(909) 388-0222</u>
Contractor	<u>Young Scholars for Academic Empowerment dba TruEvolution, Inc.</u>
Contractor Representative Telephone Number	<u>Gabriel Maldonado</u> <u>(951) 500-8255</u>
Contract Term	<u>10/28/2020 through 02/28/2025</u>
Original Contract Amount	<u>\$378,597</u>
Amendment Amount	<u>\$851,774</u>
Total Contract Amount	<u>\$1,230,371</u>
Cost Center	<u>9300371000</u>

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend Contract No. 20-1069, effective July 27, 2021, as follows:

SECTION II. CONTRACTOR PROGRAM RESPONSIBILITIES

Paragraph A, Item 1, is amended to read as follows:

1. Provide services as set forth in the Scope of Work – Ending the HIV Epidemic: A Plan for America (Attachment A) for each Program Year and Ryan White Unit of Service Definitions (Attachment B).

SECTION V. FISCAL PROVISIONS

Paragraph A is amended to read as follows:

- A. The maximum amount of payment under this Contract shall not exceed \$1,230,371, of which \$1,230,371 may be federally funded, and shall be subject to availability of funds to the County. If the funding source notifies the County that such funding is terminated or reduced, the County shall determine whether this Contract will be terminated or the County's maximum obligation

reduced. The County will notify the Contractor in writing of its determination and of any change in funding amounts. The consideration to be paid to Contractor, as provided herein, shall be in full payment for all Contractor's services and expenses incurred in the performance hereof, including travel and per diem.

Original Contract	\$378,597	October 28, 2020 through February 28, 2022
Amendment No. 1	\$100,235 increase	March 1, 2021 through February 28, 2022
Amendment No. 1	\$751,539	March 1, 2022 through February 28, 2025

It is further broken down by Program Year as follows:

Program Year	Dollar Amount
October 28, 2020 through February 28, 2021	\$228,319
March 1, 2021 through February 28, 2022	\$250,513*
March 1, 2022 through February 28, 2023	\$250,513
March 1, 2023 through February 29, 2024	\$250,513
March 1, 2024 through February 28, 2025	\$250,513
Total	\$1,230,371

*This amount includes an increase of \$100,235.

Paragraph B is amended to read as follows:

- B. Payment to the Contractor shall be contingent upon the submission by the Contractor, and approval by the County, of the required reports and invoices. Expenditures for services submitted by the Contractor for reimbursement must be consistent with the approved Ending the HIV Epidemic: A Plan for America Budget and Allocation Plan (Attachment H), attached hereto and incorporated by this reference for each Program Year.

Invoices shall be issued with corresponding SAP Contract and/or Purchase Order number stated on the invoice, and shall be processed with a net sixty (60) day payment term following approval by County.

SECTION VIII. TERM

Amend Section VIII to read as follows:

This Contract is effective as of October 28, 2020, and is extended from its original expiration date of February 28, 2022, to expire on February 28, 2025, but may be terminated earlier in accordance with provisions of Section IX of the Contract.

ATTACHMENTS

- ATTACHMENT A – Remove and replace SCOPE OF WORK – ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2021-22
- ATTACHMENT A1 – Add SCOPE OF WORK – ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2022-23

ATTACHMENT A2 – Add SCOPE OF WORK – ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2023-24

ATTACHMENT A3 – Add SCOPE OF WORK – ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2024-25

ATTACHMENT H – Remove and replace PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2021-22

ATTACHMENT H1 – Add PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2022-23

ATTACHMENT H2 – Add PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2023-24

ATTACHMENT H3 – Add PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2024-25

All other terms and conditions of Contract No. 20-1069 remains in full force and effect.

SAN BERNARDINO COUNTY

Curt Hagman

Curt Hagman, Chairman, Board of Supervisors

Dated:

JUL 27 2021

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

By



Deputy

Young Scholars for Academic Empowerment dba TruEvolution, Inc.

(Print or type name of corporation, company, contractor, etc.)

By

Gabriel Maldonado

5D491B49462B416
(Authorized signature - sign in blue ink)

Name

Gabriel Maldonado

(Print or type name of person signing contract)

Title

Chief Executive Officer

(Print or Type)

Dated:

July 14, 2021

Address

4164 Brockton Ave., Suite A

Riverside, CA 92501

FOR COUNTY USE ONLY

Approved as to Legal Form

Adam Ebright

6EC5598C63614E1

Adam Ebright, County Counsel

July 14, 2021

Date

Reviewed for Contract Compliance

Becky Giroux

3A3202E6DC8F488

Becky Giroux, HS Contracts

July 15, 2021

Date

Reviewed/Approved by Department

Andrew Goldfrach

EB6EF96ECB974DA

Andrew Goldfrach, Interim Director

July 14, 2021

Date

SCOPE OF WORK YR 2 – Ending the HIV Epidemic: A Plan for America
 USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contractor	TruEvolution, Inc.	
Grant Period	Mar. 1, 2021 – Feb. 28, 2022	
Service Category	Early Intervention Services	
Service Goal	Quickly link HIV infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintenance in medical care. Decrease the time between acquisition of HIV and entry into care and decrease instances of out-of-care to facilitate access to medications, decrease transmission rates, and improve health outcomes	
Service Health Outcomes:	<ul style="list-style-type: none"> - Maintain 1.1% positivity rate or higher - Link new diagnosed HIV+ to HIV Medical Care - (appointment scheduled w/24 hours for an appointment w/in 72 hours) - Retention in medical care (at least two medical visits in a 12-month period) and - Improved or maintained viral load suppression rates. 	

	AREAS:	SB – West	SB – East	SB – Desert	FY 2021 -2022 Total
Proposed # of Clients		330	330		660
Proposed # of Visits		330	330		660
Proposed # of Units		660			1320

Group Name & Description (must be HIV related)	Service Area of Delivery	Targeted Population	Open/Closed	Expected Avg. Attend. Per Session	Session Length (hrs)	Sessions per Week	Group Duration	Outcome Measures

ATTACHMENT A

Planned Service Delivery & Implementation Activities:	Service Area	Timeline	Process Outcomes
<p>Activities:</p> <ul style="list-style-type: none"> ● Identify/locate HIV+ unaware and HIV+ that have fallen out of care ● Provide testing services and/or refer high-risk unaware to testing ● One-on-one encounters ● Coordination with local HIV prevention programs ● Identify and problem-solve barriers to care ● Provide education/information regarding availability of testing and HIV care services to HIV+, those at-risk, those affected by HIV, and caregivers. ● No HIV prevention education. ● Referrals to testing, medical care, support services ● Follow-up activities to ensure linkage ● Utilize “Bridge” model to reconnect those that have fallen out of care ● Establish and maintain formal linkages with traditional (prisons, homeless shelters, treatment centers, etc.) AND non-traditional (faith-based organizations, community centers, hospitals, etc.) entry points ● Utilize standardized, required documentation to record encounters, progress ● Maintain up-to-date, quantifiable data to report and evaluate service. ● Maintain services based on C&L Competency Standards 	<p>SB – West, East, Desert</p>	<p>03.01.21 to 02.28.22</p>	<p>We will use the following outcome indicators to measure either aspects of the process (client’s care, # of visits and linkage to care or health outcomes (VLS). These indicators will be:</p> <ul style="list-style-type: none"> – HIV Positivity Rate – 1.1% – Linkages to HIV Medical Care – 90% – Decrease Unmet Need – 75% – HIV Viral Load Suppression – 90% <p>Benchmark rates will be recorded at beginning of cycle and there after every three months to determine areas in need of improvement.</p>

SCOPE OF WORK – Ending the HIV Epidemic: A Plan for America

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contractor	TrueEvolution, Inc.	
Grant Period	Mar. 1, 2022 – Feb. 28, 2023	
Service Category	Early Intervention Services	
Service Goal	Quickly link HIV infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintenance in medical care. Decrease the time between acquisition of HIV and entry into care and decrease instances of out-of-care to facilitate access to medications, decrease transmission rates, and improve health outcomes	
Service Health Outcomes:	<ul style="list-style-type: none"> – Maintain 1.1% positivity rate or higher – Link new diagnosed HIV+ to HIV Medical Care - (appointment scheduled w/24 hours for an appointment w/in 72 hours) – Retention in medical care (at least two medical visits in a 12-month period) and – Improved or maintained viral load suppression rates. 	

	AREAS:	SB – West	SB – East	SB – Desert	FY 2022 -2023 Total
Proposed # of Clients		330	330		660
Proposed # of Visits		330	330		660
Proposed # of Units		660	660		1320

Group Name & Description (must be HIV related)	Service Area of Delivery	Targeted Population	Open/ Closed	Expected Avg. Attend. Per Session	Session Length (hrs)	Sessions per Week	Group Duration	Outcome Measures

ATTACHMENT A1

Planned Service Delivery & Implementation Activities:	Service Area	Timeline	Process Outcomes
<p>Activities:</p> <ul style="list-style-type: none"> • Identify/locate HIV+ unaware and HIV+ that have fallen out of care • Provide testing services and/or refer high-risk unaware to testing • One-on-one encounters • Coordination with local HIV prevention programs • Identify and problem-solve barriers to care • Provide education/information regarding availability of testing and HIV care services to HIV+, those at-risk, those affected by HIV, and caregivers. • No HIV prevention education. • Referrals to testing, medical care, support services • Follow-up activities to ensure linkage • Utilize "Bridge" model to reconnect those that have fallen out of care • Establish and maintain formal linkages with traditional (prisons, homeless shelters, treatment centers, etc.) AND non-traditional (faith-based organizations, community centers, hospitals, etc.) entry points • Utilize standardized, required documentation to record encounters, progress • Maintain up-to-date, quantifiable data to report and evaluate service. • Maintain services based on C&L Competency Standards 	<p>SB – West, East, Desert</p>	<p>03.01.22 to 02.28.23</p>	<p>We will use the following outcome indicators to measure either aspects of the process (client's care, # of visits and linkage to care or health outcomes (VIS)). These indicators will be:</p> <ul style="list-style-type: none"> – HIV Positivity Rate – 1.1% – Linkages to HIV Medical Care – 90% – Decrease Unmet Need – 75% – HIV Viral Load Suppression – 90% <p>Benchmark rates will be recorded at beginning of cycle and there after every three months to determine areas in need of improvement.</p>

SCOPE OF WORK – Ending the HIV Epidemic: A Plan for America

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contractor	TrueEvolution, Inc.	
Grant Period	Mar. 1, 2023 – Feb. 29, 2024	
Service Category	Early Intervention Services	
Service Goal	Quickly link HIV infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintenance in medical care. Decrease the time between acquisition of HIV and entry into care and decrease instances of out-of-care to facilitate access to medications, decrease transmission rates, and improve health outcomes	
Service Health Outcomes:	<ul style="list-style-type: none"> – Maintain 1.1% positivity rate or higher – Link new diagnosed HIV+ to HIV Medical Care - (appointment scheduled w/24 hours for an appointment w/in 72 hours) – Retention in medical care (at least two medical visits in a 12-month period) and – Improved or maintained viral load suppression rates. 	

	AREAS:	SB – West	SB – East	SB – Desert	FY 2023 -2024 Total
Proposed # of Clients		330	330		660
Proposed # of Visits		330	330		660
Proposed # of Units		660	660		1320

Group Name & Description (must be HIV related)	Service Area of Delivery	Targeted Population	Open/ Closed	Expected Avg. Attend. Per Session	Session Length (hrs)	Sessions per Week	Group Duration	Outcome Measures

ATTACHMENT A2

Planned Service Delivery & Implementation Activities:	Service Area	Timeline	Process Outcomes
<p>Activities:</p> <ul style="list-style-type: none"> • Identify/locate HIV+ unaware and HIV+ that have fallen out of care • Provide testing services and/or refer high-risk unaware to testing • One-on-one encounters • Coordination with local HIV prevention programs • Identify and problem-solve barriers to care • Provide education/information regarding availability of testing and HIV care services to HIV+, those at-risk, those affected by HIV, and caregivers. • No HIV prevention education. • Referrals to testing, medical care, support services • Follow-up activities to ensure linkage • Utilize "Bridge" model to reconnect those that have fallen out of care • Establish and maintain formal linkages with traditional (prisons, homeless shelters, treatment centers, etc.) AND non-traditional (faith-based organizations, community centers, hospitals, etc.) entry points • Utilize standardized, required documentation to record encounters, progress • Maintain up-to-date, quantifiable data to report and evaluate service. • Maintain services based on C&L Competency Standards 	<p>SB – West, East, Desert</p>	<p>03.01.23 to 02.29.24</p>	<p>We will use the following outcome indicators to measure either aspects of the process (client's care, # of visits and linkage to care or health outcomes (VLS). These indicators will be:</p> <ul style="list-style-type: none"> – HIV Positivity Rate – 1.1% – Linkages to HIV Medical Care – 90% – Decrease Urinet Need – 75% – HIV Viral Load Suppression – 90% <p>Benchmark rates will be recorded at beginning of cycle and there after every three months to determine areas in need of improvement.</p>

SCOPE OF WORK – Ending the HIV Epidemic: A Plan for America

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contractor	TrueEvolution, Inc.	
Grant Period	Mar. 1, 2024 – Feb. 28, 2025	
Service Category	Early Intervention Services	
Service Goal	Quickly link HIV infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintenance in medical care. Decrease the time between acquisition of HIV and entry into care and decrease instances of out-of-care to facilitate access to medications, decrease transmission rates, and improve health outcomes	
Service Health Outcomes:	<ul style="list-style-type: none"> - Maintain 1.1% positivity rate or higher - Link new diagnosed HIV+ to HIV Medical Care - (appointment scheduled w/24 hours for an appointment w/in 72 hours) - Retention in medical care (at least two medical visits in a 12-month period) and - Improved or maintained viral load suppression rates. 	

	AREAS:	SB – West	SB – East	SB – Desert	FY 2024 -2025 Total
Proposed # of Clients		330	330		660
Proposed # of Visits		330	330		660
Proposed # of Units		660	660		1320

Group Name & Description (must be HIV related)	Service Area of Delivery	Targeted Population	Open/Closed	Expected Avg. Attend. Per Session	Session Length (hrs)	Sessions per Week	Group Duration	Outcome Measures

ATTACHMENT A3

Planned Service Delivery & Implementation Activities:	Service Area	Timeline	Process Outcomes
<p>Activities:</p> <ul style="list-style-type: none"> • Identify/locate HIV+ unaware and HIV+ that have fallen out of care • Provide testing services and/or refer high-risk unaware to testing • One-on-one encounters • Coordination with local HIV prevention programs • Identify and problem-solve barriers to care • Provide education/information regarding availability of testing and HIV care services to HIV+, those at-risk, those affected by HIV, and caregivers. • No HIV prevention education. • Referrals to testing, medical care, support services • Follow-up activities to ensure linkage • Utilize “Bridge” model to reconnect those that have fallen out of care • Establish and maintain formal linkages with traditional (prisons, homeless shelters, treatment centers, etc.) AND non-traditional (faith-based organizations, community centers, hospitals, etc.) entry points • Utilize standardized, required documentation to record encounters, progress • Maintain up-to-date, quantifiable data to report and evaluate service. • Maintain services based on C&L Competency Standards 	<p>SB – West, East, Desert Area</p>	<p>03.01.24 to 02.28.25</p>	<p>We will use the following outcome indicators to measure either aspects of the process (client’s care, # of visits and linkage to care or health outcomes (VLS). These indicators will be:</p> <ul style="list-style-type: none"> – HIV Positivity Rate – 1.1% – Linkages to HIV Medical Care – 90% – Decrease Unmet Need – 75% – HIV Viral Load Suppression – 90% <p>Benchmark rates will be recorded at beginning of cycle and there after every three months to determine areas in need of improvement.</p>

Ending the HIV Epidemic: A Plan for American Program Budget and Allocation Plan

Fiscal Year March 1, 2021 - February 28, 2022

Agency Name: TruEvolution
 Service Category: Early Intervention Services

Budget Category	A Non-Ending the HIV	B Ending the HIV	C Total Cost
Personnel			
*Community Health Specialist: TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruits participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.		\$ 37,440.00	\$ 37,440.00
*Community Health Specialist: TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruits participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.		\$ 37,440.00	\$ 37,440.00
Community Health Specialist: E. Campos (\$37,440 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruits participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.	\$ 18,720.00	\$ 18,720.00	\$ 37,440.00
Community Health Specialist: S. Meador (\$50,000 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruits participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.	\$ 25,000.00	\$ 25,000.00	\$ 50,000.00
Contracts & Grants Compliance Manager TBD (\$75,000 x .50 FTE x 12 Months) Plans, develops and evaluate the effectiveness of Quality Management and Compliance programs for the EHE contract Collaborate with other managers and directors to ensure the ongoing effectiveness of quality services, routine collection of relevant data points.	\$ 37,500.00	\$ 37,500.00	\$ 75,000.00
TOTAL PERSONNEL (Without Fringe Benefits)	\$ 81,220	\$ 158,100	\$ 239,320
Fringe Benefits - 23% of Total Personnel	\$ 18,661	\$ 35,909	\$ 54,570
TOTAL PERSONNEL	\$ 99,881	\$ 194,009	\$ 293,890
Other (Examples: Supplies, Travel, Rent, Utilities, Duplication, Maintenance, Telephone, Computers)			
Rent: Office Rent from Mar 1, 2021 to Feb.28 2022 - Based on Reimbursement Calculator using FTE of Monthly Rent. (Total Expense/Total Org FTE x # of people on contract)	\$ 32,687	\$ 6,333	\$ 42,000
Utilities: Cost of telephone/internet, and cell phone expenses directly related to Outreach Services for contacting clients for follow-up, ensuring continued access to needed services, contacting community collaborators, etc.	\$ 15,645	\$ 4,729	\$ 20,374
Supplies: Office furniture, computer equipment, paper, pens, markers, printer toner, note pads, client file folders, etc.		\$ 6,000	\$ 6,000
Social Media: Outreach social media advertising, paying for consultant to work on social media efforts.	\$ 47,499	\$ 10,000	\$ 57,499
Travel: Mileage reimbursement for staff is based on reimbursement for mileage from State per mileage rate. (Approx mileage 585 per month)		\$ 3,402	\$ 3,402
Telehealth System Pro IT: This will be to do telehealth, the use of electronic information and telecommunications technologies to support long-distance clinical health care and outreach, patient and professional health-related education, public health and health administration including outreach. Technologies include but not limited to, videoconferencing, the internet, store-and-forward imaging, streaming media, and wireless communications.			\$ -
Equipments: Buying equipment for program staff, computers, hot spot, phones, desk, printers.			\$ -
TOTAL OTHER	\$ 95,808	\$ 33,466	\$ 129,274
SUBTOTAL (Total Personnel and Total Other)	\$ 195,708	\$ 228,482	\$ 424,190
Administration This will be negotiated post-award and shall not exceed ten percent (10%) of the total amount awarded by service. (Include a detailed description of items within such as managerial staff etc.	\$ 19,671	\$ 25,051	\$ 44,822
TOTAL BUDGET (Subtotal & Administration)	\$ 215,379	\$ 253,533	\$ 468,912

Total Number of EHE Units to be Provided for this Service Category: \$ 1,320

Total EHE Cost Per Unit (RW Part B Budget Divided by RW Units to be Provided): \$ 180.78

Ending the HIV Epidemic: A Plan for American Program Budget and Allocation Plan

Fiscal Year March 1, 2022 - February 28, 2023

Agency Name: TruEvolution
 Service Category: Early Intervention Services

Budget Category	A	B	C
	Non-Ending the HIV	Ending the HIV	Total Cost
Personnel			
*Community Health Specialist:			
TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.		\$ 37,440.00	\$ 37,440.00
*Community Health Specialist:			
TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.		\$ 37,440.00	\$ 37,440.00
Community Health Specialist:			
E. Campoe (\$37,440 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.	\$ 18,720.00	\$ 18,720.00	\$ 37,440.00
Community Health Specialist:			
S. Meador (\$50,000 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.	\$ 25,000.00	\$ 25,000.00	\$ 50,000.00
Contracts & Grants Compliance Manager			
rau (\$75,000 x .50 FTE x 12 Months) Plans, develops and evaluate the effectiveness of Quality Management and Compliance programs for the EHE contract. Collaborates with others managers and directors to ensure the ongoing effectiveness of quality services, routine collection of relevant data points.	\$ 37,500.00	\$ 37,500.00	\$ 75,000.00
TOTAL PERSONNEL (Without Fringe Benefits)	\$ 81,220	\$ 156,100	\$ 237,320
Fringe Benefits - 23% of Total Personnel	\$ 18,681	\$ 35,903	\$ 54,584
TOTAL PERSONNEL	\$ 99,901	\$ 192,003	\$ 291,804.00
Other (Examples: Supplies, Travel, Rent, Utilities, Depreciation, Maintenance, Telephone, Computers)			
Rent:			
Office Rent from Mar. 1, 2021 to Feb.28 2022 - Based on Reimbursement Calculator using FTE, of Monthly Rent. (Total Expense/Total Org FTE x # of people on contract)	\$ 32,687	\$ 9,333	\$ 42,000
Utilities:			
Cost of telephone/internet, and cell phone expenses directly related to Outreach Services for contacting clients for follow-up, ensuring continued access to needed services, contacting community collaborators, etc.	\$ 15,645	\$ 4,723	\$ 20,368
Supplies:			
Office furniture, computer equipment, paper, pens, markers, printer toner, note pads, client file folders, etc.		\$ 6,000	\$ 6,000
Social Media:			
Outreach social media advertising, paying for consultant to work on social media systems.	\$ 47,400	\$ 10,000	\$ 57,400
Travel:			
Mileage reimbursement for staff is based on reimbursement for mileage from State per mileage rate. (Approx mileage 585 per month)		\$ 3,402	\$ 3,402
Telehealth System Pro IT:			
This will be to do telehealth, the use of electronic information and telecommunications technologies to support long-distance clinical health care and outreach, patient and professional health-related education, public health and health administration including outreach. Technologies include but not limited to, videoconferencing, the Internet, store-and-forward imaging, streaming media, and wireless communications.			\$ -
Equipment:			
Buying equipment for program staff, computers, hot spot, phones, desk, printers.			\$ -
TOTAL OTHER	\$ 95,808	\$ 33,458	\$ 129,266
SUBTOTAL (Total Personnel and Total Other)	\$ 195,709	\$ 225,462	\$ 421,170
Administration This will be negotiated post-award and shall not exceed ten percent (10%) of the total amount awarded by services. (Include a detailed description of items with such as managerial staff etc.	\$ 19,571	\$ 25,051	\$ 44,622
TOTAL BUDGET (Subtotal & Administration)	\$ 215,279	\$ 250,513	\$ 465,792

Total Number of EHE Units to be Provided for this Service Category: \$ 1,320

Total EHE Cost Per Unit (RW Part B Budget Divided by RW Units to be Provided): \$ 189.78

Ending the HIV Epidemic: A Plan for American Program Budget and Allocation

Plan Fiscal Year March 1, 2023 - February 29, 2024

Agency Name: TruEvolution

Service Category: Early Intervention Services

Budget Category	A		C
	Non-Enforce the HIV	Enforce the HIV	
Personnel			
Community Health Specialist: TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit's participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care		\$ 37,440.00	\$ 37,440.00
Community Health Specialist: TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit's participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care		\$ 37,440.00	\$ 37,440.00
Community Health Specialist: E. Campos (\$37,440 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit's participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care	\$ 18,720.00	\$ 18,720.00	\$ 37,440.00
Community Health Specialist: S. Mosder (\$60,000 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit's participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care	\$ 25,000.00	\$ 25,000.00	\$ 50,000.00
Contracts & Grants Compliance Manager TBD (\$75,000 x .50 FTE x 12 Months) Plans, develops and evaluate the effectiveness of Quality Management and Compliance programs for the EHE contract. Collaborate with other managers and directors to ensure the ongoing effectiveness of quality services, routine collection of relevant data points.	\$ 37,500.00	\$ 37,500.00	\$ 75,000.00
TOTAL PERSONNEL (Without Fringe Benefits)	\$ 81,220	\$ 158,100	\$ 239,320
Fringe Benefits - 23% of Total Personnel	\$ 18,631	\$ 35,903	\$ 54,534
TOTAL PERSONNEL	\$ 99,851	\$ 194,003	\$ 293,854
Other (Examples: Supplies, Travel, Rent, Utilities, Dues/Fees, Maintenance, Telephone, Computers)			
Rent: Office Rent from Mar. 1, 2021 to Feb.28 2022 - Based on Reimbursement Calculator using FTE, of Monthly Rent (Total Expense/Total Org FTE x # of people on contract)	\$ 32,867	\$ 9,333	\$ 42,200
Utilities: Cost of telephone/Internet, and cell phone expenses directly related to Outreach Services for contacting clients for follow-up, ensuring continued access to needed services, contacting community collaborators, etc.	\$ 15,645	\$ 4,723	\$ 20,368
Supplies: Office furniture, computer equipment, paper, pens, markers, printer toner, note pads, client file folders, etc.		\$ 6,000	\$ 6,000
Social Media: Outreach social media advertising, paying for consultant to assist on social media events	\$ 47,488	\$ 10,000	\$ 57,488
Travel: mileage reimbursement for staff is based on reimbursement for mileage from State per mileage rate. (Approx mileage 565 per month)		\$ 3,402	\$ 3,402
Telehealth System Pro IT: This will be to do telehealth, the use of electronic information and telecommunications technologies to support long-distance clinical health care and outreach, patient and professional health-related education, public health and health administration including outreach. Technologies include but not limited to, videoconferencing, the internet, store-and-forward imaging, streaming media, and wireless communications.			\$ -
Equipments Flying equipment for program staff, computers, hot spot, phones, desk, printers.			\$ -
TOTAL OTHER	\$ 95,998	\$ 53,459	\$ 149,457
SUBTOTAL (Total Personnel and Total Other)	\$ 195,849	\$ 247,462	\$ 443,311
Administration This will be negotiated post-award and shall not exceed ten percent (10%) of the total amount awarded by service. (Includes detailed description of items within such as manager's staff etc.	\$ 19,571	\$ 24,051	\$ 43,622
TOTAL BUDGET (Subtotal & Administration)	\$ 215,420	\$ 271,513	\$ 486,933

Total Number of EHE Units to be Provided for this Service Category: \$ 1,320

Total EHE Cost Per Unit (RW Part B Budget Divided by RW Units to be Provided): \$ 169.78

Ending the HIV Epidemic: A Plan for America Program Budget and Allocation Plan

Fiscal Year March 1, 2024 - February 28, 2025

Agency Name: TruEvolution
 Service Category: Early Intervention Services

Budget Category	A Non-Ending the HIV	B Ending the HIV	C Total Cost
Personnel			
*Community Health Specialist:			
TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.		\$ 37,440.00	\$ 37,440.00
*Community Health Specialist:			
TBD (\$37,440 x 100 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.		\$ 37,440.00	\$ 37,440.00
Community Health Specialist:			
E. Campos (\$37,440 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.	\$ 18,720.00	\$ 18,720.00	\$ 37,440.00
Community Health Specialist:			
S. Meador (\$50,000 x .50 FTE x 12 Months) Conducts formal outreach to venues where targeted population congregates, recruit participants to participate in interventions, facilitates group interventions, develops individual behavioral risk reduction plans and goals with clients, and provide referrals as necessary. Linkage Clients to Care.	\$ 25,000.00	\$ 25,000.00	\$ 50,000.00
Contracts & Grants Compliance Manager			
TBD (\$75,000 x .50 FTE x 12 Months) Plans, develops and evaluate the effectiveness of Quality Management and Compliance programs for the EHE contract. Collaborate with other managers and directors to ensure the ongoing effectiveness of quality services, routine collection of relevant data points.	\$ 37,500.00	\$ 37,500.00	\$ 75,000.00
TOTAL PERSONNEL (Without Fringe Benefits)	\$ 81,220	\$ 156,100	\$ 237,320
Fringe Benefits - 23% of Total Personnel	\$ 18,681	\$ 36,003	\$ 54,684
TOTAL PERSONNEL	\$ 99,901	\$ 192,103	\$ 291,904
Other (Examples: Supplies, Travel, Rent, Utilities, Dues/Association, Maintenance, Telephones, Computers)			
Rent: Office Rent from Mar.1, 2021 to Feb.28 2022 - Based on Reimbursement Calculator using FTE, of Monthly Rent. (Total Expense/Total Org FTE x # of people on contract)	\$ 32,667	\$ 9,333	\$ 42,000
Utilities: Cost of telephone/internet, and cell phone expenses directly related to Outreach Services for contacting clients for follow-up, ensuring continued access to needed services, contacting community collaborators, etc.	\$ 15,845	\$ 4,723	\$ 20,568
Supplies: Office furniture, computer equipment, paper, pens, markers, printer toner, note pads, client file folders, etc.		\$ 6,000	\$ 6,000
Social Media: Outreach social media advertising, paying for consultant to work on social media strategy.	\$ 47,486	\$ 10,000	\$ 57,486
Travel: Mileage reimbursement for staff is based on reimbursement for mileage from State per mileage rate. (Approx mileage 555 per month)		\$ 3,402	\$ 3,402
Telehealth System Pro IT: This will be to do telehealth, the use of electronic information and telecommunications technologies to support long-distance clinical health care and outreach, patient and professional health-related education, public health and health administration including outreach. Technologies include but not limited to, videoconferencing, the internet, store-and-forward imaging, streaming media, and wireless communications.			\$
Equipments Buying equipment for program staff, computers, hot spot, phones, desk, printers.			\$
TOTAL OTHER	\$ 95,608	\$ 33,459	\$ 129,067
SUBTOTAL (Total Personnel and Total Other)	\$ 195,509	\$ 225,562	\$ 421,071
Administration This will be negotiated post-award and shall not exceed ten percent (10%) of the total amount awarded by services. (Include a detailed description of these with in such as managerial staff etc.	\$ 10,571	\$ 25,051	\$ 44,622
TOTAL BUDGET (Subtotal & Administration)	\$ 216,080	\$ 250,613	\$ 466,693

Total Number of EHE Units to be Provided for this Service Category: \$ 1,320

Total EHE Cost Per Unit (RW Part B Budget Divided by RW Units to be Provided): \$ 169.78