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Contract Number

20-1180 A-5

SAP Number

4400015714

Department of Public Health

Department Contract Representative	Stephanie Ramos
Telephone Number	840-587-6596
Contractor	County of Riverside, Department of Public Health
Contractor Representative	Andrea Gallegos
Telephone Number	(951) 358-5263
Contract Term	March 1, 2021-February 28, 2026
Original Contract Amount	\$2,245,365
Amendments 1-4	\$1,870,697
Amendment 5 Amount	\$21,752
Total Contract Amount	\$4,137,814
Cost Center	9300371000
Grant Number (if applicable)	800424

IT IS HEREBY AGREED AS FOLLOWS:

Amendment No. 5

It is hereby agreed to amend Contract No. 20-1180, effective November 18, 2025, as follows:

SECTION V. FISCAL PROVISIONS

Paragraph A is amended to read as follows:

- A. The maximum amount of payment under this Contract shall not exceed, \$4,137,814, of which \$4,137,814 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, 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 Contact	\$2,245,365	March 1, 2021 through February 29, 2024
Amendment No. 1	\$78,633 (decrease)	March 1, 2021 through February 29, 2024
Amendment No. 2	\$230,093	March 1, 2022 through February 29, 2024
Amendment No. 3	\$1,508,717	March 1, 2023 through February 28, 2026
Amendment No. 4	\$210,520	March 1, 2024 through February 28, 2026
Amendment No. 5	\$21,752	March 1, 2025 through February 28, 2026

It is further broken down by Program Year as follows:

Program Year	Dollar Amount
March 1, 2021 through February 28, 2022	\$722,244
March 1, 2022 through February 28, 2023	\$873,556
March 1, 2023 through February 29, 2024	\$769,914*
March 1, 2024 through February 28, 2025	\$875,174
March 1, 2025 through February 28, 2026	\$896,926
Total	\$4,137,814

ATTACHMENTS

ATTACHMENT A – Remove and replace SCOPE OF WORK for Program Year 2025-26

ATTACHMENT B – Remove and replace SCOPE OF WORK- MAI for Program Year 2025-26

ATTACHMENT J – Remove and replace MASTER LINE ITEM BUDGET for Program Year 2025-26

All other terms and conditions of Contract No. 20-1180 remain in full force and effect.

This Amendment may be executed in any number of parts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Amendment. The parties shall be entitled to sign and transmit an electronic signature of the Amendment (whether by facsimile, PDF, or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment upon request.

APPROVED AS TO FORM:

Minh C. Tran
County Counsel

Esen Sainz

By: _____
Esen Sainz
Deputy County Counsel

IN WITNESS WHEREOF, the San Bernardino County and the Contractor have each caused this Contract to be subscribed by its respective duly authorized officers, on its behalf.

SAN BERNARDINO COUNTY

► *Dawn Rowe*

Dawn Rowe, Chair, Board of Supervisors

Dated: NOV 18 2025

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

By *Lynna Mober*

Lynna Mober
Clerk of the Board of Supervisors
San Bernardino County



By _____
Deputy

County of Riverside, Department of Public Health

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

By ► *Kim Saruwatari*

(Authorized signature - sign in blue ink)

Name *Kim Saruwatari*

(Print or type name of person signing contract)

Title *Director of Public Health*

(Print or Type)

Dated: *10/31/2025*

Address _____

FOR COUNTY USE ONLY

Approved as to Legal Form
Daniel Pasek
► Daniel Pasek (Nov 3, 2025 13:48:27 PST)

Daniel Pasek, Deputy County Counsel
Date 11/03/2025

Reviewed for Contract Compliance
► _____

Date _____

Reviewed/Approved by Department
Joshua Dugas
► Joshua Dugas (Nov 3, 2025 12:54:01 PST)

Joshua Dugas, Public Health Director
Date 11/03/2025

SCOPE OF WORK – RYAN WHITE PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contract Number:	20-1180
Contractor:	County of Riverside Department of Public Health, HIV/STD Branch
Grant Period:	March 1, 2025 - February 28, 2026
Service Category:	NON-MEDICAL CASE MANAGEMENT SERVICES
Service Goal:	The goal of Case Management (non-medical) is to facilitate linkage and retention in care through the provision of guidance and assistance with service information and referrals
Service Health Outcomes:	Improved or maintained CD4 cell count Improved or maintained CD4 cell count, as a % of total lymphocyte cell count Improved or maintained viral suppression rate Improve retention in Care (at least one medical visit each 6-month period)

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Proposed Number of Clients	750	200	150	0	0	0	1,100
Proposed Number of Visits = Regardless of number of transactions or number of units	900	400	300	0	0	0	1,600
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)	1,250	750	500	0	0	0	2,500

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:		SERVICE AREA	TIMELINE	PROCESS OUTCOMES
Element #1: The HIV Nurse Clinic Manager is responsible for ensuring Case Management (Non-Medical) Services are delivered according to the IEHPC Standards of Care and Scope of Work activities. Activities:		1, 2, & 3	03/01/25- 02/28/26	<ul style="list-style-type: none"> • Patient Assessments • Care Plans • Case Management Tracking Log • Case Conferencing Documentation • Referral Logs • Progress Notes • Cultural Competency Plan • HIV Care Connect (HCC) Reports
<ul style="list-style-type: none"> • Case Manager will work with patients to conduct an initial intake assessment within 3 days from referral. 				

<p>Element #2: Initial and on-going of acuity level</p> <p>Activities:</p> <ul style="list-style-type: none"> Case Manager will provide initial and ongoing assessment of patients' acuity level during intake and as needed to determine Case Management or Medical Case Management needs. Initial assessment will also be used to develop patient's Care Plan. Case Manager will discuss budgeting with patients to maintain access to necessary services and Case Manager will screen for domestic violence, mental health, substance abuse, and advocacy needs. 	1, 2, & 3	03/01/25-02/28/26	
<p>Element #3: Development of a comprehensive, individual care plan.</p> <p>Activities:</p> <ul style="list-style-type: none"> Case Manager will refer and link patients to medical, mental health, substance abuse, psychosocial services, and other services as needed and Case Manager will provide referrals to address gaps in their support network. Case Manager will be responsible for eligibility screening of HIV patients to ensure patients obtain health insurance coverage for medical care and that Ryan White funding is used as payer of last resort. Case Manager will assist patients to apply for medical, Covered California, ADAP and/or OA CARE HIPP etc. Case Manager will coordinate and facilitate benefit training for patients to become educated on covered California open enrollment, Medi-Cal IEHP, OA- CARE HIPP etc. 	1, 2, & 3	03/01/25-02/28/26	
<p>Element #4: Case Manager will provide education and counseling to assist the HIV patients with transitioning if insurance or eligibility changes.</p> <p>Activities:</p> <ul style="list-style-type: none"> Case Manager will assist patients with obtaining financial resources needed for daily living such as bus pass vouchers, gas cards, and other emergency financial assistance. 	1, 2, & 3	03/01/25-02/28/26	

Contract Number:	20-1180
Contractor:	County of Riverside Department of Public Health, HIV/STD
Grant Period:	March 1, 2025 - February 28, 2026
Service Category:	Medical Case Management (MCM)
Service Goal:	The goal of providing medical case management services is to ensure that those who are unable to self-manage their care, struggling with challenging barriers to care, marginally in care, and/or experiencing poor CD4/Viral load tests receive intense care coordination assistance to support participation in HIV medical care.
Service Health Outcomes:	Improved or maintained CD4 cell count Improved or maintained CD4 cell count, as a % of total lymphocyte cell count Improved or maintained viral load Improved retention in care (at least 1 medical visit in each 6-month period) Reduction of Medical Case Management utilization due to client self-sufficiency.

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Proposed Number of Clients	150	75	75	0	0	0	300
Proposed Number of Visits = Regardless of number of transactions or number of units	300	200	200	0	0	0	700
Proposed Number of Units = Transactions or 15 min encounters	1000	500	500	0	0	0	2,000

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:		SERVICE AREA	TIMELINE	PROCESS OUTCOMES
Element #1: The HIV Nurse Clinic Manager is responsible for ensuring MCM services are delivered according to the IEHPC Standards of Care and Scope of Work activities.	1, 2, & 3	03/01/25-02/28/26	<ul style="list-style-type: none"> Medical Case Management Needs Assessments Patient Acuity Assessments Benefit and resource referrals Comprehensive Care Plan Case Conferencing Documentation Referral Logs Progress Notes 	
Activities: <ul style="list-style-type: none"> Management and MCM staff will attend Inland Empire HIV Planning Council Standards of Care Committee meetings to ensure compliance. MCM staff will receive annual training on MCM practices and best practices for coordination of care, and motivational interviewing. 				

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:		SERVICE AREA	TIMELINE	PROCESS OUTCOMES
<p>Element #2: Medical Case Managers will provide Medical Case Management Services to patients that meet TGA MCM service category criteria:</p> <p>Activities:</p> <ul style="list-style-type: none"> • Benefits counseling, support services assessment and assistance with access to public and private programs the patient may qualify for. Make referrals for: home health, home and community-based services, mental health, substance abuse, housing assistance as needed. 	1, 2, & 3	03/01/25-02/28/26	<ul style="list-style-type: none"> • Cultural Competency Plan • HCC Reports 	
<p>Element #3: Medical Case Managers will conduct an initial needs assessment to identify which HIV patients meet the criteria to receive medical case management.</p> <p>Activities: Initial patient, family member and personal support system assessment. Re-assessments will be conducted at a minimum of every four months by MCM staff to determine ongoing or new service needs.</p>	1, 2, & 3	03/01/25-02/28/26		
<p>Element #4: Medical Case Managers will conduct initial and ongoing assessment of patient acuity level and service needs.</p> <p>Activities:</p> <ul style="list-style-type: none"> • If patients are determined to not need intensive case management services, they will be referred to and linked with case management (non-medical) services. 	1, 2, & 3	03/01/25-02/28/26		
<p>Element #5: The MCM staff will develop comprehensive, individualized care plans in collaboration with patient, primary care physician/provider and other health care/support staff to maximize patient's care and facilitate cost-effective outcomes.</p> <p>Activities:</p> <ul style="list-style-type: none"> • The plan will include the following elements: problem/presenting issue(s), service needs(s), goals, action plan, responsibility, and timeframes. 	1, 2, & 3	03/01/25-02/28/26		

Contract Number:	20-1180
Contractor:	County of Riverside Department of Public Health, HIV/STD Branch
Grant Period:	March 1, 2025 - February 28, 2026
Service Category:	OUTPATIENT/AMBULATORY HEALTH SERVICES
Service Goal:	To maintain or improve the health status of persons living with HIV/AIDS in the TGA. NOTE: Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, American Academy of HIV Medicine (AAHIVM).
Service Health Outcomes:	Improved or maintained CD4 cell count; as a % of total lymphocyte cell count. Improved or maintained viral load. Improve retention in care (at least 1 medical visit in each 6-month period). Link newly diagnosed HIV+ to care within 30 days; and Increase rate of ART adherence

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Proposed Number of Clients	300	100	200	0	0	0	600
Proposed Number of Visits = Regardless of number of transactions or number of units	550	200	350	0	0	0	1,100
Proposed Number of Units = Transactions or 15 min encounters	1,800	800	400	0	0	0	3,000

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:	SERVICE AREA	TIMELINE	PROCESS OUTCOMES
<p>Element #1: DOPH-HIV/STD medical treatment team will provide the following service delivery elements to PLWHA receiving * HIV Outpatient/Ambulatory Health Services at Riverside Neighborhood Health Center, Perris Family Care Center, and Indio Family Care Center. Provide HIV care and treatment through the following:</p> <p>Activities:</p> <ul style="list-style-type: none"> • Development of Treatment Plan • Diagnostic testing • Early Intervention and Risk Assessment • Preventive care and screening • Practitioner examination • Documentation and review of medical history • Diagnosis and treatment of common physical and mental conditions • Prescribing and managing Medication Therapy • Education and counseling on health issues • Continuing care and management of chronic conditions • Referral to and provision of Specialty Care • Treatment adherence counseling/education • Integrate and utilize HCC to incorporate core data elements. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>	<ul style="list-style-type: none"> • Patient health assessment • Lab results • Treatment plan • Psychosocial assessments • Treatment adherence documentation • Case conferencing documentation • Progress notes • Cultural Competency Plan • HCC reports • Viral loads • Reduction in unmet need • Prescription of/adherence to ART
<p>Element #2: The HIV/STD Branch Chief, Medical Director, and HIV Clinic Manager are responsible for ensuring Outpatient/Ambulatory Health Services are delivered according to the IEHPC Standards of Care and Scope of Work activities.</p> <p>Activity:</p> <ul style="list-style-type: none"> • Management staff will attend Inland Empire HIV Planning Council Standard of Care Meetings. • Management/physician/clinical staff will attend required CME training and maintain American Academy of HIV Medicine (AAHIVM) Certification. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>	

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:	SERVICE AREA	TIMELINE	PROCESS OUTCOMES
<p>Element #3: Clinic staff will conduct assessments including evaluation health history and presenting problems. Those on HIV medications are evaluated for treatment adherence. Assessments will consist of:</p> <p>Activities:</p> <ul style="list-style-type: none"> • Completing medical history • Conducting a physical examination including an assessment for oral health care • Reviewing lab test results • Assessing the need for medication therapy • Development of a Treatment Plan. • Collection of blood samples for CD4 Viral load, Hepatitis, and other testing • Perform TB skin test and chest x-ray 	1, 2, & 3	03/01/25-02/28/26	
<p>Element #4: Clinicians will complete a medical history on patients, including family medical history, psycho-social history, current medications, environmental assessment, diabetes, cardiovascular diseases, renal disease, GI abnormalities, pancreatitis, liver disease, and hepatitis.</p> <p>Activities:</p> <ul style="list-style-type: none"> • Conducting a physical examination • Reviewing lab test results • Assessing the need for medication therapy • Development of a Treatment Plan. 	1, 2, & 3	03/01/25-02/28/26	

Contract Number:	20-1180
Contractor:	County of Riverside Department of Public Health, HIV/STD Branch
Grant Period:	March 1, 2025 - February 28, 2026
Service Category:	MEDICAL NUTRITION THERAPY
Service Goal:	Facilitate maintenance of nutritional health to improve health outcomes or maintain positive health outcomes.
Service Health Outcomes:	Improve retention in care (at least 1 medical visit in each 6-month period) Improve viral suppression rate.

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Proposed Number of Clients	75	50	75	0	0	0	200
Proposed Number of Visits = Regardless of number of transactions or number of units	250	125	250	0	0	0	625
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)	300	200	250	0	0	0	750

Element #1: Medical Nutrition Therapist will develop a Nutrition Screening Tool to identify patients who need Medical Nutrition Therapy Assessments. Risk factors could include but are not limited to weight loss, wasting, obesity, drug use/abuse, hypertension, cardiovascular disease, liver dysfunction etc.	1, 2, & 3	03/01/25-02/28/26	<ul style="list-style-type: none"> MNT schedules/logs MNT encounter logs Nutrition Screening and MNT assessment MNT Referrals Progress/treatment notes HCC Reports Cultural Competency Plan Academy of Nutrition and Dietetics Standards Viral loads
Activities: <ul style="list-style-type: none"> HIV patients to be screened at every medical appointment by the physician or nursing staff to identify nutrition related problems. Patients will be referred to MNT based on the following criteria: <ul style="list-style-type: none"> HIV/AIDS diagnosis Unintended weight loss or weight gain Body mass index below 20 Barriers to adequate intake such as poor appetite, fatigue, substance abuse, food insecurity, and depression 			

<p>Element #2: HIV patients will be assessed by MNT based on the following criteria:</p> <ul style="list-style-type: none"> • High risk - to be seen by an RDN within 1 week • Moderate risk - to be seen by an RDN within 1 month • Low risk - to be seen by an RDN at least annually <p>Activities: Initial MNT assessment and treatment will include the following:</p> <ul style="list-style-type: none"> • Gathering of baseline information. Routine quarterly or semi-annually follow-ups can be scheduled to continue education and counseling. • Nutrition-focused physical examination; anthropometric data; client history; food /nutrition-related history; biochemical data, medical tests, and procedures. • Identify as early as possible new risk factors or indicators of nutritional compromise. • Discuss plan of treatment with treating physician. Treating physicians will RX food and/or nutritional supplements. • Participate in bi-weekly case conferences to discuss treatment planning and coordination with the medical team 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>
<p>Element #3: HIV patients who are identified for group education based on MNT assessment and treatment will be referred to MNT group/educational classes</p> <p>Activities:</p> <ul style="list-style-type: none"> • MNT will develop educational curriculum. • HIV patients will attend MNT group/educational class as recommended by MNT and treating physician. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>

SCOPE OF WORK – PART A
USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contract Number:	20-1180
Contractor:	County of Riverside Department of Public Health, HIV/STD Branch
Grant Period:	March 1, 2025 - February 28, 2026
Service Category:	EARLY INTERVENTION SERVICES (PART A)
Service Goal:	Quickly link HIV infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintain in medical care. Decreasing the time between acquisition of HIV and entry into care will facilitate access to medications, decrease transition rates, and improve health outcomes.
Service Health Outcomes:	Improved or maintained CD4 cell count Improved or maintained CD4 cell count, as a % of total lymphocyte cell count Improved retention in care (at least 1 medical visit in each 6-month period) Improved viral suppression rate Targeted HIV Testing-Maintain 1:1% positivity rate or higher

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Proposed Number of Clients	100	50	60	0	0	0	210
Proposed Number of Visits = Regardless of number of transactions or number of units	225	100	120	0	0	0	445
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)	300	175	200	0	0	0	675

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:	SERVICE AREA	TIMELINE	PROCESS OUTCOMES
<p>Element #1: Identify/locate HIV+ unaware and HIV + that have fallen out of care</p> <p>Activities: EIS staff will work with grass-roots community-based and faith-based agencies, local churches and other non-traditional venues to reach targeted communities to perform targeted HIV testing, link unaware populations to HIV Testing and Counseling and Partner Services and newly diagnosed and unmet need to HIV care and treatment.</p> <p>EIS staff will work with prisons, jails, correctional facilities, homeless shelters and hospitals to perform targeted HIV testing, linking newly diagnosed to HIV care and treatment.</p> <p>EIS staff will work with treatment team staff to identify PLWHA that have fallen out-of-care and unmet need population to provide the necessary support to bring back into care and maintain into treatment and care.</p> <p>EIS staff will provide the following service delivery elements to PLWHA receiving EIS at Riverside Neighborhood Health Center, Perris Family Care Center and Indio Family Care Center. Services will also be provided in the community throughout Riverside County based on the Inland Empire HIV Planning Council Standards of Care.</p>	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>	<ul style="list-style-type: none"> ▪ Outreach schedules and logs ▪ Outreach Encounter Logs ▪ LTC Documentation Logs ▪ Assessment and Enrollment Forms ▪ Reporting Forms ▪ Case Conferencing Documentation ▪ Referral Logs ▪ Progress Notes ▪ Cultural Competency Plan ▪ HCC Reports

<p>Element #2 Linking newly diagnosed and unmet need individuals to HIV care and treatment within 30 days or less. Provide referrals to systems of care (RW & non-RW)</p> <p>Activities: EIS staff will coordinate with HIV Care and Treatment facilities who link patient to care within 30 days or less. Assist HIV patients with enrollment or transition activities to other health insurance payer sources (i.e., ADAP, MISP, Medi-Cal, Insurance Marketplace, OA-Care HIPP, etc.)</p> <p>Interventions will also include community-based outreach, patient education, intensive case management and patient navigation strategies to promote access to care.</p>	<p>1, 2, & 3</p>	<p>03/01/25- 02/28/26</p>	
<p>Element #3 Relinking HIV patients that have fallen out of care. Perform follow-up activities to ensure linkage to care.</p> <p>Activities: Link patients who have fallen out of care within 30 days or less. Coordinate with HIV care and treatment. Assist HIV patients with enrollment or transition activities to other health insurance payer sources (i.e., ADAP, MISP, Medi-call, Insurance Marketplace, OA-Care HIPP, etc.) Link patient to non-medical case management, medical case management to assist with benefits counseling, transportation, housing, etc. to help patient remain in care and treatment. Link high-risk HIV positive EIS populations to support services (i.e., mental health, medical case management, house, etc.) to maintain in HIV care and treatment. Participate in bi-weekly clinic care team case conferencing to ensure linkage and coordinate care for patient.</p>	<p>1, 2, & 3</p>	<p>03/01/25- 02/28/26</p>	

<p>Element #4: EIS staff will utilize evidence-based strategies and activities to reach high risk MSM HIV community. These include but are not limited to:</p> <p>Activities: Developing and using outreach materials (i.e., flyers, brochures, website) that are culturally and linguistically appropriate for high-risk communities-Utilizing the Social Networking model asking HIV + individuals and high-risk HIV negative individuals to recruit their social contacts for HIV testing and linkage to care services.</p>	1, 2, & 3	03/01/25-02/28/26
<p>Element #5: EIS staff will work with HIV Testing & Counseling Services to bring newly diagnosed individuals from communities of color to Partner Services and HIV treatment and care at DOPH- HIV/STD as well as other HIV care and treatment facilities throughout Riverside County.</p> <p>Activities: EIS staff will meet with DOPH Prevention on a weekly basis to exchange information on newly diagnosed patients ensuring that the person is referred to EIS and linked to HIV care and treatment within 30 days or less.</p> <p>Senior Communicable Disease Specialist (CDS) will review all data elements to ensure linkage and retention of patient.</p>	1, 2, & 3	03/01/25-02/28/26
<p>Element #6: EIS staff will coordinate with local HIV prevention /outreach programs to identify target outreach locations and identify individuals not in care and avoid duplication of outreach activities.</p> <p>Activities: EIS staff will coordinate with prevention and outreach programs within the TGA to strategically plan service areas to serve.</p> <p>EIS staff will work with the DOPH-Surveillance unit to target areas in need of services.</p>	1, 2, & 3	03/01/25-02/28/26

<p>Element #7: EIS staff will assist patients with enrollment or transition activities to other health insurance payer sources (i.e., ADAP, MISP, Medi-Cal, Insurance Marketplace, OA Care HIPP, etc.).</p> <p>Activities: EIS staff will coordinate with non-medical case management services to assist with benefits counseling and rapid linkage to care and support services.</p>	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>
<p>Element #8: Senior CDS and Clinic Supervisor will ensure that clinic staff at all levels and across all disciplines receive ongoing education and training in culturally competent service delivery to ensure that patients receive quality care that is respectful, compatible with patient's cultural, health beliefs, practices, preferred language and in a manner that reflects and respects the race/ethnicity, gender, sexual orientation, and religious preference of community served.</p> <p>Activities: Senior CDS and Clinic Supervisor will review and update on an ongoing basis the written plan that outlines goals, policies, operational plans, and mechanisms for management oversight to provide services based on established national Cultural and Linguistic Competency Standards.</p> <p>Training to be obtained through the AIDS Education and Training Center on a semi-annual basis. Training elements will be incorporated into policies/plans for the department.</p>	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>

<p>Element #9: EIS Staff will utilize standardized, required documentation to record encounters and progress.</p> <p>Activities: EIS staff will maintain documentation on all EIS encounters/activities including demographics, patient contacts, referrals, and follow-up, Linkage to Care Documentation Logs, Assessment and Enrollment Forms and Reporting Forms in each patient's chart.</p> <p>Information will be entered into HCC. The HCC reports will be used by the Clinical Quality Management Committee to identify quality service indicators, continuum of care data and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend "best practices".</p>	<p>1, 2, & 3</p>	<p>03/01/25- 02/28/26</p>
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SCOPE OF WORK – MAI
USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

		SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Contract Number:	20-1180							
Contractor:	County of Riverside Department of Public Health, HIV/STD Branch							
Grant Period:	March 1, 2025 - February 28, 2026							
Service Category:	MAI EARLY INTERVENTION SERVICES							
Service Goal:	Quickly link HIV infected individuals from communities of color (African American and Latinos) to testing services, core medical services, and support services necessary to support treatment adherence and maintain in medical care. Decreasing the time between acquisition of HIV and entry into care will facilitate access to medications, decrease transition rates, and improve health outcomes.							
Service Health Outcomes:	Improved or maintained CD4 cell count Improved or maintained CD4 cell count, as a % of total lymphocyte cell count Improved retention in care (at least 1 medical visit in each 6-month period) Improved viral suppression rate Targeted HIV Testing-Maintain 1.1% positivity rate or higher							
BLACK / AFRICAN AMERICAN								
Number of Clients		100	55	20	0	0	0	175
Number of Visits = Regardless of number of transactions or number of units		125	65	35	0	0	0	225
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)		175	122	78	0	0	0	375

HISPANIC / LATINO	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Number of Clients	100	55	20	0	0	0	175
Number of Visits = Regardless of number of transactions or number of units	125	65	35	0	0	0	225
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)	175	122	78	0	0	0	375

TOTAL MAI (sum of two tables above)	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 25/26 TOTAL
Number of Clients	200	110	40	0	0	0	350
Number of Visits = Regardless of number of transactions or number of units	250	130	70	0	0	0	450
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)	350	244	156	0	0	0	750

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES:	SERVICE AREA	TIMELINE	PROCESS OUTCOMES
<p>Element #1: Connect/reconnect HIV infected individuals into care utilizing the "Bridge" program as the model.</p> <p>Activities:</p> <ul style="list-style-type: none"> -MAI EIS staff will work with grass-roots community-based and faith-based agencies, local churches, and other non-traditional venues to reach targeted communities of color (African American and Latino communities) to perform targeted HIV testing, link unaware populations to HIV Testing and Counseling and Partner Services and newly diagnosed and unmet need to HIV care and treatment. -MAI EIS staff will work with prisons, jails, correctional facilities, homeless shelters, and hospitals to perform targeted HIV testing, linking newly diagnosed to HIV care and treatment. -MAI EIS staff will work with treatment team staff to identify PL WHA that have fallen out-of-care and unmet need population to provide the necessary support to bring back into care and maintain into treatment and care. 	1, 2, & 3	03/01/25-02/28/26	<ul style="list-style-type: none"> ▪ MAI/EIS schedules and logs ▪ MAI/EIS Encounter Logs ▪ Linkage to Care Documentation Logs ▪ Assessment and Enrollment Forms ▪ Reporting Forms ▪ Case Conferencing Documentation ▪ Referral Logs ▪ Progress Notes ▪ Cultural Competency Plan ▪ HCC Reports
<p>Element #2: Conduct in depth, one-on-one encounters that are planned and delivered in coordination with local HIV prevention outreach program to avoid duplicate efforts.</p> <p>Activities:</p> <ul style="list-style-type: none"> -EIS MAI staff will coordinate with HIV Care and Treatment facilities who link patient to care within 30 days or less. -Assist HIV patients with enrollment or transition activities to other health insurance payer sources (i.e., ADAP, MISP, Medi-Cal, Insurance Marketplace, OA-Care HIPP, etc.) -Interventions will also include community-based outreach, patient education, intensive case management and patient navigation strategies to promote access to care. 	1, 2, & 3	03/01/25-02/28/26	

<p>Element #3: Re-linking HIV patients that have fallen out of care. Perform follow-up activities to ensure linkage to care.</p> <p>Activities:</p> <ul style="list-style-type: none"> -Link patient who have fallen out of care within 30 days or less. Coordinate with HIV care and treatment. --Assist HIV patients with enrollment or transition activities to other health insurance payer sources (i.e., ADAP, MISP, Medi-Cal, Insurance Marketplace, OA-Care HIPP, etc.) -Link patient to non-medical case management, medical case management to assist with benefits counseling, transportation, housing, etc. to help patient remain in care and treatment. -Link high-risk HIV positive MAI populations to support services (i.e., mental health, medical case management, house, etc.) to maintain in HIV care and treatment. -Participate in bi-weekly clinic care team case conferencing to ensure linkage and coordinate care for patient. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>
<p>Element #4: MAI EIS staff will utilize evidence-based strategies and activities to reach African American and Hispanic/Latino HIV community. These include but are not limited to:</p> <p>Activities:</p> <ul style="list-style-type: none"> -Developing and using outreach materials (i.e., flyers, brochures, website), focus groups, and surveys that are culturally and linguistically appropriate for African American and Hispanic/Latino communities. -Researching and utilizing the <i>Bridge</i> model asking HIV + individuals and high-risk HIV negative individuals to recruit their social contacts for HIV testing and linkage to care services. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>
<p>Element #5: MAI EIS staff will work with HIV Testing & Counseling Services to bring newly diagnosed individuals from communities of color to Partner Services and HIV treatment and care at DOPH-HIV/STD as well as other HIV care and treatment facilities throughout Riverside County.</p> <p>Activities: MAI EIS staff will meet with DOPH Prevention on a weekly basis to exchange information on newly diagnosed ensuring that the person is referred to EIS MAI and in linked to HIV care and treatment within 30 days or less</p> <ul style="list-style-type: none"> -Senior Communicable Disease Specialist (CDS) will review all data elements to ensure linkage and retention of patient. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>

<p>Element #6: MAI EIS staff will coordinate with local HIV prevention /outreach programs to identify target outreach locations and identify individuals' not in care and avoid duplication of outreach activities</p> <p>Activities:</p> <ul style="list-style-type: none"> -MAI EIS staff will coordinate with prevention and outreach programs within the TGA to strategically plan service areas to serve. -MAI EIS staff will work with the DOPH-Surveillance unit to target areas in need of services. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>
<p>Element #7: MAI EIS staff will assist patients with enrollment or transition activities to other health insurance payer sources (i.e., ADAP, MISP, Medi-Cal, Insurance Marketplace, OA Care HIPP, etc.).</p> <p>Activities:</p> <ul style="list-style-type: none"> -MAI EIS staff will coordinate with non-medical case management services to assist with benefits counseling and rapid linkage to care and support services. 	<p>1, 2, & 3</p>	<p>03/01/25-02/28/26</p>

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Master Line Item Budget

	Salary	FTE	Program Subtotal	Direct Services	CQM	Administrative	Total
Personnel							
Zana, R. -MD	\$10,750	0.13	\$ 1,395.00	\$ 1,395.00	\$0	\$0	\$1,395
Calderon, C.-PCL	\$221,900	0.23	\$ 50,900.00	\$ 50,900.00	\$0	\$0	\$50,900
Latif/Gilbert -NP	\$214,115	0.12	\$ 25,700.00	\$ 25,700.00	\$0	\$0	\$25,700
Pineda, V/ Brown, B. -OA III	\$41,000	0.16	\$ 6,500.00	\$ 6,500.00	\$0	\$0	\$6,500
Hunt, A. -HSA	\$52,191	0.17	\$ 9,100.00	\$ 9,100.00	\$0	\$0	\$9,100
Osaki, K. -HSA	\$44,600	0.33	\$ 14,700.00	\$ 14,700.00	\$0	\$0	\$14,700
Ramirez, G. -HSA	\$54,278	0.13	\$ 6,900.00	\$ 6,900.00	\$0	\$0	\$6,900
Rojas, S./Dorothy, A. -LVN	\$92,728	0.35	\$ 32,276.00	\$ 14,800.00	\$17,476	\$0	\$32,276
Arroña I-CDS III	\$85,622	0.45	\$ 39,600.00	\$ 39,600.00	\$0	\$0	\$39,600
Oimos, J. -CDS II	\$54,284	0.75	\$ 40,460.00	\$ 40,460.00	\$0	\$0	\$40,460
Ramos, G. -CDS II	\$68,358	0.61	\$ 41,800.00	\$ 41,800.00	\$0	\$0	\$41,800
Rosales, S. -SSP	\$76,887	0.30	\$ 22,800.00	\$ 22,800.00	\$0	\$0	\$22,800
Alatorre, R. -SSP	\$86,169	0.28	\$ 23,850.00	\$ 23,850.00	\$0	\$0	\$23,850
Jimenez, B. -SSP	\$96,345	0.45	\$ 43,650.00	\$ 43,650.00	\$0	\$0	\$43,650
Barajas V. -LVN	\$83,496	0.12	\$ 9,670.00	\$ 9,670.00	\$0	\$0	\$9,670
Malixi, Eric. -LVN	\$81,017	0.25	\$ 20,458.00	\$ 20,458.00	\$0	\$0	\$20,458
Del Villar, D. -LVN	\$85,052	0.30	\$ 25,100.00	\$ 25,100.00	\$0	\$0	\$25,100
Medina, O. -LVN	\$85,052	0.11	\$ 9,600.00	\$ 9,600.00	\$0	\$0	\$9,600
Rodriguez, K. -Nutrition	\$70,606	0.17	\$ 12,200.00	\$ 12,200.00	\$0	\$0	\$12,200
Whaples, N. -PD	\$114,262	0.08	\$ 7,100.00	\$ 7,100.00	\$0	\$0	\$7,100
Mansell, S. -Nutrition	\$7,256	0.81	\$ 5,900.00	\$ 5,900.00	\$0	\$0	\$5,900
McCarthy, M. -Nutrition	\$87,422	0.07	\$ 6,006.00	\$ 6,006.00	\$0	\$0	\$6,006
Vacant -Nutrition	\$81,000	0.06	\$ 5,000.00	\$ 5,000.00	\$0	\$0	\$5,000
Deas, Porchia - HEA II	\$58,104	0.08	\$ 3,440.00	\$ -	\$3,440	\$0	\$3,440
Personnel Subtotal	\$1,952,494	6.462	\$ 462,905	\$ 441,989	\$20,916	\$0.00	\$462,905
Fringe							
OAHS Fringe	50%		\$64,997	\$64,997	\$0	\$0	\$64,997
MAI/EIS Fringe	69%		\$33,037	\$33,037	\$0	\$0	\$33,037
EIS Fringe	69%		\$50,218	\$50,218	\$0	\$0	\$50,218
Non-Med Fringe	69%		\$50,142	\$50,142	\$0	\$0	\$50,142
Med-Case Fringe	69%		\$56,896	\$56,896	\$0	\$0	\$56,896
Nutrition Fringe	69%		\$24,982	\$24,982	\$0	\$0	\$24,982
CQM Fringe	56%		\$11,712	\$0	\$11,712	\$0	\$11,712
Fringe Subtotal			\$291,984	\$280,272	\$11,712	\$0	\$291,984
Total Personnel			\$ 754,889	\$722,261	\$32,628	\$0	\$754,889
Travel							
Local Travel			\$4,823	\$3,793	\$30	\$800	\$4,823
Out of State Travel			\$1,550	\$550	\$0	\$1,000	\$1,550
Total Travel			\$6,173	\$4,343	\$30	\$1,800	\$6,173
Other							
Admin Support, Insurance, Payroll			\$67,403	\$0	\$0	\$67,403	\$67,403
RC Information Tech			\$8,328	\$7,838	\$190	\$300	\$8,328
Clinic Licensure			\$120	\$0	\$120	\$0	\$120
Laboratory Services			\$6,896	\$6,746	\$0	\$150	\$6,896
Medical/Pharmacy Supplies			\$30,504	\$30,354	\$0	\$150	\$30,504
Office Supplies			\$4,824	\$3,899	\$75	\$1,050	\$4,824
Rent/Utilities/Maintenance			\$11,758	\$5,624	\$0	\$6,134	\$11,758
Communications			\$4,074	\$2,684	\$0	\$1,390	\$4,074
Training			\$1,957	\$1,757	\$50	\$150	\$1,957
Total Other			\$135,864	\$68,702	\$435	\$76,727	\$135,864
Total Direct Costs				\$785,306			\$785,306
Total Administrative Costs						\$78,527	\$78,527
Total CQM Costs					\$33,093		\$33,093
Overall Budget				\$785,306	\$33,093	\$78,527	\$896,926
Percentages				87.56%	3.69%	8.76%	

RWA Award:	Budget	Add. Funds	Total:
Medical Care	\$ 235,163	\$ 26,061	\$ 261,224.00
Medical Case Management	\$ 159,663	\$ (2,407)	\$ 157,256.00
EIS - Part A	\$ 121,790	\$ 22,796	\$ 144,586.00
Medical Nutrition Therapy	\$ 37,873	\$ 32,069	\$ 69,942.00
Case Management - Non Medical	\$ 134,476	\$ 3,972	\$ 138,448.00
MAI - EIS	\$ 85,147	\$ 7,230	\$ 92,377.00
Total:	\$ 774,112.00	\$ 89,721.00	\$ 863,833.00

RWA CQM Award	Budget	Add. Funds	Total:
CQM	\$ 29,230.00	\$ 3,863.00	\$ 33,093.00
Total:	\$ 29,230.00	\$ -	\$ 33,093.00
Combined Award:	\$ 803,342.00	\$ -	\$ 896,926.00

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Non-Medical Case Management

	Total Salary	Ryan White FTE	Ryan White \$	Direct Services	Administrative	Total
Personnel						
Rosales, S. -SSP	\$76,887	0.161	\$12,400	\$12,400	\$0	\$12,400
Alatorre, R. -SSP	\$86,169	0.135	\$11,600	\$11,600	\$0	\$11,600
Jimenez, B. -SSP	\$96,345	0.181	\$17,400	\$17,400	\$0	\$17,400
Barajas, V. -LVN	\$83,496	0.116	\$9,670	\$9,670	\$0	\$9,670
Malixi, Eric. -LVN	\$81,017	0.069	\$5,600	\$5,600	\$0	\$5,600
Del Villar, D. -LVN	\$85,052	0.075	\$6,400	\$6,400	\$0	\$6,400
Medina, O. -LVN	\$85,052	0.113	\$9,600	\$9,600	\$0	\$9,600
Personnel Subtotal	\$594,018	0.84955	\$72,670	\$72,670	\$0	\$72,670
Fringe						
Fringe	69%		\$50,142	\$50,142	\$0	\$50,142
Total Personnel			\$122,812	\$122,812	\$0	\$122,812
Travel						
Local Travel			\$383	\$233	\$150	\$383
Out of State Travel			\$50	\$50	\$0	\$50
Total Travel			\$433	\$283	\$150	\$433
Other						
Admin Support, Insurance, Payroll			\$10,752	\$0	\$10,752	\$10,752
RC Information Tech			\$700	\$700	\$0	\$700
Office Supplies			\$850	\$600	\$250	\$850
Rent/Utilities/Maintenance			\$2,221	\$1,087	\$1,134	\$2,221
Communications			\$530	\$230	\$300	\$530
Training			\$150	\$150	\$0	\$150
Total Other			\$15,203	\$2,767	\$12,436	\$15,203
Total Direct Costs			\$138,448	\$125,862		\$125,862
Total Administrative Costs					\$12,586	\$12,586
Overall Budget				\$125,862	\$12,586	\$138,448
Percentages				90.91%	9.09%	

	Original	Add. Funds	New Budget
Total Award Amount:	\$134,476	\$3,972	\$138,448
Difference:			\$-

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Medical Case Management

	Total Salary	Ryan White FTE	Ryan White \$	Direct Services	Administrative	Total
Personnel						
Rosales, S. -SSP	\$76,887	0.135	\$10,400	\$10,400	\$0	\$10,400
Alatorre, R. -SSP	\$86,169	0.142	\$12,250	\$12,250	\$0	\$12,250
Jimenez, B. -SSP	\$96,345	0.272	\$26,250	\$26,250	\$0	\$26,250
Malixi, Eric. -LVN	\$81,017	0.183	\$14,858	\$14,858	\$0	\$14,858
Del Villar, D. -LVN	\$85,052	0.220	\$18,700	\$18,700	\$0	\$18,700
Personnel Subtotal	\$425,470	0.953	\$82,458	\$82,458	\$0	\$82,458
Fringe						
Fringe	69%		\$56,896	\$56,896	\$0	\$56,896
Total Personnel			\$139,354	\$139,354	\$0	\$139,354
Travel						
Local Travel			\$300	\$300	\$0	\$300
Out of State Travel			\$50	\$50	\$0	\$50
Total Travel			\$350	\$350	\$0	\$350
Other						
Admin Support, Insurance, Payroll			\$11,746	\$0	\$11,746	\$11,746
RC Information Tech			\$1,350	\$1,350	\$0	\$1,350
Office Supplies			\$650	\$400	\$250	\$650
Rent/Utilities/Maintenance			\$3,062	\$1,062	\$2,000	\$3,062
Communications			\$594	\$294	\$300	\$594
Training			\$150	\$150	\$0	\$150
Total Other			\$17,552	\$3,256	\$14,296	\$17,552
Total Direct Costs			\$157,256	\$142,960		\$142,960
Total Administrative Costs					\$14,296	\$14,296
Overall Budget				\$142,960	\$14,296	\$157,256
Percentages				90.91%	9.09%	

	Original	Add. Funds	New Budget
Total Award Amount:	\$159,663	-2407	\$157,256
Difference:			\$0.00

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Outpatient/Ambulatory Health Services

	Total Salary	Ryan White FTE	Ryan White \$	Direct Services	Administrative	Total
Personnel						
Zane, R. -MD	\$10,750	0.130	\$1,395	\$1,395	\$0	\$1,395
Calderon, C.-PCL	\$221,900	0.229	\$50,900	\$50,900	\$0	\$50,900
Latif/Gilbert, -NP	\$214,115	0.120	\$25,700	\$25,700	\$0	\$25,700
Pineda, V/ Brown, B. -OA III	\$41,000	0.159	\$6,500	\$6,500	\$0	\$6,500
Hunt, A. -HSA	\$52,191	0.174	\$9,100	\$9,100	\$0	\$9,100
Osaki, K. -HSA	\$44,600	0.330	\$14,700	\$14,700	\$0	\$14,700
Ramirez, G. -HSA	\$54,278	0.127	\$6,900	\$6,900	\$0	\$6,900
Rojas, S. /Dorothy, A. -LVN	\$92,728	0.160	\$14,800	\$14,800	\$0	\$14,800
Personnel Subtotal	\$731,562	1.428	\$129,995	\$129,995	\$0	\$129,995
Fringe						
Fringe Subtotal	50%		\$64,997	\$64,997	\$0	\$64,997
Total Personnel			\$194,992	\$194,992	\$0	\$194,992
Travel						
Local Travel			\$1,150	\$900	\$250	\$1,150
Out of State Travel			\$800	\$300	\$500	\$800
Total Travel			\$1,950	\$1,200	\$750	\$1,950
Other						
Admin Support, Insurance, Payroll			\$20,947	\$0	\$20,947	\$20,947
RC Information Tech			\$1,478	\$1,328	\$150	\$1,478
Laboratory Services			\$6,896	\$6,746	\$150	\$6,896
Medical/Pharmacy Supplies			\$30,504	\$30,354	\$150	\$30,504
Office Supplies			\$850	\$600	\$250	\$850
Rent/Utilities/Maintenance			\$2,450	\$1,450	\$1,000	\$2,450
Communications			\$600	\$400	\$200	\$600
Training			\$557	\$407	\$150	\$557
Total Other			\$64,282	\$41,285	\$22,997	\$64,282
Total Direct Costs			\$261,224	\$237,477		\$237,477
Total Administrative Costs					\$23,747	\$23,747
Overall Budget				\$237,477	\$23,747	\$261,224
Percentages				90.91%	9.09%	

	Original Award	Adjustment	New Award
Total Award Amount:	\$235,163	\$26,061	\$261,224
Difference:			\$0

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Nutrition Therapy

	Total Salary	Ryan White FTE	Ryan White \$	Direct Services	Administrative	Total
Personnel						
Rodriguez, K. -Nutrition	\$70,606	0.173	\$12,200	\$12,200	\$0	\$12,200
Whaples, N. -PD	\$114,262	0.062	\$7,100	\$7,100	\$0	\$7,100
Mansell, S. -Nutrition	\$7,256	0.813	\$5,900	\$5,900	\$0	\$5,900
McCarthy, M. -Nutrition	\$87,422	0.069	\$6,006	\$6,006	\$0	\$6,006
Vacant -Nutrition	\$81,000	0.062	\$5,000	\$5,000	\$0	\$5,000
Personnel Subtotal	\$360,546	1.178	\$36,206	\$36,206	\$0	\$36,206
Fringe						
Fringe	69%		\$24,982	\$24,982	\$0	\$24,982
Total Personnel			\$61,188	\$61,188	\$0	\$61,188
Travel						
Local Travel			\$886	\$886	\$0	\$886
Total Travel			\$886	\$886	\$0	\$886
Other						
Admin Support, Insurance, Payroll			\$6,208	\$0	\$6,208	\$6,208
RCIT Enterprise			\$1,060	\$910	\$150	\$1,060
Communications			\$600	\$600	\$0	\$600
Total Other			\$7,868	\$1,510	\$6,358	\$7,868
Total Direct Costs			\$69,942	\$63,584		\$63,584
Total Administrative Costs					\$6,358	\$6,358
Overall Budget				\$63,584	\$6,358	\$69,942
Percentages				90.91%	9.09%	

	Original	Add. Funds	New Budget
Total Award Amount:	\$37,873	32069	\$69,942
Difference:			\$0.00

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Early Intervention Services

	Total Salary	Ryan White FTE	Ryan White \$	Direct Services	Administrative	Total
Personnel						
Arrona, I-CDS III	\$85,622	0.255	\$21,800	\$21,800	\$0	\$21,800
Olmos, J. -CDS II	\$54,284	0.451	\$24,480	\$24,480	\$0	\$24,480
Ramos, G. -CDS II	\$68,358	0.388	\$26,500	\$26,500	\$0	\$26,500
Personnel Subtotal	\$208,264	1.093	\$72,780	\$72,780	\$0	\$72,780
Fringe						
Fringe	69%		\$50,218	\$50,218	\$0	\$50,218
Total Personnel			\$122,998	\$122,998	\$0	\$122,998
Travel						
Local Travel			\$1,321	\$1,071	\$250	\$1,321
Out of State Travel			\$600	\$100	\$500	\$600
Total Travel			\$1,921	\$1,171	\$750	\$1,921
Other						
Admin Support, Insurance, Payroll			\$10,853	\$0	\$10,853	\$10,853
RC Information Tech			\$2,400	\$2,400	\$0	\$2,400
Office Supplies			\$1,674	\$1,524	\$150	\$1,674
Rent/Utilities/Maintenance			\$2,550	\$1,550	\$1,000	\$2,550
Communications			\$1,290	\$900	\$390	\$1,290
Training			\$900	\$900	\$0	\$900
Total Other			\$19,667	\$7,274	\$12,393	\$19,667
Total Direct Costs			\$144,586	\$131,443		\$131,443
Total Administrative Costs					\$13,143	\$13,143
Overall Budget				\$131,443	\$13,143	\$144,586
Percentages				90.91%	9.09%	

	Original	Add. Funds	New Budget
Total Award Amount:	\$121,790	\$ 22,796.00	\$144,586
Indirect			\$0.00

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 MAI Early Intervention Services

	Total Salary	Ryan White FTE	Ryan White \$	Direct Services	Administrative	Total
Personnel						
Arrona, I-CDS III	\$85,622	0.196	\$16,800	\$16,800	\$0	\$16,800
Olmos, J. -CDS II	\$54,284	0.294	\$15,980	\$15,980	\$0	\$15,980
Ramos, G. -CDS II	\$68,358	0.221	\$15,100	\$15,100	\$0	\$15,100
Personnel Subtotal	\$208,264	0.711	\$47,880	\$47,880	\$0	\$47,880
Fringe						
Fringe	69%		\$33,037	\$33,037	\$0	\$33,037
Total Personnel			\$80,917	\$80,917	\$0	\$80,917
Travel						
Local Travel			\$553	\$403	\$150	\$553
Out of State Travel			\$50	\$50	\$0	\$50
Total Travel			\$603	\$453	\$150	\$603
Other						
Admin Support, Insurance, Payroll			\$6,897	\$0	\$6,897	\$6,897
RC Information Tech			\$1,150	\$1,150	\$0	\$1,150
Office Supplies			\$725	\$575	\$150	\$725
Rent/Utilities/Maintenance			\$1,475	\$475	\$1,000	\$1,475
Communications			\$460	\$260	\$200	\$460
Training			\$150	\$150	\$0	\$150
Total Other			\$10,857	\$2,610	\$8,247	\$10,857
Total Direct Costs			\$92,377	\$83,980		\$83,980
Total Administrative Costs					\$8,397	\$8,397
Overall Budget				\$83,980	\$8,397	\$92,377
Percentages				90.91%	9.09%	

	Original	Add. Funds	New Budget
Total Award Amount:	\$85,147	\$7,230	\$92,377
Difference			\$0.00

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Clinical Quality Management

	Total Salary	Ryan White FTE	Ryan White \$	CQM	Total
Personnel					
Rojas, S.- LVN	\$92,728	0.188	\$17,476	\$17,476	\$17,476
Dees, Porchia - HEA II	\$58,104	0.059	\$3,440	\$3,440	\$3,440
Personnel Subtotal	\$150,832	0.248	\$20,916	\$20,916	\$20,916
Fringe					
Fringe	56%		\$11,712	\$11,712	\$11,712
Total Personnel			\$32,628	\$32,628	\$32,628
Travel					
Local Travel			\$30	\$30	\$30
Total Travel			\$30	\$30	\$30
Other					
Clinic Licensure			\$120	\$120	\$120
Office Supplies			\$75	\$75	\$75
RC Information Tech			\$190	\$190	\$190
Training			\$50	\$50	\$50
Total Other			\$435	\$435	\$435
Total Direct Costs				\$33,093	\$33,093
Overall Budget				\$33,093	\$33,093
Percentages				100.00%	

	Original	Add. Funds	New Budget
Total Award Amount:	\$29,230	\$3,863	\$33,093
Difference:			\$0.00

County of Riverside Public Health
Ryan White Part A/MAI
3/1/2025 - 2/28/2028
Master Fringe Benefit Breakdown

Up to 69% Fringe Benefits -Applies to all service categories

Social Security	6.50%
Medicare	1.50%
Flex Credits	21.00%
Vision Services Plan	0.02%
Basic Life	0.13%
Retirement	38.15%
401	0.15%
LTD	0.34%
Unemployment	0.19%
Short Term Disability	0.00%
Health,Safety & Training Fund	0.02%
517000 worker's comp	1.00%
Up to Fringe Subtotal	69.00%

County of Riverside Public Health
 Ryan White Part A/MAI
 3/1/2025 - 2/28/2026
 Master Budget Narrative

Personnel		FTE	Budget
Zane, R. -MD	Physician	0.130	\$1,395
<p>OAHS: Provides medical diagnosis, treatment, and management including the prescription of antiretroviral therapy to patients with HIV disease at three health care centers in Riverside County. Perform diagnostic testing, documentation and tracking of viral loads and CD4 counts. Early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental health needs.</p>			
Calderon, C.-PCL	Physician Care Leader	0.229	\$50,900
<p>OAHS: Provides medical diagnosis, treatment, and management including the prescription of antiretroviral therapy to patients with HIV disease at three health care centers in Riverside County. Perform diagnostic testing, documentation and tracking of viral loads and CD4 counts. Early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental health needs. Ensures treatment is in accordance with Ryan White Standards of Care and, US Public Health service guidelines and AAHIVM best practices.</p>			
Latif/Gilbert, -NP	Nurse Practitioners	0.120	\$25,700
<p>OAHS: Provides medical diagnosis, treatment, and management including the prescription of antiretroviral therapy to patients with HIV disease at three health care centers in Riverside County. Perform diagnostic testing, documentation and tracking of viral loads and CD4 counts. Early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental health needs.</p>			
Pineda, V/ Brown, B. -OA III	Office Assistant III	0.159	\$6,500
<p>OAHS: Provides support to providers and nurses at three health care centers.</p>			
Hunt, A. -HSA	Health Services Assistant	0.174	\$9,100
<p>OAHS: Provides direct patient care and provides support duties to physicians, registered nurses and LVN's at three health care centers.</p>			
Osaki, K. -HSA	Health Services Assistant	0.330	\$14,700
<p>OAHS: Provides direct patient care and provides support duties to physicians, registered nurses and LVN's at three health care centers.</p>			
Ramirez, G. -HSA	Health Services Assistant	0.127	\$6,900
<p>OAHS: Provides direct patient care and provides support duties to physicians, registered nurses and LVN's at three health care centers.</p>			
Rojas, S. /Dorothy, A. -LVN	Licensed Vocational Nurse III	0.348	\$32,276
<p>OAHS: Provides direct patient care and provides support duties to physicians, and registered nurses at three health care centers.</p> <p>CQM: Establish and maintain Clinic Quality Control of office paperwork, clinic audits, and clinic logs at the health care centers. Reviews and maintains proper clinic workflow processes for quality control and identify gaps.</p>			
Arrona, I-CDS III	Senior Communicable Disease Specialist	0.451	\$38,600
<p>MAI & EIS: Supervises EIS services to unaware and unmet need populations in service areas 1, 2, and 3 in Riverside County. Identify barriers to care. Assist patient with linkage to medical care and wraparound services. Link newly diagnosed HIV+ to medical care in 30 days or less. Assist patients that have fallen out of care facilitating access to care. Oversees QA activities.</p>			
Oimos, J. -CDS II	Communicable Disease Specialist	0.745	\$40,460
<p>MAI & EIS: Provide MAI EIS Services to African American and Latino unaware and unmet need populations in service areas 1, 2, and 3 in Riverside County. Identify barriers to care. Assist patient with linkage to medical care and wraparound services. Link newly diagnosed HIV+ to medical care in 30 days or less. Assist patients that have fallen out of care facilitating access to care. Perform targeted HIV testing.</p>			

<i>Ramos, G. -CDS II</i>	<i>Communicable Disease Specialist</i>	<i>0.609</i>	<i>\$41,600</i>
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MAI & EIS: Provide MAI EIS Services to African American and Latino unaware and unmet need populations in service areas 1, 2, and 3 in Riverside County. Identify barriers to care. Assist patient with linkage to medical care and wraparound services. Link newly diagnosed HIV+ to medical care in 30 days or less. Assist patients that have fallen out of care facilitating access to care. Perform targeted HIV testing.

<i>Rosales, S. -SSP</i>	<i>Social Services Practitioner</i>	<i>0.297</i>	<i>\$22,800</i>
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MCM & N-MCM: Help patients identify all available health and disability benefits. Educate patients on public and private benefits at three health care centers. Assist patients with accessing community, social, financial, and legal resources.

<i>Alatorre, R. -SSP</i>	<i>Social Services Practitioner</i>	<i>0.277</i>	<i>\$23,850</i>
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MCM & N-MCM: Help patients identify all available health and disability benefits. Educate patients on public and private benefits at three health care centers. Assist patients with accessing community, social, financial, and legal resources.

<i>Jimenez, B. -SSP</i>	<i>Social Services Practitioner</i>	<i>0.453</i>	<i>\$43,650</i>
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MCM & N-MCM: Help patients identify all available health and disability benefits. Educate patients on public and private benefits at three health care centers. Assist patients with accessing community, social, financial, and legal resources.

<i>Barajas, V. -LVN</i>	<i>Licensed Vocational Nurse III</i>	<i>0.116</i>	<i>\$9,670</i>
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Non-MCM: Provides direct patient care and provides support duties to physicians, and registered nurses at three health care centers.

<i>Malixi, Eric. -LVN</i>	<i>Licensed Vocational Nurse III</i>	<i>0.253</i>	<i>\$20,458</i>
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MCM: Provides Medical Case Management Services to HIV patients; provide coordination and follow - up of medical treatment. Provide treatment adherence counseling at three health care centers.

Non-MCM: Provides direct patient care and provides support duties to physicians, and registered nurses at three health care centers.

<i>Del Villar, D. -LVN</i>	<i>Licensed Vocational Nurse III</i>	<i>0.295</i>	<i>\$25,100</i>
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Non-MCM: Provides direct patient care and provides support duties to physicians, and registered nurses at three health care centers.

MCM: Provides Medical Case Management Services to HIV patients; provide coordination and follow - up of medical treatment. Provide treatment adherence counseling at three health care centers.

<i>Medina, O. -LVN</i>	<i>Licensed Vocational Nurse III</i>	<i>0.113</i>	<i>\$9,600</i>
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Non-MCM: Provides direct patient care and provides support duties to physicians, and registered nurses at three health care centers.

<i>Rodriguez, K. -Nutrition</i>	<i>Nutritionist</i>	<i>0.173</i>	<i>\$12,200</i>
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Nutrition: Performs nutritional assessments on HIV patients ; Teaches and counsels HIV patients on healthy food choices and food preparation. Determines, through application of various published standards, whether individuals are at nutritional risk. Gives direct nutritional and dietetic consultation to individuals with special nutritional needs in an individual and group session.

<i>Whaples, N. -PD</i>	<i>Program Director</i>	<i>0.062</i>	<i>\$7,100</i>
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Nutrition: Performs nutritional assessments on HIV patients ; Teaches and counsels HIV patients on healthy food choices and food preparation. Determines, through application of various published standards, whether individuals are at nutritional risk. Gives direct nutritional and dietetic consultation to individuals with special nutritional needs in an individual and group session.

<i>Mansell, S. -Nutrition</i>	<i>Nutritionist</i>	<i>0.813</i>	<i>\$5,900</i>
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Nutrition: Performs nutritional assessments on HIV patients ; Teaches and counsels HIV patients on healthy food choices and food preparation. Determines, through application of various published standards, whether individuals are at nutritional risk. Gives direct nutritional and dietetic consultation to individuals with special nutritional needs in an individual and group session.

<i>McCarthy, M. -Nutrition</i>	<i>Nutritionist</i>	<i>0.069</i>	<i>\$6,006</i>
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Nutrition: Performs nutritional assessments on HIV patients ; Teaches and counsels HIV patients on healthy food choices and food preparation. Determines, through application of various published standards, whether individuals are at nutritional risk. Gives direct nutritional and dietetic consultation to individuals with special nutritional needs in an individual and group session.

<i>Vacant -Nutrition</i>	<i>Nutritionist</i>	<i>0.062</i>	<i>\$5,000</i>
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Nutrition: Performs nutritional assessments on HIV patients ; Teaches and counsels HIV patients on healthy food choices and food preparation. Determines, through application of various published standards, whether individuals are at nutritional risk. Gives direct nutritional and dietetic consultation to individuals with special nutritional needs in an individual and group session.

<i>Dees, Porchia - HEA II</i>	<i>HEA II</i>	<i>0.059</i>	<i>\$3,440</i>
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CQM: Assist in community health/patient education needs and participates in the planning, development, and evaluation of high quality programs and media campaigns.

Personnel Subtotal		6.462	\$462,905
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Fringe

OAHS Fringe	50%		\$64,997
MAI-EIS Fringe	69%		\$33,037
EIS Fringe	69%		\$50,218
Non-Med Fringe	69%		\$50,142
Med-Case Fringe	69%		\$56,896
Nutrition Fringe	69%		\$24,982
CQM Fringe	56%		\$11,712
Fringe Subtotal			\$291,984

Total Personnel			\$754,889
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Travel

Local Travel and Mileage

Also includes in-state flight cost, hotel cost, per diem etc. for SBC Approved trainings if applicable.

All Travel requests to be sent to SBC for pre-approval.

Anticipated Costs Breakdown:

Mileage: (Mileage is at \$.7 federal rate; ~6,110 miles x \$.7=\$4277)

Flight - \$150 (coverage for 1 personnel flying within the state)

Hotel cost – \$125 (\$125/night for 1 personnel staying 1 nights)

Per diem – \$71 (per diem is \$71/day for 1 personnel for 1 days) \$4,623

Out of State Mileage and Travel

Also includes out of-state flight cost, hotel cost, per diem etc. for SBC Approved trainings if applicable.

All Travel requests to be sent to SBC for pre-approval.

Anticipated Costs Breakdown:

Mileage: (Mileage is at \$.7 federal rate; ~1,145 miles x \$.7= \$801.5)

Flight - \$100 (coverage for 1 personnel flying in/out of the state)

Hotel cost – \$580 (~\$145/night for 1 personnel staying 4 nights)

Per diem – \$17.50 (per diem is \$71/day for one personnel for 1 days but only including 17.5 at this time)

Uber/Lyft/Transportation: \$51 (Roundtrip Transportation Cost (average \$25.5 cost each way between hotel and airport) \$1,550

Total Travel **\$6,173**

Other

Admin Support, Insurance, Payroll \$67,403

Covers Administration support, insurance costs, and payroll costs to implement the RW A services (~\$244.215/month x 12 months x 23 staff members= \$67,403)

RCIT Enterprise \$8,328

Covers Information Technology costs for staff computer equipment, landlines, and cellphones. Costs includes security, encryption, safety measures, etc. (~\$30.1739/month x 12 months x 23 staff members=\$8,328)

Clinic Licensure \$120

Clinic License renewals for Clinics to maintain high clinical quality management (ex. CLIA) ~\$120 cost per license renewal x 1 license = \$120

Laboratory Services \$6,896

Medical testing and assessment for HIV/AIDS clinical care under OAHS. (Ex. Quest Diagnostics) ~71clients x ~\$97.12676 per testing services = \$6,896

Medical/Pharmacy Supplies \$30,504

Medical and Pharmaceutical supplies/equipment to support daily activities at three health care centers and provide pharmaceutical assistance to HIV patients receiving OAHS. This also lab supplies such as syringes, blood tubes, plastic gloves, equipment maintenance, etc. 71 clients x ~\$429.6338 for medical/pharmaceutical services = \$30,504

Office Supplies \$4,824

Office supplies/equipment to support RWA Staff to implement daily service activities at three health care centers. This includes paper, pens, ink, etc. ~ \$209.739 annually x 23 staff members = \$4824

Rent/Utilities/Maintenance	\$11,758
Office/cubicle Space for clinic and support staff to provide RWA services. Includes utility(water, electricity) and maintenance costs such as security, janitorial services, and landscaping. \$23.516/sq foot x 500 sq feet =\$11,758	
Communications	\$4,074
Cell phone and desk phone expenses for staff. Will support daily activities at the health care centers and call clients and other staff. (~\$14.761/month x 12 months x 23 staff members = \$4074)	
Trainings	\$1,957
Training for RUHS Staff who provide care to persons living with or at risk of acquiring HIV at a clinical setting. Training promotes and maintains strong education and experience to apply knowledge with RWA patients. Examples of Trainings include but not limited to the Virtual ACT HIV Conference. Average training fee of ~\$326.166 x 6 trainings= \$1957	
Total Other	\$135,864

Total Direct Costs	\$	785,306
Total Administrative Costs	\$	78,527
Total CQM Costs	\$	33,093
Overall Budget	\$	896,926

