



Contract Number

17-92 A-2

SAP Number

4100046749

Department of Public Health

Department Contract Representative	Lisa Ordaz, HS Contracts
Telephone Number	(909) 388-0222
Contractor	Foothill AIDS Project
Contractor Representative	La Monica Stowers
Telephone Number	(909) 482-2066
Contract Term	04/01/2017 – 03/31/2021
Original Contract Amount	\$1,927,652
Amendment Amount	\$590,000
Total Contract Amount	\$2,517,652
Cost Center	9300371000

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 2

It is hereby agreed to amend Contract No. 17-92, effective August 21, 2019, as follows:

SECTION V. FISCAL PROVISIONS

Paragraph A is amended to read:

- A. The maximum amount of payment under this Contract shall not exceed \$2,517,652, of which \$2,517,652 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. It includes the original contract amount and all subsequent amendments and is broken down as follows:

Original Contract	\$1,770,000	April 1, 2017 through March 31, 2020
Amendment No. 1	\$157,652 (increase)	April 1, 2018 through March 31, 2019
Amendment No. 2	\$590,000 (increase)	April 1, 2020 through March 31, 2021

It is further broken down by Program Year as follows:

Program Year	Dollar Amount
April 1, 2017 through March 31, 2018	\$590,000
April 1, 2018 through March 31, 2019	\$747,652
April 1, 2019 through March 31, 2020	\$590,000
April 1, 2020 through March 31, 2021	*\$590,000
Total	\$2,517,652

*This amount includes the increase of \$590,000 for 2020-21.

SECTION VIII. TERM is amended to read as follows:

This Contract is effective as of April 1, 2017 and is extended from its original expiration date of March 31, 2020, to expire on March 31, 2021, but may be terminated earlier in accordance with provisions of Section IX of the Contract. The Contract term may be extended for one (1) additional one-year period by mutual agreement of the parties.

ATTACHMENTS

ATTACHMENT A – Add SCOPE OF WORK for Program Year 2019-20


ATTACHMENT A1 – Add SCOPE OF WORK for Program Year 2020-21

ATTACHMENT G2 – Add RYAN WHITE PART B HCP/PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN for 2019-20

ATTACHMENT G3 – Add RYAN WHITE PART B HCP/PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN for 2020-21

All other terms and conditions of Contract No. 17-92 remain in full force and effect.

COUNTY OF SAN BERNARDINO

► 
Curt Hagman, Chairman, Board of Supervisors

Dated: 8-20-19

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


Laura H. Welch
Clerk of the Board of Supervisors
of the County of San Bernardino

By 

Foothill AIDS Project

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

By 
(Authorized signature - sign in blue ink)


Name Maritza Tona
(Print or type name of person signing contract)

Title Executive Director/CEO
(Print or Type)


Dated: _____

Address 233 W. Harrison Ave.
Claremont, CA 91711

FOR COUNTY USE ONLY

Approved as to Legal Form
► 
Adam Ebright, County Counsel
Date 8/6/19

Reviewed for Contract Compliance
► 
Jennifer Mulhall-Daudel, HS Contracts
Date 8/6/19

Reviewed/Approved by Department
► 
Trudy Raymundo, Director
Date 8/6/19

SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	Foothill AIDS Project
Contractor:	
Grant & Period:	Part B Contract April 1, 2019 – March 31, 2020
Service Category:	Case Management Services (non medical)
Service Goal:	Facilitate linkage and retention in care through the provision of guidance and assistance in accessing medical, social, community, legal, financial, and other needed services.
Service Health Outcomes:	<ul style="list-style-type: none"> 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 19/20 TOTAL
Proposed Number of Clients	0	0	0	60	120	70	250
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	600	1200	700	2500
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	4000	8000	5000	17000

ATTACHMENT A

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Intake/assessment of needs *Case Management is co-located at the San Bernardino Public Health clinics in Ontario, San Bernardino and Victorville. 	4,5,6	4/1/2019-3/31/2020	<p>Client file will evidence intake activities including screening for eligibility as well as insurance/third party payor. Client file will document HIV status, proof of insurance, residence, and income according to standards.</p> <p>Client file will evidence assessment of needs.</p> <p>Client file will contain Consent for Services, ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form.</p>
<ul style="list-style-type: none"> Initial and ongoing assessment of acuity level Case Manager/Social Worker (CM/SW) will complete initial Acuity Level based on identified needs and assess new acuity level as needed. 	4,5,6	4/1/2019-3/31/2020	<p>Client file will document assessment of initial acuity level and ongoing acuity level using the Client Acuity tool.</p>
<ul style="list-style-type: none"> Provide education, advice assistance in obtaining medical, social, community, legal, financial (e.g. benefits counseling), and other services. 	4,5,6	4/1/2019-3/31/2020	<p>Client file will document in progress note contacts to provide education and advice on accessing medical, social, community, legal,</p>

ATTACHMENT A

CM/SW will meet with client to provide education and assistance as identified from need assessment.			benefits counseling, treatment adherence counseling and other services. Client file will document entry of referrals provided and their outcomes in ARIES.
<ul style="list-style-type: none"> Discuss budgeting with clients to maintain access to necessary services CM/SW will meet with client to complete Budgeting form and discuss budgeting issues as related to maintaining access to necessary services. 	4,5,6	4/1/2019-3/31/2020	Client will include Budgeting Form. Client file will document in progress note discussion regarding budgeting in order to maintain access to necessary services.
<ul style="list-style-type: none"> Case conferencing with Medical Case Management (MCM) Staff on behalf of the client. CM/SW will participate in case conference to discuss issues and resolution to problem-solve identified issues. 	4,5,6	4/1/2019-3/31/2020	Client file will reflect staff participation at case conference with MCM, issues discussed and resolutions identified. As applicable, client file will reflect coordination of services with Market Plan medical providers.
<ul style="list-style-type: none"> Services are provided based on established C&L Competency Standards 	4,5,6	4/1/2019-3/31/2020	Staff education on FAP cultural competency plan as well as on other cultural competency topics is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA. Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.

SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part B Contract April 1, 2019 – March 31, 2020
Service Category:	Food Services
Service Goal:	The overall goal of food services is to supplement eligible HIV/AIDS consumer's financial ability to maintain continuous access to adequate caloric intake and balanced nutrition sufficient to maintain optimal health in the face of compromised health status due to HIV infection in the TGA.
Service Health Outcomes:	<ul style="list-style-type: none"> • Improve retention on care (at least 1 medical visit in each 6-month period) • Improve viral load suppression rate

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 19/20 TOTAL
Proposed Number of Clients	0	0	0	25	90	35	150
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	300	1080	420	1800
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	1375	5200	2000	8575

ATTACHMENT A

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Food Vouchers Food assistance needs will be identified by staff during assessment/reassessment, which will be included in the Individual Care Plan (ICP). Eligibility will be determined according to current TGA financial eligibility guidelines. Eligible Clients will make appointment for picking up vouchers – whenever possible. Food vouchers will be distributed on a monthly or as needed to clients not to exceed a maximum of six (6) vouchers per month. 	4,5,6	4/1/2019- 3/31/2020	<p>Client file will evidence eligibility screening for Ryan White funds as well other party payers. Client file will document HIV status, proof of medical insurance, residence, and income according to standards. Client file will contain Consent for Services; ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form. Client file will evidence need for food assistance. Client file will</p>
<p>Food vouchers will be kept in locked file cabinet in FAP's Administration offices and logged out to program using FAP's internal Food Voucher Request form. Food vouchers will be kept in locked file cabinet in FAP's program sites and logged out to eligible clients using FAP's internal Monthly Food Voucher Log.</p>			<p>contain proof of food assistance received as client signature on copy of food vouchers. Client file will contain evidence of referral to other sources of food assistance, as applicable</p>

ATTACHMENT A

<ul style="list-style-type: none">Services are provided based on established C&L Competency Standards	4,5,6	4/1/2019-3/31/2020	Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA. Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.
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SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	Foothill AIDS Project
Contractor:	
Grant & Period:	Part B Contract April 1, 2019 – March 31, 2020
Service Category:	Medical Transportation Services
Service Goal:	To enhance clients' access to health care or support services using multiple forms of transportation throughout the TGA.
Service Health Outcomes:	<ul style="list-style-type: none"> • 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 19/20 TOTAL
Proposed Number of Clients	0	0	0	25	55	25	105
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	300	660	300	1260
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	1165	2565	1165	4895

ATTACHMENT A

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Bus passes CM/SW will determine client eligibility: HIV diagnosis, residency, income, purpose of trips. CM will document services ordered in client file. Staff will provide bus pass to client and will enter service provided on Transportation Log Medical Transportation services will be provided to access services according to TGA guidelines 	4,5,6	4/1/2019- 3/31/2020	Client file will document eligibility screening every six months and statement of need for transportation assistance. Transportation Log will evidence client signature acknowledging receipt of bus pass. Bus Pass assistance will be documented in ARIES.
<ul style="list-style-type: none"> Taxi service CM/SW will determine client eligibility: HIV diagnosis, residency, income, purpose and date of trip. CM will document services ordered in client file. Staff will order taxi service; notify client of time and need to be ready on time. Staff will enter service provided on Taxi Services Binder Services will be provided to access services according to TGA guidelines Staff will document trip point of origin, destination and reason for trip 	4,5,6	4/1/2019- 3/31/2020	Client file will document eligibility screening and statement of need for urgent trip. Taxi Services Binder will include taxi request depicting point of origin and destination and statement of need for urgent trip. Services will be provided within the TGA. Taxi assistance will be documented in ARIES.

ATTACHMENT A

<ul style="list-style-type: none"> Gas cards CM/SW will determine client eligibility: HIV diagnosis, residency, income, purpose and date of trip. CM will document service provided in client file. Staff will log voucher disbursement in Gas Card Log Gas cards will be provided to access services according to TGA guidelines 	4,5,6	4/1/2019- 3/31/2020	<p>Client file will document eligibility screening every six months and statement of need for transportation assistance. Transportation log will evidence client signature acknowledging receipt of gas vouchers. Gas Voucher assistance will be documented in ARIES.</p>
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SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	Foothill AIDS Project
Contractor:	
Grant & Period:	Part B Contract April 1, 2019 – March 31, 2020
Service Category:	Outreach Services
Service Goal:	Re/Link HIV+ individuals- to include those unaware of their HIV status as well as those aware but not in care- to care and support services to improve health and decrease viral load.
Service Health Outcomes:	<ul style="list-style-type: none"> • Link newly diagnosed HIV+ medical care in 30 days or less • 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 19/20 TOTAL
Proposed Number of Clients	0	0	0	5	45	5	55
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	35	315	35	385

Proposed Number of Units = Transactions or 15 min encounters	0	0	0	305	2745	305	3355
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ATTACHMENT A

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Screening and Intake for Outreach services according to definition of disengagement in medical care 	4,5,6	4/1/2019- 3/31/2020	HE will implement follow-up/no contact protocol includes mail, community, home visit, and phone contact. Client file will evidence attempts to contact, education and support provided to address barriers
<ul style="list-style-type: none"> Outreach Case Manager (OCM) will assess barriers to engagement in care as well as service needs to support re-engagement and maintenance in HIV medical care. OCM will develop plan for re-engagement and maintenance in HIV medical care. 	4,5,6	4/1/2019- 3/31/2020	<p>to care. Attempts and contact with client will be documented in ARIES.</p> <p>Client file will evidence screening and intake activities to include screening for eligibility as well as insurance/third party payer. Client file will document HIV status, proof of insurance, residence, and income according to standards. Client file will contain Consent for Services, ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form.</p> <p>Client file will evidence assessment of needs and barriers to re-engagement in medical care.</p> <p>Client file will evidence individualized plan for re-engagement and maintenance in HIV medical care including identification of barriers to care and interventions to problem-solve such barriers.</p>

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<ul style="list-style-type: none"> OCM will provide individual session to implement re-engagement and maintenance plan. OCM will provide referrals to link clients to identified needs 	4,5,6	4/1/2019- 3/31/2020	<p>Client file will evidence in progress note entered in ARIES individual session.</p> <p>Client file will evidence referrals to medical care and support services in progress notes. Referrals to medical</p>
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			and support services along with their outcome will be documented in ARIES.
<ul style="list-style-type: none"> Services will be provided according to C&L standards 	4,5,6	4/1/2019- 3/31/2020	<p>Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	Foothill AIDS Project
Contractor:	
Grant & Period:	Part B Contract April 1, 2020 – March 31, 2021
Service Category:	Case Management Services (non medical)
Service Goal:	Facilitate linkage and retention in care through the provision of guidance and assistance in accessing medical, social, community, legal, financial, and other needed services.
Service Health Outcomes:	<ul style="list-style-type: none"> • Improve retention in care (at least 1 medical visit in each 6-month period) • Improve viral suppression rate

	SA1 Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY19/20 TOTAL
Proposed Number of Clients	0	0	0	60	120	70	250
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	600	1200	700	2500
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	4000	8000	5000	17000

ATTACHMENT A1

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Intake/assessment of needs <i>*Case Management is co-located at the San Bernardino Public Health clinics in Ontario, San Bernardino and Victorville.</i> 	4,5,6	4/1/2020- 3/31/2021	<p>Client file will evidence intake activities including screening for eligibility as well as insurance/third party payor. Client file will document HIV status, proof of insurance, residence, and income according to standards.</p> <p>Client file will evidence assessment of needs.</p> <p>Client file will contain Consent for Services, ARIES consent updated every three years, HIP AA Notification and Partner Services Acknowledgement form.</p>
<ul style="list-style-type: none"> Initial and ongoing assessment of acuity level Case Manager/Social Worker (CM/SW) will complete initial Acuity Level based on identified needs and assess new acuity level as needed. 	4,5,6	4/1/2020- 3/31/2021	<p>Client file will document assessment of initial acuity level and ongoing acuity level using the Client Acuity tool.</p>
<ul style="list-style-type: none"> Provide education, advice assistance in obtaining medical, social, community, legal, financial (e.g. benefits counseling), and other services. 	4,5,6	4/1/2020- 3/31/2021	<p>Client file will document in progress note contacts to provide education and advice on accessing medical, social, community, legal,</p>

ATTACHMENT A1

CM/SW will meet with client to provide education and assistance as identified from need assessment.			benefits counseling, treatment adherence counseling and other services. Client file will document entry of referrals provided and their outcomes in ARIES.
<ul style="list-style-type: none"> Discuss budgeting with clients to maintain access to necessary services CM/SW will meet with client to complete Budgeting form and discuss budgeting issues as related to maintaining access to necessary services. 	4,5,6	4/1/2020- 3/31/2021	Client will include Budgeting Form. Client file will document in progress note discussion regarding budgeting in order to maintain access to necessary services.
<ul style="list-style-type: none"> Case conferencing with Medical Case Management (MCM) Staff on behalf of the client. CM/SW will participate in case conference to discuss issues and resolution to problem-solve identified issues. 	4,5,6	4/1/2020- 3/31/2021	Client file will reflect staff participation at case conference with MCM, issues discussed and resolutions identified. As applicable, client file will reflect coordination of services with Market Plan medical providers.
<ul style="list-style-type: none"> Services are provided based on established C&L Competency Standards 	4,5,6	4/1/2020- 3/31/2021	Staff education on FAP cultural competency plan as well as on other cultural competency topics is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA. Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.

SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part B Contract April 1, 2020 – March 31, 2021
Service Category:	Food Services
Service Goal:	The overall goal of food services is to supplement eligible HIV/AIDS consumer's financial ability to maintain continuous access to adequate caloric intake and balanced nutrition sufficient to maintain optimal health in the face of compromised health status due to HIV infection in the TGA.
Service Health Outcomes:	<ul style="list-style-type: none"> • Improve retention on care (at least 1 medical visit in each 6-month period) • Improve viral load suppression rate

	SA1 Riv West	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 19/20 TOTAL
Proposed Number of Clients	0	0	0	25	90	35	150
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	300	1080	420	1800
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	1375	5200	2000	8575

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Planned Service Delivery and Implementation Activities		Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Food Vouchers <p>Food assistance needs will be identified by staff during assessment/reassessment, which will be included in the Individual Care Plan (ICP). Eligibility will be determined according to current TGA financial eligibility guidelines. Eligible Clients will make appointment for picking up vouchers – whenever possible. Food vouchers will be distributed on a monthly or as needed to clients not to exceed a maximum of six (6) vouchers per month.</p>		4,5,6	4/1/2020-3/31/2021	<p>Client file will evidence eligibility screening for Ryan White funds as well other party payers. Client file will document HIV status, proof of medical insurance, residence, and income according to standards. Client file will contain Consent for Services; ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form. Client file will evidence need for food assistance. Client file will</p>
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ATTACHMENT A1

<ul style="list-style-type: none">Services are provided based on established C&L Competency Standards	4,5,6	4/1/2020-3/31/2021	Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA. Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.
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SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	Foothill AIDS Project
Contractor:	
Grant & Period:	Part B Contract April 1, 2020 – March 31, 2021
Service Category:	Medical Transportation Services
Service Goal:	To enhance clients' access to health care or support services using multiple forms of transportation throughout the TGA.
Service Health Outcomes:	<ul style="list-style-type: none"> • 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	FY19/20 TOTAL
Proposed Number of Clients	0	0	0	25	55	25	105
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	300	660	300	1260
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	1165	2565	1165	4895

ATTACHMENT A1

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Bus passes CM/SW will determine client eligibility: HIV diagnosis, residency, income, purpose of trips. CM will document services ordered in client file. Staff will provide bus pass to client and will enter service provided on Transportation Log Medical Transportation services will be provided to access services according to TGA guidelines 	4,5,6	4/1/2020-3/31/2021	Client file will document eligibility screening every six months and statement of need for transportation assistance. Transportation Log will evidence client signature acknowledging receipt of bus pass. Bus Pass assistance will be documented in ARIES.
<ul style="list-style-type: none"> Taxi service CM/SW will determine client eligibility: HIV diagnosis, residency, income, purpose and date of trip. CM will document services ordered in client file. Staff will order taxi service; notify client of time and need to be ready on time. Staff will enter service provided on Taxi Services Binder Services will be provided to access services according to TGA guidelines Staff will document trip point of origin, destination and reason for trip 	4,5,6	4/1/2020-3/31/2021	Client file will document eligibility screening and statement of need for urgent trip. Taxi Services Binder will include taxi request depicting point of origin and destination and statement of need for urgent trip. Services will be provided within the TGA. Taxi assistance will be documented in ARIES.

ATTACHMENT A1

<ul style="list-style-type: none">Gas cards CM/SW will determine client eligibility: HIV diagnosis, residency, income, purpose and date of trip. CM will document service provided in client file. Staff will log voucher disbursement in Gas Card Log Gas cards will be provided to access services according to TGA guidelines	4,5,6	4/1/2020-3/31/2021	Client file will document eligibility screening every six months and statement of need for transportation assistance. Transportation log will evidence client signature acknowledging receipt of gas vouchers. Gas Voucher assistance will be documented in ARIES.
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SCOPE OF WORK – PART B

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part B Contract April 1, 2020 – March 31, 2021
Service Category:	Outreach Services
Service Goal:	Re/Link HIV+ individuals- to include those unaware of their HIV status as well as those aware but not in care- to care and support services to improve health and decrease viral load.
Service Health Outcomes:	<ul style="list-style-type: none"> • Link newly diagnosed HIV+ medical care in 30 days or less • Improve retention in care (at least 1 medical visit in each 6 month period) • Improve viral suppression rate

	SA1 Riv	West	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 19/20 TOTAL
Proposed Number of Clients	0	0	0	5	45	5		55
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	35	315	35		385

Proposed Number of Units = Transactions or 15 min encounters	0	0	0	305	2745	305		3355
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ATTACHMENT A1

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Screening and Intake for Outreach services according to definition of disengagement in medical care 	4,5,6	4/1/2020- 3/31/2021	HE will implement follow-up/no contact protocol includes mail, community, home visit, and phone contact. Client file will evidence attempts to contact, education and support provided to address barriers
<ul style="list-style-type: none"> Outreach Case Manager (OCM) will assess barriers to engagement in care as well as service needs to support re-engagement and maintenance in HIV medical care. OCM will develop plan for re-engagement and maintenance in HIV medical care. 	4,5,6	4/1/2020- 3/31/2021	<p>to care. Attempts and contact with client will be documented in ARIES.</p> <p>Client file will evidence screening and intake activities to include screening for eligibility as well as insurance/third party payer. Client file will document HIV status, proof of insurance, residence, and income according to standards. Client file will contain Consent for Services, ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form.</p> <p>Client file will evidence assessment of needs and barriers to re-engagement in medical care.</p> <p>Client file will evidence individualized plan for re-engagement and maintenance in HIV medical care including identification of barriers to care and interventions to problem-solve such barriers.</p>

ATTACHMENT A1

<ul style="list-style-type: none"> OCM will provide individual session to implement re-engagement and maintenance plan. OCM will provide referrals to link clients to identified needs 	4,5,6	4/1/2020-3/31/2021	<p>Client file will evidence in progress note entered in ARIES individual session.</p> <p>Client file will evidence referrals to medical care and support services in progress notes. Referrals to medical</p>
			<p>and support services along with their outcome will be documented in ARIES.</p>
<ul style="list-style-type: none"> Services will be provided according to C&L standards 	4,5,6	4/1/2020-3/31/2021	<p>Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2019 – March 31, 2020

AGENCY NAME: Foothill AIDS Project

SERVICE: Outreach Services

	A	B	C
Budget Category	Non-RW Cost (Other Payers) ²	RW Cost	Total Cost ¹
Personnel			
Outreach Worker: (J. Fernandez) (\$41,200 x 12 mos x 100% allocation) Bilingual. Conduct outreach services at locations where individuals living with HIV and/or at risk for HIV infection are likely to be encountered; direct individuals to medical care services; provide education, information and referrals for testing and counseling services; follow-up with clients to ensure properly linked; bridge clients who have fallen out of care; coordinate with local and state HIV prevention programs to avoid duplication of services; establish linkage agreements with community collaborators; collect and track data to evaluate effectiveness of service deliveries.	\$0.00	\$41,200	\$41,200
Eligibility Worker: (P. Lorenz) (\$50,000 x 12 mos x 10% allocation) Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures, including eligibility factors; conduct home visits when required for the purpose of obtaining and verifying information, advising clients of deadlines, timeframes and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, regularly review and update case files to ensure appropriate documentation is in place. Salary is split between other Part B Service Categories	\$0.00	\$5,000	\$5,000
Director of Programs: (M. Francois) (\$80,862 x 12 mos x 10% allocation) Master of Public Health; tri-lingual. Provide support to increase access to and maintenance of primary medical and supportive services. General responsibilities are to coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Part B Service Categories and/or non-RW Part B Funds not related to this service category.	\$0.00	\$8,086	\$8,086
SUB-TOTAL PERSONNEL	\$0.00	\$54,286	\$54,286
Fringe Benefits @ 20% of Personnel Costs	\$0.00	\$10,857	\$10,857
Total Personnel With Benefits	\$0.00	\$65,143	\$65,143

Personnel Without Benefits			
Outreach Partners Assist in educating the community and providers of the availability of an HIV system of care and support for those diagnosed with HIV as well as the availability of HIV testing and counseling at FAP and in the community. They inform of the HIV services offered at FAP and share their experience with navigating medical and supportive services during outreach. They meet once monthly with the Outreach Case Manager to discuss the following month schedule and assignments. At the monthly meeting, they practice sharing their navigation experiences in a safe environment. The Outreach Partners' feedback on reaching populations and areas at risk guides our outreach schedule and the tailoring of our presentations. Two Outreach Partners will receive a stipend of \$300 per month x 7 months	\$0.00	\$2,100	\$2,100
TOTAL PERSONNEL COST	\$0.00	\$67,243	\$67,243
<i>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)</i>			
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost is \$6,618 per year.	\$0.00	\$6,618	\$6,618
Program Supplies: Cost of program supplies necessary to the program such as HIV literacy; pamphlets, brochures, etc. New program, estimated cost is \$4,400	\$211	\$4,189	\$4,400
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost \$700 per year.	\$0.00	\$700	\$700
Equipment Lease/Purchase: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$1,200 per year.	\$0.00	\$1,200	\$1,200
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At an annual rate of \$600 (approximately).	\$8.00	\$600	\$608

Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated at \$4,000 per year.	\$0.00	\$4,000	\$4,000
Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, estimated cost is \$1,200 per year.	\$0.00	\$1,200	\$1,200
TOTAL OTHER	\$219	\$18,507	\$18,726
SUBTOTAL (Total Personnel and Total Other)	\$219	\$85,750	\$85,969
Administration (limited to 10% of total service budget) Includes cost of administrative salaries i.e. Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs indirect program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$0.00	\$4,250	\$4,250
TOTAL BUDGET (Subtotal & Administration)	\$219	\$90,000	\$90,219

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 3,355
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$26.83
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2019 – March 31, 2020

AGENCY NAME: Foothill AIDS Project

SERVICE Non-Medical Case Management

BUDGET MODIFICATION

	A	B	C
Budget Category	Non-Part B/MAI Cost (Other Payers)²	Part B/MAI Cost	Total Cost¹
<i>Personnel</i>			
<u>Master's Level Social Worker:</u> (TBD) (\$56,000 per year x 1.00 FTE) Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring, evaluating and recording client progress according to measurable goals described in treatment and care plan; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services; advocate for clients or patients to resolve crises; identify environmental impediments to client progress; offer referrals to community resources such as access to financial assistance, housing, job placement, etc.	\$0.00	\$56,000	\$56,000
<u>Case Manager:</u> (L. Alcalá) (\$51,500 per year x 1.00 FTE) Bilingual. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring, evaluating and recording client progress according to measurable goals described in treatment and care plan; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services; advocate for clients or patients to resolve crises; identify environmental impediments to client progress; offer referrals to community resources such as access to financial assistance, housing, job placement, etc.	\$0.00	\$51,500	\$51,500

<p>Case Manager (L. Pinedo) (\$49,750 per year x 1.00 FTE - 90% of salary allocated to RW Part B NMCM, 10% of salary allocated to non-RW Part B sources) Bilingual – Claremont Office. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. Develop and maintain written documentation (assessments, service plans, progress notes, and other documentation related to goals, barriers and provision of services); skills in crisis intervention; knowledge of HIV risk behaviors, youth development, human sexuality, substance addiction, STDs and HIV behavior change principles and strategies; ability to advocate on behalf of the client; and cultural and linguistic competence.</p>	\$4,975	\$44,775	\$49,750
<p>Case Manager: (A. Juarez) (\$56,650 per year x 1.00 FTE) Bilingual – Hesperia Office. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services.</p>	\$0.00	\$56,650	\$56,650
<p>Client Eligibility Worker: (A. Lopez-Cota) (\$45,000 per year x 1.00 FTE) Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures, including eligibility factors; conduct home visits when required for the purpose of obtaining and verifying information, advising clients of deadlines, timeframes and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, regularly review and update case files to ensure appropriate documentation is in place. Salary is split between other Part B Service Categories.</p>	\$0.00	\$45,000	\$45,000

Director of Programs: (M. Francois) (\$80,862 per year x 0.10 FTE) Master of Public Health; tri-lingual. Provide support to increase access to and maintenance of primary medical and supportive services. General responsibilities are to coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Part B Service Categories and/or non-RW Part B Funds not related to this service category.	\$15,701	\$8,086	\$23,787
Fringe Benefits 23% of Total Personnel Costs	\$4,755.48	\$60,262.53	\$65,018.01
TOTAL PERSONNEL	\$25,431.48	\$322,273.53	\$347,705.01
<i>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc.)</i>			
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost is \$6,511.47 per year.	\$0.00	\$6,511.47	\$6,511.47
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost \$1,100 per year.	\$0.00	\$1,100	\$1,100
Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. System Maintenance and repair. Based on prior year expenditures and FTE allocation, estimated cost is \$5,200 per year.	\$3,012	\$2,188	\$5,200
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. at an annual rate of \$525.00	\$0.00	\$525	\$525
Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated at \$13,005 per year.	\$2,709	\$10,296	\$13,005

Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, estimated cost is \$2,800 per year.	\$0.00	\$2,800	\$2,800
TOTAL OTHER	\$5,721	\$23,420.47	\$29,141.47
SUBTOTAL (Total Personnel and Total Other)	\$31,152.48	\$345,694	\$376,846.48
Administration Includes cost of administrative salaries for program administration such as Executive Director, Grants Manager, and Program Support staff. Bookkeeper, accountant/audit. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$4,807	\$4,306	\$9,113
TOTAL BUDGET (Subtotal & Administration)	\$35,959.48	\$350,000	\$385,959.48

¹ Total Cost = Non-Part B/MAI Other Payers + RW Part B/MAI Cost (Column A + Column B)

- **Total Number Ryan White Part B/MAI Units to be Provided for Service Category: 17,000**
- **Total Part B/MAI Budget (Column B) Divided by Total Part B/MAI Units to be Provided: \$20.59**
(This is your agency's proposed RW Part B/MAI cost for care per unit)

²**List Other Payers Associated with funding in Column A:** Ryan White Part A, 340B Program Funds

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2019 – March 31, 2020

AGENCY NAME: Foothill AIDS Project

SERVICE Food Services

	A	B	C
Budget Category	Non-Part B/MAI Cost (Other Payers)²	Part B/MAI Cost	Total Cost¹
<i>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc.)</i>			
Food Assistance: Monthly provision of food cards to approximately 250 unduplicated clients residing in Service Areas 4, 5, & 6 to supplement their financial ability to maintain continuous access to adequate caloric intake and balance nutrition sufficient to maintain optimal health in the face of compromised health status due to HIV infection.	\$94,250	\$85,750	\$180,000
TOTAL OTHER	\$94,250	\$85,750	\$180,000
Administration Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager, Program Support Assistant, Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$9,000	\$4,250	\$13,250
TOTAL BUDGET (Subtotal & Administration)	\$103,250	\$90,000	\$193,250

¹ Total Cost = Non-Part B/MAI Other Payers + RW Part B/MAI Cost (Column A + Column B)

- **Total Number Ryan White Part B/MAI Units to be Provided for Service Category:** 8,575
- **Total Part B/MAI Budget (Column B) Divided by Total Part B/MAI Units to be Provided:** \$10.50
(This is your agency's proposed RW Part B/MAI cost for care per unit)

²**List Other Payers Associated with funding in Column A:** Ryan White Part A

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2019 – March 31, 2020

AGENCY NAME: Foothill AIDS Project

SERVICE: Medical Transportation Services

	A	B	C
Budget Category	Non-RW Cost (Other Payers)²	RW Cost	Total Cost¹
Personnel			
Transportation Assistance by Van-Connect include cost of driver, mobility coordinator, and van expenses.	\$35,000	\$0.00	\$35,000
TOTAL PERSONNEL	\$35,000	\$0.00	\$35,000
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Transportation Assistance: Monthly provision of bus passes, gas cards and taxi vouchers to approximately 105 of unduplicated clients used to provide emergency medical transportation to enhance clients' access to healthcare and/or supportive services.	\$7,083	\$55,750	\$62,833
Mileage: Cost of providing van transportation to eligible clients residing in the High Desert, specifically Lucerne Valley and Barstow, estimated at an annual rate of \$5,003 to be funding under RW Part A Transportation.	\$0.00	\$0.00	\$0.00
TOTAL OTHER	\$7,083	\$55,750	\$62,833
SUBTOTAL (Total Personnel and Total Other)	\$42,083	\$55,750	\$97,833
Administration (limited to 10% of total service budget) Includes cost of administrative salaries i.e. Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs indirect program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$4,000	\$4,250	\$8,250
TOTAL BUDGET (Subtotal & Administration)	\$46,083	\$60,000	\$106,083

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- **Total Number of Ryan White Units to be Provided for this Service Category:** 4895
- **Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided:** \$12.26
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: Ryan White Part A, California Department of Transportation.

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2020 – March 31, 2021

AGENCY NAME: Foothill AIDS Project

SERVICE Food Services

	A	B	C
Budget Category	Non-Part B/MAI Cost (Other Payers)²	Part B/MAI Cost	Total Cost¹
<i>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc.)</i>			
Food Assistance: Monthly provision of food cards to approximately 250 unduplicated clients residing in Service Areas 4, 5, & 6 to supplement their financial ability to maintain continuous access to adequate caloric intake and balance nutrition sufficient to maintain optimal health in the face of compromised health status due to HIV infection.	\$94,250	\$85,750	\$180,000
TOTAL OTHER	\$94,250	\$85,750	\$180,000
Administration Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager, Program Support Assistant, Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$9,000	\$4,250	\$13,250
TOTAL BUDGET (Subtotal & Administration)	\$103,250	\$90,000	\$193,250

¹ Total Cost = Non-Part B/MAI Other Payers + RW Part B/MAI Cost (Column A + Column B)

- **Total Number Ryan White Part B/MAI Units to be Provided for Service Category:** 8,575
- **Total Part B/MAI Budget (Column B) Divided by Total Part B/MAI Units to be Provided:** \$10.50
(This is your agency's proposed RW Part B/MAI cost for care per unit)

²List Other Payers Associated with funding in Column A: Ryan White Part A

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2020 – March 31, 2021

AGENCY NAME: Foothill AIDS Project

SERVICE Non-Medical Case Management

BUDGET MODIFICATION

	A	B	C
Budget Category	Non-Part B/MAI Cost (Other Payers)²	Part B/MAI Cost	Total Cost¹
<i>Personnel</i>			
<u>Master's Level Social Worker:</u> (TBD) (\$56,000 per year x 1.00 FTE) Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring, evaluating and recording client progress according to measurable goals described in treatment and care plan; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services; advocate for clients or patients to resolve crises; identify environmental impediments to client progress; offer referrals to community resources such as access to financial assistance, housing, job placement, etc.	\$0.00	\$56,000	\$56,000
<u>Case Manager:</u> (L. Alcalá) (\$51,500 per year x 1.00 FTE) Bilingual. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring, evaluating and recording client progress according to measurable goals described in treatment and care plan; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services; advocate for clients or patients to resolve crises; identify environmental impediments to client progress; offer referrals to community resources such as access to financial assistance, housing, job placement, etc.	\$0.00	\$51,500	\$51,500

<p>Case Manager (L. Pinedo) (\$49,750 per year x 1.00 FTE - 90% of salary allocated to RW Part B NMCM, 10% of salary allocated to non-RW Part B sources) Bilingual – Claremont Office. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. Develop and maintain written documentation (assessments, service plans, progress notes, and other documentation related to goals, barriers and provision of services); skills in crisis intervention; knowledge of HIV risk behaviors, youth development, human sexuality, substance addiction, STDs and HIV behavior change principles and strategies; ability to advocate on behalf of the client; and cultural and linguistic competence.</p>	\$4,975	\$44,775	\$49,750
<p>Case Manager: (A. Juarez) (\$56,650 per year x 1.00 FTE) Bilingual – Hesperia Office. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services.</p>	\$0.00	\$56,650	\$56,650
<p>Client Eligibility Worker: (A. Lopez-Cota) (\$45,000 per year x 1.00 FTE) Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures, including eligibility factors; conduct home visits when required for the purpose of obtaining and verifying information, advising clients of deadlines, timeframes and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, regularly review and update case files to ensure appropriate documentation is in place. Salary is split between other Part B Service Categories.</p>	\$0.00	\$45,000	\$45,000

Director of Programs: (M. Francois) (\$80,862 per year x 0.10 FTE) Master of Public Health; tri-lingual. Provide support to increase access to and maintenance of primary medical and supportive services. General responsibilities are to coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Part B Service Categories and/or non-RW Part B Funds not related to this service category.	\$15,701	\$8,086	\$23,787
Fringe Benefits 23% of Total Personnel Costs	\$4,755.48	\$60,262.53	\$65,018.01
TOTAL PERSONNEL	\$25,431.48	\$322,273.53	\$347,705.01
<i>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc.)</i>			
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost is \$6,511.47 per year.	\$0.00	\$6,511.47	\$6,511.47
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost \$1,100 per year.	\$0.00	\$1,100	\$1,100
Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. System Maintenance and repair. Based on prior year expenditures and FTE allocation, estimated cost is \$5,200 per year.	\$3,012	\$2,188	\$5,200
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. at an annual rate of \$525.00	\$0.00	\$525	\$525
Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated at \$13,005 per year.	\$2,709	\$10,296	\$13,005

Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, estimated cost is \$2,800 per year.	\$0.00	\$2,800	\$2,800
TOTAL OTHER	\$5,721	\$23,420.47	\$29,141.47
SUBTOTAL (Total Personnel and Total Other)	\$31,152.48	\$345,694	\$376,846.48
Administration Includes cost of administrative salaries for program administration such as Executive Director, Grants Manager, and Program Support staff. Bookkeeper, accountant/audit. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$4,807	\$4,306	\$9,113
TOTAL BUDGET (Subtotal & Administration)	\$35,959.48	\$350,000	\$385,959.48

¹ Total Cost = Non-Part B/MAI Other Payers + RW Part B/MAI Cost (Column A + Column B)

- **Total Number Ryan White Part B/MAI Units to be Provided for Service Category: 17,000**
- **Total Part B/MAI Budget (Column B) Divided by Total Part B/MAI Units to be Provided: \$20.59**
(This is your agency's proposed RW Part B/MAI cost for care per unit)

²List Other Payers Associated with funding in Column A: Ryan White Part A, 340B Program Funds

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2020 – March 31, 2021

AGENCY NAME: Foothill AIDS Project

SERVICE: Outreach Services

	A	B	C
Budget Category	Non-RW Cost (Other Payers)²	RW Cost	Total Cost¹
<i>Personnel</i>			
<u>Outreach Worker:</u> (J. Fernandez) (\$41,200 x 12 mos x 100% allocation) Bilingual. Conduct outreach services at locations where individuals living with HIV and/or at risk for HIV infection are likely to be encountered; direct individuals to medical care services; provide education, information and referrals for testing and counseling services; follow-up with clients to ensure properly linked; bridge clients who have fallen out of care; coordinate with local and state HIV prevention programs to avoid duplication of services; establish linkage agreements with community collaborators; collect and track data to evaluate effectiveness of service deliveries.	\$0.00	\$41,200	\$41,200
<u>Eligibility Worker:</u> (P. Lorenz) (\$50,000 x 12 mos x 10% allocation) Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures, including eligibility factors; conduct home visits when required for the purpose of obtaining and verifying information, advising clients of deadlines, timeframes and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, regularly review and update case files to ensure appropriate documentation is in place. Salary is split between other Part B Service Categories	\$0.00	\$5,000	\$5,000
<u>Director of Programs:</u> (M. Francois) (\$80,862 x 12 mos x 10% allocation) Master of Public Health; tri-lingual. Provide support to increase access to and maintenance of primary medical and supportive services. General responsibilities are to coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Part B Service Categories and/or non-RW Part B Funds not related to this service category.	\$0.00	\$8,086	\$8,086
<i>SUB-TOTAL PERSONNEL</i>	\$0.00	\$54,286	\$54,286
<i>Fringe Benefits @ 20% of Personnel Costs</i>	\$0.00	\$10,857	\$10,857
<i>Total Personnel With Benefits</i>	\$0.00	\$65,143	\$65,143

Personnel Without Benefits			
Outreach Partners Assist in educating the community and providers of the availability of an HIV system of care and support for those diagnosed with HIV as well as the availability of HIV testing and counseling at FAP and in the community. They inform of the HIV services offered at FAP and share their experience with navigating medical and supportive services during outreach. They meet once monthly with the Outreach Case Manager to discuss the following month schedule and assignments. At the monthly meeting, they practice sharing their navigation experiences in a safe environment. The Outreach Partners' feedback on reaching populations and areas at risk guides our outreach schedule and the tailoring of our presentations. Two Outreach Partners will receive a stipend of \$300 per month x 7 months	\$0.00	\$2,100	\$2,100
TOTAL PERSONNEL COST	\$0.00	\$67,243	\$67,243
<i>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)</i>			
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost is \$1,618 per year.	\$0.00	\$6,618	\$6,618
Program Supplies: Cost of program supplies necessary to the program such as HIV literacy; pamphlets, brochures, etc. New program, estimated cost is \$4,400	\$211	\$4,189	\$4,400
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost \$700 per year.	\$0.00	\$700	\$700
Equipment Lease/Purchase: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$1,200 per year.	\$0.00	\$1,200	\$1,200
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At an annual rate of \$600 (approximately).	\$8.00	\$600	\$608

Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated at \$4,000 per year.	\$0.00	\$4,000	\$4,000
Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, estimated cost is \$1,200 per year.	\$0.00	\$1,200	\$1,200
TOTAL OTHER	\$219	\$18,507	\$18,726
SUBTOTAL (Total Personnel and Total Other)	\$219	\$85,750	\$85,969
Administration (limited to 10% of total service budget) Includes cost of administrative salaries i.e. Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs indirect program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$0.00	\$4,250	\$4,250
TOTAL BUDGET (Subtotal & Administration)	\$219	\$90,000	\$90,219

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- **Total Number of Ryan White Units to be Provided for this Service Category: 3,355**
- **Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$26.83**
(This is your agency's RW cost for care per unit)

²**List Other Payers Associated with funding in Column A: 340B Program Funds**

RYAN WHITE PART B HCP / PART B MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2020 – March 31, 2021

AGENCY NAME: Foothill AIDS Project

SERVICE: Medical Transportation Services

	A	B	C
Budget Category	Non-RW Cost (Other Payers)²	RW Cost	Total Cost¹
Personnel			
Transportation Assistance by Van-Connect include cost of driver, mobility coordinator, and van expenses.	\$35,000	\$0.00	\$35,000
TOTAL PERSONNEL	\$35,000	\$0.00	\$35,000
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Transportation Assistance: Monthly provision of bus passes, gas cards and taxi vouchers to approximately 105 of unduplicated clients used to provide emergency medical transportation to enhance clients' access to healthcare and/or supportive services.	\$7,083	\$55,750	\$62,833
Mileage: Cost of providing van transportation to eligible clients residing in the High Desert, specifically Lucerne Valley and Barstow, estimated at an annual rate of \$5,003 to be funding under RW Part A Transportation.	\$0.00	\$0.00	\$0.00
TOTAL OTHER	\$7,083	\$55,750	\$62,833
SUBTOTAL (Total Personnel and Total Other)	\$42,083	\$55,750	\$97,833
Administration (limited to 10% of total service budget) Includes cost of administrative salaries i.e. Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs indirect program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$4,000	\$4,250	\$8,250
TOTAL BUDGET (Subtotal & Administration)	\$46,083	\$60,000	\$106,083

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- **Total Number of Ryan White Units to be Provided for this Service Category: 4895**
- **Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$12.26**
(This is your agency's RW cost for care per unit)

²**List Other Payers Associated with funding in Column A:** Ryan White Part A, California Department of Transportation.