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



Contract Number

20-1066 A-1

SAP Number 4400015582

Department of Public Health

Department Contract Representative Telephone Number

Lisa Ordaz, HS Contracts

(909) 388-0222

Contractor

Borrego Community Health

Foundation

Contractor Representative

Telephone Number

Contract Term

Original Contract Amount

Amendment Amount

Total Contract Amount

Cost Center

Cynthia Preciado

(619) 398-2405 ext. 4811

10/28/2020 through 02/28/2025

\$527.935

\$1,366,658

\$1,894,593

9300371000

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend Contract No. 20-1066, effective July 27, 2021, as follows:

SECTION II. CONTRACTOR PROGRAM RESPONSIBILITIES

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

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

SECTION V. FISCAL PROVISIONS

Paragraph A is amended to read as follows:

A. The maximum amount of payment under this Contract shall not exceed \$1,894,593, of which \$1,894,593 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

Standard Contract

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

Original Contract \$527,935 October 28, 2020 through February 28, 2022
Amendment No. 1 \$160,826 increase March 1, 2021 through February 28, 2022
Amendment No. 1 \$1,205,832 March 1, 2022 through February 28, 2025

It is further broken down by Program Year as follows:

Program Year	Dollar Amount
October 28, 2020 through February 28, 2021	\$286,817
March 1, 2021 through February 28, 2022	\$401,944*
March 1, 2022 through February 28, 2023	\$401,944
March 1, 2023 through February 29, 2024	\$401,944
March 1, 2024 through February 28, 2025	\$401,944
Total	\$1,894,593

^{*}This amount includes an increase of \$160,826.

Paragraph B is amended to read as follows:

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

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

SECTION VIII. TERM

Amend Section VIII to read as follows:

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

ATTACHMENTS

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

ATTACHMENT A1 - Add SCOPE OF WORK - ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2022-23

Revised 5/12/21

- ATTACHMENT A2 Add SCOPE OF WORK ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2023-24
- ATTACHMENT A3 Add SCOPE OF WORK ENDING THE HIV EPIDEMIC: A Plan for America for Program Year 2024-25
- ATTACHMENT H Remove and replace PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2021-22
- ATTACHMENT H1 Add PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2022-23
- ATTACHMENT H2 Add PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2023-24
- ATTACHMENT H3 Add PROGRAM BUDGET AND ALLOCATION PLAN for Program Year 2024-25

SAN BERNARDINO COUNTY

All other terms and conditions of Contract No. 20-1066 remains in full force and effect.

· and Agrin	Ву _►	Dr. Edgar Bulloch
Curt Hagman, Chairman, Board of Supervisors		(Authorized signature - sign in blue ink)
JUL 2 7 ZUZI		
Dated:	Name E	dgar Bulloch
SIGNED AND CERTIFIED THAT A COPY OF THIS		(Print or type name of person signing contract)
DOCUMENT HAS BEEN DELIVERED TO THE		
CHAIRMAN OF THE BOARD	Title Inte	erim Chief Executive Officer
Lynna Monell Clerk of the Board of Supervisors		(Print or Type)
By San Bernardino County	Dated:	July 15, 2021
Deputy	Address	PO Box 2369
4RDINO CO	-	Borrego Springs, CA 92004
FOR COUNTY USE ONLY		
Approved as to Legal Form Adam Elvight AFC5599C83814F	receive	Reviewed/Approved by Department
Adam Ebright, County Counsel Becky Giroux, HS Cont		Andrew Goldfrach, Interim Director
July 14, 2021 July 19 Date Date		July 16, 2021 Date
Date		Date

Borrego Community Health Foundation

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

N/A	Group Name and Description (must be HIV+ related)	Proposed Number of Units = Transactions or 15 min encounters	Proposed Number of Visits Regardless of number of transactions or number of units	Proposed Number of Clients		Service Health Outcomes: 1). 2). 3).		ory:		Contractor: B	Contract Number:	Mac.
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	Expected Avg. Attend. per	1920	960	120	SA3 East Riv	1). Provide access to HIV care to those newly diagnosed and returning to care within 30 days. 2). Improve viral suppression percentages for clients in HIV medical care. 3). Enroll HIV (+) clients in health benefit programs to continue to cover medical care and medical care.	effectively to	ices				USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY
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03/01/21- 02/28/22	03/01/21- 02/28/22	03/01/21- 02/28/22
1). Treat thirty (30) HTV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Eastside Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat fifty (50) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures to fifty (50) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty (50) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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	SA3	SA3	SA2
	03/01/21-	03/01/21- 02/28/22	03/01/21- 02/28/22
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1) Treat treats (20) VIVI in dividual and district the second of the sec	02/01/21	2	Element #10: Barstow Community Health Center

Revised July 2021

N/A	Group Name and Description (must be HIV+ related)	Proposed Number of Units = Transactions or 15 min encounters	Proposed Number of Visits = Regardless of number of transactions or number of units	Proposed Number of Clients		Service Health Outcomes:	Service Goal:	Service Category:	Grant Period:	Contractor:	Contract Number:	
	ion Service Delivery	Units incounters	Visits transactions or	Clients			To treat peop	Treat: Outpati	March 1, 2022	Borrego Com		SCOPE OF WORK—Ending the HIV Epidemic: A Plan for America Use a separate Scope of Work for each proposed service category
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Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Activities: Clinic location is a migrant service center and will be a releveral site to Eastside Health Center for outpatient ambulatory care. Transportation to be provided by Borrego Health transportation services. The provision of initial three visits of outpatient and ambulatory care that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Element #1: Eastside Health Center Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.
SA2	SAI	SERVICE AREA SAI
03/01/22- 02/28/23	03/01/22- 02/28/23	TIMELINE 03/01/22-02/28/23
1). Treat thirty (30) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Eastside Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	PROCESS OUTCOMES 1). Treat fifty (50) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures to fifty (50) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty (50) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

Element #6: Desert Hot Springs Main Campus Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Activities: Clinic location is a migrant service center and will be a referral site to San Jacinto Health Center for outpatient ambulatory care. Transportation to be provided by Borrego Health transportation services. The provision of initial three visits of outpatient and ambulatory care that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.
SA3	SA3	SA2
03/01/22- 02/28/23	03/01/22- 02/28/23	03/01/22- 02/28/23
1). Treat thirty-five (35) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty-five (35) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty-five (35) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat thirty (30) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to San Jacinto Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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03/01/22- 02/28/23	03/01/22- 02/28/23	03/01/22- 02/28/23
1). Treat fifty-five (55) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures fifty-five (55) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty-five (55) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Centro Medico Cathedral City for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV (+) individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat fifty-five (55) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures fifty-five (55) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty-five (55) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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3) Ending the Epidemic is a Payor of last resort, twenty (20)			confirmatory and additional laboratory tests, patient history, initial
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individuals meet their health care and psychosocial service			and therapeutic services by a physician, physician assistant, nurse
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1). Treat twenty (20) HIV individuals rapidly and effectively to	03/01/22-	SA6	Element #10: Barstow Community Health Center

Contract Number: Contract Profol: Borrogo Community Health Foundation Grant Period: March 1, 2023 - February 29, 2024 Service Category: Test: Outpacked Number of Citents Service Health Outcomes: 1). Provide access to HIV eare to those newly diagnosed and refurning to care within 30 days. 2). Improve vital appression percentages for cleants in HIV medical care. 2). Improve vital appression percentages for cleants in HIV medical care. 2). Improve vital appression percentages for cleants in HIV medical care. 2). Improve vital appression percentages for cleants in HIV medical care. 2). Improve vital appression percentages for cleants in HIV medical care. 2). Improve vital appression percentages for cleants in HIV medical care. 3). Enroll HIV (+) clients in health benefit programs to continue to cover medical care and medication expenses. SA1 SA2 SA3 SA4 SA5 SA6 West Riv. Mid Riv. Fast Riv. San B San B San B TOPIAL Proposed Number of Units Recordless of number of Units 120 275 Proposed Number of Units 130 440 160 2200 Proposed Number of Units 1400 240 960 480 1920 880 320 4400 Proposed Number of Units Proposed Num									
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Inder: SCOPE OF WORK – Endling the HIV Epidemic: A Plan for America USE ASEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY Borrego Community Health Foundation d: March 1, 2023 – February 29, 2024 Freat: Outpatient/Ambulatory Care Services To treat people with HIV rapidly and effectively to reach sustained viral load suppression utilizing an Interdisciplinary team including navigators, care coordinators, program directors, physicians and nurses. 1). Provide access to HIV care to those newly diagnosed and returning to care within 30 days. 2). Improve viral suppression percentages for clients in HIV medical care. 3). Enroll HIV (+) clients in health benefit programs to continue to cover medical care and medication expenses. SA1 SA2 SA3 SA4 SA5 SA6 FY 23/24 Sun B San B San B TOTAL TOTAL Tumber of Clients A00 240 960 440 160 2	4400	320	880		1920	480	800	HS.	Proposed Number of Units = Transactions or 15 min encounte
USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY Borrego Community Health Foundation March 1, 2023 – February 29, 2024 Treat: Outpatient/Ambulatory Care Services To treat people with HIV rapidly and effectively to reach sustained viral load suppression utilizing an Interdisciplinary team including navigators, care coordinators, program directors, physicians and nurses. 1). Provide access to HIV care to those newly diagnosed and returning to care within 30 days. 2). Improve viral suppression percentages for clients in HIV medical care. 3). Enroll HIV (+) clients in health benefit programs to continue to cover medical care and medication expenses. SA1 SA2 SA3 SA4 SA5 SA6 FY 23/24 TOTAL ts 50 30 120 55 20	220	160	440		960	240	400	tions or	Proposed Number of Visits = Regardless of number of transac number of units
DPE OF WORK – Ending the HIV Epidemic: A Plan for America Use a separate Scope of Work for each proposed service Category Borrego Community Health Foundation March 1, 2023 – February 29, 2024 Treat: Outpatient/Ambulatory Care Services To treat people with HIV rapidly and effectively to reach sustained viral load suppression utilizing Interdisciplinary team including navigators, care coordinators, program directors, physicians and n 1). Provide access to HIV care to those newly diagnosed and returning to care within 30 days. 2). Improve viral suppression percentages for clients in HIV medical care. 3). Enroll HIV (+) clients in health benefit programs to continue to cover medical care and medication expensions. San B San B San B San B	27	20	55		120	30	50	its	Proposed Number of Clien
	FY 23/24 TOTAL	SA6 San B	SAS San B	SA4 San B	SA3 East Riv	SA2 Mid Riv	SA1 West Riv		
	n expenses.	e and medication	to care within are.	and returning IV medical continue to cov	ewly diagnosed as for clients in Hit programs to co	re to those non percentages health benefi	ccess to HIV carral suppression (+) clients in	 Provide at Improve v Enroll HIV 	Service Health Outcomes:
mber: Borrego Community Health Foundation March 1, 2023 – February 29, 2024 Treat: Outpatient/Ambulatory Care Services	lizing an	suppression uti	ed viral load	each sustain	effectively to relators, care con-	rapidly and	ple with HIV nary team incl	To treat peo Interdiscipli	Service Goal:
SCOPE OF WORK—Ending the HIV Epidemic: A Plai USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE: Borrego Community Health Foundation March 1, 2023—February 29, 2024					ces	TV Care Servi	ient/Ambulato	Treat: Outpat	Service Category:
SCOPE OF WORK—Ending the HIV Epidemic: A Plainmber: USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE Borrego Community Health Foundation						9. 2024	3 - February 2	March 1, 202	Grant Period:
SCOPE OF WORK—Ending the HIV Epidemic: A Plai USE A SEPARATE SCOPE OF WORK FOR FACH PROPOSED SERVICE Continue						Foundation	ımunity Health	Воггедо Сол	Contractor:
SCOPE OF WORK—Ending the HIV Epidemic: A Plai USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVE	THE PLANT	The state of the s	The second second	MARINE STATES					Contract Number:
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Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Activities: Clinic location is a migrant service center and will be a referral site to Eastside Health Center for outpatient ambulatory care. Transportation to be provided by Borrego Health transportation services. The provision of initial three visits of outpatient and ambulatory care that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Element #1: Eastside Health Center Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.
SA2	SAI	SERVICE AREA SA1
03/01/23- 02/29/24	03/01/23- 02/29/24	TIMELINE 03/01/23-02/29/24
1). Treat thirty (30) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Eastside Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV individuals meet their health care and psychosocial service needs throughout their illness in a tirnely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat fifty (50) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures to fifty (50) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty (50) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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SA3	SA3	SA2
03/01/23- 02/29/24	03/01/23- 02/29/24	03/01/23-02/29/24
1). Treat thirty-five (35) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty-five (35) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty-five (35) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat thirty (30) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to San Jacinto Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Clinic location is a migrant service center and will be a referral site to Centro Medico Cathedral City for outpatient ambulatory care. Transportation to be provided by Borrego Health transportation services. The provision of initial three visits of outpatient and ambulatory care that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Element #7: Stonewall Medical Center Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.
SAS	SA3	SA3
03/01/23- 02/29/24	03/01/23- 02/29/24	03/01/23- 02/29/24
1). Treat fifty-five (55) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures fifty-five (55) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty-five (55) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Centro Medico Cathedral City for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV (+) individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat fifty-five (55) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures fifty-five (55) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty-five (55) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

care and medication expenses.			assistance programs.
sources/health benefit programs to continue to cover medical			management and client enrollment in health coverage and drug
HIV (+) clients to be established into other payor			prescription of therapeutic medication, education, continued care
3) Ending the Epidemic is a Payor of last resort, twenty (20)			confirmatory and additional laboratory tests, patient history, initial
to reach viral suppression.			assessment, preventative care and screening, medical examination,
needs throughout their illness in a timely, uninterrupted manner			practitioner in outpatient setting. To include early intervention and risk
individuals meet their health care and psychosocial service			and therapeutic services by a physician, physician assistant, nurse
2). Provide a continuum of care that assures twenty (20) HIV			three visits of outpatient and ambulatory care, that includes diagnostic
reach sustained viral suppression with antiretroviral medication.	02/28924		Activities: Using the CDC Steps to Care Model, the provision of initial
1). Treat twenty (20) HIV individuals rapidly and effectively to	03/01/23-	SA6	Element #10: Barstow Community Health Center

N/A	Group Name and Description Service Targeted Open/ E (must be HIV+ related) Delivery Population Closed	Proposed Number of Units = Transactions or 15 min encounters 800 480	Proposed Number of Visits = Regardless of number of transactions or 400 240 number of units	Proposed Number of Clients 50 30	SA1 SA2 West Riv Mid Riv	Service Health Outcomes: 1). Provide access to HIV care to those newly diagnosed and returning to care within 30 days. 2). Improve viral suppression percentages for clients in HIV medical care. 3). Enroll HIV (+) clients in health benefit programs to continue to cover medical care and medication expenses.	Service Goal: To treat people with HIV rapidly and effectively to reach sustained viral load suppression utilizing an Interdisciplinary team including navigators, care coordinators, program directors, physicians and nurses	Service Category: Treat: Outpatient/Ambulatory Care Services	Grant Period: March 1, 2024 - February 28, 2025	Contractor: Borrego Community Health Foundation	Contract Number:	SCOPE OF WORK — Ending the HIV Epidemic: A Plan for Ame Use a separate Scope of Work for each proposed service category
	Expected Avg. Attend. per	1920	960	120	SA3 East Riv	wly diagnosed and for clients in HIV t programs to cont	effectively to read ators, care coordi	es				FOR EACH PROP
	Session Length				SA4 San B	I returning to medical care inue to cover	h sustained nators, prog					:: A Plan
	Sessions per	880	440	55	SA5 San B	to care within 30 days. re. er medical care and me	ram directo					n for America
	Group Duration	320	160	20	SA6 San B	30 days. s and medication	uppression utilirs, physicians a					erica
	Outcome Measures	4400	2200	275	FY 24/25 TOTAL	expenses.	izing an nd nurses.					

Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Activities: Clinic location is a migrant service center and will be a releval site to Eastside Health Center for outpatient ambulatory care. Transportation to be provided by Borrego Health transportation services. The provision of initial three visits of outpatient and ambulatory care that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Element #1: Eastside Health Center Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.
on of initial diagnostic and e practitioner assessment, rmatory and n of ent and client	y y	ial c and c and oner nt, nd lient
SA2	SA1	SERVICE AREA SA1
03/01/24- 02/28/25	03/01/24- 02/28/25	TIMELINE 03/01/24-02/28/25
1). Treat thirty (30) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Eastside Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat fifty (50) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures to fifty (50) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty (50) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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SA3	SA3	SA2
03/01/24- 02/28/25	03/01/24- 02/28/25	03/01/24- 02/28/25
1). Treat thirty-five (35) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty-five (35) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty-five (35) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat thirty (30) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures thirty (30) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, thirty (30) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HTV (+) individuals to be referred to San Jacinto Health Center (A), for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HTV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HTV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

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Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Activities: Clinic location is a migrant service center and will be a relegral site to Centro Medico Cathedral City for outpatient ambulatory care. Transportation to be provided by Borrego Health transportation services. The provision of initial three visits of outpatient and ambulatory care that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.	Element #7: Stonewall Medical Center Activities: Using the CDC Steps to Care Model, the provision of initial three visits of outpatient and ambulatory care, that includes diagnostic and therapeutic services by a physician, physician assistant, nurse practitioner in outpatient setting. To include early intervention and risk assessment, preventative care and screening, medical examination, confirmatory and additional laboratory tests, patient history, initial prescription of therapeutic medication, education, continued care management and client enrollment in health coverage and drug assistance programs.
SAS	SA3	SA3
03/01/24- 02/28/25	03/01/24-02/28/25	03/01/24- 02/28/25
1). Treat fifty-five (55) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures fifty-five (55) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty-five (55) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). HIV (+) individuals to be referred to Centro Medico Cathedral City for rapid access to care and to effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures HIV (+) individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.	1). Treat fifty-five (55) HIV individuals rapidly and effectively to reach sustained viral suppression with antiretroviral medication. 2). Provide a continuum of care that assures fifty-five (55) HIV individuals meet their health care and psychosocial service needs throughout their illness in a timely, uninterrupted manner to reach viral suppression. 3) Ending the Epidemic is a Payor of last resort, fifty-five (55) HIV (+) clients to be established into other payor sources/health benefit programs to continue to cover medical care and medication expenses.

ENDING THE HIV EPIDEMIC: A PLAN FOR AMERICA BUDGET AND ALLOCATION PLAN Fiscal Year March 1, 2021 - February 28, 2022

AGENCY NAME: Borrego Community Health Foundation SERVICE: Outpatient/Ambulatory

	A	В	С
Budget Category	Non- EHE: A Plan for America Cost (Other Payers) ²	Ending the HIV Epidemic: A Plan for America Cost	Total Cost ¹
Personnel		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
MD, Barbour, C Provider on project ~ Annual Salary \$360,000 (adjusted due to CAP) @ \$199,300 x 0.12% FTE = \$23,916. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$ 175,384	\$23,916	\$199,300
Pearce, D. D.O. – Provider on project ~ Annual Salary \$225,000 (adjusted due to CAP) @ \$199,300 x 0.15% FTE = \$29,895. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$169,405	\$29,895	\$199,300
PA, Fontanilla, R. – Provider on project ~ Annual Salary \$190,000 x 0.12 FTE = \$22,800. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness	\$167,200	\$22,800	\$190,000

PA, Nosovitsky, G. – Provider on project ~ Annual Salary \$185,000 x 0.20 FTE = \$37,000. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$148,000	\$37,000	\$185,000
DNP, Schine, P. Provider on project ~ Annual Salary \$160,000 x 0.12 FTE = \$19,200. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use	\$140,800	\$19,200	\$160 <u>,</u> 000
P.A. Hinton, B Provider on project ~ Annual Salary \$155,000 x 0.30 FTE = \$46,500. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$108,500	\$46,500	\$155,000
Case Managers (TBD) - CM with annual salaries of \$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the clinic team providing a range of client-centered services that links clients with health care, psychosocial and other services. To insure timely, coordinated access to medically appropriate levels of health and support services, continuity of care, ongoing assessment of the client's and other family members' needs and personal support systems, and ongoing case management to prevent unnecessary hospitalization and attain medication.	\$51,000	\$34,000	\$85,000

Case Managers (TBD) CM with annual salaries of	\$51,000	\$34,000	\$85,000
\$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the	Ψο1,000	Ψ04,000	φου,οσο
clinic team providing a range of client-centered services			
that links clients with health care, psychosocial and			
other services. To Insure timely, coordinated access to			
medically appropriate levels of health and support			
services, continuity of care, ongoing assessment of the		-	
client's and other family members' needs and personal			
support systems, and ongoing case management to			
prevent unnecessary hospitalization and attain			
medication.			
Patient Navigator (TBD) – Patient Navigator with annual	\$22,308	\$18,252	\$40,560
salaries of \$40,560 @ 0.45 FTE = \$18,252. PN's are a			
part of the operations team, conducts community			
education regarding opportunities to obtain health care			
services through affordable public programs, and CHC			
services. Conduct public program enrollment and ADAP			
application assistance. Conducts timely and thorough			
follow-up and assists the patient to overcome barriers			
within the defined guidelines.	000 000	040.000	4.0.00
Patient Navigator (TBD) – Patient Navigator with	\$22,308	\$18,252	\$40,560
annual salaries of \$40,560 @ 0.45 FTE = \$18,252. PN's are a part of the operations team, conducts			
community education regarding opportunities to obtain			
health care services through affordable public			
programs, and CHC services. Conduct public program			
enrollment and ADAP application assistance. Conducts			
timely and thorough follow-up and assists the patient to			
overcome barriers within the defined guidelines.			
Total	\$1,055,905	\$283,815	\$1,339720
Fringe Benefits	\$215,180	\$57,838	\$273,018
20.3787678% of Total Personnel Costs			
TOTAL PERSONNEL	\$1,271,085	\$341,653	\$1,612,738
Other			
CQM Liaison (TBD) ~ (0.24155048 FTE). Position to	\$0	\$20,097	\$20,097
coordinate and participate in EtHE CQM activities. Will			
participate in TGA and regional CQM meetings,			
implement, and report efforts. CQM Activities will include performance measurement, and quality			
improvement activities to support project effectiveness			
and improvement projects. (5%) of the total budget.			
TOTAL OTHER	\$0	\$20,097	\$20,097
SUBTOTAL (Total Personnel and Total Other)	\$1,271,085	\$361,750	\$1,632,835
Administration (10%) of total budget amount.			,,
Taminoration (1070) of total badget amount.	\$43,006	\$40,194	\$83,200

¹ Total Cost = Ending the HIV Epidemic: A Plan for America (Other Payers) + Ending the HIV Epidemic: A Plan for America (A+B)

(This is your agency's Ending the HIV Epidemic: A Plan for America cost for care per unit)

[•] Total Number of Ending the HIV Epidemic: A Plan for America to be provided for this Service Category: 4.400

Total Ending the HIV Epidemic: A Plan for America (Column B) Divided by Total Ending the HIV Epidemic: A Plan for America Units to be provided: \$91.35

² List Other Payers Associated with funding in Column A: Medi-Cal, HRSA 330 Grant, Commercial insurance, Medicare.

ENDING THE HIV EPIDEMIC: A PLAN FOR AMERICA BUDGET AND ALLOCATION PLAN Fiscal Year March 1, 2022 – February 28, 2023

AGENCY NAME: Borrego Community Health Foundation SERVICE: Outpatient/Ambulatory

	A	В	C
Budget Category	Non- EHE: A Plan for America Cost (Other Payers) ²	Ending the HIV Epidemic: A Plan for America Cost	Total Cost ¹
Personnel			
MD, Barbour, C Provider on project ~ Annual Salary \$360,000 (adjusted due to CAP) @ \$199,300 x 0.12% FTE = \$23,916. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$175,384	\$23,916	\$199,300
Pearce, D. D.O. – Provider on project ~ Annual Salary \$225,000 (adjusted due to CAP) @ \$199,300 x 0.15% FTE = \$29,895. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems illness prevention, illness management and medication use.	\$169,405	\$29,895	\$199,300
PA, Fontanilla, R. – Provider on project ~ Annual Salary \$190,000 x 0.12 FTE = \$22,800. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness	\$167,200	\$22,800	\$190,000

PA, Nosovitsky, G. – Provider on project ~ Annual Salary \$185,000 x 0.20 FTE = \$37,000. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.		\$37,000	\$185,000
DNP, Schine, P. Provider on project ~ Annual Salary \$160,000 x 0.12 FTE = \$19,200. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$140,800	\$19,200	\$160,000
P.A. Hinton, B Provider on project ~ Annual Salary \$155,000 x 0.30 FTE = \$46,500. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$108,500	\$46,500	\$155,000
Case Managers (TBD) - CM with annual salaries of \$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the clinic team providing a range of client-centered services that links clients with health care, psychosocial and other services. To insure timely, coordinated access to medically appropriate levels of health and support services, continuity of care, ongoing assessment of the client's and other family members' needs and personal support systems, and ongoing case management to prevent unnecessary hospitalization and attain medication.		\$34,000	\$85,000

Case Managers (TBD) CM with annual salaries of	\$51,000	\$34,000	\$85,000
\$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the	401,000	Ψο 1,000	ψου,σου
clinic team providing a range of client-centered services			
that links clients with health care, psychosocial and			
other services. To insure timely, coordinated access to			
medically appropriate levels of health and support			
services, continuity of care, ongoing assessment of the			
client's and other family members' needs and personal	i		
support systems, and ongoing case management to			
prevent unnecessary hospitalization and attain			
medication.			
Patient Navigator (TBD) – Patient Navigator with annua	\$22,308	\$18,252	\$40,560
salaries of \$40,560 @ 0.45 FTE = \$18,252. PN's are a			
part of the operations team, conducts community			
education regarding opportunities to obtain health care			
services through affordable public programs, and CHC			
services. Conduct public program enrollment and ADAP			
application assistance. Conducts timely and thorough			
follow-up and assists the patient to overcome barriers			
within the defined quidelines. Patient Navigator (TBD) – Patient Navigator with	£22.200	\$18,252	£40 E00
annual salaries of \$40,560 @ 0.45 FTE = \$18,252.	\$22,308	\$ 10,23Z	\$40,560
PN's are a part of the operations team, conducts			
community education regarding opportunities to obtain			
health care services through affordable public			
programs, and CHC services. Conduct public program			
enrollment and ADAP application assistance. Conducts			
timely and thorough follow-up and assists the patient to			
overcome barriers within the defined guidelines.			
Total	\$1,055,905	\$283,815	\$1,339720
Fringe Benefits	\$215,180	\$57,838	\$273,018
20.3787678% of Total Personnel Costs			
TOTAL PERSONNEL	\$1,271,085	\$341,653	\$1,612,738
Other			
CQM Liaison (TBD) ~ (0.24155048 FTE). Position to	\$0	\$20,097	\$20,097
coordinate and participate in EtHE CQM activities. Will			
participate in TGA and regional CQM meetings,			
implement, and report efforts. CQM Activities will include performance measurement, and quality			
improvement activities to support project effectiveness			
and improvement projects. (5%) of the total budget.			
TOTAL OTHER	\$0	\$20,097	\$20,097
SUBTOTAL (Total Personnel and Total Other)	\$1,271,085	\$361,750	\$1,632,835
Administration (400/) aftered burdent annount			
Administration (10%) of total budget amount.	\$43,006	\$40,194	\$83,200

¹ Total Cost = Ending the HIV Epidemic: A Plan for America (Other Payers) + Ending the HIV Epidemic: A Plan for America (A+B)

(This is your agency's Ending the HIV Epidemic: A Plan for America cost for care per unit)

[•] Total Number of Ending the HIV Epidemic: A Plan for America to be provided for this Service Category: 4.400

Total Ending the HIV Epidemic: A Plan for America (Column B) Divided by Total Ending the HIV Epidemic: A Plan for America Units to be provided: \$91.35

² List Other Payers Associated with funding in Column A: Medi-Cal, HRSA 330 Grant, Commercial insurance, Medicare.

ENDING THE HIV EPIDEMIC: A PLAN FOR AMERICA BUDGET AND ALLOCATION PLAN Fiscal Year March 1, 2023 – February 28, 2024

AGENCY NAME: Borrego Community Health Foundation SERVICE: Outpatient/Ambulatory

	A	В	С
Budget Category	Non- EHE: A Plan for America Cost (Other Payers) ²	Ending the HIV Epidemic: A Plan for America Cost	Total Cost ¹
Personnel			3-5-8-1-10
MD, Barbour, C Provider on project ~ Annual Salary \$360,000 (adjusted due to CAP) @ \$199,300 x 0.12% FTE = \$23,916. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$175,384	\$23,916	\$199,300
Pearce, D. D.O. – Provider on project ~ Annual Salary \$225,000 (adjusted due to CAP) @ \$199,300 x 0.15% FTE = \$29,895. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$169,405	\$29,895	\$199,300
PA, Fontanilla, R. – Provider on project ~ Annual Salary \$190,000 x 0.12 FTE = \$22,800. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness	\$167,200	\$22,800	\$190,000

PA, Nosovitsky, G. – Provider on project ~ Annual Salary \$185,000 x 0.20 FTE = \$37,000. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$148,000	\$37,000	\$185,000
DNP, Schine, P. Provider on project ~ Annual Salary \$160,000 x 0.12 FTE = \$19,200. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$140,800	\$19,200	\$160,000
P.A. Hinton, B Provider on project ~ Annual Salary \$155,000 x 0.30 FTE = \$46,500. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$108,500	\$46,500	\$155,000
Case Managers (TBD) - CM with annual salaries of \$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the clinic team providing a range of client-centered services that links clients with health care, psychosocial and other services. To insure timely, coordinated access to medically appropriate levels of health and support services, continuity of care, ongoing assessment of the client's and other family members' needs and personal support systems, and ongoing case management to prevent unnecessary hospitalization and attain medication.	\$51,000	\$34,000	\$85,000

Case Managers (TBD) CM with annual salaries of \$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the clinic team providing a range of client-centered services that links clients with health care, psychosocial and other services. To insure timely, coordinated access to medically appropriate levels of health and support services, continuity of care, ongoing assessment of the client's and other family members' needs and personal support systems, and ongoing case management to prevent unnecessary hospitalization and attain medication.	\$51,000	\$34,000	\$85,000
Patient Navigator (TBD) – Patient Navigator with annual salaries of \$40,560 @ 0.45 FTE = \$18,252. PN's are a part of the operations team, conducts community education regarding opportunities to obtain health care services through affordable public programs, and CHC services. Conduct public program enrollment and ADAP application assistance. Conducts timely and thorough follow-up and assists the patient to overcome barriers within the defined guidelines.	\$22,308	\$18,252	\$40,560
Patient Navigator (TBD) – Patient Navigator with annual salaries of \$40,560 @ 0.45 FTE = \$18,252. PN's are a part of the operations team, conducts community education regarding opportunities to obtain health care services through affordable public programs, and CHC services. Conduct public program enrollment and ADAP application assistance. Conducts timely and thorough follow-up and assists the patient to overcome barriers within the defined guidelines.	\$22,308	\$18,252	\$40,560
Total	\$1,055,905	\$283,815	\$1,339720
Fringe Benefits 20.3787678% of Total Personnel Costs	\$215,180	\$57,838	\$273,018
TOTAL PERSONNEL	\$1,271,085	\$341,653	\$1,612,738
Other			
CQM Liaison (TBD) ~ (0.24155048 FTE). Position to coordinate and participate in EtHE CQM activities. Will participate in TGA and regional CQM meetings, implement, and report efforts. CQM Activities will include performance measurement, and quality improvement activities to support project effectiveness and improvement projects. (5%) of the total budget.	\$0	\$20,097	\$20,097
TOTAL OTHER	\$0	\$20,097	\$20,097
SUBTOTAL (Total Personnel and Total Other)	\$1,271,085	\$361,750	\$1,632,835
Administration (10%) of total budget amount.	\$43,006	\$40,194	\$83,200
TOTAL BUDGET (Subtotal & Administration)	\$1,314,091	\$401,944	\$1,716,035

¹ Total Cost = Ending the HIV Epidemic: A Plan for America (Other Payers) + Ending the HIV Epidemic: A Plan for America (A+B)

• Total Number of Ending the HIV Epidemic: A Plan for America to be provided for this Service Category: 4.400

(This is your agency's Ending the HIV Epidemic: A Plan for America cost for care per unit)

Total Ending the HIV Epidemic: A Plan for America (Column B) Divided by Total Ending the HIV Epidemic: A Plan for America Units to be provided: \$91.35

² List Other Payers Associated with funding in Column A: Medi-Cal, HRSA 330 Grant, Commercial Insurance, Medicare.

ENDING THE HIV EPIDEMIC: A PLAN FOR AMERICA BUDGET AND ALLOCATION PLAN Fiscal Year March 1, 2024 — February 28, 2025

AGENCY NAME: Borrego Community Health Foundation SERVICE: Outpatient/Ambulatory

	Α	В	С
Budget Category	Non- EHE: A Plan for America Cost (Other Payers) ²	Ending the HIV Epidemic: A Plan for America Cost	Total Cost ¹
Personnel			
MD, Barbour, C Provider on project ~ Annual Salary \$360,000 (adjusted due to CAP) @ \$199,300 x 0.12% FTE = \$23,916. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$175,384	\$23,916	\$199,300
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PA, Fontanilla, R. – Provider on project ~ Annual Salary \$190,000 x 0.12 FTE = \$22,800. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness	\$167,200	\$22,800	\$190,000

PA, Nosovitsky, G. – Provider on project ~ Annual Salary \$185,000 x 0.20 FTE = \$37,000. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$148,000	\$37,000	\$185,000
DNP, Schine, P. Provider on project ~ Annual Salary \$160,000 x 0.12 FTE = \$19,200. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$140,800	\$19,200	\$160,000
P.A. Hinton, B Provider on project ~ Annual Salary \$155,000 x 0.30 FTE = \$46,500. To provide clinical care, diagnose and treat acute health problems, treat and manage chronic diseases; Order, perform and interpret diagnostic studies, developing appropriate plans of care and monitoring effectiveness; Prescribe medications and other treatments as necessary. Conduct comprehensive medical and social histories and provide health maintenance including comprehensive physical examinations; Promote positive health behaviors by providing instruction and counseling on health maintenance, health promotion, social problems, illness prevention, illness management and medication use.	\$108,500	\$46,500	\$155,000
Case Managers (TBD) - CM with annual salaries of \$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the clinic team providing a range of client-centered services that links clients with health care, psychosocial and other services. To insure timely, coordinated access to medically appropriate levels of health and support services, continuity of care, ongoing assessment of the client's and other family members' needs and personal support systems, and ongoing case management to prevent unnecessary hospitalization and attain medication.	\$51,000	\$34,000	\$85,000

Case Managers (TBD) CM with annual salaries of	¢51,000	£04.000	#05.000
\$85,000 ~ @ 0.40 FTE = \$34,000. CM's are part of the	\$51,000	\$34,000	\$85,000
clinic team providing a range of client-centered services			
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other services. To insure timely, coordinated access to			
medically appropriate levels of health and support			
services, continuity of care, ongoing assessment of the			
client's and other family members' needs and personal			
support systems, and ongoing case management to			
prevent unnecessary hospitalization and attain			
medication.			
Patient Navigator (TBD) - Patient Navigator with annua	\$22,308	\$18,252	\$40,560
salaries of \$40,560 @ 0.45 FTE = \$18,252. PN's are a	,	413,242	\$ 10,000
part of the operations team, conducts community			
education regarding opportunities to obtain health care			
services through affordable public programs, and CHC			
services. Conduct public program enrollment and ADAP			
application assistance. Conducts timely and thorough			
follow-up and assists the patient to overcome barriers			
within the defined guidelines.			
Patient Navigator (TBD) – Patient Navigator with	\$22,308	\$18,252	\$40,560
annual salaries of \$40,560 @ 0.45 FTE = \$18,252.			
PN's are a part of the operations team, conducts			
community education regarding opportunities to obtain			
health care services through affordable public			
programs, and CHC services. Conduct public program			
enrollment and ADAP application assistance. Conducts			
timely and thorough follow-up and assists the patient to			
overcome barriers within the defined guidelines. Total	\$1,055,905	\$283,815	¢4 220720
Fringe Benefits	\$215,180	\$57,838	\$1,339720 \$273,018
20.3787678% of Total Personnel Costs	4210,100	Ψ07,000	\$273,VIQ
TOTAL PERSONNEL	\$1,271,085	\$341,653	\$1,612,738
Other			
CQM Liaison (TBD) ~ (0.24155048 FTE). Position to	\$0	\$20,097	\$20,097
coordinate and participate in EtHE CQM activities. Will		723,001	420,007
participate in TGA and regional CQM meetings,			
implement, and report efforts. CQM Activities will			
include performance measurement, and quality			
improvement activities to support project effectiveness			
and improvement projects. (5%) of the total budget. TOTAL OTHER	60	700 003	200.00
SUBTOTAL (Total Personnel and Total Other)	\$0 \$1,271,085	\$20.097	\$20,097
Administration (10%) of total budget amount.	\$43,006	\$361,750 \$40,194	\$1,632,835
TOTAL BUDGET (Subtotal & Administration)			\$83,200
1 Total Cost = Ending the LIIV Endowing A Disp for Associate (Other Business)	\$1,314,091	\$401,944	\$1,716,035

¹ Total Cost = Ending the HIV Epidemic: A Plan for America (Other Payers) + Ending the HIV Epidemic: A Plan for America (A+B)

Total Number of Ending the HIV Epidemic: A Plan for America to be provided for this Service Category: 4,400

(This is your agency's Ending the HIV Epidemic: A Plan for America cost for care per unit)

Total Ending the HIV Epidemic: A Plan for America (Column B) Divided by Total Ending the HIV Epidemic: A Plan for America Units to be provided: \$91.35

² List Other Payers Associated with funding in Column A: Medi-Cal, HRSA 330 Grant, Commercial insurance, Medicare.