

Executive Committee



Randall Furrow, Planning Council Chair

Thursday, March 7, 2013

5:00 pm to 6:30 pm

Public Health

4041 North Central Avenue, Phoenix

14th Floor, Training Room

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Meeting Minutes

Attendance

Committee Members *AT: Attended AB: Absent EX: Excused ALT: Alternate Present*

AT David Aguirre AT Keith Thompson EX Mary Rose Wilcox

AT Randall Furrow EX Robert Solls

Administrative Agent Staff

Rose Conner Georgina Lowe

Guests

Jennifer Bullock

Support Staff: Georgina Lowe from the AA's Office

Welcome, introductions and declarations of any conflicts-of-interest

Randall Furrow called the meeting to order and welcomed the attendees. Everyone introduced him/her self and declared any conflicts-of-interest.

Funding is provided by the United States Department of Health and Human Services, the Ryan White HIV/AIDS Treatment Extension Act of 2009 and the Maricopa County Department of Public Health. All of the documents distributed during this meeting may be requested from Planning Council Support.

MEETING MINUTES continued

Determination of quorum

Randall Furrow determined that quorum was established with three of four members present at 5:05 pm.

Review of the minutes and action items from the prior committee meeting

The committee silently reviewed the summary minutes from the January 3, 2013 meeting. No corrections were voiced.

Council Chair Update

Randall Furrow welcomed everyone back. No additional comments were voiced.

Later in the meeting Randall took back the Council Chair update and mentioned a consumer, who used to live in EMA and has returned, contacted him. A group of people who are long term survivors involved in early clinical trials are developing cognitive issues and have been dropped from Social Security Disability. Randall requested Committee members let him know if they hear anything or where these people can be directed for assistance on this issue. Randall suggested Representative Kyrsten Simena or Pharmaceutical consumer advocates. Social Security representative (Kimberly Yellow-Robe) was also suggested.

Planning Council Support Coordinator Organizational Change

Randall presented details of the Planning Council Coordinator Organizational Change. Two organizational charts were distributed: The Current Org Chart shows the Planning Council Support Staff located under the Maricopa County Department of Public Health and the Proposed Org Chart shows the Planning Council Support Staff located under the Maricopa County Department of Business Strategies and Health Care Programs (BHCP). The Planning Council Support Staff and the Administrative Agency's (AA) Office will both report directly to Chris Bradley, Director of BHCP; however they will be completely separate entities. The organizational change is being proposed to provide the new Planning Council Coordinator with logistical contact with the AA's Office who will be able to provide assistance as needed. The announcement will be made to the full Planning Council next week; Special guests, Dr. Bob England, Chris Bradley and Supervisor Wilcox will attend to express their support of the organizational change.

Keith Thompson stated that it was a good and timely move.

This will be a seamless move; there will be no changes to the sub-committees and full planning council meeting locations.

MEETING MINUTES continued

Administrative Agent update

Rose Conner discussed:

- Seven people have been interviewed for the new Planning Council Coordinator Position. Two candidates will be receiving second interviews; Rose is checking references; Randall and Chris Bradley will conduct the final interview and make the decision. Neither candidate has previous background with Ryan White; therefore the AA's Office will be available to provide assistance.
- Rose distributed the Transition Plan for Planning Council Support prepared by John Saperro.
- AA's Office will be providing Planning Council Support until the position is filled.
 - Rose Conner—Overall Support for all committees
 - Carmen Batista—Team
 - Ken Leighton-Boster—CHPS
 - Jared Vega—Allocations
 - Georgina Lowe-Executive
 - Edd Welsh—Standards
 - Chantie Wingo, Vickie Jaquez—Planning Council

2012 Grant Close

- Because of the additional \$300,000 from Part B and clients added to PCIP, some carryover may be available

2013 Grant Opening

- Partial award received March 1 for GY 2013- 50% of 2012 Formula (\$2,829,533) and 45% of 2012 MAI (\$195,366)
- Task Orders issued for 4 months funding for Part A and 6 months for MAI. Current allocations already include a cut for Oral Health.
- Distributed notice from HRSA that states that all formula funds will be cut by 5%.
- Distributed Chart that shows 3 scenarios for cuts to current 2013 allocations that range from \$252,609 to \$352,415.
- Allocations Committee agreed at the March 6 Allocations Committee Meeting to send a recommendation to the full Planning Council to have a PSRA in April to address needed cuts once we have additional information.
- In addition, the Allocations Committee requested utilization reports to see how funds are being spent in each service category and also information on the national average costs for Primary Medical Care and average visits nationwide compared to the Phoenix EMA. Rose has asked Part C for the information from the national perspective.
- PCIP enrollment suspended on February 16. 60 people have been moved into PCIP since January; 85 people are waiting for approval, after that no additional people will be added to PCIP. Primary Medical Care (PMC) is analyzing what this will mean to the Primary Care estimates but they do not think the current allocation for PMC will be sufficient if PCIP enrollments do not continue. We should know more by next week what those Primary Care numbers will look like.

MEETING MINUTES continued

Keith Thompson stated that Medicaid expansion will greatly impact the rest of the contract year; we may know if it is going to pass by May. He asked would we make a different decision than we would in April based on the Medicaid expansion?

Rose distributed the FPL Breakdown documents that may help estimate how many people may go on to Medicaid or ACA. Discussion at CHPS meeting this month was that if the Medicaid expansion goes forward, from Oct. 1 to Jan. 1, the number one priority is to get every client screened and enrolled. We should be hesitant to cut case management because of the need to help people enroll.

Keith stated that he was looking at the FPLs from a different perspective, if Medicaid expansion is approved, how much less would have to be spent by RWPA.

Rose stated that by April we are hoping to have more information related to the following:

- *Will Medicaid Expansion be approved?*
- *Will HRSA cut the RWPA grant and by how much?*
- *Will there be any carryover?*
- *Is CMS going to allow RW to pay the premiums for clients who enroll in ACA? (Concern is that client will not pay the premium and will drop off the exchange).*

Rose presented different scenarios that may occur depending on final decisions to the questions above. She stated that even if decisions are made to cut contracts in April, the cuts won't go into effect until June 1 and if needed, we could postpone until additional information is available.

Randall reiterated that the Allocations Committee agreed to send a recommendation to the Planning Council to hold a mini PSRA at the April Planning Council Meeting from 5:00 to 7:00 PM.

Keith Thompson asked about our capacity to hire Patient Navigators. Rose responded that CMS will be releasing the grant notices for the Patient Navigator Program within the next few months. Anyone can apply. There will be 2 patient navigator grants per state. One must be a non-profit. Unknown how much funding will be available. One award will be made in July and one award in September. Because of the uncertainties involved in getting the Patient Navigator Program up-to-speed, case management will be key to getting people enrolled.

David Aguirre stated that he participates on the Women's Health Coalition which is already preparing and training navigators (Health Promoters) to enroll kids in AHCCCS, which is their priority. He suggested that groups work together and perhaps get a letter of support to apply for a grant. Rose stated that coalitions are already forming. CMS is helping to sponsor an Affordable Care Act Coalition here. A steering committee has been formed to get moving from PCIP to ACA. 150 agencies have agreed to be part of the Coalition. Rose offered to provide David with the information about the coalition. Steering Committee is currently looking at statistics to determine who will need help and developing partnerships to get things going. Rose stated that the CHPs Committee will also be looking at workgroups needed for Ryan White.

MEETING MINUTES continued

Committee Reports

Allocations: Covered earlier in the meeting.

Community Health Planning & Strategies: Covered earlier in the meeting

Training, Education and Membership: David Aguirre discussed interviews that were conducted. Rose stated that two applications are pending; have not been formally moved to the Board of Supervisors. Background checks are being performed. No meeting is scheduled for this month.

Rules: Keith Thompson stated that everything was good with the Rules sub -committee.

Standards: Rose stated that Standards sub-committee meeting is scheduled for next Tuesday, March 12 9:00AM to 11:00AM. Discussion will include movement toward changing indicators for Primary Medical Services based on the seven top priorities of Secretary Sebelius. National Quality Center will provide an update on the changes at the Part A QM 201 session that will be held in March.

Determination of agenda items for the next Planning Council meeting

Planning Council Agenda Items (in addition to the recurring agenda items)

Executive Committee Elections

Dr. Bob England, Supervisor Wilcox and Chris Bradley- Guests

AA's Report

Recommendations from Allocations and CHPS regarding Mini PSRA and potential workgroups

Action Items to be completed by the next meeting:

| Task | Assigned To |
|------|-------------|
| | |
| | |
| | |

Current events summaries

Jennifer Bullock mentioned news story of baby cured of HIV.

MEETING MINUTES *continued*

Call to the public

No comments were voiced.

Adjourn

The meeting adjourned at approximately 5:55 pm.

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AGENDA

Welcome, introductions and declarations of conflict-of-Interest

Determination of quorum

Review of meeting minutes and action items

The committee will review the summary minutes of the previous meeting. Please inform the Chair of any revisions that should be incorporated into the summary minutes.

Council Chair update

The Planning Council Chair will provide personal comments.

Administrative Agent update

A representative of the Administrative Agent's office will discuss business relevant to the functions of the Planning Council. This update may include a review of AHCCCS eligibility issues and the impact any changes may have on Part A service delivery. The activities of the ADAP/ADAP Assist programs may also be discussed. Voting may occur to take action on discussion items.

Planning Council Support Coordinator Organizational Change

A representative of the Maricopa County Business Strategies and Health Care Programs Department will discuss a planned change to transfer the Planning Council Support Coordinator position from the Maricopa County Department of Public Health to the Maricopa County Business Strategies and Health Care Programs Department.

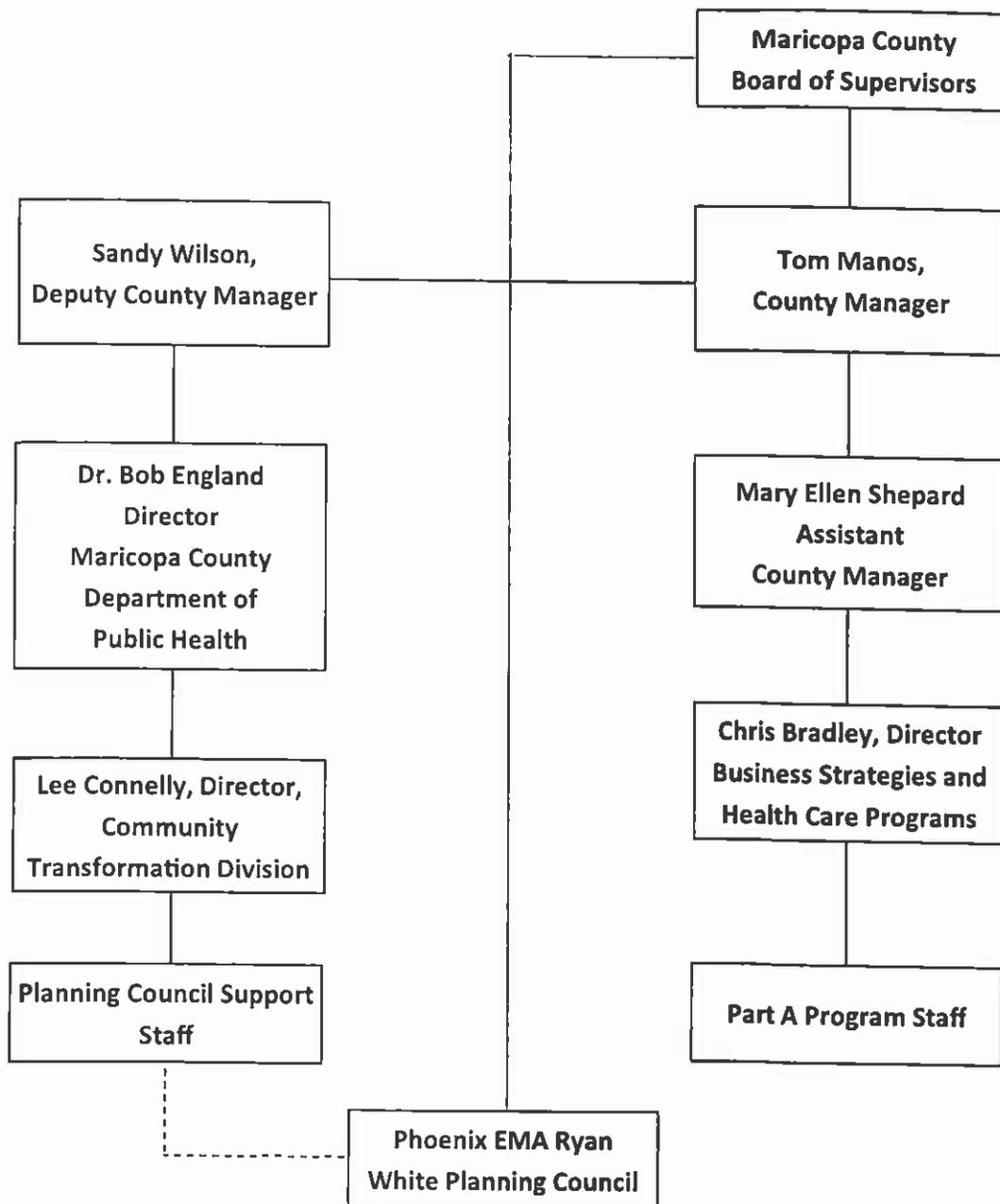
Committee/Work Group reports

A representative of each sub-committee/work group will provide a summary of current activities. Votes may occur to take action on discussion items.

- Allocations
- Community Health Planning & Strategies
- Training, Education & Membership
- Rules
- Standards

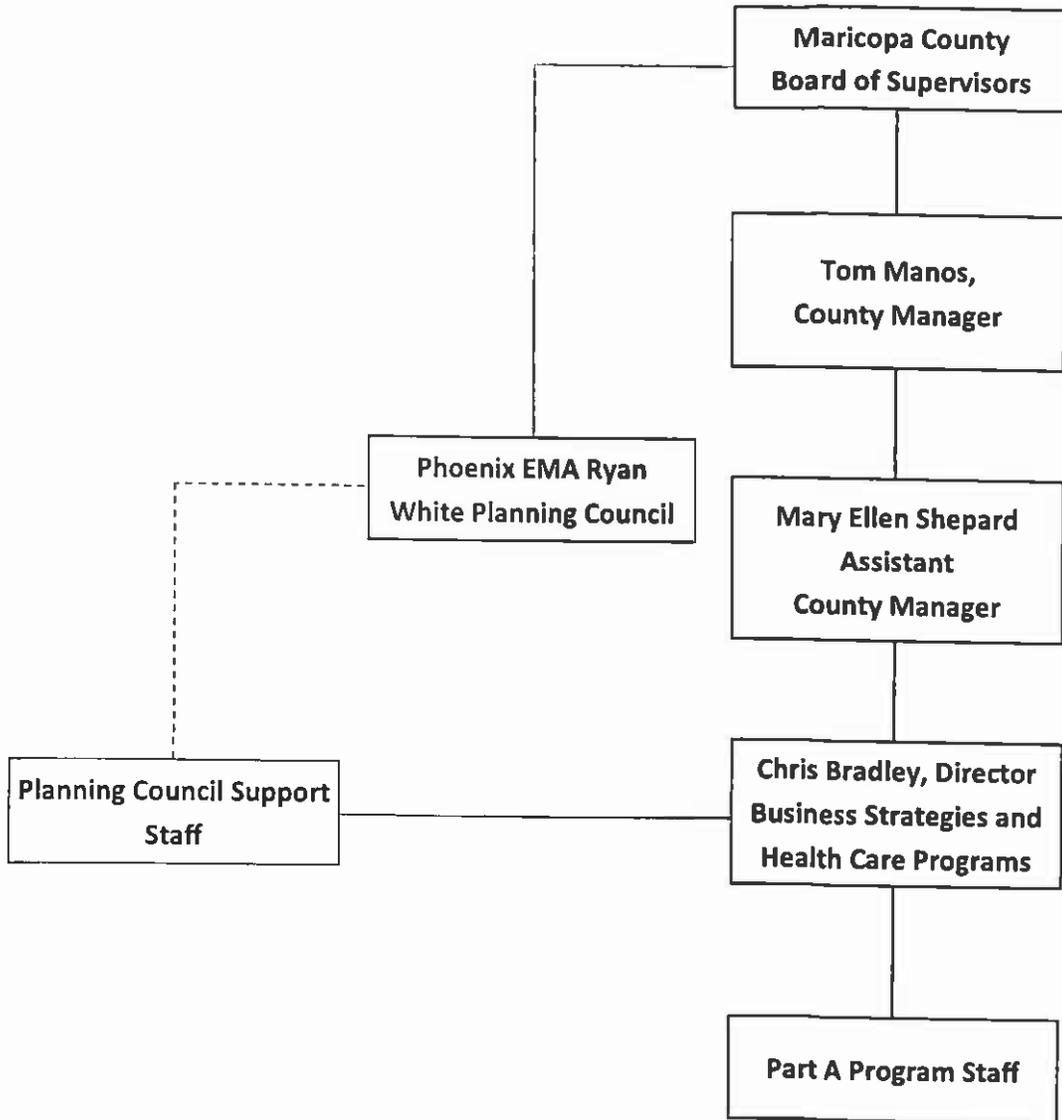
Members and guests of the Planning Council may attend either in person or via telephone conference call. Documents distributed during this meeting may be requested from Planning Council Support. The committee may vote to go into Executive Session for the purpose of discussion or consultation for legal advice with the County attorney or attorneys on any matter listed on the agenda pursuant to A.R.S. §38-431.03 (A)(3). Funding is provided by the United States Department of Health and Human Services, the Ryan White HIV/AIDS Treatment Extension Act of 2009 and the Maricopa County Department of Public Health.

Current Organizational Chart



Challenges with the current organizational structure: Planning Council Support is a stand alone program that has no connection to other programs within the Community Transformation Division. As such, other than high-level knowledge of Planning Council issues, there is little organizational knowledge or engagement in Planning Council activities and PCS functions. A new hire will enter a program of one individual, physically separated from other programs. Additionally, housing PCS in a separate County entity has resulted in two different systems for procurement, budgeting, human resources, employee performance evaluation, programmatic performance evaluation, electronic and physical file storage/retrieval, etc. Additionally, for Council activities that requires Board of Supervisors approval (such as meeting notice approval, member appointments, some procurement, and bylaws/document approval, etc.) , there are unnecessary approval steps and redundancies.

Proposed Organizational Chart



Proposed organizational structure: Planning Council Support becomes a separate entity within the Business Strategies and Health Care Programs, the division that houses the Ryan White Part A Program. Reporting directly to Chris Bradley resolves perceived conflict of interest between Planning Council Support and the Part A Program. This change allows Support staff the opportunity to interact with the Part A program and Board of Supervisors on a daily basis, and improves data and knowledge sharing. The two programs share a common system for procurement, budgeting, human resources, and other necessary functions. Additionally, Council activities that requires Board of Supervisors approval can be completed via a streamlined process that eliminates several layers of pre-approval, which will save considerable time.

John Sapero

Transition Plan for Planning Council Support

- 1) All procurement, mileage, and other budget expenditures for Planning Council Support will have been submitted by Friday, February 1, 2013. The budget has been provided to/reviewed with Part A Program staff and Public Health finance/grants management staff
- 2) The Program Coordinator job description has been reviewed by John Sapero, Lee Connelly (PCS supervisor) and Public Health HR. Recruitment will not commence until the position is vacant, per County rules
- 3) The Planning Council Chair has been provided with a flash drive containing the Council's Bylaws, Open Meeting Law, standards of care, Committee/Council meeting minutes for the previous year, the current MOU, and other relevant documents. These documents will also be provided to the Part a Program Manager (Rose Conner)
- 4) The Planning Council website (www.phoenixplanningcouncil.com) will have all January 2013 meeting minutes added, bringing the site up-to-date
- 5) A draft MOU for GY 2013 has been created and is being reviewed
- 6) A binder, documenting all processes for current procurement, meeting notices, BOS approval, and other programmatic functions is being completed and will be provided to the current PCs supervisor, Part A program staff and the Planning Council Chair
- 7) All current new member appointments have been put in process, and will be tracked in the interim by Part A program staff
- 8) The master Public Meeting Notice for GY 2013 is in the process for approval by the Director of Public Health
- 9) All Council member, Public Health staff and Part A Program staff have been notified of John Sapero's resignation
- 10) All standards of care, including those with recently approved revisions, will be updated and provided to Part A Program Staff, the Planning Council Chair/Standards Committee Chair, and posted on the Council's web page
- 11) All committee Chairs have been met with and updated on activities relevant to the work of their committees
- 12) An updated membership/representation roster, with reappointment dates, will be provided to the Part A Program and the Planning Council Chair
- 13) All programmatic needs will be established in an timeline/calendar and forwarded to Part A Program Staff and the Council Chair
- 14) I will formally check out with the Rose Conner and Randall Furrow prior to my departure on February 1, 2013.

Ryan White Part A
Administrative Agent
Allocations Committee Report
March 6, 2013

Part A 2012 Grant Year Update

| | |
|---------------------------------------|--|
| Total Grant Award | \$8,418,427 (Includes Carryover) |
| Part B Assistance for PMC | \$ 300,000 |
| Total Direct Service Allocations | \$7,619,906 (Includes Carryover, Part B, and Admin Reallocation) |
| Total Expended as of January 31, 2013 | \$6,564,814 (86%of total direct service allocations - should be 91%) |
| • Part A, Part B & Carryover | \$ 6,176, 390 (87% of total - should be 91 %) |
| • MAI & Carryover | \$ 388,424 (69% of total - should be 91 %) |

Providers have until April 15 to submit all final billings for 2012. Final Financial information must be submitted to HRSA by May 28, 2013. The AA will provide a final financial report for 2012 to the Planning Council at the June Planning Council meeting.

Due to Part B assistance and a large number of PCIP approvals in January, it is expected that the EMA will have remaining funds to request to carry over into grant 2013. The final amount of carryover will be determined in May after all final bills have been paid.

Part A Grant Year 2013 Opening Update

The EMA has received a partial award for Part A and MAI for 2013.

- Part A received 50% of 2012 formula funds \$2,829,533
- MAI received 45% of 2012 award \$195,366

Task orders have been issued to all providers with funding to cover expected service costs for 4 months. Funding was allocated per Planning Council directives issued in January, 2013.

Considerations:

1. New enrollment in the Pre-existing Conditions Insurance Program (PCIP) was suspended effective February 16, 2013. The RWPB program has approximately 85 clients that are awaiting approval and ID cards. These clients are expected to be enrolled in PCIP over the next few months, but no additional clients will be transitioned to PCIP. The Part A, B, C and D grantees are working together to analyze the impact of this situation on the 2013 budgets for each program. Additional information will be available at the May Planning Council meeting.

2. The final 2013 grant award will not be issued until after the Federal budget is approved. HRSA has indicated that EMAs should be prepared for potential cuts in funding, and will need to review priorities and allocations when the final award is received. The Planning Council will schedule a review of priorities and allocations once the award is received to determine if there is a need to revise allocations.
3. The Part A, B, C and D grantees are working together to develop plans for the transition of Ryan White clients into the Affordable Care Act. There are several pending decisions, including whether Arizona will approve Medicaid expansion that will affect our clients' eligibility to enroll in the ACA. It is expected that more information will be available at the June Planning Council meeting.

RWPA Potential Reductions to GY 2013 Direct Service Allocations- 3/6/13

| Service Category | 2013 ANNUAL ALLOCATIONS | 5% REDUCTION IN FORMULA ONLY | 5% REDUCTION TO FORMULA AND MAI | 5% REDUCTION TO FORMULA, SUPPLEMENTAL AND MAI |
|--|-------------------------|------------------------------|---------------------------------|---|
| Direct Services Allocation Part A | \$ 6,519,993.00 | \$ 6,196,799.20 | \$ 6,196,799.20 | \$ 6,115,444.00 |
| EARLY INTERVENTION | \$ 202,800.00 | | | |
| FAP-HEALTH INSURANCE | \$ 320,400.00 | | | |
| MEDICAL CASE MANAGEMENT | \$ 1,123,000.00 | | | |
| MENTAL HEALTH | \$ 338,794.00 | | | |
| MEDICAL NUTRITION | \$ 230,400.00 | | | |
| PRIMARY CARE | \$ 2,391,000.00 | | | |
| SUBSTANCE ABUSE | \$ 57,199.00 | | | |
| NON-MEDICAL CASE MANAGEMENT | \$ 426,400.00 | | | |
| TRANSPORTATION | \$ 279,000.00 | | | |
| ORAL HEALTH | \$ 1,151,000.00 | | | |
| DIRECT SERVICES Part A | \$ 6,519,993.00 | \$ 6,519,993.00 | \$ 6,519,993.00 | \$ 6,519,993.00 |
| Change to Direct Services-Part A | \$ - | \$ (323,193.80) | \$ (323,193.80) | \$ (404,549.00) |
| Direct Services Allocation MAI | \$ 298,440.00 | \$ 369,024.10 | \$ 350,573.15 | \$ 350,573.15 |
| MAI EARLY INTERVENTION | \$ 45,000.00 | | | |
| MAI NON MEDICAL CASE MANAGEMENT* | \$ 253,440.00 | | | |
| DIRECT SERVICES MAI | \$ 298,440.00 | \$ 298,440.00 | \$ 298,440.00 | \$ 298,440.00 |
| Change to Direct Services MAI** | \$ - | \$ 70,584.10 | \$ 52,133.15 | \$ 52,133.15 |
| Total Decrease | \$ - | \$ (252,609.70) | \$ (271,060.65) | \$ (352,415.85) |

* Reflects Adjustment to previous Allocation Schedule approved by Planning Council to correct the actual amount allocated

** Current Allocation for MAI Direct Services of \$298,440 is below the 2012 Award; therefore potential reductions in MAI Award could still result in additional funds to be allocated.

From: HRSA Post Awards [<mailto:hrsapostawards@hrsa.gov>]

Sent: Monday, March 04, 2013 9:53 AM

Subject: Important Information regarding your HRSA grant

Dear HRSA Grantee:

As you are likely aware, in accordance with the Budget Control Act of 2011, a series of spending cuts, called sequestration, will cancel approximately \$85 billion in budgetary resources across the Federal government for the remainder of the Federal fiscal year. As a partner with the Health Resources and Services Administration (HRSA), we are writing to provide you with information about what this reduction means for the funds provided to your organization.

At this time, the Department of Health and Human Services and HRSA are taking every step to mitigate the effects of these cuts. However, based on our initial analysis, the overall payments for the fiscal year for our formula programs will likely be reduced by 5%; therefore, the remaining payments for the fiscal year will be reduced to reflect the new total for your program.

To the extent that your grant is affected due to these budget cuts, you will be contacted by the appropriate Grant Management or Project Officer with additional details at a later point.

Thank you for your continued partnership with the Department of Health and Human Services and HRSA, and for your cooperation as we work together to manage these circumstances.

Michael J. Nelson
Associate Administrator
Office of Federal Assistance Management
Health Resources and Services Administration

Maricopa County Ryan White Part A Program
FPL Breakdown

Utilized Dollars

| Row Labels | 0 - 100% | 101 - 200% | 201 - 300% | 301 - 400% | 401% and Above | Grand Total |
|------------------------------------|-------------------|-------------------|------------------|------------------|----------------|-------------------|
| Case Management (non-medical) | 256569.77 | 177887.7 | 59900.95 | 7103.39 | 217.8 | 501679.61 |
| Early Intervention (Part A - B) | 88069.57 | 15499.26 | 6668.28 | 49681.82 | 1201.49 | 161120.42 |
| Health Insurance Program (HIP) | 85303.85 | 111670.49 | 39808.45 | 12873.11 | 516.99 | 250172.89 |
| Medical Case Management | 421161.12 | 254132.9 | 79308.01 | 10053.56 | 1736.07 | 766391.66 |
| Medical Nutrition Therapy | 73753.12 | 81364.07 | 17354.56 | 1004.23 | | 173475.98 |
| Medical Transportation Services | 122725.29 | 67374.92 | 10558.13 | 885.17 | | 201543.51 |
| Mental Health Services | 135588.48 | 52953.79 | 10085.54 | 780.09 | | 199407.9 |
| Oral Health Care | 623057.53 | 500415.33 | 146906.87 | 14593.97 | 175.83 | 1285149.53 |
| Outpatient/Ambulatory Medical Care | 954866.05 | 430634.31 | 130087.43 | 4701.42 | 1854.68 | 1522143.89 |
| Substance Abuse: Outpatient | 32924.88 | 7201.8 | 3633.71 | | | 43760.39 |
| Grand Total | 2794019.66 | 1699134.57 | 504311.93 | 101676.76 | 5702.86 | 5104845.78 |

Monthly Utilization Dollars 310,446.63 188,792.73 56,034.66 11,297.42 633.65 567,205.09

Annualized Utilization Dollars 3,725,359.55 2,265,512.76 672,415.91 135,569.01 7,603.81 6,806,461.04

Unduplicated Clients 1811 1085 388 47 11 3342

Cost Per Client 2,057.07 2,088.03 1,733.03 2,884.45 691.26 2,036.64

Services Delivered 9 months
3/1/12 - 11/30/12

FPL Groups

Maricopa County Ryan White Part A Program
FPL Breakdown

| Und Client Count Row Labels | Column Labels | | | | | | | Grand Total |
|--------------------------------|---------------|-------------|------------|------------|----------------|--|--|-------------|
| | 0 - 100% | 101 - 200% | 201 - 300% | 301 - 400% | 401% and Above | | | |
| 0 | 869 | | | | | | | 869 |
| 0.25 | 64 | | | | | | | 64 |
| 0.5 | 87 | | | | | | | 87 |
| 0.75 | 207 | | | | | | | 207 |
| 1 | 584 | | | | | | | 584 |
| 1.25 | | 400 | | | | | | 400 |
| 1.5 | | 303 | | | | | | 303 |
| 1.75 | | 211 | | | | | | 211 |
| 2 | | 171 | | | | | | 171 |
| 2.25 | | | 156 | | | | | 156 |
| 2.5 | | | 88 | | | | | 88 |
| 2.75 | | | 83 | | | | | 83 |
| 3 | | | 61 | | | | | 61 |
| 3.25 | | | | 19 | | | | 19 |
| 3.5 | | | | 14 | | | | 14 |
| 3.75 | | | | 11 | | | | 11 |
| 4 | | | | 3 | | | | 3 |
| 4.25 | | | | | 1 | | | 1 |
| 4.5 | | | | | 3 | | | 3 |
| 4.75 | | | | | 1 | | | 1 |
| 5 | | | | | 4 | | | 4 |
| 9 | | | | | 2 | | | 2 |
| Grand Total | 1811 | 1085 | 388 | 47 | 11 | | | 3342 |

Services Delivered 9 months
3/1/12 - 11/30/12

Und Clients by FPL

Maricopa County Ryan White Part A Program
FPL Breakdown

FPL Range 0 - 100%

| Utilized Dollars | Column Labels | | | | | Grand Total |
|------------------------------------|-------------------|------------------|------------------|------------------|------------------|-------------------|
| Row Labels | 0 | 0.25 | 0.5 | 0.75 | 1 | |
| Case Management (non-medical) | 103900.96 | 13843.78 | 9801.97 | 39958.18 | 89064.88 | 256569.77 |
| Early Intervention (Part A - B) | 62057.22 | 5827.25 | 2463.06 | 7809.71 | 9912.33 | 88069.57 |
| Health Insurance Program (HIP) | 68243.09 | | 7237.9 | 6203.91 | 3618.95 | 85303.85 |
| Medical Case Management | 235319.94 | 11537.14 | 23137.42 | 44980.67 | 106185.95 | 421161.12 |
| Medical Nutrition Therapy | 28913.99 | 3150.22 | 2979.22 | 7873.6 | 30836.09 | 73753.12 |
| Medical Transportation Services | 59909.57 | 5972.29 | 9944.93 | 8078.59 | 38819.91 | 122725.29 |
| Mental Health Services | 57114.33 | 14060.34 | 15211.91 | 13688.86 | 35513.04 | 135588.48 |
| Oral Health Care | 251878.07 | 19253.5 | 37276.19 | 70244.53 | 244405.24 | 623057.53 |
| Outpatient/Ambulatory Medical Care | 573963.44 | 42140.39 | 46410.51 | 126334.93 | 166016.78 | 954866.05 |
| Substance Abuse: Outpatient | 27265.16 | 196.86 | 1156.55 | 483.94 | 3822.37 | 32924.88 |
| Grand Total | 1468565.77 | 115981.77 | 155619.66 | 325656.92 | 728195.54 | 2794019.66 |

Monthly Utilization Dollars 163,173.97 12,886.86 17,291.07 36,184.10 80,910.62 163,173.97

Annualized Utilization Dollars 1,958,087.69 154,642.36 207,492.88 434,209.23 970,927.39 1,958,087.69

Unduplicated Clients 869 64 87 207 584 1811

Cost Per Client 2,253.27 2,416.29 2,384.98 2,097.63 1,662.55 1,081.22

Services Delivered 9 months
3/1/12 - 11/30/12

0-100%

Maricopa County Ryan White Part A Program
FPL Breakdown

FPL Range 101 - 200%

| Utilized Dollars Row Labels | 1.25 | 1.5 | 1.75 | 2 | Grand Total |
|------------------------------------|------------------|-----------------|------------------|------------------|-------------------|
| Case Management (non-medical) | 67040.67 | 49832.76 | 37174.9 | 23839.37 | 177887.7 |
| Early Intervention (Part A - B) | 5166.42 | 2463.06 | 4745.9 | 3123.88 | 15499.26 |
| Health Insurance Program (HIP) | 66692.11 | 18094.75 | 12407.83 | 14475.8 | 111670.49 |
| Medical Case Management | 98278.82 | 70059.37 | 52414.32 | 33380.39 | 254132.9 |
| Medical Nutrition Therapy | 28159.12 | 23598.86 | 16137.94 | 13468.15 | 81364.07 |
| Medical Transportation Services | 34340.68 | 20663.07 | 6398.88 | 5972.29 | 67374.92 |
| Mental Health Services | 17069.28 | 14078.91 | 16772.11 | 5033.49 | 52953.79 |
| Oral Health Care | 192007.57 | 143302.35 | 94860.88 | 70244.53 | 500415.33 |
| Outpatient/Ambulatory Medical Care | 145011.27 | 128879.74 | 83849.47 | 72893.83 | 430634.31 |
| Substance Abuse: Outpatient | 2091.64 | 4027.43 | 1082.73 | | 7201.8 |
| Grand Total | 655857.58 | 475000.3 | 325844.96 | 242431.73 | 1699134.57 |

Monthly Utilization Dollars 72,873.06 52,777.81 36,205.00 26,936.86 188,792.73

Annualized Utilization Dollars 874,476.77 633,333.73 434,459.95 323,242.31 2,265,512.76

Unduplicated Clients 400 303 211 171 1085

Cost Per Client 2,186.19 2,090.21 2,059.05 1,890.31 2,088.03

Maricopa County Ryan White Part A Program
FPL Breakdown

FPL Range: 201 - 300%

| Utilized Dollars Row Labels | Column Labels | | | | Grand Total |
|------------------------------------|------------------|------------------|-----------------|-----------------|------------------|
| | 2.25 | 2.5 | 2.75 | 3 | |
| Case Management (non-medical) | 23040.69 | 12173.81 | 13529.14 | 11157.31 | 59900.95 |
| Early Intervention (Part A - B) | 1561.94 | 120.14 | 180.22 | 4805.98 | 6668.28 |
| Health Insurance Program (HIP) | 24298.67 | 11373.84 | | 4135.94 | 39808.45 |
| Medical Case Management | 33885.43 | 19823.06 | 11994.84 | 13604.68 | 79308.01 |
| Medical Nutrition Therapy | 6863.69 | 2753.98 | 3336.96 | 4399.93 | 17354.56 |
| Medical Transportation Services | 3599.36 | 5492.37 | 106.64 | 1359.76 | 10558.13 |
| Mental Health Services | 5627.85 | 1875.95 | 2043.11 | 538.63 | 10085.54 |
| Oral Health Care | 64705.84 | 31825.43 | 32265 | 18110.6 | 146906.87 |
| Outpatient/Ambulatory Medical Care | 56374.1 | 20531.04 | 26785.24 | 26397.05 | 130087.43 |
| Substance Abuse: Outpatient | | | | 3633.71 | 3633.71 |
| Grand Total | 219957.57 | 105969.62 | 90241.15 | 88143.59 | 504311.93 |

Monthly Utilization Dollars: 24,439.73 11,774.40 10,026.79 9,793.73 56,034.66

Annualized Utilization Dollars: 293,276.76 141,292.83 120,321.53 117,524.79 672,415.91

Unduplicated Clients: 156 88 83 61 388

Cost Per Client: 1,879.98 1,605.60 1,449.66 1,926.64 1,733.03

Maricopa County Ryan White Part A Program
FPL Breakdown

FPL Range 301 - 400%

| Utilized Dollars Row Labels | Column Labels 3.25 | 3.5 | 3.75 | 4 | Grand Total |
|------------------------------------|-----------------------|-----------------|-----------------|---------------|------------------|
| Case Management (non-medical) | 2396.03 | 629.26 | 3811.88 | 266.22 | 7103.39 |
| Early Intervention (Part A - B) | 660.82 | | 49021 | | 49681.82 |
| Health Insurance Program (HIP) | 7754.89 | 4652.93 | 465.29 | | 12873.11 |
| Medical Case Management | 2904.01 | 2840.88 | 4008.8 | 299.87 | 10053.56 |
| Medical Nutrition Therapy | 731.46 | 152.22 | 120.55 | | 1004.23 |
| Medical Transportation Services | 26.66 | | 858.51 | | 885.17 |
| Mental Health Services | | | 780.09 | | 780.09 |
| Oral Health Care | 1934.14 | 263.74 | 12396.09 | | 14593.97 |
| Outpatient/Ambulatory Medical Care | 1984.09 | 1897.82 | 819.51 | | 4701.42 |
| Grand Total | 18392.1 | 10436.85 | 72281.72 | 566.09 | 101676.76 |

Monthly Utilization Dollars 2,043.57 1,159.65 8,031.30 62.90 11,297.42

Annualized Utilization Dollars 24,522.80 13,915.80 96,375.63 754.79 135,569.01

Unduplicated Clients 19 14 11 3 47

Cost Per Client 1,290.67 993.99 8,761.42 251.60 2,884.45

Services Delivered 9 months
3/1/12 - 11/30/12

301 - 400%