# Administrative Agency Report Submitted to the Austin Area Comprehensive HIV Planning Council FINAL REPORT AUGUST 28, 2012

## I. PART A & MAI GRANTS ADMINISTRATION/ MANAGEMENT UPDATE

# A. PART A GRANT APPLICATION GUIDANCE

The FY 2013 Part A Funding Opportunity Announcement (FOA) was posted on July 17, 2012. Subsequent to its release HRSA received data and confirmation of Columbus, Ohio as a newly eligible Transitional Grant Area (TGA). As a new TGA, it is eligible to receive funding in FY 2013. Working with our HRSA colleagues in the Office of Federal Assistance Management, it has been determined that they will need to re-release a modified FOA that incorporates the newly eligible TGA. As such, they expect the modified FOA to be posted by August 21st. The new due date is October 22, 2012.

#### **B. Austin TGA New Project Officer**

The TGA has been assigned a new Project Officer. Matt Newland

# C. Part A FY 2011 Carryover Request

The request will be submitted during the month of August.

#### D. HRSA Site Visit Schedule

HRSA is developing its site visit schedule and plan to ensure that all grantees receive an on-site visit every five years. Grantees who have not received a visit within the last five years will be scheduled first.

#### E. FY12 PART A EXPENDITURE SUMMARY

The FY12 Part A overall expenditure estimate is shown below. Forty two percent (42%) of the year has expired and approximately thirty four percent (34%) of funds have been expended through July 2012. Table 1 below shows the overall expenditures summary. The low level of expenditures reflects start of the new grant year and billings that have not been processed. A Service category expenditure table is included in Attachment 1.

CATEGORY	Budgeted Amount	Expended Amount	Percent Expended
*DIRECT SERVICES	\$3,650,583	\$1,245,749	34%
ADMINISTRATION (Including Planning Council Support)	\$429,912	\$162,205	38%
Quality Management	\$214,956	\$41,739	19%
TOTAL	\$4,295,451	\$1,449,693	34%

\*Billings for one provider estimated based on ARIES database.

# F. AUSTIN/TRAVIS COUNTY COMMUNITY HEALTH ASSESSMENT)

The Austin/Travis County Community Health Assessment (CHA) is completed and we are transitioning to the Community Health Improvement Plan (CHIP). Austin/Travis County Health and Human Services Department, Travis County Health and Human Services and Veteran's Services, Central Health, St. David's Foundation, Seton Healthcare Family, and the University of Texas Health Science Center at Houston School of Public Health Austin Regional Campus are building workgroups that will develop action plans for three major health priorities. These priorities, determined from the CHA results are as follows: 1) Chronic Disease (focus on obesity); 2) Built Environment (focus on transportation and healthy food access); and 3)Access to Primary Care and Mental/Behavioral Health (focus on navigating the healthcare system).

Materials and information for the Community Health Assessment (CHA) and Improvement Plan can be found by visiting the following HHSD internet page: http://www.austintexas.gov/healthforum

The public presentation of the CHA key findings, themes, and next steps is accessible at the above site. In addition, we will post the draft CHA report on or before August 24th. As we move forward, information on the Community Health Improvement Plan (CHIP) will also be posted to the same site.

# **II. CLINICAL QUALITY MANAGEMENT ACTIVITIES**

- Next QM meeting will be held Thursday, Aug. 9<sup>th</sup>.
- Due date for 2012 QM Plans from agencies is Aug. 9<sup>th</sup>.
- HRAU is coordinating with BVCOG to review and provide feedback on the QM Plans to ensure that Agencies have a well-rounded Plan.
- MCM SOC Work group is meeting at least every two weeks to finalize the acuity scale and then will work on its scoring methodology.
- Participation in the In+ Care Campaign interventions included:
  - Participation in the North Texas Regional Quality Management Group meeting Aug 1<sup>st</sup> which focused specifically on retention of care best practices and lessons learned.
  - Linkage with both the HIVQual Consultant and the In+ Care Coordinator at the National Quality Center

## **III. CLIENT COMPLAINTS**

None

# ATTACHMENT 1 SERVICE CATERGORY EXPENDITURE SUMMARY

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Medical Case Management Incl. Treatment Adherence	\$ 280,441		\$ 280,441	,850	4.340	-36%
Health Insurance Premium Assistance	\$ 96,029	\$ - \$ 39,351	\$ 135,380	\$ 56,408		12%
Early Intervention Services	<b>€</b> 9			49		
Outpatient & Ambulatory Health Services	\$ 1,115,800	\$ -	\$ 1,115,800	\$ 464,917	\$ 366,956	-21%
ADAP	\$ 969		\$ 969	\$ 404	<del>\$</del>	-100%
AIDS Pharmaceutical Assistance - Local	\$ 374,731		\$ 374,731	\$ 156,138	\$ 83,625	-46%
Mental Health Services	\$ 293,894		\$ 293,894	\$ 122,456	_	-15%
Oral Health Care	\$ 437,526		\$ 437,526	_		4%
Substance Abuse Outpatient Services	\$ 193,781		\$ 193,781	\$ 80,742		-52%
Hospice Services	\$ 77,673		\$ 77,673	\$ 32,364	\$ 39,762	23%
Medical Nutrition Therapy	\$ 70,208		\$ 70,208	\$ 29,253	\$ 29.874	2%
Support Services						
Medical Transportation Services	\$ 25,000		\$ 25,000	\$ 10,417	\$ 15,869	52%
Case Management Non-Medical	\$ 387,297		\$ 387,297	\$ 161,374	\$ 133,269	-17%
Substance Abuse Residential	\$ 86,257		\$ 86,257	\$ 35,940	\$ 24,818	-31%
Outreach Services	\$ 99,144		\$ 99,144			43%
Psychosocial Support	\$ 14,658		\$ 14,658			-46%
Food Bank / Home Delivered Meals	\$ 61,500		\$ 61,500	\$ 25,625	\$ 20,259	-21%
Total	\$ 3,614,908	\$ - \$ 39,351	\$ 3,654,259	\$ 1,522,608	\$ 1,245,749	-18%