



A G E N D A

CENTRAL TEXAS HIV PLANNING COUNCIL

The mission of the HIV Planning Council is to develop and coordinate an effective and comprehensive community-wide response in the Central Texas area to HIV/AIDS. This shall be accomplished through prevention to reduce the incidence of HIV infection and through services to provide the opportunity for the highest possible quality of life for all persons infected with or affected by HIV disease, including those traditionally not served or underserved.

“Please be advised that discussion or decisions that occur during the meeting may be documented in meeting minutes and if you disclose personal, confidential or private information about yourself (i.e. information such as, but not limited to: HIV status, medical conditions, sexual orientation, or other personal matters), that this information may become part of public record in the form of meeting minutes.”¹

Meeting Ground Rules:

- (1) One person speaks at a time.
- (2) Communication is respectful and courteous.
- (3) “I” statements are used to express personal opinions.
- (4) We are open to other perspectives.
- (5) Everyone is safe to express their views.
- (6) We are solution oriented.
- (7) Act as if we trust each other.
- (8) Commit to necessary behavior changes.
- (9) Everyone’s perception and opinion are real for them.
- (10) Focus on behaviors and not people.
- (11) We are here because we care and that is our common ground.

February 14, 2006
10:00 AM – 12:00 PM

CAPCOG
Austin

- 1) Introduction of members
- 2) Reading of ground rules and confidentiality statement by CTHPC Secretary
- 3) Review previous minutes
- 4) Public participation
- 5) Committee reports
- 6) BVCOG
 - a. Temple HSDA reallocation request vote
 - b. Travel forms
 - c. Budget update
 - d. Data report
 - e. Medicare Rx (Part D) update
 - f. Reauthorization update
- 7) Unfinished business
- 8) Set date and time for next meeting
- 9) Adjourn

¹ DSHS Confidentiality statement, DSHS Publication Number F13-12219



BRAZOS VALLEY COUNCIL OF GOVERNMENTS

**P.O. Drawer 4128
Bryan, TX 77805-4128**

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**Central Texas HIV Planning Council
Meeting Minutes
November 15, 2005 – 10:00 a.m.
David Powell Public Health Clinic
Austin, Texas**

This is a reminder that the next meeting of the Central Texas HIV Planning Council will be held at the Capital Area Council of Governments on February 14, 2006, at 10 AM.

CTHPC Members present: Rita Castro, David Cooper, Robert Holtman, Tony Matcek, Jerry Oliver, Janet Cates, Robert Luckey, Sissy Riffin, Parker Willson, Sam Guerrero, Christine Harris, Cynthia Juniper, Leatrice Bines, Dennis Nelson

Brazos Valley Council of Governments (BVCOG) staff present: Christopher Hamilton, Tom Wilkinson, Megan Wright

Texas Department of State Health Services (DSHS) staff present: None.

Call to order

Mr. Sam Guerrero, Chair, called the Planning Council meeting to order at 10:10 a.m.

Introductions

Meeting attendees introduced themselves.

Ground Rules

The Secretary read the Council ground rules.

Medicare Part D Presentation

Mr. Hamilton presented an overview of the new Medicare Part D prescription drug plan. The presentation included a review of the current Medicare parts and information on the Part D enrollment period, formulary, instructions on enrolling, and benefits.

Members were also provided with information on the number of clients in the Central Texas HIV Planning Area who are currently on Medicare and/or Medicaid and the possible impact of the new plan on allocations.

Review the minutes of the October Meeting

The Council reviewed the minutes of the October CTHPC meeting and no changes were suggested.

Public Participation

None.

Committee Reports

Executive Committee

The Executive Committee met and approved the CTHPC agenda on November 9. The Chair announced to the CTHPC that an ad hoc committee is being established to discuss the issue of consensus versus voting for Council decisions. The following members were appointed to the committee: Dennis Nelson (Chair), Leatrice Bines, Eric Todd, Janet Cates, Rita Castro, Sam Guerrero, and possibly Chris Benfer. The committee will be tasked with reporting on what method other areas use. The Council will vote on all new members by secret ballot and simple majority until the work of the committee is completed.

Consumer Committee

The Consumer Committee met on October 11, 2005, following the Council meeting and will be meeting again after this Council meeting. The October 11 meeting included the adoption of the standard operating procedures proposed by the ad hoc committee. Other discussion included the need for consumer representation from the Concho Plateau HSDA, the challenges of participation over a large geographic area, and a structure for the committee. The committee is considering having this Consumer Committee serve as a “hub” and have smaller sub-groups in each HSDA. A pilot group will begin in Waco HSDA. The committee also tabled a discussion on a new name.

Needs Assessment Committee

The Needs Assessment Committee met October 31 to discuss conducting a new needs assessment, which was tabled until further information from DSHS becomes available. According to DSHS, planning councils are no longer required to use the Statewide Coordinated Statement of Need (SCSN) tool. It was brought up that using different tools will create different measures of need and complicate making comparisons between areas. A new needs assessment is required every three years. There was a brief discussion on the types of needs assessments and the Council will wait for further DSHS guidance.

Membership Committee

The Membership Committee met October 17 and November 8 to review applications for membership, tracking attendance, and mentoring new members. The committee recommends two candidates for membership. The committee is going to continue tracking meeting attendance, including committee meetings, and will review the bylaws to ensure all members are in compliance. It was clarified that the only excused absence noted in the bylaws is illness. New members are now being mentored by current members. Also discussed were committee assignments for new members and the designing and dissemination of letters to providers requesting placement of Council brochures in their offices.

Allocation Committee

The Allocation Committee met on November 9 to review comments from the allocations public hearings. The committee also received additional information from DSHS on the Ryan White allocations and cuts were made where funding was reduced.

Comprehensive Planning Committee

The Comprehensive Planning Committee met on September 8 and is currently awaiting information on the reauthorization of the Ryan White CARE Act and needs assessment.

BVCOG

Travel Forms

Council members provided with travel forms. These may be submitted to any BVCOG representative.

Budget

The budget was reviewed.

Timeline

The needs assessment will need to be conducted before the Comprehensive Planning Committee can do its work. DSHS is currently discussing changes to the continuum of care requirement.

Data and Expenditure Report

The utilization and expenditure reports were presented by HSDA. Austin HSDA was not included due to the lack of complete data from the HSDA. Clarification was provided on the meaning of “clients discharged” on the utilization reports.

BVCOG Website

Mr. Hamilton provided an overview of the new BVCOG HIV Administrative Services website and where members should look for planning information.

Ryan White CARE Act Reauthorization

There is not a current date for when the reauthorization will take place, but it will possibly be in late February/early March 2006.

Statewide Coordinated Statement of Need Report (SCSN)

Though the SCSN steering committee will likely no longer exist, the document itself must continue to be completed once per year depending on the CARE Act reauthorization.

Unfinished Business

None.

New Business

New member applications were reviewed and voted on. Both candidates, 1 provider from Waco and 1 consumer from Austin, were approved by the Council through secret ballot.

The Council was presented with the updated allocation amounts per HSDA:

Austin HSDA

The Austin amounts were presented and clarification was provided that additional funds will be reallocated to Drug Reimbursement from non-core categories. 5% was cut from Austin HSDA, though this amount may increase if HRSA removes the hold harmless clause. The 5% was cut from Health Insurance, Emergency Financial Assistance, Transportation, and Mental Health Services. One reason for the continuing 5% cuts in Austin over the past few years is because there

has not been uniform data collection in the HSDA, resulting in an undercount of clients. It was discussed that all of the providers, both rural and urban, in Austin currently have waiting lists for case management.

The Austin allocation amounts were accepted by consensus.

Bryan-College Station HSDA

The Council had no questions and the allocations were approved by consensus.

Concho Plateau HSDA

The Council had no questions and the allocations were approved by consensus.

Temple-Killeen HSDA

The Council had no questions and the allocations were approved by consensus.

Waco HSDA

The Council had no questions and the allocations were approved by consensus.

The Council thanked Dennis Nelson for providing the meeting space.

Next Meeting & Adjournment

The next meeting will be held on February 14 in Austin.

The meeting was adjourned at 11:43 a.m.

If you have not already submitted your travel reimbursements for the last meeting, please submit them to Ms. Crystal Crowell, Brazos Valley Council of Governments, P.O. Drawer 4128, Bryan, TX 77805-4128 or by FAX (979) 595-2815. If you have other questions, please contact Christopher Hamilton at (979) 595-2800 ext. 2225 or by email at chamilton@bvcog.org. Additional information on the Central Texas HIV Planning Council and the Brazos Valley Council of Governments can be found at <http://hiv.bvcog.org>.

Medicare Rx (Part D) in the Central Texas Planning Area

Austin HSDA:

Medicare Part D eligible:	461 clients
Currently enrolled in Part D:	177
Dual eligible enrolled:	35
Number of dual eligibles that have changed plans in the month:	0

Problems encountered during the month of January:

“Some clients with a January effective date experienced problems at the pharmacy including: pharmacy information listed a different co-pay from what was on the clients card, clients have their card but they are not yet listed in the Medicare data base. We have paid for a few prescriptions at the end of January to assist clients who are running into these types of difficulties. For the most part the pharmacies are working very well with us to try to resolve the issues. Many clients have cards with an effective date Feb 1, so we will see how they do this month.”

“Some dual eligible patients were erroneously enrolled in plans requiring premiums and high co-pays, or not showing up on a plan at all. Each has been resolved individually. The other thing that has been noted is that patients have been tele-marketed into switching plans after clinic staff have spent time helping them to identify a plan that meets their needs. Some of the switched plans do not meet patient needs.”

Spending projections:

“At this time, too soon to tell. Preliminary January numbers have not seen a reduction in pharmacy spending, but as more patients are enrolled that is expected to change.”

“I don’t have a projection as of yet, I will know more at the end of February.”

Bryan – College Station HSDA

Medicare Part D eligible: 22 clients

Currently enrolled in Part D: 9

Dual eligible enrolled: 13

Number of dual eligibles that
have changed plans in the month: 0

Problems encountered during the month of January:

None reported

Spending projections:

“Currently have one client that we are aware of that will be in the donut-hole. If the client does not receive extra assistance from Medicare Part D, we will need to assist with costs.”

Concho Plateau HSDA

Medicare Part D eligible: 12 clients

Currently enrolled in Part D: 5

Dual eligible enrolled: 4

Number of dual eligibles that
have changed plans in the month: 0

Problems encountered during the month of January:

There have been minimal problems with client enrollment in Part D primarily due to the Director of Client Service assisting any client with needed assistance. The only issues have been with individuals that are eligible that have not opted to enroll at this point.

Spending projections:

“At this point, since Medicare Part D is so new and what will and will not be covered as far as medications by different insurance programs, it is difficult to project what expenditures will be. Initially individuals that were on the HIV medication program were told there would be a two to three month processing time for individuals on Part D. The agency is now receiving information that clients with Medicare Part D are already dropped despite the medication insurance drug coverage not taking effect until February 1st. I have no doubt there will be further “surprises” on the horizon within the next few months.”

Temple – Killeen HSDA

Medicare Part D eligible: 23 clients

Currently enrolled in Part D: 12

Dual eligible enrolled: 5

Number of dual eligibles that
have changed plans in the month: 0

Problems encountered during the month of January:

Some clients have allegedly not received information from Medicare, agency has had difficulty contacting several clients, and a few clients have had to wait one month for coverage to begin.

Spending projections:

There may be a minor/insignificant impact on overall available funds for medications in that we will no longer be paying for some medications. We do not anticipate any need for reallocation in health insurance and drug reimbursement because of this program.

Waco HSDA

Medicare Part D eligible: 36 clients

Currently enrolled in Part D: 16

Dual eligible enrolled: 9

Number of dual eligibles that
have changed plans in the month: 0

Problems encountered during the month of January:

None reported

Spending projections:

“In our current RW year we have more than enough funds in Insurance to help clients who need assistance. I do feel that with this change we will possibly have to reallocate some money into insurance at some point. It is really too hard to predict at this time. “

**Ryan White CARE Act
Reauthorization Update
02.14.06**

- Bicameral effort
 - Senate Health, Education, Labor, Pensions Committee
 - House Energy and Commerce Committee
- The joint committee has drafted the first part of the legislation
- Language in at present preserves the allocation formulas for Titles I and II (i.e. preserving the 80/20 formula)
- Talk of putting back in the 'Emerging Communities' title: addresses need of cities who have a large positive population, but do not qualify as an EMA (i.e. El Paso)
 - Idea that there will be \$25 M for this, likely to come from cutting WICY, SPNS, SCSN. Also talk of preserving WICY, SPNS, SCSN but question as to where additional funds would come from
- Some written materials will start to surface in March 2006

Central Texas HIV Planning Council 2005 Attendance

	2/8/05	4/12/05	6/14/05	8/9/05	10/11/05	11/15/05	
Benfer, Chris	✓		✓	✓	✓		
Bines, Leatrice					✓	✓	
Castro, Rita	✓	✓	✓	✓	✓	✓	
Cooper, David						✓	
Cates, Janet	✓	✓	✓	✓	✓	✓	
Guerrero, Sam	✓	✓	✓	✓	✓	✓	
Harris, Christine	✓	✓	✓	✓	✓	✓	
Hodgkins, Blair	✓	✓	✓				
Holtman, Robert						✓	
Juniper, Cynthia	✓		✓	✓		✓	
Luckey, Robert E.	✓	✓	✓	✓	✓	✓	
Madison, Marla			✓	✓			
Matcek, Anton (Tony)						✓	
Nelson, Dennis	✓	✓			✓	✓	
Oliver, Jerald	✓	✓	✓	✓	✓	✓	
Riffin, Dora Anne (Sissy)	✓			✓	✓	✓	
Todd, Eric	✓	✓	✓	✓	✓		
Willson, Parker	✓	✓	✓	✓	✓	✓	
DSHS Staff							
Laura Moch		✓	✓	✓	✓		
Brenda Howell		✓	✓	✓			
Janina Daves			✓		✓		
Mary Noell			✓				
Katharine Carvelli			✓				
Sylvia Odem			✓				
Chesca Pledger					✓		
BVCOG Staff							
Crowell, Crystal	✓	✓	✓	✓	✓		
Hamilton, Christopher			✓	✓	✓	✓	
Wright, Megan			✓	✓	✓	✓	
Wilkinson, Tom			✓	✓	✓	✓	

Central Texas HIV Planning Council

Committee Members – January 2006

18 Active Members

(italicized names are new members and their committee placement is tentative pending appointment by the CTHPC Chair)

HSDA	Executive Committee	Needs Assessment Committee	Membership Committee	Comprehensive Planning Committee	Consumer Group	Allocations Committee
Austin	Christine Harris Dennis Nelson	Leatrice Bines	Dennis Nelson Christine Harris* Mabrey Whigham	Cynthia Juniper	Christine Harris Leatrice Bines Mabrey Whigham	Cynthia Juniper Mabrey Whigham
Bryan-College Station	Eric Todd	Eric Todd Tony Matcek Robert Holtman	Marla Madison	Tony Matcek	Tony Matcek Robert Holtman	Eric Todd* Marla Madison Robert Holtman
Concho Plateau	Sam Guerrero* Rita Castro	Rita Castro* Sam Guerrero	Sam Guerrero David Cooper	Rita Castro Sam Guerrero		Sam Guerrero Rita Castro David Cooper
Temple-Killeen	Robert Luckey	Janet Cates		Robert Luckey*		Janet Cates
Waco	Parker Willson	Sissy Riffin	Jerry Oliver	Sissy Riffin	Sissy Riffin Parker Willson* Jerry Oliver	Parker Willson Sissy Riffin Janis Willis

*Committee Chair

**CENTRAL TEXAS HIV PLANNING COUNCIL
MEMBERSHIP LIST—January 2006**

HSDA	Name	Mailing Address	Phone/Fax	Committee
Austin	Leatrice Bines	6600 Ed Bluestein Austin, TX 78723 leatrice@thewrightthouse.org	P: (512) 236-8901 P: (512) 586-4194	Needs Assessment Consumer Group
	Christine Harris	P.O. Box 251 Buda, TX 78610 kchristineh@juno.com	P: (512) 398-4342	Executive Consumer Group Membership*
	Cynthia Juniper	Community Action, Inc. P.O. Box 1246 San Marcos, TX 78667 cjuniper@communityaction.com	P; (512) 396-3395	Comprehensive Planning Allocations
	Dennis Nelson	David Powell Public Center 4616 N IH-35 Austin, TX 78751 dennis.nelson@ci.austin.tx.us	P: (512) 972-4907 F: (512) 972-4940	Membership Ad Hoc Bylaws*
	Mabrey Whigham	PO Box 341387 Austin, TX 78734 mruswh3@hotmail.com	P: (512) 769-2995	Membership Consumer Group Allocations

**CENTRAL TEXAS HIV PLANNING COUNCIL
MEMBERSHIP LIST—January 2006**

HSDA	Name	Mailing Address	Phone/Fax	Committee
Bryan - College Station	Robert Holtman	8079 Sunbelt Rd. Iola, Texas 77861 ToneArt@msn.com	P: (936) 394-2024 F: (936) 394-2024	Needs Assessment Consumer Group Allocations
	Eric V. Todd	BVCAA 504 E. 27th Street Bryan, Texas 77803 etodd@bvcaa.org	P: (979) 779-7443 F: (979) 822-7758	Executive Needs Assessment Allocations*
	Tony Matcek	8709 Sunbelt Rd. Iola, Texas 77861 ToneArt@msn.com	P: (936) 394-2024 F: (936) 394-2024	Needs Assessment Comprehensive Planning Consumer Group
	Marla Madison	BVCAA 1702 B S. Texas Ave. Ste. 205 Bryan, TX 77802 mmclure@bvcaa.org	P: (979) 260-2437 F: (979) 775-3457	Membership Allocations

**CENTRAL TEXAS HIV PLANNING COUNCIL
MEMBERSHIP LIST—January 2006**

HSDA	Name	Mailing Address	Phone/Fax	Committee
San Angelo	Rita Castro	San Angelo AIDS Foundation 334 W. Concho San Angelo, Texas 76903 rita@saaf.net	P: (325) 658-3634 F: (325) 658-3703	Executive Needs Assessment* Comprehensive Planning Allocations
	David Cooper	2910 Briargrove Lane San Angelo Texas, 76904 david@saaf.net	P: (325) 658-3634 F: (325) 658-3703	Membership Allocations
	Sam Guerrero	San Angelo AIDS Foundation 334 W. Concho San Angelo, Texas 76903 sam@saaf.net	P: (325) 658-3634 F: (325) 658-3703	Executive* Needs Assessment Membership Comprehensive Planning Allocations

**CENTRAL TEXAS HIV PLANNING COUNCIL
MEMBERSHIP LIST—January 2006**

HSDA	Name	Mailing Address	Phone/Fax	Committee
Temple - Killeen	Janet Cates	UWGFHA Central Texas Support Services P. O. Box 1793 Temple, Texas 76503 janetcatesctss@aol.com	P: (254) 778-2495 F: (254) 778-4302	Needs Assessment Allocations
	Robert E. Luckey	UWGFHA Central Texas Support Services P. O. Box 1793 Temple, Texas 76503 reluckey@aol.com	P: (254) 778-1444 F: (254) 778-4302	Executive Comprehensive Planning*

**CENTRAL TEXAS HIV PLANNING COUNCIL
MEMBERSHIP LIST—January 2006**

HSDA	Name	Mailing Address	Phone/Fax	Committee
Waco	Jerry Oliver	3077 Palomino Trail Robinson, Texas 76706 olivnord@netscape.com	P: (254) 662-6362 F: (254) 662-6362	Membership Consumer Group
	Dora Ann "Sissy" Riffin	2618 Glendale Dr. Waco, TX 76710 mommavroom@aol.com	P: (254) 296-0572	Needs Assessment Comprehensive Planning Consumer Group Allocations
	Janis Willis	225 W Waco Drive Waco, TX 76707 janisw@ci.waco.tx.us	P: (254) 750-5499 F: (254) 750-5480	Allocations
	Parker Willson	3200 Parrott Waco, Texas 76707 johnpark@grandecom.net	P: (254) 756-2319 F: (254) 756-2101	Executive Allocations Consumer Group*



Central Texas HIV Planning Council Executive Committee Meeting Minutes

February 7, 2006

CTHPC Members Present: Parker Willson, Christine Harris, Eric Todd, Robert Luckey

BVCOG Staff Present: Christopher Hamilton

The Executive Committee met via conference call at 10 a.m. on February 7, 2006 to discuss the agenda for the February 14 Planning Council meeting.

Prior to the call, the Council Chair, Sam Guerrero, called to say that he would be late on the call but to start without him

The meeting came to order at 10:02 a.m.

The committee reviewed the agenda. A question was raised about the presentation, if there was one scheduled. Since none has been scheduled at this time, it was suggested that it be removed from the agenda.

Mr. Hamilton noted that during the Public Participation portion of the meeting, Mark Pepler of the Title I Austin AA will talk about a new community planning body that will look at many different sources of funding for the Austin EMA.

The committee agreed that no items were missing from the agenda. Mr. Hamilton stated that committee chairs will receive their individualized agendas on Friday, February 10.

Since Mr. Guerrero was not able to make it to the call, Mr. Hamilton will review the committee's suggestions with Mr. Guerrero prior to the council meeting.

The meeting was adjourned at 10:07 a.m.



Central Texas HIV Planning Council

Consumer Connection

Meeting Minutes

November 15, 2005

CTHPC Members Present: Leatrice Bines, Jerry Oliver, Parker Willson, Christine Harris, Robert Holtman, Anton Matcek

BVCOG Staff Present: Christopher Hamilton and Megan Wright

The Consumer Connection Committee met after the November 2005 CTHPC meeting.

The meeting began at 12:08 p.m.

After an introduction of attendees, Mr. Willson provided a brief history of the committee. He concluded by saying that the committee is currently deciding how to serve the consumer – the main goal of the committee is to educate consumers and to listen to their comments on the CTHPC. Attendees then discussed a name for the committee and “Consumer Connection” was chosen by consensus.

The committee reviewed the idea of having one consumer group in each HSDA for local consumers who do not attend the CTHPC meetings in Austin. Each group would have a representative attend the larger Consumer Connection (CC) and CTHPC meetings. It was also decided that there will be no formal membership structure for the CC – the meetings will be open to all, though attendance will still be taken at the meetings. Attendance at the subgroup meetings will not be tracked.

Potential difficulties regarding stigma and disclosure in gathering consumers for the meetings were discussed. The possibility of a chat room or web forum was discussed, along with other methods for reaching consumers such as provider newsletters and business cards. Ms. Bines spoke about the impact that speaking with a person who is positive can have on a newly diagnosed individual. The quote “Positive results plus positive attitude equals positive living” was introduced by Ms. Bines. Mr. Willson suggested piloting the web forum or web log (“blog”) idea before moving on to holding local meetings. Mr. Willson and Mr. Hamilton will discuss this further and present their ideas at the December CC conference call meeting. Ms. Harris also raised the possibility of dividing the Austin HSDA into multiple subgroups. Mr. Hamilton suggested holding two Austin HSDA meetings, which would allow attendees to choose which meeting to attend.

Also discussed was the 2005 World AIDS Day (December 1) and area events. Mr. Willson explained that an event was being held in Waco that would consist of 2500 Wacoans wearing “HIV+” shirts to assist in opening up dialogue about HIV/AIDS.

The meeting was adjourned at 1:05 p.m.

Central Texas HIV Planning Council



Consumer Connection Meeting Minutes

February 6, 2006

CTHPC Members Present: Parker Willson (Chair), Jerry Oliver, Mabrey Whigham, Sissy Riffin

BVCOG Staff Present: Christopher Hamilton

The Consumer Connection Committee met via conference call on February 6, 2006 to discuss agenda items for the February 14 Consumer Connection meeting.

The meeting began at 1:00 p.m.

Mr. Willson asked the committee for their ideas for topics to discuss at the Consumer Connection meeting that will be February 14 after the Planning Council meeting. He then asked if members had the opportunity to visit the web-log/discussion forum. He asked that committee members visit the site before the meeting and come prepared with comments and suggestions. He said he is anxious to have the site published and available for use.

The committee then offered some ideas for agenda items:

- Discuss the web-log/discussion forum site
- Starting consumer groups in other areas.

Mr. Willson stated that in the Waco area, there were two groups that had been started, one for affected and one for infected. He added that the group for infected would most likely turn into the consumer connection group for the Waco HSDA. He noted that many participants are very eager to receive more education, to hear presentations, and other such activities.

Ms. Harris spoke with a consumer in the Austin HSDA, specifically in San Marcos, who stated that space at their church had been made available. A question was raised if holding such a meeting at a religious facility posed a problem due to State and Federal funds being used. Other consumer groups, in other planning areas, meet in church spaces so it should not pose a problem.

She also raised the point that those residing in the San Marcos area do not want to drive to Austin for consumer meetings, and those in Austin did not want to drive to San Marcos for consumer meetings.

Additional items added to the agenda for the Consumer Connection meeting on February 14, 2006:

- Discuss multiple meeting sites for Austin HSDA consumer meetings
- Printed materials such as a brochure that can be given to clients, physicians, etc...
- Methods for recruiting consumers that do not rely on providers only
- Recruiting consumers from the Temple and Concho Plateau HSDAs
- Discussion of provider buy-in to the Consumer Connection meetings and enlisting their support in getting the word out to clients

The meeting was adjourned at 1:35 p.m.



Central Texas HIV Planning Council Needs Assessment Committee

Meeting Minutes November 28, 2005

Members Present: Rita Castro (Chair), Sissy Riffin, Janet Cates,
Leatrice Bines, Tony Matcek, Bobby Holtman

BVCOG Staff Present: Christopher Hamilton, Crystal Crowell

The Needs Assessment Committee met via conference call to discuss timelines for conducting a new needs assessment, use of the Austin Title I assessment, and tools to use for the assessment.

The meeting came to order at 1:35 p.m.

A proposition was posed to the committee that since the Austin Title I council just finished their needs assessment and included the five other counties (assessment covered entire HSDA) the committee could use the same survey and thus use the data from Austin, saving time and expense for the needs assessment for the Central Texas Planning Area.

The committee then discussed how many people to survey in each of the areas. Mr. Hamilton offered numbers based on total PLWHA in order to reach statistical significance. The committee suggested using the current client count in an HSDA rather than total PLWHA. It was then suggested that the committee look at the budget and what can be afforded in terms of incentives for participation as well as other expenses in conducting the assessment before deciding how many to survey in each area.

Ms. Crowell suggested that the bulk of work and expense be completed in this grant year (ending March 31, 2006) in order to maximize use of available funds.

Ms Castro noted that the entire process might take approximately four months to complete. If starting in January, the bulk of expense and work would be completed within the grant year.

The committee agreed to use the survey used by Austin Title I so their data may be used. They used the most recent version of the SCSN developed assessment tool. Mr. Hamilton will provide to the committee a proposed budget for incentives at various levels to see how many people can be surveyed. The committee agreed on January as a goal for starting the assessment process.

The meeting was adjourned at 2:06 p.m.



Central Texas HIV Planning Council Needs Assessment Committee

Meeting Minutes January 4, 2006

Members Present: Rita Castro (Chair), Sissy Riffin, Eric Todd,
Tony Matcek, Bobby Holtman

BVCOG Staff Present: Christopher Hamilton

The Needs Assessment Committee met via conference call to discuss a proposal by the Texas A&M University System Health Science Center School of Rural Public Health (TAMUSHSC SRPH) to conduct the needs assessment. Since this is not a regularly scheduled meeting, attendance does not count against members.

The meeting came to order at 1:15 p.m.

The committee discussed the number of surveys that would be needed to reach statistical significance for the HSDAs. Based on one model of calculation, Austin: 460 PLWHA live outside the EMA, 8 had already been surveyed. Without discussing the actual number to survey here, the committee agreed more representation was needed from outside the EMA.

Bryan: 290 PLWHA, calculated 166 surveys needed.

Concho Plateau: 94 PLWHA, calculated 76 surveys needed.

Temple: 344 PLWHA, calculated 182 surveys needed.

Waco: 354 PLWHA, calculated 185 surveys needed.

The school's proposal is for \$20,000, to conduct 240 surveys, perform the analysis, and write the report. The cost quoted does include \$10 incentives for each of the 240 survey respondents.

Mr. Hamilton noted that once the committee agreed to the proposal, it would be possible to meet with the project statistician to determine the most accurate sample size needed.

Mr. Todd noted that the committee should probably have a conference call with the project leaders about what numbers they are hoping to get, what they need, etc...

Ms. Castro noted that in the past, the incentive amount was larger, and thought should be given to the amount this time. There was general agreement among committee members that \$10 for an incentive is low, but the amount would depend on the number of surveys needed, as calculated by the statistician.

Mr. Todd asked how the funds were available for the school to conduct the assessment. DSHS awards a grant to BVCOG that pays for BVCOG staff salaries, benefits, rent, utilities, (operating expenses), etc..., and planning council activities/support. Due to cost

saving measures by the council, as well as BVCOG employees, in addition to salary savings from reduced staff, and unrealized expenditures, additional funds were available from the BVCOG portion of the budget into the planning council portion of the budget.

The committee agreed to contract the needs assessment to the Texas A&M University System Health Science Center School of Rural Public Health.

Mr. Hamilton will check with committee members regarding their availability for a teleconference with SRPH project managers, for a conference to be held in the following weeks.

The meeting was adjourned at 1:30 p.m.



Central Texas HIV Planning Council Needs Assessment Committee

Meeting Minutes January 18, 2006

Members Present: Rita Castro (Chair), Eric Todd, Tony Matcek, Robert Holtman, Janet Cates, Leatrice Bines

BVCOG Staff Present: Christopher Hamilton, Crystal Crowell

Guests: Heather Clark, School of Rural Public Health

The Needs Assessment Committee met via conference call with the assessment project leader to discuss the work plan and methods.

The meeting came to order at 2:06 p.m.

Ms. Clark briefed the committee on the proposals to BVCOG and the final proposal, 300 surveys to be conducted, including a snowball sample to survey people out of care. She noted that the data that was gathered by the Austin Title I council will be used in the analysis.

A question was raised if the survey was being mailed out. Ms. Clark indicated that the survey was not going to be mailed out, but an informational letter would be mailed. Another question was raised about privacy issues and that of consent. It was noted that clients agreeing to receive mail or phone calls have given their consent for their agency and BVCOG, but it does not extend to the School of Rural Public Health (SRPH). One idea to preserve the confidentiality is for BVCOG to mail informational letters to clients. Ms. Cates stated that her clients may be less likely to open or participate in anything that is not coming from their provider. Ms. Castro also noted similar concerns. Ms. Clark said that it would be possible to have the letter sent by each client's provider, to address both the issues of confidentiality and the familiarity of the agency.

Ms. Clark then talked about the informational letter that will be sent out. It will contain three options for clients to participate, 1) clients can mail in the consent to participate indicating a specific date and time to be contacted to participate, 2) clients can call a toll free number during business hours and participate, or 3) clients can schedule a face to face interview. Ms. Clark also noted that there is a need to follow up with clients if they have not responded in order to increase the rate of participation.

Ms. Clark also described the snowball sample that would be conducted. The sample method relies on a word of mouth chain. Clients would be asked if they know of someone not receiving care. If the client does, they will be asked to refer that person to the surveyors for participation. If the out of care person completes the survey, the client that referred will receive an additional incentive. The client may refer up to five out of care people. A question was asked as to what constitutes out of care. Mr. Hamilton noted the HRSA definition which includes one of the

following conditions 1) have not received a CD4 test in one year, 2) have not received a viral load test in one year, or 3) have not received ART or HAART medications in one year.

Ms. Clark said that the face to face interviews would take place in a location other than where clients receive services. She said that hotel conference rooms may be used or other similar locations. She also noted that the first thing she must do is submit the survey and proposal to the Institutional Review Board at Texas A&M, which must happen before any work may be started.

A question was asked as to how many surveys would be conducted based on the total number of 300. For the Austin HSDA, the focus will be on rural clients, to help augment the data already collected from that HSDA.

Austin HSDA: 12 surveys

Bryan – College Station HSDA: 77 surveys

Concho Plateau HSDA: 27 surveys

Temple – Killeen HSDA: 64 surveys

Waco HSDA: 90 surveys

Ms. Castro reiterated the idea that \$10 incentives might be too low to really encourage participation in the survey and suggested that the committee and project director think about raising the amount.

Ms. Cates and Ms. Castro noted their concerns of preserving client confidentiality and the hesitancy of some clients to open mail or participate in something that does not have the name of the client's agency on it. They did agree to go forward with the assessment process.

Mr. Hamilton indicated that he will be sending the committee more information about the process as it becomes available.

The meeting was adjourned at 2:34 p.m.

Not part of official minutes,

Note to Committee Regarding Follow-Up on Issues Identified:

After the meeting, Ms. Crowell and Mr. Hamilton contacted the Austin Title I council and the Department of State Health Services (DSHS) to see how clients were recruited for the surveys but client confidentiality was preserved. The Title I Administrative Agent representative noted that a database of clients was not used, as is proposed here. They posted flyers and went to AIDS Service Organizations directly to recruit participants. The Planner from DSHS noted that in other areas similar to the central Texas area, the providers mailed out the informational letters, thus preserving confidentiality and clients receiving information from someone they know. Ms. Crowell and Mr. Hamilton then had a discussion with the Project Director from Texas A&M, Heather Clark, and decided to work through the providers to recruit client participation. Ms. Crowell and Mr. Hamilton also calculated that raising the incentive amount to \$15 could be worked into the budget; it is within the funds available. A draft of the letter that will be sent to clients will go to providers first to receive feedback before actually being mailed to clients by their providers. Providers will not incur any costs associated with the project, all postage and supplies will be provided by BVCOG.

Utilization by Service Category

HSDA: Bryan-College Station

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unduplicated Clients			Units of Service		
		This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	Ambulatory/Outpatient Medical Care	34	25	56	97	62	233
2	Food Bank	46	50	69	125	134	355
3	Drug Reimbursement	14	17	37	33	54	146
4	Transportation	47	54	93	242	275	795
5	Oral Health	0	3	19	0	10	33
8	Case Management	136	123	156	2,378	1,965	6,219
12	Substance Abuse - Residential	0	0	0	0	0	0
15	Health Insurance	8	0	8	21	0	21
16	Emergency Assistance	2	0	2	2	0	2
20	Mental Health Services	0	0	0	0	0	0
22	Substance Abuse - Outpatient	0	0	0	0	0	0
	Other Services	0	2	2	0	2	2
	HOPWA: Short-Term	4	9	18	4	10	21
	HOPWA: Long-Term	14	16	18	40	53	132

Total clients served this quarter: 136

Unduplicated clients served year to date: 157

New Clients this Quarter: 11

Clients discharged this quarter: 15

**Bryan-College Station HSDA Utilization
by Service Category
(Detailed)**

HSDA: Bryan-College Station

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unit of Service	Unduplicated Clients			Units of Service		
			This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	All Ambulatory Outpatient Medical Care		34	25	56	97	62	233
	Ambulatory/Outpatient Medical Care	per visit		3	11		8	16
	Dermatology	per visit						
	Infectious Disease	per visit	22	16	39	24	21	62
	Neurology	per visit						
	Ob/Gyn	per visit						
	Oncology	per visit						
	Ophthalmology	per visit	3	4	7	4	6	10
	Other Speciality	per visit	6		6	13		17
	Radiology	per visit	5		6	5		6
	Viral Load Test	per test	25	6	37	25	7	48
CD4 T cell count	per test	25	7	39	25	8	50	
Laboratory- Service (not CD4 or viral load)	per test	1	4	8	1	12	24	
2	Food Bank/ Home Delivered Meals		46	50	69	125	134	355
	Food Pantry/Voucher Visit Without Nutritional Supplements	per visit	43	44	65	96	95	281
	Food Pantry/Voucher Visit WITH Nutritional Supplements	per visit	19	22	31	29	39	74
	Meals - Home-Delivered	per person per meal						
	Meals - Congregate	per person per meal						
3	Drug Reimbursement	per prescription	14	17	37	33	54	146
4	Transportation		47	54	93	242	275	795
	Transportation-Delivery	per one way	41	51	81	163	197	537
	Transportation-Staff car	per one way	2	2	3	4	4	12
	Transportation-Bus token/pass	per one way	5	6	11	38	30	70
	Transportation-Gas voucher	per one way						
	Transportation-Taxi Cab	per one way						
Transportation-Van/car ride	per one way	6	9	32	41	44	176	
5	All Oral Health Services		0	3	19	0	10	33
	Preventive Oral Health Services (prophylaxis)	per visit						
	Dental Specialty	per visit		2	2		7	7
	Dental-Routine Treatment	per visit		1	17		3	26
8	All Case Management services		136	123	156	2,378	1,965	6,219
	Disease Management	15 min. periods						
	Social Case Management	15 min. periods	136	123	156	2,378	1,965	6,219
15	Health Insurance Payment	per payment	8	0		21	0	21
	Ambulatory/Outpatient Medical Care	per payment (copay)						
	Insurance-Medical	(premium/deductible)	1		1	5		5
	Oral Health Care	per payment (copay)						
	Insurance-Oral Health Care	(premium/deductible)						
	Drug Reimbursement	per payment (copay)	5		5	9		9
	Insurance-Prescription Drugs	(premium/deductible)	2		2	7		7
	Medicare/Medicaid Supplement	per payment (prem/deduct/copay)						
Other Health Insurance (RW & SS)	per payment (prem/deduct/copay)							
16	Emergency Financial Assistance / Emergency Assistance		2	0	2	2	0	2
	Emergency Assist.-Food	per visit						
	Emergency Assist.- Medication	per prescription						
	Emergency Assist.-Utilities	per transact	2		2	2		2
	Other Services			2	2		2	2
	Emergency Assistance - House Items	per transact		2	2		2	2
	Durable Medical Equipment	per item dispensed						
	Oral Health Care	per payment (copay)						
	Employment Assistance	per 15 minutes						
	Translation/Interpretation - Interpersonal	per 15 minutes						
	Translation/Interpretation - Document	per 15 minutes						
	HOPWA: Emergency Assistance (Short-Term Assistance)		4	9	18	4	10	21
	Mortgage Payment	per payment	1	1	1	1	1	2
	Rent Payment	per payment	2	1	4	2	1	4
	Utility Payment	per payment	1	7	14	1	8	15
	HOPWA: Rental Assistance (Long-Term Assistance)		14	16	18	40	53	132
	Rental/Utility Assistance	per payment	14	16	18	40	53	132

* 2004-2005 priority numbers indicate that the category is funded by Bryan White 0405 or State Services 04-132

Bryan HSDA October – December 2005

On January 1, 2005, the data reporting software used by providers in Texas changed from COMPIS to ARIES as well as a change in taxonomy for service categories. The result of this change is a shift in reporting for some categories. Eleven new clients were added this quarter. All comparisons are to the previous quarter, July - September 2005. Ryan White (RW) should be 75 % spent, State Services (SS) should be at 25 % spent.

Ambulatory/Outpatient Medical Care: Last quarter there were 25 clients with 62 units, this quarter there are 34 clients with 97 units. The increase is attributed to the eleven new clients being seen by the agency. RW is 76 % spent. No SS funding of this category.

Food Bank: Last quarter there were 50 clients with 134 units, this quarter there are 46 clients with 125 units. No RW funding of this category. SS is 9 % spent. The provider states that money that was donated for food was used first, resulting in lower expenditures.

Drug Reimbursement: Last quarter there were 17 clients with 54 units, this quarter there are 14 clients with 33 units. The provider notes that there were fewer changes in medications, more stabilized medication regimens, resulting in lower utilization. No RW funding of this service. SS is 22 % spent.

Transportation: Last quarter there were 54 clients with 275 units, this quarter there are 47 units with 242 units. RW is 68 % spent. SS is 15 % spent.

Oral Health: Last quarter there were 3 clients with 10 units, this quarter there are no clients without any units of service. No RW funding of this service. SS is 3 % spent.

HOPWA: HOPWA short term: Last quarter there were 9 clients with 10 units, this quarter there are 4 clients with 4 units. Long term: Last quarter there were 16 clients with 53 units. This quarter there are 14 clients with 40 units. HOPWA funds are 76 % spent (should be 75 %).

Case Management: Last quarter there were 123 clients with 1965 units, this quarter there are 136 clients with 2378 units. The provider notes that due to the new clients and some clients changing case managers, there was an increase in units. RW is 67 % spent. No SS funding of this service.

Health Insurance Payment: Last quarter there were neither clients nor utilization. This quarter there are 8 clients with 21 units. This service was not funded in the last quarter, so the service is now available. No RW funding of this service. SS is 22 % spent.

Emergency Financial Assistance:

Last quarter this service was not funded, so there was no utilization. This quarter there are 2 clients with 2 units. No RW funding of this service. SS is 0 % spent.

Home Health:

No reported utilization for this quarter or last. This service was not funded in the reported quarter.

Additional Information**New funding or client needs affecting expenditures, priorities, or funding needs:**

None at this time.

Waiting lists or requests for services not currently offered or funded:

HOPWA long-term has one person on the waiting list.

Quality assurance activities this quarter (including committee meetings, improvement of client services, client satisfaction surveys, client focus groups, client file reviews, staff trainings, etc.):

Case Management staff participated in an in-service provided by Project Unity on 8-19-2005 on Documentation. All staff participated in an in-service on Reporting Child Sexual Assault provided by CPS on 8-22-2005.

Additional quality assurance measures for the quarter included compliance checks for complete data entry into Aries; reviewing, signing and sealing case notes.

Improvements made to client services and service delivery this quarter:

Case Managers continue to review ARIES taxonomy to ensure compliance with regulations.

**Concho Plateau HSDA Utilization
by Service Category**

HSDA: Concho Plateau

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unduplicated Clients			Units of Service		
		This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	Ambulatory/Outpatient Medical Care	28	34	45	99	144	355
2	Case Management	47	49	54	1803	2267	6248
3	Drug Reimbursement	20	25	36	35	84	211
4	Housing Services	44	19	47	425	164	825
4	Food Bank	26	31	33	122	135	321
5	Oral Health	1	1	5	2	1	7
7	Buddy/Companion	45	15	47	126	36	180
8	Emergency Assistance	1	1	2	1	1	2
9	Transportation	13	14	21	47	87	204
10	HERR	46	45	53	268	94	720
11	Health Insurance	2	1	3	10	11	29
16	Client Advocacy	0	0	0	0	0	0
18	Mental Health	4	4	7	5	6	24
22	Substance Abuse - Outpatient	0	0	0	0	0	0
23	Substance Abuse - Residential	0	0	0	0	0	0
	HOPWA: Short-Term	1	2	6	1	4	13
	HOPWA: Long-Term	11	12	14	31	35	103

Total clients served this quarter: 48

Unduplicated clients served year to date: 55

New Clients this Quarter: 1

Clients discharged this quarter: 1

**Concho Plateau HSDA Utilization
by Service Category
(Detailed)**

HSDA: Concho Plateau

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unit of Service	Unduplicated Clients			Units of Service		
			This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	All Ambulatory Outpatient Medical Care		28	34	45	99	144	355
	Ambulatory/Outpatient Medical Care	per visit	20	27	41	41	53	120
	Dermatology	per visit						
	Infectious Disease	per visit						
	Neurology	per visit						
	Ob/Gyn	per visit						
	Oncology	per visit						
	Ophthalmology	per visit	7	3	15	9	3	17
	Other Speciality	per visit						
	Radiology	per visit						
2	All Case Management Services		47	49	54	1803	2267	6,248
	Disease Management	15 min. periods	45	45	52	776	1059	3,052
	Social Case Management	15 min. periods	45	48	53	1027	1208	3,196
3	Drug Reimbursement	per prescrip	20	25	36	35	84	211
4	Housing & Housing-Related Services		44	19	47	425	164	825
	Short-Term	per day						
	Emergency	per day		1	3		1	7
4	Housing Referral/Housing Related Services	15 min. periods	44	19	47	425	163	818
	Food Bank/ Home Delivered Meals		26	31	33	122	135	321
	Food Pantry/Voucher Visit Without Nutritional Supplements	per visit	26	31	33	122	135	318
	Food Pantry/Voucher Visit WITH Nutritional Supplements	per visit			3			3
	Meals - Home-Delivered	per person per meal						
5	All Oral Health Services		1	1	5	2	1	7
	Preventive Oral Health Services (prophylaxis)	per visit						
	Dental Specialty	per visit						
7	Buddy/companion services	per hour	45	15	47	126	36	180
	Dental-Routine Treatment	per visit	1	1	5	2	1	7
8	Emergency Financial Assistance / Emergency Assistance		1	1	2	1	1	2
	Emergency Assist.-Food	per visit						
	Emergency Assist.- Medication	per prescrip						
	Emergency Assist.-Utilities	per transact	1	1	2	1	1	2
9	Transportation		13	14	21	47	87	204
	Transportation-Delivery	per one way	12	12	19	38	41	114
	Transportation-Staff car	per one way	2	3	6	5	31	47
	Transportation-Bus token/pass	per one way	1	1	2	2	1	8
	Transportation-Gas voucher	per one way						
	Transportation-Taxi Cab	per one way	1	4	5	2	14	35
10	Health Education and Risk Reduction		46	45	53	268	34	720
	Prevention Case Mgmt for HIV+s - Individual Intervention	15 min. periods		1	2		4	12
	Group-Level Intervention	15 min. periods	46	45	53	268	90	708
11	Health Insurance Payment	per payment	2	1	3	10	11	29
	Ambulatory/Outpatient Medical Care	per payment (copay)						
	Insurance-Medical	per payment (premium/deductible)			1			1
	Oral Health Care	per payment (copay)						
	Insurance-Oral Health Care	per payment (premium/deductible)						
	Drug Reimbursement	per payment (copay)	2	1	2	10	8	18
	Insurance-Prescription Drugs	per payment (premium/deductible)						
	Medicare/Medicaid Supplement	per payment (prem/deduct/copay)						
Other Health Insurance (RW & SS)	per payment (prem/deduct/copay)		1	2		3	10	
16	Client Advocacy	15 min. periods	0	0	0	0	0	0
18	All Mental Health Services	15 min. periods	4	4	7	5	6	24
	Individual	per visit	4	4	7	5	6	24
	Group	per visit						
	Psychiatric Evaluation	per visit						
	Psychiatric Follow-Up	per visit						
	HOPWA: Emergency Assistance (Short-Term Assistance)		1	2	6	1	4	13
	Mortgage Payment	per payment						
	Rent Payment	per payment			1			1
	HOPWA: Rental Assistance (Long-Term Assistance)		11	12	14	31	35	103
	Utility Payment	per payment	1	2	5	1	4	12
	Rental/Utility Assistance	per payment	11	12	14	31	35	103

Concho Plateau HSDA October - December 2005

On January 1, 2005, the data reporting software used by providers in Texas changed from COMPIS to ARIES as well as a change in taxonomy for service categories. The result of this change is a shift in reporting for some categories. One new client was added this quarter. All comparisons are to the previous quarter, July - September 2005. Ryan White (RW) should be 75 % spent, State Services (SS) should be 25 % spent.

Ambulatory/Outpatient Medical Care: Last quarter there were 34 clients with 144 units, this quarter there are 28 clients with 99 units. The decrease was caused by some clients no longer with the agency. Ryan White is 100 % spent because of some high needs clients and a gap in grant cycles that caused this service category to be spent more rapidly. No SS funding of this category.

Case Management: Last quarter there were 49 clients with 2267 units, this quarter there are 47 clients with 1803 units. As stated above, the decrease is attributable to the decreased number of clients. RW is 80 % spent. No SS funding of this category.

Drug Reimbursement: Last quarter there were 25 clients with 84 units, this quarter there were 20 clients with 35 units. Since there were fewer clients, this service also experienced a decrease. RW is 48 % spent. No SS funding of this category.

Housing and Housing Related Services: Last quarter there were 19 clients with 164 units. This quarter there are 44 clients with 425 units. The increase is due to the provider using this service to promote HOPWA programs to clients. RW is 80 % spent. No SS funding of this category.

HOPWA: HOPWA short term: last quarter there were 2 clients with 4 units of service, this quarter there is 1 client with 1 unit of service. HOPWA long term: last quarter there were 12 clients with 35 units, this quarter there are 11 clients with 31 units. HOPWA funds are 76 % spent (should be 75 %).

Food Bank: Last quarter there were 31 clients with 135 units, this quarter there are 26 clients with 122 units. No RW funding of this category. SS is 25 % spent.

Oral Health: Last quarter there was 1 client with 1 unit, this quarter there is 1 client with 2 units. No RW funding of this category. SS is 12 % spent. The provider notes a decreased request by clients for this service during the quarter.

Buddy Companion Services: Last quarter there were 15 clients with 36 units, this quarter there are 45 clients with 126 units. No RW funding of this category. SS is 44 % spent.

Emergency Financial Assistance: Last quarter there was one client with one unit, this quarter there is one client with one unit. No RW funding of this service. SS is 0 % spent. The provider has historically not provided this service.

Transportation: Last quarter there were 14 clients with 87 units, this quarter there are 13 clients with 47 units. Lower need by clients, including the loss of one client that used a high amount of this service. RW is 93 % spent. Higher needs clients prior to this quarter increased expenditures. No SS funding of this service.

Health Education, Risk Reduction: Last quarter there were 45 clients with 94 units, this quarter there are 46 clients with 268 units. During the previous quarter, the newsletter had stopped circulation, resulting in deflated numbers. This quarter is more accurate of regular newsletter distribution. The provider also notes increased referral to prevention case management through the medical clinic. No RW funding of this service. SS is 29 % spent.

Health Insurance: Last quarter there was 1 client with 11 units, this quarter there are 2 clients with 10 units. No RW funding of this service. SS is 26 % spent.

Client Advocacy:

No reported utilization for this quarter or last. This service was not funded in the reported quarter.

Mental Health: Last quarter there were 4 clients with 6 units, this quarter there are 4 clients with 5 units. No RW funding of this service. SS is 0 % spent. The provider notes that there was little need that resulted in expenditures, but does anticipate using all funds in this category over the course of the grant year.

Additional Information**New funding or client needs affecting expenditures, priorities, or funding needs:**

Due to a shift in monies by the CTHPC, there was a gap left from April 1-August 31, 2005 when mental health, oral health and the buddy companion programs could not be funded. Early Intervention monies were depleted prior to the end of this reporting period so no monies could be used to fund these services either.

Waiting lists or requests for services not currently offered or funded:

There are no waiting lists at this time.

Quality assurance activities this quarter (including committee meetings, improvement of client services, client satisfaction surveys, client focus groups, client file reviews, staff trainings, etc.):

The Director of Client Services conducts a random review of social services charts and records any discrepancies to pass along to individual case managers at the bimonthly client services meetings. Issues are addressed at this meeting and each case manager is given 72 hours to address said discrepancies.

Improvements made to client services and service delivery this quarter:

Satisfaction surveys mailed out by client advocate to assess delivery of services.

Utilization by Service Category

HSDA: Temple-Killeen

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unduplicated Clients			Units of Service		
		This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	Ambulatory/Outpatient Medical Care	90	95	144	312	386	1,043
2	Case Management	152	146	181	3554	3599	11,489
3	Drug Reimbursement	59	46	87	220	144	514
4	Food Bank	86	81	120	272	296	858
5	Oral Health Care	13	10	28	20	12	44
6	Transportation	91	95	137	267	420	1,078
7	HERR	0	0	0	0	0	0
11	Emergency Assistance	0	0	0	0	0	0
21	Health Insurance Payment	7	10	15	25	41	116
15	Mental Health	0	0	0	0	0	0
19	Substance Abuse - Outpatient	0	0	0	0	0	0
20	Substance Abuse - Residential	0	0	0	0	0	0
13	Permanency Planning	0	0	0	0	0	0
	HOPWA: Short-Term	6	8	19	23	15	54
	HOPWA: Long-Term	21	15	28	44	40	114

Total clients served this quarter: 153

Unduplicated clients served year to date: 181

New Clients this Quarter: 10

Clients discharged this quarter: 9

**Temple HSDA Utilization
by Service Category
(Detailed)**

HSDA: Temple-Killeen

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unit of Service	Unduplicated Clients			Units of Service		
			This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	All Ambulatory Outpatient Medical Care		90	95	144	312	386	1,043
	Ambulatory/Outpatient Medical Care	per visit	89	94	143	302	376	1015
	Dermatology	per visit						
	Infectious Disease	per visit						
	Neurology	per visit						
	Ob/Gyn	per visit						
	Oncology	per visit						
	Ophthalmology	per visit	10	10	28	10	10	28
	Other Speciality	per visit						
	Radiology	per visit						
2	All Case Management services		152	146	181	3,554	3,599	11,489
	Disease Management	15 min. periods						
	Social Case Management	15 min. periods	152	146	181	3,554	3,599	11,489
3	Drug Reimbursement	per prescrip	59	46	87	220	144	514
4	Food Bank/ Home Delivered Meals		86	81	120	272	296	858
	Food Pantry/Voucher Visit Without Nutritional Supplements	per visit	84	77	115	148	154	452
	Food Pantry/Voucher Visit WITH Nutritional Supplements	per visit	16	19	29	124	142	406
	Meals - Home-Deliverec	per person per meal						
5	All Oral Health Services		13	10	28	20	12	44
	Preventive Oral Health Services (prophylaxis)	per visit						
	Dental Specialty	per visit						
6	Transportation		91	95	137	267	420	1,078
	Transportation-Delivery	per one way						
	Transportation-Staff car	per one way						
	Transportation-Bus token/pass	per one way	9	9	18	54	191	395
	Transportation-Gas voucher	per one way	84	89	127	213	229	683
	Transportation-Taxi Cat	per one way						
7	Health Education and Risk Reduction		0	0	0	0	0	0
	Prevention Case Mgmt for HIV+s - Individual Intervention	15 min. periods						
	Group-Level Intervention	15 min. periods						
11	HOPWA: Emergency Assistance (Short-Term Assistance)		6	8	19	23	15	54
	Mortgage Payment	per payment						
	Rent Payment	per payment	4	6	12	7	7	19
	Utility Payment	per payment	6	5	15	16	8	35
11	HOPWA: Rental Assistance (Long-Term Assistance)		21	15	28	44	40	114
	Rental/Utility Assistance	per payment	21	15	28	44	40	114
11	Emergency Financial Assistance / Emergency Assistance		0	0	0	0	0	0
	Emergency Assist.-Food	per visit						
	Emergency Assist.- Medication	per prescrip						
	Emergency Assist.-Utilities	per transact						
13	Permanency Planning	per hour	0	0	0	0	0	0
13	Mental Health	15 min. periods	0	0	0	0	0	0
	Individual	per visit						
	Group	per visit						
	Psychiatric Evaluation	per visit						
	Psychiatric Follow-Up	per visit						
13	Health Insurance Payment	per payment	7	10	15	25	41	116
	Ambulatory/Outpatient Medical Care	per payment (copay)						
	Insurance-Medical	per payment (premium/deductible)	2	1	4	5	3	15
	Oral Health Care	per payment (copay)			1			1
	Insurance-Oral Health Care	per payment (premium/deductible)						
	Drug Reimbursement	per payment (copay)	6	10	12	20	38	100
	Insurance-Prescription Drugs	per payment (premium/deductible)						
	Medicare/Medicaid Supplement	per payment (prem/deduct/copay)						
Other Health Insurance (RW & SS)	per payment (prem/deduct/copay)							

Temple – Killeen HSDA October - December 2005

On January 1, 2005, the data reporting software used by providers in Texas changed from COMPIS to ARIES as well as a change in taxonomy for service categories. The result of this change is a shift in reporting for some categories. Ten new clients were added this quarter. All comparisons are to the previous quarter, July - September 2005. Ryan White (RW) should be 75 % spent, State Services (SS) should be 25 % spent.

Ambulatory/Outpatient Medical Care: Last quarter there were 95 clients with 386 units. This quarter there are 90 clients with 312 units. RW is 57 % spent. This category is under spent because projected utilization for vision care did not occur. The provider does note that they expect to use all funds in the service category. No SS funding of this category.

Case Management: Last quarter there were 146 clients with 3599 units, this quarter there are 152 clients with 3554 units. RW is 76 % spent. No SS funding of this category.

Drug Reimbursement: Last quarter there were 46 clients with 144 units. This quarter there are 59 clients with 220 units. Some increase was attributed to seasonal variation, some attributed to filling prescriptions before clients received medications from THMP. RW is 85 % spent, and SS is 27 % spent.

Food Bank: Last quarter there were 81 clients with 296 units. This quarter there are 86 clients with 272 units. No RW funding of this service. SS is 28 % spent.

Oral Health: Last quarter there were 10 clients with 12 units. This quarter there are 13 clients with 20 units. The increase is only attributable to higher need by clients, increased acute pain episodes. The cost for these visits was also higher. No RW funding of this service. SS is 40 % spent.

Transportation: Last quarter there were 95 clients with 420 units. This quarter there are 91 clients with 267 units. Due to a route no longer in service, utilization dropped in bus tokens. No RW funding of this service. SS is 25 % spent.

Health Education, Risk Reduction:

Last quarter and this quarter there was neither utilization nor expenditures.

HOPWA: Short term: Last quarter there were 8 clients with 15 units. This quarter there are 6 clients with 23 units. Long term: Last quarter there were 15 clients with 40 units. This quarter there are 21 clients with 44 units. The increase in short term is due to seasonal variation. HOPWA funds are 61 % spent (should be 75 %).

Emergency Financial Assistance:

Last quarter and this quarter there was neither utilization nor expenditures.

Permanency Planning:

Last quarter and this quarter there was neither utilization nor expenditures.

Mental Health:

Last quarter and this quarter there was neither utilization nor expenditures.

Health Insurance Payment: Last quarter there were 10 clients with 41 units. This quarter there were 7 clients with 25 units. The decrease in units is due to some clients having surpassed COBRA eligibility. No RW funding of this service. SS is 12 % spent.

Home Health Care:

Last quarter and this quarter there was neither utilization nor expenditures.

Additional Information**New funding or client needs affecting expenditures, priorities, or funding needs:**

Slight budget adjustments may be requested in January if the current trend in ophthalmology usage continues. Most likely, any excess money would be shifted to transportation.

Waiting lists or requests for services not currently offered or funded:

None at the present time.

Quality assurance activities this quarter (including committee meetings, improvement of client services, client satisfaction surveys, client focus groups, client file reviews, staff trainings, etc.):

The HIVProgram Manager/Case Management Supervisor:

- (1) conducted 13 case management staff meetings,
- (2) randomly participated in 4 telephone conversation with clients and case managers,
- (3) reviewed the total client roster monthly with case managers to identify and contact clients not heard from in 90 days,
- (4) monitored the intake of 2 new clients on September 29 and September 30,
- (5) observed case manager/client interactions on August 15 and August 17,
- (6) used birth date report each month to update client records regarding income and residency documents, as well to review/update care plan,
- (7) discussed service/expenditure data with HIV Program Director, monthly,
- (8) reviewed/approved individual client expenses and Case Management notes, daily.

Improvements made to client services and service delivery this quarter:

The CTSS policy/procedure regarding Child Abuse Screening, Documentation, and Reporting was undated to reflect the recent amendments to House Bill 1970 regarding the reporting of suspected child abuse and neglect.

Utilization by Service Category

HSDA: Waco

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unduplicated Clients			Units of Service		
		This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	Ambulatory/Outpatient Medical Care	75	13	83	131	76	349
2	Oral Health	8	8	19	17	13	53
3	Case Management	130	131	180	872	796	2,604
4	Drug Reimbursement	28	32	57	114	129	361
5	Nutritional Counseling	0	0	0	0	0	0
6	Food Bank	110	104	138	365	317	982
7	Transportation	55	45	83	288	312	944
12	Emergency Assistance	7	10	16	8	13	21
13	Substance Abuse - Outpatient	0	0	0	0	0	0
14	Substance Abuse - Residential	0	0	0	0	0	0
16	Health Insurance Payment	6	8	8	17	22	51
23	Mental Health	0	0	0	0	0	0
	HOPWA: Short-Term	29	23	45	48	35	106
	HOPWA: Long-Term	16	17	20	46	49	132

Total clients served this quarter: 148

Unduplicated clients served year to date: 186

New Clients this Quarter: 12

Clients discharged this quarter: 20

**Waco HSDA Utilization by Service Category
(Detailed)**

HSDA: Waco

Quarter: Oct, Nov, Dec 2005

Priority	Service Categories	Unit of Service	Unduplicated Clients			Units of Service		
			This Quarter	Last Quarter	Year to Date	This Quarter	Last Quarter	Year to Date
1	All Ambulatory Outpatient Medical Care		75	13	83	131	76	349
	Ambulatory/Outpatient Medical Care	per visit	72	8	77	87	13	112
	Dermatology	per visit						
	Infectious Disease	per visit						
	Neurology	per visit						
	Ob/Gyn	per visit						
	Oncology	per visit						
	Ophthalmology	per visit	7	3	17	11	4	23
	Other Speciality	per visit		7	12		8	17
	Radiology	per visit						
	Viral Load Test	per test			6			6
CD4 T cell count	per test			6			6	
Laboratory- Service (and test except CD4 or viral load)	per test	5	8	18	33	51	185	
2	All Oral Health Services		8	8	19	17	13	53
	Preventive Oral Health Services (prophylaxis)	per visit	8	6	17	16	8	38
	Dental Specialty	per visit						
	Dental-Routine Treatment	per visit	1	2	7	1	5	15
3	All Case Management services		130	131	180	872	796	2,604
	Disease Management	15 min. periods						
	Social Case Management	15 min. periods	130	131	180	872	796	2,604
4	Drug Reimbursement	per prescription	28	32	57	114	129	361
5	Nutritional Counseling	15 min. periods	0	0	0	0	0	0
6	Food Bank/ Home Delivered Meals		110	104	138	365	317	982
	Food Pantry/Voucher Visit Without Nutritional Supplements	per visit	91	83	130	205	187	588
	Food Pantry/Voucher Visit WITH Nutritional Supplements	per visit	32	33	44	160	130	394
	Meals - Home-Delivered	per person per meal						
	Meals - Congregate	per person per meal						
7	Transportation		55	45	83	288	312	944
	Transportation-Delivery	per one way	5	7	16	10	27	64
	Transportation-Staff car	per one way	17	17	35	50	61	152
	Transportation-Bus token/pass	per one way	32	24	49	197	213	681
	Transportation-Gas voucher	per one way	11	6	12	31	11	47
	Transportation-Taxi Cab	per one way						
Transportation-Van/car ride	per one way							
	HOPWA: Emergency Assistance (Short-Term Assistance)		29	23	45	48	35	106
	Mortgage Payment	per payment						
	Rent Payment	per payment	11	11	18	14	18	38
	Utility Payment	per payment	22	15	34	34	17	68
	HOPWA: Rental Assistance (Long-Term Assistance)		16	17	20	46	49	132
	Rental/Utility Assistance	per payment	16	17	20	46	49	132
12	Emergency Financial Assistance / Emergency Assistance		7	10	16	8	13	21
	Emergency Assist.-Food	per visit						
	Emergency Assist.- Medication	per prescription		1	1		3	3
	Emergency Assist.-Utilities	per transaction	7	9	15	8	10	18
16	Health Insurance Payment	per payment	6	8	8	17	22	51
	Ambulatory/Outpatient Medical Care	per payment (copay)						
	Insurance-Medical	per payment (premium/deductible)	4	3	5	9	7	23
	Oral Health Care	per payment (copay)						
	Insurance-Oral Health Care	per payment (premium/deductible)						
	Drug Reimbursement	per payment (copay)						
	Insurance-Prescription Drugs	per payment (premium/deductible)	4	6	7	8	15	28
	Medicare/Medicaid Supplement	per payment (prem/deduct/copay)						
Other Health Insurance (RW & SS)	per payment (prem/deduct/copay)							

Waco HSDA October - December 2005

On January 1, 2005, the data reporting software used by providers in Texas changed from COMPIS to ARIES as well as a change in taxonomy for service categories. The result of this change is a shift in reporting for some categories. Twelve new clients were added this quarter. All comparisons are to the previous quarter, July - September 2005. Ryan White (RW) should be 75 % spent, State Services (SS) should be 25 % spent.

Ambulatory/Outpatient Medical Care: Last quarter there were 13 clients with 76 units. This quarter there are 75 clients with 131 units. This increase is due to flu shots being administered during the quarter. RW is 84 % spent. SS is 7 % spent. Under spent in SS because clients are accessing free services at Temple clinic which increases transportation costs.

Oral Health: Last quarter there were 8 clients with 13 units. This quarter there are 8 clients with 17 units. Increase in units attributed to a higher number of requests by clients. RW is 72 % spent. No SS funding of this service.

Case Management: Last quarter there were 131 clients with 796 units. This quarter there are 130 clients with 872 units. The increase in units is due partly to a change in staff, and partly due to annual intakes of clients. RW is 61 % spent, due to being without a staff member for a period of time. SS is 22 % spent.

Drug Reimbursement: Last quarter there were 32 clients with 129 units. This quarter there are 28 clients with 114 units. RW is 24 % spent. SS is 8 % spent. Both are under spent because of faster enrollment in THMP and patient assistance programs.

Nutritional Counseling:

No usage for last quarter or this quarter. RW is 0 % spent. Despite efforts by provider, clients are resistant to using this service. Funds will be reallocated at a later time. No SS funding of this service.

Food Bank: Last quarter there were 104 clients with 317 units. This quarter there are 110 clients with 365 units. RW is 73 % spent. No SS funding of this service.

Transportation: Last quarter there were 45 clients with 312 units. This quarter there are 55 clients with 288 units. More clients are traveling to the Scott & White clinic in Temple. RW is 77 % spent. No SS funding of this service.

HOPWA/Housing Services: Short term: Last quarter there were 23 clients with 35 units. This quarter there are 29 clients with 48 units. The provider has noticed an increased request for utility assistance. HOPWA funds are 73 % spent (should be 75 %).

Psychosocial Support Services:

No usage or funding for last quarter or this quarter.

Emergency Financial Assistance: Last quarter there were 10 clients with 13 units. This quarter there are 7 clients with 8 units. RW is 61 % spent. SS is 12 % spent. Other resources were used prior to funds from this service category, resulting in being under spent.

Health Insurance Payment: Last quarter there were 8 clients with 22 units. This quarter there are 6 clients with 17 units. RW is 64 % spent. No SS funding of this service.

New funding or client needs affecting expenditures, priorities, or funding needs:

Previous quarters, the need for outpatient ambulatory care for out of county clients exceeded our allocation in that category. However, with the opening of the Scott and White HIV Clinic in Temple, our need to assist with ambulatory care has dramatically dropped. With increase of out of county clients traveling to Temple, our transportation funds are being spent at a much faster rate in order to provide gas vouchers to clients. Due to the increase in gas prices we are doubling the value of the gas vouchers.

Waiting lists or requests for services not currently offered or funded:

There continues to be a short waiting list for long term HOPWA. No other waiting lists at this time.

Quality assurance activities this quarter (including committee meetings, improvement of client services, client satisfaction surveys, client focus groups, client file reviews, staff trainings, etc.):

Since last quarter we have had one monitoring meeting and there were several outside agency representatives present. The next meeting is scheduled for October 13, 2005.

Improvements made to client services and service delivery this quarter:

Case managers have been very diligent in meeting or attempting to meet with all the clients to update all of their intake information and complete a current needs assessment. These contacts and attempts continue to be made. The case managers continue to strive for 100% compliance with client TB tests. It appears, from the lack of complaints, that the clients and case managers are beginning to develop good working relationships.

**Expenditures by HSDA:
Ryan White Service Delivery
2005-2006
Oct - Dec**

Should be 75% spent

Austin HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			October	November	December	Cumulative		
1	Ambulatory/Outpatient Medical Care	\$447,829.00	\$18,234.35	\$18,941.26	\$18,191.43	\$150,682.28	\$297,146.72	34%
2	Oral Health	\$8,000.00	\$0.00	\$768.83	\$652.50	\$6,003.00	\$1,997.00	75%
3	Drug Reimbursement	\$98,204.00	\$2,299.17	\$608.56	\$1,515.02	\$85,344.89	\$12,859.11	87%
4	Case Management	\$152,399.00	\$14,707.09	\$17,325.39	\$17,626.52	\$126,181.59	\$26,217.41	83%
7	Transportation Services	\$13,800.00	\$199.17	\$377.50	\$121.34	\$2,120.86	\$11,679.14	15%
LESS PROGRAM INCOME								
DIRECT SERVICES TOTAL		\$720,232.00	\$35,439.78	\$38,021.54	\$38,106.81	\$370,332.62	\$349,899.38	51%
ADMINISTRATIVE COSTS		\$24,419.00	\$1,700.28	\$2,758.40	\$1,642.50	\$16,751.31	\$7,667.69	69%
TOTAL		\$744,651.00	\$37,140.06	\$40,779.94	\$39,749.31	\$387,083.93	\$357,567.07	52%

Bryan-College Station HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			October	November	December	Cumulative		
1	Ambulatory/Outpatient Medical Care	\$22,500.00	\$2,118.65	\$2,242.85	\$2,011.85	\$17,010.19	\$5,489.81	76%
4	Transportation Services	\$9,619.00	\$185.76	-\$679.30	-\$3,113.30	\$6,505.70	\$3,113.30	68%
8	Case Management	\$178,321.00	\$11,389.74	\$16,841.00	\$6,578.62	\$118,837.55	\$59,483.45	67%
LESS PROGRAM INCOME								
DIRECT SERVICES TOTAL		\$210,440.00	\$13,694.15	\$18,404.55	\$5,477.17	\$142,353.44	\$68,086.56	68%
ADMINISTRATIVE COSTS		\$23,381.00	\$2,622.79	\$1,998.97	\$2,221.62	\$6,843.38	\$16,537.62	0%
TOTAL		\$233,821.00	\$16,316.94	\$20,403.52	\$7,698.79	\$149,196.82	\$84,624.18	64%

Concho Plateau HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			October	November	December	Cumulative		
1	Ambulatory/Outpatient Medical Care	\$23,230.00	\$0.00	\$0.00	\$0.00	\$23,230.00	\$0.00	100%
2	Case Management	\$74,597.00	\$10,136.00	\$9,746.00	\$7,942.00	\$59,917.00	\$14,680.00	80%
3	Drug Reimbursement	\$34,206.00	\$1,977.00	\$1,082.00	\$3,025.00	\$16,394.00	\$17,812.00	48%
4	Related Housing Services	\$13,930.00	\$972.00	\$0.00	\$1,024.00	\$11,210.00	\$2,720.00	80%
9	Transportation Services	\$5,139.00	\$0.00	\$0.00	\$0.00	\$4,772.00	\$367.00	93%
LESS PROGRAM INCOME								
DIRECT SERVICES TOTAL		\$151,102.00	\$13,085.00	\$10,828.00	\$11,991.00	\$115,523.00	\$35,579.00	76%
ADMINISTRATIVE COSTS		\$12,402.00	\$930.90	\$200.23	\$782.57	\$12,046.39	\$355.61	97%
TOTAL		\$163,504.00	\$14,015.90	\$11,028.23	\$12,773.57	\$127,569.39	\$35,934.61	78%

**Expenditures by HSDA:
Ryan White Service Delivery
2005-2006
Oct - Dec**

Should be 75% spent

Temple-Killeen HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			October	November	December	Cumulative		
1	Ambulatory/Outpatient Medical Care	\$7,200.00	\$0.00	\$722.00	\$797.00	\$4,138.00	\$3,062.00	57%
2	Case Management	\$173,787.00	\$14,469.09	\$14,754.07	\$14,421.43	\$131,210.71	\$42,576.29	76%
3	Drug Reimbursement	\$56,013.00	\$3,144.48	\$10,550.21	\$11,577.90	\$47,519.53	\$8,493.47	85%
	LESS PROGRAM INCOME							
	DIRECT SERVICES TOTAL	\$237,000.00	\$17,613.57	\$26,026.28	\$26,796.33	\$182,868.24	\$54,131.76	77%
	ADMINISTRATIVE COSTS	\$26,332.00	\$3,966.49	\$2,332.90	\$2,125.02	\$22,024.74	\$4,307.26	84%
	TOTAL	\$263,332.00	\$21,580.06	\$28,359.18	\$28,921.35	\$204,892.98	\$58,439.02	78%

Waco HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			October	November	December	Cumulative		
1	Ambulatory/Outpatient Medical Care	\$6,403.00	\$731.18	\$840.52	\$736.15	\$5,396.75	\$1,006.25	84%
2	Oral Health	\$8,100.00	\$569.00	\$2,568.00	\$145.00	\$5,827.46	\$2,272.54	72%
3	Case Management	\$111,946.00	\$1,829.49	\$4,452.05	\$10,828.48	\$68,235.62	\$43,710.38	61%
4	Drug Reimbursement	\$77,900.00	\$597.89	\$3,316.23	\$1,948.55	\$18,419.62	\$59,480.38	24%
5	Nutritional Counseling	\$2,519.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,519.00	0%
6	Food Bank/Home Delivered Food Supplements	\$45,000.00	\$2,827.50	\$8,262.50	\$0.00	\$32,913.25	\$12,086.75	73%
7	Transportation Services	\$4,800.00	\$0.00	\$1,000.00	\$670.00	\$3,681.00	\$1,119.00	77%
16	Health Insurance	\$12,257.00	\$964.64	\$712.08	\$832.70	\$7,862.77	\$4,394.23	64%
	Emergency Financial	\$5,400.00	\$160.00	\$678.28	\$393.88	\$3,275.05	\$2,124.95	61%
	LESS PROGRAM INCOME							
	DIRECT SERVICES TOTAL	\$274,325.00	\$7,679.70	\$21,829.66	\$15,554.76	\$145,611.52	\$128,713.48	53%
	ADMINISTRATIVE COSTS	\$20,835.00	\$1,405.94	\$2,293.13	\$1,838.35	\$13,677.81	\$7,157.19	66%
	TOTAL	\$295,160.00	\$9,085.64	\$24,122.79	\$17,393.11	\$159,289.33	\$135,870.67	54%

**State Services
2005-2006
Expenditure Report
1st Quarter
Sept-Nov 2005**

Funds should be 25% spent.

Austin HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			Sept	Oct	Nov	Cumulative		
1	Ambulatory / Outpatient Medical Care	\$251,893.62	\$2,601.33	\$2,444.83	\$8,983.96	\$14,030.12	\$237,863.50	6%
3	Drug Reimbursement	\$66,880.70	\$0.00	\$0.00	\$0.00	\$0.00	\$66,880.70	0%
4	Case Management	\$37,046.00	\$393.36	\$0.00	\$1,025.77	\$1,419.13	\$35,626.87	4%
5	Food Bank / Home Delivered / Nutritional Sup	\$4,600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,600.00	0%
7	Transportation Services	\$3,925.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,925.00	0%
TOTAL DIRECT SERVICE		\$364,345.32	\$2,994.69	\$2,444.83	\$10,009.73	\$15,449.25	\$348,896.07	4%
TOTAL ADMINISTRATIVE		\$6,816.00	\$180.37	\$225.51	\$157.09	\$562.97	\$6,253.03	8%
TOTAL		\$371,161.32	\$3,175.06	\$2,670.34	\$10,166.82	\$16,012.22	\$355,149.10	4%

Bryan-College Station HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			Sept	Oct	Nov	Cumulative		
2	Food Bank / Home Delivered / Nutritional Sup	\$4,543.00	\$0.00	\$0.00	\$396.00	\$396.00	\$4,147.00	9%
3	Drug Reimbursement	\$13,573.00	\$0.00	\$2,625.46	\$423.00	\$3,048.46	\$10,524.54	22%
4	Transportation Services	\$21,266.00	\$846.34	\$907.17	\$1,382.94	\$3,136.45	\$18,129.55	15%
5	Oral Health Care	\$1,828.00	\$0.00	\$62.00	\$0.00	\$62.00	\$1,766.00	3%
9	Health Education / Risk Reduction	\$4,542.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,542.00	0%
15	Health Insurance	\$4,986.00	\$0.00	\$553.88	\$553.88	\$1,107.76	\$3,878.24	22%
17	Emergency Financial Assistance	\$4,542.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,542.00	0%
TOTAL DIRECT SERVICE		\$55,280.00	\$846.34	\$4,148.51	\$2,755.82	\$7,750.67	\$47,529.33	14%
TOTAL ADMINISTRATIVE		\$6,274.00	\$140.92	\$122.17	\$976.48	\$1,239.57	\$5,034.43	20%
TOTAL		\$61,554.00	\$987.26	\$4,270.68	\$3,732.30	\$8,990.24	\$52,563.76	15%

Concho Plateau HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			Sept	Oct	Nov	Cumulative		
4	Food Bank / Home Delivered / Nutritional Sup	\$8,415.00	\$450.00	\$845.00	\$845.00	\$2,140.00	\$6,275.00	25%
5	Oral Health Care	\$2,663.00	\$0.00	\$0.00	\$325.00	\$325.00	\$2,338.00	12%
7	Buddy / Companion Services	\$3,478.00	\$421.00	\$550.00	\$550.00	\$1,521.00	\$1,957.00	44%
8	Emergency Financial Assistance	\$1,013.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,013.00	0%
10	Health Education / Risk Reduction	\$6,231.75	\$550.00	\$785.00	\$485.00	\$1,820.00	\$4,411.75	29%
11	Health Insurance	\$20,376.00	\$1,986.00	\$1,741.00	\$1,580.00	\$5,307.00	\$15,069.00	26%
18	Mental Health Services	\$2,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,500.00	0%
TOTAL DIRECT		\$44,676.75	\$3,407.00	\$3,921.00	\$3,785.00	\$11,113.00	\$33,563.75	25%
TOTAL ADMINISTRATIVE		\$9,671.25	\$1,495.06	\$698.43	\$235.99	\$2,429.48	\$7,241.77	25%
TOTAL		\$54,348.00	\$4,902.06	\$4,619.43	\$4,020.99	\$13,542.48	\$40,805.52	25%

**State Services
2005-2006
Expenditure Report
1st Quarter
Sept-Nov 2005**

Funds should be 25% spent.

Temple-Killeen HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			Sept	Oct	Nov	Cumulative		
3	Drug Reimbursement	\$18,125.00	\$370.45	\$2,329.21	\$2,224.95	\$4,924.61	\$13,200.39	27%
4	Food Bank / Home Delivered / Nutritional Sup	\$7,273.00	\$768.20	\$506.00	\$768.20	\$2,042.40	\$5,230.60	28%
5	Oral Health Care	\$9,033.00	\$1,173.00	\$877.00	\$1,555.00	\$3,605.00	\$5,428.00	40%
6	Transportation Services	\$9,737.00	\$880.00	\$800.00	\$800.00	\$2,480.00	\$7,257.00	25%
21	Health Insurance	\$14,488.00	\$650.80	\$510.90	\$513.61	\$1,675.31	\$12,812.69	12%
TOTAL DIRECT		\$58,656.00	\$3,842.45	\$5,023.11	\$5,861.76	\$14,727.32	\$43,928.68	25%
TOTAL ADMINISTRATIVE		\$6,514.00	\$263.13	\$1,065.16	\$286.17	\$1,614.46	\$4,899.54	25%
TOTAL		\$65,170.00	\$4,105.58	\$6,088.27	\$6,147.93	\$16,341.78	\$48,828.22	25%

Waco HSDA

Priority	Services Category	Allocation for 05-06	Expenditures				Remaining Allocated Balance	% Spent
			Sept	Oct	Nov	Cumulative		
1	Ambulatory / Outpatient Medical Care	\$22,224.00	\$509.05	\$187.00	\$808.62	\$1,504.67	\$20,719.33	7%
3	Case Management	\$49,004.00	\$4,509.67	\$2,084.89	\$4,156.32	\$10,750.88	\$38,253.12	22%
4	Drug Reimbursement	\$562.00	\$0.00	\$44.78	\$0.00	\$44.78	\$517.22	8%
12	Emergency Financial Assistance	\$2,327.00	\$0.00	\$0.00	\$290.01	\$290.01	\$2,036.99	12%
TOTAL DIRECT		\$74,117.00	\$5,018.72	\$2,316.67	\$5,254.95	\$12,590.34	\$61,526.66	17%
TOTAL ADMINISTRATIVE		\$6,134.00	\$0.00	\$11.32	\$81.96	\$93.28	\$6,040.72	2%
TOTAL		\$80,251.00	\$5,018.72	\$2,327.99	\$5,336.91	\$12,683.62	\$67,567.38	16%

**HOPWA
2004-2005**

**3rd Quarter Expenditures
Aug - Oct 2004**

Funds should be 75% expended

Austin HSDA

Total Amount Allocated	\$23,421.00
Cumulative Amount Expended	\$14,950.41
Remaining Allocated Balance	\$8,470.59
Percent Expended	63.8%

Category Expenditures (Cumulative)	
Emergency Assistance	\$1,600.00
Rental Assistance	\$3,058.47
Administrative Costs	\$477.93
Other (non admin)	\$2,383.39

Bryan-College Station HSDA

Total Amount Allocated	\$66,386.00
Cumulative Amount Expended	\$50,717.34
Remaining Allocated Balance	\$15,668.66
Percent Expended	76.4%

Category Expenditures (Cumulative)	
Emergency Assistance	\$2,122.30
Rental Assistance	\$15,447.63
Administrative Costs	\$110.08
Other (non admin)	\$0.00

Concho Plateau HSDA

Total Amount Allocated	\$55,130.00
Cumulative Amount Expended	\$42,083.45
Remaining Allocated Balance	\$13,046.55
Percent Expended	76.3%

Category Expenditures (Cumulative)	
Emergency Assistance	\$664.28
Rental Assistance	\$9,958.00
Administrative Costs	\$1,307.45
Other (non admin)	\$0.00

Temple-Killeen HSDA

Total Amount Allocated	\$65,012.00
Cumulative Amount Expended	\$39,787.44
Remaining Allocated Balance	\$25,224.56
Percent Expended	61.2%

Category Expenditures (Cumulative)	
Emergency Assistance	\$4,958.17
Rental Assistance	\$9,390.51
Administrative Costs	\$800.00
Other (non admin)	\$489.74

Waco HSDA

Total Amount Allocated	\$77,377.00
Cumulative Amount Expended	\$56,822.00
Remaining Allocated Balance	\$20,555.00
Percent Expended	73.4%

Category Expenditures (Cumulative)	
Emergency Assistance	\$6,231.68
Rental Assistance	\$14,516.00
Administrative Costs	\$0.00
Other (non admin)	\$0.00

**Brazos Valley Council of Governments
 Budget to Support Planning Processes of the
 Central Texas HIV Planning Council
 Contract Period April 1, 2005-March 31, 2006
 Expenses as of January 31, 2006**

BUDGET CATEGORY	DESCRIPTION	BUDGET	ACTUAL	BALANCE
Travel		\$ 12,737.00	\$ 6,508.88	\$ 6,228.12
Planning Council Travel	To attend monthly Assembly meetings and Committee meetings	\$ 12,737.00	\$ 6,508.88	\$ 6,228.12
Meeting Expenses		\$ 2,800.00	\$ 1,923.43	\$ 876.57
Room rental	For CTHPC meetings	\$ 310.00	\$ -	\$ 310.00
Food	For CTHPC meetings	\$ 1,800.00	\$ 726.61	\$ 1,073.39
Incentives	For consumer members to attend CTHPC meetings	\$ 450.00	\$ 450.00	\$ -
Printing	Printing expenses associated with CTHPC meetings	\$ 100.00	\$ 665.07	\$ (565.07)
Materials and Supplies	Materials and supplies for CTHPC meetings	\$ 140.00	\$ 81.75	\$ 58.25
Other		\$ 26,284.00	\$ 9.74	\$ 26,274.26
Needs Assessment	Contract with the School of Rural Public Health	\$ 24,484.00	\$ -	\$ 24,484.00
Training expenses/ Registration fees	To secure TA and training for CTHPC members	\$ 800.00	\$ 9.74	\$ 790.26
LNATF support	To update NA as needed, recruit members, and promote community involvement	\$ 1,000.00	\$ -	\$ 1,000.00
Total		\$ 41,821.00	\$ 8,442.05	\$ 33,378.95