

Bexar County Hospital District  
San Antonio Transition Grant Area  
Ryan White Part A



# Assessment of the Efficiency of the Administrative Mechanism

September 2020

Completed by:



## Acknowledgements

In preparation for the Bexar County Hospital District (BCHD), Ryan White HIV/AIDS Program (RWHAP) Part A, San Antonio Transitional Grant Area (SATGA), 2019/20 grant year, the Planning Council leadership would like to thank the Recipient's Office, Subrecipients, and Administrative Staff for assisting in the completion of the 2018 Assessment of the Efficiency of the Administrative Mechanism. Over the last 10 years BCHD has developed an extensive grant administration infrastructure that manages more than 35 federal and state funded grants and programs. Specifically related to HIV clients, BCHD has the largest primary and specialty care clinic system, operated in collaboration with numerous community-based clinical and social services providers. BCHD serves over 2,500 HIV clients throughout its network of 19 community clinics.

## The Area We Serve

The SATGA is comprised of four counties in South Central Texas: Bexar (pronounced "Bear"), Comal, Guadalupe and Wilson. Bexar County, home to San Antonio, is the population hub of the region accounting for 85% (1,986,049) of the SATGA's overall population of 2,348,340. Bexar County remains the epicenter of the HIV epidemic, with 98% of new HIV cases and 97% of the HIV prevalence.

According to the US Census Bureau Quick Facts, the SATGA's poverty rate is 15% compared to 12% nationally. Additionally, the SATGA's uninsured rate (17%) is almost double the national average (10%). As of December 31, 2018, there were 6,893 PLWH residing in the SATGA. In 2018, there were 356 new HIV and 149 new AIDS cases. The SATGA has seen an 18% (n=1068) increase in HIV prevalence since 2014. Black, Hispanic and Youth of Color MSM (YoCMSM) (24 years old or younger) communities continue to be disproportionately impacted by HIV. Further analysis indicates 50% of Black MSM are living with HIV and 20% YoCMSM are living with HIV. From 2017 to 2018, new AIDS cases among youth (ages 13-24) increased 100%.

The SATGA funds nine core services and five support services with an 87/13 percent core/support allocation split. Ninety-four percent (94%) of PLWH who receive services reside in Bexar County. Black MSM, Hispanic MSM and Young MSM of Color are served with Minority AIDS Initiative (MAI) funds.

The primary goal and objective of RWHAP is to ensure continuation of high-quality core medical and support services to Persons Living with HIV/AIDS (PLWH) in the four county SATGA, while maintaining and increasing viral suppression rates.

Using the requested funds, the SATGA has proposed a 'point of entry' system that focuses on ensuring creation and maintenance of consistent linkages to primary medical care for Ryan White eligible clients. In support of Ending the HIV Epidemic: A Plan for America (EtHE), the National HIV/AIDS Strategy-Updated to 2020 (NHAS), and the SATGA's Integrated HIV Prevention and Care Plan, the Ryan White Part A (RWPA) program will increase outcomes along the HIV Care Continuum including: linkage to care, retention in care, use of antiretroviral therapy (ART), and ultimately, viral suppression.

Based on the San Antonio HIV Health Services Planning Council (PC) deliberations and allocations, the Recipient's (Bexar County Hospital District (BCHD) dba University Health System (UHS)) office funds 14 Health Resources Services Administration (HRSA) defined service categories (9 core and 5 support). The 14 services

are provided by five subrecipients through an open, competitive request for proposal (RFP) process. In 2016, the SATGA doubled the capacity of outpatient/ambulatory health services (OAHS) subrecipients from two to four. The increase in OAHS capacity has allowed PLWH more options for accessing high-quality HIV care. The 14 service categories funded by RWPA are:

- AIDS Pharmaceutical Assistance
- Early Intervention Services
- Emergency Financial Assistance
- Food Bank/Home Delivered Meals
- Health Insurance Premium and Cost Sharing Assistance
- Medical Case Management (MCM)
- Medical Nutritional Therapy
- Medical Transportation
- Mental Health Services
- Non-Medical Case Management
- Oral Health Services
- Outpatient Ambulatory Health Services
- Referral for Health Care and Support Services
- Substance Abuse – Outpatient

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## EXECUTIVE SUMMARY

### Introduction

The purpose of this project is to conduct the Assessment of the Administrative Mechanism (AAM). Federal legislation requires each Ryan White Part A Planning Council to assess the efficiency of the administrative mechanism. This mean the efficiencies of the Administrative Agent, Bexar County Hospital District (BCHD), to rapidly allocate funds to the areas of greatest need within the SATGA, and at the discretion of the Planning Council, assess the effectiveness of the services offered in meeting the identified needs.

BCHD served as the Administrative Agency (AA) for administering the Ryan White Part A Program (RWPA) for this reporting period. The purpose of the Assessment is to ensure that service prioritization and allocation, as determined by the Planning Council during their Priority Setting and Resource Allocations (PSRA) process are adhered to. The AAM will also assess efficiencies in the AA's ability to procure services through contracting and reimbursement processes. Ultimately, the Planning Council will assess the AA's ability to facilitate access to primary medical care and other ancillary services by Persons Living with HIV.

The Executive Committee of the Planning Council develops the timeline and Scope of Work for the Assessment of the Administration Mechanism for the SATGA. The final Assessment of the Administrative Mechanism report complies with all Federal legislation.

### Project Consultants

The Planning Council elected to conduct the 2019-2020 Assessment of the Administrative Mechanism through a Bexar County sole-source contractual arrangement with Collaborative Research (CR). CR has a history of working with Bexar County BCHD, SATGA RWPA/B, State Services and HOPWA programs. This experience exhibits the familiarity of the contractor with the history and evolving quality improvement of the Administrative Mechanism.

# ASSESSMENT OF THE ADMINISTRATIVE MECHANISM RESULTS

## RWHAP Part A contracts are executed in a timely manner

Collaborative Research requested the AA to provide, by provider, the amount of time it took to execute each contract. If there is an extended amount of time to execute a contract, the AA was asked to provide an explanation as to why. **Table 1** describes the amount of time to execute contracts by service provider.

**Table 1:** Number of business days to issue Letter to Proceed and Execute Contracts

AGENCY	GRANT	DATE OF NOTICE OF AWARD RECEIVED FROM HRSA/DSHS	DATE OF LETTER TO PROCEED	BUSINESS DAYS TO PROCESS LETTER TO PROCEED	DATE OF CONTRACT FULLY EXECUTED	BUSINESS DAYS TO EXECUTE CONTRACT
Provider A	PART A FORMULA	1/23/2019	2/28/2019	36	6/5/2019	97
Provider A	PART A SUPPLEMENTAL	1/23/2019	2/28/2019	36	6/5/2019	97
Provider B	PART A FORMULA	1/23/2019	2/28/2019	36	5/9/2019	70
Provider B	PART A SUPPLEMENTAL	1/23/2019	2/28/2019	36	5/9/2019	70
Provider B	MAI	1/23/2019	2/28/2019	36	5/9/2019	70
Provider C	PART A FORMULA	1/23/2019	2/28/2019	36	5/14/2019	75
Provider C	PART A SUPPLEMENTAL	1/23/2019	2/28/2019	36	5/14/2019	75
Provider C	MAI	1/23/2019	2/28/2019	36	5/14/2019	75
Provider D	PART A FORMULA	1/23/2019	2/28/2019	36	5/9/2019	70
Provider D	PART A SUPPLEMENTAL	1/23/2019	2/28/2019	36	5/9/2019	70
Provider D	MAI	1/23/2019	2/28/2019	36	5/9/2019	70
Provider E	PART A FORMULA	1/23/2019	2/28/2019	36	5/24/2019	85
Provider E	PART A SUPPLEMENTAL	1/23/2019	2/28/2019	36	5/24/2019	85
Provider E	MAI	1/23/2019	2/28/2019	36	5/24/2019	85

Bexar County Hospital District executed an Memorandum of Understanding (MOU) between the Ryan White Program Administration Department and the Family Focused AIDS Clinical Treatment Services Department (FFACTS) in order for FFACTS to provide services to PLWH.

## Part A carryover request is less than 5%

Collaborative Research requested the AA to provide evidence of the 2019-2020 carryover request. The percent of carryover request for RWPA Formula was less than 5% in formula and MAI funding. The following chart represents each funded service category for formula and MAI funding and the balance in each service category.

Part A Formula and Supplemental Expenditures							
Service Category	# of Service Providers	% Allocation	Current Allocation with all reallocations	YTD Expenditures	% Expended	Balance	
1 AIDS Pharm. Asst.	4	2.40%	\$ 104,447.00	\$ 91,610.08	87.7%	\$ 12,836.92	
2 Early Intervention Services	1	4.72%	\$ 205,577.00	\$ 205,577.01	100.0%	\$ (0.01)	
3 Emergency Financial Asst	4	1.99%	\$ 86,720.00	\$ 85,843.99	99.0%	\$ 876.01	
4 Food Bank/Home Delivered Meals	2	1.00%	\$ 43,263.00	\$ 43,263.00	100.0%	\$ 0.00	
5 Health Ins. Prem. & Cost Sharing Asst.	1	17.69%	\$ 770,485.00	\$ 770,484.57	100.0%	\$ 0.43	
6 Medical Case Management	4	10.67%	\$ 464,722.00	\$ 460,369.47	99.1%	\$ 4,352.53	
7 Medical Nutrition Therapy	1	0.88%	\$ 38,263.00	\$ 38,263.00	100.0%	\$ -	
8 Medical Trans. Services	3	1.70%	\$ 73,894.00	\$ 73,783.00	99.8%	\$ 111.00	
9 Mental Health Services	4	6.24%	\$ 271,603.00	\$ 252,963.00	93.1%	\$ 18,640.00	
10 Non-medical Case Management	4	2.02%	\$ 88,126.00	\$ 87,391.12	99.2%	\$ 734.88	
11 Oral Health Care	1	11.26%	\$ 490,319.00	\$ 464,757.30	94.8%	\$ 25,561.70	
12 Outpatient/Ambulatory Health Services	4	36.38%	\$ 1,584,640.00	\$ 1,578,261.14	99.6%	\$ 6,378.86	
13 Referral for Health Care & Support Services	5	1.59%	\$ 69,421.00	\$ 63,785.70	91.9%	\$ 5,635.30	
14 Substance Abuse Services	2	1.46%	\$ 63,657.00	\$ 62,184.31	97.7%	\$ 1,472.69	
		100.00%	\$ 4,355,137.00	\$ 4,278,536.69	98.24%	\$ 76,600.31	

MAI Expenditures						
Service Category	# of Service Providers	% Allocation	Current Allocation with all reallocations	YTD Expenditures	% Expended	Balance
1 Early Intervention Services	1	33.6%	\$ 154,150.00	\$ 154,150.00	100.0%	\$ -
2 Mental Health Services	3	12.8%	\$ 58,550.88	\$ 55,598.50	95.0%	\$ 2,952.38
3 Non-Medical Case Management	4	48.3%	\$ 221,772.12	\$ 221,215.18	99.7%	\$ 556.94
4 Substance Abuse Services	2	5.4%	\$ 24,648.00	\$ 24,187.97	98.1%	\$ 460.03
		100%	\$ 459,121.00	\$ 455,151.65	99.14%	\$ 3,969.35

### Part A funds are reallocated in a timely manner

Collaborative Research requested the AA to provide all reallocation requests sent to the Planning Council and explanations for the reallocations. The following chart contains the AA's documentation of all reallocation requests for the 2019-2020 grant year. All reallocations were approved by the Planning Council.

Part A Reallocations - 2/7/19	Allocation	10%	Reallocation	Revised Allocation	Original Percentages	NEW Percentage with Reallocations	Difference in %
AIDS Pharmaceutical Assistance (Local)	86,525.66	8,652.57	21,631.42	108,157.08	2.00%	2.50%	0.50%
Early Intervention Services	324,471.23	32,447.12	(64,894.25)	259,576.98	7.50%	6.00%	-1.50%
Emergency Financial Assistance	43,262.83	4,326.28	86,525.66	129,788.49	1.00%	3.00%	2.00%
Medical Case Management	493,196.26	49,319.63	(17,305.13)	475,891.13	11.40%	11.00%	-0.40%
Medical Nutrition	51,915.40	5,191.54	(8,652.57)	43,262.83	1.20%	1.00%	-0.20%
Medical Transportation Services	43,262.83	4,326.28	21,631.42	64,894.25	1.00%	1.50%	0.50%
Non-Medical Case Management	43,262.83	4,326.28	43,262.83	86,525.66	1.00%	2.00%	1.00%
Oral Health	536,459.09	53,645.91	(60,567.96)	475,891.13	12.40%	11.00%	-1.40%
Outpatient Ambulatory Health Services	1,579,093.30	157,909.33	(64,894.25)	1,514,199.05	36.50%	35.00%	-1.50%
Referral for Healthcare and Support Services	43,262.83	4,326.28	43,262.83	86,525.66	1.00%	2.00%	1.00%
<b>TOTAL</b>	<b>3,244,712.25</b>	<b>324,471.23</b>	<b>0.00</b>	<b>3,244,712.25</b>			

Part A Reallocations - 12/9/19	Allocation	0.10	Reallocation	Revised Allocation	Original Percentages	NEW Percentage with Reallocations	Difference in %
AIDS Pharmaceutical Assistance (Local)	108,157.08	10,815.71	(3,709.91)	104,447.17	2.50%	2.41%	-0.09%
Early Intervention Services	259,576.98	25,957.70	(54,000.00)	205,576.98	6.00%	4.75%	-1.25%
Emergency Financial Assistance	129,788.49	12,978.85	(51,447.00)	78,341.49	3.00%	1.81%	-1.19%
Health Insurance Premium Cost Sharing Assistance	627,311.04	62,731.10	150,900.00	778,211.04	14.50%	17.99%	3.49%
Medical Case Management	475,891.13	47,589.11	(2,000.00)	473,891.13	11.00%	10.95%	-0.05%
Medical Nutrition	43,262.83	4,326.28	(5,000.00)	38,262.83	1.00%	0.88%	-0.12%
Medical Transportation Services	64,894.25	6,489.42	9,000.00	73,894.25	1.50%	1.71%	0.21%
Mental Health	302,839.81	30,283.98	(59,949.50)	242,890.31	7.00%	5.61%	-1.39%
Non-Medical Case Management	86,525.66	8,652.57	1,600.00	88,125.66	2.00%	2.04%	0.04%
Outpatient Ambulatory Health Services	1,514,199.05	151,419.91	76,881.41	1,591,080.46	35.00%	36.78%	1.78%
Referral for Healthcare and Support Services	86,525.66	8,652.57	(17,775.00)	68,750.66	2.00%	1.59%	-0.41%
Substance Abuse (Outpatient)	108,157.08	10,815.71	(44,500.00)	63,657.08	2.50%	1.47%	-1.03%
<b>TOTAL</b>	<b>3,807,129.04</b>	<b>380,712.90</b>	<b>0.00</b>	<b>3,807,129.04</b>			

Part A Reallocations - 1/21/20	Allocation	0.10	Reallocation	Revised Allocation	Original Percentages	NEW Percentage with Reallocations	Difference in %
Emergency Financial Assistance	78,341.49	7,834.15	8,379.63	86,721.12	1.81%	2.00%	0.19%
Health Insurance Premium Cost Sharing Assistance	778,211.04	77,821.10	(22,152.43)	756,058.61	17.99%	17.48%	-0.51%
Medical Case Management	473,891.13	47,389.11	(9,168.21)	464,722.92	10.95%	10.74%	-0.21%
Mental Health	242,890.31	24,289.03	23,711.98	266,602.29	5.61%	6.16%	0.55%
Outpatient Ambulatory Health Services	1,591,080.46	159,108.05	(1,440.14)	1,589,640.32	36.78%	36.74%	-0.03%
Referral for Healthcare and Support Services	68,750.66	6,875.07	669.17	69,419.83	1.59%	1.60%	0.02%
<b>TOTAL</b>	<b>\$3,233,165.09</b>	<b>\$323,316.51</b>	<b>\$0.00</b>	<b>\$3,233,165.09</b>			

### Part A funds are allocated in accordance to Planning Council directives

Collaborative Research requested the AA to provide all allocation made to each service category upon receipt of the HRSA/HAB Notice of Award. CR compared those percentages to the approved Planning Council allocation directives. The first spreadsheet represents the Planning Council approved allocations for the 2019/20 grant year. The second spreadsheet are the allocations applied to the HRSA/HAB Notice of Award. The Planning Council determined that all allocations were aligned with the approved directives.

San Antonio TGA - Ryan White Part A Planning Council FY19-20 Resource Allocations by Service Category				
Service Category (HRSA/DSHS)	Part A (Formula & Supp) Actual Dollar Amount	Part A (Formula & Supp) % of Request	MAI Actual Dollar Amount	MAI % of Request
AIDS Pharmaceutical (Local)	\$ 57,874.34	2.00%		
Early Intervention Services	\$ 217,028.78	7.50%	\$ 139,549.76	32.00%
Emergency Financial Assistance	\$ 28,937.17	1.00%		
Food Bank/Home Delivered Meals	\$ 28,937.17	1.00%		
Health Insurance Premium & Cost Sharing Assistance	\$ 419,588.97	14.50%		
Medical Case Management	\$ 329,883.74	11.40%		
Medical Nutrition Therapy	\$ 34,724.60	1.20%		
Medical Transportation	\$ 28,937.17	1.00%		
Mental Health Services	\$ 202,560.19	7.00%	\$ 56,692.09	13.00%
Non-Medical Case Management	\$ 28,937.17	1.00%	\$ 200,602.78	46.00%
Oral Health Services	\$ 358,820.91	12.40%		
Outpatient Ambulatory Health Services	\$ 1,056,206.71	36.50%		
Referral for Healthcare and Support Services	\$ 28,937.17	1.00%		
Substance Abuse Services - Outpatient	\$ 72,342.93	2.50%	\$ 39,248.37	9.00%
<b>Total</b>	<b>\$ 2,893,717.00</b>	<b>100%</b>	<b>\$ 436,093.00</b>	<b>100%</b>

Planning Council directives were reflected in the RWPA during 2019-2020

The SATGA Planning Council did not prescribe directives to the AA during the 2019-2020 grant year.