



Ryan White HIV/AIDS Program Part B National Monitoring Standards and Manual 2023 Update Overview

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CDR Cathleen Davies, MS, CCC-SLP, CBIS
Senior Policy Advisor
Division of State HIV/AIDS Programs (DSHAP)
HIV/AIDS Bureau (HAB)

Vision: Healthy Communities, Healthy People



Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) Vision and Mission

Vision

Optimal HIV care and treatment for all to end the HIV epidemic in the U.S.

Mission

Provide leadership and resources to advance HIV care and treatment to improve health outcomes and reduce health disparities for people with HIV and affected communities.



Agenda

1. Hierarchy of Authorities
2. Ryan White HIV/AIDS Program (RWHAP) Part B National Monitoring Standards (NMS)
 - a. Purpose
 - b. Implementation
 - c. Structure
 - d. 2023 Updates
3. RWHAP Part B Manual
 - a. Purpose
 - b. Background
 - c. Structure
 - d. 2023 Updates
4. Questions and Answers



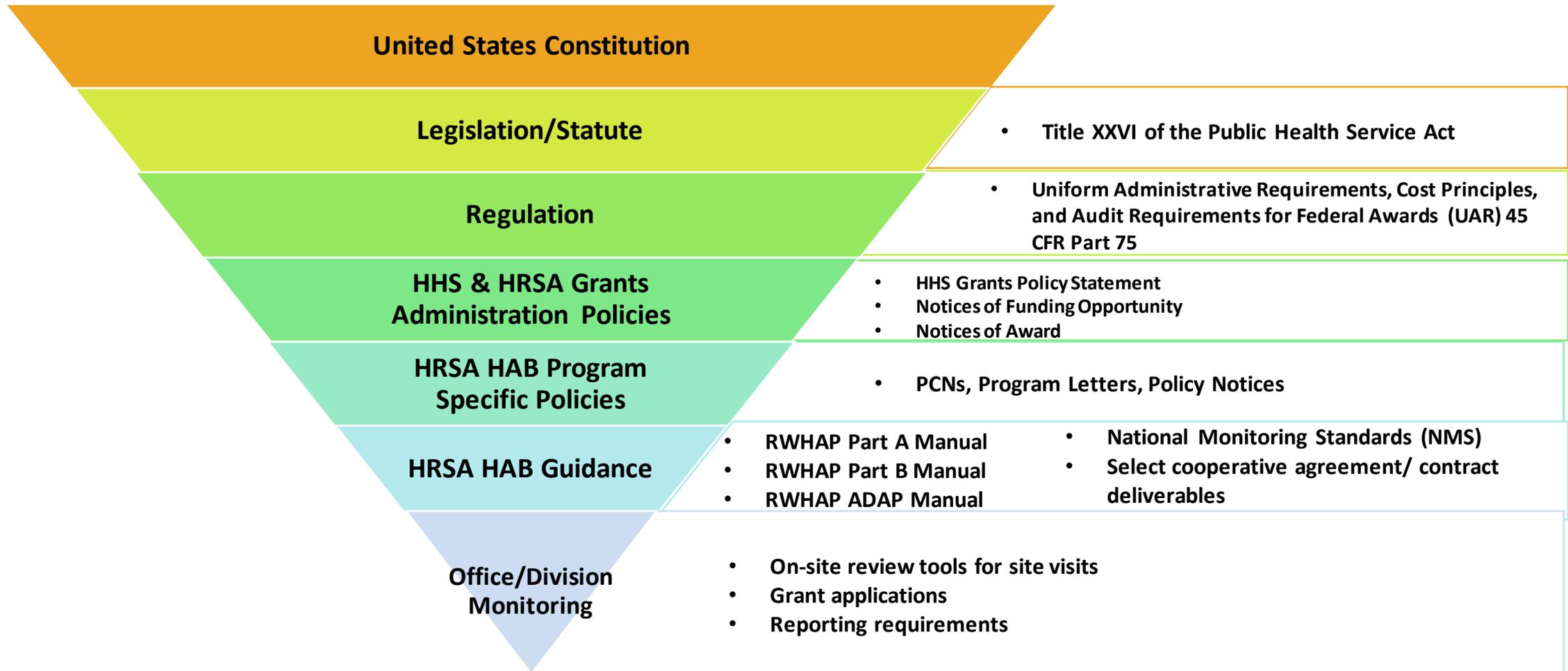
Objectives

At the end of the session, participants will be able to understand:

- The hierarchy of authorities for the RWHAP.
- How the NMS provide technical assistance to help recipients maintain compliance.
- The updates to the NMS and Manuals since 2022.

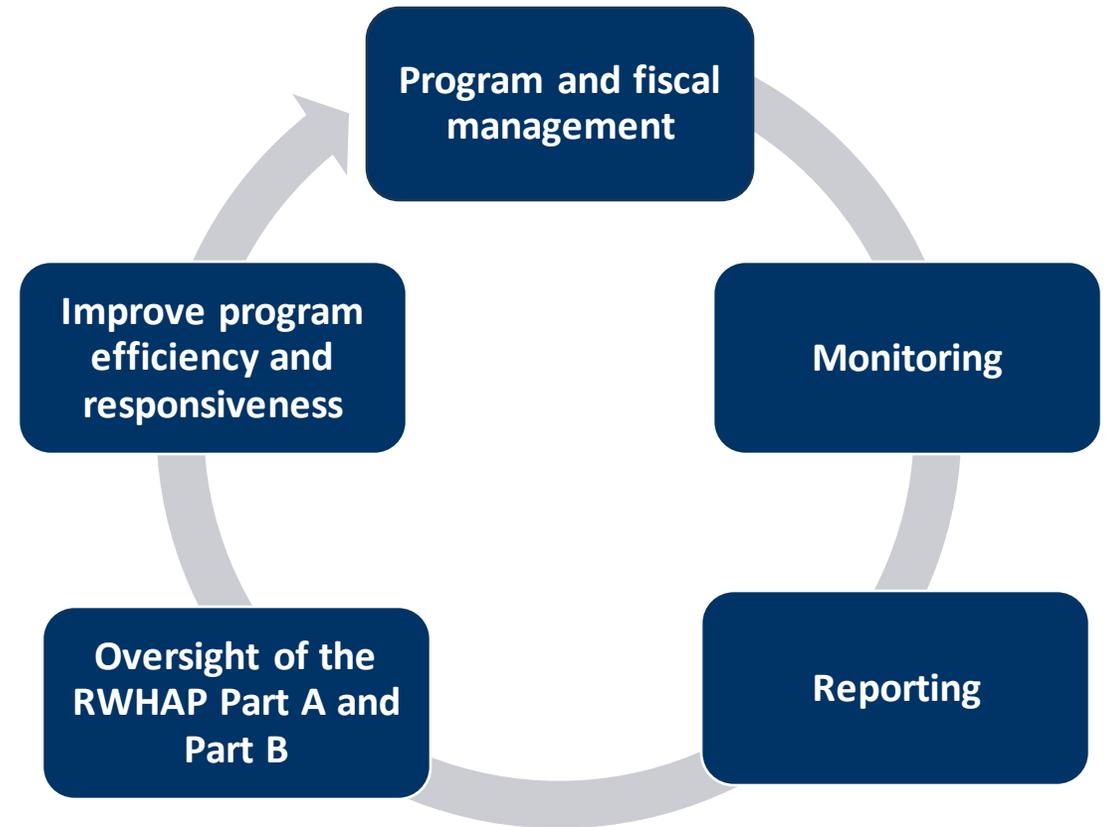


RWHAP Hierarchy of Authorities



NMS Purpose

- Provide a compilation of all major Ryan White HIV/AIDS Program documents used for compliance, oversight, and expectations
- Assist recipients in meeting federal requirements for program and fiscal management, monitoring, and reporting
- Serves as a reference for HRSA consultants and POs in conducting site visits



NMS Implementation

Recipients are encouraged to:

- Review the NMS and share with program and fiscal staff who have monitoring responsibilities
- Share the standards with subrecipients as appropriate
- Hold meetings with subrecipients to introduce the NMS and clarify compliance issues
- Make standards easily accessible to subrecipients
- Meet with legal, contracts, procurement, finance and other government entities to familiarize them with the NMS



NMS Implementation (continued)

- Review request for proposals (RFPs) and contract language to assure that they specify services to be provided and data to be collected and reported
- Review current monitoring systems, procedures, and tools for potential revisions/updates/changes
- Fully implement any needed changes in subrecipient monitoring
- Implement recipient and subrecipient responsibilities
- Contact project officer if there are additional questions or concerns



NMS Structure

- Executive Summary
- Program Monitoring Standards
- Fiscal Monitoring Standards
- Universal Monitoring Standards



NMS Universal Standards

Part A and Part B

Access to Care

Eligibility Determination

Payor of Last Resort

Anti-Kickback Statute

Recipient Accountability

Reporting

Monitoring



NMS Program Standards

Part B

Allowable Uses of RWHAP Part B Service Funds

Core Medical Services

Support Services

Quality Management

Administration

Other Service Requirements

Prohibition on Certain Activities and Additional Requirements

Chief Elected Official (CEO) Agreements & Assurances

Minority AIDS Initiative (MAI)

Data Reporting Requirements

Consortia

Integrated HIV Prevention and Care Plan, Including Statewide Coordinated Statement of Need



NMS Fiscal Standards

Part B

Limitation on Uses of RWHAP Part B Funding

Unallowable Costs

Program Income and Rebates

Imposition & Assessment of Client Charges

Financial Management

Property Standards - Equipment

Cost Principles

Auditing Requirements

Matching or Cost-Sharing Funds

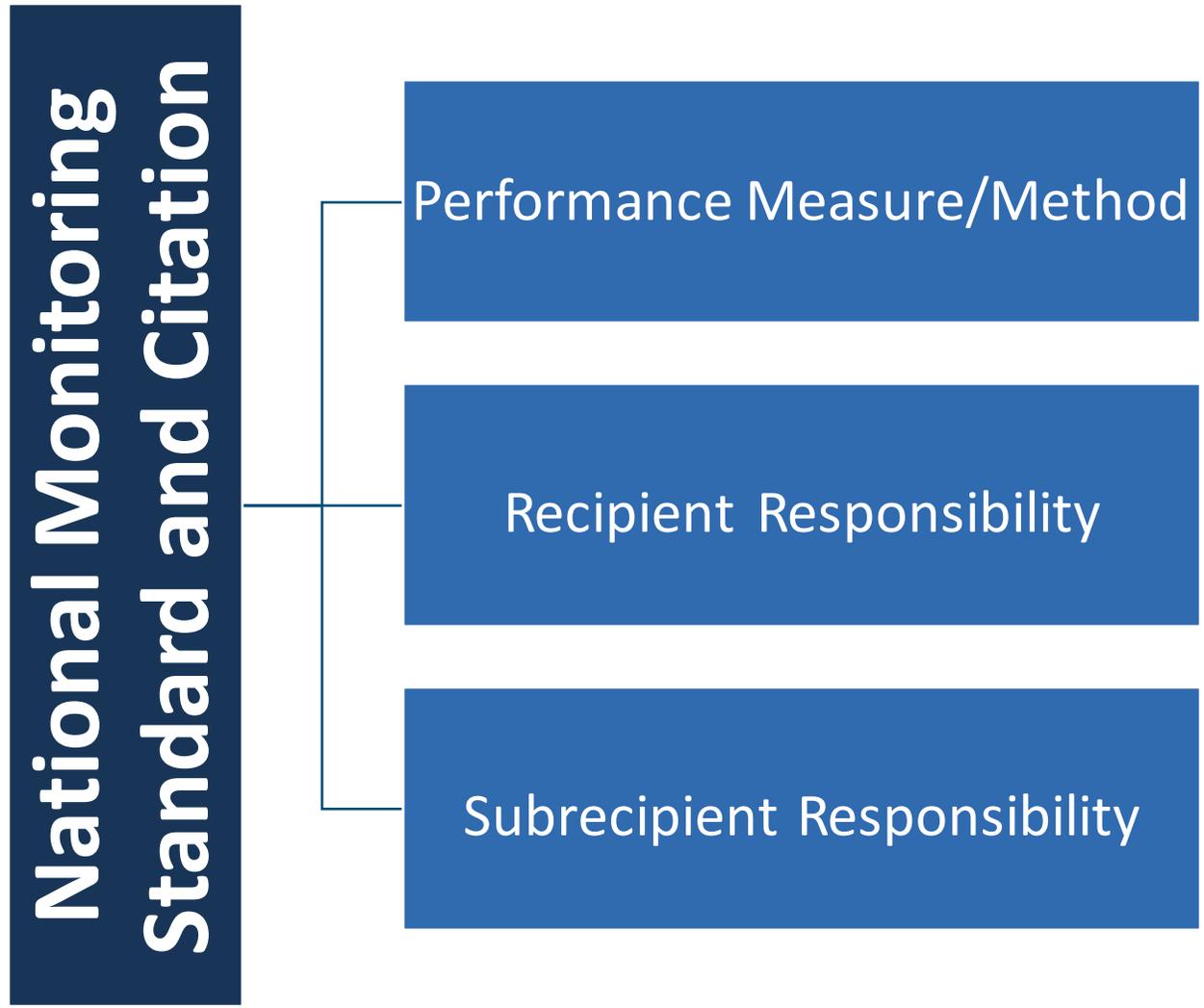
Maintenance of Effort

Fiscal Procedures

Unobligated Balances and Carryover Requests



NMS Structure



NMS 2023 Updates



Program Monitoring Standards

B.4. Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals

B.4.i. Performance Measure/Method

- Previous Text:
 - ✓ (h) Documentation that RWHAP funds are used exclusively for in-network outpatient providers.
- Updated text:(h) Documentation that RWHAP funds are not used to pay for services that the client receives from a provider that does not belong to the client's health plan network unless the client is receiving services that could not have been reasonably obtained from an in-network provider.



Program Monitoring Standards

B.4.ii. Recipient Responsibility

- Previous Text:
 - ✓ (a) Develops a system to ensure that funds are only paying for in-network outpatient services, as appropriate.
- Updated Text:
 - ✓ (a) Develops a system to ensure that funds are not used to pay for services that the client receives from a provider that does not belong to the client's health plan network unless the client is receiving services that could not have been reasonably obtained from an in-network provider.



Program Monitoring Standards (continued)

B.4.iii. Subrecipient Responsibility

- Previous Text:
 - ✓ (h) Develops a system to ensure that funds are only paying for in-network outpatient services, as appropriate.
- Updated Text:
 - ✓ (h) Develops a system to ensure that funds are not used to pay for services that the client receives from a provider that does not belong to the client's health plan's network unless the client is receiving services that could not have been reasonably obtained from an in-network provider.

Universal Monitoring Standards

A.2. Provision of services regardless of an individual's ability to pay for the service.

A.2.iii Subrecipient Responsibility

- Removed "who" from b)
- Updated text:
 - ✓ (b) Implement an appeals/grievance process and maintain a file of individuals refused services with reasons for refusal specified; include in the file any complaints from clients, with documentation of complaint review and decision reached and/or response given if any.



RWHAP Part B Manual



Purpose

The RWHAP Part B Manual serves as:

- An orientation guide for new RWHAP Part B recipient staff, with sections explaining how the RWHAP Part B and ADAP are structured at the federal and state level, and the key issues and strategies used by the RWHAP Part B and ADAP to broaden access to HIV care and treatment to persons in need;
- A reference document for RWHAP Part B recipient staff on legislative, grant regulation, and program requirements, including links to source documents;
- A tool to guide RWHAP Part B recipient staff in managing fiscal and program components; and
- A source for information about where to obtain additional information and technical assistance (TA).



Background

- Target Audience
- Last Updated
- Future Updates



Manual Structure

The RWHAP Part B Manual includes 10 sections, each comprised of several chapters. Each section includes the following:

- Introduction
- Relevant Authorities
- Program Direction and Implementation
- Technical Assistance Links and Resources



Introduction

Section V: Recipient and Subrecipient Monitoring

iv. Chapter 1. Introduction

Monitoring, whether HRSA monitoring of recipients, recipient monitoring of subrecipients, or the recipient and subrecipient monitoring of contractors, is a critical component of the RWHAP. This section provides a high-level overview of the oversight and monitoring responsibilities of recipients and subrecipients, as well as information regarding useful tools that will assist with providing oversight of both subrecipients and contractors.



Relevant Authorities

v. Chapter 2. Relevant Authorities

Definitions and Roles

The UAR establishes the following relevant definitions in 45 CFR § 75.2 pertaining to awarding of federal funding:

- **Federal awarding agency**, defined as “the Federal agency that provides a Federal award directly to a non-Federal entity.”
- **Recipients**, defined as “an entity, usually but not limited to non-Federal entities, that receives a Federal award directly from a Federal awarding agency to carry out an activity under a Federal program. The term recipient does not include subrecipients.”



Relevant Authorities (continued)

Please note that the RWHAP legislation uses the term “subcontractor” in reference to entities that receive funding directly from the recipient, or from a lead agency or consortia acting on behalf of the recipient.

The UAR also clarifies the role of the recipient and subrecipient with regard to the following:

- Procurement standards (45 CFR §§ 75.326 – 75.340, particularly 45 CFR § 75.326 – 75.329);
- Performance and financial monitoring and reporting (45 CFR §§ 75.341-75.343);
- Access to records related to a federal award (45 CFR § 75.364);
- Distinguishing subrecipients from contractors (45 CFR § 75.351); and
- Subrecipient monitoring and management/requirements for pass-through entities (45 CFR § 75.352).



Program Direction and Implementation

Subrecipient Monitoring

As was noted earlier, all RWHAP Part B recipients are responsible for adequate oversight and monitoring of all activities supported by the federal award, including subawards and contracts. As such, the recipient must ensure that subrecipient monitoring requirements are met.

Per 45 CFR § 75.352, all RWHAP Part B recipients must ensure that any RWHAP Part B subaward (including those made by a lead agency or consortium) is clearly identified as a subaward and includes information regarding all federal requirements pertaining to the award. The subaward must also include any additional requirements imposed by the pass-through entity to meet its responsibilities to the HHS awarding agency (i.e., HRSA HAB).

All RWHAP Part B recipients also are responsible for ensuring the following and related activities:

- The evaluation of subrecipient risk for non-compliance;
- The monitoring of subrecipient activities to ensure compliance and that performance goals are met;
- Verification of subrecipient auditing; and
- Enforcement action is taken as appropriate to address noncompliance.



Technical Assistance Links and Resources

v. Chapter 7. Technical Assistance Links and Resources

This section provides resources for recipient and subrecipient monitoring to ensure compliance with legislative, regulatory, and programmatic requirements.

- **National Monitoring Standards:** <https://ryanwhite.hrsa.gov/grants/manage/recipient-resources>
- **HRSA HAB Policy Notices:** <https://ryanwhite.hrsa.gov/grants/policy-notice>
- **HRSA HAB Program Letters:** <https://ryanwhite.hrsa.gov/grants/program-letters>
- **45 CFR Part 75:** <https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=4d52364ec83fab994c665943dadf9cf7&ty=HTML&h=L&r=PART&n=pt45.1.75#sp45.1.75.b>
- **TargetHIV:** <https://targethiv.org>



RWHAP Part B Manual 2023 Updates



Reporting Requirement Due Dates

To ensure compliance with 45 CFR 75.381, the due dates for the end of the year reports have changed from 120 days to 90 days after the end of the budget period to align with grant regulations. These reports include the following:

- Annual Progress Report (X07, X08, and X09)
- Expenditures Report (X07, X08, and X09)
- MAI Annual Report (X07)



The Consolidated Appropriations Act, 2023, Pub. L. 117-328, Division H, § 237

Expedited Distribution and Penalty –

- The requirement that recipients obligate 75 percent of the award and associated penalties may be waived upon request. Recipients are still required to submit an interim FFR. §§ 2618(c) and (d) of the Public Health Service (PHS) Act.
- The expedited distribution requirement and penalty may be waived for FY 2023 RWHAP Part B recipients for which the COVID-19 pandemic continues to impact the recipients' ability to make timely subawards. RWHAP Part B recipients that would otherwise be penalized must request this waiver.



The Consolidated Appropriations Act, 2023, Pub. L. 117-328, Division H, § 237 (continued)

Unobligated Balances Penalty –

- Requirements regarding the timeframe for obligation and expenditure of formula and supplemental RWHAP funds within the designated timeframe and associated penalties may be waived upon request. Recipients are still required to submit a final FFR. §§ 2603(c), 2609(d)(2), and 2622 of the PHS Act. Due to the timing of the final FFR, any UOB penalties that result from formula fund UOBs reported in the final FY 2023 FFRs will be waived during the FY 2025 award cycle.
- The unobligated balances requirement and penalty may be waived for FY 2023 RWHAP Part B recipients for which the COVID-19 pandemic continues to impact recipients' ability to obligate grant funds. RWHAP Part B recipients that would otherwise be penalized must request a waiver.



Questions and Answers



Question 1

I have a client that has an income of 125% of the FPL who is receiving care at a local clinic? Our eligibility level for RWHAP service is 250% FPL. Does the clinic have to impose a charge for the care provided?



Question 2

I am in the process of planning our budget for the upcoming grant year. How much must be spent on core medical services?



Question 3

Unfortunately, we have had an increase to 724 HIV cases in a metropolitan statistical area (MSA). Why is it not eligible for Emerging Community funding?



Contact Information

CDR Cathleen Davies

DSHAP Senior Policy Advisor

Email: Cdavies@hrsa.gov



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