Budget 101 – RWHAP Budget Basics: What's Required?

2024 National Ryan White Conference on HIV Care and Treatment

August 20, 2024

Vision: Healthy Communities, Healthy People

Presenters

- Kibibi C. Matthews-Brown
  Senior Program Advisor
  Division of State HIV/AIDS Programs (DSHAP)
- CDR Jose Ortiz
  Project Officer
  Division of Metropolitan HIV/AIDS Programs (DMHAP)
- Jenifer Gray
  Project Officer
  Division of Metropolitan HIV/AIDS Programs (DMHAP)
- Brian Fitzsimmons
  Senior Program Advisor
  Division of Community HIV/AIDS Programs (DCHAP)

Health Resources and Services Administration (HRSA)

Overview

Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged

HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities

Every year, HRSA programs serve tens of millions of people, including people with HIV, pregnant people, mothers and their families, and those otherwise unable to access quality health care

HRSA Ryan White HIV/AIDS Program

HRSA's HIV/AIDS Bureau 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.

HRSA's Ryan White HIV/AIDS Program (RWHAP) Overview

- **Provides a comprehensive system of HIV** primary medical care, medications, and essential support services for low-income people with HIV.

- **Funds grants to states, cities, counties, and local community-based organizations** to improve health outcome and reduce HIV transmission.
  - Recipients determine service delivery and funding priorities based on local needs and planning process.

- **Provided services to over 566,000 people in 2022—**more than half of all people with diagnosed HIV in the United States.

- **89.6% of RWHAP clients receiving HIV medical care were virally suppressed in 2022,** exceeding national average of 65.9%[i]. This means they cannot sexually transmit HIV to their partners and can live longer and healthier lives.

i. Centers for Disease Control and Prevention. Monitoring selected national HIV prevention and care objectives by using HIV surveillance data—United States and 6 dependent areas, 2021. HIV Surveillance Supplemental Report, 2023; 28(No. 4). http://www.cdc.gov/hiv/library/reports/hiv-surveillance.html. Published May 2023.

Fiscal Institute Overview for the Budget Component

Budget 101

1. Understand the fundamentals of the RWHAP budget process.
2. Learn the budget life cycle and accompanying terminology.
3. Gain confidence to tackle the budget process and excel.

Budget 201

1. Learn more about the various financial and budgetary requirements of the different RWHAP Parts.
2. Understand how to braid RWHAP funding streams in an impactful and fiscally responsible way.
3. Have access to tangible resources to enhance or expand their RWHAP funding portfolio.
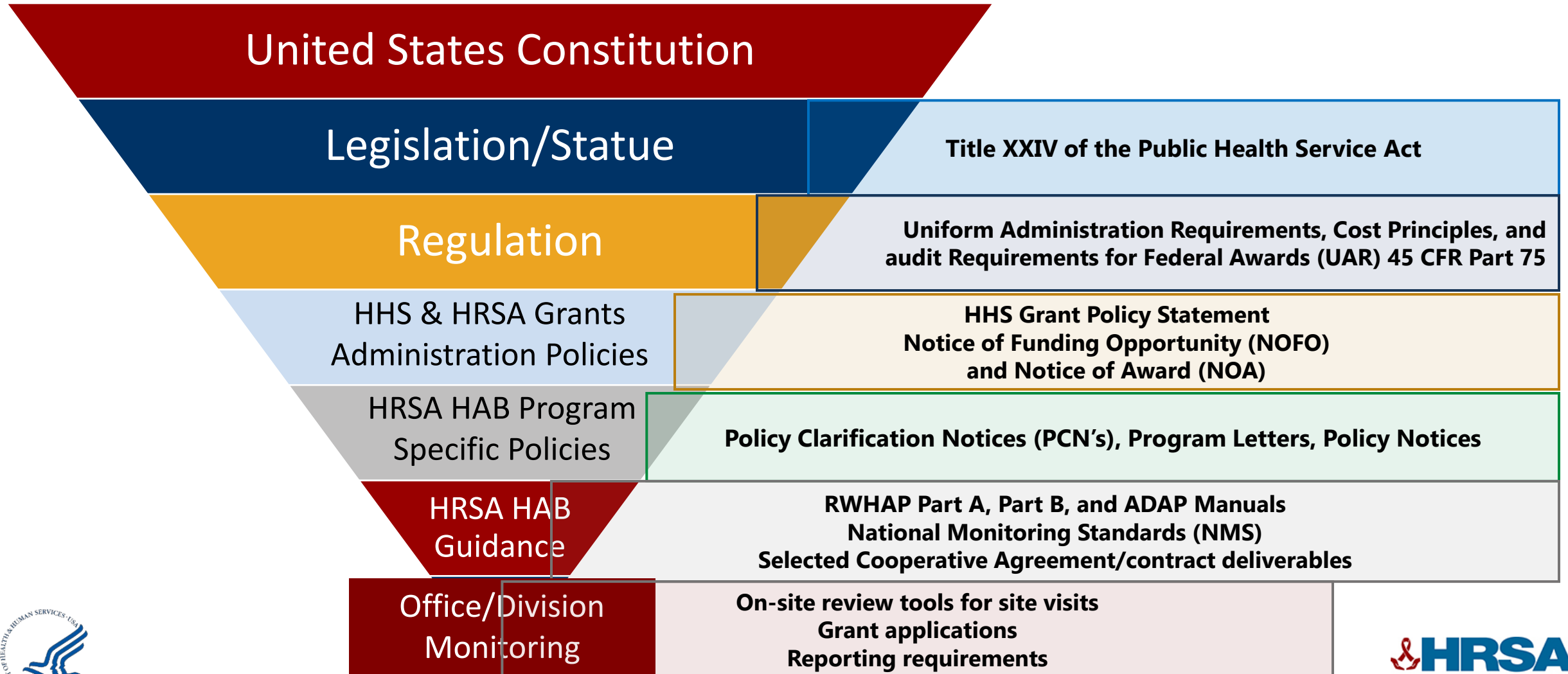
Budget 301

1. Understand current RWHAP recipients' experiences monitoring multiple funding streams.
2. Learn models and strategies to implement in your organization to enhance their monitoring processes.
3. Gain knowledge on ways to strengthen current budgeting practices.

Budget 101 Learning Objectives

1 Understand the fundamentals of the RWHAP budget process.

2 Learn the budget life cycle and accompanying terminology.

3 Gain confidence to tackle the budget process and excel.

RWHAP Hierarchy of Authorities

United States Constitution	
Legislation/Statue	**Title XXIV of the Public Health Service Act**
Regulation	**Uniform Administration Requirements, Cost Principles, and audit Requirements for Federal Awards (UAR) 45 CFR Part 75**
HHS & HRSA Grants Administration Policies	**HHS Grant Policy Statement Notice of Funding Opportunity (NOFO) and Notice of Award (NOA)**
HRSA HAB Program Specific Policies	**Policy Clarification Notices (PCN's), Program Letters, Policy Notices**
HRSA HAB Guidance	**RWHAP Part A, Part B, and ADAP Manuals National Monitoring Standards (NMS) Selected Cooperative Agreement/contract deliverables**
Office/Division Monitoring	**On-site review tools for site visits Grant applications Reporting requirements**

Statutory and Program Guidance

Ryan White HIV/AIDS Treatment Extension Act of 2009

-	Part A	Part B	Part C	Part D
RWHAP grant funds will be expended on core medical services, support services, administrative and clinical quality management	X	X	X	X
Limit of 10% administration	X	X	X	X
Planning and Evaluation (P & E)		X		
Limit of 5% CQM or $3 million, whichever is less	X	X		
At least 75% of HIV services funds must be used on core medical services (unless core medical services waiver approved)	X	X	X	
Services are provided regardless of the client's ability to pay	X	X	X	X

Cost Principles

Cost Principles

- **Allowability §75.403**
- **Allocability §75.405**
- **Reasonableness §75.404**

Budget Development – Payor of Last Resort

RWHAP grant funds cannot be used to make payments for any item or service if payment has been made or can reasonably be expected to be made with respect to that item or service under any State compensation program, under any insurance policy, or under any Federal or State health benefits program, or by an entity that provides prepaid health care.

Allowable Services – Core Medical Services

1. AIDS Drug Assistance Program Treatments

2. AIDS Pharmaceutical Assistance

3. Early Intervention Services (EIS)

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

5. Home and Community-Based Health Services

6. Home Health Care

7. Hospice

8. Medical Case Management, including Treatment Adherence Services

9. Medical Nutrition Therapy

10. Mental Health Services

11. Oral Health Care

12. Outpatient/Ambulatory Health Services

13. Substance Abuse Outpatient Care

Policy Clarification Notice (PCN) #16-02: RWHAP Services: Eligible Individuals and Allowable Uses of Funds
https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/service-category-pcn-16-02-final.pdf

Allowable Services – Support Services

1. Childcare Services

2. Emergency Financial Assistance

3. Food Bank/Home Delivered Meals

4. Health Education/Risk Reduction

5. Housing

6. Legal Services

7. Linguistic Services

8. Medical Transportation

9. Non-Medical Case Management Services

10. Other Professional Services

11. Outreach Services

12. Permanency Planning

13. Psychosocial Support Services

14. Referral for Health Care and Support Services

15. Rehabilitation Services

16. Respite Care

17. Substance Abuse Services (residential)

Policy Clarification Notice (PCN) #16-02: RWHAP Services: Eligible Individuals and Allowable Uses of Funds
https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/service-category-pcn-16-02-final.pdf

HRSA
Ryan White & Global HIV/AIDS Programs

Caps and Salary Limitations

- **Administrative Costs:** Limited to 10% of the award. Subrecipient administrative costs are capped at 10% in the aggregate.
- **Planning and Evaluation (P&E) Costs:** Limited to 10% of the award. The sum of administrative and P&E costs cannot be greater than 15% of the award.
- **Clinical Quality Management (CQM) Costs:** Limited to up to 5% of the award of $3 million, whichever is less.
- **Core Medical Services:** Recipient must expend 75% of its direct services dollars on core medical services unless approved core medical services waiver is in place.
- **Salary Rate Limitations:** Grant funds may not be used to pay a salary more than an Executive Level II salary.

Salary Limitations (Appropriations Act 2024)

Salaries charged to HHS grants are capped at $221,900 annually

Individual's base salary, exclusive of fringe benefits and outside income earned

RWHAP funds and program income generated by RWHAP awards may not be used to pay salaries more than the rate limitation

Applies to subrecipients

Unallowable Costs

- Charges that are billable to third party payers including but not limited to private health insurance, prepaid health plans, Medicaid, and Medicare

- Prohibited costs per the grant regulations (45 Code of Federal Regulation (CFR) part 75, 2 CFR 200)

- Services not included in Policy Clarification Notice (PCN) 16-02

- Unallowable costs outlined in the RWHAP Part's notice of funding opportunity (NOFO)

Budgets and Budget Narrative

Indirect Cost

Indirect costs (Facilities and Administration or F&A) means costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved.

RWHAP Part A

Division of Metropolitan HIV/AIDS Programs

Budget Cycle

Fiscal Requirements

1. **Limitations on Use**
2. **Unallowable Costs**
3. **Income from Fees**
4. **Cost Principles**
5. **Financial Management**
6. Audit Requirements
7. Matching or Costs Sharing/MOE

8. Fiscal Procedures
9. Unobligated Balances
10. Monitoring Sub-recipients
11. Unobligated Balances
12. Imposition and Assessment of Client Charges
13. Property Standards

Limitations on Uses of Funds

- **Administrative Costs:** Limited to 10% of the award. Subrecipient administrative costs are capped at 10% in the aggregate.

- **Planning and Evaluation (P&E) Costs:** Limited to 10% of the award. The sum of administrative and P&E costs cannot be greater than 15% of the award.

- **Clinical Quality Management (CQM) Costs:** Limited to up to 5% of the award of $3 million, whichever is less.

- **Core Medical Services:** Recipient must expend 75% of its direct services dollars on core medical services unless approved core medical services waiver is in place.

- **Salary Rate Limitations:** Grant funds may not be used to pay a salary more than an Executive Level II salary.

Budget Requirements
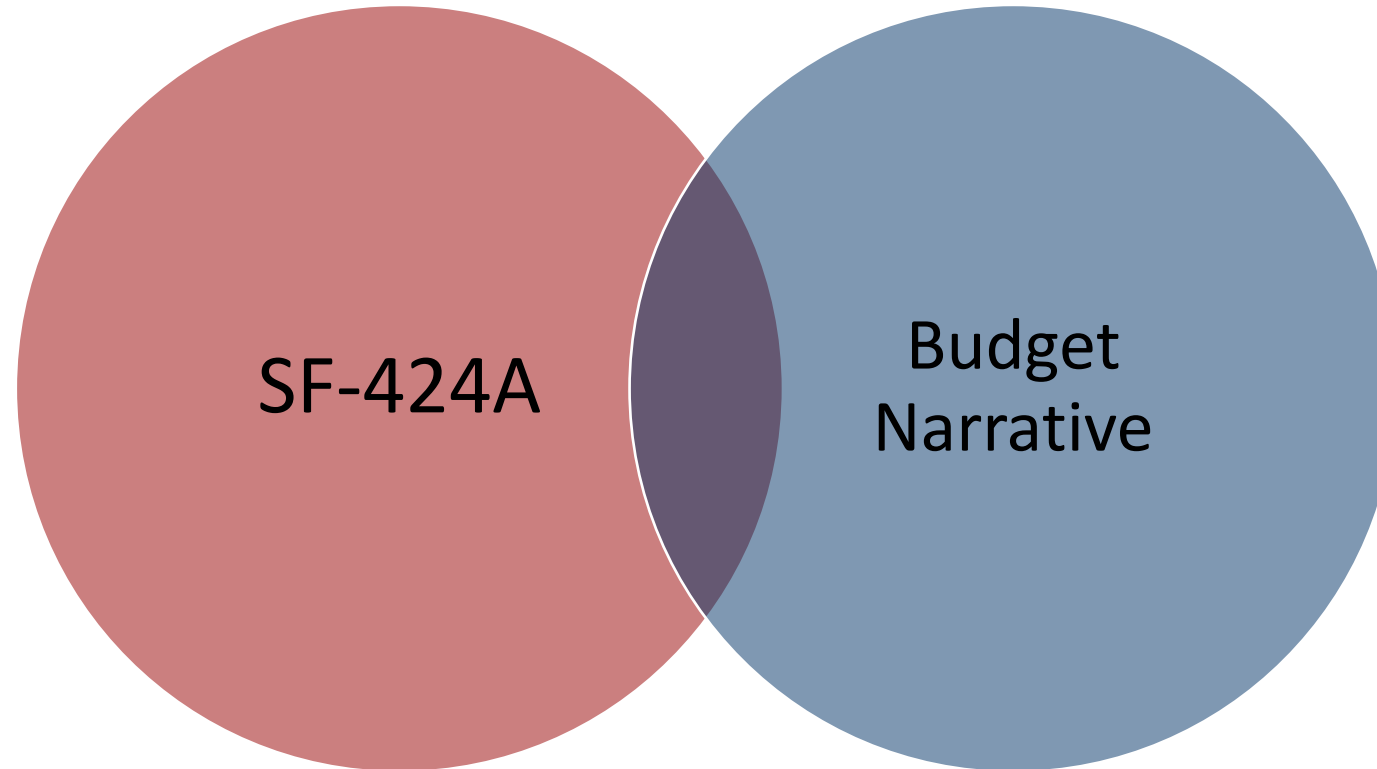
Budget Requirements: SF-424A

Budget Categories

- Part A & MAI Administration
- Part A & MAI Clinical Quality Management
- Part A & MAI HIV Services

Totals auto-populate

Enter dollar amounts for column (e) - rows 1, 2, & 3

Add CFDA #s to column (b)

Totals cannot exceed amount in Appendix B

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Part A & MAI Administration	(2) Part A & MAI CQM	(3) Part A & MAI HIV Services	(4)	
a. Personnel	$	$	$		$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					$
j. Indirect Charges					$
k. TOTALS (sum of 6i and 6j)	$	$	$	$	$
7. Program Income	$	$	$	$	$

Totals auto-populate

Enter object class category amounts into columns 1-3

Column totals auto-populate

Reminder: Total cannot exceed amount in Appendix B

Ryan White HIV/AIDS Program

SECTION C - NON-FEDERAL RESOURCES

	(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	Part A & MAI Administration	$	$	$	$
9.	Part A & MAI CQM				
10.	Part A & MAI HIV				

Complete Total for 1st Year Column Only

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$	$	$	$	$
14. Non-Federal	$				
15. TOTAL (sum of lines 13 and 14)	$	$	$	$	$

		(b)First	(c) Second	(d) Third	(e) Fourth
16.	Part A & MAI Administration	$	$	$	$
17.	Part A & MAI CQM				
18.	Part A & MAI HIV Services				
19.					
20. TOTAL (sum of lines 16 - 19)		$	$	$	$

Remember to complete items 21 & 22 in Section F

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	22. Indirect Charges:
23. Remarks:	

Budget Narrative/Justification

RWHAP PART A BUDGET SUMMARY
RECIPIENT:
FISCAL YEAR: 2024

Object Class Categories	Part A			Minority AIDS Initiative (MAI)			Total
	Administration	CQM	HIV Services	Administration	CQM	HIV Services	
a. Personnel	$ -	$ -	$ -	$ -	$ -	$ -	$ -
b. Fringe Benefits	$ -	$ -	$ -	$ -	$ -	$ -	$ -
c. Travel	$ -	$ -	$ -	$ -	$ -	$ -	$ -
d. Equipment	$ -	$ -	$ -	$ -	$ -	$ -	$ -
e. Supplies	$ -	$ -	$ -	$ -	$ -	$ -	$ -
f. Contractual	$ -	$ -	$ -	$ -	$ -	$ -	$ -
g. Other	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Direct Charges	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Indirect Charges	$ -	$ -		$ -	$ -		$ -
TOTALS	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Program Income							$ -

FY 2024 Funding Ceiling:		Administrative Budget 10%			Manually Enter HIV Services Allocation Percentages	
		Part A and MAI	Within Limit		Core Medical Services	Support Services
Part A Funding	$ -				0%	0%
MAI Funding	$ -	CQM Budget 5%				
Total:	$ -	Part A and MAI	Within Limit			

Instructions | HELP | Budget Summary | Part A Admin | Part A PC-PB Support | Part A CQM | Part A CQM Contractual | Part A HIV Services | MAI Administration | MAI CQM | MAI CQM Contractual | MAI HIV Services

HRSA Ryan White HIV/AIDS Program

Budget and Budget Narrative

Personnel

- For each requested position, provide the following information:
  - Name of staff member occupying the position, if available (vacant)
  - Position title
  - Annual salary
  - Percentage of time budgeted for this program (FTE)
  - Total salary (adjusted to federal salary limitation) requested
- Provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives for Part A and MAI

PART A ADMINISTRATIVE BUDGET
RECIPIENT: XXXX
FISCAL YEAR: 2024

Personnel

Salary [Insert total annual salary]	FTE [Insert as decimal]	Name, Position [Insert name, position title]	Budget Impact Justification [Description of duties, impact on program goals and outcomes, payment source for balance of FTE.]	Amount
$ 105,346	0.20	Jill Smith, Program Director	This position monitors and provides oversight of the Ryan White Part A Program, i... programmatic, staffing, fiscal, evaluation, contractual negotiations and serves as the li... the TGA community and the providers.. Duties include; grant writing, grant monitor... supervising a staff; overseeing completion of all reports, including the year end progress reports, the program submission, unobligated balance report and any other report as required by HRSA/HAB. Includes evaluating the effectiveness of the team and its ability to meet ...nelines and deliverables as described in the action plan in order to determine the success of ...he planning process. 20% Part A Administration, 20% Clinical Quality Management, 10% ...MAI Administration, 5% from the Ending the HIV Epidemic grant.45% City of XXX.	$ 21,069

Callout: ...nelines and deliverables as described in the action plan in order to determine the success of the planning process. 20% Part A Administration, 20% Clinical Quality Management, 10% MAI Administration, 5% from the Ending the HIV Epidemic grant.45% City of XXX.

Contractual

List of Contracts	Deliverables	Budget Impact Justification [Description of how the contract impacts the program's objectives/goals and how the costs were estimated.] Show breakdown of costs.	Amount (round down to nearest whole number)

Callout: Contractor participates on the CQM committee engaging in the planning for quality improvement projects. Position analyzes clinical quality management data and assists with the reporting on measurement data. $93.79/hour x 100 hours
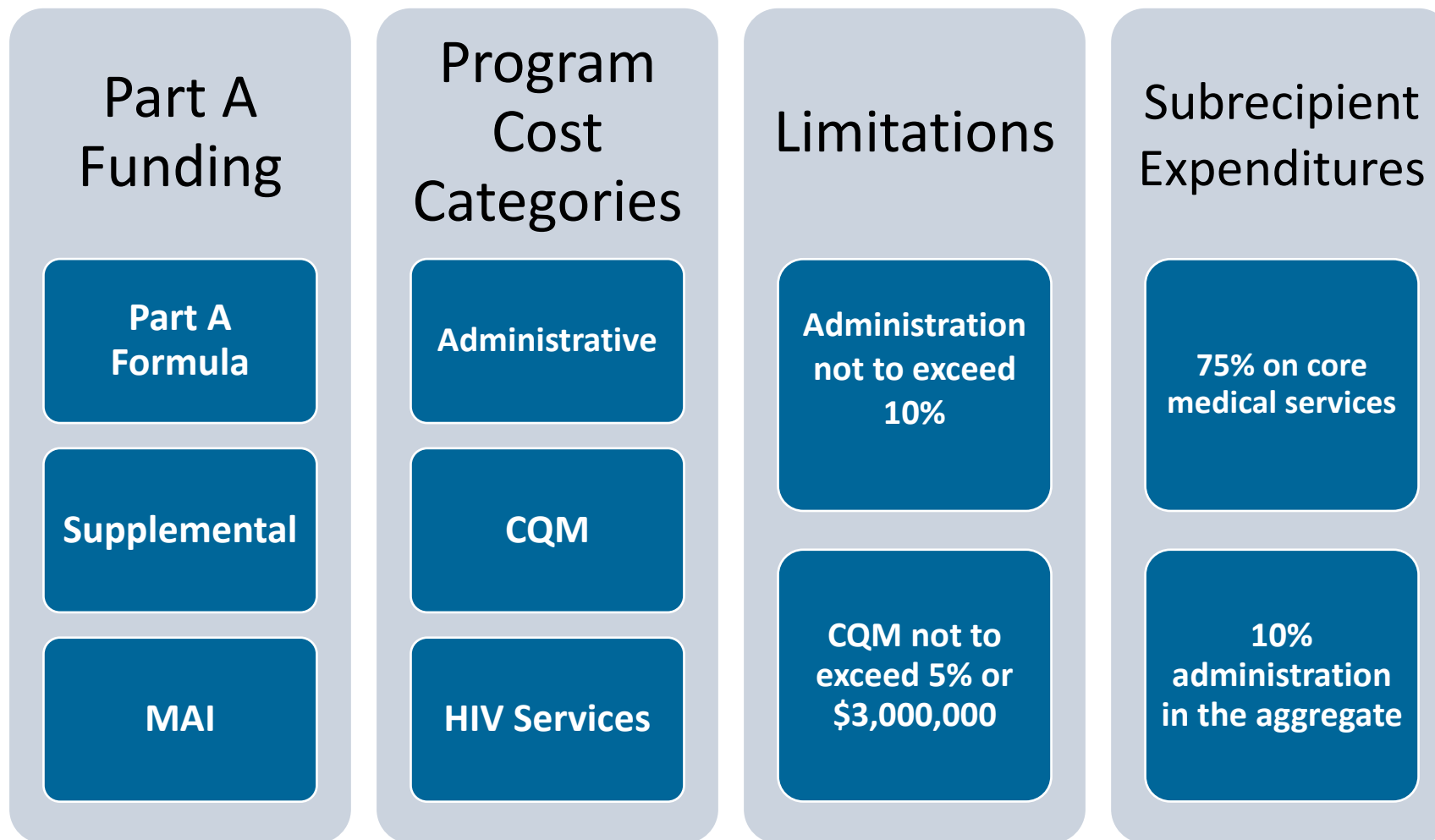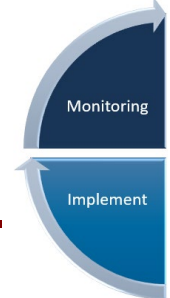
Other
[List all costs that do not fit into any other category.] Show breakdown of costs.

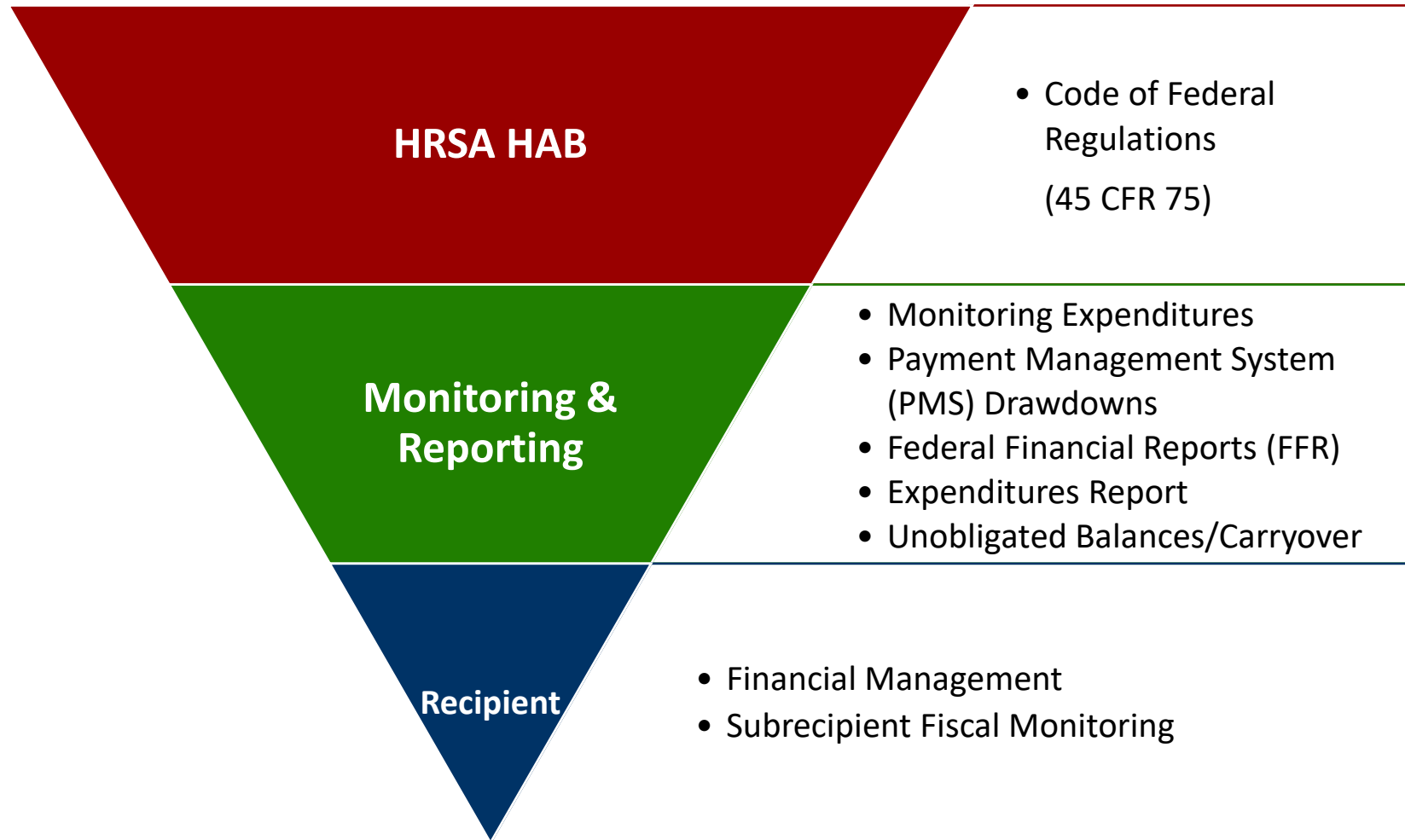| List of Other	Budget Impact Justification [Impact on the program's objectives/goals.]	Amount (round down to nearest whole number)

Budget Implementation

Financial Management

- Financial Policies and Procedures
- Proper documentation
- Process and timeframe for payment/reimbursement
- Track all funds including income and expenses that are awarded, generated, and expended on activities pertaining to the Ryan White HIV/AIDS Program Part A using general accounting practices

Tracking Expenditures for Reporting

Part A Funding

- Part A Formula
- Supplemental
- MAI

Program Cost Categories

- Administrative
- CQM
- HIV Services

Limitations

- Administration not to exceed 10%
- CQM not to exceed 5% or $3,000,000

Subrecipient Expenditures

- 75% on core medical services
- 10% administration in the aggregate

Monitoring

HRSA HAB
- Code of Federal Regulations
  (45 CFR 75)

Monitoring & Reporting
- Monitoring Expenditures
- Payment Management System (PMS) Drawdowns
- Federal Financial Reports (FFR)
- Expenditures Report
- Unobligated Balances/Carryover

Recipient
- Financial Management
- Subrecipient Fiscal Monitoring

Resources to Avoid Pitfalls

Ryan White HIV/AIDS Program Part A Manual
U.S. Department of Health and Human Services
Health Resources and Services Administration
HIV/AIDS Bureau
Last Updated: March 2023

Part A Manual (hrsa.gov)

Ryan White HIV/AIDS Program (RWHAP) National Monitoring Standards for RWHAP Part A Recipients
June 2022
Division of Metropolitan HIV/AIDS Programs
HIV/AIDS Bureau (HAB)

Ryan White HIV/AIDS Program (RWHAP) - Universal Monitoring Standards (UMS) - Fiscal and Program Standards for RWHAP Part A and Part B Recipients (hrsa.gov)

Code of Federal Regulations
A point in time eCFR system

PART 75—UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS

eCFR :: 45 CFR Part 75 -- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

HRSA
Ryan White HIV/AIDS Program
Policy Notices

Policy Notices | Ryan White HIV/AIDS Program (hrsa.gov)

RWHAP Part B

Division of State HIV/AIDS Programs (DSHAP)

Budget Cycle

Budget Cycle diagram showing four stages in a circular flow: Recipient Budget Preparation → PO Review and Approval of Budget → Recipient Implementation → PO Monitoring
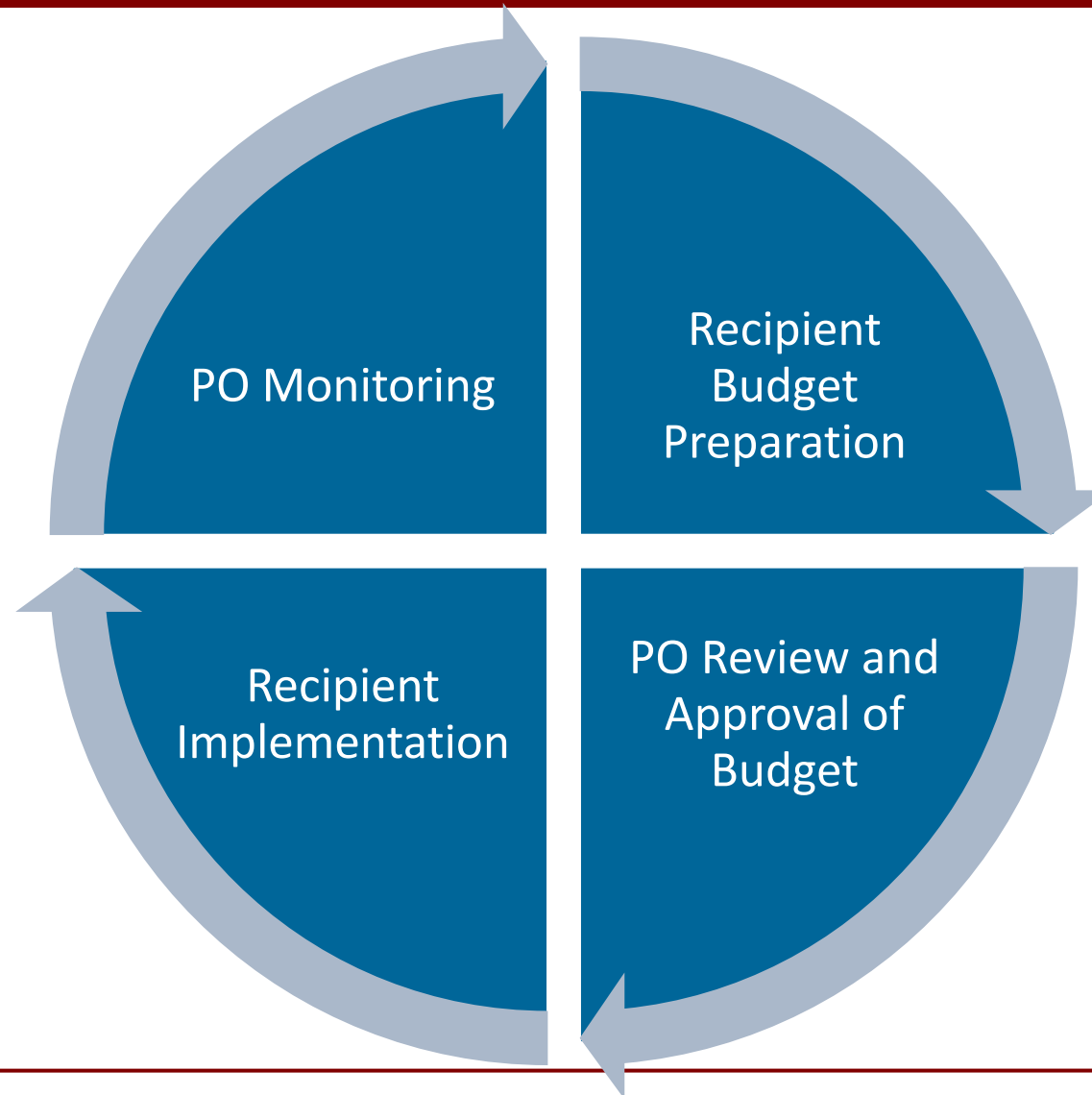
RWHAP Part B – Budget Components

Three Major Components of the Budget Package

RWHAP Part B – SF-424A

RWHAP Part B – SF-424A: Administration

Includes funds for:
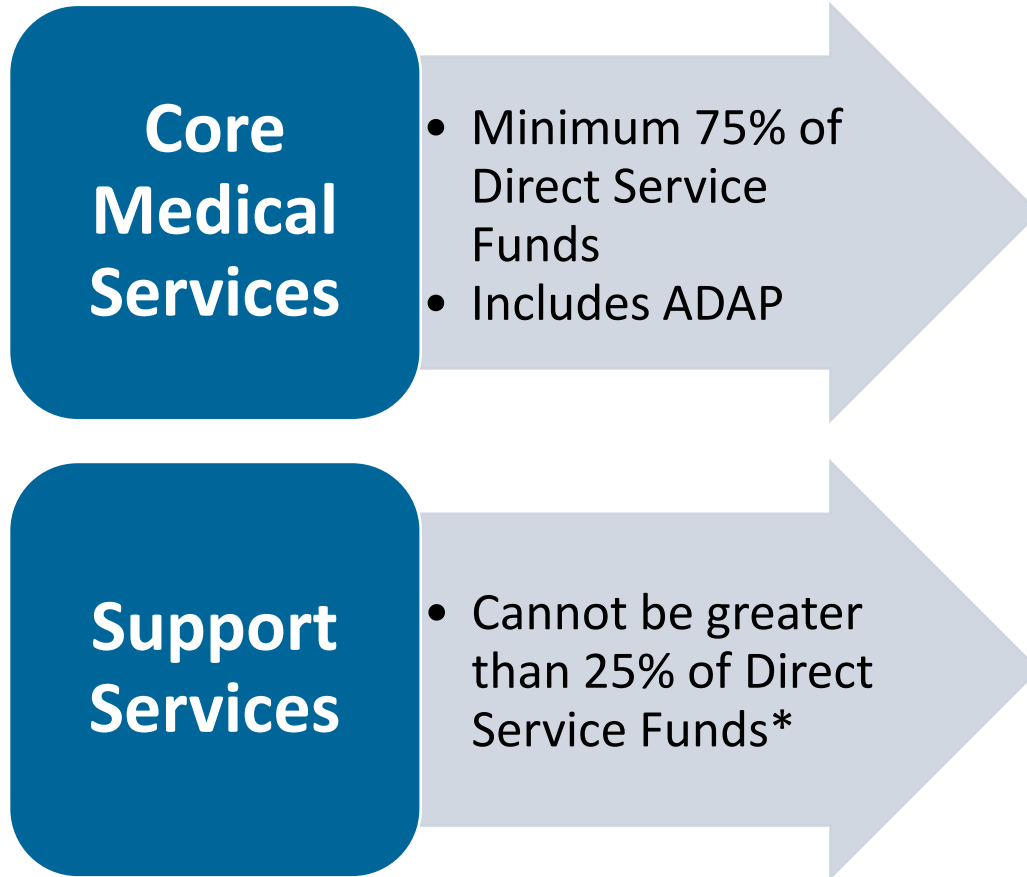
Recipient Administration	P & E	CQM

RWHAP Part B – SF-424A: ADAP

- The three primary service areas covered by ADAP are full-pay medication assistance, health insurance assistance (including premium and medication co-pay assistance) and ADAP Flex (access, adherence and monitoring services related to ADAP)

- Costs related to the provision of medication (e.g., medication cost, cost of PBM, dispensing fee, etc.) are direct costs.

Ryan White HIV/AIDS Program

RWHAP Part B – SF-424A: Direct Services

Core Medical Services

- Minimum 75% of Direct Service Funds
- Includes ADAP

Support Services

- Cannot be greater than 25% of Direct Service Funds*

Exception: Recipients can apply for a Core Medical Services Waiver. See HRSA HAB PN #21-01: [Waiver of the Ryan White HIV/AIDS Program Core Medical Services Expenditure Requirement](#) and the accompanying [Dear Colleague Letter for PN 21-01](#)

Service Category Definitions:
[Policy Clarification Notice (PCN) #16-02: RWHAP Services: Eligible Individuals and Allowable Uses of Funds](#)

RWHAP Part B – SF-424A: Consortia

Consortia: An association of public and nonprofit healthcare and support service providers and community-based organizations with which the state/territory contracts to provide the following for a specific region(s) or the entire state/territory.

- Needs assessment
- Planning
- Service delivery, either directly by consortia or by contract
- Program and fiscal monitoring, including evaluation
- Reporting, including required HRSA HAB and RWHAP Part B reports

RWHAP Part B – SF-424A: Emerging Communities

Emerging Communities (EC) Award: For eligible states/territories with jurisdiction(s) reporting between 500 and 999 cumulative AIDS cases over the most recent five years.

- EC funds can only be used for services within the designated EC and are not eligible for carry over.

- Geographic boundaries for an EC may cross state lines. In these cases, states must collaborate on needs assessment and planning.

- For FY 2024, there are 21 emerging communities.

RWHAP Part B – SF-424A

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Admin.	(2) ADAP	(3) Direct Services	(4) Consortia/ EC	
a. Personnel	$	$	$	$	$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					$
j. Indirect Charges					$
k. TOTALS (sum of 6i and 6j)	$	$	$	$	$
7. Program Income	$	$	$	$	$

Authorized for Local Reproduction

Standard Form 424A (Rev. 7- 97)
Prescribed by OMB (Circular A -102) Page 1A

Ryan White HIV/AIDS Program

RWHAP Part B – SF-424A 2

SECTION C - NON-FEDERAL RESOURCES				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	$	$	$	$
9.				
10.				
11.				
12. TOTAL (sum of lines 8-11)	$	$	$	$

SECTION D - FORECASTED CASH NEEDS				
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$	$	$	$	$
14. Non-Federal	$				
15. TOTAL (sum of lines 13 and 14)	$	$	$	$	$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT				
(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)			
	(b)First	(c) Second	(d) Third	(e) Fourth
16.	$	$	$	$
17.				
18.				
19.				
20. TOTAL (sum of lines 16 - 19)	$	$	$	$

SECTION F - OTHER BUDGET INFORMATION	
21. Direct Charges:	22. Indirect Charges:
23. Remarks:	

Authorized for Local Reproduction

Standard Form 424A (Rev. 7- 97)
Prescribed by OMB (Circular A -102) Page 2

RWHAP Part B – Allocations Report

Form to complete in the Program Terms Report (PTR) web application portal in EHB.

RWHAP Part B – Allocations Report (continued)

Include Funding Award	"Do Not" include Carryover or non-federal funding

Allocations Report
All fields are required.

Public Burden Statement: OMB Control Number (0915-0318) Valid Until 09/30/2023

Budget Year 04/01/2023 – 03/31/2024 Award Information

Budget Year Award Information	Award Amount
1. RWHAP Part B Base Award	
2. RWHAP Part B ADAP Earmark Award	
3. RWHAP Part B ADAP Supplemental Award	
4. Total RWHAP Part B ADAP Earmark + ADAP Supplemental Funds	
5. RWHAP Part B Emerging Communities Award	
6. Total RWHAP Part B Funds	
7. RWHAP Part B MAI Funds	
8. Total RWHAP Part B + MAI Funds	

Ryan White HIV/AIDS Program

Include all allocated amounts by program component (i.e., base award, ADAP earmark + ADAP supplemental award, and EC award

Part B Allocations by Program Component

	1. Base Award		2. ADAP Earmark + ADAP Supplemental Award		3. Emerging Communities (EC) Award		4. Total	
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent
1. Part B AIDS Drug Assistance Program Subtotal								
a. ADAP Services	☐		☐		☐			
b. Health Insurance to Provide Medications	☐		☐		☐			
c. ADAP Access/Adherence /Monitoring Services	☐		☐		☐			
2. Part B Health Insurance Premium & Cost Sharing Assistance for Low Income Individuals	■	■	■	■	■	■	■	■
3. Part B Home and Community-based Health Services	■	■	■	■	■	■	■	■
4a. Part B HIV Care Consortia / EC HIV Care Consortia			■	■	☐			
4b. Part B HIV Care Consortia Administration / EC HIV Care Consortia Administration	☐		■	■	☐			■
4c. Part B HIV Care Consortia Planning & Evaluation / EC HIV Care Consortia Planning & Evaluation	☐		■	■	☐			
4d. Part B HIV Care Consortia CQM / EC HIV Care Consortia CQM	☐		■	■	☐			
5. Part B Emerging Community Services	■	■	■	■	☐			
6. Part B State Direct Services			■		■	■		
7. Part B Clinical Quality Management	☐		☐		☐			■
8. Part B Recipient Planning & Evaluation Activities	☐		☐		☐			■
9. Recipient Administration	☐		☐		☐			■
10. Column Totals								■
11. Total Part B X07 Allocations								

Include all allocated amounts for core medical services for either consortia, direct services or EC.

Breakdown for Consortia, State Direct Services and Emerging Communities

Service	1. Consortia		2. Direct Services		3. Emerging Communities		4. Total	
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent
Core Medical Services								
a. AIDS Drug Assistance Program Treatments	$0	0.00 %					$0	0.00 %
b. AIDS Pharmaceutical Assistance	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
c. Early Intervention Services (EIS)	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
e. Home and Community-Based Health Services	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
f. Home Health Care	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
g. Hospice	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
h. Medical Case Management, including Treatment Adherence Services	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
i. Medical Nutrition Therapy	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
j. Mental Health Services	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
k. Oral Health Care	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
l. Outpatient/Ambulatory Health Services	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
m. Substance Abuse Outpatient Care	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
1. Core Medical Services Allocation Subtotal	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
Support Services								
a. Child Care Services	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %
b. Emergency Financial Assistance	$0	0.00 %	$0	0.00 %	$0	0.00 %	$0	0.00 %

HRSA Ryan White HIV/AIDS Program

RWHAP Part B – Allocations Report (continued)

Include all allocated amounts for MAI for education and/or outreach.

MAI Allocations by Program Component

	MAI Award Amount	MAI Award Percentage
1. Education to increase minority participation in ADAP		
2. Outreach to increase minority participation in ADAP		
3. Clinical Quality Management		
4. Recipient Planning & Evaluation Activities		
5. Recipient Administration		
6. Total MAI Allocations		

☐ Recipient received waiver for 75% core medical services requirement.

Final section in the allocations report auto-populates with data previously entered to complete the legislative requirements checklist.

Legislative Requirements Checklist

Core Medical Services Allocations	Amount	Percent
ADAP	$25,000	29.41 %
State-Direct Services: Core Medical Services	$48,000	56.47 %
Emerging Communities: Core Medical Services	$0	0.00 %
Total Core Medical Service Allocations	**$73,000**	**85.88 %**

Support Services Allocations	Amount	Percent
Consortia Services	$0	0.00 %
Consortia EC Services	$0	0.00 %
State-Direct Services: Support Services	$10,000	11.76 %
Emerging Communities: Support Services	$0	0.00 %
MAI Allocations for Education + Outreach Services	$2,000	2.35 %
Total Support Services Allocations	**$12,000**	**14.12 %**
Total Services Allocations	**$85,000**	**100.00 %**

CLINICAL QUALITY MANAGEMENT	Allocations	Amount
Total Clinical Quality Management Allocations must be 5% of the total X07 award or $3 million (whichever is smaller.)	Capped Amount	$5,000
To the right, is the maximum (Capped Amount) that may be allocated to Clinical Quality Management as well as the amount of Current Fiscal Year dollars allocated (CQM Allocations) on Clinical Quality Management. Please check to make sure the Allocations do not exceed the Capped Amount.	CQM Allocations	$3,000

PLANNING AND EVALAUTION / RECIPIENT ADMINISTRATION	Allocations	Amount	Percent
Total Part B X07 Planning and Evaluation Allocations and total Recipient Administration Allocations must each be 10% or less than the total X07 award. Planning and Evaluation and Recipient Administration do not necessarily need to be 10% of each funding stream as long as the combined total of each is 10% or less of the total X07 award. In addition, Planning and Evaluation and Recipient Administration Allocations combined must not exceed 15% of the total X07 award.	Planning & Evaluation	$5,000	5.00 %
	Recipient Administration	$7,000	7.00 %
To the right, is the percentage of Planning and Evaluation Allocations divided by the Total X07 award and Recipient Administration Allocation divided by the Total X07 award. Please check to make sure these percentages are not greater than 10%. Also shown is the percentage of the combined Planning and Evaluation and Recipient Administration Allocations divided by the Total X07 Award.	Planning & Evaluation + Recipient Administration	$12,000	12.00 %

Cancel

Save

RWHAP Part B – Budget Narrative

Recipients receive an Excel spreadsheet that can be used to prepare the budget justification.

A23

	A
1	**INSTRUCTIONS FOR FY 2023 RWHAP PART B BUDGET NARRATIVE SPREADSHEET: PART B BASE, ADAP BASE, ADAP SUPPLEMENTAL, MINORITY AIDS INITIATIVE (MAI), AND EMERGING COMMUNITIES (EC) AWARDS**
2	**Please print this sheet to review instructions.**
3	**Please complete all tabs (Part B Base, ADAP Base, MAI, Consortia, and EC) of this spreadsheet. If you have any questions regarding how to complete this report, please contact your project officer.**
4	The Budget Narrative Spreadsheet is a component of the Program Terms Report. This spreadsheet is applicable for all recipients that received Ryan White HIV/AIDS Program (RWHAP) Part B Base, ADAP, ADAP Supplemental, MAI, and EC awards in FY 2023. This report must be submitted in an Excel spreadsheet format.
5	**General Instructions:**
6	Additional rows may be added as necessary before the final line within the category. Please ensure that the subtotal calculations are correct.
7	**Personnel:**
8	a) Please enter the name and position of each staff person who will be paid to perform tasks for the project outlined in the application. Please provide each staff person's full-time equivalent (FTE), salary, position title and a brief description of their role on the project. b) Please add additional staff persons, if needed, and please re-adjust the formula in the Personnel Subtotal cell. c) For employees who are less than 1-FTE on the grant, please identify percentage of the FTE that is paid for with RWHAP Part B Funds, the full salary amount and all funding sources outside of RWHAP Part B funding for Personnel and Fringe Benefits costs.
9	**Fringe Benefits:**
10	a) Please enter the total fringe benefit dollar amount. Fringe benefits are based upon staff personnel salaries.
11	**Travel:**
	a) Please utilize the current federal travel reimbursement rate. b) Please enter all anticipated travelers and expenses for both in-state and out-of-state travel, summarized as appropriate, by

| Instructions | Part B Base | ADAP | MAI | Consortia | EC | Total |

How to Avoid Pitfalls for the Budget Documents

- Your budget documents are part of the Program Terms Report (PTR).

- Submit within 90 days following receipt of the final NoA.

- Make sure your credentials to access the PTR web application are current.

- The PTR contains several documents, and ALL documents must be accurate and consistent for acceptance of the PTR.

- Be responsive to the PO when they request revisions.

RWHAP Parts C & D

Division of Community HIV/AIDS Programs

RWHAP Part C EIS Program

- **Budget Requirements**

- **Cost Categories:**
  - Early Intervention Services
  - Core Medical
  - Clinical Quality Management
  - Supportive Services
  - Administrative

- **Supporting Budget Documents and Common Issues**

RWHAP Part C EIS Cost Categories

Five Cost Categories

| Early Intervention Services | → | Core Medical Services | → | Clinical Quality Management (CQM) | → | Support Services | → | Administrative |
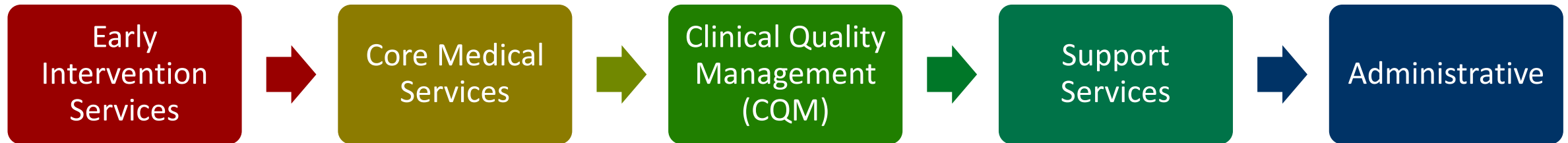
These haven't changed, but it's still important to review the specific NOFO announcement that applies to the fiscal year for your budget in order to confirm cost category details and requirements.

Understanding RWHAP Part C EIS Cost Categories

Part C Early Intervention Services (EIS) Requires 5 Services:

- High risk targeted HIV testing

- Other clinical and diagnostic services regarding HIV, and periodic medical evaluations
  - These are: OAHS, Medical CM, Mental Health, OP Substance Abuse Tx, Oral Health, MNT
  - All of these services fall under Core Medical cost category

- Providing therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from HIV (pharmaceuticals to treat HIV, AIDS, and infections)

- Counseling individuals with respect to HIV – but excluded from 50% calculation

- Referrals and linkage to care – but excluded from 50% calculation

Understanding RWHAP Part C EIS Cost Categories

Core Medical Services

- Core medical cost category incorporates <u>all</u> expenses in the EIS cost category, including budgeted costs for counseling and referrals/linkage to care

- The 75% requirement is identical to RWHAP Parts A and B

- HAB Policy Clarification Notice 16-02: Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds

RWHAP Part C – Budget Components

Three Major Components of the Budget Package

Line Item Budget

Budget Justification Narrative

SF-424A
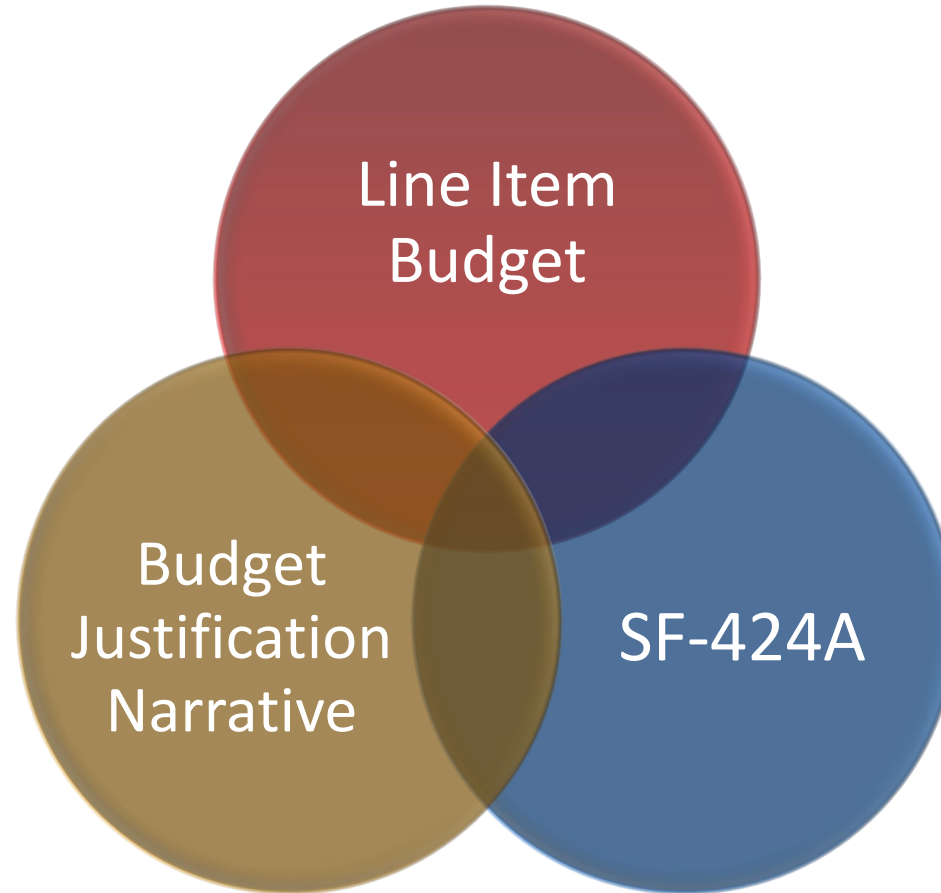
Program Specific Line-Item Budget

Line Item	Salary	% FTE	Program Salary Subtotal	EIS	Core Medical Services	CQM	Support Services	Admin	Total Funds
Personnel									$0
Subtotal Salaries				$0	$0	$0			$0
Fringe Benefits									$0
Subtotal Personnel				$0	$0	$0	$0	$0	$0
Travel									$0
									$0
Total Travel				$0					$0
Equipment									$0
									$0
Total Equipment				$0	$0	$0	$0	$0	$0
Supplies									$0
									$0
Total Supplies				$0	$0	$0	$0	$0	$0
Contractual									$0
									$0
Total Contractual				$0	$0	$0	$0	$0	$0
Other									$0
									$0
									$0
Total Other				$0	$0	$0	$0	$0	$0
Total Direct Expenses									
				$0	$0	$0	$0	$0	$0
Indirect Expenses**									$0
Total Requested Grant Funds									
				$0	$0	$0	$0	$0	$0
Percent of total grant				%	%	%	%	%	

Annotations:
- ≥ 50%
- < 10% to infinity
- ≥ 75% (minus Admin and CQM)
- Include in 10% Administrative cap

RWHAP Part C EIS Budget Narrative

Justification Narrative MUST:

- Be divided by Part C EIS cost categories and sub-divided according to object class categories

- Budget narrative content must be specific and justify the allocation of each line item expense under the correct cost category

- This detail helps HRSA (program and OFAAM staff) determine allowability of costs and is later used to confirm entries in the RWHAP Allocation Report

- Justify each item within the "Other" category
    - For example: rent or utilities (if it is not included in an approved indirect cost rate)

Staffing Plan

ALL **HIV program staff, including key staff NOT funded by the grant**

- Education, training, and HIV experience and expertise
- Language fluency and cultural competence
- Provide FTE and **ALL** funding sources for each staff member
- This includes portion of FTE that is in-kind

Specifically identify:

- Program Coordinator/ Manager
- Staff managing and overseeing program activities
- Medical Director and all medical providers
- Lead for Quality Management activities
- Staff monitoring activities of contractors (as applicable)

Sample Staffing Plan

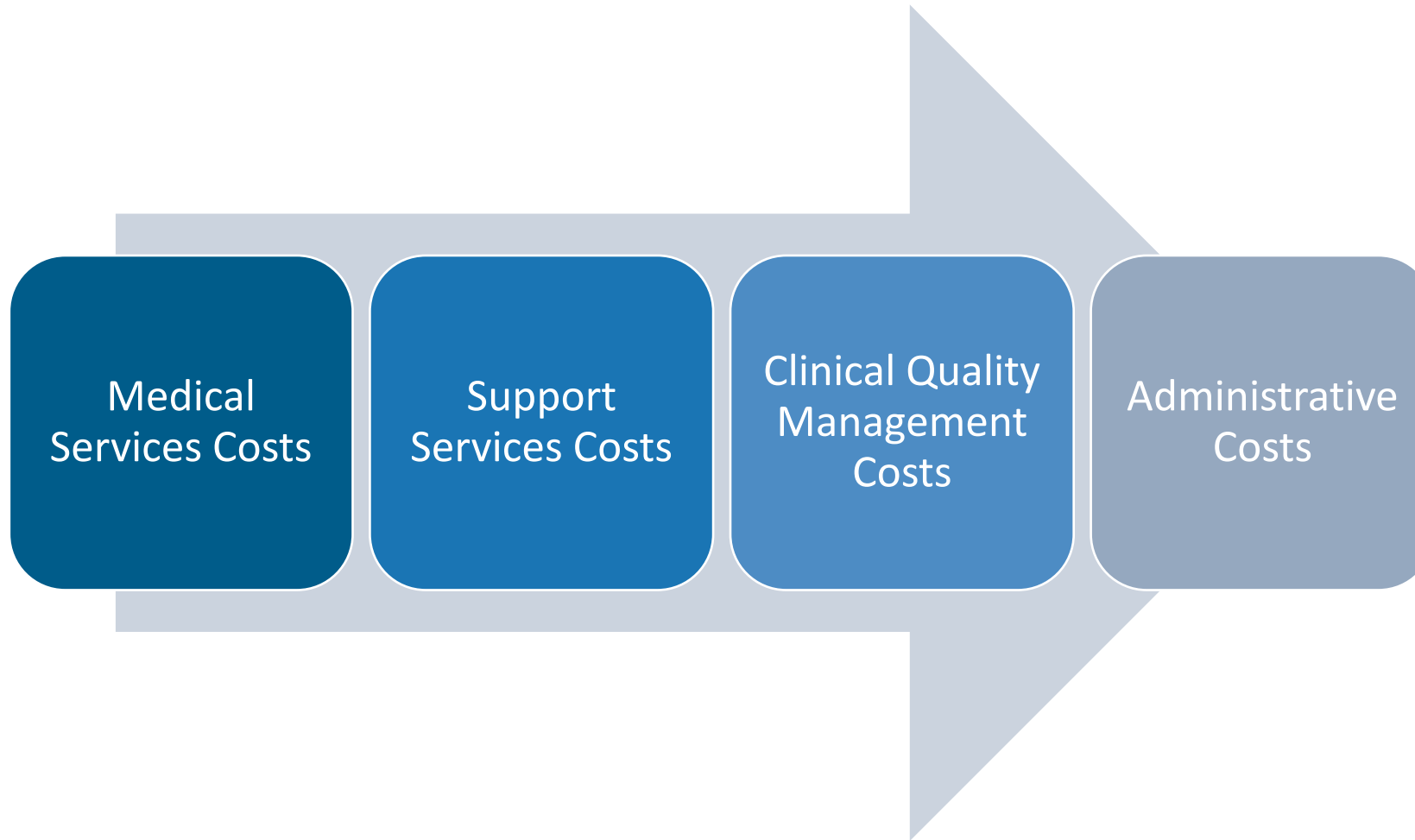| NAME	POSITION	FUNDING		Expertise / Education
George Carter, MD	Physician /	40%	Part C	31 years' experience working with HIV and 43 years as a MD
	Medical Director	7%	Part D	
		53%	G&A	
Sally Brown, CRNP	Nurse	50%	Part C	2 years' experience working with HIV and 3 years as a nurse practitioner
	Practitioner	5%	Part D	
		45%	G&A	
Terri Moore, LPN	Nurse	50%	Part C	13 years' experience with HIV
		5%	Part D	
		45%	G&A	
Pam DeLozier,	Health Data	20%	Part C	4 years' experience working with HIV and 30 years in data analysis
MBA, PMP	Analyst	5%	Part D	
		50%	SAMHSA	
		25%	CDC	
July Bower, CPA	CFO	5%	Part C	10 years' experience working with HIV and 25 years in accounting
		2%	Part D	
		10%	SAMHSA	
		7%	CDC	
		76%	G&A	

Ryan White HIV/AIDS Program

RWHAP Part D WICY

Division of Community HIV/AIDS Programs

RWHAP Part D WICY Program Overview

- **Provide family-centered care in the outpatient or ambulatory care setting to:**
  - low income, vulnerable, medically underserved women (25 years and older) living with HIV
  - infants (up to two years of age) exposed to or living with HIV
  - children (ages two to 12) living with HIV
  - youth (ages 13 to 24) living with HIV

- **Allows services to affected individuals (family members, care givers, guardians) in limited situations.**

RWHAP Part D WICY Budget Cost Categories

Medical Services Costs → Support Services Costs → Clinical Quality Management Costs → Administrative Costs

RWHAP Part D WICY Program Requirements

Medical Services

- Provision of **HIV outpatient or ambulatory medical care** to WICY population, including medical case management, behavioral health, nutrition, & oral health services. Additional medical services, see HAB PCN 16-02

- Legislation *does not require* the 75% minimum allocation to Core Medical

- Linkages with providers of adult HIV care for transitioning youth to adult care

Support Services

- Part D legislation allows for some services to *affected* populations such as caregivers of an eligible client, or to the children of an eligible client

- Due to the allowability of funding a limited number of services to those affected by HIV, there are some supports services that are allowable only in the Part D WICY program

HAB PCN 16-02: RWHAP Support Services

**Childcare Costs	Other Professional Services
Emergency Financial Assistance	Outreach Services
Food Bank/Home Delivered Meals	Permanency Planning
Health Education Risk Reduction	**Psychosocial Support Services
Housing	Referral for Health Care and Support Services
Legal Services and Permanency Planning	Rehabilitation Services
Linguistic Services	**Respite Care
Medical Transportation	Residential Substance Abuse Services
Non-Medical Case Management	

**Available to affected family members/caregivers

RWHAP Part D WICY Line-Item Budget

Line Item	Annual Salary	Program FTEs	Program Salary Subtotal	Medical Services	CQM	Support Services	Administrative	Program TOTAL
Personnel, Name & Position	Salary	FTE						
Subtotal								
Fringe benefit rate								
Total Personnel								
Travel								
Total Travel								
Supplies								
Total Supplies								
Contractual								
Total Contractual								
Other								
Total Other								
Total Direct Costs								
Indirect Costs								
GRAND TOTAL								
% budgeted by cost category					%		10.0% cap	

Included in 10% administration

How to Avoid Pitfalls for the Budget Narrative

1	Review the applicable Notice of Funding Opportunity announcement
2	Allow enough time to prepare and obtain approval of documents
3	Double check figures and correlation between all budget documents
4	Check calculations (verify Excel formulas not miscalculating totals)
	Verify legislative requirement are met for percentages to Early Intervention Services, Core Medical and Administration
6	CQM allocations must be reasonable
7	Be clear on what constitutes CQM vs. what classifies as administration

How to Avoid Pitfalls for Creating a Budget Narrative

8 — Include whole numbers only, not decimals

9 — Ensure consistency of information across all documents

10 — Verify personnel cost (annual salary/hourly rate) does not exceed the salary limitation requirement

11 — Review for direct service cost - (PCN 15-01) Treatment of Costs under the 10% Administrative Cap

12 — Review for unallowable costs (PCN 16-02) Eligible Individuals and Allowable Uses of Funds

RWHAP Allocation Report for Parts C EIS and D WICY

Due in EHB within 60 days after start of budget period

Reflects where projected expenses are distributed

Correlates with approved Line Item Budget

Allocation Report

RWHAP Expenditure Report for Part C EIS and Part D WICY

Due 90 days after the budget period

Reflects the actual distribution of expenses including carryover

Expenditure Report

Questions and Answers

Connect with the Ryan White HIV/AIDS Program

Learn more about our program at our website:

ryanwhite.hrsa.gov

 Sign up for the Ryan White HIV/AIDS Program Listserv:

https://public.govdelivery.com/accounts/USHHSHRSA/signup/29907
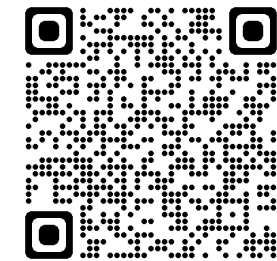
Connect with HRSA

Learn more about our agency at:

www.HRSA.gov

✉ Sign up for the HRSA eNews

FOLLOW US:

View current
HRSA openings:

https://www.hrsa.gov/hr