
FY 2020 PLANNING COUNCIL DIRECTIVES TO THE RECIPIENT'S OFFICE

DIRECTIVE 1.1 - TO FACILITATE GEOGRAPHIC FUNDING DISTRIBUTION

The Recipient's Office will adhere to the service category allocations approved by the Planning Council during their annual Priority Setting and Resource Allocation Process.

DIRECTIVE 1.2 - TO FACILITATE COST EFFECTIVENESS AND FULL EXPENDITURE OF FUNDING ACROSS ALL SERVICE CATEGORIES

The Recipient's Office will ensure that prioritized and funded HIV services are available to all Persons Living with HIV/AIDS (PLWH) in the Eligible Metropolitan Area (EMA)'s five regions. The Recipient's Office shall provide four financial updates to the Membership/Finance Committee throughout the grant year. One of the financial updates will include a report showing allocations for the current grant year, based on the EMA's award(s)

The Recipient's Office shall use HRSA service category definitions defined and approved by the Planning Council.

DIRECTIVE 1.3 – RAPID REALLOCATION TOOL FOR THE RECIPIENT

The Recipient's Office may rapidly reallocate funds without Planning Council consent based on the following conditions:

1. Up to 10% of the service category allocation.
2. Service category reallocations may occur after the second quarter of the grant year (August 31st).
3. Service category reallocations can be made from support to support, support to core and core to core.

DIRECTIVE 1.4 – TO PREVENT THE POTENTIAL CONFLICT OF INTEREST IN RYAN WHITE AWARDS

Only organizations that provide direct services may apply for Ryan White Part A funds. State and city entities cannot apply for Ryan White Part A (including Minority AIDS Initiative funds) funds

DIRECTIVE 2.1 – TO PROMOTE COLLABORATIVE PLANNING AND POLICY-MAKING WITHIN EACH OF THE PLANNING COUNCIL'S FIVE REGIONS

The Recipient's Office will ensure that in each region of the EMA, Part A funded Leads and sub/ sub recipients will convene a regional planning group. The regional planning group must be comprised of Persons Living with HIV who receive Part A services and a representative from each Part A funded organization operating in the respective region. The regional planning group should include other representatives from Ryan White Part B, Part C, Part D, state and federal HIV prevention and care recipients (where applicable), Planning Council members and other parties relevant to building the region's HIV/AIDS care continuum. The regional planning group must meet monthly at least 10 times per year for the purpose of discussing issues including but not limited to: viral suppression; the EMA's priority populations integration of prevention/care services; co-location of services; barriers to care;

funding opportunities; consumer participation; continuous quality improvement; review of Part A expenditures and regional service utilization. Regional Lead representation is required at meetings of the Planning Council including Priority Setting and Resource Allocation (typically the first Thursday in August). The individual(s) selected to represent the lead agency must be submitted to the Recipient for review and approval based on their knowledge of and involvement with the Ryan White Program. Additionally, based on the Planning Council's Activity Timeline (PCAT), each region will create a regional activity timeline to align with the PCAT. Planning Council Support Staff will assist each region in drafting their activity timeline based on the PCAT.

DIRECTIVE 2.2 – TO FACILITATE DEVELOPMENT OF AND ADHERENCE TO THE EMA'S SERVICE STANDARDS

All Ryan White Part A funded organizations shall adhere to the EMA's Service Standards approved by the Planning Council and developed in partnership with the Recipient's Office.

Annually, the Recipient's Office shall monitor the EMA's Service Standards for compliance, produce a report and present the results to the Planning Council.

DIRECTIVE 2.3 – DATA REQUESTS AND RECIPIENT'S OFFICE RESPONSE

The Recipient's Office, upon receipt of a data request from Planning Council Support Staff, shall produce requested report(s) to inform Planning Council decision(s).

DIRECTIVE 3.1 – MINORITY AIDS FUNDING DISTRIBUTION

Minority AIDS Initiative (MAI) funding received by the EMA will be divided equally among the EMA's five regions for Intensive Medical Case Management based on the EMA's priority populations.