NEWARK ELIGIBLE METROPOLITAN AREA (EMA)
HIV HEALTH SERVICES PLANNING COUNCIL

ASSESSMENT OF THE RYAN WHITE PART A ADMINISTRATIVE MECHANISM IN THE NEWARK EMA

FY'2015

(March 1, 2015 – February 28, 2016)

October 2015

NEWARK EMA HIV HEALTH SERVICES PLANNING COUNCIL
ASSESSMENT OF THE ADMINISTRATIVE MECHANISM
FY'2015

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I.   INTRODUCTION

A.   PURPOSE

The purpose of Newark EMA Assessment of the Part A Administrative Mechanism for FY 2011 is to fulfill the federal mandate of the Ryan White Part A program. This mandate was initially set forth in the Ryan White CARE Act, as amended, and has been incorporated into the Ryan White HIV/AIDS Treatment Modernization Act (RWTMA) of 2006 and the Ryan White HIV/AIDS Treatment Extension Act (RWTEA) of 2009. This requirement was summarized in the HRSA/HAB Ryan White HIV/AIDS Program Part A Manual:

> **"Assessment of the Administrative Mechanism and Effectiveness of Services**
> Section 2602(b)(4)(E) of the PHS Act requires planning councils to "assess the efficiency of the administrative mechanism in rapidly allocating funds to the areas of greatest need within the eligible area, and at the discretion of the planning council, assess the effectiveness, either directly or through contractual arrangements, of the services offered in meeting the identified needs." [1]

Planning councils are required to complete the assessment annually. It has been the practice of the Newark EMA HIV Health Services Planning Council to complete one full assessment followed by two annual updates. The full assessment includes surveys of both the grantee and all providers, and the updates survey only the grantee. The Council completed two full assessments in 2011 and 2014. The council completed two annual updates in 2012 and 2013. This 2015 report is an update to the 2014 full assessment

B.   METHODOLOGY

The assessment was completed by the Planning Council through its Research and Evaluation Committee (REC). The committee reviewed and updated the assessment tool used in 2014 for the Grantee to reflect current agency responsibilities. The Committee prepared final survey instruments. The Grantee Survey was computer fillable in Microsoft Word.

On August 24, 2015 the Council emailed the 2015 Grantee Survey to the City of Newark Department of Health and Community Wellness' Ryan White Unit Project Director/Grants Manager and the Union County Human Services Sub-grantee/Grants Manager, with a completion date of September

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[1] Health Resources and Services Administration. HIV/AIDS Bureau. Ryan White HIV/AIDS Program Part A Manual Revised 2014, P.98 XI. Ch 2. Legislative Background
http://hab.hrsa.gov/manageyourgrant/files/happartamanual2014.pdf

7, 2015.
The Council compiled results from the Grantee/Sub-grantee as shown in this report.

C. GENERAL FINDINGS

The Grantee section discussed the RWU grantee's newly implemented Monthly Monitoring Tool and CHAMP's Eligible Scope Reporting process. The Monthly Monitoring Tool ensures comprehensive monitoring of service providers throughout the grant period. The Monthly Monitoring Tool assists the Program Monitoring staff with complying with the National Monitoring Standards and it also incorporates CHAMP reporting. Effective CY2015, providers are required to use CHAMP to report on services provided to clients, regardless of pay source or insurance status (Eligible Scope Reporting). The UC Sub-grantee noted that there were delays in fully executing contracts due to a slow response to requests for required contract documentation. Union County's Finance Department's pace in setting up the RW account also played a role in delaying the execution of UC contracts. The RWU grantee indicated delays in provider reimbursements were due to the provider's lack of supporting documents and failures to submit expense reports. The RWU Grantee has given technical assistance to agencies and Ryan White Staff to assist with the reimbursement process. The Grantee section further discussed the addition of several conditions to the contract agreement in response to HRSA policy changes.

D. RECOMMENDATIONS

The Research and Evaluation Committee (REC) has provided the following recommendations to the Grantee/ Sub-grantee:

1. In order to better inform providers and consumers, the grantee should include a table/grid that organizes the agencies by service category.

2. Please provide a full explanation of the reimbursement process and include a timeline.

3. In response to the data presented on contracting, it is observed that most contracts are fully executed approximately 5 months from the start of the contract year. There is concern that the length of time it takes for contracts to be fully executed creates a burden for providers and consumers. Please explain the contracting approval process by; providing a table which lists the steps as well as a timeline.

E.   LIST OF ABBREVIATIONS

The following abbreviations and acronyms are used in this report.

CQM	Clinical Quality Management
EIRC	Early Intervention and Retention Collaborative
EFA	Emergency Financial Assistance
EFT	Electronic Funds Transfer
EMA	Eligible Metropolitan Area
FH	Freeholder
HRSA	Health Resources and Services Administration
LGBTQ	Lesbian, Gay, Bisexual, Transgender, and Questioning
MSM	Men who have sex with men
NEMA	Newark Eligible Metropolitan Area
NOA	Notice of Award
PC	Planning Council
PO	Purchase Order
PSRA	Priority Setting and Resource Allocation
RFP	Request For Proposals
RW	Ryan White
RWU	Ryan White Unit
TA	Technical Assistance
UC	Union County
UOB	Unobligated Balance

III. GRANTEE SURVEY

A. RFP PROCESS AND SELECTION OF PROVIDERS

1.   **In the last fiscal year (FY'2014), what work was undertaken by the Grantee to encourage new providers to apply for Ryan White Part-A funds?**

City of Newark The Grantee continues to advertise the Newark EMA's Request for Proposals (RFP) in the Star Ledger (which covers the entire EMA), as well as other newspapers in the service area: Courier News (Union), Daily Record (Morris), NJ Herald (Sussex), Express Times (Warren) and the City of Newark's website.

Ryan White program information is also distributed at health fairs and other community events attended by non-Ryan White Providers.

Non-Ryan White Providers who show an interest in the program are given a copy of the most recent Request for Proposal (RFP) Manual, and may also be scheduled for a face to face meeting with the NEMA Project Director.

Union County The Ryan White RFP is advertised in several local newspapers by the Newark EMA Grantee Representative. The Union County grantee participates in this process and meets with UC providers quarterly to discuss the state of the UC HIV Care Continuum. Due to numerous years of level or reduced funding, the UC grantee does not actively pursue new applicants. No areas of concern were noted and the need to expand services in UC was not warranted.

2.   **How many proposals were received for the current fiscal year (FY'2015)? Of these proposals how many were awarded contracts for Ryan White Part A funds?**

City of Newark A *total of 41 applications were submitted this grant year. All 41applications were accepted and received RW funding for FY2015.*

Union County All proposals for Part A funds are submitted to the Newark grantee's office. Ten applications to provide services in UC were received by the Newark grantee and the UC grantee awarded funds to all ten.

3.   **Please describe the process used to review proposals requesting FY'2014 Ryan White Part-A funds; including the external review panel (including a demographic description of peer reviewers, number of peer reviewers, where they are from geographically, professional background and HIV status), criteria used to assess proposals and how peer reviewers' comments are considered in the final determinations.**

City of Newark

External Review Process
Applications are subjected to an External Peer Review process in order to eliminate conflict of interest and assure a fair and objective evaluation. Peer reviewers are chosen from a large pool of medical and public health providers, administrators and professionals serving the state of New Jersey, but with no direct relationship/affiliation with current and potential Ryan White providers. All peer reviewers are required to submit a Conflict of Interest/Disclosure Form. Members of the 2015 panel (total of 22) were from New York and New Jersey (18 women, 4 men, 75% black, 14% white, 9% Hispanic and 9%MSM).

Each proposal is assigned to two peer reviewers, who must complete an evaluation packet for each of their assigned proposals, outlining areas of strength and weakness. The evaluation packet allows for scoring of each section of the proposal and an overall performance score. A two to three day conference is held at the Grantee's office. All reviewers must attend and present their findings in a panel-like discussion, which is later transcribed. The average of the two scores from each reviewer is the "External Score" for the proposal.

Internal Review Process
Each proposal is assigned to a program monitor (in the Grantee's office) who must complete an evaluation packet for each of their assigned proposals and also outline areas of strength and weakness. Continuing applicants are reviewed by their program monitor for the current grant year. In addition to the proposal, the program monitor completes an evaluation of the current performance for each continuing applicant, taking into account program accomplishments, fiscal diligence and adherence to reporting requirements. The Program Monitor score represents the "Internal Score" for the proposal.

Allocation Process
The average of the Internal and External Scores represents the Overall Score for the proposal. Scores are used to determine eligibility for funding. A score of less than 65 points will disqualify you, unless special circumstances apply.   Service category allocations are made in accordance with the guidance set forth by the Planning Council in the fiscal year's Priority Setting Report.

Union County
As stated above, all proposals for Part A funds are submitted to the Newark grantee's office. Please refer to the Newark grantee's response.

The UC grantee reads and evaluates all applications submitted to provide services in UC. THe UC grantee uses the same evaluation criteria and tools as the Newark RW program monitors and the peer reviewers.

4.   **Did the selection process this year (FY'2015) identify new providers? If so, please identify the County/Region and services of the new provider.**

City of Newark There were no new providers funded this grant period.

Union County No new providers were identified for UC.

5.   Did the selection process this year (FY'2015) address the needs of underserved/un-served communities (please respond in reference to each of the following groups as well as any other communities considered hard-to-reach: Mentally ill, substance users, gay/bisexual and other MSM, lesbian/transgender people, youth, older adults, undocumented, limited English proficient and Latinos)? If so, How?

City of Newark The Newark EMA has made access to health care a top priority since implementation of the Core Services Model ten years ago. In accordance with the Core Service Provision, core medical services continue to receive 75% or more of direct service dollars. Despite the challenges and complexities of the Newark EMA epidemic, FY15 client level data on utilization of Part A medical care by race/ethnicity, gender, age, exposure category, and geography indicates that no populations are underrepresented in our continuum of care. As part of the application process, providers must be able to describe their experience and success in working with hard to reach populations, bringing them into care, keeping them in care and achieving viral load suppression.

For FY2015, there are a total of 12 Providers funded to provide 4 or more core services under the Core Service Model. FY2015 funding for Mental Health (18 sites), Outpatient Substance Abuse (16 sites) and Residential Substance Abuse (1 site) are in line with the parameters set forth in the Planning Council Resource Allocation Guide. Lastly, as part of the Early Identification of Individuals with HIV/AIDS (EIIHA) Plan, the EMA has identified the following three groups as key target populations: MSM of Color, Youth and PLWHA 45years of age and older.

Union County UC continues to have an established and well-funded mental health and substance abuse continuum of care that is funded by non-Part A sources of funding. UC providers target the mentally ill, substance using, Latino, LGBTQ, and older HIV+ populations in Union County. The UC HIV Care Continuum is smaller but necessary services for the underserved have not been sacrificed. One of UC's providers completed a specialized in-service targeting MSM related care and treatment.

B. PLACEMENT OF CONTRACTS

6.   On what date did the Newark EMA receive its Notification of Award (NOA) from the federal government (HRSA) for FY'2014 funding?

City of Newark Notice of Grant Award ($10,030,400) received 2/9/2015. Balance of Award ($2,928,514) received 5/28/2015. Total Award = $12,958,914.00.

Union County UC received its award from the Newark Grantee on March 2nd, 2015
.
7.   On what date were award letters sent to funded agencies for FY'2015?

City of Newark Partial award letters were distributed on 2/27/2015. Final notice of award was released on 7/17/2015.

Union County   All UC providers received their official NOA on March 17th, 2015.

8.   **On what date were the funds from HRSA accepted by the Freeholders (Union County) or the Municipal Council (City of Newark)?**

City of Newark Funds were accepted by the Newark Municipal Council on March 18, 2015.

Union County   A UC Freeholder resolution was passed on March 12th, 2015 accepting the RW funds.

9.   **In the chart below, please indicate the number of contracts adopted and executed for FY'2015?**

CITY OF NEWARK FY'2015 CONTRACT STATUS		
DATE:	# of contracts ADOPTED	# of contracts EXECUTED
Before April 1, 2015	*0*	*0*
Before May 1, 2015	*0*	*0*
Before June 1, 2015	*6*	*0*
Before July 1, 2015	*23*	*6*
Before August 1, 2015	*29*	*27*
Before September 1, 2015	*29*	*28*

UNION COUNTY FY'2015 CONTRACT STATUS		
DATE:	# of contracts ADOPTED	# of contracts EXECUTED
Before April 1, 2015	*0*	*0*
Before May 1, 2015	*0*	*0*
Before June 1, 2015	*10*	*1*
Before July 1, 2015	*10*	*5*
Before August 1, 2015	*10*	*6*
Before September 1, 2015	*10*	*7*

10. On what date were all contracts with funded agencies fully executed?

City of Newark As of today, 9/16/15, 29 of 32 contracts have been fully executed. There are three contracts in final execution phase. We expect them to be fully executed within the next few days.

Union County   9 of the 10 UC contracts will be executed by 9/15. One contract might be executed before the end of September if the agency submits missing contract documentation.

10.1   **List/describe any obstacles contributing to the delay in executing provider contracts.**

City of Newark No response

<u>Union County</u> This year the UC grantee experienced a slow response to requests for required contract documentation. Some contracts may have been able to be executed sooner than June 1, if finance setup the RW account in a timelier manner. The UC grantee cannot request a FH resolution without corresponding requisitions. If the account is not setup a requisition cannot be entered into the finance system.

11.   **Please comment on the content of the contracts this year (FY'2015) in comparison to last year (FY'2014), for example were any new HRSA policies/guidelines or Planning Council directives/specifications/standards etc. included?**

<u>City of Newark</u> Additional language clearly outlining limits on the use of funds, was added to the service category definitions for Food Bank/Home Delivered Meals and Housing and Related Services. See below:

Emergency Financial Assistance (EFA)

The provision of one-time or short-term payments to agencies or the establishment of voucher programs when other resources are not available to help with emergency expenses related to essential utilities, housing, food (including groceries, food vouchers, and food stamps), and medication. It is expected that all other sources of funding in the community for emergency assistance will be effectively utilized and that any allocation of Ryan White HIV/AIDS Program funds for these purposes will be the payer-of-last-resort, and for limited amounts, limited use and limited periods of time. (1) The provision of food vouchers is limited to $300.00 per individual/$600 per family annually. (2) The provision of transportation assistance (vouchers, taxi reimbursement) is limited to five encounters per client annually. (3) Emergency assistance with medication is limited to a 30 day/1 month supply. (4) Emergency assistance with utilities (phone, gas, and electric) is limited to:

- $3,000.00 per individual/household annually
- Two encounters per individual/household annually
- Three months of unpaid utility charges per encounter
EFA that exceed these limits must have written approval from the Grantee.

Housing Services

Short-term assistance to support emergency, temporary, or transitional housing to enable an individual or family to gain or maintain medical care. Housing-related referral service include assessment, search, placement, advocacy, and the fees associated with them. Eligible housing can include both housing that does not provide direct medical or supportive services and housing that provides some type of medical or supportive services, such as residential substance abuse or mental health services, foster care, or assisted living residential services and housing that does not provide direct medical or supportive services but is essential for an individual or family to gain or maintain access to and compliance with HIV-related medical care and treatment.

NOTE: (1) Housing funds cannot be in the form of direct cash payments to recipients for

services and cannot be used for mortgage payments. (2) Short-term or emergency assistance is understood as transitional in nature and for the purposes of moving and maintaining an individual or family in a long-term, stable living situation. Therefore, such assistance cannot be permanent and must be accompanied by a strategy (housing plan) to identify, relocate, and/or ensure the individual or family is moved to, or capable of maintaining, a long-term stable living situation.

- Assistance in acquiring housing (first month's rent and security $\leq$ 1.5 months) is limited to one encounter annually.
- Emergency assistance with rent is limited to three months of back rent and two encounters annually.
- The provision of transitional housing services should not exceed twenty-four consecutive months.
Housing services that exceed these limits must have written approval from the Grantee.

Union County As in previous years, RW contracts continue to morph to ensure inclusion of HRSA monitoring standards. The Newark and UC grantees met to establish universal parameters for EFA and Rental assistance and to continue moving towards a universal contract format for UC and the City of Newark.

C. SERVICE PROVIDER REIMBURSEMENT

12. What procedures, documents and policies are used to guide the payment of invoices/reimbursements?

City of Newark Service Providers must input service into CHAMP within 5 days of service delivery.   Program/Fiscal reports must be submitted to the Grantee's office by the 15th of the following month and reviewed by the assigned Program Monitor within a week. The Program Monitor completes a "Monthly Monitoring Report" which documents their review of the reimbursement request and approval/denial of payment. Approval notification is sent electronically to the Grant Accountant and Administrative Assistant. Grant Accountant completes a final review of the monthly reports, requests a Purchase Order for the approved reimbursement amount. Once the PO is signed by the Provider, it is attached to a payment package and submitted to our Finance Dept. A check is cut or an EFT payment is processed within 5 - 10 business days.

Union County Agencies submit RW reimbursement and expenditure reports with a UC voucher. The UC grantee prints a fresh reimbursement report, contract monitor report, and expenditure report. The agency's expenditure report is thoroughly reviewed for; duplicate billing, non-billable units, and accuracy. A monthly monitoring report is filled to report on the completeness and accuracy of the report. The monitoring report also includes # of expired client statuses, expired referrals, and any dubious billing.

Once the report is complete and accurate the UC grantee keys the payment information in to the county's payment system to generate a requisition. Once the requisition is approved it gets printed and stapled to the original voucher and submitted for signatures. Once all signatures are obtained the UC grantee submits the reimbursement packet to the RW account liaison for final review before the voucher is submitted to accounts payable.

13. **Over the past year, what has been the average amount of time between submission of an accurate invoice/end-of-month report from service providers and the grantees (City of Newark or Union County) issuance of a reimbursement check?**

   <u>**City of Newark**</u> The average wait time for payment once an accurate invoice/report is received is 3-4 weeks. The City of Newark has vastly improved the payment process by upgrading its payment management system and implementing policies to streamline the payment review process. Contracts must be fully executed before payments can be submitted for reimbursement. As such, initial payments were not rendered until July, but they covered the March through June grant period.

   <u>**Union County**</u> Generally a check can be issued to a vendor in one or two weeks.

   13.1 **List/describe any obstacles contributing to the delay in reimbursement to providers.**

   <u>**City of Newark**</u>
   - Lack of supporting documents for reported expenses. Example: Under Housing and Related Services, Providers must include a copy of the check(s) that was issued for payment of rent.

   - Failure to submit actual expense reports to substantiate reported expenses.

   <u>**Union County**</u> Delays in receiving contract documents ultimately delayed the execution of contracts and, by default, delayed reimbursement.

   13.2 **What steps were taken to speed up the reimbursement process?**

   <u>**City of Newark**</u> Agencies and Ryan White Staff are given technical assistance and guidance, as needed, to facilitate the reimbursement process.

   <u>**Union County**</u> The internal reimbursement process has been working without issue.

D. GRANTEE SITE VISIT AND TECHNICAL ASSISTANCE

14.   **In the last fiscal year (FY'2014), how many programmatic site visits did each service provider receive (please give range and average)?**

City of Newark Every service provider received at least one programmatic site visit during the FY14 fiscal year. Site visits may range from 1 – 3 visits annually.

Union County   As prescribed by the HRSA national monitoring standards, all funded service providers received one comprehensive programmatic site visit.

15.   **In the last fiscal year (FY'2014), how many fiscal site visits did each service provider receive (please give range and average)?**

City of Newark   Prior to FY2015 fiscal site visits were performed as part of the programmatic site visit. This year, the fiscal monitoring assessment will be conducted separately, by a Fiscal Monitor/Accountant. The Grantee is in the process of hiring a part time individual to perform this function.

Union County As prescribed by the HRSA national monitoring standards, all funded service providers received one comprehensive fiscal site visit.

16.   **Describe a typical site visit (please attach the written protocol used during visits).**

City of Newark The following components are involved in a typical site visit. There is considerable up-front preparation work done in the RW office before going to the provider site.

- Internal desk audit of year to date reports and CHAMP
- Pre-notification letter of Site Visit to the program
- Meet with the Administrators of the program
- Tour of the program site with Program Director (or his/her designee)
- Interview Consumers (2-3)
- Interview Staff (front line staff and program coordinators)
- Chart Reviews (minimum of 50 charts or 100% of charts, whichever's less)
- -up with Administrators
- Site Visits Report (shared with the provider)

The Site Visit Report Template and pre-notification letter is attached (Attachment A1 – A2).

Union County The agency is notified in writing that a site-visit has been scheduled and they are supplied with a list of client IDs whose charts will be monitored. The monitoring visit is rather intense. Due to the recommended sample size, typically 30-45 charts are monitored. Using the site-visit tool, the monitor ensures that all required documentation is present and that notes exist for randomly selected billable units. After the charts have been audited the UC grantee meets with fiscal staff to compare the actuals submitted with the agency ledger.

17.   **What changes have been made to monitor service providers in response to the HRSA National Monitoring Standards?   Please list and describe the changes.**

City of Newark A Monthly Monitoring Tool was developed this year to ensure comprehensive monitoring of service providers throughout the grant period. The monitoring tool incorporates the review steps for monthly invoices, quality management indicators, client management and satisfaction, and CHAMP reporting. The tool will also be used to set agenda topics for conference calls, technical assistance issues and corrective actions. The Monthly Monitoring Report Tool will be used to supplement other monitoring activities (desk audits, site visits, etc.) and to assist Program Monitoring staff in their compliance with the National Monitoring Standards.

The Program Monitor Reporting Timeline is as follows:

Department of Health and Community Wellness
Ryan White Unit

REPORTING TIMELINE

Report	Due	Contents:

Contract Transition Report	June 1st	• Fiscal transition from previous year
		• RW Application
		  - Request vs. Recommendations
		  - Peer Review strengths/weaknesses
		  - Review/update of application content
		• Service category specific questions

Interim Report	September 1st	• Fiscal Assessment
		  - Contract Execution status
		  - YTD Service Utilization & Spending
		  - Recommended fiscal action
		• Service category specific questions
		• Client Level CHAMP Data
		• Quality Management performance
		• EIRC participation

Follow-Up Report	December 1st	• Fiscal Assessment
		  - Contract Execution status
		  - YTD Service Utilization & Spending
		  - Recommended fiscal action
		• Staffing
		• New/Outstanding Corrective Actions
		• Contract status
		• Quality Management follow-up & improvements
		• ACA enrollment

Site Visit Report	February 1st	• Comprehensive assessment of contracted levels of service vs. actual levels of service and fiscal performance • Program location, history, and format/operation • Consumer/staff/admin interviews • Chart Review results • Quality Management
Monthly Monitoring Reports	By 25th of each month Upon Approval of CHAMP Reimbursement/ Expenditure Reports & Actuals	• General accuracy • Fiscal accuracy • Service category specific questions • Assessment of duplicate and/or unbillable units • Assessment of changes in level of service

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Union County The monitoring methodology is a continuous work in progress. A simple tool was devised to assist in reviewing agency RW reports. Another tool was implemented to easily and accurately confirm that all required documentation is present.

18.   What measures are taken to ensure that service providers act on recommendations offered   during the monitoring visit (e.g. corrective action plans, additional site visits, requests for reports, funding reductions, etc)?

City of Newark
There are four primary steps to a corrective action or finding;
1. Written notification to the Provider, with a clear deadline for response. All corrective actions or Site Visit findings must be responded to within the established timeframe, in written form.

2. Corrective Action responses are reviewed internally and discussed during bi-weekly staff meetings.

3. Implementation of the corrective action steps are monitored by the Program Monitor. Follow-up site visits are scheduled as needed to verify progress or completion.

4. Acceptance or rejection of Corrective Action responses must be provided to the agency in writing by the Monitor.

Union County Deficiencies are discussed during the monitoring exit interview. A follow up discussion is scheduled several weeks after the site visit to evaluate the agency's response to any findings.

19. In addition to the monitoring, what other technical assistance is provided?

City of Newark Other technical assistance is provided through Annual Provider Meetings and webinars as needed.

Union County The UC grantee provides TA on an ongoing basis. Providers are urged to attend the Wednesday CHAMP training help every Wednesday at the CHAMP office. The UC grantee has steady contact with all providers to avail himself to the providers to answer any questions. The UC grantee has found that random encounters with providers allow the provider to ask for assistance when there is no pressure of looking incompetent in front of their colleagues.

E. CHAMP

20.   What objectives (including program improvements) do you have for CHAMP for the current fiscal year (FY'2015)?

(City of Newark and Union County have the same response).

a) **Eligible Scope Reporting**- Effective CY2015, Providers will use CHAMP to report on services provided to Ryan White eligible clients, regardless of pay source or insurance status. In the past, CHAMP data was based primarily on funded scope. Services that are provided to Ryan White eligible will be reported in CHAMP and charged as "unbillable" to the grant when Ryan White is not the Payer of Last Resort.
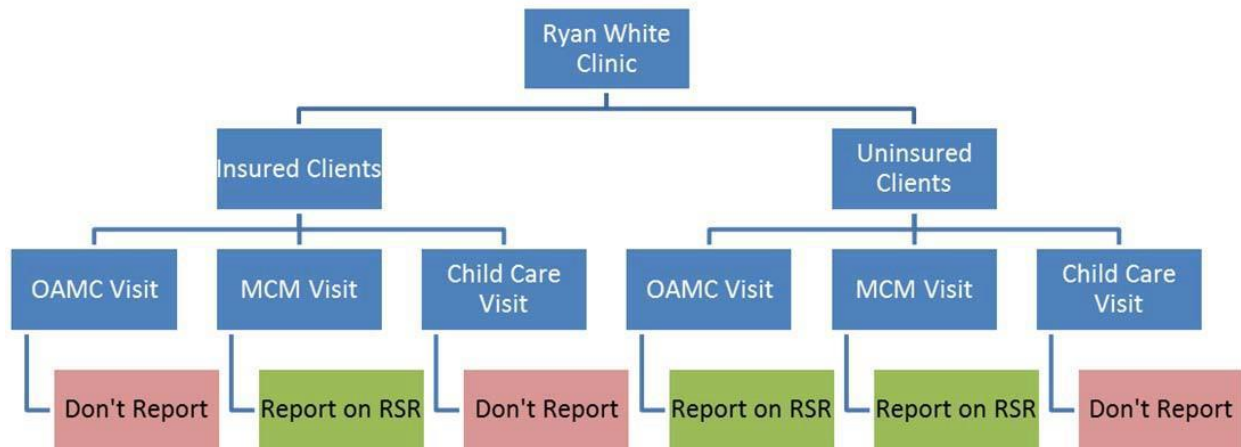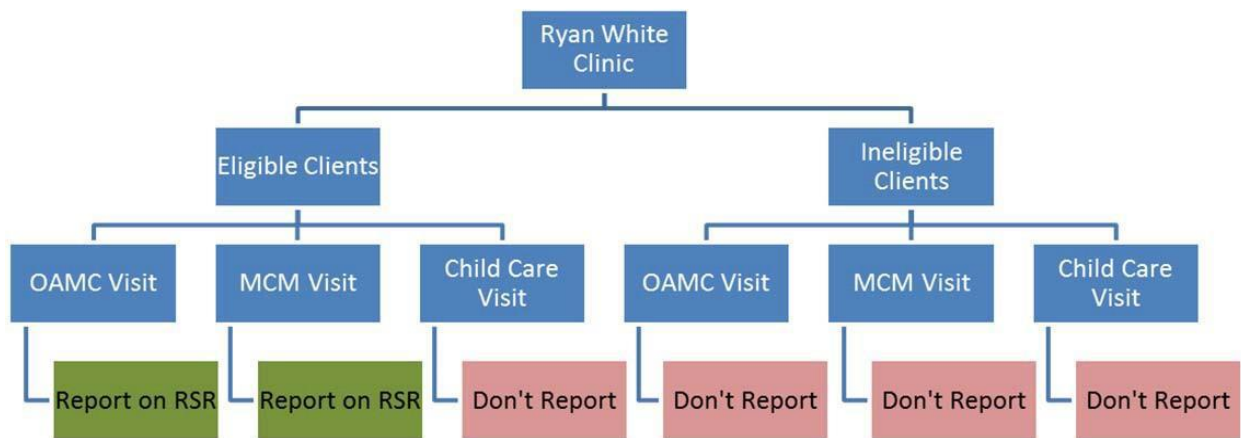
Figure A. Prior to CY2015

Figure B. Effective CY2015

b) **Client Eligibility Determination Screen**- To facilitate eligible scope reporting and compliance with the EMA's eligibility criteria, the Grantee and CHAMP are working on a "Client Eligibility Determination Screen" which would be used to establish eligibility (regardless of pay source or insurance status) before a CHAMP client record is created and services reported through the system. The Eligibility Determination Screen will ask the following:

1. What is the client's HIV status? Select one:
- HIV positive, not AIDS

- HIV positive, AIDS status unknown

- AIDS

- HIV indeterminate

- Affected

If Affected is selected, the system will notify the user that the "Client is not Ryan White eligible". The agency will not be able to create a client record and report to CHAMP/RSR. If the client is HIV positive, the system will ask the following question:

2. What is the client's
- Family Size

- Annual Family Income

If client is > 500% of FPL, the system will notify the user that the "Client is not Ryan White eligible". The agency will not be able to create a client record and report to CHAMP/RSR.

21.   What is the status of these objectives as of July 31, 2015?

   (City of Newark and Union County have the same response).

Providers were instructed to begin eligible scope reporting immediately. An assessment of compliance and reporting burden is on-going. The Client Eligibility Determination Screen is set for release by early 2016.

F.   PROCUREMENT/ALLOCATION REPORT (IN COMPARISON TO PLANNING COUNCIL PERCENTAGES)

22. **What percent of the overall award (for FY'2014) was used for Grantee support, Planning Council support, CHAMP, medical case management and case management services (non-medical)?**

> **City of Newark** Approximately 14.5% of FY14's award ($1,866,427.71) was used for Administrative Costs (Grantee), Planning Council, CHAMP, and Quality Management.
> Administrative Costs: $678,890.70 (5.3%)
> Planning Council: $375,781.99 (2.9%)
> CHAMP Program Support: $169,257.00 (1.3%)
> Clinical Quality Management (including CHAMP): $560,581.28 (4.4%)
> Medical Case Management Certificate Program: $81,916.74 (0.6%)

> **Union County** SEE NEWARK GRANTEE RESPONSE

23. **What percent of formula funds were unexpended, and why, at the end of FY'2014?**

> **City of Newark** 100% of formula funds were expended.

> **Union County**   SEE NEWARK GRANTEE RESPONSE

24. **What percent of supplemental funds were unexpended, and why, at the end of FY'2014?**

> **City of Newark** The FY2014 balance was $239.85. Nearly all funds were expended (99.9%).

> **Union County** SEE NEWARK GRANTEE RESPONSE

25. **What percent of MAI funds were unexpended, and why, at the end of FY'2014?**

> **City of Newark** 100% of MAI funds were expended.

> **Union County** SEE NEWARK GRANTEE RESPONSE

26. **Please provide the final Spending Report for FY'2014.**

> **City of Newark** See attached. (Attachment B)
> **Union County** See Attached

27. **Please provide the Allocation Report for FY'2015 using the table on the following page.**

> **City of Newark** See attached. (Attachment C)

> **Union County** See attached.

FY'2015 PROCUREMENT REPORT

SERVICE CATEGORY (BY PRIORITY)	PLANNING COUNCIL			GRANTEE	
	PERCENT AND DOLLAR	+/-25%		PERCENT AND DOLLAR	VARIANCE FROM COUNCIL
CORE SERVICES (9)					
PRIMARY MEDICAL CARE	21	431,018	538,772	323,263	16.7	343,050	-4.3
LOCAL AIDS PHARMACEUTICAL ASSISTANCE	0	0	0	0	0	0	0
EARLY INTERVENTION SERVICES	1.5	30,787	38,484	23,090	1.2	24,010	-0.3
MENTAL HEALTH SERVICES	8.5	174,460	218,074	130,845	9.4	193,900	+0.9
SUBSTANCE ABUSE SERVICES (OUTPATIENT)	9	184,722	230,902	138,541	8.5	173,810	-0.5
ORAL HEALTH CARE	6	123,148	153,935	92,361	10.1	208,250	+4.1
MEDICAL NUTRITION THERAPY	1.2	24,630	30,787	18,472	1.2	24,750	0
MEDICAL CASE MANAGEMENT	30	615,740	769,674	461,805	27.6	567,182	-2.4
HEALTH INSURANCE PREMIUM AND COST-SHARING ASSISTANCE	0.5	10,262	12,828	7,697	0.5	10,500	0
SUPPORT SERVICES (7)					
HOUSING SERVICES	6	123,148	153,935	92,361	8	164,368	+2
MEDICAL TRANSPORTATION SERVICES	0.5	10,262	12,828	7,697	0.6	11,750	+0.1
CASE MANAGEMENT SERVICES (NON-MEDICAL)	9	184,722	230,902	138,541	9.1	187,640	+0.1
SUBSTANCE ABUSE SERVICES (RESIDENTIAL)	0	0	0	0	0	0	0
EMERGENCY FINANCIAL ASSISTANCE	0.6	12,315	15,393	9,236	1.4	29,400	+0.8
FOOD BANK/HOME-DELIVERED MEALS	2.3	47,207	59,008	35,405	1.7	35,100	-0.6
LEGAL SERVICES	3.9	80,046	100,058	60,035	3.8	78,750	-0.1
TOTAL AMOUNT OF FUNDING	**100%**						

LISTING OF SERVICE PROVIDERS
28. **Please provide a list of all Part A funded service providers in the Newark EMA (with a contact name, address and phone number) as well as the categories of services for which each is contracted.**

   City of Newark See attached. (Attachment D)

Union County See Attached.

G. MINORITY AIDS INITIATIVE

29. **For FY'2015, please provide the Planning Council with the following information about the Minority AIDS Initiative (MAI) funds, such as the total MAI funds received by the Grantee; service categories in which the MAI funds were spent; the amount of funding allocated in each service category; and the target ethnic group of each program.**

    The response below applies to both the City of Newark and Union County.

    MAI funds for FY2014 will be used to target the Black & Hispanic population, who account for 86% of the EMA's living HIV/AIDS cases.

Table 1:   FY'2015 Minority AIDS Initiative Funding

Table 1: FY2015 MAI Allocation Report

FY15 PROVIDERS	Medical Case Management	Transitional Housing	Total	
Rutgers NJ Medical School-Infectious Disease Practice	634,490		634,490	
Rutgers FXB Center	137,205		137,205	
Isaiah House		231,632	231,632	
Catholic Charities of the Archdiocese of Newark/ St. Bridget's		101,250	101,250	
Total Direct Service Dollars	771,695	332,882	1,104,577	85%
		Grantee Admin.	129,950	10%
		Quality Management	64,975	5%
		Total	1,299,502	100%

30. **Please provide a list of the organizations in receipt of MAI funds.**
    See Table 1 above.

H. CONDITIONS OF AWARD

31. **Please state whether or not the following reports have been mailed. Also, insert date of presentation on this information to the Planning Council. Please feel free to comment on the content of the report as appropriate.**

Refer to this chart for both the City of Newark and Union County.

DATE OF GRANTEE REPORT	CONTENT OF REPORT
3/30/2015	• FY'2014 Ryan White Services Report (RSR) to HRSA or HRSA contractor.
8/15/2014	• Revised budget and narrative justification for administration, including Planning Council Support and program support based on actual FY'2014 funding level.
7/30/2015	• ~~FY'2015~~ FY2014 Annual Progress Report.
7/30/2015	• FY'2014 final ~~Financial Status Report(FSR)~~ Federal Financial Report (FFR) • FY'2014 Expenditure Rate (as documented in the final FY'2014 ~~FSR~~ FFR • Budgeted allocation of FY'2015 Part A funds by service category, letter of endorsement by Planning Council and revised FY'2015 Implementation Plan
8/14/15 8/30/2015	• Report on Minority AIDS Initiative for FY'2015 • Categorical budget for each grant-funded contract, Contract Review Certifications and attachment E, other sources of funds for FY'2015

I. Additional Comments

32. Please provide any additional comments below:

City of Newark Regarding Conditions of Award: The FY2015 Annual Progress Report is due July 30, 2016. I've edited the report to reflect submission of the FY2014 Annual Progress Report on July 30, 2015. Effective 2012, the Federal Service Report (FSR) was renamed the Federal Financial Report (FFR).

Union County I have no additional comments at this time. The Newark EMA has been responding well to the changing landscape of RW HIV services delivery due to the ACA and Medicaid expansion.

Newark

Ras J. Baraka
Mayor

Department of Health and Community Wellness
Hanaa A. Hamdi, PhD, Director

Ketlen Alsbrook, Project Director
Newark EMA Ryan White Part A Grant Program

110 William Street
Newark, New Jersey 07102
973-733-4402
Fax 973-733-5444
email: alsbrookk@ci.newark.nj.us

November 13, 2012

Diane Silbernagel, Executive Director for Hope House
Catholic Family & Community Services – Hope House
19-21 Belmont Avenue
Dover, New Jersey 07801

Dear Ms. Willis,

The Ryan White Unit of the City of Newark has scheduled a Part A Quality Assessment site visit with your program for Wednesday, November 14, 2012 at 10:00am, with an additional day for overflow chart review only on Thursday, November 15, 2012 at 10:00am. In addition to you, I am requesting the presence of all grant funded personnel. To prevent the interruption of services, staff will not be required to stay for the duration of the visit.

Please review the site visit agenda. These time frames are flexible to accommodate staff and client interviews. Please call me to discuss any necessary changes. Upon completion of this visit, a report will be forwarded to you for review and comments.

Quality Assessment Site Visit Agenda

10:00 - 10:15	Tour of facility
10:15 - 10:30	Meet & Greet with all grant funded staff
10:30 - 11:15	Staff Interviews: All grant funded personnel should be available
11:15 - 12:00	Client Interviews: 3 - 5 clients
12:00 - 1:00	Break
1:00 - 4:00	Chart Review: Please be prepared to provide 20 charts for review
4:00 - 4:30	Exit interview with program administrator

Sincerely,

_____
Charla Cousar, Program Monitor
Department of Health and Community Wellness, Ryan White Unit

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

AGENCY NAME Click here to enter text.   PROGRAM NAME Click here to enter text.

Address Click here to enter text.

Date of Site Visit Click here to enter a date.   Name of Monitor Click here to enter text.

Tel/Fax #: (_)Click here to enter text. / (_)Click here to enter text.

Executive Director Name Click here to enter text.

Program / Project Director Name Click here to enter text.

Fiscal Officer or Comptroller Name Click here to enter text.

I. CONTRACT CEILING: CONTRACTED LEVELS OF SERVICE (CLOS):

    A. Contract Ceiling: Total Dollar Amount of Part (A) Contract $ Click here to enter text.

                         Total Dollar Amount of Part (F) Contract $ Click here to enter text.

    B. Contracted Levels of Service (CLOS):

	Part A	Part F
Total # Unduplicated Clients		
# Unduplicated Clients per Service Category		
⟩		
⟩		
⟩		
⟩		
⟩		
# Units to be provided per Service Category		
⟩		
⟩		
⟩		
⟩		
⟩		

II. ACTUAL LEVELS OF SERVICE (ALOS) thru Click here to enter a date.:

	Part A	Part F	% Compliance = ALOS/CLOS
# Units Delivered per Service Category YTD			
⟩			
⟩			
⟩			
⟩			
⟩			
# Active clients at time of visit			
# Unduplicated clients YTD			
# Unduplicated clients per service category YTD			
⟩			
⟩			
⟩			
⟩			
⟩			

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

New Clients	Part A	Part F	% Compliance = ALOS/CLOS
# New Clients Contracted			
# New Clients YTD			

A. Are the monthly CHAMP Reimbursement reports and Program Actuals current?

CHAMP Reimbursement ☐Yes ☐No thru Click here to enter a date.

Program Actuals   ☐Yes ☐No thru Click here to enter a date.

III.   FISCAL STATUS AND EXPENDITURES TO DATE:

Fiscal status and summary of expenditures:

Over-spent line items include:	
Under-spent line items include:	
YTD Vacancies:	
Items not on approved budget include:	
Comments: *Discuss any discrepancy(ies) and/or recommendations for revisions.*	

Actual expenditures of $Click here to enter text. **represent approximately** Click here to enter text.**% of the budget at a** Click here to enter text.**% point of the contract year.**

Issues related to a serious discrepancy (by more than 15%) between contracted levels of service (CLOS) and actual levels of service (ALOS) should be followed by an explanation of action, in terms of budget or unit cost revisions.

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

IV.   TOUR OF THE PROGRAM SITE:

A.   Description of the program location / accessibility

Including, accessibility issues such as physical access, location, hours of operation, and accessibility to public transportation, language capabilities of staff, and availability of a translator when needed.

B.   General appearance of agency sites

Including cleanliness and comfort (temperature, ventilation, etc.)

C.   Barriers to service

Such as: non-working elevator, lengthy wait at an exterior door, how long it takes staff to answer telephone rings, etc. Are informative materials available in the waiting areas? Are there appropriate languages for the population to be served?

V.   PROGRAM DESCRIPTION:

A.   A Brief History of the Agency

Years of operation, geographic area served and stated mission, etc. If the contract program is a part of a larger agency it will be noted here.

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

B. Description of the Ryan White Funded Programs

Who is served?	
What services are provided?	
Who provides the services?	
How the services are provided (**when, where,** etc.)?	

*Note **unique aspects** of the program or services delivery model.*

*Make note of **outreach** and other strategies used to engage/serve traditionally under/un-served populations (i.e. substance abusers, homeless, people diagnosed with mental illness, adolescents, etc.)*

*Note **inter-agency collaboration/ linkages**. Who does the agency collaborate with for each of the following?*

- *PMC –*
- *GYN –*
- *OH –*
- *MCM –*
- *MH –*
- *SA (Inpatient or Outpatient) –*
- *CM & Supportive Services –*
- *Counseling & Testing –*

List any other frequent referral sources and any arrangements for case conferences, staff sharing, cross-training, etc.

CITY OF NEWARK – RYAN WHITE UNIT MONITORING MANUAL SITE VISIT REPORT

C. Agency Brochure

Is it clear and easy to understand language?	Yes ☐ No ☐
Is it in the language of the community?	Yes ☐ No ☐
Does it contain the Mission Statement?	Yes ☐ No ☐
Where and when has it been distributed?	Click here to enter text.

Comments:

D. Consumer Bill of Rights/Statement of Rights and Responsibilities

Are they posted? Yes ☐ No ☐

Where? Click here to enter text.

Are they easy to understand (5th grade reading level)?	Yes ☐	No ☐
Available in Spanish and other appropriate languages?	Yes ☐	No ☐

(Portuguese, Haitian Creole, etc.)

How are they given and/or discussed with the consumers? Click here to enter text.

Is a copy given to the consumers?	Yes ☐	No ☐
Is the complaint/grievance procedure clear?	Yes ☐	No ☐

E. Waiting List

If there is one, why and what does the program do to prioritize the waiting list? Are any supports offered in the interim, or are referrals made to other agencies during the waiting period?

F. Targeted Outreach & Home Visits

What is the program policy regarding home visits; under what circumstances are they supposed to be done? Is that evident in practice?

G. Does the agency charge for any Ryan White funded services? Yes ☐ No ☐

If so, how are fees assessed and tracked to ensure compliance with Ryan White limits? How is this program income incorporated back into the Ryan White program?

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

H. Consumer Interview – Minimum of 2-3

Give a brief description (demographics—gender, age, race / ethnicity, etc.) of the consumers interviewed. Note how long they have been receiving services at the agency, how they initially became aware of these services; mention any outstanding details regarding their referral to the agency, their memory of the intake process, and their opinion of the services they are receiving. Use direct quotes if appropriate. State other services received by consumers at other agencies.

I. Consumer Input

Are there formal mechanisms for consumers to participate in overall program planning, development, staffing, and/or evaluation? How are consumers involved in their own treatment/ service plan development and updates?

J. Alternative Treatments

Does the agency provide alternative modes of treatment? If they do not, do they facilitate the consumer's receiving such treatment elsewhere? If yes, how?

K. Service Gaps / Services Not Provided by the Agency & Difficult to Obtain

Note those services mentioned by staff or consumers, which are difficult to obtain and/or generally unavailable to the consumer population.

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

VI.   **STAFF:**

    A. Staff interviewed

List staff interviewed by name / position / responsibility. Address any outstanding issues, including training, vacant positions, and interactions with other staff. <mark>*Provide any other comments applicable.*</mark>

    B. Is the racial/ethnic composition of the contract staff comparable to the composition of the consumer population to be served? Yes ☐   No ☐

Note any discrepancies and/or recommendations to fill vacant positions:

    C. Current resumes

Are resumes on file for all key/specialized positions? Yes ☐   No ☐

If No, list those outstanding Click here to enter text.

Deadline for submission to Ryan White Unit Click here to enter text.

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

VII.   **RECORDS:**

Enter results from chart review checklist below:

TOTAL CLIENT POPULATION:	Click here to enter text.			NUMBER OF CHARTS REVIEWED:	Click here to enter text.		
Chart Review Item	% Yes	% No	% N/A	**Chart Review Item**	% Yes	% No	% N/A
INTAKE Score: *(%Yes + %N/A) ÷ 7*				ASSESSMENT Score: *(%Yes + %N/A) ÷ 3*			
Name/address/ph/email				Medical			
Demographics				Family, Soc. Supports, Chldrn			
Emergency Contact				Employment, Financial			
Signed consent(s)/releases							
Rights & Responsibilities							
↳ Signed by Consumer							
↳ Signed by Staff							
ELIGIBILITY/CERTIFICATION Score: *(%Yes + %N/A) ÷ 6*				SERVICE PLAN Score: *(%Yes + %N/A) ÷6*			
HIV Status - Initial				Reflects needs			
Income - Initial				Notes staff person			
Household Size - Initial				Includes goals			
Residency - Initial				Consumer input			
Insurance Status - Initial				Specific, measurable			
Recertification (every 6 mo.)				Time-limited			
SCREENINGS Score: *(%Yes + %N/A) ÷ 18*				PROGRESS NOTES Score: = %Yes			
PMC Screening				Progress notes aligned with with CHAMP billing			
↳ Referral							
↳ Linkage							
MH Screening							
↳ Referral							
↳ Linkage							
SA Screening							
↳ Referral							
↳ Linkage							
OH Screening							
↳ Referral							
↳ Linkage							
NS Screening							
↳ Referral							
↳ Linkage							
HSG Screening							
↳ Referral							
↳ Linkage							
FINAL CHART REVIEW SCORE: *(Average of 6 sub-scores)*							
Comments:							

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

VIII.   QUALITY MANAGEMENT

A. Logic Model Outcomes

List the agency's major/most prominent outcomes and assess its successes/failures.

Outcome	Achieved?
	Yes ☐ No ☐
	Yes ☐ No ☐
	Yes ☐ No ☐
	Yes ☐ No ☐
Assessment	

B. H4C Initiatives (Primary Medical Care Only)

Assess the agency's ability to reach the target outcomes for each H4C performance measure, comparing its results from the CHAMP Performance Outcomes from the previous fiscal year period to the most recent Cycle. Discuss any tools or interventions implemented to date.

Measure	Goal	Cycle Choose an item.	Cycle Choose an item.
Viral Load Suppression	80%		
HIV ARV	90%		
HIV Medical Frequency	80%		
GAP in Medical Visits	5%		
Assessment			

C. ACA

How does the agency align its program with the Affordable Care Act (ACA)? Discuss any protocols or policies regarding: ACA Education, Linkage, and CHAMP documentation.

D. CHAMP Compliance

Discuss the agency's compliance with CHAMP data entry requirements, timeliness of report submission, frequency of need to open CHAMP portal, etc.

CITY OF NEWARK – RYAN WHITE UNIT
MONITORING MANUAL
SITE VISIT REPORT

IX.   ISSUES FOR COMMENDATION

X.   ISSUES FOR REVIEW / CONSIDERATION:

XI.   SERIOUS ISSUES FOR IMMEDATE ACTION:

A. Items observed or discussed that constitute a violation of standards or any aspect of program
    provision that constitutes a threat to consumer or staff safety, or is a serious barrier to service
    delivery.

A. Follow-up / Corrective Action Plan
Note any planned follow-up strategies to address the compliance issues raised.

Date for City's receipt of a fully developed plan of corrective action Click here to enter a date.

cc: Supervising Program Monitor / Project Director

FY14 Part A & MAI Expenditures Report

Section A: Identifying Information
City of Newark, New Jersey
Dorian Cooper
973-733-5449
cooperd@ci.newark.nj.us

Detailed instructions for completing and submitting your report
can be downloaded from the HRSA Electronic Handbook:
https://grants.hrsa.gov/webexternal/Login.asp

PUBLIC BURDEN STATEMENT: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number. The OMB control number for this project is 0915-0318. Public reporting burden for this collection of information is estimated to be 1.5 hours per response. These estimates include the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments to HRSA Reports Clearance Officer, Health Resources and Services Administration, Room 10-33, 5600 Fishers Lane, Rockville, MD. 20857.

Section B: Award Information	Current FY	Carryover	Total
1. Part A Grant Award Amount	$11,536,295	$0	$11,536,295
2. MAI Grant Award Amount	$1,313,719	$0	$1,313,719
3. Total Part A Funds	$12,850,014	$0	$12,850,014

Section C: Expenditure Categories	PART A AWARD						MAI AWARD						PART A + MAI TOTAL AWARD (includes carryover)	
	CURRENT FY		PRIOR FY CARRYOVER		PART A TOTAL		CURRENT FY		PRIOR FY CARRYOVER		MAI TOTAL			
	Amount	Percentage	Amount	Percent	Amount	Percent	Amount	Percentage	Amount	Percent	Amount	Percent	Amount	Percent
1. Core Medical Services Subtotal (See Legislative Requirements)	$7,200,214	72.98%	$0	0.00%	$7,200,214	72.98%	$1,084,663	97.13%	$0	0.00%	$1,084,663	97.13%	$8,284,877	75.43%
a. Outpatient /Ambulatory Health Services	$1,837,564	18.62%		--	$1,837,564	18.62%	$537,807	48.16%		--	$537,807	48.16%	$2,375,371	21.63%
b. AIDS Drug Assistance Program (ADAP) Treatments	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
c. AIDS Pharmaceutical Assistance (local)	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
d. Oral Health Care	$689,476	6.99%		--	$689,476	6.99%	$0	0.00%		--	$0	0.00%	$689,476	6.28%
e. Early Intervention Services	$71,893	0.73%		--	$71,893	0.73%	$0	0.00%		--	$0	0.00%	$71,893	0.65%
f. Health Insurance Premiums & Cost Sharing Assistance	$14,497	0.15%		--	$14,497	0.15%	$0	0.00%		--	$0	0.00%	$14,497	0.13%
g. Home Health Care	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
h. Home and Community-based Health Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
i. Hospice Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
j. Mental Health Services	$1,029,924	10.44%		--	$1,029,924	10.44%	$0	0.00%		--	$0	0.00%	$1,029,924	9.38%
k. Medical Nutrition Therapy	$140,241	1.42%		--	$140,241	1.42%	$0	0.00%		--	$0	0.00%	$140,241	1.28%
l. Medical Case Management (incl. Treatment Adherence)	$2,639,847	26.76%		--	$2,639,847	26.76%	$546,856	48.97%		--	$546,856	48.97%	$3,186,702	29.01%
m. Substance Abuse Services - outpatient	$776,771	7.87%		--	$776,771	7.87%	$0	0.00%		--	$0	0.00%	$776,771	7.07%
2. Support Services Subtotal	$2,666,470	27.02%	$0	0.00%	$2,666,470	27.02%	$32,000	2.87%	$0	0.00%	$32,000	2.87%	$2,698,470	24.57%
a. Case Management (non-Medical)	$794,195	8.05%		--	$794,195	8.05%	$0	0.00%		--	$0	0.00%	$794,195	7.23%
b. Child Care Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
c. Emergency Financial Assistance	$52,497	0.53%		--	$52,497	0.53%	$0	0.00%		--	$0	0.00%	$52,497	0.48%
d. Food Bank/Home-Delivered Meals	$192,825	1.95%		--	$192,825	1.95%	$0	0.00%		--	$0	0.00%	$192,825	1.76%
e. Health Education/Risk Reduction	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
f. Housing Services	$901,974	9.14%		--	$901,974	9.14%	$0	0.00%		--	$0	0.00%	$901,974	8.21%
g. Legal Services	$351,843	3.57%		--	$351,843	3.57%	$0	0.00%		--	$0	0.00%	$351,843	3.20%
h. Linguistics Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
i. Medical Transportation Services	$242,270	2.46%		--	$242,270	2.46%	$32,000	2.87%		--	$32,000	2.87%	$274,270	2.50%
j. Outreach Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
k. Psychosocial Support Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
l. Referral for Health Care/Supportive Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
m. Rehabilitation Services	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
n. Respite Care	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
o. Substance Abuse Services - residential	$130,867	1.33%		--	$130,867	1.33%	$0	0.00%		--	$0	0.00%	$130,867	1.19%
p. Treatment Adherence Counseling	$0	0.00%		--	$0	0.00%	$0	0.00%		--	$0	0.00%	$0	0.00%
3. Total Service Expenditures	$9,866,683	100.00%	$0	--	$9,866,683	100.00%	$1,116,663	100.00%	$0	--	$1,116,663	100.00%	########	100.00%
4. Non-services Subtotal	$1,669,372	14.47%	$0	--	$1,669,372	14.47%	$197,056	15.00%	$0	--	$197,056	15.00%	$1,866,428	14.52%
a. Clinical Quality Management (See Legislative Requirements)	$576,813	5.00%		--	$576,813	5.00%	$65,685	5.00%	$0	--	$65,685	5.00%	$642,498	5.00%
b. Grantee Administration (See Legislative Requirements)	$1,092,559	9.47%		--	$1,092,559	9.47%	$131,371	10.00%	$0	--	$131,371	10.00%	$1,223,930	9.52%
5. Total Expenditures	$11,536,055	100.00%	$0	--	$11,536,055	100.00%	$1,313,719	100.00%	$0	--	$1,313,719	100.00%	########	100.00%

Section D: Award & Expenditure Summary	Award	Expenditure	Balance
1. Part A	$11,536,295	$11,536,055	$240
2. Part A MAI	$1,313,719	$1,313,719	$0
3. Total	$12,850,014	$12,849,774	$240

FOR OFFICE USE ONLY:
☐ Grantee received waiver for 75% core medical services requirement.

FY15 RWHAP Part A & MAI Allocations Report

Section A: Identifying Information

City of Newark, NJ

Dorian Cooper

973-733-5449

cooperd@ci.newark.nj.us

Detailed instructions for completing and submitting your report can be downloaded from the HRSA Electronic Handbook: https://grants.hrsa.gov/webexternal/Login.asp

Section B: Reporting Year Award Information

1. Part A Grant Award Amount	$11,659,412
2. MAI Grant Request / Award Amount	$1,299,502
3. Total Part A Funds	$12,958,914

Section C: Allocation Categories	1. Part A Award		2. MAI Award		3. Combined Total	
	Amount	Percentage	Amount	Percentage	Amount	Percentage
1. Core Medical Services Subtotal[1] (see CHECKLIST)	$7,516,057	75.84%	$771,695	69.86%	$8,287,752	75.24%
a. Outpatient /Ambulatory Health Services	$2,017,203	20.35%		0.00%	$2,017,203	18.31%
b. AIDS Drug Assistance Program (ADAP) Treatments	$0	0.00%		0.00%	$0	0.00%
c. AIDS Pharmaceutical Assistance (local)	$0	0.00%		0.00%	$0	0.00%
d. Oral Health Care	$766,064	7.73%		0.00%	$766,064	6.95%
e. Early Intervention Services	$91,834	0.93%		0.00%	$91,834	0.83%
f. Health Insurance Premium & Cost Sharing Assistance	$69,250	0.70%		0.00%	$69,250	0.63%
g. Home Health Care		0.00%		0.00%	$0	0.00%
h. Home and Community-based Health Services		0.00%		0.00%	$0	0.00%
i. Hospice Services		0.00%		0.00%	$0	0.00%
j. Mental Health Services	$1,008,086	10.17%		0.00%	$1,008,086	9.15%
k. Medical Nutrition Therapy	$163,534	1.65%		0.00%	$163,534	1.48%
l. Medical Case Management (incl. Treatment Adherence)	$2,567,014	25.90%	$771,695	69.86%	$3,338,709	30.31%
m. Substance Abuse Services - outpatient	$833,072	8.41%		0.00%	$833,072	7.56%
2. Support Services Subtotal	$2,394,444	24.16%	$332,882	30.14%	$2,727,326	24.76%
a. Case Management (non-Medical)	$809,148	8.16%		0.00%	$809,148	7.35%
b. Child Care Services		0.00%		0.00%	$0	0.00%
c. Emergency Financial Assistance	$75,300	0.76%		0.00%	$75,300	0.68%
d. Food Bank/Home-Delivered Meals	$173,758	1.75%		0.00%	$173,758	1.58%
e. Health Education/Risk Reduction		0.00%		0.00%	$0	0.00%
f. Housing Services	$555,812	5.61%	$332,882	30.14%	$888,694	8.07%
g. Legal Services	$349,030	3.52%		0.00%	$349,030	3.17%
h. Linguistics Services		0.00%		0.00%	$0	0.00%
i. Medical Transportation Services	$293,971	2.97%		0.00%	$293,971	2.67%
j. Outreach Services		0.00%		0.00%	$0	0.00%
k. Psychosocial Support Services		0.00%		0.00%	$0	0.00%
l. Referral for Health Care/Supportive Services		0.00%		0.00%	$0	0.00%
m. Rehabilitation Services		0.00%		0.00%	$0	0.00%
n. Respite Care		0.00%		0.00%	$0	0.00%
o. Substance Abuse Services - residential	$137,425	1.39%		0.00%	$137,425	1.25%
p. Treatment Adherence Counseling		0.00%		0.00%	$0	0.00%
3. Total Service Allocations	$9,910,501	100.00%	$1,104,577	100.00%	$11,015,078	100.00%
4. Non-services Subtotal	$1,748,911	15.00%	$194,925	15.00%	$1,943,836	15.00%
a. Clinical Quality Management[2] (see CHECKLIST)	$582,970	5.00%	$64,975	5.00%	$647,945	5.00%
b. Grantee Administration[3] (see CHECKLIST)	$1,165,941	10.00%	$129,950	10.00%	$1,295,891	10.00%
5. Total Allocations (Service + Non-service)[4] (see CHECKLIST)	$11,659,412	100.00%	$1,299,502	100.00%	$12,958,914	100.00%

FOR OFFICE USE ONLY:

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

Filename: FY 15 Part A Allocations Report Final (Attachment C)

UC FY2014-2015 Final Spending			Funding Range		Final Spending	
	%	$	+ 25%	-25%	$	%
Primary Medical Care	0.3	554525.66	693157.075	415894.245	360024.92	0.19729
EIS	0.02	28196.22	35245.275	21147.165	15564.25	0.008654
Medications	0	0	0	0	0	0
Oral Health Care	0.06	112784.88	140981.1	84588.66	107700	0.057446
Medical Nutritional Therapy	0.01	18797.48	23496.85	14098.11	27035.5	0.014138
Mental Health	0.09	159778.58	199723.225	119833.935	164197.5	0.08722
Out Patient Substance Abuse	0.15	281962.2	352452.75	211471.65	161204	0.089335
Medical Case Management	0.15	281962.2	352452.75	211471.65	615903	0.31776
Health Ins. Prem. Cost Share	0	1879.748	2349.685	1409.811	685	0.0004
	0.77					0.772243
Case Management	0.1	187974.8	234968.5	140981.1	167749.47	0.08984
Emergency Financial Assistance	0.01	11278.488	14098.11	8458.866	8898.5	0.004804
Housing Services	0.06	103386.14	129232.675	77539.605	114333.5	0.0605
Legal Services	0.04	73310.172	91637.715	54982.629	77958.36	0.041335
Food Bank/Home-Delivered	0.02	45113.952	56392.44	33835.464	51166	0.02704
Medical Transportation	0.01	18797.48	23496.85	14098.11	7328	0.004238
	0.23					0.227757
TOTAL	1	1879748			1879748	1

RYAN WHITE
CLIENT DIRECTORY

City of Newark

Department Health & Community Wellness

Ryan White 2015

Directory

*Includes Providers, Services and Phone Numbers.

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RYAN WHITE
CLIENT DIRECTORY

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RYAN WHITE
CLIENT DIRECTORY

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RYAN WHITE
CLIENT DIRECTORY

Essex County

AIDS Resource Foundation for Children
77 Academy Street
Newark, New Jersey 07102
(973) 643 – 0400
<mark>*Business Hours:*</mark> *(M-F) - 9:00am – 5:30pm*

Housing & Related Services
Early Intervention Services
Case Management
Outpatient Substance Abuse
Emergency Financial Assistance
Transportation

Broadway House (Newark AIDS Consortium)
298 Broadway
Newark, New Jersey 07104
(973) 268 – 9797
<mark>*Business Hours:*</mark> *(24hrs/7 Days of Week)*

Outpatient Substance Abuse
Mental Health
Medical Case Management
Nutritional Therapy / Transportation

Catholic Charities of the Archdiocese of Newark
Saint Bridget's
404 University Avenue
Newark, New Jersey 07102
(973) 799-0484

<mark>*Business Hours:*</mark> *(M-F) 9am – 5pm*

Housing & Related Services
Case Management
Outpatient Substance Abuse
Mental Health
Transportation

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RYAN WHITE
CLIENT DIRECTORY

Community Health Law Project
650 Bloomfield Avenue
Bloomfield, New Jersey 07108
(973) 680 – 5599

Business Hours: *(M-F) 9am – 5pm*

Advocacy & Legal Services

C.U.R.A., Inc.
35 Lincoln Park
Newark, New Jersey 07101
(973) 645 – 4218

Business Hours: *(M-F) 8:00am – 4:00pm*

Residential Substance Abuse
Outpatient Substance Abuse
Case Management
Transportation

VA Bio-Medical Research Systems
385 Tremont Avenue
East Orange, New Jersey 07018
(973) 676 – 1000 ext. 1994

Business Hours: *(M-F) 8am – 4:30pm*

Housing & Related Services
Medical Case Management
Nutritional Services
Emergency Financial Assistance
Transportation

RYAN WHITE
CLIENT DIRECTORY

Hyacinth AIDS Foundation
194 Clinton Avenue
Newark, New Jersey 07108
(862) 240 – 1461

Business Hours: (M-F) 9am – 5pm

Outpatient Substance Abuse
Medical Case Management
Advocacy & Legal
Mental Health
Early Intervention Services
Case Management

Isaiah House
238 North Munn Avenue
East Orange, New Jersey 07017
(973) 678 – 5882 ext. 3019, 3027

Business Hours: (M-F) -8:30am – 5:30pm

Housing & Related Services
Case Management

La Casa de Don Pedro
76 Clinton Avenue
Newark, New Jersey 07114
(973) 624 – 4222

Business Hours: (M & Th. 11am – 7pm, (Tu. W, F) 9am - 5pm

Case Management
Housing & Related Services
Medical Nutritional Therapy
Early Intervention Services
Nutritional Services
Emergency Financial Assistance
Mental Health

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RYAN WHITE
CLIENT DIRECTORY

Newark Beth Israel Medical Center
201 Lyons Avenue, G3
Newark, New Jersey 07112
(973) 926 – 2602
Business Hours: *(M – F) 8:30am – 4:00pm*

Primary Medical Care
Medical Case Management
Mental Health
Oral Health Care
Insurance Premium Cost Sharing

Newark Community Health Center
101 Ludlow Street
Newark, New Jersey 07112
(973) 565 – 0355
Business Hours: *(M, W) 9am – 7pm, (Tu. Th. F) 9am – 5pm,*
(Sat) 9am-5pm

Primary Medical Care,
Medical Case Management
Medical Nutritional Therapy
Mental Health
Early Intervention Services
Oral Health
Insurance Premium Cost Sharing

Dept. of Health & Community Wellness - Special Care Clinic
394 University Avenue
Newark, New Jersey 07102
(973) 877 – 6150

Business Hours: *Clinical - (M-W-F) 8:30am – 4:30pm*
Med/Non Med Case Management Only (Tues) 8:30am – 4:30pm
(Thurs before 3rd Sat) 8:30am – 7:30pm
Saturday: Call ahead for Schedule

Primary Medical Care
Medical Case Management
Nutritional Services
Transportation
Oral Health

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RYAN WHITE
CLIENT DIRECTORY

North Jersey AIDS Alliance/NJCRI
393 Central Avenue
Newark, New Jersey 07107
(973) 497 – 1846

Business Hours: *(M, Tu. F) 8am-5pm, (W, Th.) 8am-7pm,*
(Sat) by Appointment

Primary Medical Care
Medical Case Management
Mental Health
Outpatient Substance Abuse
Transportation

Positive Health Care, Inc.
333 Washington Street
Newark, New Jersey 07102
(973) 596 – 9667

Business Hours: *(M-F) 9:00am – 5:00pm*

Case Management
Outpatient Substance Abuse
Emergency Financial Assistance
Housing & Related Services
Transportation & Early Intervention Services

Rutgers, State University of NJ/Special Services Dental Clinic
110 Bergen Street, Rm# D881
Newark, New Jersey 07103
(973) 972 – 7701

Business Hours: *(M-F) – 9:00am – 5:00pm*

Oral Health

RYAN WHITE
CLIENT DIRECTORY

Rutgers, State University of NJ/ FXB Clinic
150 Bergen Street, Rm# G102
Newark, New Jersey 07101
(973) 972 – 0380
Business Hours: *(M-F) 8:30am – 4:30pm*

Primary Medical Care
Medical Case Management
Nutritional Services

Rutgers, State University of NJ/ Infectious Disease Practice
185 South Orange Avenue, MSBI-689
Newark, New Jersey 07103
(973) 972 – 6214

Business Hours: *(M-F) 8:00am – 4:00pm*
Evening hours Thursdays until 7pm

Primary Medical Care
Medical Case Management
Outpatient Substance Abuse
Medical Nutritional Therapy
Nutritional Services
Mental Health
Transportation
Non-Medical Case Management
Health Insurance Premium & Cost Sharing

Rutgers, State University of NJ /START Program
65 Bergen Street, GA -177
Newark, New Jersey 07101
(973) 972 – 1347

Business Hours: *(M-F) 9am – 5pm*

Primary Medical Care
Medical Case Management
Emergency Financial Assistance
Early Intervention Services
Nutritional Services
Transportation

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RYAN WHITE
CLIENT DIRECTORY

Smith Center for Infectious Diseases
& Urban Health
346 Mount Prospect Avenue
Newark, New Jersey 07104
(973) 809 – 5566

Business Hours: (M, W, Th.) 8:30am-12pm, (Tu.) 1pm – 4pm,
(Fri) 1ˢᵗ and 3ʳᵈ of every month 1pm – 4pm

Primary Medical Care,
Medical Case Management
Mental Health
Transportation
Early Intervention Services

St. James Social Services
588 Martin Luther King Blvd
Newark, New Jersey 07102
(973) 624 - 4007

Business Hours: (M-F) 10am-6pm,

Housing & Related Services
Nutritional Services
Case Management
Emergency Financial Assistance

St. Michael's Medical Center – Behavioral Health
268 Martin Luther King Blvd
Newark, New Jersey 07102
(973) 877 – 5000; option 5

Business Hours: (M-F) 9am – 5pm

Outpatient Substance Abuse
Transportation

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RYAN WHITE
CLIENT DIRECTORY

St. Michael's Medical Center – Peter Ho Clinic
268 Martin Luther King Blvd
Newark, New Jersey 07102
(973) 877 – 5649

Business Hours: *(M-F) 9am – 5pm*

Primary Medical Care
Oral Health
Mental Health
Transportation
Medical Case Management
Substance Abuse Services
Health Insurance Premium Cost Sharing

Team Management 2000, Inc.
500 Broad Street
Newark, New Jersey 07102
(973) 273 - 6481

Business Hours: *(M-W-Th.) – 8:30am – 8:00pm,*
(T&F) – 9:00am – 5:00pm

Case Management
Housing and Related Services
Outpatient Substance Abuse
Transportation
Early Intervention Services
Mental Health

Urban Renewal Corporation
12 Myrtle Avenue
Newark, New Jersey 07103
(973) 483 – 2882

Business Hours: *(M-F) – 8:00am – 4:30pm*

Housing & Related Services
Case Management

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RYAN WHITE
CLIENT DIRECTORY

Morris, Sussex & Warren Counties

Hope House
Catholic Family & Community Services
19 – 21 Belmont Avenue
Dover, New Jersey 07802
(973) 361 – 5555

Business Hours: (M-F) 9am – 5pm

Case Management
Mental Health
Outpatient Substance Abuse
Transportation
Medical Case Management

Morristown Medical Center
100 Madison Avenue
Morristown, New Jersey 07962
(973) 889 – 6811

Business Hours: (M, Tu. Th. F) – 9am-11:30am, 1pm-4:30pm,
(Wed)- 1pm-4:30pm

Primary Medical Care
Medical Case Management
Mental Health
Transportation
Early Intervention Services
Oral Health
Health Insurance Premium Cost Sharing
Emergency Financial Assistance

RYAN WHITE
CLIENT DIRECTORY

New Jersey AIDS Services
44 South Street
Morristown, New Jersey 07960
(973) 285 - 0006

Business Hours: (M-F) 9am – 5pm

Case Management
Housing & Related Services
Outpatient Substance Abuse
Mental Health
Early Intervention
Transportation

Zufall Health Center
18 West Blackwell Street
Dover, New Jersey 07801
(973) 328 – 3344

Business Hours: (MF) 8am-5pm,(T) 9am-7pm,
(WTH) 8am-7pm, (Sat) 8am – 1pm

Primary Medical Care,
Medical Case Management,
Oral Health,
Early Intervention Services
Non-Medical Case Management
Health Insurance Premium Cost Sharing
Emergency Financial Assistance

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RYAN WHITE
CLIENT DIRECTORY

Union County

Catholic Charities of the Archdiocese of Newark
505 South Avenue
Cranford, New Jersey 07016
(908) 497 – 3953

Business Hours: (M-F) 9am – 5pm

Medical Case Management/Discharge Planning

Central Jersey Legal Services, Inc.
60 Prince Street
Elizabeth, New Jersey 07208
(908) 354 – 4340

Business Hours: (M-F) 9am – 5pm

Advocacy & Legal Services

Homefirst Interfaith Housing & Family Services, Inc.
1009 Park Avenue
Plainfield, New Jersey 07060
(908) 753-4001 ext.14, 11

Business Hours: (M-F) 9am – 5pm

Case Management
Housing & Related Services
Emergency Financial Services
Nutritional Services

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RYAN WHITE
CLIENT DIRECTORY

Hyacinth AIDS Foundation
25 Craig Place
North Plainfield, New Jersey 07060
(908) 755 - 0021

Business Hours: *(M-F) 9am – 5pm*

Mental Health

The Lennard Clinic
850 Woodruff Lane
Elizabeth, New Jersey 07201
(908) 352 – 0850 ext: 424

Business Hours: *(M-F) 6:30am – 2pm, (Sat-Sun) 6:30am – 9:30am*

Outpatient Substance Abuse

Meals on Wheels, Inc.
1025 Pennsylvania Avenue
Linden, New Jersey 07036
(908) 486 -5100

Business Hours: *(M-F) 7am – 4pm*

Home Delivered Meals

Neighborhood Health Services Corporation
1700 Myrtle Avenue
Plainfield, New Jersey 07060
(908) 753 – 6401 ext:1405
Business Hours: *(MWF) 8am-5pm, (Tu. Th.) 8am-8pm, (Sat) 9am -1pm*

Primary Medical Care
Medical Case Management, EIS
Mental Health
Oral Health
Outpatient Substance Abuse
Health Insurance Premium & Cost Sharing
Medial Nutritional Therapy

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RYAN WHITE
CLIENT DIRECTORY

P.R.O.C.E.E.D, Inc.
1122 East Grand Street
Elizabeth, New Jersey 07201
(908) 469 - 3244

Business Hours: *(M-F) 9am – 4pm*

Case Management
Housing & Related Services
Emergency Financial Services
Mental Health
Early Intervention Services
Nutritional Services

Trinitas Regional Medical Center/EIP
655 Livingston Street 2nd Floor
Elizabeth, New Jersey 07206
(908) 994 – 7060

Business Hours: *(M-F) 8am – 4:30pm*

Primary Medical Care
Medical Case Management
Transportation
Outpatient Substance Abuse
Mental Health
Health Insurance Premium & Cost Sharing
Early Intervention Services

Rutgers, State University of NJ/Special Services Dental Clinic
110 Bergen Street, Rm D-881
Newark, New Jersey 07101
(973) 972 – 6613

Business Hours: *(M-F) 8am – 5pm*

Oral Health

RYAN WHITE
CLIENT DIRECTORY

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UNION COUNTY DEPARTMENT OF HUMAN SERVICES

2015-2016 Ryan White Contracted Agencies

AGENCY	Address	Contact	Telephone #	Service(s)
Catholic Charities of the Archdiocese of Newark	505 South Avenue Cranford, NJ 07016	Kelley Rooney Program Manager	(908) 497-3953 Krooney@ccannj.org	Medical Case Management/ UC Jail Discharge Planning
Central Jersey Legal Services Corp.	60 Prince Street Elizabeth, NJ 07207	Debbie Morgan	(908) 354-4340 dmorgan@lsnj.org	Legal Services
The Lennard Clinic Treatment Center - Eliz Clinic	850 Woodruff Lane Elizabeth, NJ 07201	Eddy Jennings Site Director	(908) 352-0850 eddy@tlclinics.org	Substance Abuse Treatment - Methadone Individual Counseling, Transportation Case Management
Homefirst Inc. Interfaith Housing and Family Services	905 Watchung Avenue Plainfield, NJ 07061-0569	Director, Community Services Pat Alagna	(908) 753-4002 pat@homefirstinc.org	Case Management, Housing EFA (Utilities & Nutrition)
Hyacinth AIDS Foundation	25 Craig Place North Plainfield, NJ 07060	Nicole Lawrence	732-246-0204 nlawrence@hyacinth.org	Mental Health Group, Individual
Meals on Wheels, Inc	1025 Pennsylvania Avenue Linden, NJ 07036	Gavin LaRose, Program Coordinator	(908) 486-5100 gel.mowuc@verizon.net	Nutritional Services - Delivered Meals
Neighborhood Health Svcs. Corp.	1700 Myrtle Avenue Plainfield, NJ 07060	Larisa Hernandez, Director of Ancillary Services	(908) 753-6401 lhernandez@nhscnj.org	Primary Medical Care Oral Health, Lab Tests Medical Nutritional Therapy Mental Health, Medical Case Mgt Substance Abuse Counseling EIS Medical Case Mgt HIPCS
P.R.O.C.E.E.D., Inc	1126 Dickinson Street Elizabeth, NJ 07201	Joseph Diaz Director of Operations Claudia Ortiz Program Coordinator	(908) 351-7727 jdiaz@proceedinc.com (908) 351-7727 cortiz@proceedinc.com	Case Mgmt. Housing Rental Asst. Transitional Hsg, EFA (Utility & Nutrition) Mental Health, EIS
Early Intervention Program	Monastery Building, 2nd Floor Elizabeth, NJ 07206	Judith Lacinak Program Director	(908) 994-7605 jlacinak@trinitas.org	Medical Case Mgt, Transportation, Lab Tests, Mental Health, HIPCS, EIS - Medical Case Mgt, Substance
Rutgers University	110 Bergen Street, Room D881 Newark, NJ 07101	Melissa Beards Program Administrator	973-972-0651 mbeards@sdm.ruters.edu	Oral Health