

Orange County Part A Program
Ryan White HIV/AIDS Program

Fiscal Year (FY) 2024- 2025 Report
Assessment of the Administrative
Mechanism (AAM)

Final Report

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Background

The 2024-2025 Assessment of Administrative Mechanism (AAM) is mandated by Section 2602(b)(4)(E) of the Ryan White HIV/AIDS Program (RWHAP) legislation, which tasks Planning Councils with evaluating the efficiency of administrative mechanisms in swiftly distributing funds to areas of critical need within eligible regions. The primary objective is to ensure that RWHAP Part A funds are allocated promptly and transparently through an open procurement process, with timely disbursement to service providers.

The Planning Council's role specifically excludes involvement in how administrative agencies monitor service providers, focusing instead on evaluating the speed and efficacy of fund allocation. This assessment typically involves structured observations across procurement, expenditure, and reimbursement processes within defined timeframes. For instance, evaluations measure the percentage of funds obligated within specified periods following grant awards, and track reimbursement timelines from service delivery to payment, documenting any adverse impacts resulting from delays.

Periodically, the HIV/AIDS Bureau/Division of Metropolitan HIV/AIDS Programs (HAB/DMHAP) requests updates on these assessments, which may be required for progress reports or grant applications from Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs). Effective communication between the RWHAP Part A Recipient and the Planning Council is crucial for sharing assessment-related data efficiently. Before commencing the procurement process, both parties establish a memorandum of understanding detailing protocols and timelines for data exchange. The Planning Council is obligated to report its findings on the procurement process, assessing its alignment with service priorities and resource allocations as stipulated. Should deficiencies in the existing administrative mechanism be identified, the Planning Council assumes responsibility for formulating formal recommendations aimed at enhancing effectiveness and facilitating necessary changes. It is important to note that while the Planning Council evaluates the alignment of procured services with its priorities and directives, this assessment does not extend to the evaluation of individual service providers, which remains the responsibility of the Recipient.

This report summarizes the outcomes of the 2024-2025 AAM, highlighting insights gathered through comprehensive evaluation processes aimed at optimizing the allocation and efficiency of RWHAP Part A funds within designated areas of need.

Summary of Key Findings and Recommendations

Timely Processes for Contracts and Contract Modifications and RFPs:

In FY 2024-2025, the Recipient issued 15 contracts to 14 subrecipients. The Recipient issued 13 amendments to the contracts. The majority of these amendments were renewals or changes to the funding amount allocated. One RFP was issued in FY 2024-2025.

Adherence to Planning Council Priorities:

The total award for Ryan White Part A for FY 2024-2025 was \$11,541,919. In the final quarter of the award period, sweeps were performed to reallocate funds to ensure that all award monies were spent. The sweeps were based on utilization patterns and needs in the community.

Payments Made by the Recipient to Subrecipients:

The Consultant analyzed 6,653 invoices. The average number of days for an invoice to be paid was 13.7 days. This is slightly slower than last year when the average was 10.6 days. In FY2024-2025, 96.6% of payments were made in 45 days or less. This is similar to 2023-2024 when 97.6% of invoices were paid within 45 days.

Collecting and Reporting of Program Income:

A Revenue Budget Report generated by the Orange County electronic accounting system documented that \$105.42 was accrued in FY 2024-2025. Recipient staff reported that program income was returned to the Part A Program. The referenced program income was used for Specialty Medical Care and was not reported to PC due to the small amount.

Recipient staff report that the program income was generated by the AIDS Pharmaceutical Assistance (Local), or LAPA. Unlike previous years, the FL DOH ADAP had sufficient funds to finance these services- reducing the amount of Part A Program expenditures and related program income incurred in FY 2024-2025.

Accomplishment by the Recipient of the Planning Council's Ways to Best Meet Needs:

The Recipient completed a form documenting their accomplishments in meeting with Planning Council's Ways to Best Meet Needs recommendations. They have provided details on the ways that they addressed all of the recommendations.

Subrecipient Survey:

Representatives from 8 of the 11 subrecipients participated in the survey for a response rate of 72.7%. Eighty-eight percent (88%) of respondents responded that "always" to the question, "Did the Recipient effectively administer RWHAP Part A grant funds?" Among

respondents that answered the questions (and did not respond that they did not know or that the question was not applicable), all responded affirmatively that the Recipient executed their program's RWHAP Part A contract amendments in a timely manner, provided technical assistance (TA) to their program about submitting invoices, reporting, and other contractual requirements, that Part A invoiced payments from Orange County Government were received within 45 calendar days of submission, their program was contacted in the FY to discuss service utilization and expenditures data if spending was not on target and that they were informed by the Recipient about the reallocation process to account for under- or over-spending.

Planning Council Member and Associate Survey:

This survey was sent to all 22 members and 2 associates of the Planning Council three times, or until the survey was completed. In all, 16 members and associates participated in the survey indicating a response rate of 67%. This response rate is higher than it was last year when 17 of the 25 active members and associates participated (63%). Most of the participants in this year's survey have been members for a significant amount of time with 37.5% (n=6) being a member for 3 or more years.

Each of the 16 respondents stated that the recipient always follows the Planning Council's service priorities and follows the Planning Council's resource allocations. Thirteen of 16 respondents (81.3%) stated that the Recipient always follows the Planning Council's resource re-allocation, such as during "sweeps" of funds from one service category to another. The same percentage of respondents (81.3%) stated the Recipient provides the Planning Council with easily understood data during the priority setting process. Thirteen out of 16 respondents (81.3%) stated the Recipient promptly answers questions from Planning Council about resource allocation, re-allocation, and expenditures. Twelve out of 16 respondents (75%) stated that the Recipient always gives easily understood answers to Planning Council's questions about resource allocation, re-allocation, and expenditures. Fourteen out of 16 respondents (87.5%) stated that the expenditures reports provided to Planning Council on a quarterly basis are easily understood. The overwhelming majority of respondents indicated Recipient staff are friendly and courteous (93.8%) and Recipient staff respond to them promptly when they have questions (87.5%).

Conclusion:

The 2024-2025 AAM reveals a commendable effort by the Central Florida HIV Planning Council (CFHPC) and the RWHAP Part A Recipient in administering funds effectively and transparently. The Recipient was consistent from the previous year in their ability to provide timely allocation and reimbursement of funds, with 96.6% of payments

processed within 45 days, demonstrating enhanced financial management compared to previous assessments. The alignment of service procurement with Planning Council directives was generally strong, reflecting a commitment to prioritizing community needs. Feedback from the Subrecipient and Planning Council Members and Associates survey did indicate some areas for continued improvement.

Recommendations to Consider:

Enhance Communication Protocols: Continue to work towards simplifying expenditure and needs assessment language to assist the Planning Council in discharging their duties. In addition, given the turbulent political climate, continue to offer timely information on the happenings at both the state and federal level.

Streamline Re-Allocation Processes: Address feedback regarding the timing and process of re-allocations to provide Planning Council opportunities to partner in these efforts prior to the final quarter of the program year.

Optimize Resource Utilization: Continue to look for new program partners in order to offer more options to clients throughout the Eligible Metropolitan Area.

In conclusion, the 2024-2025 AAM shows Orange County Government is doing an excellent job administering Part A funds. Subrecipients are overwhelmingly being reimbursed in a timely manner, and communication between the Recipient, Planning Council, and Subrecipients is generally positive. While there are several areas in need of some tweaking, overall the Recipient should be pleased with the work they've done to foster productive relationships in addressing HIV in the Orlando metropolitan area.

Research Questions

The purpose of conducting the 2024/25 Assessment of the Administrative Mechanism in the Orlando Service Area (OSA) was to answer the following questions:

1. What percent of the RWHAP Part A 2024/25 contracts were signed prior to the start of the program year?
2. Did the RWHAP Part A Recipient follow the directives of the Planning Council in respect to the allocation of funds as stipulated by the Council for all categories of service?
3. Did the Procurement of services reflect the directives of the Planning Council?
4. Did the RWHAP Part A Recipient communicate back to the Planning Council the results of the procurement process within thirty (30) days after the process closed?
5. Was there timely execution of reimbursement to providers, if not; was there any adverse impact on clients or providers related to the delay in payment?
6. Does the RWHAP Part A Recipient recommend reallocation of funds to the Planning Council in a timely manner based on actual expenditures?
7. To what extent are the services that have been procured by the RWHAP Part A Recipient consistent with stated Planning Council priorities and Directives as to how to meet these priorities (ways to best meet needs)?

Process

An email was received on January 21, 2025 explaining that the Central Florida HIV Planning Council (CFHPC) was looking for an agency able to conduct the Assessment of Administrative Mechanism (AAM) as indicated by the Ryan White HIV/AIDS Program legislation. A scope of work was attached. A detailed cost breakdown was due by February 10, 2025 for those interested in applying to conduct the AAM. The AIDS Institute was informed on February 20, 2025 that the agency was awarded the contract and an official contract was executed on April 30, 2025.

Methodology

A. Review and Report on Prior Recommendations

The two most recent reports for previous years' Assessments of the Administrative Mechanism (AAM) were provided to the consultant. These reports were for FY 2022-2023 and FY 2023-2024. The reports were reviewed focusing on identified areas for

improvement. Findings from FY 2024-2025 are compared against current practices and survey results to assess progress and determine whether prior recommendations have been effectively implemented.

B. Review of Existing Survey Tools

Two surveys were used in last year's AAM. One was conducted with subrecipients and the other with Planning Council members and associates. Because these survey tools had been recently revised and to allow for analysis of trends on questions of interest, only minor changes were made. Two interview protocols were developed by the AAM consultant for use with Planning Council and Associate members as well as subrecipient representatives.

C. Subrecipient Survey and Interviews

A survey was conducted among subrecipients to determine how well the procurement process meets subrecipients' needs and expectations. The survey questionnaire (Appendix A) was essentially identical to the survey used in the most recent evaluation to allow for analysis of trends. Some minor changes were made to increase accuracy of the results. For example, the answer options to one question were modified to be mutually exclusive.

Once the survey was coded into Survey Monkey, an email which included the link to the survey was sent to representatives from each subrecipient organization requesting participation. Each representative was emailed a total of nine times or until they participated. In addition, two subrecipients were interviewed.

D. Planning Council Member and Associate Survey and Interviews

A survey was administered to Planning Council Members and Associates to gauge their perceptions of the procurement process (Appendix B). This survey explored aspects such as communication, decision-making transparency, and alignment with service priorities.

Like the subrecipient survey, this questionnaire was coded into Survey Monkey and emails which included the link to the survey were sent to members and associates. Each member and associate was emailed a total of nine times or until they participated. Additionally, Planning Council staff encouraged participation at meetings and via text and emails. Five Planning Council and Associate members participated in telephone interviews.

E. Interview with County Administrative Staff

An interview was conducted with the County's administrative staff responsible for program oversight. The interview aimed to gather detailed information on the procedures, challenges, and efficiencies associated with program administration. The interviewee and staff also provided many documents to allow for analysis of the fiscal processes.

Results

Contracts and Contract Modifications

In FY 2024-2025, the Recipient issued 15 contracts to 14 subrecipients. The Consultant received a spreadsheet listing the contracts that were issued. Each contract was reviewed in the Orange County Procurement Portal. This review showed that 13 amendments were made to the contracts, lower than the previous contract year that had 18 amendments. The majority of these amendments were renewals or changes to the funding amount allocated.

Table 1. Overview of Contracts

Number of subrecipients	14
Number of contracts	15
Number of amendments/modifications	13

RFP Activities

One Part A-funded RFP was released in FY 2024-2025, *Y25-2500, Expansion of Medical Services*. The Recipient provided the consultant with the schedule of tasks undertaken from the date the RFP was published to the date that the County Commissioners approved the subrecipient award. Table 2 summarizes the number of days difference between key RFP activities. A total of 152 days elapsed between the advertisement of the RFP and Board approval.

Table 1. Days Difference Between RFP Activities, #Y25-2500, Expansion of Medical Services FY 2024-2025		
RFP Activity	Dates	Days Difference
Pre-Proposal Virtual Conference	9/24/2024	
RFP Advertised	9/25/2024	1
Questions Deadline	10/9/2024	12
Application Deadline	10/25/2024	16
Evaluation of Applications	11/1/2024	6
Board of County Commissioners' Approval	2/25/2025	117
Contract Start Date	3/01/2025	4

Adherence to Planning Council Priorities

Table 3 shows the Ryan White Part A Service Caps/Limits and Eligibility Criteria approved by the Recipient and reviewed and revised by the Planning Council for FY 2024-2025.

Table 3. Ryan White HIV AIDS Program Part A: Limitations per Service Category

Note: "Common Criteria" eligibility for all services is: HIV positive, proof of residency, proof of income, and income <400% Federal Poverty level (FPL), except where noted.			
Service Category	Service Category Criteria	Cap/Limit	Eligibility Exception
Oral Health	Common Criteria Uninsured Underinsured	\$2,000 per client Covered services are limited to: exams, x-rays, fillings, extractions, cleanings (prophylaxis, scaling and root planing, gross debridement), dentures (partial or full) and oral health instruction.	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Food Bank/Home Delivered Meals	Common Criteria At or below 200% of the Federal Poverty Level (FPL) and not be eligible for Supplemental Nutrition Assistance Program (SNAP) benefits.	1 Supermarket Gift Card every 30 days or 56 Home Delivered Meals every 30 days or 1 Food Pantry Voucher every 30 days	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis under special circumstances.
Medical Transportation	Common Criteria At or below 185% Federal Poverty Level (FPL)	1-day bus pass: Have one core or support service appointment within 30-days. 30-days bus pass: Have two core or support service appointment within 30-days.	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Mental Health	Common Criteria Uninsured Underinsured	No cap/limit established	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Medical Case Management	Common Criteria	No cap/limit established	
Referral for Health Care and Support Services	Common Criteria	No cap/limit established	

OAHS	Common Criteria Uninsured Underinsured	No limit on eligible office visits or labs. Non-HIV related visits to urgent care facilities are not allowable costs within the Outpatient/Ambulatory Health Services Category. Emergency room visits are not allowable costs within the Outpatient/Ambulatory Health Services Category.	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Early Intervention Services	Common Criteria	No cap/limit established	
Emergency Financial Assistance (EFA)	Common Criteria Uninsured Underinsured	Short-term medication assistance only	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Substance Abuse Outpatient Care	Common Criteria Uninsured Underinsured	No cap/limit established	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Substance Abuse – Residential	Common Criteria Uninsured Underinsured	No cap/limit established	Common Criteria Only. Note: Recipient considers exceptions on a case by case basis only if medically necessary.
Psychosocial Support Services (Peer Support)	Common Criteria	No cap/limit established	
Local Pharmacy Assistance Program (LPAP)	Common Criteria	No cap/limit established	

The total award for Ryan White Part A for FY 2024-2025 was \$11,541,919. Table 4 shows how these funds were allocated across the service categories. Sweeps were performed during the final quarter of the program year to reallocate funds to ensure that all award monies were spent. The sweeps were based on utilization patterns and needs in the community.

Table 4. FY 2024-2025 Award Distribution

Orlando EMA Ryan White Part A Program							
2024-2025 Final Allocations							
Planning Council Allocations							
2024-2025 Priorities	Service Category	Sept. 29, 2023 (Resource Allocation)	June 6, 2024 (Reallocations after Receipt of Final Award)	September 27, 2024	April 2025 (Grantee)	Difference between April 2025 and September 2024	YTD Expenses
6	Outpatient /Ambulatory Health Services	2,950,000	2,940,000	2,640,000	2,678,587	38,587	2,677,210
1	AIDS Pharmaceutical Assistance (local)	300,000	300,000	626,000	518,789	(107,211)	518,792
5	Oral Health Care	750,000	750,000	1,589,479	1,663,245	73,766	1,663,445
4	Health Insurance Premium & Cost Sharing	905,709	565,359	15,000	19,708	4,708	20,381
10	Mental Health Services	125,000	125,000	190,000	226,664	36,664	226,664
14	Medical Nutrition Therapy	235,000	235,000	45,000	48,877	3,877	49,057
2	Medical Case Management	2,425,951	2,425,951	2,390,000	2,232,764	(157,236)	2,232,764
11	Substance Abuse Services - Outpatient	100,000	100,000	20,000	25,998	5,998	25,998
18	Home Community- Based Health Services	-	10,000	0	0		
7	Referral Support Services	1,500,000	1,500,000	1,454,521	1,634,298	179,777	1,634,298
15	Food Bank/Home-Delivered Meals	100,000	100,000	225,000	253,993	28,993	253,993
12	Medical Transportation Services	60,000	60,000	85,000	81,189	(3,811)	81,189
21	Substance Abuse - Residential	50,000	20,000	65,000	64,958	(42)	64,958
17	Outreach Services	100,000	100,000	0	0	0	0
23	Emergency Financial Assistance	40,000	40,000	49,962	50,099	137	50,099
	Quality	332,471	319,700	319,700	210,333	(109,367)	210,333
	Administration	1,108,237	1,065,668	942,015	947,498	5,483	947,498
	TOTAL	11,082,368	10,656,678	10,656,678	10,656,998	320	10,656,678
2024-2025 Priorities	Service Category	Sept. 29, 2023 (Resource Allocation)	June 6, 2024 (Reallocations after Receipt of Final Award)	September 27, 2024	April 2025 (Grantee)	Difference between April 2025 and September 2024	YTD Expenses
6	Outpatient /Ambulatory Health Services	310,914	282,455	282,455	314,953	32,498	315,275
13	Early Intervention Services	320,000	320,000	320,000	342,919	22,919	342,919
9	Psychosocial Support Services	150,000	150,000	150,000	103,871	(46,129)	103,871
	Quality	45,936	44,262	44,262	38,961	(5,301)	84,215
	Administration	91,872	88,524	88,524	84,215	(4,309)	38,961
	TOTAL	918,722	885,241	885,241	884,920	-321	885,241

Payments Made by the Recipient to Subrecipients

The consultant received two spreadsheets from the Recipient. The first included all invoices submitted to the Recipient in FY 2024-2025 for dental and specialty care. The second was for all other services. The two spreadsheets were combined to allow for analysis that is comparable to the results from last year's report.

In all, 6,653 invoices were analyzed. The average number of days for an invoice to be paid was 13.6 days. This is slightly higher than last year when the average was 10.6 days.

In FY2024-2025, 96.6% of payments were made in 45 days or less. This is similarly to FY 2023-2024's finding 97.6% of invoices were paid within 45 days. Of the total invoices, 223 were paid after 45 days. On average, these invoices were paid in 72.4 days. The range was 46-211 days. As shown in Figure 1, 132 of the 223 invoices (59.1%) were paid within 65 days. An additional 43 (19.3%) were paid within 84 days.

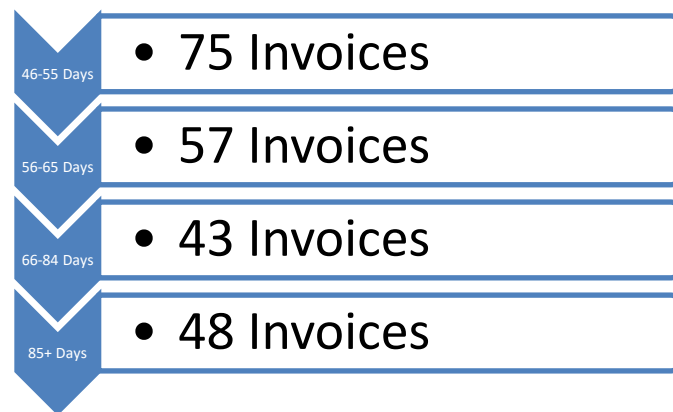


Figure 1. Invoices Paid After 45 Days

Collecting and Reporting of Program Income

A Revenue Budget Report generated by the Orange County electronic accounting system documented that \$105.42 was accrued in FY 2024-2025. Recipient staff reported that program income was returned to the Part A Program. Recipient staff report that the program income was generated by the AIDS Pharmaceutical Assistance (Local), or LAPA. Unlike previous years, the FL DOH ADAP had sufficient funds to finance these services-reducing the amount of Part A Program expenditures and related program income incurred in FY 2024-2025.

Accomplishment by the Recipient of the Planning Council's Ways to Best Meet Needs

The Recipient completed a form (Table 5) which documents the directives received by the Planning Council, the scope of the directive, the monitoring tools being employed and the accomplishments in meeting each directive.

Table 5. Recipient's Accomplishments in Meeting the PC's Ways to Best Meet Needs

Scope (applies		Monitoring Tools	
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to...i.e. counties, Part A, Part B, etc.)	Directive		Accomplishments
<p>Orlando Service Area</p> <p>RWHAP Part A Recipient</p> <p>RWHAP Part B Lead Agency</p>	<p>To encourage all RWHAP- funded providers, including case managers, to participate in training that focuses on a harm reduction model to mental health and substance use.</p> <p>The Lead Agency/recipient shall be responsible for selecting the training models or content for subrecipients.</p> <p>A Planning Council representative(s) will participate in the development of the training.</p>	<p>Bi-annual reports from the Planning Council representative(s) on the status of the training program</p>	<p>Recipient hosted all-hands trainings that included harm reduction, mental health and substance use. The trainings were provided by License Mental Health providers. The recipient hosted a Harm Reduction and Mental Health training, 84 staff attended.</p> <p>Recipient monitored subrecipient compliance during annual monitoring visits. 150 staff from 12 agencies participated. All Case Management Staff is required to complete the AETC Case Management Module, which included Mental Health and Substance Use topics.</p>
<p>Orlando Service Area</p> <p>RWHAP Part A Recipient</p> <p>RWHAP Part B Lead Agency</p>	<p>To encourage all RWHAP- funded providers to participate in leadership training developed and/or approved by the Recipient's Office, which includes awareness of compassion</p>	<p>Bi-annual reports to the PC on the development of the training</p>	<p>Recipient encouraged and approved subrecipients to attend various national conferences that included leadership training and workshops. Recipient encouraged subrecipients to participate in related AETC sponsored</p>

	<p>fatigue and customer service.</p> <p>A Planning Council representative(s) will participate in the development of the training.</p>		<p>webinars and trainings. 19 staff from 7 subrecipients attended the National Conference, which offered leadership topics. The recipient will identify and require supervisors to complete specific leadership training during FY 2024-2025.</p> <p>Recipient encouraged subrecipients at Supervisor's and Provider's meetings to provide agency level leadership training. Recipient monitored subrecipient compliance during annual monitoring visits.</p>
<p>Orlando Service Area</p> <p>RWHAP Part A Recipient</p> <p>RWHAP Part B Lead Agency</p>	<p>To work with subrecipients to implement methodologies for meaningful input from clients, including but not limited to Client Advisory Board (CAB) meetings, focus groups, special studies, town halls, and other client-centered engagement activities (where clients provide</p>	<p>Bi-annual reports from the Recipient and Lead Agency on the types of meaningful engagement activities that have occurred and the number of activities conducted</p>	<p>Recipient worked with subrecipients on maintaining and/or developing CABs as part of the required monitoring standards. Not all subrecipients currently have an active CAB due in part because of the challenges involved with securing client participation. However, other forms of feedback collection were used. Currently, 5 subrecipients have active CABs; 3 subrecipients collaborated with PC to</p>

	<p>input on their care).</p> <p>To encourage agencies to explore avenues for both in-person and online participation.</p>		<p>host Community Meetings in other counties. 1 subrecipient conducted focus groups. All subrecipients are part of the Recipient's client satisfaction survey. Recipient revamped the Client Satisfaction Survey program and promoted its usage among all subrecipients. Results were shared and discussed with subrecipients during various meetings.</p>
<p>Orlando Service Area</p> <p>RWHAP Part A Recipient</p> <p>RWHAP Part B Lead Agency</p>	<p>To encourage subrecipients to participate in HIV stigma reduction training for all staff.</p>	<p>Bi-annual report on the number of participating agencies</p>	<p>Recipient encouraged and approved subrecipients to attend various national conferences that included HIV stigma reduction training and workshops.</p> <p>Recipient encouraged subrecipients to participate in related AETC sponsored webinars and trainings. Recipient encouraged subrecipients at Supervisor's and Provider's meetings to provide agency level HIV stigma reduction training.</p>

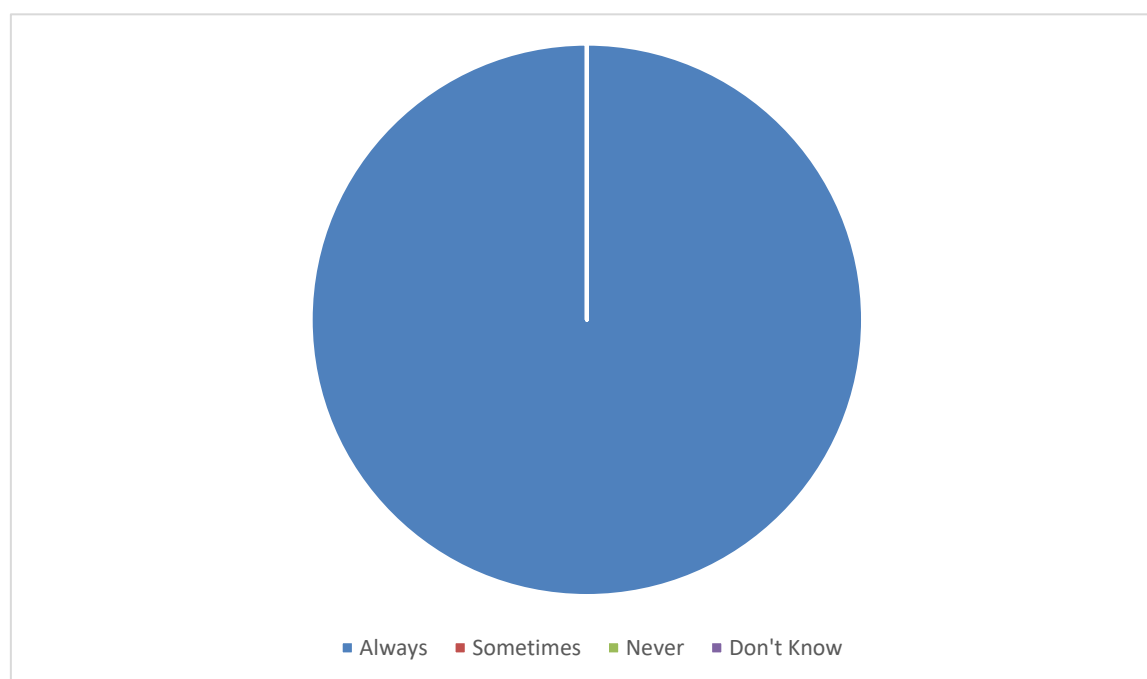
Subrecipient Survey

Eleven (11) subrecipients were listed for FY 2024-2025. Contact information for at least one representative from each agency was given to the consultant. An email which contained the link to the survey requesting participation was sent to the representatives on nine separate occasions beginning March 10, 2025.

Representatives from 8 of the 11 subrecipients participated in the survey for a response rate of 72.7%, an improvement from last year where 61.5% of subrecipients responded. Only one survey per agency was included in the analysis of the data.

The first question asked, "Did the Recipient effectively administer RWHAP Part A grant funds?" with the response options Always, Sometimes, Never and Don't Know. As shown in Figure 2, the vast majority stated that the Recipient always did so.

Figure 2. Effective Administration of Part A Funds



The next set of questions asked about contracting Part A funds. As shown in Table 5, the responses were overwhelmingly positive. Of those respondents that answered the questions (and did not respond that they did not know or that the question was not applicable), all responded affirmatively that the Recipient executed their program's RWHAP Part A contract amendments in a timely manner, provided technical assistance (TA) to their program about submitting invoices, reporting, and other contractual requirements, that Part A invoiced payments from Orange County Government were received within 45 calendar days of submission, their program was contacted in the FY to discuss service

utilization and expenditures data if spending was not on target and that they were informed by the Recipient about the reallocation process to account for under- or over-spending.

Table 6. Contracting Part A Funds

Question	Yes	No	DK	N/A
Did the Recipient execute your program's RWHAP Part A contract amendments in a timely manner?	100% (8)			
Did the Recipient provide technical assistance (TA) to your program about submitting invoices, reporting, and other contractual requirements?	75% (6)			25% (2)
Did your program apply for funds from a RWHAP Part A Request for Proposal (RFP)?	88% (7)	12% (1)		
Did the Recipient execute your program's new contract in a timely manner on or before the start of the new FY (i.e., March 1, 2024)?	100% (8)			
On average in FY 2024-2025, did your program receive Part A invoiced payments from Orange County Government within 45 calendar days of submission?	100% (8)			
Did the Recipient contact your program in the FY to discuss service utilization and expenditures data if spending was not on target?	100% (8)			
Did the Recipient inform your program about the reallocation process to account for under- or over-spending?	100% (8)			

The next question was open-ended and asked, "How can the Recipient improve payment processing and over- and under- spending of RWHAP Part A funds?" Eight respondents provided a response. Four of the responses indicated satisfaction with the current process:

"No improvement needed."

"N/A."

"No suggestions at this time."

"No improvements recommended at this time."

The rest offered suggestions for improvement:

"Make funds between line items more fluid. Staffing changes may negatively impact one line item and benefit another. Without flexibility, funds may be underspent in one area and over in another."

“Once again, constant communication with the subrecipient on a monthly basis to see where they are.”

“By guiding the Planning Council in making better decisions regarding allocations. Possibly funding less service categories.”

“Perhaps discussing allocation adjustments after quarterly reports if needed.”

Interview respondents were generally pleased with their relationship with the Recipient, offering only that they felt Provide was an outdated system and was a challenge to use. Otherwise they felt positive towards the Recipient and felt they were efficient with contracting, communication, and stewardship.

The next set of questions focused on expenditures and payments in FY 2024-2025. As shown in Table 7, overall, the responses were positive.

Table 7. Expenditures and Payments

Question	Yes	No	DK
Did your program experience any hardship due to delays in reimbursement by the recipient?	0	100% (8)	
Did the Recipient keep your program informed of HRSA HIV/AIDS Bureau (HAB) policies, procedures, and news that impact the Ryan White Program?	100% (8)		
Did the Recipient keep your program informed of changes in RWHAP Part A reporting requirements, such as the Ryan White Services Report (RSR)?	100% (8)		
Did the Recipient keep your program informed of Planning Council directives that impacted Part A-funded agencies?	88% (7)	12% (1)	
Did the Recipient keep your program informed of RWHAP Part A client eligibility requirements?	88% (7)	12% (1)	
Was the Recipient’s staff courteous and respectful to your program’s employees?	100% (8)		
The Recipient provides responsive and timely responses when our agency needed information.	100% (8)		

Next respondents were asked, “How can the Recipient improve communication with your program?”

Eight subrecipient representatives offered responses. Five responses indicated their satisfaction with their communication with the Recipient:

“The communication is great and always professional. The grantee is always available to answer our questions or address concerns.”

“Communication has been good.”

"No improvement is needed."

"N/A."

"Communication with the recipient office has been very timely."

The other three responses offered suggestions for improvement:

"Please don't assume we are doing something wrong until all facts have been gathered and reviewed."

Continuation of the regular/standard monthly call."

"Recognize that we are partners in the system and treat all of us as such."

The last question asked respondents. "What other ways can the Recipient improve its administrative management of the RWHAP Part A Program?"

Four subrecipient representatives offer responses. Four of the responses did not offer suggestions for improvement:

"Administrative management has met all expectations of our agency Staff are very helpful at all times."

"None."

"No comments."

"No comment at this time."

Four offered suggestions for improvement:

"Probably including subrecipients in some of the decision making of certain areas or issues that affect direct service."

"In my opinion, funded providers should receive their funds upfront and report expenditures rather than operating under a reimbursement contract. This approach would alleviate cash flow concerns for providers and eliminate the 45-day payment wait period. Most providers are trusted, vetted, and recognized as reputable organizations."

"Make all requested changes, updates, etc. in writing versus verbally during monthly meetings."

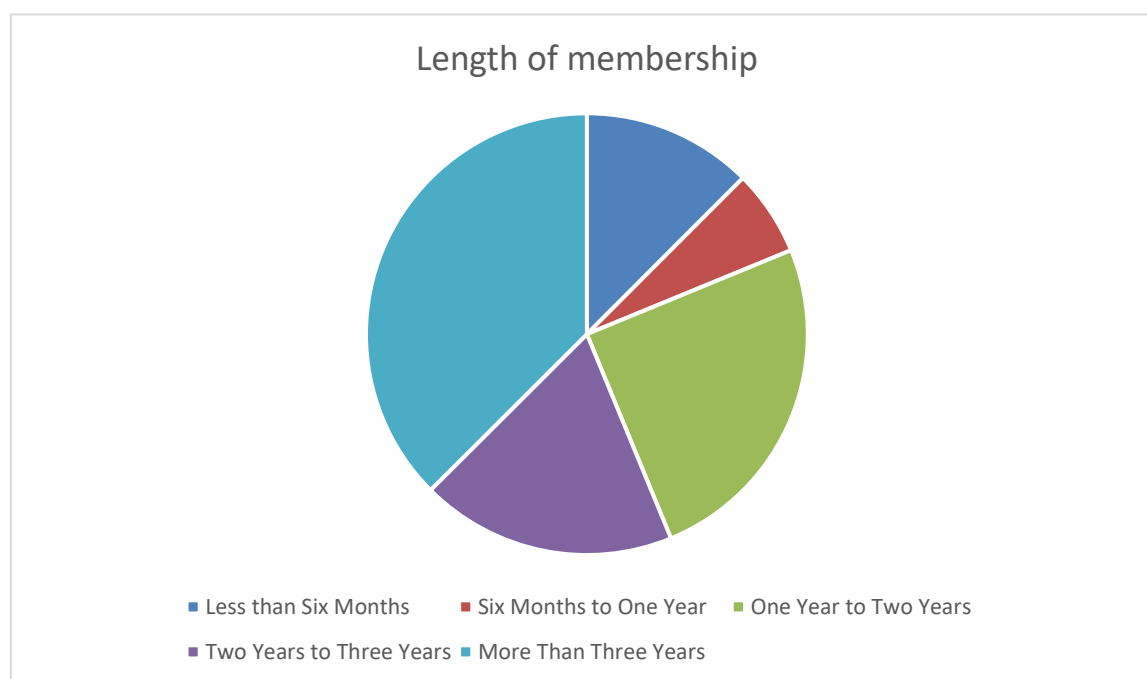
"Guide the Planning Council in making better allocation decisions, recommend re-allocation of funds throughout the year instead of holding back until they have the authority to sweep funds."

Planning Council Member and Associate Survey and Interviews

This survey was sent to all 22 members and 2 associates of the Planning Council nine times, or until the survey was completed. The first email was sent on March 10, 2025. In addition to emails requesting participation, Planning Council staff contacted members and associates directly requesting participation. In all, 16 members and associates participated in the survey indicating a response rate of 67%. In addition, five Planning Council members were interviewed.

The survey began by asking respondents how long they have been a member of the Planning Council or an Associate Member. As shown in Figure 3, 37.5% (n=6) have been a member for 3 or more years and an additional 25% (n=4) have been a member for 1-2 years.

Figure 3. Length of Planning Council/Associate Membership



The survey contained 10 close-ended questions which examined issues related to priority setting, resource allocation, and re-allocation as well as administration of RWHAP Part A Funds. All of these questions had the following answer options: Always (A), Sometimes (S), Never (N), and Don't Know (DK). One question also contained an N/A option. The responses to these questions are shown in Table 7.

Each of the 16 respondents stated that the recipient always follows the Planning Council's service priorities and follows the Planning Council's resource allocations. Thirteen of 16 respondents (81.3%) stated that the Recipient always follows the Planning Council's resource re-allocation, such as during "sweeps" of funds from one service category to another. The same percentage of respondents (81.3%) stated the Recipient provides the

Planning Council with easily understood data during the priority setting process. Thirteen out of 16 respondents (81.3%) stated the Recipient promptly answers questions from Planning Council about resource allocation, re-allocation, and expenditures. Twelve out of 16 respondents (75%) stated that the Recipient always gives easily understood answers to Planning Council's questions about resource allocation, re-allocation, and expenditures. Fourteen out of 16 respondents (87.5%) stated that the expenditures reports provided to Planning Council on a quarterly basis are easily understood. The overwhelming majority of respondents indicated Recipient staff are friendly and courteous (93.8%) and Recipient staff respond to them promptly when they have questions (87.5%).

Table 7. Close Ended Question Responses

Question	A	S	N	DK	N/A
The Recipient follows the Planning Council's service priorities.	100% (16)				
The Recipient follows the Planning Council's resource allocations.	100% (16)				
The Recipient follows the Planning Council's resource re-allocation, such as during "sweeps" of funds from one service category to another.	81% (13)	12% (2)		6% (1)	
The Recipient provides the Planning Council with easily understood data during the priority setting process.	81% (13)	19% (3)			
The Recipient promptly answers questions from the Planning Council about resource allocation, re-allocation, and expenditures.	81% (13)	12% (2)		6% (1)	
The Recipient gives easily understood answers to Planning Council's questions about resource allocation, re-allocation, and expenditures.	75% (12)	25% (4)			
The Recipient reports easily understood expenditure data to the Planning Council on a quarterly basis.	88% (14)	12% (2)			
The Recipient clearly communicates about the re-allocation process to the Planning Council.	81% (13)	19% (3)			
The Recipient keeps the Planning Council well informed of HRSA HIV/AIDS Bureau (HAB) policies, procedures, and news that impact the Ryan White Program.	88% (14)	12% (2)			
Recipient staff promptly and adequately respond to questions when I need information.	88% (14)	12% (2)			
Recipient staff are friendly and courteous.	94% (15)	6% (1)			
The Recipient effectively administers Part A grant funds.	94% (15)	6% (1)			

Finally, the survey contained two open-ended questions. The first one which was presented in the survey questionnaire in two locations, asked, "How can the Recipient improve communication with the Planning Council about service priorities, resource allocation, and resource re-allocation?" There were 16 responses to this question.

Eleven of the responses were complimentary and did not recommend changes. These were:

"I ask a lot of questions, and most of us do. We piggyback off each other with our questions."

"They are doing a great job."

"No suggestions at this time."

"N/A (3 respondents)."

"Claudia, Yasmin, Doris, and Evan do a fantastic job of explaining the information."

"I think the communication is effective."

"There have been times where it was important to do a sweep. It was presented to us. We're good as it is right now."

"It does that in the meetings that we have."

"They let us know what they did and usually we would have done about the same thing."

One response focused on issues related to reallocations and sweeps. These were:

"They could do a better job of recommending re-allocations throughout the year instead of waiting for the sweeps."

One response focused on Planning Council membership:

"Stop letting anybody on the planning council cuz everybody is not planning council material."

The remaining responses focused on ways to improve communication. These were:

"The recipient is currently doing their best with the limitations they have. It would be great if we could just have a group chat where important information can be sent to

keep us all updated however I understand that would violate the Florida sunshine law. So they are doing the best they can and it shows."

"There are items that are discussed in many meetings over many months and can be draining to listen to the why's of these things. Maybe starting a narrative that could be referenced. Maybe a one pager to go with the expenditure report to express trends so if it is a repeat, it can be expressed to review the narrative, and we can move on to items that need to be discussed. PC members could also have it to reference so the members aren't listening to the same "why" questions and answers over and over again."

"Email the information prior the meeting."

The other open-ended question asked, "What other ways can the Recipient improve administrative processes or communication?" Thirteen people responded. The majority of comments were complimentary:

"I can't think of anything. We have good discussions and have a good group of people on Planning Council."

"I think everything is good."

"Doing a great job."

"N/A (4 respondents)."

"No suggestions at this time."

"They do a pretty good job."

"I think they do rather well with this. No other suggestions. They are all very approachable and open to discussion."

"They keep us informed."

Several provided constructive feedback:

"Just make sure that our meetings are always on time and when they're supposed to be and they always are thank you."

"Getting in another meeting and stop letting so many people that's on there because there's a problem everybody is not planning council material and a lot of people don't relate to clients because they don't think of themselves as a client and they are a client first."

"The communication piece is fine. There are too many limitations for there to be anything they can actually improve on and they are doing the best they can. As for the administrative process they have been on the ball as always."

Interview Respondents were generally complimentary of the work the Recipient had done with Planning Council. The only source of feedback to the Recipient focused on encouraging them to conduct reallocations prior to the sweep as well as communicating any program-related income. Otherwise, the Planning council members were happy with their relationship.

Appendix A: Subrecipient Survey Questionnaire

2024-2025 Part A Assessment of the Efficiency of the Administrative Mechanism (AAM): Subrecipient Survey

This survey focuses on the Ryan White HIV/AIDS Program (RWHAP) Part A Fiscal Year (FY) 2024-2025 (i.e., March 1, 2024 - February 28, 2025). In this survey we refer to the Part A Recipient and its staff as the “Recipient.” We refer to your agency’s HIV services program as “your program.” Please click on the boxes of the responses that BEST describes your opinion.

Contracting Part A Grant Funds in FY 2024-2025

1. Did the Recipient effectively administer RWHAP Part A grant funds? (Pick one)
 - ☐ Always
 - ☐ Sometimes
 - ☐ Never
 - ☐ Don’t Know
2. Did the Recipient execute your program’s RWHAP Part A contract amendments in a timely manner? (Pick one)
 - ☐ Yes
 - ☐ No
 - ☐ Don’t Know
3. Did the Recipient provide technical assistance (TA) to your program about submitting invoices, reporting, and other contractual requirements? (Pick one)
 - ☐ Yes
 - ☐ No
 - ☐ Don’t Know
 - ☐ NA, Our Program Did Not Need TA
4. Did your program apply for funds from a RWHAP Part A Request for Proposal (RFP)? (Pick one)
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable, Our Program Was Ineligible for the RFP
5. Did the Recipient execute your program’s new contract in a timely manner on or before the start of the new FY (i.e., March 1, 2024)? (Pick one)
 - ☐ Yes
 - ☐ No
 - ☐ Don’t Know
 - ☐ Not applicable (NA), did not receive a new contract in FY 2024-2025

Expenditures and Payments in FY 2024-2025

6. On average in FY 2024-2025, did your program receive Part A invoiced payments from Orange County Government within 45 calendar days of submission?
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
7. Did the Recipient contact your program in the FY to discuss service utilization and expenditures data if spending was not on target? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
 - ☐ NA, Our Program's Spending Was on Target Throughout FY 2024-2025
8. Did the Recipient inform your program about the reallocation process to account for under- or over-spending? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
9. How can the Recipient improve payment processing and over- and under-spending of RWHAP Part A funds

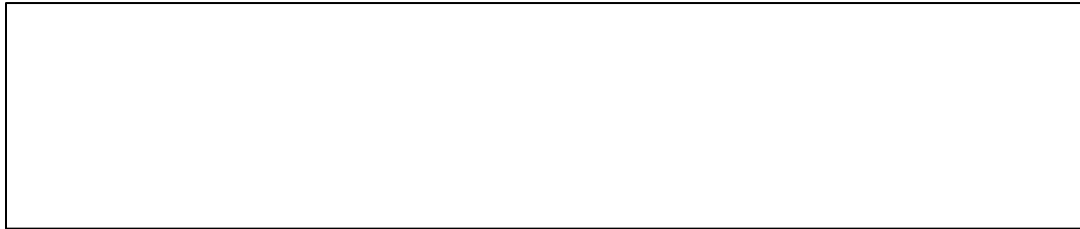
10. Did your program experience any hardship due to delays in reimbursement by the recipient?
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
11. If you answered "Yes" to question 10, please describe the hardship below.

Communications

12. Did the Recipient keep your program informed of HRSA HIV/AIDS Bureau (HAB) policies, procedures, and news that impact the Ryan White Program? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
13. Did the Recipient keep your program informed of changes in RWHAP Part A reporting requirements, such as the Ryan White Services Report (RSR)? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
14. Did the Recipient keep your program informed of Planning Council directives that impacted Part A-funded agencies? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
15. Did the Recipient keep your program informed of RWHAP Part A client eligibility requirements? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
16. Was the Recipient's staff courteous and respectful to your program's employees? (Pick one)
- ☐ Yes
 - ☐ No
 - ☐ Don't Know
17. How can the Recipient improve communication with your program?

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18. What other ways can the Recipient improve its administrative management of

A large, empty rectangular box with a thin black border, intended for the respondent to provide their answer to question 18.

Thanks for completing the survey! Other questions or comments that you would like to share? Please email David Cavalleri, Ryan White AAM Consultant, at dcavalleri@taimail.org or call 812-259-5828.

Appendix B: Planning Council and Associate Member Survey Questionnaire

2024-2025 Ryan White HIV/AIDS Program (RWHAP) Part A Assessment of the Efficiency of (AAM): Planning Council and Associate Survey

This survey focuses on the Ryan White HIV/AIDS Program (RWHAP) Part A Fiscal Year (FY) 2023-2024 (i.e., March 1, 2024 - February 28, 2025). In this survey we refer to the Part A Recipient and its staff as the "Recipient."

1. How long have you served as a Planning Council or Associate member? (Pick one)

- ☐ Less than 6 months
- ☐ 6 to 12 months
- ☐ 1 to 2 years
- ☐ 3 or more years

Priority Setting, Resource Allocation, and Re-Allocation

Please click on the boxes of the responses that BEST describes your opinion.

2. The Recipient follows the Planning Council's service priorities. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

3. The Recipient follows the Planning Council's resource allocations. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

4. The Recipient follows the Planning Council's resource re-allocation, such as during "sweeps" of funds from one service category to another. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

5. How can the Recipient improve communication with the Planning Council about service priorities, resource allocation, and resource re-allocation?

6. The Recipient provides the Planning Council with easily understood data during the priority setting process. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

7. The Recipient promptly answers questions from the Planning Council about resource allocation, re-allocation, and expenditures. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

8. The Recipient gives easily understood answers to Planning Council's questions about resource allocation, re-allocation, and expenditures. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

9. The Recipient reports easily understood expenditure data to the Planning Council on a quarterly basis. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know
- ☐ Not applicable (I don't participate in Planning Council Part A expenditure discussions)

10. The Recipient clearly communicates about the re-allocation process to the Planning Council. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

11. The Recipient keeps the Planning Council well informed of HRSA HIV/AIDS Bureau (HAB) policies, procedures, and news that impact the Ryan White Program. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

Administration of RWHAP Part A Funds

12. The Recipient effectively administers Part A grant funds. (Pick one)

- ☐ Always
- ☐ Sometimes
- ☐ Never
- ☐ Don't Know

13. What other ways can the Recipient improve administrative processes or communication?

Thanks for completing the survey!

Please submit your completed survey to have your responses included. Do you have questions or comments that you would like to share with David Cavalleri, Ryan White AAM Consultant? If yes, please email him at dcavalleri@tmail.org or call 813-259-5828.