

| Ryan White Part A Implementation Plan: Service Category Table   |  |   |  |  |   |  |   |   |  |                |  |
|---|--|---|--|--|---|--|---|---|--|----------------|--|
| <input type="checkbox"/> Program Submission   |  |   |  | <input checked="" type="checkbox"/> Annual Progress Report |   |  |   |   |  |                |  |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |   |  |  |   |  |   |   |  |                |  |
| Fiscal Year: FY2017   |  |   |  |  |   |  |   |   |  |                |  |
| Budget Period: March 1, 2017-February 28, 2018  |  |   |  | Time Frame: March 1, 2017-February 28, 2018                |   |  |   |   |  |                |  |
| Service Category Name: Outpatient Ambulatory Health Services  |  |   |  | <input checked="" type="checkbox"/> Part A Core            | <input type="checkbox"/> Part A Support         | <input type="checkbox"/> MAI Core            | <input type="checkbox"/> MAI Support                                  | Total Service Category Funds  |  |                |  |
| Race/Ethnicity (for MAI funded service only):   |  |   |  | <input type="checkbox"/> African American                  | <input type="checkbox"/> Hispanic               | <input type="checkbox"/> Asian               | <input type="checkbox"/> Native American                              | <input type="checkbox"/> Pacific Islander                                   | <input type="checkbox"/> Other                         | \$93,68,737.04 |  |
| Service Category Priority Number: 1   |  |   |  |  |   |  |   |   |  |                |  |
| Service Category Goal: To provide primary medical diagnostic and therapeutic services consistent with HHS guidelines and prescribe/monitor HIV-care medications through public health centers and community clinics located in the EMA. |  |   |  |  |   |  |   |   |  |                |  |
| 1. Objectives:  |  | 2. Service Unit Definition:                                   |  | 3. Quantity:   |   |  | 4. Funds:   |   |  |                |  |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided                        |  | Number of people to be served                              |   | Total Number of service units to be provided |   | Provide the approximate amount of funds to be used to provide this service. |  |                |  |
|   |  |   |  | Target   | Actual  | Target                                       | Actual  | Allocation  | Expenditure  |                |  |
| a. By February 28, 2018, approximately 87% of total clients (15,712) served will have at least 1 medical visit.   |  | 1 unit = 1 medical visit                                      |  | 13,721   |   | 74,093                                       |   | \$73,94,615.32  |  |                |  |
| b. By February 28, 2018, approximately 8% of total clients (15,712 ) will receive HIV/AIDS medications while waiting for ADAP or PAP approval.  |  | 1 unit = 1 prescription                                       |  | 1,358  |   | 2,859  |   | \$12,99,994.07  |  |                |  |
| c. By February 28, 2018, 303 new clients will receive care through a Rapid Entry Clinic for the initiation of care and treatment until client is connected to long term provider.   |  | 1 unit = 1 medical visit                                      |  | 303  |   | 567  |   | \$6,74,127.65   |  |                |  |
| 5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)  |  |   |  |  |   |  |   |   |  |                |  |
| a. (Pick Outcome from dropdown list in the cell to the right )  |  | HHS Measure: Retention in HIV Medical Care                    |  |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                                      |   | Actual: Numerator/Denominator, %                       |                |  |
|   |  |   |  |  | 6612/10553; 63%                                 |  | 6889/10764;64%  |   |  |                |  |
| b. (Pick Outcome from dropdown list in the cell to the right )  |  | HAB Core Measures: Prescription of HIV Antiretroviral Therapy |  |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                                      |   | Actual: Numerator/Denominator, %                       |                |  |
|   |  |   |  |  | 11897/13490;88%                                 |  | 12,212/13,721;89%   |   |  |                |  |
| c. (Pick Outcome from dropdown list in the cell to the right )  |  | HAB Core Measures: HIV Viral Load Suppression                 |  |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                                      |   | Actual: Numerator/Denominator, %                       |                |  |
|   |  |   |  |  | 10274/13490;76%                                 |  | 10,565/13721;77%  |   |  |                |  |
| 6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable  |  |   |  |  |   |  |   |   |  |                |  |
| <input checked="" type="checkbox"/> Diagnosed   |  | <input checked="" type="checkbox"/> Linked to Care            |  |  | <input checked="" type="checkbox"/> Retained in |  | <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy |   | <input checked="" type="checkbox"/> Virally Suppressed |                |  |

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|---|--|---|--|--|---|---|--------------------------------------|
| <input type="checkbox"/> Program Submission   |  |   |  | <input checked="" type="checkbox"/> Annual Progress Report |   |   |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |   |  |  |   |   |                                      |
| Fiscal Year: FY2017   |  |   |  |  |   |   |                                      |
| Budget Period: March 1, 2017-February 28, 2018  |  |   |  | Time Frame: March 1, 2017-February 28, 2018                |   |   |                                      |
| Service Category Name: Outpatient Ambulatory Health Services- MAI   |  |   |  | <input type="checkbox"/> Part A Core                       | <input type="checkbox"/> Part A Support | <input checked="" type="checkbox"/> MAI Core                          | <input type="checkbox"/> MAI Support |
|   |  |   |  |  |   | Total Service Category Funds  |                                      |
|   |  |   |  |  |   | Allocation  | Expenditure                          |
| Race/Ethnicity (for MAI funded service only): <input checked="" type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other |  |   |  |  |   | \$23,76,116.00  |                                      |
| Service Category Priority Number: 1   |  |   |  |  |   |   |                                      |
| Service Category Goal: To ensure accessible HIV/AIDS primary care consistent with PHS guidelines to improve health outcomes for eligible African American men, women, transgendered, children and youth   |  |   |  |  |   |   |                                      |
| 1. Objectives:  |  | 2. Service Unit Definition:                                   |  | 3. Quantity:   |   | 4. Funds:   |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided                        |  | Number of people to be served                              |   | Total Number of service units to be provided                          |                                      |
|   |  |   |  | Target   |   | Actual  |                                      |
|   |  |   |  | Target   |   | Actual  |                                      |
|   |  |   |  | Allocation   |   | Expenditure   |                                      |
| a. By February 28, 2018, approximately 999 MAI clients will have at least 1 medical visit.  |  | 1 unit = 1 medical visit                                      |  | 999  |   | 7,900   |                                      |
| b. By February 28, 2018, approximately 359 women, infants, children, and youth will received primary medical care and prescribe/monitor HIV-care medications.   |  | 1 unit = 1 medical visit                                      |  | 359  |   | 2,150   |                                      |
|   |  |   |  | Allocation   |   | Expenditure   |                                      |
|   |  |   |  | \$15,44,475.40   |   | \$8,31,640.60   |                                      |
| 5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)  |  |   |  |  |   |   |                                      |
| a. (Pick Outcome from dropdown list in the cell to the right )  |  | HAB Core Measures: Gap in HIV Medical Visits                  |  | Baseline: Numerator/Denominator, %                         |   | Target: Numerator/Denominator, %                                      |                                      |
|   |  |   |  | 174/996, 18%   |   | 136/909, 15%  |                                      |
| b. (Pick Outcome from dropdown list in the cell to the right )  |  | HAB Core Measures: Prescription of HIV Antiretroviral Therapy |  | Baseline: Numerator/Denominator, %                         |   | Target: Numerator/Denominator, %                                      |                                      |
|   |  |   |  | 919/1090, 84%  |   | 849/999, 85%  |                                      |
| c. (Pick Outcome from dropdown list in the cell to the right )  |  | HAB Core Measures: HIV Viral Load Suppression                 |  | Baseline: Numerator/Denominator, %                         |   | Target: Numerator/Denominator, %                                      |                                      |
|   |  |   |  | 573/1090, 53%  |   | 649/999, 65%  |                                      |
| 6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable  |  |   |  |  |   |   |                                      |
| <input checked="" type="checkbox"/> Diagnosed   |  | <input checked="" type="checkbox"/> Linked to Care            |  | <input checked="" type="checkbox"/> Retained in            |   | <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy |                                      |
|   |  |   |  |  |   | <input checked="" type="checkbox"/> Virally Suppressed                |                                      |

| <b>Ryan White Part A Implementation Plan: Service Category Table</b>  |  |  |  |   |  |  |  |
|---|--|--|--|---|--|--|--|
| <input type="checkbox"/> <b>Program Submission</b>  |  |  |  | <input checked="" type="checkbox"/> <b>Annual Progress Report</b> |  |  |  |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |   |  |  |  |
| Fiscal Year: FY2017   |  |  |  |   |  |  |  |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018                       |  |  |  |
| Service Category Name: Oral Health Services   |  |  |  | <input checked="" type="checkbox"/> Part A Core                   |  | <input type="checkbox"/> Part A Support                    |  |
|   |  |  |  | <input type="checkbox"/> MAI Core                                 |  | <input type="checkbox"/> MAI Support                       |  |
|   |  |  |  |   |  | <b>Total Service Category Funds</b>                        |  |
|   |  |  |  |   |  | <b>Allocation</b>  |  |
|   |  |  |  |   |  | <b>Expenditure</b>   |  |
| Race/Ethnicity (for MAI funded service only):   |  |  |  | <input type="checkbox"/> African American                         |  | <input type="checkbox"/> Hispanic                          |  |
|   |  |  |  | <input type="checkbox"/> Asian                                    |  | <input type="checkbox"/> Native American                   |  |
|   |  |  |  | <input type="checkbox"/> Pacific Islander                         |  | <input type="checkbox"/> Other                             |  |
|   |  |  |  |   |  | \$22,47,607.68   |  |
| Service Category Priority Number: 2   |  |  |  |   |  |  |  |
| Service Category Goal: To provide comprehensive diagnostic, preventative, and therapeutic services by licensed dental care professionals.         |  |  |  |   |  |  |  |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                 |  | <b>3. Quantity:</b>   |  | <b>4. Funds:</b>   |  |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided             |  | Number of people to be served                                     |  | Total Number of service units to be                        |  |
|   |  |  |  | Provide the approximate amount of funds to be used to             |  |  |  |
|   |  |  |  | Target  |  | Actual   |  |
|   |  |  |  | Target  |  | Actual   |  |
| a. By February 28, 2018, approximately 20% of total clients (15,712) served will have at least 1 oral health visit.                               |  | 1 unit = 1 oral health visit                       |  | 3,145   |  | 13,627   |  |
|   |  |  |  |   |  | \$22,47,607.68   |  |
|   |  |  |  |   |  |  |  |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b> |  |  |  |   |  |  |  |
| <b>a. (Pick Outcome from dropdown list in the cell to the right)</b>  |  | HHS Measure: Retention in HIV Medical Care         |  | Baseline: Numerator/Denominator, %                                |  | Target: Numerator/Denominator, %                           |  |
|   |  |  |  | 1788/2356, 76%  |  | 2492/3236, 77%   |  |
| <b>b. (Pick Outcome from dropdown list in the cell to the right)</b>  |  |  |  | Baseline: Numerator/Denominator, %                                |  | Target: Numerator/Denominator, %                           |  |
|   |  |  |  |   |  |  |  |
| <b>c. (Pick Outcome from dropdown list in the cell to the right)</b>  |  |  |  | Baseline: Numerator/Denominator, %                                |  | Target: Numerator/Denominator, %                           |  |
|   |  |  |  |   |  |  |  |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>                                 |  |  |  |   |  |  |  |
| <input type="checkbox"/> Diagnosed  |  | <input checked="" type="checkbox"/> Linked to Care |  | <input checked="" type="checkbox"/> Retained in                   |  | <input type="checkbox"/> Prescribed Antiretroviral Therapy |  |
|   |  |  |  |   |  | <input type="checkbox"/> Virally Suppressed                |  |

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|   |  |  |  |  |  |   |                                |
|---|--|--|--|--|--|---|--------------------------------|
| <input type="checkbox"/> Program Submission   |  | <input checked="" type="checkbox"/> Annual Progress Report |  |  |  |   |                                |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |  |  |   |                                |
| Fiscal Year: FY2017   |  |  |  |  |  |   |                                |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018  |  |   |                                |
| Service Category Name: Medical Nutrition Therapy  |  | <input checked="" type="checkbox"/> Part A Core            | <input type="checkbox"/> Part A Support                    | <input type="checkbox"/> MAI Core            | <input type="checkbox"/> MAI Support     | <b>Total Service Category Funds</b>   |                                |
| Race/Ethnicity (for MAI funded service only):   |  |  |  |  |  | \$1,86,851.50   |                                |
|   |  | <input type="checkbox"/> African American                  | <input type="checkbox"/> Hispanic                          | <input type="checkbox"/> Asian               | <input type="checkbox"/> Native American | <input type="checkbox"/> Pacific Islander                                   | <input type="checkbox"/> Other |
| Service Category Priority Number: 4   |  |  |  |  |  |   |                                |
| Service Category Goal: To provide nutrition education and/or counseling by a licensed/registered dietitian outside of Outpatient/Ambulatory Health Services visit and for the provision of nutritional supplements provided pursuant to a physician's recommendation and nutritional plan developed by a licensed/registered dietitian. |  |  |  |  |  |   |                                |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                         |  | <b>3. Quantity:</b>                          |  | <b>4. Funds:</b>  |                                |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  | Define the service unit to be provided             | Number of people to be served                              |  | Total Number of service units to be provided |  | Provide the approximate amount of funds to be used to provide this service. |                                |
|   |  | Target   | Actual   | Target                                       | Actual                                   | Allocation  | Expenditure                    |
| a. By February 28, 2018, approximately 1,141 will receive nutrition education and/or counseling outside of the medical visit.   | 1 unit = 1 visit                                   | 1,141  |  | 2,282  |  | \$1,60,692.29   |                                |
| b. By February 28, 2018, approximately 227 clients will receive nutritional supplements as part of nutrition therapy.   | 1 unit = 1 can or bottle supplement                | 227  |  | 16,656                                       |  | \$26,159.21   |                                |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>   |  |  |  |  |  |   |                                |
| a. (Pick Outcome from dropdown list in the cell to the right)   | HHS Measure: Retention in HIV Medical Care         | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %             |  | Actual: Numerator/Denominator, %  |                                |
|   |  | 598/832; 72%   |  | 610/849, 72%                                 |  |   |                                |
| b. (Pick Outcome from dropdown list in the cell to the right)   |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %             |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  |  |  |   |                                |
| c. (Pick Outcome from dropdown list in the cell to the right)   |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %             |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  |  |  |   |                                |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |  |  |  |  |   |                                |
| <input type="checkbox"/> Diagnosed  | <input checked="" type="checkbox"/> Linked to Care | <input checked="" type="checkbox"/> Retained in            | <input type="checkbox"/> Prescribed Antiretroviral Therapy | <input type="checkbox"/> Virally Suppressed  |  |   |                                |

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|---|--|--|--|---|---|---|--------------------------------------|
| <input type="checkbox"/> Program Submission   |  | <input checked="" type="checkbox"/> Annual Progress Report |  |   |   |   |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |   |   |   |                                      |
| Fiscal Year: FY2017   |  |  |  |   |   |   |                                      |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018                                 |   |   |                                      |
| Service Category Name: Medical Case Management  |  |  |  | <input checked="" type="checkbox"/> Part A Core                             | <input type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                                     | <input type="checkbox"/> MAI Support |
|   |  |  |  |   |   |   | <b>Total Service Category Funds</b>  |
|   |  |  |  |   |   |   | <b>Allocation</b>                    |
|   |  |  |  |   |   |   | <b>Expenditure</b>                   |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other                        |  |  |  |   |   |   | \$17,94,872.03                       |
| Service Category Priority Number: 5   |  |  |  |   |   |   |                                      |
| Service Category Goal: To provide comprehensive, community-based medical case management services that will identify and assess the needs of PLWH and increase access to primary care and support services. Includes treatment adherence.   |  |  |  |   |   |   |                                      |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                         |  | <b>3. Quantity:</b>   |   | <b>4. Funds:</b>  |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided                     |  | Number of people to be served   |   | Total Number of service units to be provided                          |                                      |
|   |  |  |  | Provide the approximate amount of funds to be used to provide this service. |   |   |                                      |
|   |  |  |  | Target  | Actual                                  | Target  | Actual                               |
|   |  |  |  | Allocation  | Expenditure                             |   |                                      |
| a. By February 28, 2018, approximately 49% of total clients (15,712) served will have received at least one session of medical case management for assistance with accessing timely and coordinated access to medically-appropriate levels of health and support services and continuity of care. |  | 1 unit = 15 minute   |  | 7,633   |   | 45,827  |                                      |
|   |  |  |  |   |   | \$17,94,872.03  |                                      |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>   |  |  |  |   |   |   |                                      |
| a. (Pick Outcome from dropdown list in the cell to the right )  |  | HHS Measure: Retention in HIV Medical Care                 |  | Baseline: Numerator/Denominator, %  |   | Target: Numerator/Denominator, %                                      |                                      |
|   |  |  |  | 3151/5566;57%   |   | 3349/5677;59%   |                                      |
| b. (Pick Outcome from dropdown list in the cell to the right )  |  | HAB Core Measures: Gap in HIV Medical Visits               |  | Baseline: Numerator/Denominator, %  |   | Target: Numerator/Denominator, %                                      |                                      |
|   |  |  |  | 1537/6009;26%   |   | 1255/6129;20%   |                                      |
| c. (Pick Outcome from dropdown list in the cell to the right )  |  |  |  | Baseline: Numerator/Denominator, %  |   | Target: Numerator/Denominator, %                                      |                                      |
|   |  |  |  |   |   |   |                                      |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |  |  |   |   |   |                                      |
| <input type="checkbox"/> Diagnosed  |  | <input checked="" type="checkbox"/> Linked to Care         |  | <input checked="" type="checkbox"/> Retained in                             |   | <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy |                                      |
|   |  |  |  |   |   | <input checked="" type="checkbox"/> Virally Suppressed                |                                      |

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| <input type="checkbox"/> Program Submission   |  |   |  | <input checked="" type="checkbox"/> Annual Progress Report |   |   |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |   |  |  |   |   |                                      |
| Fiscal Year: FY2017   |  |   |  |  |   |   |                                      |
| Budget Period: March 1, 2017-February 28, 2018  |  |   |  | Time Frame: March 1, 2017-February 28, 2018                |   |   |                                      |
| Service Category Name: Mental Health Services   |  |   |  | <input checked="" type="checkbox"/> Part A Core            | <input type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core   | <input type="checkbox"/> MAI Support |
|   |  |   |  |  |   | <b>Total Service Category Funds</b>   |                                      |
|   |  |   |  |  |   | Allocation  | Expenditure                          |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African America <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other |  |   |  |  |   | \$15,24,060.41  |                                      |
| Service Category Priority Number: 6   |  |   |  |  |   |   |                                      |
| Service Category Goal: To provide comprehensive mental health services for PLWH in the EMA.   |  |   |  |  |   |   |                                      |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>              |  | <b>3. Quantity:</b>  |   | <b>4. Funds:</b>  |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  | Define the service unit to be provided             | Number of people to be served                   |  | Total Number of service units to be provided               |   | Provide the approximate amount of funds to be used to provide this service. |                                      |
|   |  | Target  | Actual   | Target   | Actual                                  | Allocation  | Expenditure                          |
| a. By February 28, 2018, approximately 11% of total clients (15,712) served will have at least 1 individual mental health session.  | 1 unit = 1 individual counseling session           | 1,766   |  | 1,241  |   | \$13,71,654.37  |                                      |
| b. By February 28, 2018, approximately 242 clients will receive group counseling sessions.  | 1 unit = 1 group counseling session                | 242   |  | 10,096   |   | \$1,52,406.04   |                                      |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>   |  |   |  |  |   |   |                                      |
| a. (Pick Outcome from dropdown list in the cell to the right)   | HHS Measure: Retention in HIV Medical Care         | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                           |   | Actual: Numerator/Denominator, %  |                                      |
|   |  | 1132/1785; 63%                                  |  | 1157/1821 ; 64%  |   |   |                                      |
| b. (Pick Outcome from dropdown list in the cell to the right)   | HAB Core Measures: Gap in HIV Medical Visits       | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                           |   | Actual: Numerator/Denominator, %  |                                      |
|   |  | 204/1554, 13%                                   |  | 190/1584, 12%  |   |   |                                      |
| c. (Pick Outcome from dropdown list in the cell to the right)   |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                           |   | Actual: Numerator/Denominator, %  |                                      |
|   |  |   |  |  |   |   |                                      |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |   |  |  |   |   |                                      |
| <input type="checkbox"/> Diagnosed  | <input checked="" type="checkbox"/> Linked to Care | <input checked="" type="checkbox"/> Retained in | <input type="checkbox"/> Prescribed Antiretroviral Therapy | <input type="checkbox"/> Virally Suppressed                |   |   |                                      |

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|  |  |  |   |   |   |   |                                      |
|--|--|--|---|---|---|---|--------------------------------------|
| <input type="checkbox"/> Program Submission  |  | <input checked="" type="checkbox"/> Annual Progress Report |   |   |   |   |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government   |  |  |   |   |   |   |                                      |
| Fiscal Year: FY2017  |  |  |   |   |   |   |                                      |
| Budget Period: March 1, 2017-February 28, 2018   |  |  |   | Time Frame: March 1, 2017-February 28, 2018     |   |   |                                      |
| Service Category Name: Substance Abuse-Outpatient  |  |  |   | <input checked="" type="checkbox"/> Part A Core | <input type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core   | <input type="checkbox"/> MAI Support |
|  |  |  |   |   |   |   | <b>Total Service Category Funds</b>  |
|  |  |  |   |   |   |   | Allocation                           |
|  |  |  |   |   |   |   | Expenditure                          |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other |  |  |   |   |   |   | \$ 12,65,930.52                      |
| Service Category Priority Number: 7  |  |  |   |   |   |   |                                      |
| Service Category Goal: To provide comprehensive substance abuse treatment and counseling services on an outpatient basis to eligible PLWH in the EMA.  |  |  |   |   |   |   |                                      |
| <b>1. Objectives:</b>  |  | <b>2. Service Unit Definition:</b>                         |   | <b>3. Quantity:</b>                             |   | <b>4. Funds:</b>  |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above   | Define the service unit to be provided             | Number of people to be served                              |   | Total Number of service units to be provided    |   | Provide the approximate amount of funds to be used to provide this service. |                                      |
|  |  | Target   | Actual  | Target  | Actual                                  | Allocation  | Expenditure                          |
| a. By February 28, 2018, approximately 548 clients will have at least 1 individual substance abuse counseling session.   | 1 unit = 1 individual counseling session           | 548  |   | 1,985   |   | \$7,08,921.09   |                                      |
| b. By February 28, 2018, approximately 375 clients will receive group counseling sessions.   | 1 unit = 1 group counseling session                | 375  |   | 7,470   |   | \$5,57,009.43   |                                      |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>  |  |  |   |   |   |   |                                      |
| a. (Pick Outcome from dropdown list in the cell to the right)  | HAB Core Measures: Gap in HIV Medical Visits       | Baseline: Numerator/Denominator, %                         |   | Target: Numerator/Denominator, %                |   | Actual: Numerator/Denominator, %  |                                      |
|  |  | 59/469, 13%  |   | 57/478, 12%                                     |   |   |                                      |
| b. (Pick Outcome from dropdown list in the cell to the right)  |  | Baseline: Numerator/Denominator, %                         |   | Target: Numerator/Denominator, %                |   | Actual: Numerator/Denominator, %  |                                      |
|  |  |  |   |   |   |   |                                      |
| c. (Pick Outcome from dropdown list in the cell to the right)  |  | Baseline: Numerator/Denominator, %                         |   | Target: Numerator/Denominator, %                |   | Actual: Numerator/Denominator, %  |                                      |
|  |  |  |   |   |   |   |                                      |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>  |  |  |   |   |   |   |                                      |
| <input type="checkbox"/> Diagnosed   | <input checked="" type="checkbox"/> Linked to Care | <input checked="" type="checkbox"/> Retained in            | <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy | <input type="checkbox"/> Virally Suppressed     |   |   |                                      |

## Ryan White Part A Implementation Plan: Service Category Table

|   |  |  |  |  |  |  |                                      |
|---|--|--|--|--|--|--|--------------------------------------|
| <input type="checkbox"/> Program Submission   |  |  |  | <input checked="" type="checkbox"/> Annual Progress Report |  |  |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |  |  |  |                                      |
| Fiscal Year: FY2017   |  |  |  |  |  |  |                                      |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018                |  |  |                                      |
| Service Category Name: Non Medical Case Management  |  |  |  | <input type="checkbox"/> Part A Core                       | <input checked="" type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                          | <input type="checkbox"/> MAI Support |
|   |  |  |  |  |  | <b>Total Service Category Funds</b>                        |                                      |
|   |  |  |  |  |  | Allocation   | Expenditure                          |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other                  |  |  |  |  |  | \$1,61,235.72  |                                      |
| Service Category Priority Number: 9   |  |  |  |  |  |  |                                      |
| Service Category Goal: To provide comprehensive, community-based non-medical case management services that will identify and assess the needs of PLWH and increase access to primary care and support services.   |  |  |  |  |  |  |                                      |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                 |  | <b>3. Quantity:</b>  |  | <b>4. Funds:</b>   |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided             |  | Number of people to be served                              |  | Total Number of service units to be provided               |                                      |
|   |  |  |  | Target   | Actual   | Target   | Actual                               |
| a. By February 28, 2018, approximately 66% of total clients (15,712) served will have received at least one session of non-medical case management for assistance with accessing timely and coordinated access to appropriate levels of health and support services and continuity of care. |  | 1 unit = 15 min                                    |  | 8,566  |  | 20,000   |                                      |
| b. By February 28, 2018, 149 new clients will receive non-medical case management services through a Rapid Entry Clinic for the initiation of care and treatment until client is connected to long term provider.   |  | 1 unit = 15 min                                    |  | 149  |  | 331  | \$1,17,649.84                        |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>   |  |  |  |  |  |  |                                      |
| <b>a. (Pick Outcome from dropdown list in the cell to the right )</b>   |  | HAB Core Measures: Gap in HIV Medical Visits       |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |                                      |
|   |  |  |  | 1320/7365; 18%   |  | 1202/7512, 16%   |                                      |
| <b>b. (Pick Outcome from dropdown list in the cell to the right )</b>   |  | HHS Measure: Linkage to HIV Medical Care           |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |                                      |
|   |  |  |  | 546/605; 90%   |  | 567/617; 92%   |                                      |
| <b>c. (Pick Outcome from dropdown list in the cell to the right )</b>   |  |  |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |                                      |
|   |  |  |  |  |  |  |                                      |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |  |  |  |  |  |                                      |
| <input type="checkbox"/> Diagnosed  |  | <input checked="" type="checkbox"/> Linked to Care |  | <input checked="" type="checkbox"/> Retained in            |  | <input type="checkbox"/> Prescribed Antiretroviral Therapy |                                      |
|   |  |  |  |  |  | <input type="checkbox"/> Virally Suppressed                |                                      |



### Ryan White Part A Implementation Plan: Service Category Table

|   |  |  |  |   |  |  |  |   |                                |
|---|--|--|--|---|--|--|--|---|--------------------------------|
| <input type="checkbox"/> Program Submission   |  | <input checked="" type="checkbox"/> Annual Progress Report |  |   |  |  |  |   |                                |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |   |  |  |  |   |                                |
| Fiscal Year: FY2017   |  |  |  |   |  |  |  |   |                                |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018     |  |  |  |   |                                |
| Service Category Name: Referral for Health Care and Support Services  |  |  |  | <input type="checkbox"/> Part A Core            | <input checked="" type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                          | <input type="checkbox"/> MAI Support     | <b>Total Service Category Funds</b>   |                                |
|   |  |  |  |   |  |  |  |   |                                |
| Race/Ethnicity (for MAI funded service only):   |  |  |  | <input type="checkbox"/> African American       | <input type="checkbox"/> Hispanic                  | <input type="checkbox"/> Asian                             | <input type="checkbox"/> Native American | <input type="checkbox"/> Pacific Islander                                   | <input type="checkbox"/> Other |
|   |  |  |  | \$5,95,020.28                                   |  |  |  |   |                                |
| Service Category Priority Number: 10  |  |  |  |   |  |  |  |   |                                |
| Service Category Goal: To provide comprehensive referral services that will identify and assess the needs of PLWH and increase access to primary care and support services.   |  |  |  |   |  |  |  |   |                                |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                         |  | <b>3. Quantity:</b>                             |  | <b>4. Funds:</b>   |  |   |                                |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided                     |  | Number of people to be served                   |  | Total Number of service units to be provided               |  | Provide the approximate amount of funds to be used to provide this service. |                                |
|   |  |  |  | Target  | Actual   | Target   | Actual                                   | Allocation  | Expenditure                    |
| a. By February 28, 2018, approximately 112 clients will receive at least one session of direct referral assistance to needed core or support services through face-to-face, telephone contact, or other encounters including the provision of benefits enrollment and financial counseling. |  | 1 unit = 15 min  |  | 5,432   |  | 8,148  |  | \$4,16,946.96   |                                |
| b. By February 28, 2018, 481 clients will have improved access and retention in care through the provision of Insurance Navigation  |  | 1 unit = 15 min  |  | 481   |  | 603  |  | \$1,52,174.01   |                                |
| c. By February 28, 2018, 40 new clients will receive care through a Rapid Entry Clinic for the initiation of care and treatment until client is connected to long term provider.  |  | 1 unit = 1 medical visit                                   |  | 40  |  | 73   |  | \$25,899.30   |                                |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>   |  |  |  |   |  |  |  |   |                                |
| a. (Pick Outcome from dropdown list in the cell to the right )  |  | HHS Measure: Linkage to HIV Medical Care                   |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  | 136/162.84%                                     |  | 278/324.86%  |  |   |                                |
| b. (Pick Outcome from dropdown list in the cell to the right )  |  |  |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  |   |  |  |  |   |                                |
| c. (Pick Outcome from dropdown list in the cell to the right )  |  |  |  | Baseline: Numerator/Denominator, %              |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  |   |  |  |  |   |                                |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |  |  |   |  |  |  |   |                                |
| <input type="checkbox"/> Diagnosed  |  | <input checked="" type="checkbox"/> Linked to Care         |  | <input checked="" type="checkbox"/> Retained in |  | <input type="checkbox"/> Prescribed Antiretroviral Therapy |  | <input type="checkbox"/> Virally Suppressed                                 |                                |

## Ryan White Part A Implementation Plan: Service Category Table

|   |  |  |  |  |                                      |   |             |
|---|--|--|--|--|--------------------------------------|---|-------------|
| <input type="checkbox"/> Program Submission   |  | <input checked="" type="checkbox"/> Annual Progress Report |  |  |                                      |   |             |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |  |                                      |   |             |
| Fiscal Year: FY2017   |  |  |  |  |                                      |   |             |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018                |                                      |   |             |
| Service Category Name: Food Bank/Home Delivered Meals   |  | <input type="checkbox"/> Part A Core                       | <input checked="" type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                          | <input type="checkbox"/> MAI Support | <b>Total Service Category Funds</b>   |             |
|   |  |  |  |  |                                      | Allocation  | Expenditure |
| Race/Ethnicity (for MAI funded service only):   |  |  |  |  |                                      | \$10,02,205.51  |             |
| Race: <input type="checkbox"/> African American   |  | Hispanic <input type="checkbox"/>                          |  | Asian <input type="checkbox"/>                             |                                      | Native American <input type="checkbox"/>                                    |             |
| Pacific Islander <input type="checkbox"/>   |  | Other <input type="checkbox"/>                             |  |  |                                      |   |             |
| Service Category Priority Number: 12  |  |  |  |  |                                      |   |             |
| Service Category Goal: To provide support services which enhance access to and retention in care and improve clients' quality of life.  |  |  |  |  |                                      |   |             |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                         |  | <b>3. Quantity:</b>  |                                      | <b>4. Funds:</b>  |             |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  | Define the service unit to be provided       | Number of people to be served                              |  | Total Number of service units to be provided               |                                      | Provide the approximate amount of funds to be used to provide this service. |             |
|   |  | Target   | Actual   | Target   | Actual                               | Allocation  | Expenditure |
| a. By February 28, 2018, approximately 415 clients will receive home delivered meals to improve the nutritional status of PLWH; to support adherence to treatment regimens; and to reduce medication contraindications. | 1 unit = 1 Meal                              | 415  |  | 1,23,994   |                                      | \$8,01,764.41   |             |
| b. By February 28, 2018, approximately 909 clients will receive food vouchers and pantry services to improve the nutritional status of PLWH; to support adherence to treatment regimens.                                | 1 unit = 1 Voucher                           | 909  |  | 67,857   |                                      | \$2,00,441.10   |             |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>   |  |  |  |  |                                      |   |             |
| a. (Pick Outcome from dropdown list in the cell to the right )  | HAB Core Measures: Gap in HIV Medical Visits | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |                                      | Actual: Numerator/Denominator, %  |             |
|   |  | 18/275, 7%   |  | 14/289, 5%   |                                      |   |             |
| b. (Pick Outcome from dropdown list in the cell to the right )  |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |                                      | Actual: Numerator/Denominator, %  |             |
|   |  |  |  |  |                                      |   |             |
| c. (Pick Outcome from dropdown list in the cell to the right )  |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |                                      | Actual: Numerator/Denominator, %  |             |
|   |  |  |  |  |                                      |   |             |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |  |  |  |                                      |   |             |
| <input type="checkbox"/> Diagnosed  | <input type="checkbox"/> Linked to Care      | <input checked="" type="checkbox"/> Retained in            |  | <input type="checkbox"/> Prescribed Antiretroviral Therapy |                                      | <input type="checkbox"/> Virally Suppressed                                 |             |

## Ryan White Part A Implementation Plan: Service Category Table

|   |  |  |  |  |  |  |  |   |                                |
|---|--|--|--|--|--|--|--|---|--------------------------------|
| <input type="checkbox"/> Program Submission   |  |  |  | <input checked="" type="checkbox"/> Annual Progress Report |  |  |  |   |                                |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |  |  |  |  |   |                                |
| Fiscal Year: FY2017   |  |  |  |  |  |  |  |   |                                |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018                |  |  |  |   |                                |
| Service Category Name: Psychosocial Support Services  |  |  |  | <input type="checkbox"/> Part A Core                       | <input checked="" type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                          | <input type="checkbox"/> MAI Support     | <b>Total Service Category Funds</b>   |                                |
|   |  |  |  |  |  |  |  | Allocation  | Expenditure                    |
| Race/Ethnicity (for MAI funded service only):   |  |  |  | <input type="checkbox"/> African American                  | <input type="checkbox"/> Hispanic                  | <input type="checkbox"/> Asian                             | <input type="checkbox"/> Native American | <input type="checkbox"/> Pacific Islander                                   | <input type="checkbox"/> Other |
|   |  |  |  |  |  |  |  | \$2,04,622.93   |                                |
| Service Category Priority Number: 14  |  |  |  |  |  |  |  |   |                                |
| Service Category Goal: To provide comprehensive substance abuse treatment and counseling services on an outpatient basis to eligible PLWH in the EMA.     |  |  |  |  |  |  |  |   |                                |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>                 |  | <b>3. Quantity:</b>  |  |  |  | <b>4. Funds:</b>  |                                |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided             |  | Number of people to be served                              |  | Total Number of service units to be provided               |  | Provide the approximate amount of funds to be used to provide this service. |                                |
|   |  |  |  | Target   | Actual   | Target   | Actual                                   | Allocation  | Expenditure                    |
| a. By February 28, 2018, approximately 3,340 clients in need of mental/emotional support will receive an individual and/or group peer counseling session. |  | 1 unit = 1 individual or group encounter           |  | 3,340  |  | 9,333  |  | \$1,18,429.50   |                                |
| b. By February 28, 2018, approximately 436 clients will improve access and retention in care through the provision of Patient Navigation services.        |  | 1 unit = 1 individual encounter                    |  | 436  |  | 568  |  | \$86,193.43   |                                |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>         |  |  |  |  |  |  |  |   |                                |
| a. (Pick Outcome from dropdown list in the cell to the right )  |  | HHS Measure: Retention in HIV Medical Care         |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  | 446/816,55%  |  | 475/832,57%  |  |   |                                |
| b. (Pick Outcome from dropdown list in the cell to the right )  |  |  |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  |  |  |  |  |   |                                |
| c. (Pick Outcome from dropdown list in the cell to the right )  |  |  |  | Baseline: Numerator/Denominator, %                         |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %  |                                |
|   |  |  |  |  |  |  |  |   |                                |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>   |  |  |  |  |  |  |  |   |                                |
| <input type="checkbox"/> Diagnosed  |  | <input checked="" type="checkbox"/> Linked to Care |  | <input checked="" type="checkbox"/> Retained in            |  | <input type="checkbox"/> Prescribed Antiretroviral Therapy |  | <input type="checkbox"/> Virally Suppressed                                 |                                |

## Ryan White Part A Implementation Plan: Service Category Table

|  |  |  |  |   |                                      |   |             |   |  |
|--|--|--|--|---|--------------------------------------|---|-------------|---|--|
| <input type="checkbox"/> Program Submission  |  | <input checked="" type="checkbox"/> Annual Progress Report |  |   |                                      |   |             |   |  |
| Recipient Name: Atlanta EMA-Fulton County Government   |  |  |  |   |                                      |   |             |   |  |
| Fiscal Year: FY2017  |  |  |  |   |                                      |   |             |   |  |
| Budget Period: March 1, 2017-February 28, 2018   |  |  |  | Time Frame: March 1, 2017-February 28, 2018                                 |                                      |   |             |   |  |
| Service Category Name: Medical Transportation Services   |  | <input type="checkbox"/> Part A Core                       | <input checked="" type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core   | <input type="checkbox"/> MAI Support | <b>Total Service Category Funds</b>                                   |             |   |  |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other |  |  |  |   |                                      | Allocation  | Expenditure |   |  |
|  |  |  |  |   |                                      | \$1,14,023.11   |             |   |  |
| Service Category Priority Number: 15   |  |  |  |   |                                      |   |             |   |  |
| Service Category Goal: To provide support services which enhance access to and retention in care and improve clients' quality of life.   |  |  |  |   |                                      |   |             |   |  |
| <b>1. Objectives:</b>  |  | <b>2. Service Unit Definition:</b>                         |  | <b>3. Quantity:</b>   |                                      | <b>4. Funds:</b>  |             |   |  |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above   |  | Define the service unit to be provided                     |  | Number of people to be served   |                                      | Total Number of service units to be provided                          |             |   |  |
|  |  |  |  | Provide the approximate amount of funds to be used to provide this service. |                                      |   |             |   |  |
|  |  |  |  | Target  | Actual                               | Target  | Actual      |   |  |
|  |  |  |  | Allocation  | Expenditure                          |   |             |   |  |
| a. By February 28, 2018, approximately 2,683 clients will receive transportation assistance to medical appointments and support service appointments.  |  | 1 unit = 1 One-Way Trip or voucher                         |  | 2,683   |                                      | 20,460  |             |   |  |
|  |  |  |  |   |                                      | \$98,700.11   |             |   |  |
| b. By February 28, 2018, approximately 40 clients will receive transportation assistance through a Rapid Entry Clinic for the initiation of care and treatment until client is connected to long term provider.  |  | 1 unit = 1 individual encounter                            |  | 35  |                                      | 153   |             |   |  |
|  |  |  |  |   |                                      | \$15,323.00   |             |   |  |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>  |  |  |  |   |                                      |   |             |   |  |
| a. (Pick Outcome from dropdown list in the cell to the right )   |  | HAB Core Measures: Gap in HIV Medical Visits               |  | Baseline: Numerator/Denominator, %  |                                      | Target: Numerator/Denominator, %                                      |             | Actual: Numerator/Denominator, %            |  |
|  |  |  |  | 10/200,5%   |                                      | 12/300,4%   |             |   |  |
| b. (Pick Outcome from dropdown list in the cell to the right )   |  | HHS Measure: Retention in HIV Medical Care                 |  | Baseline: Numerator/Denominator, %  |                                      | Target: Numerator/Denominator, %                                      |             | Actual: Numerator/Denominator, %            |  |
|  |  |  |  | 1084/1866; 58%  |                                      | 1141/1903; 60%  |             |   |  |
| c. (Pick Outcome from dropdown list in the cell to the right )   |  |  |  | Baseline: Numerator/Denominator, %  |                                      | Target: Numerator/Denominator, %                                      |             | Actual: Numerator/Denominator, %            |  |
|  |  |  |  |   |                                      |   |             |   |  |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>  |  |  |  |   |                                      |   |             |   |  |
| <input type="checkbox"/> Diagnosed   |  | <input checked="" type="checkbox"/> Linked to Care         |  | <input checked="" type="checkbox"/> Retained in                             |                                      | <input checked="" type="checkbox"/> Prescribed Antiretroviral Therapy |             | <input type="checkbox"/> Virally Suppressed |  |

| <b>Ryan White Part A Implementation Plan: Service Category Table</b>   |  |   |  |   |   |   |                                      |
|--|--|---|--|---|---|---|--------------------------------------|
| <input type="checkbox"/> <b>Program Submission</b>   |  |   |  | <input checked="" type="checkbox"/> <b>Annual Progress Report</b> |   |   |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government   |  |   |  |   |   |   |                                      |
| Fiscal Year: FY2017  |  |   |  |   |   |   |                                      |
| Budget Period: March 1, 2017-February 28, 2018   |  |   |  | Time Frame: March 1, 2017-February 28, 2018                       |   |   |                                      |
| Service Category Name: Other Professional Services   |  |   |  | <input checked="" type="checkbox"/> Part A Core                   | <input type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                     | <input type="checkbox"/> MAI Support |
|  |  |   |  |   |   | <b>Total Service Category Funds</b>                   |                                      |
|  |  |   |  |   |   | Allocation  | Expenditure                          |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other |  |   |  |   |   | \$1,06,133.49   |                                      |
| Service Category Priority Number: 16   |  |   |  |   |   |   |                                      |
| Service Category Goal: To provide comprehensive diagnostic, preventative, and therapeutic services by licensed dental care professionals.  |  |   |  |   |   |   |                                      |
| <b>1. Objectives:</b>  |  | <b>2. Service Unit Definition:</b>              |  | <b>3. Quantity:</b>   |   | <b>4. Funds:</b>                                      |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above   | Define the service unit to be provided     | Number of people to be served                   |  | Total Number of service units to be                               |   | Provide the approximate amount of funds to be used to |                                      |
|  |  | Target  | Actual   | Target  | Actual                                  | Allocation  | Expenditure                          |
| a. By February 28, 2018, approximately 130 clients will receive legal services.  | 1 unit = 15 min                            | 130   |  | 3,500   |   | \$1,06,133.49   |                                      |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>  |  |   |  |   |   |   |                                      |
| a. (Pick Outcome from dropdown list in the cell to the right)  | HHS Measure: Retention in HIV Medical Care |   |  | Baseline: Numerator/Denominator, %                                | Target: Numerator/Denominator, %        | Actual: Numerator/Denominator, %                      |                                      |
|  |  |   |  | 46/77, 60%  | 50/82, 62%                              |   |                                      |
| b. (Pick Outcome from dropdown list in the cell to the right)  |  |   |  | Baseline: Numerator/Denominator, %                                | Target: Numerator/Denominator, %        | Actual: Numerator/Denominator, %                      |                                      |
|  |  |   |  |   |   |   |                                      |
| c. (Pick Outcome from dropdown list in the cell to the right)  |  |   |  | Baseline: Numerator/Denominator, %                                | Target: Numerator/Denominator, %        | Actual: Numerator/Denominator, %                      |                                      |
|  |  |   |  |   |   |   |                                      |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>  |  |   |  |   |   |   |                                      |
| <input type="checkbox"/> Diagnosed   | <input type="checkbox"/> Linked to Care    | <input checked="" type="checkbox"/> Retained in | <input type="checkbox"/> Prescribed Antiretroviral Therapy | <input type="checkbox"/> Virally Suppressed                       |   |   |                                      |

| <b>Ryan White Part A Implementation Plan: Service Category Table</b>   |  |  |  |   |   |   |                                      |
|--|--|--|--|---|---|---|--------------------------------------|
| <input type="checkbox"/> <b>Program Submission</b>   |  |  |  | <input checked="" type="checkbox"/> <b>Annual Progress Report</b> |   |   |                                      |
| Recipient Name: Atlanta EMA-Fulton County Government   |  |  |  |   |   |   |                                      |
| Fiscal Year: FY2017  |  |  |  |   |   |   |                                      |
| Budget Period: March 1, 2017-February 28, 2018   |  |  |  | Time Frame: March 1, 2017-February 28, 2018                       |   |   |                                      |
| Service Category Name: Linguistic Services   |  |  |  | <input checked="" type="checkbox"/> Part A Core                   | <input type="checkbox"/> Part A Support | <input type="checkbox"/> MAI Core                     | <input type="checkbox"/> MAI Support |
|  |  |  |  |   |   | <b>Total Service Category Funds</b>                   |                                      |
|  |  |  |  |   |   | Allocation  | Expenditure                          |
| Race/Ethnicity (for MAI funded service only): <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other |  |  |  |   |   | \$79,103.35   |                                      |
| Service Category Priority Number: 17   |  |  |  |   |   |   |                                      |
| Service Category Goal: TTo provide support services which enhance access to and retention in care and improve clients' quality of life.  |  |  |  |   |   |   |                                      |
| <b>1. Objectives:</b>  |  | <b>2. Service Unit Definition:</b>                 |  | <b>3. Quantity:</b>   |   | <b>4. Funds:</b>                                      |                                      |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above   | Define the service unit to be provided     | Number of people to be served                      |  | Total Number of service units to be                               |   | Provide the approximate amount of funds to be used to |                                      |
|  |  | Target   | Actual   | Target  | Actual                                  | Allocation  | Expenditure                          |
| a. By February 28, 2018, approximately 334 clients will receive linguistic services.   | 1 unit = 1 session                         | 334  |  | 2,094   |   | \$79,103.35   |                                      |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b>  |  |  |  |   |   |   |                                      |
| a. (Pick Outcome from dropdown list in the cell to the right)  | HHS Measure: Retention in HIV Medical Care | Baseline: Numerator/Denominator, %<br>256/305; 84% |  | Target: Numerator/Denominator, %<br>267/311; 86%                  |   | Actual: Numerator/Denominator, %                      |                                      |
| b. (Pick Outcome from dropdown list in the cell to the right)  |  | Baseline: Numerator/Denominator, %                 |  | Target: Numerator/Denominator, %                                  |   | Actual: Numerator/Denominator, %                      |                                      |
| c. (Pick Outcome from dropdown list in the cell to the right)  |  | Baseline: Numerator/Denominator, %                 |  | Target: Numerator/Denominator, %                                  |   | Actual: Numerator/Denominator, %                      |                                      |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>  |  |  |  |   |   |   |                                      |
| <input type="checkbox"/> Diagnosed   | <input type="checkbox"/> Linked to Care    | <input checked="" type="checkbox"/> Retained in    | <input type="checkbox"/> Prescribed Antiretroviral Therapy | <input type="checkbox"/> Virally Suppressed                       |   |   |                                      |

| <b>Ryan White Part A Implementation Plan: Service Category Table</b>  |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
|---|--|--|--|---|--|--|--|---|--|---|--|---|--|--------------------------------|--|-------------|--|
| <input type="checkbox"/> <b>Program Submission</b>  |  |  |  | <input checked="" type="checkbox"/> <b>Annual Progress Report</b> |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| Recipient Name: Atlanta EMA-Fulton County Government  |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| Fiscal Year: FY2017   |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| Budget Period: March 1, 2017-February 28, 2018  |  |  |  | Time Frame: March 1, 2017-February 28, 2018                       |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| Service Category Name: Childcare  |  |  |  | <input type="checkbox"/> Part A Core                              |  | <input checked="" type="checkbox"/> Part A Support         |  | <input type="checkbox"/> MAI Core           |  | <input type="checkbox"/> MAI Support                  |  | <b>Total Service Category Funds</b>       |  |                                |  |             |  |
|   |  |  |  |   |  |  |  |   |  | Allocation  |  |   |  | Expenditure                    |  |             |  |
| Race/Ethnicity (for MAI funded service only):   |  |  |  | <input type="checkbox"/> African American                         |  | <input type="checkbox"/> Hispanic                          |  | <input type="checkbox"/> Asian              |  | <input type="checkbox"/> Native American              |  | <input type="checkbox"/> Pacific Islander |  | <input type="checkbox"/> Other |  | \$31,281.60 |  |
| Service Category Priority Number: 18  |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| Service Category Goal: To provide support services which enhance access to and retention in care and improve clients' quality of life.            |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| <b>1. Objectives:</b>   |  | <b>2. Service Unit Definition:</b>         |  | <b>3. Quantity:</b>   |  |  |  | <b>4. Funds:</b>                            |  |   |  |   |  |                                |  |             |  |
| List quantifiable time-limited (i.e., SMART) objectives related to the service priorities listed above  |  | Define the service unit to be provided     |  | Number of people to be served                                     |  | Total Number of service units to be                        |  |   |  | Provide the approximate amount of funds to be used to |  |   |  |                                |  |             |  |
|   |  |  |  | Target  |  | Actual   |  | Target                                      |  | Actual  |  | Allocation                                |  | Expenditure                    |  |             |  |
| a. By February 28, 2018, approximately 101 clients will receive child care services   |  | 1 unit = 1 session                         |  | 101   |  | 182  |  |   |  | \$31,281.60   |  |   |  |                                |  |             |  |
| <b>5. Outcome: HHS/ HAB Performance Measure related to the Objectives above in this service category: (Use an Outcome from the list included)</b> |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| <b>a. (Pick Outcome from dropdown list in the cell to the right)</b>  |  | HHS Measure: Retention in HIV Medical Care |  | Baseline: Numerator/Denominator, %                                |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %            |  |   |  |   |  |                                |  |             |  |
|   |  |  |  | 56/79,71%   |  | 60/82,73%  |  |   |  |   |  |   |  |                                |  |             |  |
| <b>b. (Pick Outcome from dropdown list in the cell to the right)</b>  |  |  |  | Baseline: Numerator/Denominator, %                                |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %            |  |   |  |   |  |                                |  |             |  |
|   |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| <b>c. (Pick Outcome from dropdown list in the cell to the right)</b>  |  |  |  | Baseline: Numerator/Denominator, %                                |  | Target: Numerator/Denominator, %                           |  | Actual: Numerator/Denominator, %            |  |   |  |   |  |                                |  |             |  |
|   |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| <b>6. Stage of the HIV Care Continuum related to this service category: More than one Stage may be applicable</b>                                 |  |  |  |   |  |  |  |   |  |   |  |   |  |                                |  |             |  |
| <input type="checkbox"/> Diagnosed  |  | <input type="checkbox"/> Linked to Care    |  | <input checked="" type="checkbox"/> Retained in                   |  | <input type="checkbox"/> Prescribed Antiretroviral Therapy |  | <input type="checkbox"/> Virally Suppressed |  |   |  |   |  |                                |  |             |  |

### Ryan White Part A Implementation Plan: HIV Care Continuum Table

| Recipient Name:   |  | Fiscal Year:   | Time Frame:   |
|---|--|--|---|
| Stages of the HIV Care Continuum  | Goal   | Outcome  | Service Category (One or more may apply)  |
| I. Diagnosed  | Increase the percentage who are aware of their HIV status  | HIV Positivity* <span style="float: right;">Late Diagnosis*</span>   | Outpatient Ambulatory Health Services (OAHS), OAHS-Minority AIDS Initiative (MAI), and Medical Case Management,   |
|   |  | <b>Baseline:</b> %, Numerator/Denominator <span style="float: right;"><b>Target:</b> %, Numerator/Denominator <b>Actual:</b> %, Numerator/Denominator</span> |   |
|   |  | Part A HIV/AIDS Prevalence: 15406/15623, 98% <span style="float: right;">Part A HIV/AIDS Prevalence: 15493/15712, 98%</span>                                 |   |
| II. Linked to Care  | Increase the percentage of clients who attend a routine medical care visit within 3 months of HIV diagnosis.               | Linkage to HIV Medical Care*   | OAHS, OAHS-MAI, Oral Health, Medical Nutrition Therapy, Medical Case Management, Mental Health, Substance Abuse-Outpatient, Non-medical Case Management, Referral for Health Care and Support Services, Psychosocial Support, and Medical Transportation  |
|   |  | <b>Baseline:</b> %, Numerator/Denominator <span style="float: right;"><b>Target:</b> %, Numerator/Denominator <b>Actual:</b> %, Numerator/Denominator</span> |   |
|   |  | Part A HIV/AIDS Incidence: 552/726, 76% <span style="float: right;">Part A HIV/AIDS Incidence: 592/741, 80%</span>   |   |
| III. Retained in Care   | Increase the percentage of clients retained in medical care  | Retention in HIV Medical Care* <span style="float: right;">HIV Medical Visit Frequency**</span>  | OAHS, OAHS-MAI, Medical Nutrition Therapy, Medical Case Management, Mental Health, Substance Abuse-Outpatient, Non-medical Case Management, Referral for Health Care and Support Services, Food-Bank/Home Delivered Meals, Psychosocial Support, Medical Transportation, Other Professional Services, Linguistic, and Childcare |
|   |  | <b>Baseline:</b> %, Numerator/Denominator <span style="float: right;"><b>Target:</b> %, Numerator/Denominator <b>Actual:</b> %, Numerator/Denominator</span> |   |
|   |  | 6612/10553, 63% <span style="float: right;">6889/10764, 64%</span>   |   |
| IV. Prescribed ART  | Increase the percentage of clients with access to prescribed HIV/AIDS medications consistent with PHS treatment guidelines | Antiretroviral Therapy (ART) Among Persons in HIV Medical Care* <span style="float: right;">Prescription of HIV Antiretroviral Therapy **</span>             | OAHS, OAHS-MAI, Medical Case Management, Substance Abuse-Outpatient, and Medical Transportation   |
|   |  | <b>Baseline:</b> %, Numerator/Denominator <span style="float: right;"><b>Target:</b> %, Numerator/Denominator <b>Actual:</b> %, Numerator/Denominator</span> |   |
|   |  | 11897/13490, 88% <span style="float: right;">12,212/13,721, 89%</span>   |   |
| V. Virologically Suppressed   | Increase the number of clients with a viral load of <200 copies/mL at last test in the 12-month measurement period         | Viral Load Suppression Among Persons in HIV Medical Care* <span style="float: right;">HIV Viral Load Suppression**</span>                                    | OAHS, OAHS-MAI, and Medical Case Management   |
|   |  | <b>Baseline:</b> %, Numerator/Denominator <span style="float: right;"><b>Target:</b> %, Numerator/Denominator <b>Actual:</b> %, Numerator/Denominator</span> |   |
|   |  | 10274/13490, 76% <span style="float: right;">10,565/13721, 77%</span>  |   |
| * HHS Measures can be found at <a href="http://www.aids.gov/pdf/hhs-common-hiv-indicators.pdf">http://www.aids.gov/pdf/hhs-common-hiv-indicators.pdf</a>                        |  |  |   |
| ** HAB Core performance measures can be found at: <a href="http://hab.hrsa.gov/deliverhivaidscore/coremeasures.pdf">http://hab.hrsa.gov/deliverhivaidscore/coremeasures.pdf</a> |  |  |   |



## **HAB Outcome Measures**

HAB Core Measures: HIV Viral Load Suppression

HAB Core Measures: Prescription of HIV Antiretroviral Therapy

HAB Core Measures: HIV Medical Visit Frequency

HAB Core Measures: Gap in HIV Medical Visits

HAB Core Measures: Pneumocystis jiroveci Pneumonia (PCP) Prophylaxis

HHS Measure: HIV Positivity

HHS Measure: Retention in HIV Medical Care

HHS Measure: Late HIV Diagnosis

HHS Measure: Viral Load Suppression Among Persons in HIV Medical Care

HHS Measure: Housing Status

HHS Measure: Antiretroviral Therapy (ART) Among Persons in HIV Medical Care

HHS Measure: Linkage to HIV Medical Care

HAB ADAP Measures: ADAP: Application Determination

HAB ADAP Measures: ADAP: Eligibility Recertification

HAB ADAP Measures: ADAP: Formulary

HAB ADAP Measures: ADAP: Inappropriate Antiretroviral Regimen Components Resolved by ADAP

HAB Oral Care Measures: Oral Health Services: Dental and Medical History

HAB Oral Care Measures: Oral Health Services: Dental Treatment Plan

HAB Oral Care Measures: Oral Health Services: Oral Health Education

HAB Oral Care Measures: Oral Health Services: Periodontal Screening or Examination

HAB Oral Care Measures: Oral Health Services: Phase 1 Treatment Plan Completion

Modified HAB ADAP measures (i.e. clients enrolled in the LPAP)

HAB/ HHS Linked to Care Measure

HAB Systems-Level Measures: HIV Positivity

HAB Systems-Level Measures: Housing Status

HAB Systems-Level Measures: Linkage to HIV Medical Care

HAB Systems-Level Measures: Late HIV Diagnosis

HAB MCM Measures

HAB MCM Care Plan Measure: Medical Case Management: Care Plan

HAB MCM Care Plan Measure: Gap in HIV medical visits

HAB MCM Care Plan Measure: HIV Medical Visit Frequency

HAB MCM Measure: Medical Case Management: Care Plan

HAB MCM Measure: Gap in HIV medical visits

HAB MCM Measure: HIV Medical Visit Frequency

HHS Housing Measure

HAB Systems-Level Housing Measure

HAB Systems-Level Late Diagnosis Measure

HAB Systems- Level HIV test results

HHS Linkage to HIV Medical Care