



ASSESSMENT OF ADMINISTRATIVE MECHANISM REPORT

Part A Grant Year: March 1, 2017 – February 28, 2018

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August 2018

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Legislative Background

The Ryan White C.A.R.E. Act of 1990 was enacted to provide emergency financial assistance to localities impacted heavily by the Human Immunodeficiency Virus (HIV) epidemic. The federal government then made financial assistance managed by Health Resources and Services Administration (HRSA) available to states, and other public and private nonprofit entities. Communities that reported disproportionately high numbers of HIV cases were eligible for federal funds to provide a continuum of health care services for HIV impacted individuals that were not otherwise able to afford the care. There was a stipulation in the Act that required all grantees to establish a planning council to prioritize and allocate the Part A funds into the community. The C.A.R.E Act was later revised to the Ryan White Treatment Extension Act (TEA) of 2009.

Austin Transitional Grant Area (TGA)

The Austin Transitional Grant Area (TGA) receives approximately \$4.5 million Ryan White Part A funds (HIV Emergency Relief Funds), which cover HIV services in the following 5 counties: Bastrop, Caldwell, Hays, Travis and Williamson. There are over 6,000 people living with HIV/AIDS (PLWHA) in this area at the end of 2017.

Purpose of the Evaluation

The Ryan White TEA Act requires that planning councils assess the efficiency of the grantee's administrative processes, which involves how rapidly funds are allocated in their jurisdiction. The HIV Planning Council should not be involved in how HRAU monitors the Part A funded providers, nor should the names or situations of individual providers be included in the assessment. This is the only situation in which the planning council considers issues related to procurement and contract management, which are the grantee's (Austin Public Health HIV Resources Administration Unit (HRAU) responsibility. The purpose is to assure that funds are contracted quickly and through an open process, and that providers are paid in a timely manner. The assessments are based on time-framed observations of procurement, expenditure, and reimbursement processes.

Planning efforts and resource allocation decisions must be strategic and responsive to the unmet needs of persons living with HIV/AIDS (PLWHA). Hence, to ensure funds are effectively managed, the Ryan White TEA mandates that Planning Councils assess the efficiency of the Administrative Mechanism. If the council finds that the existing mechanism is not working effectively, it is responsible for making formal recommendations for improvement, and the grantee is responsible for responding in writing, indicating how it will address these recommendations.

Goal of the Evaluation

The goal of the Assessment for FY2016-2017 is to evaluate the administrative mechanism and effectiveness of services then consider how they have improved over the last 4 years.

Methods & Survey Outline:

This evaluation report covers the fiscal year 2017 (FY17). This period covers March 1, 2017 – February 28, 2018. The Office of Support Staff worked with the HIV Planning Council's Allocation Committee to review, modify and finalize the survey tool, methodology and timeline at the March 20th, 2018 meeting. Please see **Attachment 1 for timeline summary**. The survey questions pertain to the Ryan White Part A Grant Cycle of March 1, 2017 through February 28, 2018. The questions in the survey were organized into five (5) categories:

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Grant Award/Contracting	Funding & Re-allocations	Site visits/monitoring	Technical Assistance	Billing
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For most questions, respondents were given the option to choose one of two answers: yes and no, and for some they were prompted to provide a qualitative comment to explain. To allow the providers anonymity, the survey was administered online using Survey Monkey. The Office of Support sent the survey to the directors/managers of all seven service providers funded in FY17. The email included the link to the online survey, a memo on how to complete the survey, and how it would be used. Managers/directors were allowed to delegate the completion of the survey to the most knowledgeable staff person. The survey respondents needed to meet the following requirements: the individuals must have, as one of their primary responsibilities, some level of interaction with the Administrative Agent and any of its staff members, should be employed with the agency for which they are responding at least two years, preferably at the executive level.

Data Collection:

The links to the surveys were emailed out to all relevant parties on June 28, 2018 by Laura Still, HIV Planning Council Planner. The deadline to finish the survey was July 12, 2018. Follow-up and reminder emails were sent weekly. The Office of Support used the finalized report Survey Monkey produced in the making of this report. Note: The providers' responses are reported anonymously in this final report.

Response Rates:

There were 7 funded service providers for FY17, all of which were invited to take the survey. All 7 providers responded (100% response rate).

Survey	Last Year	This Year	Change in % Response Rate
Funded Providers	100% (7/7)	100% (7/7)	0%

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Summary of findings:

Survey respondents from FY17 were mostly Directors or Executives with in-between 2-5 years of employment at the agency for which they are responding on behalf of.

In the Grant Awarding and Contracting section, all respondents indicated it took four or less weeks to be notified of the grant award amount from the Administrative Agency (HRAU) after grant award was received from HRSA. A majority of the respondents indicated that adequate time was provided to prepare budget (57%) and were able to fully execute a contract within two months (57%). Comments indicated that partial awards make this process complicated but also policies and procedures draw out the process.

In the Funding & Re-allocation section, almost all respondents indicated that they communicated regularly with HRAU to ensure timely spending of funds (86%), and a majority indicated there is simple process to request a reallocation (57%). Most respondents somewhat agreed or agreed the process for re-allocation of funds was efficient (71%). Just a little under half of respondents indicated that they requested a re-allocation during the 4th quarter of the grant cycle (43%). Respondent comments related to the reallocation process indicate the process would improve if HRAU was able to allocate funds immediately and that additional barriers are created through constant updates to forms.

In the Site Visit/Monitoring section of the survey, all respondents indicated they received a fiscal visit, and one resulted in findings. All respondents reported receiving an annual desktop review and ARIES data review performed by HRAU and did receive a written report within 30 days of the visit and were allowed at least 30 days to respond.

In the Technical Assistance section, a variety of technical assistance subjects were identified both through the survey and through comments. A little less than half of the respondents indicated no topics/issues throughout the year could have been addressed through technical assistance or training (43%). There were three agencies that reported they requested technical assistance in FY17, but only one reported training was delivered. None of the respondents agreed that the technical assistance helped their agency in efficiently carrying out their mandates. Through respondent's comments, it was identified that training was not relevant to mandates or not relevant to agency's purpose.

In the Billing section of the survey, a little over half of the respondents indicated it took 15 days or less to receive reimbursement after bill was submitted (57%). The remaining respondents indicated that reimbursement arrived within 16-30 days. All providers utilize direct deposit as a method to receiving payments, and therefore it is not a barrier.

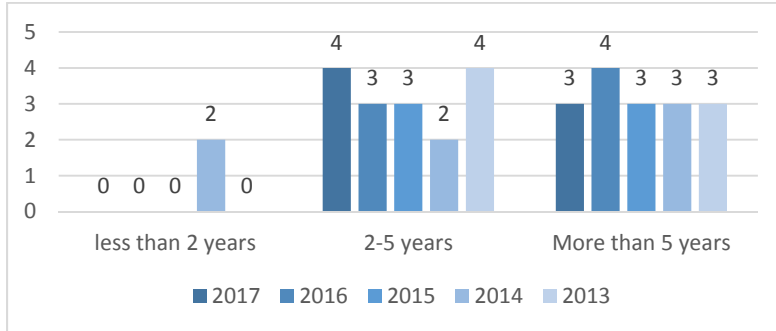
In the comments section, it was requested that HRAU advocate on behalf of the agency and a request was made to be included in discussions of how to better deliver services. Another respondent identified a misalignment between HRSA's expectations and how they think the administrative mechanism should operate.

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Survey Responses

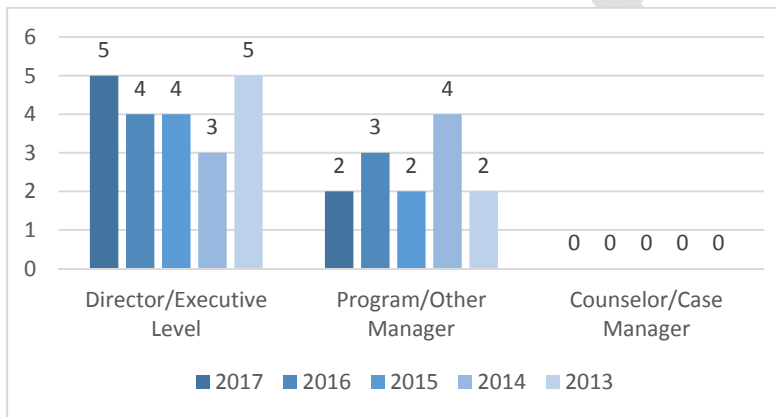
GRANT AWARD/CONTRACTING

1. How long have you been employed with the agency for which you're responding to this survey?



FY 2017	
Survey Option	Responses
2-5 years	4
More than 5 years	3

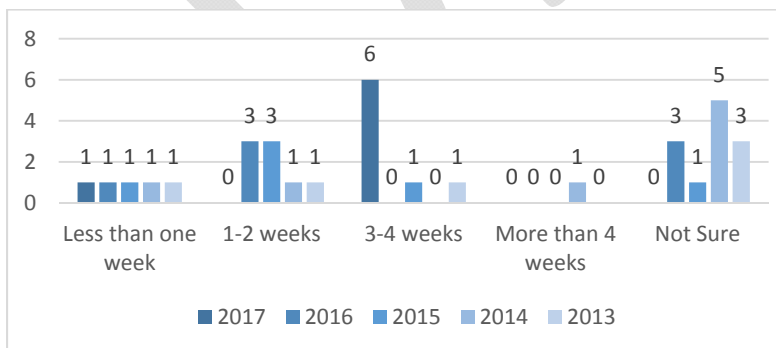
2. What is your official role/position with the agency?



FY 2017	
Survey Option	Responses
Director/Executive Level	5
Program/ Other Manager	2
Counselor/Case Manager	0

3. Once Notice of Grant Award (NGA) was received from HRSA on February 1, 2016, how long did it take for your agency to be notified by the Administrative Agency (AA) of your grant award amount?

(The expectation of the AA is to notify providers of their award within 10 business days.)

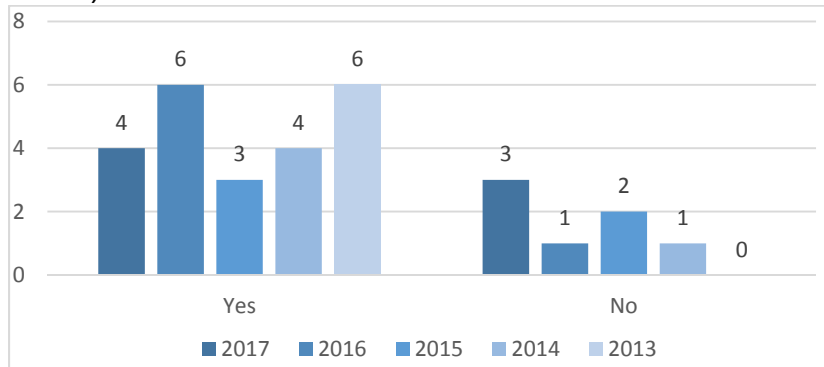


FY 2017	
Survey Option	Responses
Less than one week	1
1-2 weeks	0
3-4 weeks	6
More than 4 weeks	0
Not Sure	0

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4. Was adequate time allotted for your agency to prepare the required budget after initial contract was awarded?

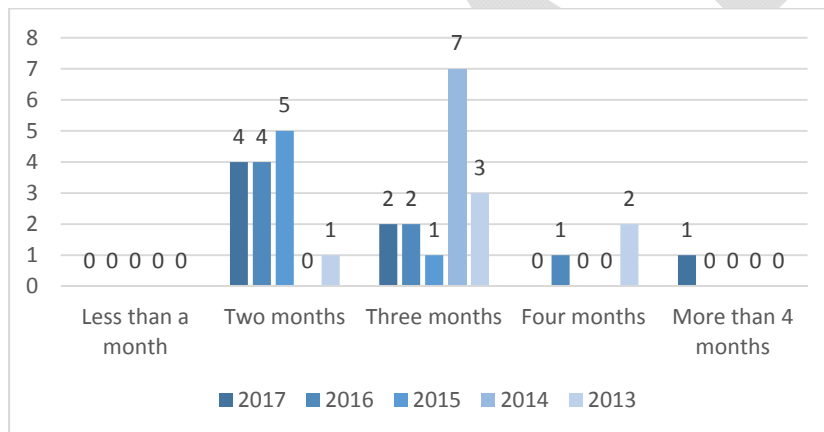
(The AA provides up to 21 business days to allow the providers to prepare their budget after being notified of award.)



FY 2017	
Survey Choice	Response
Yes	4
No	3

5. From announcement of NGA amount on February 1, 2016, to full execution, how long did it take to finalize your agency's contract?

(The expectation is to have a finalized contract within 60 calendar days of the NGA.)



FY 2017	
Survey Choices	Reponses
Less than a month	0
Two months	4
Three months	2
Four months	0
More than 4 months	1

Note: The question is complicated by the fact that there was a partial award and subsequent full award.

Provider Comments:

"Partial Award; City of Austin's procurement policy/procedure is drawn out"

SKIP LOGIC QUESTION: In reference to the previous question, if more than four months, was this due to your agency's process for handling of contracts or the AA's process for handling of contracts?

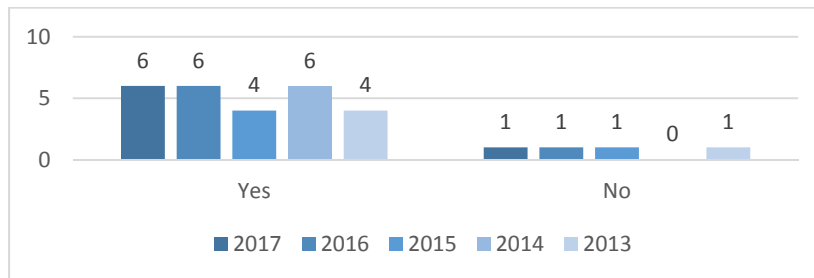
The response to this questions and comments are not anonymous because only one respondent answer question and can be identified by AA staff based on how long it required to execute their full contract. Because of this reason this information is being omitted.

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FUNDING & RE-ALLOCATIONS

7. Did the AA communicate with your agency during the grant year to ensure funding was being spent in a timely manner?

(The expectation of the AA is to contact providers on a monthly basis to monitor spending.)

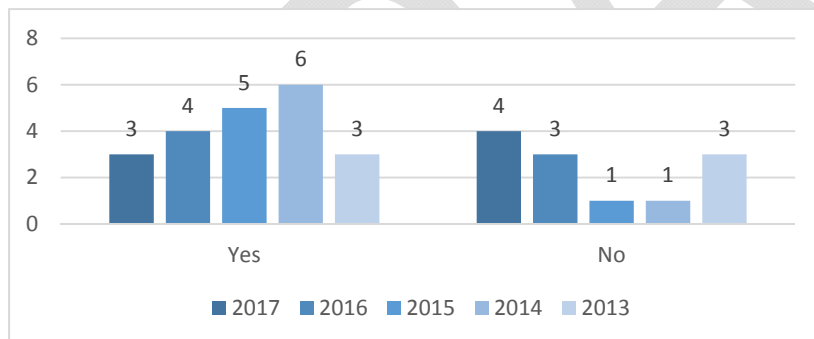


FY 2017	
Survey Choices	Responses
Yes	6
No	1

Provider Comments:

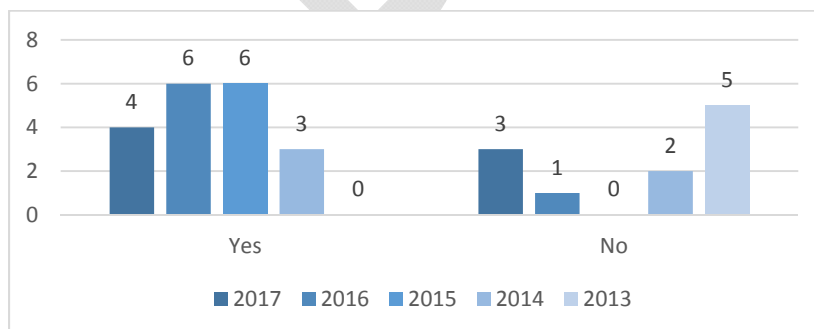
Contract manager communicated regularly.
 We spend out pretty evenly. (Response was no)
 I had excellent communication from the AA throughout the grant year.

8. Did you request a re-allocation of funds from the AA during the 4th Quarter of referenced grant cycle?



FY 2017	
Survey Choices	Responses
Yes	3
No	4

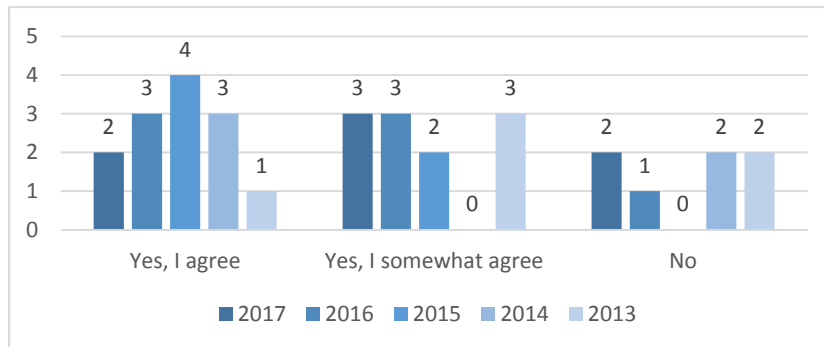
9. Does the AA have a simple process to request re-allocation of funds?



FY 2017	
Survey Choices	Responses
Yes	4
No	3

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10. Is the process for re-allocating funds efficient?



FY 2017	
Survey Choices	Responses
Yes, I agree	2
Yes, I somewhat agree	3
No	2

Provider comments:

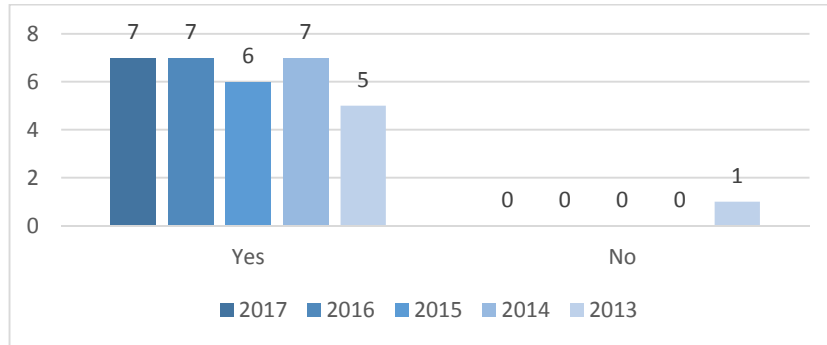
It seems like its additional burden on the agencies to constantly have to update forms in CTK.
 Would be helpful if HRAU had authority to reallocate funds immediately so as to be spent in a timely manner.

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SITE VISITS/MONITORING

11. Did your agency receive a fiscal/contract compliance visit during the period March 1, 2016-February 28, 2017?

(The expectation of the AA is to conduct a Fiscal/contract compliance visit to providers annually. This is typically done by an external vendor: Sumas.)

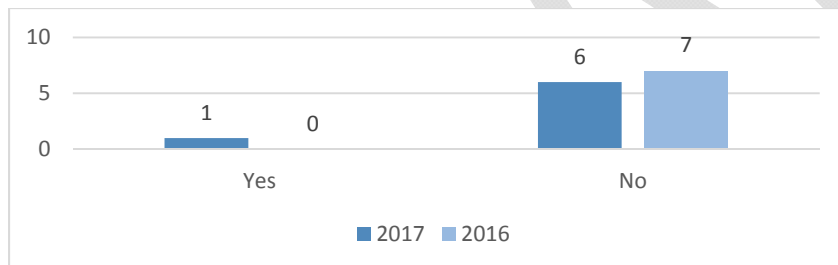


FY 2017	
Survey Choice	Response
Yes	7
No	0

12. During your agency's fiscal visit, were there any findings?

(The expectation of the contracted vendor is to evaluate fiscal/contract compliance to service standards and provide feedback if there is non-compliance/findings on a 30, 60, & 90 day time frame.)

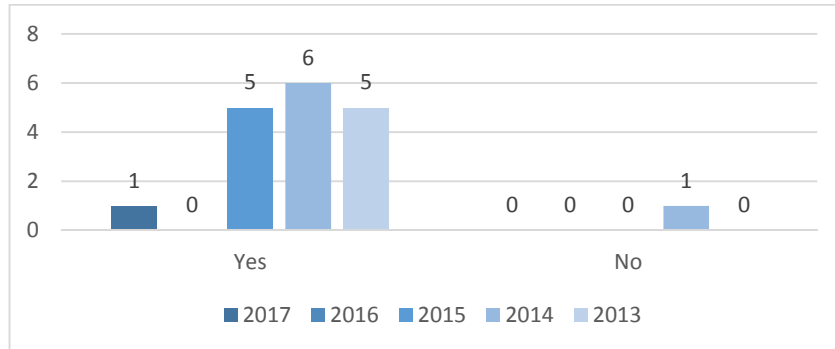
Note: This was a new question in FY 2016 so there is limited historical comparison.



FY 2017	
Survey Choices	Responses
Yes	1
No	6

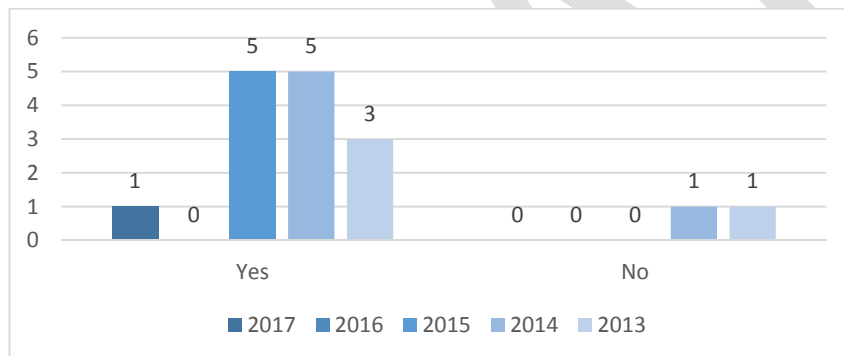
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SKIP LOGIC IF ANSWERED YES TO Q12: If applicable, did your agency receive a written report of the monitoring visit? *(The expectation of vendor is to provide the agency a report of the visit whether or not there were findings 30 days after the monitoring visit.)*



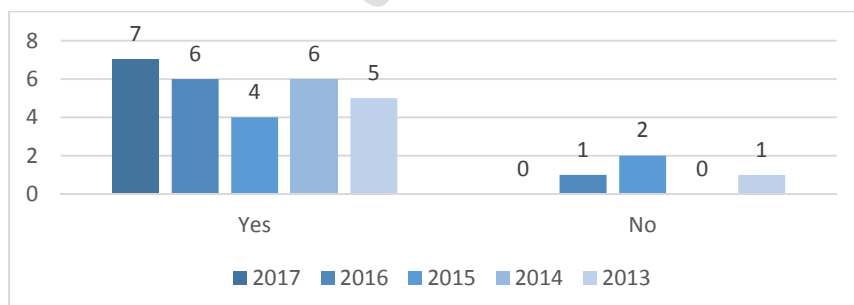
FY 2017	
Survey Choices	Responses
Yes	1
No	0

SKIP LOGIC IF ANSWERED YES TO Q12: If applicable, was your agency allowed at least 30 days to respond to the report and its findings? *(The expectation of vendor is to allow agencies 30 days to respond with a Plan of Action on how they will resolve any findings.)*



FY 2017	
Survey Choices	Responses
Yes	1
No	0

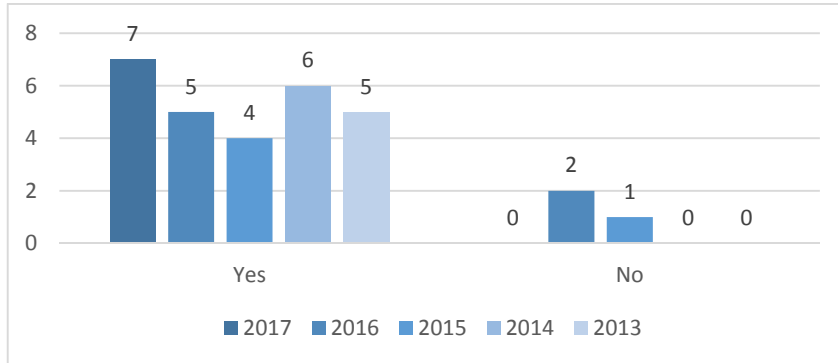
13. Did your agency receive an annual desktop review and ARIES data review performed by AA (HRAU) staff during the period March 1, 2017 through February 28, 2018? Note: This question was updated this year from its previous version of "did your agency receive a programmatic/Quality Management MONITORING visit during the period March 1, 2016 through February 28, 2017?"



FY 2017	
Survey Choices	Responses
Yes	7
No	0

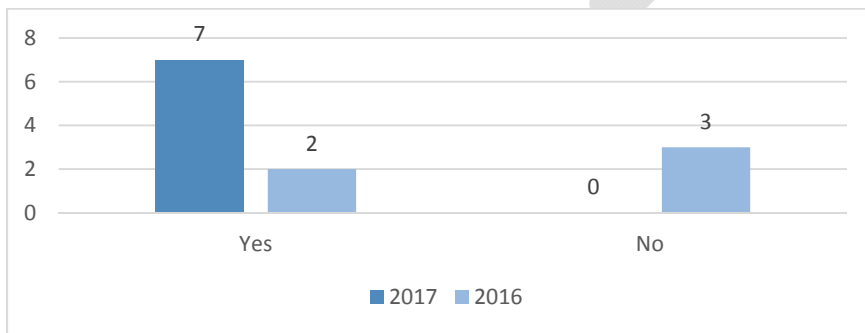
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14. If applicable, did your agency receive a written report of the monitoring visit? *(The expectation of vendor is to provide the agency a report of the visit whether or not there were findings within 30 business days after the visit.)*



FY 2017	
Survey Choices	Responses
Yes	7
No	0

SKIP LOGIC IF ANSWERED YES ON Q14: Did you receive your report within 30 days? *(The expectation of vendor is to provide the agency a report within 30 business days of the visit whether or not there were findings.)*

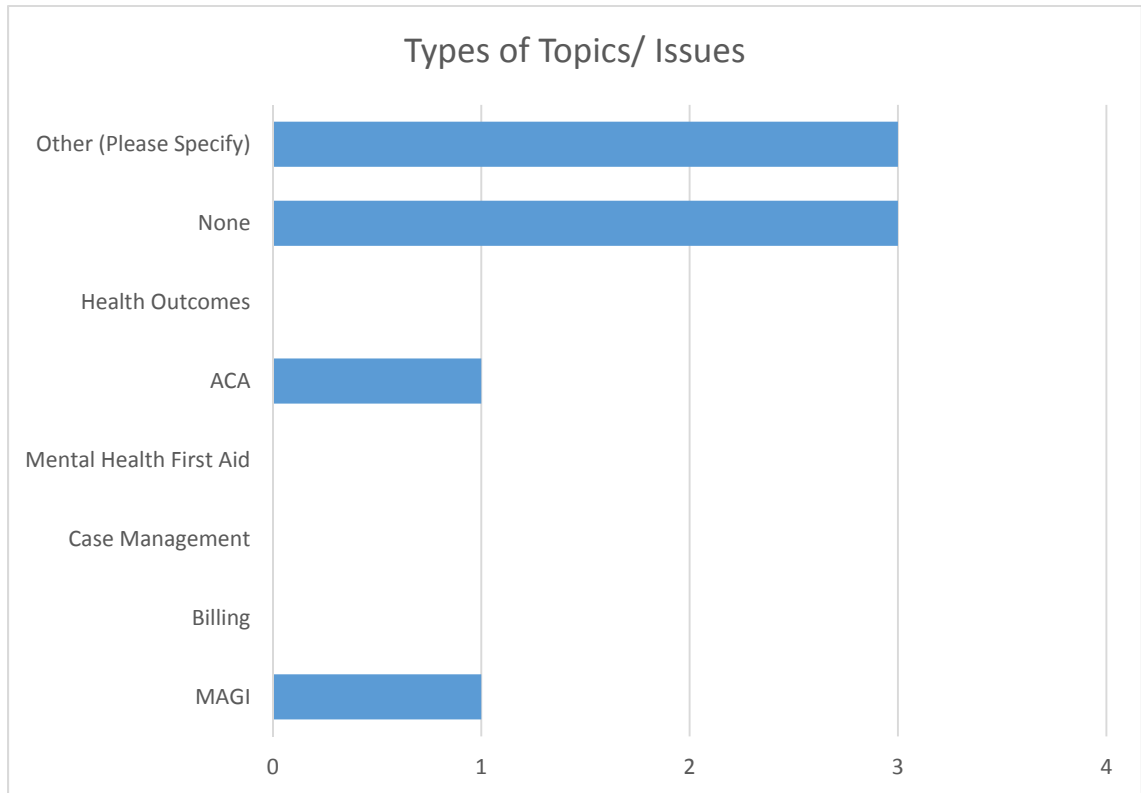


FY 2017	
Survey Choices	Responses
Yes	7
No	0

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TECHNICAL ASSISTANCE

17. Was there any specific topic/issue throughout the year that could have been addressed through technical assistance/training? Please indicate which topics could have been addressed.



Provider comments for “Other” (please specify):

340 B Compliance

Non-Violent Crisis Intervention

New techniques in HIV Care

HIV medications: PrEP, TASP, new HIV Meds Trauma Informed Care HIV & co-infections/comorbidities

Training on new standards and/or policy changes anticipated or implemented within a grant year.

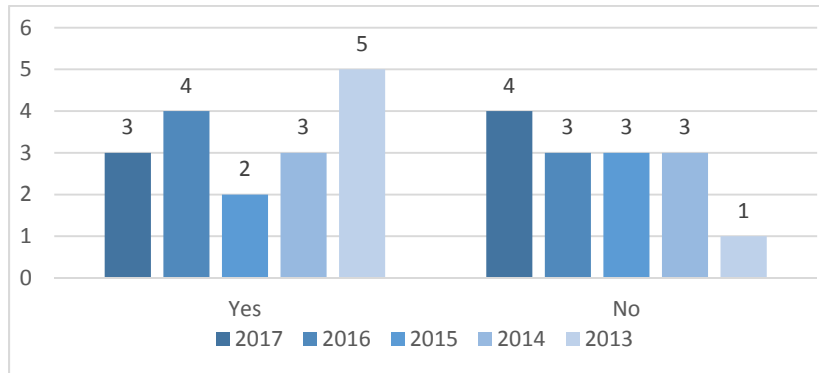
Resources and best practices from similar programs from areas outside of the Austin TGA.

CLAS. Most of the CLAS trainings we are sent are not appropriate or relevant to our purposes.

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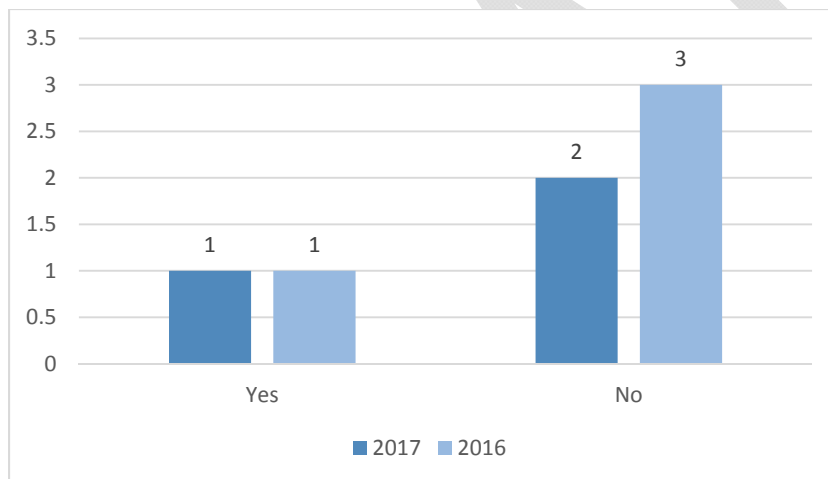
Did you or any staff member of your agency REQUEST training/technical assistance?

(The AA is able to provide TA to providers if requested, but not required.)



FY 2017	
Survey Choices	Responses
Yes	3
No	4

SKIP LOGIC IF ANSWERED YES ON Q18: Was training delivered?



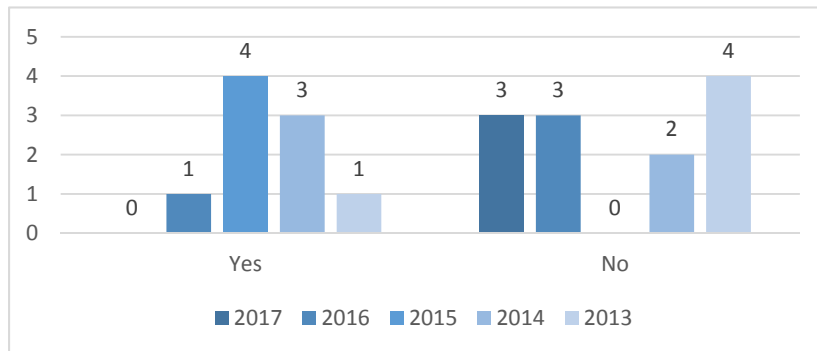
FY 2017	
Survey Choices	Responses
Yes	1
No	2

Provider comments:

"Provided after CY ended." (Response was yes)

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SKIP LOGIC IF ANSWERED YES ON Q18: If technical assistance was provided by the AA, did it meet your needs in helping you (or your agency) effectively carry out Ryan White Part A mandates?



FY 2017	
Survey Choices	Responses
Yes	0
No	3

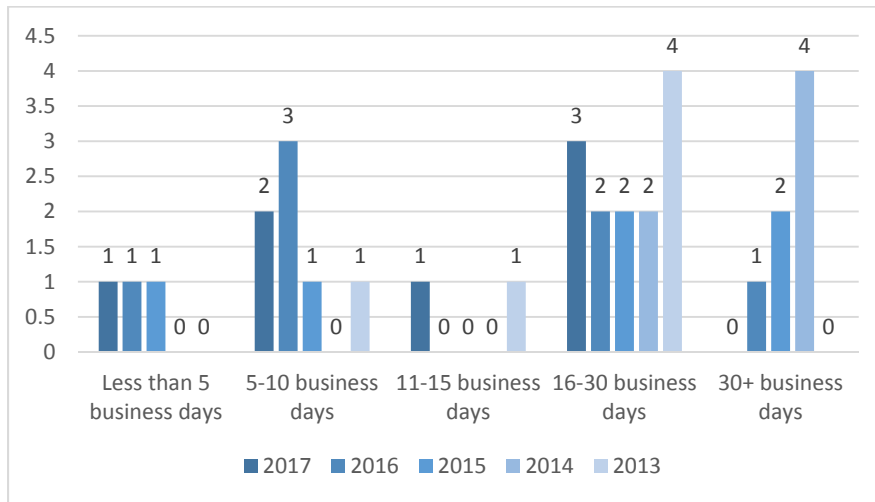
Provider comments:

Training was not specific to mandates.
Not relevant to our purpose.

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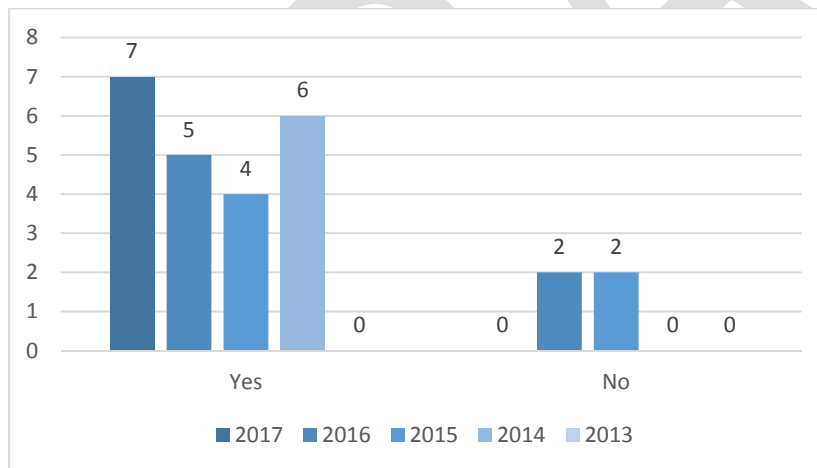
BILLING

- 22. Provided your agency did not have to make any corrections to a submitted billing, on average, how many business days did it take for your agency to be reimbursed from the day you submitted the initial billing?**
(The expectation of the AA is to reimburse agencies within 30 business days after receipt of a correct payment request.)



FY 2017	
Survey Choices	Responses
Less than 5 business days	1
5-10 business days	2
11-15 business days	1
16-30 business days	3
30+ business days	0

- 23. Does your agency utilize direct deposit?**



FY 2017	
Survey Choices	Responses
Yes	7
No	0

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Please provide additional information you feel is pertinent in ensuring the Administrative Mechanism operates according to HRSA expectations.

Additional Comments

- During CY17-18, there were times when providers were told to do something without knowing the rationale behind the decisions. We requested that HRAU advocate to HRSA on behalf of providers, but we were never really sure if that advocacy was actually carried out. Based upon the information and decisions issued to providers, we believe our questions and concerns were not shared with HRSA. We appreciate every opportunity to have a seat at the table and be involved in discussions to ultimately better the delivery of services to the community and be good stewards of RWA contract funds.
- I do not know what HRSA expects so I cannot comment on this. I can suggest how I think the relationship should work, and have, but I think that is not what HRSA wants.
- The length of time required to a finalized full contract is longer than the target 60 days because of both the agency's process and the AA's process for handling of contracts.

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ATTACHMENT 1

FY 17 EVALUATION OF THE ADMINISTRATIVE MECHANISM PROCESS TIMELINE

Reminder: FY 17 (March 1, 2017-February 28, 2018)

Date	Action
March 20, 2018	Allocation Committee reviews survey tool for the Assessment of Administrative Survey.
March 27, 2018	Allocation Committee Chair, LJ Smith, presents the survey at the HIV Planning Council meeting which is voted on for approval.
June 28, 2018	Survey is distributed via Survey Monkey.
July 12, 2018	Deadline to complete the survey.
August 21, 2018	Allocations Committee will review draft summary report from Office of Support with results and statistical analysis. The committee will then assess results and if necessary develop recommendations for the Administrative Agency to consider.
August 28, 2018	Allocation Committee Chair, LJ Smith, will present recommendation made to the Administrative Agency for feedback and discussion at the Business meeting. Vote of approval will occur at business meeting.
September 4, 2018	Office of Support staff will request a response from the Administrative Agency if there are any recommendations. Final report will be forwarded to CEO (Mayor Adler) and the Planning Council.