2025 Ryan White Contracted Providers Meeting

Friday, April 25, 2025, 10 a.m. – noon, via MS Teams

Agenda

Topic	Presenter	Time
1. Welcome and Introductions	Eriika	10:00
2. Ryan White Staff Updates	Eriika	10:10
3. Funding Updates	Alissa	10:15
4. Contract Updates	Jeremy and Jacki	10:25
5. Programmatic Updates	Carissa and Brenda	10:35
6. Questions		10:55
7. Break		11:05
8. Training and Technical Assistance (TA)	Carissa	11:15
9. CAREWare	Cody	11:25
10. Quality Management	Scott	11:30
11. MN Council for HIV/AIDS Care and Prevention	Aamina	11:40
12. Questions		11:45
13. Closing	Eriika	11:55

Contacts

- **Manager:** Alissa Fountain, Alissa.fountain@hennepin.us, 612-964-0931
- **HIV Grants Supervisor:** Eriika Etshokin, Eriika.etshokin@hennepin.us, 612-543-4237
- **Program Officer:** Jeremy Stadelman, Jeremy.stadelman@hennepin.us, 612-596-7894
- **HIV Services Planner:** Carissa Weisdorf, Carissa.weisdorf@hennepin.us, 612-348-6827
- **Quality Management:** Scott Bilodeau, Scott.bilodeau@hennepin.us, 612-348-4357
- **Data Analyst:** Cody Raasch, Cody.raasch@hennepin.us, 612-348-7414
- **Contract Manager:** Jacki Gould, Jacki.gould@hennpin.us, 651-235-6219

- **MN Council for HIV/AIDS Care and Prevention:** Aamina Abdirashid Mohamed, Aamina.AbdirashidMohamed@hennepin.us, 612-596-2001
- **Positively Hennepin:** Brenda Senyana, Brenda.senyana@hennepin.us, 612-596-3202
- **For All CAREWare & EvalWeb Questions:** health.cwpems@state.mn.us
- **For All Centralized Eligibility (MNCE):** dhs.programhh@state.mn.us

Hennepin County Ryan White Program Contracted Providers Meeting

HENNEPIN COUNTY
MINNESOTA
Public Health

APRIL 25, 2025

Welcome, Housekeeping, and Introductions

- Please introduce yourself in the chat. Include:
  - your name
  - pronouns
  - where you work
  - Ryan White services provided by your organization
  - your role
  - your contact information

- Please mute your microphone except when asking questions or participating in discussion. A Hennepin County team member may mute your microphone if we are getting feedback from your line.

- Questions may be put in the chat at any time and will be addressed before the break and at the end.

Agenda

- Welcome and introductions

- Funding updates

- Contract overview

- Programmatic updates

- Questions

- Break

- Training and Technical Assistance (TA)

- CAREWare

- Quality Management

- MN Council for HIV/AIDS Care and Prevention

- Questions

Hennepin County Ryan White Program Staff

Alissa Fountain
Alissa.Fountain@hennepin.us
Ryan White Program Manager

Eriika Etshokin
Eriika.Etshokin@hennepin.us
Ryan White Services Grants Supervisor

Carissa Weisdorf
Carissa.Weisdorf@hennepin.us
Lead HIV Services Planner

Jeremy Stadelman
Jeremy.Stadelman@hennepin.us
Program Officer

Jacki Gould
Jacki.Gould@Hennepin.us
Senior Contract Manager

Scott Bilodeau
Scott.Bilodeau@hennepin.us
Quality Management Coordinator

Cody Raasch
Cody.Raasch@hennepin.us
Ryan White Data Analyst

Aamina Abdirashid Mohamed
Aamina.AbdirashidMohamed@hennepin.us
Planning Council Coordinator

Brenda Senyana
Brenda.Senyana@hennepin.us
Positively Hennepin Implementation Coordinator

Hennepin County Ryan White Funding (FY24 – FY25)

| Funding Source	2024	2025*
Ryan White Part A Formula Funds	$ 3,796,535	$ 3,822,414
Ryan White Part A MAI Funds	$ 395,342	$ 398,036
Ryan White Part A Supplemental Funds	$ 2,010,549	$ 2,024,254
DHS Rebate Funds	$ 4,020,314	$ 1,585,313
TOTAL:	$ 10,198,376	$ 7,830,018

* All Part A FY 2025 funding amounts are based upon HRSA projections and are subject to change. HRSA did not provide projections for Supplemental Award funds.

2025 Hennepin Combined Allocations

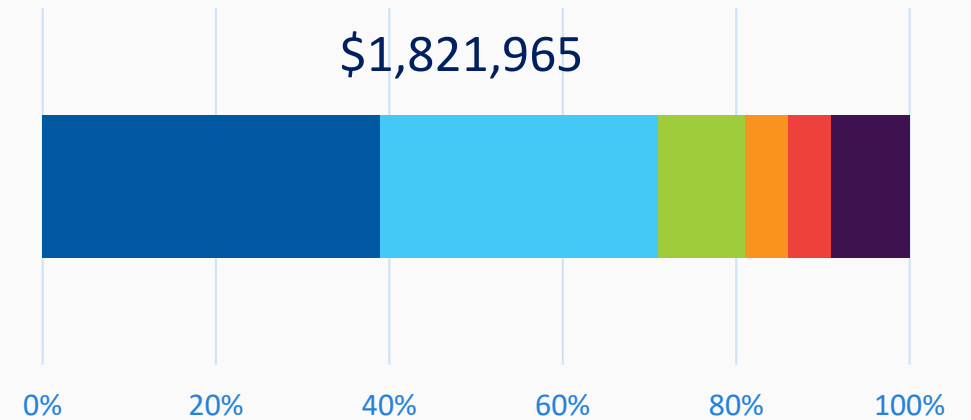## Estimated FY 2025 core medical service allocation percentages

$4,614,353
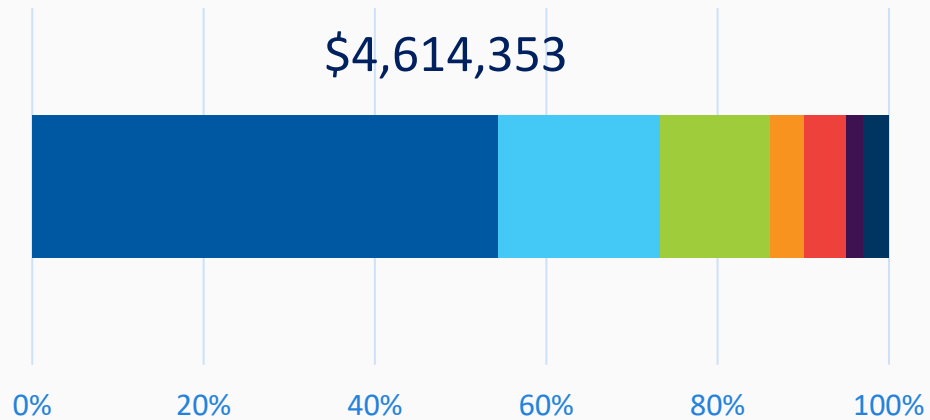
- Medical case management
- Outpatient ambulatory medical care
- Early intervention services
- Mental health
- Substance abuse services outpatient
- Medical nutrition therapy
- Home and community-based health

Estimated FY 2025 support service allocation percentages

$1,821,965

- Food bank/home delivered meals
- Housing
- Medical transportation services
- Legal
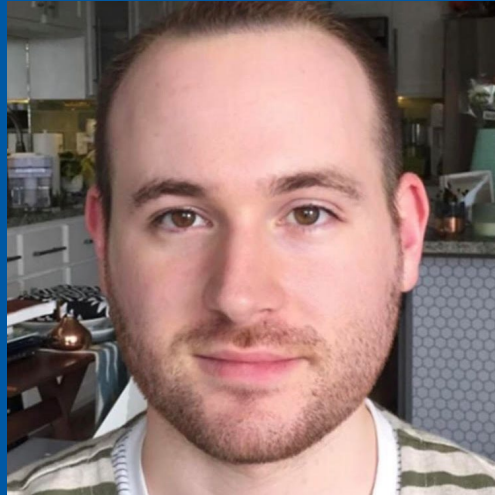- Psychosocial support services
- Health education risk reduction

Ryan White System of Care

The comprehensive list of providers and the services they provide can be found on [Where to Find Services - MCHACP](#)

Hennepin County Ryan White Contract Staff

Jeremy Stadelman

Jeremy.Stadelman@Hennepin.us

Jeremy is the Program Officer and primary point of contact for Hennepin County Ryan White subrecipients. He will approve invoices, answer contract-related questions, communicate program requirement changes, reallocation proposals, and participate in subrecipient monitoring.

Jacki Gould

Jacki.Gould@Hennepin.us

Jacki is the Senior Contract Manager for all Hennepin County Ryan White subrecipients and manages all internal processing of contract actions and audits. She will lead any County-required audit processes, process payment for approved invoices, and participate in subrecipient monitoring.

Contracts Overview

- Contract Staff Updates
- Contract Guide
- Invoice Processing
- Updates
- Administrative Documents
- Transitional Grant Area
- How to Use Funding
- Reallocation Policy
- Budget and Change Requests
- Reporting requirements and schedule

Thank You, Walter!

We thank Walter for his many years of dedication to the Ryan White Program and wish him success as he moves on to contract management with other programs.

Contract guide 💻

https://www.hennepin.us/ryan-white

HENNEPIN COUNTY
PUBLIC HEALTH

Ryan White HIV/AIDS Program

FY 2025 Contract Guide

April 25, 2025

This document describes contractual changes and expectations for subrecipients contracted through Hennepin County's Ryan White HIV/AIDS Program (RWHAP) for the current fiscal year.

Ryan White HIV/AIDS Program
525 Portland Ave S, MC L963
Minneapolis, MN 55415 RyanWhite@hennepin.us
https://www.hennepin.us/ryan-white

Invoice Processing

Invoices are to be emailed to **Jeremy.Stadelman@Hennepin.us** by the 15th of the month following service provision unless a quarterly invoice request has been approved. Invoices should match the services and number of clients served in CAREWare.
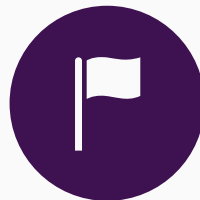
Invoice amounts are tracked to be sure the service budget is not exceeded.

Invoice processing may be delayed if there are discrepancies in the client counts or budget amount.
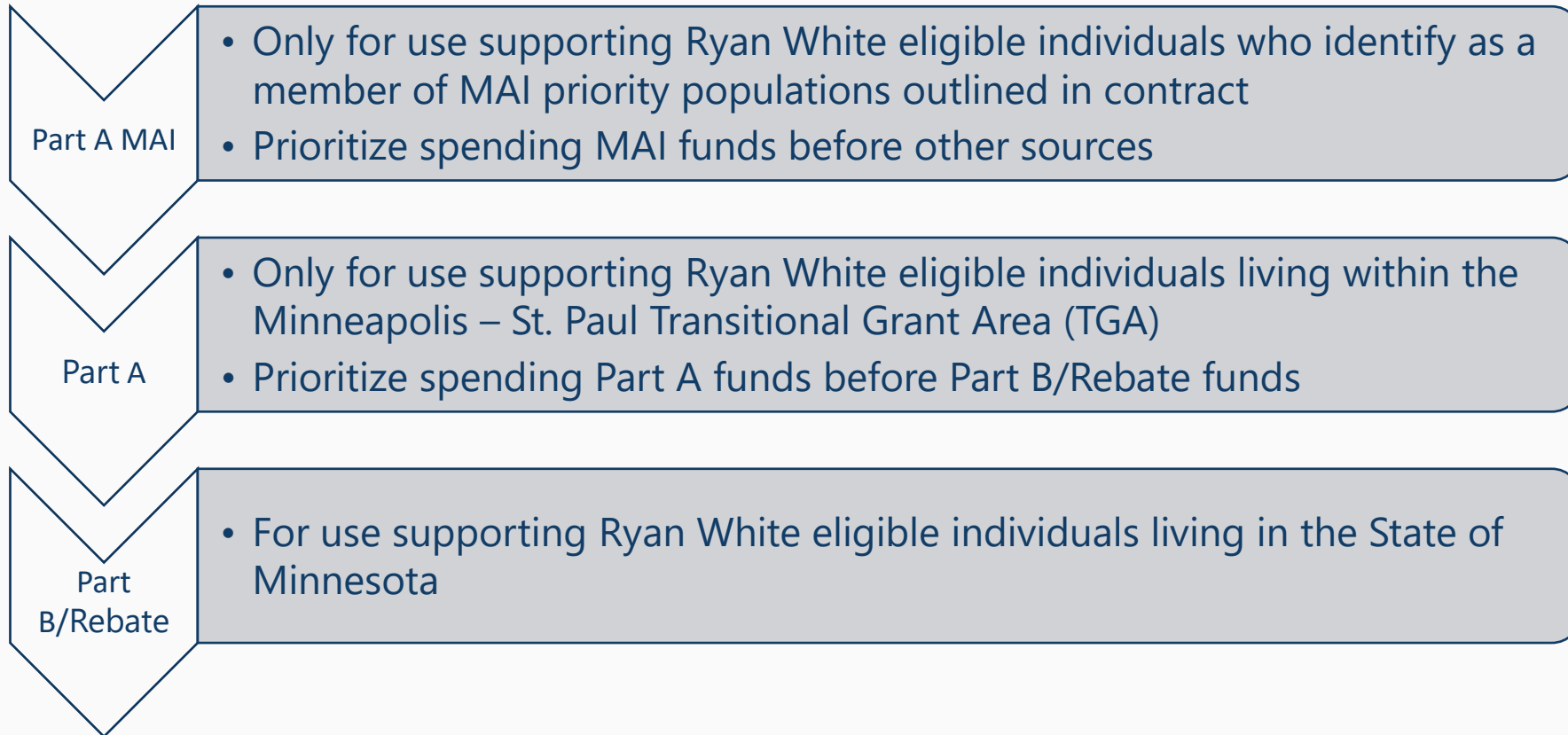
The County requires 2 signatures on your invoices.

The County is flagging some random invoices for auditing purposes.

Invoice Template/Guidance

Agency:		**Contract #:**	HS0000####
Mailing Address:		**PO #:**	123567
		Date submitted:	
		Total Amount:	
		Invoice #:	
		Account #:	55810
		Department ID#	536099
Program:		**Project ID#**	1008553	1008554 or 1008469
		APEX Activity ID#	FY25
		RW Source:	RWABC	Service type
Contract Manager: Jacki Gould		**APEX Supplier ID#**	12345

Funding Period: March 1, 2025 -February 28, 2026   **Invoice Period:** _____

Expenditure Category	Amounts	Subtotals
Total Direct Charges:		_____
Administrative Charges:		_____
TOTAL REIMBURSEMENT REQUESTED:		_____

Signature of Preparer: _____

Title: _____

Signature of Certifying Person: _____

Title _____

I certify that to the best of my knowledge and belief, all expenditures reported or payments requested are correct and made for appropriate purposes in accordance with the contract agreement.

Funding Sources

Part A MAI
- Only for use supporting Ryan White eligible individuals who identify as a member of MAI priority populations outlined in contract
- Prioritize spending MAI funds before other sources

Part A
- Only for use supporting Ryan White eligible individuals living within the Minneapolis – St. Paul Transitional Grant Area (TGA)
- Prioritize spending Part A funds before Part B/Rebate funds

Part B/Rebate
- For use supporting Ryan White eligible individuals living in the State of Minnesota

Transitional Grant Area (TGA)

Ryan White Part A/MAI funds are to be used to support clients residing within the Minneapolis – St. Paul Transitional Grant Area (TGA) which includes the below listed counties:

Minnesota Counties

Anoka	Ramsey
Carver	Scott
Chisago	Sherburne
Dakota	Washington
Hennepin	Wright
Isanti	

Wisconsin Counties

Pierce

St. Croix

Reallocation Policy

- Providers who have spent less than 40% of funding in a category by 2nd quarter or less than 70% by 3rd quarter may have funds reallocated to another provider or another service category demonstrating a higher need.

- Before making any reallocation determinations, we reach out to providers to outline how they plan to spend the funds and/or provide an updated budget for a lower amount. Jeremy will contact you mid-year to begin this process, if necessary.

- For providers who do not respond by the deadline outlined in the letter, we will reallocate funds as needed and follow up to make a contract adjustment.

Budget Change Request Process

- Providers may request changes to their programmatic budgets such as moving funds between line items. Going forward, please contact Jeremy (jeremy.stadelman@hennepin.us) when a budget change is requested

- Providers are expected to review federal government requirements, including programmatic and fiscal monitoring standards as well as policy clarification notices (PCN #16-02) prior to submitting budget change request.

- The department decision will align with posted standards and policies and will be communicated to the provider promptly.

- If the provider finds the decision is contrary to posted policies, they may submit a written request to reconsider and must include reference to policy in question.

- Providers must request budget modifications by the 15th of the month <u>two months prior</u> to the end of the fiscal year. Any requests after the deadline, will not be approved.

Gift/Transportation Card Reimbursement

- Hennepin County reimburses for gift cards and/or transportation cards that have been disbursed to clients.

- Providers are responsible to only include disbursed gift and transportation cards on monthly invoices.

- Providers are responsible to maintain logs that demonstrate adherence to this requirement. These logs may be reviewed during annual site visits and/or financial audits.

- A template for this log is available for use/adaption on the Hennepin County Ryan White website.

Gift/Transportation Card Inventory Log

Department:	*enter department name*
Item:	*enter type of gift card*
Last Update (date):	*enter date*
Completed by:	*enter staff completing the inventory log*

Unique Identifier	Date Purchased	Gift Card Number	Gift Card Amount	Department	Dept ID	Purchased by
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
Add						

Gift Card Reconciliation:

# of Cards Purchased: 0	Value of the Cards Purchased: 0
# of Cards Disbursed: 0	Value of the Cards Disbursed: 0
# of Cards On-hand: 0	Value of the Cards On-Hand: 0

Required Submissions/Reports

For returning Providers, please note that many required reports have been eliminated or consolidated to reduce provider-level administrative burden.

DOCUMENT(S)/REPORT(S)	PART A, PART A MAI, PART B/REBATE
Invoices	15th of the month following service delivery
Quarterly Performance and Quality Report	July 20, October 20, January 20th, April 20th
CAREWare Upload	15th of the month following service delivery
Form I Report (missing viral load report)	Due upon request
Primary HIV Medical Care Clinical Data Elements Report	January 15, April 15, July 15, October 15
Documentation of Points of Entry Referral Agreements	Upload with Quarter 1 report
Points of Entry Annual Report	Upload with Quarter 4 report
Quality Improvement Work Plan	April 1
Revenue and Expense Reports	January 30

General Contracting Reminders

- Jeremy Stadelman (Jeremy.Stadelman@Hennepin.us) is your main point of contact for all Ryan White contracting questions.

- Report any key staff or significant program changes to Jeremy within 5 days of change, including any additional documentation such as resumes of new staff, links to posting for new positions, transition plans for changes in key program staff, and site level policy/procedure documents when applicable.

- If anticipating under-spending any of your funds, report to Jeremy at the earliest opportunity so that those funds can be reallocated.

- Any requests for Technical Assistance, Training, or Support may be noted in Quarterly Reports, during Quarterly Calls, or via email at any time.

Programmatic Updates

- Quarterly Reports/Calls

- Status Neutral Grant

- Rapid Start Planning

- Services

Quarterly Reports and Calls

- One quarterly report from each provider to capture work done on both Part A/MAI and Part B/Rebate Contracts will be due on July 20, October 20, January 20, and April 20. Carissa Weisdorf will send out a reminder with a link to the Qualtrics Survey where the quarterly report is completed.

- Quarterly Reports will include opportunities for providers to report staffing/programmatic changes, waitlists, concerns, and progress on Quality Improvement goals. Providers will not be required to report client counts or performance and efficiency measures in their Quarterly Reports.

- When completing quarterly reports, providers will have a prompt to schedule a call within a month of completing the report. The quarterly call will include, minimally, the following:

  - Performance and Efficiency Measures Review
  - Client Eligibility Review
  - Staffing Changes, Client Grievances, Waitlist, etc.
  - Site Visit Findings Check-In (If applicable)
  - Supporting clients in navigating insurance products

  - Expenditures to Date
  - Funding Updates (If applicable)
  - CQM/QI Goal Progress
  - TA/Training Needs

Service and Universal Standard Adherence Document Review

- As part of the Quarter 1 report, providers will be prompted to upload site documents such as policies, procedures, and templates demonstrating adherence to Universal and Service Standards.

- These materials will be reviewed with the Quarter 1 report and discussed during the Quarter 1 call to create opportunities to discuss and refine them throughout the budget year.

- Providers are asked not to upload any documents that include client PHI.

- We recommend that providers anticipate extra time spent on the Quarter 1 report to allow time for this addition.

Annual Subrecipient Monitoring Site Visits

- Annual site visits are conducted every year, from March to May, capturing the work done during the previous fiscal year.

- This is an opportunity for Hennepin County staff to meet your staff, visit your workspace, and meet subrecipient monitoring requirements for maintaining Ryan White grants.

- Site visits include 1. Financial Audit, 2. Programmatic Review, and 3. Client Chart Review

Whole Person Care (Status Neutral) Approach Project

- Funding & Duration: $500,000 per year for 3 years

- Implementing Partners: Red Door Clinic and Youth and AIDS Projects (YAP) at the University of Minnesota

- Priority Population: Black men ages 15 to 34 years who could most benefit from prevention efforts

- Jurisdiction: Minneapolis-Saint Paul Part A TGA

Whole Person Care

For Black men ages 15-34

With Red Door Clinic and YAP

We are here to support **every part** of your health and wellness. Our case managers can help with:

- Sexual health services
- Mental health referrals
- Insurance navigation
- Housing assistance
- Financial support
- Employment services

To get started, scan above or visit:
tinyurl.com/hennwpc
or give us a call at 612-543-3380.

Whole Person Care (Status Neutral) Approach Project

1. Provide culturally affirming, stigma-free **sexual health services**

2. Deliver RWHAP **non-medical case management** services

3. Form a **community advisory board (CAB)** to inform program development and implementation

4. Develop and implement a **community-specific outreach** and engagement strategy

Whole Person Care

For Black men ages 15-34

With Red Door Clinic and YAP

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To get started, scan above or visit:
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or give us a call at 612-543-3380.

RED DOOR   YAP

Whole Person Care (Status Neutral) Approach Project

Year 1: Start Up

- Baseline TA needs assessments
- Define whole person approach to service delivery
- Establish roles, including Non-Medical Case Manager/Navigator
- Develop site-specific TA and evaluation plans

Year 2: Implementation

- Begin data collection of whole person services
- Identify and request tailored TA
- Cross-site learning and sharing

Year 3: Evaluation

- Evaluate whole person services
- Partake in end point readiness assessment

Whole Person Care (Status Neutral) Approach Project

Project Activity	Status
Robust **partnership** and **referrals** development	To date, WPC team has **partnered with over 30 organizations** and developed a **referral resource guide** with 130 organizations and programs, providing over 40 different medical and social services throughout the MSP metro area.
Sexual health services **outreach and testing**	To date, the WPC team has conducted over **100 outreach events,** and **tested over 80 individuals** from the priority population, all of which tested negative.
Non-medical case management (NMCM)	To date, 40 individuals have expressed interest in enrolling in WPC. **11 are currently enrolled in the program and receiving services.** Of the remaining 29, 14 are being actively contacted to complete enrollment and schedule their initial assessment, 12 are disengaged/lost to follow-up, and 3 are no longer interested
Community advisory board (CAB)	To date, **14 CAB members** have been recruited and are currently serving on the CAB. Bi-monthly meetings are being held. So far, **2 meetings have been held**; one in February and April 2025.

Hennepin

Rapid St**ART** Project

- **Project:** the HC RWHAP is contracting NACCHO to develop and implement an Action Plan for adopting Rapid Start as a jurisdictional standard of care

- **Funding and Duration:** $120,000 for 1 YR

- **Phases of implementation:**

  - Needs Assessment

  - Implementation Action Plan Development

- **Goal:** Have a system in place where anyone who is diagnosed with HIV can start ART right away

(NASW, 2015)

Hennepin County Ryan White Program webpage

hennepin.us/ryan-white

- Access service standards, policies and procedures, and other programmatic resources on the Hennepin County Ryan White Program webpage.

- Refresh the page when opening pdfs to ensure you have the current version.
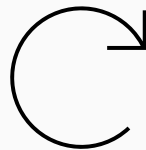
Ryan White HIV Services

ryanwhite@hennepin.us

The Minnesota Ryan White Program helps low-income people living with HIV access health care and supportive services to reach and maintain viral suppression.

The Hennepin County Ryan White Program does the following:

- Implements the Federal Ryan White Part A grant to fund HIV services at clinic and community-based organizations
- Administers DHS Ryan White Part B Funds for HIV services at metro-area clinic and community-based organizations
- Convenes the Minnesota Council for HIV/AIDS Care and Prevention

Open all

- + Get help for HIV
- + Housing and HIV
- + 2020 HIV community needs survey
- + Minnesota Council for HIV/AIDS Care and Prevention
- + Data reports and presentations
- + Information for service providers

Open all

Linguistic Services

- A second contracted vendor is available for telephone interpretation beginning in 2025.
- Refer to interpretation and translation policy and procedure on https://www.hennepin.us/ryan-white#service-providers
- Some providers have reported issues with the Language Line (dropped calls, long hold times). Please contact Carissa Weisdorf for assistance if you or your staff experience this.

HENNEPIN COUNTY
PUBLIC HEALTH

Ryan White HIV/AIDS Program: linguistic services policy and procedures

Any Ryan White HIV/AIDS Program (RWHAP) client can receive RWHAP fundable services in their preferred language. The Hennepin County (HC) RWHAP manages the funding for all RWHAP linguistic services in Minnesota, including RWHAP subrecipients contracted through the Minnesota Department of Human Services (DHS). The HC Office of Multicultural Services (OMS) will coordinate interpreter services with any RWHAP subrecipient (https://bit.ly/HCMulticultural). Translation services are, also, available through OMS, but any translation services need to be pre-approved by the RWHAP subrecipient contract manager. Interpreter services do *not* require pre-approval.

Background

The purpose of the interpretation and translation policy and procedures is to ensure that all Ryan White HIV/AIDS Program (RWHAP) Part A, Part B, and rebate funded providers can access existing RWHAP funding for interpretation and translation services. Providers are required to report client-level data to HC RWHAP through an online form developed in Qualtrics.

Policy

Hennepin County Human Services and Public Health Department (HSPHD) contracts with vendors to provide interpretation and translation services to Ryan White HIV/AIDS Program (RWHAP) funded providers. These vendors have experience in providing culturally and linguistically responsive translation and interpretation services to a wide range of clients and environments. Interpretation and translation services will only be available to agencies receiving RWHAP funds and to clients who meet all eligibility criteria to receive RWHAP funded services. Interpretation and translation services provided to clients who do not meet all RWHAP eligibility criteria are not eligible for reimbursement. Following the interpretation and translation services policy and procedures will ensure timely payment of invoices. Providers that do not follow the requirements outlined in the policy and procedures will be responsible for the interpretation and translation costs incurred.

Points of Entry and annual report

- All providers must develop and maintain written referral and linkage agreements with least three (3) "points of entry" to help identify eligible people with HIV and refer them into the health care system.

- Upload your Points of Entry referral relationships with your Quarter 1 report.

- Upload your Points of Entry annual report with your Quarter 4 report.

- Additional information and templates available at https://www.hennepin.us/ryan-white#service-providers

Points of Entry: letter of agreement

The Ryan White CARE Act requires that referral relationships between Ryan White subrecipients and key Points of Entry be established, maintained, and documented to help identify HIV positive clients and refer them to primary health care.

Points of entry are health care and human services access points used frequently by traditionally underserved people with HIV to help meet their medical and social service needs. They are therefore key access points for referring such individuals into the HIV care system. Examples are health departments, emergency rooms, substance abuse programs, mental health programs, detention facilities, STI and HIV clinics, homeless shelters, counseling and testing sites, federally qualified health centers, and other healthcare points of entry that have established referral relationships or agreements with Part A subrecipients.

Subrecipient Agency:	
Services Provided:	
Point of Entry (POE) Agency:	
Services Provided:	

The purpose of this Letter of Agreement is to formalize a referral relationship between **(Subrecipient Agency)** and **(POE Agency)** to **(describe referral agreement).**

In order to best meet the needs of our clients living with HIV/AIDS, **(Subrecipient Agency)** will refer clients to **(POE Agency)** to **(describe referral agreement)** as needed and vice-versa. **(Subrecipient Agency)** will also provide services for clients seeking culturally appropriate services.
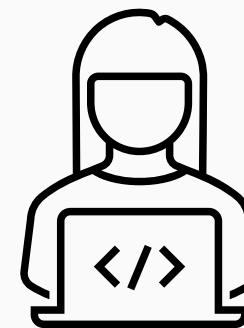
Medical Case Management Manual
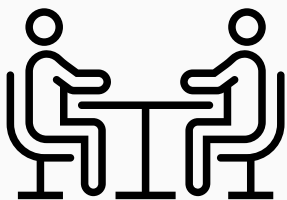
Medical Case Management

Non-medical Case Management/ Benefits Counseling

Referral for Health Care and Supportive Services

Service Standards

2024 Updates

- Psychosocial Support Services

- Emergency Financial Assistance

Planned 2025 updates:

- Housing Services

Questions

STRETCH BREAK

Please come back at 11:03!

Training and Technical Assistance (TA)

- Provider onboarding slide decks
- DHS Provider Connection meetings
- Additional resources

Provider Onboarding

To help new Ryan White providers and their staff become acquainted and comfortable with the Ryan White legislation and how it's implemented in Minnesota, slide decks are available on the Hennepin County Ryan White website.

1. HC RWHAP Training Overview

2. HC RWHAP Service Standards

3. HC RWHAP Subrecipient Monitoring

4. HC RWHAP Planning Council

5. HC RWHAP Contracts and Invoices

6. HC RWHAP Quality Management

7. HC RWHAP Systems

The Hennepin County Ryan White team is available to provide a training overview whenever requested. Email RyanWhite@Hennepin.us to arrange.

Ryan White Provider Connections Meetings

- Meets virtually on the fourth Thursday of every month from 9 – 11 a.m.

- Invites come from dhs.HIVgrantsmanagement@state.mn.us

- Each provider should have at least one representative attend these meetings to:

    o Receive Ryan White program updates from Hennepin County and Minnesota Department of Human Services

    o Connect with other RW providers and programs

    o Troubleshoot common problems with others

    o Receive technical assistance and training

    o Hear government/funding updates

    o Share job postings/opportunities

HRSA Ryan White HIV/AIDS Program Listserv

- Subscribe to receive HRSA HIV/AIDS Bureau updates

- https://public.govdelivery.com/accounts/USHHSHRSA/signup/29907

- Subrecipient staff encouraged to sign up

Basecamp and Quality Learning Community (QLC)

- Training available on Basecamp include:

  - Sound Practices for Better Consumer Engagement

  - Staff transition and succession planning

  - Quarterly report training

  - Power query

A Brief intro to CAREWare

CAREWARE SYSTEM

Ryan White Providers input the following data through either direct entry or the PDI process:

- service data
- lab data
- updated financial
- housing information
- insurance information

Ryan White Providers enter CAREWare and view:

- service data
- lab data
- eligibility information
- demographic information

Providers can also run reports on clients they serve.

Ryan White Subrecipients

CAREWare Data Flow
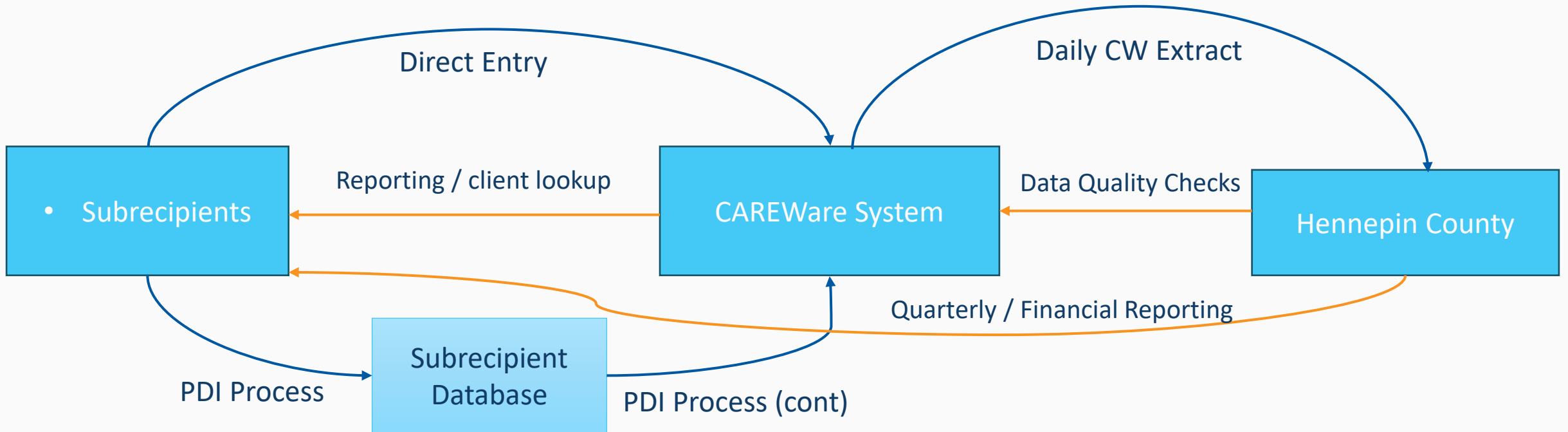
CAREWare updates

- Contact CAREWare Helpdesk for assistance and training requests: health.cwpems@state.mn.us

- CAREWare SharePoint site has all CAREWare manuals, documents, and training videos. Contact the CAREWare Helpdesk to get access to the SharePoint site

- The At A Glance Screen in CAREWare is the only source of truth for Ryan White client eligibility.

- HC Provider Portal

MN Centralized Eligibility (MNCE)

- Clients enroll in Part A and/or Part B funded services through Minnesota Centralized Eligibility (MNCE), a simplified enrollment and renewal process for Minnesota Ryan White-funded programs.

- People living with HIV apply once for all Minnesota Ryan White-funded services and renew eligibility once per year.

- Providers must have a documented policy in place for verifying clients' Ryan White eligibility via the eligibility At A Glance screen before invoicing for RW services.

- For client-specific guidance, contact HIV Supports at DHS.

- For CAREWare guidance and access to MDH CAREWare SharePoint, contact the MDH CAREWare Help Desk.

- MNCE guidance and communication, including employee onboarding packet, saved on Basecamp Centralized Eligibility Communications

Quality Management

- Quality Management requirements

- Quarterly reports

- QMAC & systemwide QM goals

- Quality Learning Community

- EIIHA

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?

Act | Plan
Study | Do
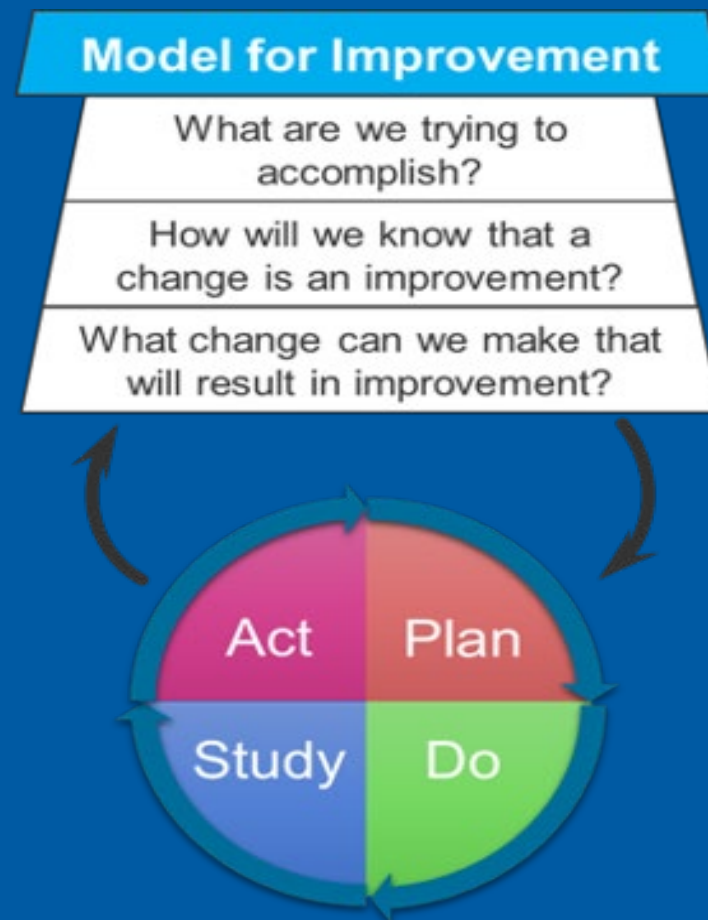
Quality requirements for providers

- **Annual training on quality management -** *End of February.* Posted on Basecamp

- **Quality Improvement (QI) Plans -** were due *April 1.* Thank you for your thoughtful submissions!

- **Site Visits -** Ryan White team visiting sites in *April/May*. Contact Carissa Weisdorf with any questions.

- **Quarterly report check-in calls** *throughout the year*.
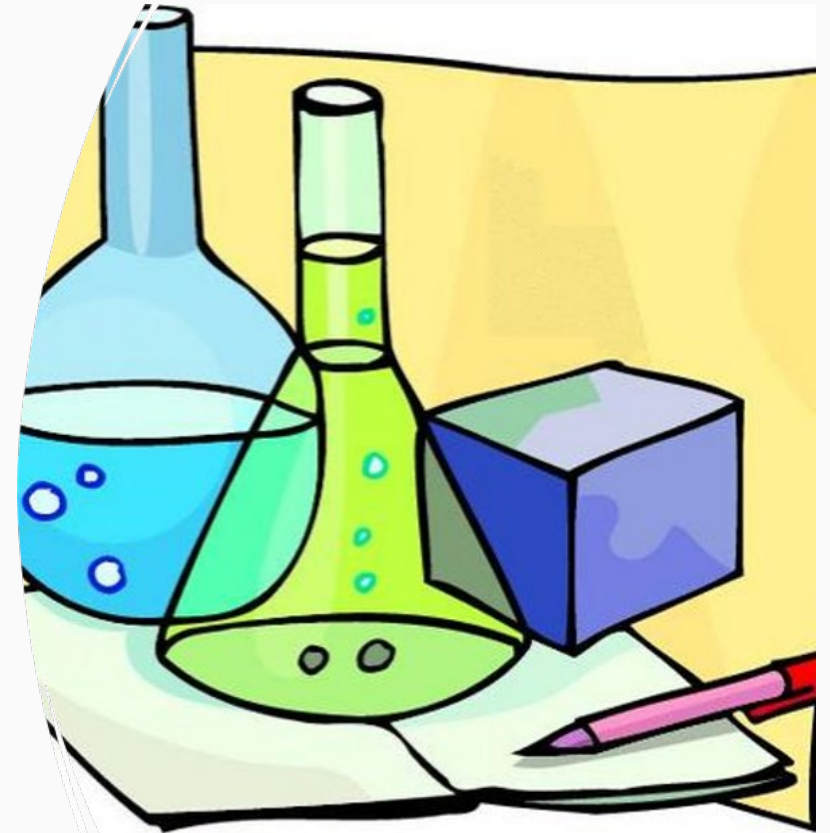
Quarterly reports (only 4 this year!)

- **<u>Report (Parts A and B together) due dates:</u>**

  - 7/20/25

  - 10/20/25

  - 1/20/26

  - 4/20/26

- **<u>Quality Management Coordinator will focus on the following in the quarterly report calls:</u>**

  - QI Plan Progress

  - Effectiveness Measures – missing VL and VS

  - TA and training needs and wants

Quality Management Advisory Committee (QMAC)

- Comprised of Minnesota funders, sub-recipients (*each provider should have at least one rep attend*), and consumers/clients of publicly funded HIV services

- Provides quarterly advice on QM initiatives:

  - Reviews the QM plan

  - Establishes and monitors quality goals

  - Contributes to the Quality Learning Community

- Learn from each other's experiences. Share knowledge. QI learning activities.

2025 system-wide Quality Management Goals

#	Goal	Baseline (CY2024)
1	93% of RWP TGA Black/African American MSM consumers are virally suppressed, excluding within 12 months of new diagnosis	89.5% (349/390)
2	Increase HIV tests for Black men who have sex with men by Part A funded providers to 194 (15%) across grant funding streams.	169
3	4,260 people with HIV are enrolled in the RWP in the TGA (about 70% of all RW-eligible people living in the TGA based on 2022 data)	4,130
4	Of a cohort of 82 individuals at least a year from new diagnosis who were unstably housed and not virally suppressed as of 12/31/24, missing VL will be reduced to 30 (37%).	Of 82 individuals, 40 (49%) missing VL --------- *42/42 (100%) not VS* --------- *All currently unstably housed*
5	Increase HIV tests for Latino men who have sex with men by Part A funded providers to 227 (15%) across grant funding streams.	198

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Quality Learning Community (QLC)

- Receive regular notifications on pertinent guidelines, webinars, trainings, events, provider sharings, useful articles, and other relevant opportunities via Basecamp

- Email scott.bilodeau@hennepin.us to sign up for Basecamp access

Early Identification of Individuals with HIV/AIDS (EIIHA)

- Yearly workgroup of EIS and EIS-adjacent providers across funding streams that advises the establishment and evaluating of a three-year cycle of EIIHA goals

- Reviews epi data & services currently offered, and identifies gaps in identification and care linkage that may contribute to disparities

- Established goals last year: May 2024 EIIHA meeting - Basecamp Will meet in summer 2025 to evaluate progress.

Hennepin County Ryan White QM Team

- *Ask me a question*

- *Run a QI scenario or some other thing by me*

- *Share a success or challenge that might be brought up in QMAC or on Basecamp for others to consider*

- *Find out who to contact or where to go for information*

- *Request to be added to Basecamp or to participate in QMAC or EIIHA meetings*

- *Request TA or trainings*

Scott Bilodeau
Quality Management Coordinator
Scott.Bilodeau@Hennepin.us

How RWHAP Part A Improves Access and Services for People Living with HIV

HRSA	CEO	PLANNING COUNCIL	RECIPIENT	CONTRACTED SERVICE PROVIDERS
• awards RWHAP funds to EMA/TGA	• receives funds • delegates administration of funds to the recipient • establishes the planning council	• assesses needs of local people living with HIV • sets services priorities • allocates resources • issues service directives	• contracts with service providers in line with planning council priorities, allocations and directives	• deliver medical care and support services to people living with HIV living in the EMA/TGA • comply with fiscal and program reporting requirements of the recipient

Required *Planning Council Membership* Categories

- At least 33% of MCHACP members must be consumers

- People Living With HIV & Community

- Public Health & Health Planning

- Health & Social Service Providers

- Federal HIV Programs

Required Planning Council Membership Categories

At least **33%** of planning council members must be **CONSUMERS**

PEOPLE LIVING WITH HIV & COMMUNITY
- Members of affected communities*
- Non-elected community leaders
- Representatives of recently incarcerated people living with HIV
- Unaffiliated consumers

PUBLIC HEALTH & HEALTH PLANNING
- Public health agencies
- Healthcare planning agencies
- State agencies**

HEALTH & SOCIAL SERVICE PROVIDERS
- Healthcare providers, including FQHCs
- Community-based organizations and AIDS service organizations
- Social service providers
- Mental health and substance abuse treatment providers

FEDERAL HIV PROGRAMS
- RWHAP Part B recipients
- RWHAP Part C recipients
- RWHAP Part D recipients†
- Recipients under other federal HIV programs†

Apply today!

Your involvement matters.
Your voice matters. You matter.

Join the Minnesota Council for HIV/AIDS Care and Prevention.

Be a voice for how we serve and fund services for people with HIV or at high-risk for HIV.

The council is seeking applications

Apply online at mnhivcouncil.org

Or request an application by emailing HIVCouncil@hennepin.us

No professional credentials required; you just need to be passionate about ending the epidemic.

Minnesota Council for HIV/AIDS Care and Prevention

Each year, about 300 Minnesotans are diagnosed with HIV or AIDS.

Last year, nearly 10,000 Minnesotans were living with HIV or AIDS.

The council has a variety of open spots. Current vacancies include:

❑ People who are living with HIV who access Ryan White services and do not work for a funded agency
❑ People who are living with HIV or at risk of living with HIV who are young (18-25)
❑ People who work in the HIV field or who are passionate about ending the epidemic

Minnesota Council for HIV/AIDS Care and Prevention

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The benefits of MCHACP

Share the [application](#) link

Help people living with or affected by HIV

o Improve services and access to care

o Represent an underrepresented community or population

o Create service standards of care

Be a voice in program planning and implementation

o Help determine the needs of those living with or affected by HIV/AIDS

o Learn about and collaborate on HIV/AIDS funding and programming decisions

o Ensure that both you and your agency's voice is heard by the council and by the grant recipients

Personal and professional benefits

o Increase your awareness of HIV/AIDS prevention, treatment, and services

o Establish contacts and networks

o Receive training opportunities

o All council and committee meetings have virtual attendance options

Minnesota Council for HIV/AIDS Care and Prevention

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Curious?

Continue learning
About the importance of community engagement in delivering services to people living with HIV

Continue discovering
How you can be involved in the Minnesota Council for HIV/AIDS Care and Prevention

Continue engaging
As a person living with HIV, disproportionate potential to be diagnosed with HIV, or generally affected by HIV, you can be a part of the community planning process

To RSVP or for more information contact:
HIVCOUNCIL@HENNEPIN.US / 612-596-2001

Hennepin County Ryan White Program Annual Contracted Provider Meeting | April 25, 2025

Attend our May 12th Community Voices Committee meeting-in-person @ Mpls Central Library & virtually on Teams!

Minnesota Council for HIV/AIDS Care and Prevention

Hennepin

Aamina Abdirashid Mohamed

Council Coordinator

Aamina.AbdirashidMohamed@hennepin.us

612-596-2001

mnhivcouncil.org

Minnesota Council for HIV/AIDS Care and Prevention

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Any Questions?!

Thank you for joining us today – we look forward to partnering with you to ensure high quality, consistent Ryan White services are available to Minnesotans needing access.

Please complete our meeting evaluation: https://bit.ly/RWP25