



Legislation Details (With Text)

**File #:** 24-0771      **Version:** 1      **Name:**

**Type:** Grant      **Status:** Passed

**File created:** 1/31/2024      **In control:** Commissioners Court

**On agenda:** 2/27/2024      **Final action:** 2/27/2024

**Title:** Request by Public Health Services for approval to accept from the U.S. Department of Health and Human Services grant funds in the amount of \$1,638,961, with no required match, for the 2024-25 Ending the HIV Epidemic: A Plan for America Program.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:**

Date	Ver.	Action By	Action	Result
2/27/2024	1	Commissioners Court		

**Department:** Public Health Services

**Department Head/Elected Official:** Barbie L. Robinson, MPP, JD, CHC – Executive Director

**Regular or Supplemental RCA:** Regular RCA

**Type of Request:** Grant

**Project ID (if applicable):** FY24\_EHE

**Vendor/Entity Legal Name (if applicable):** U.S. Department of Health and Human Services

**MWDBE Contracted Goal (if applicable):** N/A

**MWDBE Current Participation (if applicable):** N/A

**Justification for 0% MWDBE Participation Goal:** N/A - Goal not applicable to request

**Request Summary (Agenda Caption):**

Request by Public Health Services for approval to accept from the U.S. Department of Health and Human Services grant funds in the amount of \$1,638,961, with no required match, for the 2024-25 Ending the HIV Epidemic: A Plan for America Program.

**Background and Discussion:**

Ending the HIV Epidemic: A Plan for America - Ryan White HIV/AIDS Program Parts A is a federal program administered through the Health Resources and Services Administration (HRSA). The grant serves individuals living with HIV who have no health insurance (public or private), have insufficient health care coverage, or lack financial resources to get the care they need for their HIV disease. In addition to outpatient medical care, Ryan White also funds services that support access or retention to medical care.

**Expected Impact:**

Impact of the initiative to significantly reduce new HIV infections over the project period will include 1)

implementation of strategies to treat HIV rapidly and effectively to achieve sustained viral suppression; 2) reducing the effects of co-occurring conditions; 3) reducing disparities in Harris County and addressing the needs of vulnerable populations; and 4) implementation of strategies to rapidly provide HIV treatment services in response to potential outbreaks.

**Alternative Options:**

Approval ensures uninterrupted HIV services for residents living with HIV and staffing to support grant activities.

**Alignment with Goal(s):**

- Justice and Safety
- Economic Opportunity
- Housing
- Public Health
- Transportation
- Flooding
- Environment
- Governance and Customer Service

**Prior Court Action (if any):**

Date	Agenda Item #	Action Taken
1/30/2024	220	Request for temporary transfer of funds approved

**Location:**

Address (if applicable):

Precinct(s): Countywide

Fiscal and Personnel Summary				
Service Name	Ryan White Ending the HIV Epidemic			
	Current Fiscal Year Cost			Annual Fiscal Cost
	Labor	Non-Labor	Total	Recurring Expense
<b>Funding Sources</b>				
<b>Existing Budget</b>			FY24 Portion	FY25 Portion
Grant	\$	\$	\$956,061	\$682,900
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Total Current Budget	\$	\$	\$956,061	\$682,900
<b>Additional Budget Request (Requires Fiscal Review Request Form)</b>				
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$

Total Additional Budget Request	\$	\$	\$	\$
<b>Total Funding Request</b>	\$	\$	<b>\$956,061</b>	<b>\$682,900</b>
<b>Personnel</b> (Fill out section only if requesting new PCNs)				
Current Position Count for Services	-	-	-	-
Additional Positions Request	-	-	-	-
<b>Total Personnel</b>	-	-	-	-

**Anticipated Court Date:** February 27, 2024

**Anticipated Implementation Date (if different from Court date):** February 27, 2024

**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item

**Contact(s) name, title, department:** Dr. Ericka Brown, Director of Community Health and Wellness Division, Public Health Services

**Attachments** (if applicable): Notice of Award, Form 1294, Court Order