



## Ryan White HIV/AIDS Program

PROGRAM FACT SHEET | DECEMBER 2016



### PART C: EARLY INTERVENTION SERVICES AND CAPACITY DEVELOPMENT PROGRAM GRANTS

**T**he Ryan White HIV/AIDS Program Part C funds local, community-based organizations to provide comprehensive primary health care and support services in an outpatient setting for people living with HIV through Early Intervention Services (EIS) program grants. Part C also funds Capacity Development grants, which help organizations more effectively deliver HIV care and services.

#### EARLY INTERVENTION SERVICES GRANTS // // // //

##### *Recipients*

The Ryan White HIV/AIDS Program Part C EIS currently funds community health centers, health departments, hospitals, and other community-based organizations in 49 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands. Recipients are organizations seeking to enhance their response to the HIV epidemic in their area through the provision of comprehensive primary HIV medical care and support services.

##### *Eligibility*

The following organizations are eligible to receive Ryan White HIV/AIDS Program Part C EIS grants:

- ▶ Federally Qualified Health Centers funded under Section 1905(1)(2)(b) of the Social Security Act
- ▶ Family planning recipients (other than states) funded under Section 1001 of the Public Health Service Act
- ▶ Comprehensive Hemophilia Diagnostic and Treatment Centers
- ▶ Rural health clinics
- ▶ Health facilities operated by or pursuant to a contract with the Indian Health Service

THE RYAN WHITE HIV/AIDS PROGRAM PROVIDES A COMPREHENSIVE SYSTEM OF HIV PRIMARY MEDICAL CARE, MEDICATIONS, AND ESSENTIAL SUPPORT SERVICES FOR LOW-INCOME PEOPLE LIVING WITH HIV WHO ARE UNINSURED OR UNDERINSURED. THE PROGRAM AWARDS GRANTS TO STATES, COUNTIES/CITIES, AND LOCAL COMMUNITY-BASED ORGANIZATIONS TO PROVIDE HIV CARE AND TREATMENT SERVICES TO MORE THAN HALF A MILLION PEOPLE EACH YEAR—APPROXIMATELY HALF OF ALL THOSE DIAGNOSED WITH HIV IN THE UNITED STATES. THE PROGRAM ALSO FUNDS CLINICIAN TRAINING, QUALITY IMPROVEMENT, AND THE DEVELOPMENT OF INNOVATIVE MODELS OF CARE TO IMPROVE HEALTH OUTCOMES AND REDUCE HIV TRANSMISSION. THE RYAN WHITE HIV/AIDS PROGRAM, FIRST AUTHORIZED IN 1990, WAS FUNDED AT \$2.32 BILLION IN FISCAL YEAR (FY) 2016.

- ▶ Community-based organizations, clinics, hospitals, and other health facilities that provide early intervention services to people living with HIV
- ▶ Nonprofit private entities providing comprehensive primary care to populations at risk of HIV, including faith-based and community-based organizations

**\$204.8 million** was appropriated to Part C in FY 2016.

**10%** By law, no more than 10% of a federal Part C EIS award can be allocated to administrative costs.

**75%** By law, at least 75% of the balance remaining after subtracting administrative and CQM costs must be used for core medical services.

**50%** By law, at least 50% of an award must be allocated to EIS.

*Services and Implementation*

Recipients must allocate costs using the following Ryan White HIV/AIDS Program Part C cost categories: EIS, core medical services, support services, clinical quality management (CQM), and administrative.

The Ryan White HIV/AIDS Program statute requires that no more than 10 percent of a federal Part C EIS award can be allocated to administrative costs; at least 50 percent of the total award should be allocated to EIS; and at least 75 percent of the balance remaining after subtracting administrative and CQM costs must be used for core medical services.

**CAPACITY DEVELOPMENT GRANTS** //

The Ryan White HIV/AIDS Program Part C Capacity Development Program assists public and nonprofit entities in efforts to strengthen their organizational infrastructure and their capacity to develop, enhance, or expand access to high-quality HIV primary health care services for people living with HIV in underserved or rural communities. For the purposes of the program, capacity development refers to activities that promote organizational infrastructure development leading to the delivery or improvement of HIV primary care services.

*Eligibility*

Applicants must be public or private nonprofit entities that are or intend to become comprehensive HIV primary care providers. Current Ryan White HIV/AIDS Program service providers, as well as faith-based and community-based organizations, are eligible to apply for funding.

**FUNDING CONSIDERATIONS** //

All Part C funds are awarded competitively every three to five years. Statutory preference is given to areas with high rates of sexually transmitted diseases, tuberculosis, substance use disorder, hepatitis B, or hepatitis C. In addition, statutory preference is given to entities that provide primary care services in rural areas or to underserved populations. Approximately \$204.8 million was appropriated to Part C in FY 2016.

