

**Council Member Questions about the Allocations Process**  
**Updated August 14, 2020**

Question: Who created the allocations proposal and what are the sources of funding?

Answer: Staff from the Part A recipient (Hennepin County Ryan White Program) and Part B recipient (DHS HIV Community Services Unit) created the proposal based on the council's Resource Allocations Process for Ryan White HIV/AIDS Program Funds. The proposal includes Ryan White HIV/AIDS Program funds for Part A, Part A MAI, Part B, and Part B MAI.

Question: Do we need to change the proposal?

Answer: No, the council can decide they want to accept the proposal as is and not make any changes. When creating the proposal, the government recipients adhere to the council's Resource Allocations Process for Ryan White HIV/AIDS Program Funds as well as the council's visions and values.

Question: Can you provide information about changes the council has recently made to the allocation plans?

Answer: Yes, we added documents for FY 2019 and FY 2020 council funding decisions under the Resource Allocation Materials on [www.mnhivcouncil.org/2020-psra.html](http://www.mnhivcouncil.org/2020-psra.html).

Question: How has the pandemic and economic downturn affected service access for Ryan White clients?

Answer: In May 2020, medical case managers surveyed Ryan White clients and the results of this survey are in the attached *COVID-19 client survey highlighted aggregate results*. Results from this survey informed the plan for COVID-19 CARES Act funding and, accordingly, \$218,751 was allocated to food bank/home delivered meals for Part A clients, \$136,740 for Part B food vouchers, and, \$60,000 for Part B clients for phone expenses to maintain phone services for telehealth and teleservices.

Question: How are the council's service area priorities incorporated into the proposal?

Answer: The council's service area priorities are listed in rank order on the allocations proposal. However, just because the council prioritizes a service area does not mean the council must allocate funding to it – it just means they can. It also does not mean that because a service area is at the top of the list that it will receive the most funding but, rather, that it will most likely be funded by the council because the council views it as a high priority.

Question: How do we fund a new service area?

Answer: The council can decide that the data supports funding a service area that is not currently funded. To do that, we will refer to the Principles and Criteria in the Resource Allocations Process for Ryan White HIV/AIDS Program Funds document.

Question: How do we amend the proposal? What is the difference between discussion and debate?

Answer: We will have discussion of the proposal before it is moved for approval. This allows anyone, regardless if they have a conflict of interest, to participate in the discussion and offer information as a subject matter expert. Once the proposal is moved for approval, then we are in debate. Any council member can move to amend the proposal by proposing to increase funding to one service area and decrease funding from another service area, as long as they do not have a conflict of interest in one of the service areas in their amendment. After a motion has been made, members with a conflict of interest with any of the service areas in the amendment will leave the room until the vote is taken.

Question: Can we make changes to the allocations for Part A MAI and Part B MAI? What is MAI funding?

Answer: Part B MAI funding is determined by the HRSA requirement, based on language in the Ryan White legislation, that it is to be used solely for educational and outreach activities related to enrolling clients in ADAP. This cannot be changed by the council. The Disparities Elimination Committee recommended that the Part A MAI funds are allocated to medical case management and outpatient healthcare services in order to ensure clients who are currently utilizing these funds can continue to access these core medical services. With these funds, some clients who are not able to access other publicly funded insurance plans due to immigration status, are able to receive the outpatient healthcare services they need. Minority AIDS Initiative funding or MAI is specific for non-white individuals, particularly Black and Latinx communities as well as American Indians who are hard-hit by HIV. Under Part A, MAI formula grants provide core medical and related support services to improve access and reduce disparities in health outcomes in metropolitan areas hardest hit by the epidemic.

Question: Can funding that is not spent be carried over in the next fiscal year?

Answer: Yes, unspent formula and MAI funding can be carried over to the next fiscal year.

Question: Do we vote on allocations for each service area separately?

Answer: If the council accepts the proposal as presented, then we will vote on the entire proposal; there is no conflict of interest for any member because the proposal is considered a "slate". If there are amendments to the proposal, then we will debate and vote on the amendment(s) and conflict of interest will be managed.

Question: What happens if the debate drags on?

Answer: A council member can *Call the Question* which is meant to end debate. A second and a 2/3 vote without debate is needed.