

South Texas Development Council



2026-2027 Ryan White Service Delivery Renewal Packet (04/01/2026 – 03/31/2027)

Issue Date: January 9, 2026

Due Date: February 9, 2026

**Ryan White Administrative Agency
1216 Santa Maria Avenue
Laredo, Texas 78040**

TABLE OF CONTENTS
ORGANIZATION AND CONTENT

FORM		Page #
A	Face Page Instructions	2
A	Face Page	3
B	Contact Person Information	4
C	Administrative Information	5
D	Performance Measures Guidelines	6
D	Performance Measures	7
E	Work Plan (Part 1) Guidelines	8-9
E	Work Plan (Part 1)	10-14
F	Work Plan (Part 2) Guidelines	15
F	Work Plan (Part 2)	16-19
G	Budget Forms Guidelines	20
	<ul style="list-style-type: none"> • Microsoft Excel Attachments: <ol style="list-style-type: none"> 1. Budget Allocation Form, 2. Categorical Budget Justification Form 3. Detailed Unit Cost Form 	
	Assurance Forms Guidelines:	21
	<ul style="list-style-type: none"> • Microsoft Word Attachments (Form H through Form P) 	
H	HIV Assurances	22-41
I	Non-Profit Board of Directors and Executive Director Assurances	
J	Contractor Assurance Regarding Pharmacy Notification	
K	Contractor Assurance Form Sanctions for Client Abuse and/or Neglect	
L	Contractor Assurance Form Sanctions for Evidence of Child Abuse and/or Neglect	
M	Contractor Assurance of Compliance with Standing Delegation Orders	
N	Contractor Assurance of Compliance with Training, Education, and Licensure	
O	Contractor Assurance of Compliance with Requirements for Contents of AIDS related Written Materials	
P	DSHS Assurances and Certifications	

FORM A: INSTRUCTIONS

This form provides basic information about the applicant and the proposed project with STDC, including the signature of the authorized representative. It is the cover page of the renewal and is required to be completed. Signature affirms that the facts contained in the applicant's response are truthful and that the applicant is in compliance with the assurances and certifications contained in the identified Competitive Request for Proposal and the original STDC contract, any renewal(s) or amendment(s). Applicant acknowledges that continued compliance is a condition for the renewal of a contract. Please follow the instructions below to complete the face page form and return with the applicant's response.

1. **Legal Business Name:** Enter the applicant's legal name.
2. **Mailing Address:** Enter the applicant's complete mailing address, city, county, state, and 9-digit zip code.
3. **Payee Mailing Address:** Enter the payee's complete mailing address, city, county, state, and 9-digit zip code.
4. **Unique Entity Identification (UEI) Number:** Enter the applicant's Unique Entity Identification (UEI) number. The UEI is a 12-character, alphanumeric value. This number is required if receiving ANY federal funds and can be obtained at: <https://sam.gov/content/home>
5. **Federal Tax ID, Texas Comptroller Vendor ID, or Social Security Number:** Enter the applicant's Federal Tax Identification Number, Texas State Comptroller Vendor Identification Number, or Social Security Number (nine, fourteen, or nine digits respectively). *The applicant acknowledges, understands, and agrees that the applicant's choice to use a Social Security number as its vendor identification number for the contract, may result in the Social Security number being made public via state open records requests.
6. **Type of Entity:** Check the type of entity as defined by the Secretary of State at <http://www.sos.state.tx.us/corp/businessstructure.shtml> and/or the Texas State Comptroller at https://fm.x.cpa.state.tx.us/fmx/pubs/tins/tinsguide/2009-04/TINS_Guide_0409.pdf and check all other boxes that describe the entity.
 - Historically Underutilized Business: A minority or women-owned business as defined by Texas Government Code, Title 10, Subtitle D, Chapter 2161. (<http://www.window.state.tx.us/procurement/prog/hub/>)
 - State Agency: an agency of the State of Texas as defined in Texas Government Code §2056.001.ii
 - Institutions of higher education as defined by §61.003 of the Education Code.
 - Minority Organization is defined as an organization in which the Board of Directors is made up of 50% racial or ethnic minority members.
7. **HIV Service Delivery Area (HSDA):** Geographic service area set by DSHS to allocate federal and state funds for HIV medical and psychosocial support services.
8. **Counties Served by Project:** A specific region in the State of Texas for delivery of services. Enter the proposed counties served by the project.
9. **Amount of Funding Requested:** Enter the amount of funding per the allocation given from STDC for proposed project activities. This amount must match the Table 1.
10. **Projected Expenditures:** If applicant's projected federal expenditures exceed \$750,000 or its projected state expenditures exceed \$750,000 for applicant's current fiscal year, applicant must arrange for a financial compliance audit (Single Audit).
11. **Project Contact Person:** Enter the name, title, email address, phone number, and fax number of the person responsible for the proposed project.
12. **Financial Officer:** Enter the name, title, email address, phone number, and fax number of the person responsible for the financial aspects of the proposed project.
13. **Authorized Representative:** Enter the name, title, email address, phone number, and fax number of the person authorized to represent the applicant. "Check if change" box if the authorized representative is different from previous submission to STDC.
14. **Authorized Representative Signature:** The person authorized to represent the applicant must sign in this blank.
15. **Date:** Enter the date the authorized representative signed this form.

FORM B: CONTACT PERSON INFORMATION

This form provides information about the appropriate program contacts in the applicant's organization in addition to those on Form A: Face Page. If any of the following information changes during the term of the contract, please notify, HIV Program Manager, in writing within (10) ten days.

Legal Name of Applicant: City of Laredo Public Health Department

Executive Director: Richard A. Chamberlain, DrPH	Mailing Address: (Street, City, State, Zip, County)
Title: Health Director	2600 Cedar Ave. / P.O. Box 2337
Phone: 956-795-4918 Ext.	Laredo, Webb, TX 78040-4040
Fax: 956-726-2632	
Email: rchamberla@ci.laredo.tx.us	
Project Contact: Veronica Gonzalez	Mailing Address: (Street, City, State, Zip, County)
Title: Disease Intervention Supervisor	2600 Cedar Ave. / P.O. Box 2337
Phone: 956-712-6002 Ext.	Laredo, Webb, TX 78040-4040
Fax: 956-795-2035	
Email: vgonzalez@ci.laredo.tx.us	
Financial Contact: Jose Magana, Jr.	Mailing Address: (Street, City, State, Zip, County)
Title: Accounting Manager	1110 Houston St. / P.O. Box 579
Phone: 956-791-7433 Ext.	Laredo, Webb, TX, 78040-8019
Fax: 956-791-7477	
Email: jmagana@ci.laredo.tx.us	
Data Reporting Contact: Genesis Cardenas	Mailing Address: (Street, City, State, Zip, County)
Title: Disease Intervention Manager	2600 Cedar Ave. / P.O. Box 2337
Phone: 956-727-6970 Ext.	Laredo, Webb, TX 78040-4040
Fax: 956-795-2035	
Email: gcardenas@ci.laredo.tx.us	
Clinical Services Contact: Luis Cerda	Mailing Address: (Street, City, State, Zip, County)
Title: Clinical Services Administrator	2600 Cedar Ave. / P.O. Box 2337
Phone: 956-727-6977 Ext.	Laredo, Webb, TX 78040-4040
Fax: 956-795-2419	
Email: lcerda@ci.laredo.tx.us	
Board Chairperson: Joseph Neeb	Mailing Address: (Street, City, State, Zip, County)
Title: City Manager	1110 Houston St. / P.O. Box 579
Phone: 956-791-7302 Ext.	Laredo, Webb, TX, 78040-8019
Fax: 956-791-7498	
Email: jneeb@ci.laredo.tx.us	
Emergency Services Contact: Genesis Cardenas	Mailing Address: (Street, City, State, Zip, County)
Title: Disease Intervention Manager	2600 Cedar Ave. / P.O. Box 2337
Phone: 956-727-6970 Ext.	Laredo, Webb, TX 78040-4040
Fax: 956-795-2035	
Email: gcardenas@ci.laredo.tx.us	

FORM C: ADMINISTRATIVE INFORMATION

This form provides information regarding identification and contract history of the applicant, executive management, project management, governing board members, and/or principal officers. Respond to each request for information **or provide the required supplemental document behind this form.** If responses require multiple pages, identify the supporting pages/documentation with the applicable request.

Legal Name of Applicant: City of Laredo Public Health Department

Identifying Information

If there are no changes to any of the items below, check here.

1. The applicant must attach the following information:

If a Governmental Entity

- Names (last, first, middle) and addresses for the officials who are authorized to enter into a contract on behalf of the respondent.

If a Nonprofit or For profit Corporation

- Full names (last, first, middle), addresses, telephone numbers, titles and occupation of members of the Board of Directors or any other principal officers. Indicate the office held by each member (e.g. chairperson, president, vice-president, treasurer, etc.).
- Full names (last, first, middle), and addresses for each partner, officer, and director as well as the full names and addresses for each person who owns five percent (5%) or more of the stock if respondent is a for-profit corporation.

Conflict of Interest and Contract History

If there are no changes to any of the items below, check here.

The applicant must disclose any existing or potential conflict of interest relative to the performance of the requirements of this renewal application. Examples of potential conflicts include an existing or potential business or personal relationship between the respondent, its principal, or any affiliate or subcontractor, with STDC or any other entity or person involved in any way in any project that is the subject of this renewal application. Similarly, any existing or potential personal or business relationship between the applicant, the principals, or any affiliate or subcontractor, with any employee of STDC must be disclosed. Any such relationship that might be perceived, or represented as a conflict, must be disclosed. Failure to disclose any such relationship may be cause for contract termination. If, following a review of this information, it is determined by STDC that a conflict of interest exists the applicant may be disqualified from further consideration for the renewal of the contract.

1. Does anyone in the applicant organization have an existing or potential conflict of interest relative to the performance of the requirements of this renewal application?

YES NO

If YES, detail any such relationship(s) that might be perceived or represented as a conflict. (Attach no more than one additional page.)

2. Has any member of respondent's executive management, project management, governing board or principal officers been employed by the State of Texas 24 months prior to the renewal application due date?

YES NO

If YES, indicate his/her name, social security number, job title, agency employed by, separation date, and reason for separation.

3. Is respondent or any member of applicant's executive management, project management, board members or principal officers:

- Delinquent on any state, federal or other debt;
- Affiliated with an organization which is delinquent on any state, federal or other debt; or
- In default on an agreed repayment schedule with any funding organization?

YES NO

If YES, please explain. (Attach no more than one additional page.)

FORM D: RYAN WHITE SERVICE DELIVERY (RWSD)
PERFORMANCE MEASURES GUIDELINES

HIV Ryan White Service Delivery (HIV/RWSD) contracts will include the negotiated Table 1 and the total number of unduplicated clients that will be served as the performance measures. Applicant is required to implement the following performance measures listed for the HIV/RWSD funding source and report progress to the South Texas Development Council (STDC) on the Semi-Annual and Annual Program Reports. The performance measures will be used to assess, in part, the applicant's effectiveness in providing the services.

- ▶ Ryan White SD Performance Measures (See form)

FORM D: RYAN WHITE SD PERFORMANCE MEASURES

Applicant agrees that performance measure(s) will be used to assess, in part, the applicant's effectiveness in providing the services described. Address all of the requirements (see Performance Measure Guidelines) associated with the services proposed in this renewal application.

Legal Name of Applicant: City of Laredo Public Health Department

The applicant shall implement the following performance measures and report progress to the South Texas Development Council (STDC) on the Semi-Annual and Annual Program Reports during April 1, 2026, through March 31, 2027, in the designated HIV Service Delivery Area (HSDA).

Performance Measure 1: The City of Laredo Public Health Department (CLPHD) shall use Ryan White SD funds to provide at least one service to (210) unduplicated clients and (3,022) units to be delivered during FY26-27 (04/01/26-03/31/27). Objectives related to the # of persons and units to be provided must be reflected on Table 1: Services Priorities, Allocations, and Objectives.

Performance Measure 2: The (CLPHD) shall engage (9) people living with HIV (PLWH) that know their HIV status and are not in care, bring them into care and to keep them in care to ensure that all efforts are being made to engage, bring, and keep them in care during FY26-27. The (CLPHD) shall revise the proposed Strategic Plan annually and provide updates to STDC.

Performance Measure 3: The (CLPHD) shall input, monitor, and review units of service and clients served within the TCT system. The (CLPHD) shall submit the corresponding information on supplemental justification forms on a monthly basis.

Performance Measure 4: The (CLPHD) shall deliver and monitor services to clients as negotiated on Table 1 and contract in TCT. The (CLPHD) shall adequately complete and report progress on required Program Reports explaining allocations or services that exceeded or fell short of projections.

Performance Measure 5: The (CLPHD) shall submit completed semi-annual and annual reports according to the Reporting Due Dates listed in the contract.

Performance Measure 6: The (CLPHD) shall ensure that no more than ten percent of the Ryan White SD allocation is expended by service provider for administrative costs.

Performance Measure 7: The (CLPHD) shall increase enrollment in Health Plans of eligible persons in the (Laredo) HSDA by no less than 10% for persons that fall between 100% and 200% of the federal poverty level (FPL). This measure is a minimum required for enrollment and FPL levels locally.

Performance Measure 8: The (CLPHD) will submit a program income allocation plan for Ryan White Part B in the (Laredo) by no later than February 9, 2026, to the STDC Fiscal Monitor.

Performance Measure 9: The (CLPHD) ADAP Enrollment Worker's (AEWs) shall accomplish or surpass all Texas HIV Medication Program (THMP) required performance measures listed below.

1. ≥90% of new and recertification AIDS Drug Assistance Program (ADAP) applications are accepted by Texas HIV Medication Program (THMP) as complete upon initial submission.
2. ≥90% of ADAP eligibility recertifications and self-attestations are completed on or before the lapse of ADAP program benefits.
3. ≥90% of Texas Insurance Assistance Program (TIAP) applications are accepted by THMP as complete upon initial submission for insurance assistance.
4. ≥90% of State Pharmacy Assistance Program (SPAP) applications are accepted by THMP as complete upon initial submission for insurance assistance.
5. ≥90% of Texas Insurance Assistance Program-PLUS (TIAP-PLUS) applications are accepted by THMP as complete upon initial submission for insurance assistance.
6. ≥90% of application entries in the "about you" demographic, relationship, household, client financial, insurance, and case notes in TCT are correct and complete.

FORM E: WORK PLANS – GUIDELINES

HIV Ryan White Service Delivery (RWSD) funds shall be used to improve the quality, availability, and organization of health care and support services for individuals and families living with or affected by HIV. Eligible services to be provided include comprehensive outpatient health and support services for persons living with HIV (PLWH).

The applicant's work plan should describe how the funds will be used to deliver comprehensive outpatient health and support services to eligible individuals. The eligible services to be provided with these funds are defined in the DSHS's Standards of Care available at <https://www.dshs.texas.gov/hivstd/taxonomy>. The work plan should emphasize the objectives for HIV Services in the HIV Service Delivery Area (HSDA).

Applicants receiving HIV RWSD funds should actively collaborate with other community organizations to ensure comprehensive HIV care for eligible individuals, maximize access to needed services, coordinate care and support services by leveraging the strengths of different organizations within the community. This includes partnering with Federal Qualified Health Centers, Local Health Departments, and other Community Organizations in the service area to meet client's needs, make successful referrals to one another, and avoid gaps in care. Collaboration helps avoid duplication of services and ensures that funding is used effectively by identifying which agency is best suited to provide specific services. By working with other organizations, applicants ensure clients receive a holistic approach to HIV Care and Support Services.

FORM E: RYAN WHITE SD WORK PLAN (PART 1) GUIDELINES

The applicant's work plan should describe how Ryan White SD funds will be used to deliver proposed services in accordance with the Standards of Care and improve service delivery systems. The work plan should reference and emphasize the goals and objectives for HIV Services in the HIV Service Delivery Area (HSDA). STDC requires collaboration between community organizations, service providers and other HIV-related programs within the HSDA which includes Ryan White Part A, B, C, D and F recipients; Community Based Organizations; Community Health Centers; Counseling-Testing-Prevention Programs; Federally Qualified Health Centers; Health Departments; Homeless Shelters; Housing Assistance Programs; Intellectual Disabilities and Mental Health Providers; Local and Regional Public Health Officials; Migrant Organizations; Substance Use Treatment Facilities; STD Clinical Service Providers; Texas HIV Medication Program; other individuals or agencies with expertise in the delivery of HIV services. Applicants shall collaborate with other providers as cooperative partners in providing a continuum of care for clients and in making successful referrals to one another to meet the needs of the target population.

1. Provide a narrative for each service delivery category being funded or not funded. The narrative should include at a minimum a description of how agency will meet service objectives for funded or not funded services.
 - a). Describe how the allocation supports the delivery of the service within the agency.
 - b). Describe how clients are accessing services not funded through this grant. Specify formal linkages and collaboration with other agencies within the community to ensure clients have access and receive services not being funded under this grant should need be identified.
2. Service Providers must make efforts to ensure services are coordinated with other Ryan White Parts, State Services, and HOPWA funding. Explain how the allocation for each service category is coordinated with other funding received and is utilized by the program to support services for clients.
3. Does your agency have a Memorandum of Agreement (MOA), Memorandum of Understanding (MOU) or Service Agreement (SA) in place for the subcontractor who is delivering this service?

Service Category	Allocation from Table 1	Total Number of Units to be Provided	Total Number of Clients to be Served
Outpatient/Ambulatory Health Services	\$157,751	157	751
Narrative: Please provide a brief narrative for each service delivery category being funded or not funded. Narrative should respond to all questions indicated on #1-3.			
Early Intervention Services			
Health Insurance Premium/Cost Sharing Assistance			
Home and Community-Based Health Services			
Home Health Care			
Hospice Services			
Local AIDS Pharmaceutical Assistance			
Medical Case Management			
Medical Nutritional Therapy			
Mental Health Services			
Oral Health Care			
Substance Abuse Outpatient Care			
Child Care Services			
Emergency Financial Assistance			
Food Bank/Home-Delivered Meals			
Health Education/Risk Reduction			
Housing Services			
Linguistic Services			
Medical Transportation Services			
Non-Medical Case Management			
Other Professional Services			
Outreach Services			
Psychosocial Support Services			
Referral for Health Care/Supportive Services			
Rehabilitation Services			
Respite Care			
Substance Abuse Services (Residential)			
Treatment Adherence Counseling (Non-Medical)			
Other Services *(Requires prior approval)			
Ryan White SD Total:	\$157,751	157	751

FORM E: RYAN WHITE SD WORK PLAN (PART 1)

Address the required elements (see WORK PLAN Guidelines) associated with the services proposed in this renewal application. A maximum of three (3) additional pages may be used for this work plan.

Legal Name of Applicant: City of Laredo Public Health Department

Service Category	Allocation from Table 1	Total Number of Units to be Provided	Total Number of Clients to be Served
Outpatient/Ambulatory Health Services	\$90,091	800	200
The City of Laredo Public Health Department provides ambulatory/outpatient medical services to clients enrolled in the Ryan White Part B Program. Services are delivered by licensed physicians, physician assistants or clinical nurse practitioners in an outpatient setting such as clinics and medical offices. These services ensure access to antiviral treatment, diagnostic testing, early intervention care, preventive care, risk assessments, medication therapy and referrals to specialty care. All HIV treatment follows Public Health Services guidelines and compliance requirements with Ryan White Part B Standards of Care. Funding allocations are based on the monitoring of program expenditures, service utilization reports and Needs Assessment findings for proper use of resources identified by clients' needs. Medical providers operate under fee-for-service contracts that follow scope of services, documentation and billing standards. Each client's medical record includes treatment plan, medication intake, lab results, and any needed referrals.			
Early Intervention Services	\$21,300	40	20
Clients diagnosed with HIV will be linked to clinical and diagnostic services for medical evaluation. These services include routine laboratory testing to assess viral status and for proper treatment care. Services will be provided by Medical Case Managers through program referrals. Ryan White Part B, C, and D case managers will coordinate services to ensure continuum of care. The goal of this service component is to support client awareness of health status and promote treatment and medication adherence through targeted outreach activities. All Early Intervention Services (EIS) will comply with the current Ryan White Part B Standards of Care.			
Health Insurance Premium/Cost Sharing Assistance	\$27,500	300	30
Under the Health Insurance Premium service category, the City of Laredo Public Health Department provides assistance to eligible clients, including those at or below 200% of the Federal Poverty Level (FPL), through linkage to the Texas State Assistance Program for payment of health insurance premiums. Medical Case Managers and Intake Specialist verify and submit all requirement documentation in accordance with Department of State Health Services (DSHS) and Administrative Agency (AA) guidelines. Income, insurance coverage including Medicare, Medicaid and private insurance, are also verified prior to the use of Ryan White Part B funds as payor of last resort and are provided in accordance with the most current Ryan White Part B Standards of Care.			
Home and Community-Based Health Services	\$2,315	5	5
During the contract period, the City of Laredo Public Health Department Ryan White Program will ensure access to Home and Community-Based Health Services to clients that are eligible and in need of this service. Medical Case Manager along with medical provider will access and make referrals to established agencies that adhere to the current Ryan White Part B Standards of Care. All referrals will be documented in the client's file, EMR and TCT.			
Home Health Care	\$	0	0
The City of Laredo Public Health Department Ryan White Program collaborates with state-funded programs to provide eligible clients access to Home Health Care services. CLPHD maintains referral relationships with local Home Health Agencies to facilitate service delivery when in need. All Home Health Care services are provided in accordance with the most current Ryan White Part B Standards of Care.			

Hospice Services	\$0	0	0
Under the Hospice Services category, The City of Laredo Public Health Department Ryan White Program maintains a collaborative referral relationship with the San Antonio AIDS Foundation to ensure access to hospice care for eligible clients if needed. Hospice services can be provided through established referrals and an established working relationship to ensure services are provided in a transparent manner and in compliance with applicable Ryan White Part B requirements. All hospice services adhere to the most current Ryan White Part B Standards of Care for HIV/AIDS Services.			
Local AIDS Pharmaceutical Assistance	\$1,000	15	5
The Ryan White Program ensures EIP-enrolled clients can access HIV treatment medications cost-effectively through a fee-for-service contract with a local licensed pharmaceutical provider. As an approved 340B entity with a specialty contract pharmacy, we significantly improved access to antiviral and non-HIV medications for our clients. The program's drug distribution system includes eligibility verification, an approved drug formulary, recordkeeping and drug therapy management. AIDS Pharmaceutical Assistance services are evaluated regularly for adherence with Ryan White HIV/AIDS Program Standards of Care. Long-term medication assistance is provided only to clients who do not qualify for the Texas HIV Medication Program (THMP) or meet other qualifying criteria. These funds are utilized as a payor of last resort, covering medication costs only after resources such as Medicaid, Medicare, or private insurance have been exhausted. Emergency Financial Assistance (EFA) is available for short-term needs, offering up to a 30-day supply of medications while clients await program approvals.			
Medical Case Management	\$129,998	700	45
Medical case managers assist clients with adherence to their medical treatment plans through education, coordination and monitoring of client needs in accordance with the Ryan White HIV/AIDS Program Standards of Care. Allocated funds under this service category are utilized for medical care, psychosocial services and any other supportive services to include: comprehensive assessment, diagnostics, mental health and housing assistance services. Referrals are provided in compliance with referral protocols. Documentation is kept in client records, EMR and TCT.			
Medical Nutritional Therapy	\$0	0	0
Medical nutrition therapy is provided by the City of Laredo Public Health Department via their licensed nutritionists. An internal MOU exists between the Ryan White Part B Services and the CLPHD's nutritional program to provide these services to clients. Our collaboration with the nutritional program, enables us to ensure that all Medical Nutrition Therapy services are rendered in accordance with the latest Standards of Care for HIV/AIDS Services for Ryan White.			
Mental Health Services	\$0	0	0
Through coordinated use of Ryan White Part C resources and local community partnerships, clients are able to access psychological, psychiatric and counseling services when needed. Services are provided individually and in group settings by a licensed mental health professional authorized in accordance with the most current Ryan White HIV/AIDS Program Standards of Care for HIV/AIDS Services, state and local requirements. Provider credentials and scope of practice are verified to ensure compliance with applicable professional licensure requirements.			
Oral Health Care	\$49,000	90	45
Oral health services include dental exam, cleanings, x-rays and development of treatment plans focused on the prevention of cavities and periodontal gum disease. These services are provided by licensed professionals in compliance with dental practice laws and informed by the American Dental Association (ADA) Dental Practice Parameters. CLPHD maintains fee-for-service agreements with licensed dentists and dental clinics to provide care to HIV/AIDS clients enrolled in the Early Intervention Program (EIP). Clients are usually screened twice a year to ensure cost-effective use of funds and to assist with more crucial procedures. Client dental files include treatment plans and referrals as needed. Ryan White Part C funds are used to supplement Ryan White Part B resources, enhancing client support. All services comply with the latest Standards of Care for HIV/AIDS Services under Ryan White.			
Substance Abuse Outpatient Care	\$	0	0

<p>Clients identified with substance use issues are referred to the Ryan White Part C LPC for proper evaluation and then referred out to local licensed substance use treatment providers. These services are delivered through established programs and community resources with no Ryan White Part B funds allocated for this service category. The primary objective of referral-based substance use services is to reduce barriers to HIV primary medical care, support adherence to antiretroviral therapy (HAART), and facilitate engagement in other necessary treatment services.</p>			
Child Care Services	\$0	0	0
<p>Currently, there has been no identified need for child care services among clients enrolled in the program. Additionally, community-based social programs are available to provide free child care for families in need, ensuring this service remains accessible without requiring program funding.</p>			
Emergency Financial Assistance	\$26,000	40	20
<p>Case management staff utilizes community resources to link clients with organizations that provide assistance with essential utilities such as, food, food cards, bus vouchers and medication support. Emergency Financial Assistance continues to be of major support for enrolled clients. EFA is provided as a short-term, last-resort intervention and is prioritized to ensure uninterrupted access to HIV medications, particularly during gaps in coverage while ADAP eligibility is pending. All assistance is delivered in accordance with Ryan White Part B program requirements and is documented to support continuity of care and treatment adherence.</p>			
Food Bank/Home-Delivered Meals	\$10,000	200	100
<p>This service category supports eligible PLWH through the provision of food assistance to promote adherence to HIV medical care. These services include the distribution of food, prepared meals, and food vouchers. Food vouchers and gift cards are issued in accordance with Ryan White Part B program requirements and are solely to purchase food items; the purchase of tobacco or alcohol is prohibited. Also, as per policy guidelines, no direct cash payments are made to clients and assistance is provided based on eligibility and assessed needs. Services are delivered to support continuity of care, treatment adherence and overall client health outcomes and all documentation is kept in client records, EMR and TCT.</p>			
Health Education/Risk Reduction	\$100	10	10
<p>Risk reduction services are integrated into the City of Laredo Public Health Department's Ryan White Program and are provided through referrals to our HIV Prevention Program as part of case management processes. These services support clients in reducing behaviors that may negatively impact health outcomes and HIV transmission risk. Early Intervention Program clients are offered risk reduction and safe sex health education delivered by trained staff within the program. Risk reduction activities are part of existing Ryan White operations for continuation of treatment adherence and ongoing prevention methods.</p>			
Housing Services	\$0	0	0
<p>Housing assistance for PLWH remains limited. To support continued eligibility and follow housing assistance guidelines, clients are required to pursue Section 8 assistance every three months through an established Memorandum of Understanding with the Ryan White Program. Clients requiring rental assistance are assessed for eligibility and are supported through the HOPWA Program. All housing-related coordination is documented to assure compliance, continuity of care and appropriate linkage to other community resources.</p>			
Linguistic Services	\$0	0	0
<p>All staff in the Ryan White Program is bilingual, enabling effective communication with our primarily Hispanic client population. For clients who do not speak English or Spanish, CLPHD contracts with an external agency that provides translation services in multiple languages, including sign language professionals for individuals who are hearing impaired. As a result, program funds are not required for this service category at this time.</p>			
Medical Transportation Services	\$200	20	10
<p>Based on needs assessments and client surveys, medical transportation has been consistently identified as a critical support service necessary for retention in care and treatment adherence. Medical</p>			

<p>transportation such as bus vouchers ensures continuity of access to outpatient medical appointments and related HIV care services. In addition to public transportation assistance, gas cards are an allowable form of medical transportation support for clients, in accordance with Ryan White program guidelines. All transportation assistance provided is documented and limited to medical related purposes to ensure compliance with program requirements.</p>			
Non-Medical Case Management	\$70,134	800	66
<p>Non-medical case management services are a critical component of comprehensive care for PLWH. These services help support retention in care and self-sufficiency while ensuring the continuity of care. Services include but are not limited to; assessment, care planning, client education, coordination, monitoring and evaluation of access to social, community, legal, financial, and other support services necessary to reduce barriers to care. Referrals are provided in compliance with referral protocols. Documentation is kept in client records, EMR and TCT.</p>			
Other Professional Services	\$0	0	0
<p>Other Professional Services include professional and consultant services provided by licensed and/or qualified individuals as authorized by local governing authorities. No funding is required for this service category during the current grant period.</p>			
Outreach Services	\$100	2	2
<p>The City of Laredo Public Health Department outreach team consists of our program's staff, including HIV Prevention personnel and Ryan White caseworkers. The primary goal of the outreach team is to identify individuals with known or unknown HIV status and link them to Ryan White funded services, including medical care, treatment, and supportive services. CLPHD is committed to ensuring that all outreach activities are delivered in accordance with the most current Ryan White HIV/AIDS Program Standards of Care.</p>			
Psychosocial Support Services	\$0	0	0
<p>Mental health services for PLWH are funded through the Ryan White Part C program; therefore, additional funding for Psychosocial Support Services under this grant is not necessary. Expanded access to mental health care has significantly improved clients' ability to receive timely, appropriate, and effective support. CLPHD maintains strong partnerships with agencies closely affiliated with the health department to ensure that all Psychosocial Support Services are delivered in accordance with the most current Ryan White HIV/AIDS Program Standards of Care. These services are especially critical for newly diagnosed clients who may experience emotional, psychological, or spiritual challenges, as they provide immediate support to facilitate adjustment to diagnosis, engagement in care and treatment adherence.</p>			
Referral for Health Care/Supportive Services	\$0	0	0
<p>Referrals for health care and supportive services are a core component of the CLPHD Ryan White Program. Program staff provide non-medical case management linkages both directly and indirectly to ensure clients are connected to needed services. Referrals are facilitated in person, by telephone, and through written or electronic communication and are offered as part of the outreach program. At this time, this service does not require Ryan White Part B funding, as it is supported through State Services grant. A primary focus of referral; is assisting clients with ADAP eligibility and guiding them through the application process to secure medication assistance through the Texas HIV Medication Program (THMP) or any other PAP resources.</p>			
Rehabilitation Services	\$0	0	0
<p>Local community programs, including the Ruthe B. Cowl Rehabilitation Center, are part of an established agreement with CLPHD to accept referrals for HIV-positive clients requiring assessment and rehabilitation services at no cost. In addition, CLPHD has executed a Memorandum of Understanding (MOU) with the City Detox Department to expand access to critical services. Given the availability of these no-cost community resources, allocation of Ryan White funds for this service category is not needed during this grant period. All services provided through these partnerships are delivered in accordance with the most current Ryan White HIV/AIDS Program Part B Standards of Care.</p>			
Respite Care	\$0	0	0

Community or home-based non-medical assistance, designed to relieve primary caregivers of their day-to-day responsibilities for PLWH, is available through local state-funded programs. These programs provide para-professional care in the home, offering regular relief for primary caregivers. Due to the availability of these services and the low demand for this type of assistance, funding for this category is not required under this grant.

Substance Abuse Services (Residential)	\$0	0	0
Substance Abuse Services (Residential) (SA-R) include screening, assessment, diagnosis, and treatment of drug or alcohol use disorders in a residential setting. During this grant period, no funds are allocated for this category. Instead, PLWH requiring residential treatment will be referred to community agencies, including the City of Laredo Detox Department, through an established partnership with CLPHD. These collaborations ensure clients have access to the necessary care and support services.			
Treatment Adherence Counseling (Non-Medical)	\$0	0	0
These services are generally provided through other HIV-related programs to address the needs of clients. Consequently, funding for this category is not necessary under this grant, as clients can access these services through other CLPHD initiatives. All services in this category are delivered in compliance with the latest Standards of Care for HIV/AIDS Services under Ryan White Programs.			
Other Services	\$0	0	0
N/A			
Ryan White SD Total:	\$427,738	3,022	558

FORM F: RYAN WHITE SD WORK PLAN (PART 2) GUIDELINES

Applicant shall describe its plan for service delivery to the population in the proposed service area(s) and include the responsible person(s) and timelines for accomplishments. The work plan shall address any changes to the needs and the problems identified in the community assessment for improving health status. Describe 2026-2027 planned activities and address the required elements associated with this renewal application.

1. Provide information on the clinical quality assurance and quality management activities for this period. Include copies of most current QM documents, such as the QM Plan, Work Plan, and QM Annual Summary/Evaluation. Describe on ongoing or planned quality improvement projects to strengthen health outcomes or improve health status.
2. Describe community input and needs assessment activities that will occur during the reporting period. Activities may include the examination of the current care delivery systems; assessment of client need for HIV core medical or supportive services; and assessments related to addressing unmet need populations (e.g. assessments of barriers to enrollment in care, examinations of linkage systems). Include responsible person(s) for these activities (e.g. case managers, link to care specialist, etc.)
 - a. Describe activities that will occur during the reporting period designed to bring individuals who are out of care into the care system. Include any expected results or challenges because of these activities.
 - b. Describe activities that will occur during the reporting period designed to ensure that clients who are currently in care and at risk of being lost to care, will be maintained in care. Include the names of the person(s) responsible, collaborative partners, processes and expected results or challenges resulting from these activities.
 - c. Describe new access points created for funded services. Provide specific information on new points of entry into the HIV care system in the HSDA, particularly the points of entry that allow increased access to funded HIV services to clients receiving HIV services (new clinic opening, extended hours added, new program focused on youth, rapid start programs, etc.)
 - d. Provide specific information on the type of evaluation activity that will be conducted in each of the areas below with anticipated start dates, progress, and data results, if available.
 - Revising care systems to meet emerging needs;
 - Ensuring access to quality HIV/AIDS care;
 - Coordinating funded HIV services with other healthcare delivery systems to ensure compliance with payor of last resort (e.g. Marketplace Health Insurance); and
 - Evaluating the impact of funded HIV services and making needed improvements identified through data collection and assessment.
3. Describe other programs and community resources available within the service delivery area utilized to link clients for assistance to maximize funds.
4. Describe how the applicant will provide services to culturally diverse populations (e.g., use of interpreter services, language translation, compliance with ADA requirements, and other means to ensure accessibility for the defined population).
5. Describe who is responsible for Take Charge Texas (TCT) data input and security of data in accordance with policies and contract timeframes. Describe any concerns related to TCT. This should include concerns related to security of data, TCT operation or data input.
6. Describe how the applicant will ensure quality continuation of care for funded services should there be any staffing changes or staffing concerns to make sure it does not affect service delivery. If the applicant is experiencing any changes or concerns that may affect service delivery, please explain the present situation.
7. Describe any technical assistance or training needs. This should include any concerns to improve deficiencies or increase service capabilities.
8. Describe activities that the applicant has in place to minimize the lapsing of funds and monitoring of expenditures for the Ryan White SD contract.

FORM F: RYAN WHITE SD WORK PLAN (PART 2)

Legal Name of Applicant: City of Laredo Public Health Department

The applicant shall implement the work plan planned activities and report progress to the South Texas Development Council (STDC) on the Semi-Annual and Annual Program Reports during April 1, 2025, through March 31, 2026, in the designated HIV Service Delivery Area (HSDA).

1. Provide information on the clinical quality assurance and quality management activities for this period. Include copies of most current QM documents, such as the QM Plan, Work Plan, and QM Annual Summary/Evaluation. Describe on ongoing or planned quality improvement projects to strengthen health outcomes or improve health status.

Narrative: Our program monitors a comprehensive set of quality measures to assess and improve service delivery across all client services, including those funded by Ryan White and State Services components. Oversight of clinical quality assurance and management is provided by the Clinical Quality Coordinator, who is responsible for monitoring performance indicators, analyzing data, updating the CQM Plan, conducting quality assurance activities, managing QI projects, facilitating weekly staff huddles, and documenting all CQM-related meetings.

The primary data system of record is Take Charge Texas (TCT), with Patagonia serving as the next primary system where scanned hardcopies and supplemental records are securely uploaded to maintain complete client files. Care 360 and physical records are also utilized to support data collection. Quarterly performance reports are generated using consistent methodologies to ensure accuracy and comparability. Data entry is completed by case managers and the data manager, while the Clinical Quality Coordinator ensures quality assurance and data integrity across all systems.

For the 2026–2027 performance period, the program will implement targeted Quality Improvement Projects aimed at strengthening health outcomes in viral suppression and retention in care. The priority populations for these initiatives include Hispanic MSM, youth under 24, aging clients (55+), Hispanic women, and individuals with substance use disorders. Planned strategies feature bilingual support groups, the creation of client-friendly clinic spaces, extended clinic hours to increase accessibility, enhanced detox navigation and relapse prevention workshops, and quarterly wellness calls designed to support aging clients.

In addition to population-specific projects, the program will adopt system-wide strategies to support continuous quality improvement. These include enhanced tracking of missed appointments with root cause analysis, the use of spreadsheets and internal monitoring tools to evaluate outcomes by demographic factors, and monthly complex case reviews for clients with higher acuity needs. All QI activities are aligned with the program's annual quality goals, which include improving data completeness, increasing viral suppression and retention rates, strengthening compliance with performance measures, and expanding consumer participation in CQM activities by 25%.

2. Describe community input and needs assessment activities that will occur during the reporting period. Activities may include the examination of the current care delivery systems; assessment of client need for HIV core medical or supportive services; and assessments related to addressing unmet need populations (e.g. assessments of barriers to enrollment in care, examinations of linkage systems). Include responsible person(s) for these activities (e.g. case managers, link to care specialist, etc.)

Our Ryan White Program is constantly evaluating barriers that PLWH face while accessing medical care. With clients' feedback, our program can explore options to minimize these barriers and be able to increase services where the need is. Our client satisfaction surveys continue to be used to address areas of improvement and the constant communication with caseworkers is key to provide the best quality care to these clients.

- a. Describe activities that will occur during the reporting period designed to bring individuals who are out of care into the care system. Include any expected results or challenges because of these activities.

Narrative: Our approach to re-engaging individuals who are out of care is centered on client-focused outreach conducted by HIV Prevention and Early Intervention Services (EIS)/Outreach staff. The primary objective is to re-establish contact

with individuals who have been discharged due to noncompliance or who have not renewed or recertified with the goal of reconnecting them to care and treatment as quickly as possible.

- **Direct Client Engagement:** Personalized outreach efforts include mailed letters, targeted print and social media messaging and home visits to clients' last known addresses. These strategies are designed to reduce barriers to re-engagement, reach clients through multiple communication channels and create opportunities for direct, supportive contact.
- **Case Management:** Case management staff play a critical role in supporting clients' return to care by promoting treatment adherence, healthcare compliance and routine primary medical visits. As part of the outreach team, case managers actively follow up with individuals who have fallen out of care while also working with current clients to prevent disengagement and address barriers before any interruption in medical care occurs.
- **Education and Empowerment:** Outreach efforts emphasize educating clients about the full scope of comprehensive medical and psychosocial services available through the CLPHD LETS Program. By ensuring clients clearly understand the benefits of sustained engagement in care, the program supports informed decision-making, strengthens retention in care and improves overall health outcomes.

- b. Describe activities that will occur during the reporting period designed to ensure that clients who are currently in care and at risk of being lost to care, will be maintained in care. Include the names of the person(s) responsible, collaborative partners, processes and expected results or challenges resulting from these activities.

Narrative: Our Ryan White Program has four Medical Case Managers who are responsible for supporting client adherence to medical care and retention in services. Case managers conduct routine treatment adherence discussions and provide education to engage clients in their care and support compliance with prescribed treatment regimens. Program staff, including the Intake/Eligibility Specialist, assess clients' needs and financial status to identify and address barriers that may interfere with access to care. Medical case managers maintain ongoing communication and coordination with clinic staff, including medical providers and MOAs. Missed appointments are followed up by case managers, rescheduled and documented to show monitoring and retention efforts.

- c. Describe new access points created for funded services. Provide specific information on new points of entry into the HIV care system in the HSDA, particularly the points of entry that allow increased access to funded HIV services to clients receiving HIV services (new clinic opening, extended hours added, new program focused on youth, rapid start programs, etc.)

Narrative: The HIV Prevention component at City of Laredo Public Health Department plays a crucial role when identifying newly diagnosed individuals through our testing services and referring them to the Ryan White Program for linkage to care. Prevention and Early Intervention Program (EIP) staff support outreach efforts to re-engage clients lost to care as well. The CLPHD maintains established MOUs with internal programs, including TB, STD, Immunization and HIV Prevention, as well as external partners such as Border Region Behavioral Health Center, SCAN, Gateway Community Health Center and other community-based providers. The Health Department also hosts medical residents within the HIV Program to enhance awareness of available resources and improve linkage to care. Through these coordinated efforts, the CLPHD supports identification of new clients, re-engagement of individuals lost to care and delivery of comprehensive services for PLWH.

- d. Provide specific information on the type of evaluation activity that will be conducted in each of the areas below with anticipated start dates, progress, and data results, if available.

- Revising care systems to meet emerging needs;

Narrative: We will continue to conduct quarterly client meetings for service updates, address emerging issues, share messages from guest speakers and obtain feedback on our service delivery. These meetings provide client engagement and support continuous quality improvement. Although, participation is mainly for PLWH, the feedback gathered is essential for evaluating and strengthening services provided. Feedback is also collected through ongoing client

satisfaction surveys to assess service effectiveness, accessibility, quality and to identify barriers to medical care. These surveys will be ongoing throughout the grant year.

- Ensuring access to quality HIV/AIDS care;

Narrative: Access to HIV/AIDS care is ensured through client-centered service delivery system that includes; linkage to medical care and treatment adherence. Clients are connected to licensed medical providers for comprehensive outpatient HIV medical services, including routine laboratory and antiretroviral therapy monitoring. Non-medical case management supports care coordination, appointment adherence, and linkage to supportive services such as transportation, housing and food assistance. Services are delivered through coordination with other healthcare and community-based agencies to ensure referrals for continuum of care that promotes good health outcomes for PLWH.

- Coordinating funded HIV services with other healthcare delivery systems to ensure compliance with payor of last resort (e.g. Marketplace Health Insurance);

Narrative: Coordination of HIV services with other healthcare delivery systems is monitored through program guidelines and policies to ensure compliance with Ryan White Standards of Care. Medical Case Managers along with Eligibility Specialist assist clients with insurance verification during the intake process and during any changes during the enrollment period. This includes screening for Marketplace Health Insurance, Medicaid and/or Medicare coverage. Clients are also assisted with insurance enrollment with the assistance of our Insurance Navigator to ensure medical coverage. Ryan White funds are only used for allowable services that are not covered or when coverage is temporarily unavailable. Coordination with medical providers and pharmacies supports continuity of care. Ongoing monitoring and is used to verify compliance and maintain fiscal and programmatic accountability.

- Evaluating the impact of funded HIV services and making needed improvements identified through data collection and assessment.

Narrative: We use multiple evaluation mechanisms to assess the quality, effectiveness, and impact of our Ryan White-funded services. These mechanisms include gathering feedback from clients and providers, conducting performance evaluations, and analyzing data from systems such as TCT along with our spreadsheets and internal monitoring tools. Regular client needs assessments allow us to identify emerging service gaps, which has previously led to the successful addition of new service categories that directly respond to client priorities. This process demonstrates our ongoing commitment to adapting services to meet the evolving needs of the community.

Our spreadsheets and internal monitoring tools are central to evaluating program impact, as they track outcomes such as viral suppression, retention in care, and disparities across demographic groups. Data is reviewed each month by the Clinical Quality Coordinator and presented quarterly to program leadership. Missed appointment follow-up protocols include root cause analysis so that interventions can be tailored to client needs, such as transportation support, adjustments to reminder methods, or peer navigation. Consumer input gathered through satisfaction surveys, feedback from support groups, and direct meetings with clients is also incorporated into evaluation reports to ensure that the client voice is central to service design. Evaluation findings are reviewed during weekly staff huddles, CQM meetings, and semi-annual program reports. Corrective actions and quality improvement initiatives are developed from these findings, which ensures that services remain responsive, client-centered, and effective in achieving health outcomes.

3. Describe other programs and community resources available within the service delivery area utilized to link clients for assistance to maximize funds.

Narrative: The CLHD has established multiple Memorandums of Understanding (MOUs) with public and private community providers to ensure a comprehensive continuum of care for PLWH. These partnerships support retention in care, improved health outcomes, viral suppression and the reduction of new HIV infections. Collaboration with HIV stakeholders and community-based organizations remains a program priority. Staff utilize pharmaceutical assistance programs to obtain medications at low or no cost to clients and when needed, coordinate with community partners such as Catholic Social Services, the Laredo HSDA HIV/AIDS Consortium, Section 8 Housing, Gateway Community Health Center, Webb County Indigent Program and various agencies to address any medical care barriers

4. Describe how the applicant will provide services to culturally diverse populations (e.g., use of interpreter services, language translation, compliance with ADA requirements, and other means to ensure accessibility for the defined population).

Narrative: All CLPHD staff associated with the Ryan White HIV/AIDS Program participate in required annual cultural sensitivity and competency training. Trainings are provided through the Texas Department of State Health Services (DSHS), by the City of Laredo Public Health Department and by attending conferences throughout the year. These trainings support staff awareness on evolving cultural, linguistic and demographic considerations to promote best practices in serving diverse populations such as our LGBTQ+ community. Cultural competency training supports staff's ability to deliver client-centered services, establish effective relationships and reduce barriers to care. Staff also participate in supplemental webinar-based trainings disseminated by STDC and other partners to maintain current knowledge. Additionally, the CLPHD complies with the Americans with Disabilities Act (ADA) requirements to ensure accessibility for all clients, regardless of physical or functional needs.

5. Describe who is responsible for Take Charge Texas (TCT) data input and security of data in accordance with policies and contract timeframes. Describe any concerns related to TCT. This should include concerns related to security of data, TCT operation or data input.

Narrative: The CLHD TCT Data Manager is Ms. Iran Solis, who oversees TCT data management and participates in all required TCT-related trainings. All CLPHD staff with authorized TCT access adhere to program and state policies to ensure data integrity, confidentiality and security. Access is restricted to designated staff and secured behind locked doors and technical controls requiring unique usernames and passwords that are not shared. These administrative, physical and technical protections ensure the confidentiality and integrity of TCT data and support full compliance with program requirements.

6. Describe how the applicant will ensure quality continuation of care for funded services should there be any staffing changes or staffing concerns to make sure it does not affect service delivery. If the applicant is experiencing any changes or concerns that may affect service delivery, please explain the present situation.

Narrative: The City of Laredo Public Health Department has provided HIV care services for more than 25 years, establishing a strong foundation for the delivery of comprehensive primary medical and supportive services. The program is fully staffed with qualified professionals experienced in delivering all services in accordance HIV Standards of Care. At this time, there are no identified staffing or service delivery concerns that would impact program operations.

7. Describe any technical assistance or training needs. This should include any concerns to improve deficiencies or increase service capabilities.

Narrative: Our administrative agency, STDC, works closely with the program to address and resolve technical assistance needs. STDC provides ongoing support with specialized training opportunities that enhance clinical practices, our service delivery and support compliance with program requirements, including TCT related practices. This collaboration, improves staff capacity and ensures smooth program operations and data management. The continued partnership with STDC reflects with the delivery of high-quality HIV care and support services.

8. Describe activities that the applicant has in place to minimize the lapsing of funds and monitoring of expenditures for the Ryan White SD contract.

Narrative: Medical case managers and administrative assistant along with the Disease Intervention Supervisor monitor regularly the target budget for outgoing referrals. Expenditures are also reported on a monthly basis and assessed to ensure expenditures align with the approved budget. Any fiscal issues are identified and addressed promptly. When budget transfers or reallocations are necessary, requests are submitted to STDC in a timely manner to prevent lapses in funding. This ensures appropriate use of funds, compliance with program requirements and continuity of services throughout the contract period.

BUDGET FORMS G: BUDGET GUIDELINES

Budget forms are in separate Microsoft Excel format for the required funding source. Required budget forms must be completed in Excel format. Do not convert forms to PDF.

Microsoft Excel Attachments:

HIV Ryan White SD:

- Budget Allocation Form
- Categorical Budget Justification Form
- Detailed Unit Cost Form

Instructions:

1. Please complete required budget forms for Ryan White SD allocation for the period of (04/01/2026-03/31/2027) for the respective HSDA.
2. Complete and submit a twelve-month (12) Categorical Budget Justification Form and Budget Allocation Form. Submit budget in whole dollars only, no cents.
3. Complete a Detailed Unit Cost Form reflecting costs for primary and subcategories.

Note: Check the formulas used and ensure that the numbers in the budget forms are accurate, match the dollar amounts in the other budget forms, as applicable and add up correctly.

ASSURANCE FORMS

All Assurance Forms are in separate Microsoft Word file. Complete one (1) set of assurances, Form H through Form P.

Microsoft Word Attachment:

- FORM H: HIV Assurances
- FORM I: Non-Profit Board of Directors and Executive Director Assurances
- FORM J: Contractor Assurance Regarding Pharmacy Notification
- FORM K: Contractor Assurance Form Sanctions for Client Abuse and/or Neglect
- FORM L: Contractor Assurance Form Sanctions for Evidence of Child Abuse and/or Neglect
- FORM M: Contractor Assurance of Compliance with Standing Delegation Orders
- FORM N: Contractor Assurance of Compliance with Training, Education, and Licensure
- FORM O: Contractor Assurance of Compliance with Requirements for Contents of AIDS related Written Materials
- FORM P: Assurances and Certifications