**Attachment 13**

Service Delivery Experience Table

**Advancing Health Equity through Comprehensive Community-Based HIV Ambulatory Care Services – Reissue**

**RFA #24-0003**

Indicate how many years of experience have been provided for the listed services and estimate the number of clients who received those services in the most recent calendar year.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Years of Experience** | **Services Provided** | **Number of Clients Per Year** | **Additional Information** |
| **Sexually Transmitted Infection (STI) Screening and Treatment** |  |  |  |  |
| **HIV Testing Services** |  |  |  |  |
| **HIV Prevention Services** |  |  |  |  |
| **PrEP / PEP****Provision** |  |  |  |  |
| **Hepatitis Screening** |  |  |  |  |
| **HIV ART Treatment** |  |  |  |  |
| **Enrollment in insurance programs, medical assistance programs, and patient assistance programs** |  |  |  |  |
| **Providing direct supportive services** |  |  |  |  |
| **Linkage and navigation to other supportive service providers, to ensure comprehensive care and reduce barriers to engagement** |  |  |  |  |