



The **Washington, D.C. Regional Planning Commission on Health and HIV (COHAH)** will invigorate planning for HIV prevention and care programs that will demonstrate effectiveness, innovation, accountability, and responsiveness to our community.

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING AGENDA

WEDNESDAY, JUNE 26, 2024 11:00AM TO 1:00PM

ELECTRONIC MEETING VIA ZOOM VIDEO CONFERENCING

ELECTRONIC – ONLINE MEETING

Note: all times are approximate

11:05 am	<ol style="list-style-type: none"> 1. Call to Order and Moment of Silence 2. Welcome and Introductions
11:10 am	<ol style="list-style-type: none"> 3. Adopt Agenda for June 26, 2024 4. Approve Minutes for May 29, 2024
11:15 am	5. Ryan White HIV/AIDS Program (RWHAP) – Reports & Financial Oversight
11:45 am	6. Other Business <ul style="list-style-type: none"> - EFA Service Standard update - MAI - PSRA
12:15 pm	7. Announcements and Adjournment

**NEXT COMPREHENSIVE PLANNING
COMMITTEE (CPC) MEETING:**

**WEDNESDAY JULY 24, 2024
11AM TO 1PM
ELECTRONIC MEETING VIA ZOOM VIDEO
CONFERENCING (ONLINE)**

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, MAY 29, 2024 – 11:00AM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	COMMITTEE MEMBERS	PRESENT	ABSENT
Carney, Misty		X			
Clark, Lamont (<i>Gov. Co-Chair</i>)	X				
DeMartino, Peter		X			
Lewis, Jason	X				
Palmer, Kentrell (Kenny)		X	COMMUNITY PARTNERS/GUESTS	PRESENT	ABSENT
Ramos, Claudia	X		Lewis, Rodney	X	
Stuckey, Christopher		X			
Shaw-Richarson, Re'ginald		X			
RYAN WHITE RECIPIENT STAFF	PRESENT	ABSENT	CONSULTANTS	PRESENT	ABSENT
Edmonds, Jason	X				
Price, Ashley	X				
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT
Orban, Julie	X		Bailey, Patrice	X	
			Johnson, Alan	X	

HIGHLIGHTS

NOTE: This is a draft version of the May 29, 2024, Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the June 26, 2024, meeting and made available thereafter.

AGENDA

ITEM	DISCUSSION
Call to Order	Lamont C. called the meeting to order at 11:05 am, followed by a moment of silence and introductions.
Review and Adoption of the Agenda	Hearing no changes to the May 29, 2024, Meeting Agenda, Lamont assumed the motion to adopt the agenda as presented.
Review and Approval of the Minutes	Hearing no corrections to the April 24, 2024, Meeting Minutes. Lamont assumed the motion to approve the meeting minutes as presented.

<p>Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight</p>	<p><u>Ashley P. presented the Recipient Report</u> The Part A and Part A MAI report is being presented for the months of March, Grant Year 34. The partial award received was in the amount of \$9,367,470.</p> <p><u>FISCAL STATUS</u> Twenty-five (25) of twenty-six (26) providers have submitted payment requests that were processed for Part A and Part A MAI in March 2024.</p> <p>There were no service delivery challenges noted in DC, Maryland or Virginia.</p> <p><u>PART A FISCAL SUMMARY</u> Part A expenditures were at 6% and should have been at 8%.</p> <p>Services affected by unprocessed invoices were Early Intervention Services (EIS), Medical Case Management (MCM), Non- Medical Case Management (NMCM), and Psychosocial Support Services (PSS).</p> <p>Services spending 30% below expected were Outpatient/Ambulatory Health Services (OAHS), Health Insurance Premium & Cost Sharing Assistance (HIPCSA), Home and Community Based Health Services (HCBS), and Housing Services (HS). Underspending in Housing Services is due to the services beginning April 1.</p> <p>Services spending 30% above expected were Emergency Financial Assistance (EFA) due to the increase in inflation, and Other Professional Services (OPS), which is under-allocated and is currently being reviewed.</p> <p><u>PART A MAI FISCAL SUMMARY</u> Part A MAI expenditures were at 6% and should have been at 8%.</p> <p>There were no service areas affected by unprocessed invoices.</p> <p>Services spending 30% below expected were Medical Transportation (MT), and Non-Medical Case Management (NMCM).</p> <p>The service spending 30% above expected was Substance Abuse Services – Outpatient (SASO).</p> <p><u>RECIPIENT REPORT</u> The Recipient has not yet received the full notice of Award from HRSA. Continuations were authorized based on expected funding.</p> <p>The Recipient convened the first Minority AIDS Initiative (MAI) - Youth Reach program meeting of the grant period. During the session, they addressed program expectations, examined data from previous years, exchanged strategies for youth engagement, and shared thoughts on the future direction of the MAI program.</p> <p>Recipient staff are working with COHAH’s ISC to review EFA caps against the rising costs of inflation. Increases in caps for food and rental assistance will</p>
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	<p>require the reprogramming of funds into the service category to maintain existing levels of service delivery. Claudia R. asked about the process for having EFA standards reviewed and modified. Ashley responded that the suggestion is brought before the ISC committee who makes the recommendation to the Recipient office. Claudia asked to be added to the ISC meeting notification list to learn more and reiterate the need for the change.</p> <p>Ashley also reported that the Part A Close-out Report is due today.</p> <p>The full PSRA is scheduled for August. On May 30th there will be some MAI discussion. In the month of June there will be information given around alternative funding sources throughout the EMA by George Washington University. July is up in the air. The Ryan White Conference is in August therefore, the series of jurisdictional meetings for PSRA will be held in the last week in August leading up to the roll-up.</p> <p>Rodney L. asked if there is a document that records historic underspending or under-utilization of services. Lamont responded that the information is included in the Roll-up Report the Recipient provides at the CPC, and the Closeout Reports.</p>
Other Business	None noted.

ANNOUNCEMENTS/OTHER DISCUSSION

<p>Julie O. is attending the SYNChronicity 2024 Conference this week. Therefore, she will not be at the next few meetings.</p> <p>Lamont announced the upcoming Pride month activities. Lamont further announced that he is exploring ways to honor everyone’s desire for meeting environments, whether in-person, virtual or a hybrid situation</p> <p>Rodney L. asked the committee to send all information about Pride events to him to forward to the LGBTQ+ Resource office at Howard University.</p>
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HANDOUTS

<ul style="list-style-type: none"> • May 29, 2024, Comprehensive Planning Committee (CPC) Meeting Agenda • April 24, 2024, Comprehensive Planning Committee (CPC) Meeting Minutes • Recipient Reports for March 2024

MEETING ADJOURNED	11:28pm	NEXT MEETING	WEDNESDAY JUNE 20, 2024 11:00am to 1:00pm ZOOM CONFERENCE AND VIDEO CALL
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Date: June 26, 2024

To: Comprehensive Planning Committee (CPC)

From: Ryan White HIV/AIDS Program (RWHAP) Recipient Staff

**Re: Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding)
Year 34 - Reporting Period: April 1 – 31, 2024**

Part A and Part A MAI. The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 34 includes two components: Part A and Part A Minority AIDS Initiative (MAI). These reports are designed to report distinctly on the associated program activities. **For GY 34 the recipient received a full award in the amount of \$32,559,498.**

Notes on Overview. The fiscal spreadsheets list the service categories by Part and jurisdiction and identify the reported expenditure as a proportion of expected-to-date. The COHAH has requested an explanation of those service categories with a 30% variance from the target percentage.

FISCAL STATUS

For Part A and Part A MAI:

April 2024 - twenty-seven (27) of the twenty-seven (27) providers submitted payment requests that were processed, and zero (0) provider has not yet submitted **April 2024** invoices.

SERVICE DELIVERY CHALLENGES

DC: No challenges.

MD: No challenges.

VA: No challenges.

PART A FISCAL SUMMARY

Part A expenditures are 13% and should be 17%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

N/A

Services 30% below expected:

Outpatient/Ambulatory Health Services (OAHS)
Early Intervention Services (EIS)
Health Insurance Premium & Cost Sharing Assistance (HIPCSA)
Home and Community Based Health Services (HCBS)
Medical Nutrition Therapy (MNT)
Medical Case Management (MCM)
Housing Services (HS)

Services 30% above expected:

Other Professional Services (OPS)

PART A MAI FISCAL SUMMARY

Part A MAI expenditures are 12% and should be 17%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

N/A

Services 30% below expected:

Early Intervention Services (EIS)
Medical Transportation (MT)
Non-Medical Case Management (NMCM)
Psychosocial Support Services (PSS)

Services 30% above expected:

N/A

RECIPIENT REPORT

1. Notice of Award. The Recipient received the full Notice of Award for GY34 from HRSA. The overall award is \$92,691 less than GY33.
2. Grant Year Closeout. The Recipient submitted GY33 closeout documents to HRSA on time, which included the Annual Progress Report, Final Expenditure Report and Federal Financial Report.
3. Final Carryover Request. The Recipient is preparing to submit the final FY23 carryover request on June 28, 2024.
4. Priority Setting and Resource Allocation (PSRA) Data Request. The Recipient is in receipt of the 2024 (GY35) PSRA Data Request and is working to compile all required elements for the meetings in August.
5. The Recipient is working with ISC to revise EFA caps. Recipient staff are creating and reviewing financial models.

Washington, DC EMA Ryan White PART A/MAI Grant Year 34 Report thorough March 2024

PART A Notice of Grant Award: \$32,559,498

Jurisdiction	Current Award-Finalized	Expenditures	Remaining Balance	Percent Spent	Comments
District of Columbia - PART A	\$19,514,663	\$2,570,100	\$16,944,563	13%	
District of Columbia - MAI	\$1,620,119	\$220,090	\$1,400,030	14%	
District of Columbia Subtotal	\$21,134,782	\$2,790,189	\$18,344,593	13%	
Northern Virginia - PART A	\$1,988,404	\$233,204	\$1,755,200	12%	
Northern Virginia - MAI	\$229,451	\$17,881	\$211,570	8%	
Northern Virginia Subtotal	\$2,217,855	\$251,086	\$1,966,769	11%	
Suburban Maryland - PART A	\$3,308,926	\$357,084	\$2,951,842	11%	
Suburban Maryland - MAI	\$325,000	\$27,924	\$297,076	9%	
Suburban Maryland Subtotal	\$3,633,926	\$385,008	\$3,248,918	11%	
West Virginia - PART A	\$452,699	\$71,803	\$380,896	16%	
West Virginia Subtotal	\$452,699	\$71,803	\$380,896	16%	
TOTAL PART A	\$25,264,692	\$3,232,191	\$22,032,501	13%	
TOTAL - MAI	\$2,174,570	\$265,895	\$1,908,675	12%	
TOTAL GRANT	\$27,439,262	\$3,498,085.85	\$23,941,176.15	13%	

Washington, DC EMA Ryan White PART A/MAI Grant Year 34 Report through March 2024
PART A

SERVICE CATEGORY	CURRENT AWARDS	EXPENDITURES TO DATE								COMMENTS
		DC	MD	VA	WVA	Total	Reported %	Expected \$	Expected %	
Outpatient/Ambulatory Health Services (OAHS)	\$3,425,736.00	\$281,223.10	\$75,567.19	\$18,139.66		\$374,929.95	11%	\$570,956.00	17%	Recipient staff will continue to actively monitor spending.
Oral Health Care	\$1,543,556.00	\$147,582.01	\$38,098.66	\$4,141.42		\$189,822.09	12%	\$257,259.33	17%	
Early Intervention Services (EIS)	\$4,549,208.00	\$352,739.45	\$31,655.00	\$126,101.52		\$510,495.97	11%	\$758,201.33	17%	Recipient staff will continue to actively monitor spending.
Health Insurance Premium & Cost Sharing Assistance (HIPCSA)	\$108,201.00		\$2,597.53		\$5,319.13	\$7,916.66	7%	\$18,033.50	17%	Low service utilization. Recipient staff will continue to actively monitor spending.
Home and Community-Based Health Services (HCBS)	\$130,667.00	\$17,415.31				\$17,415.31	13%	\$21,777.83	17%	Recipient staff will continue to actively monitor spending.
Mental Health Services (MHS)	\$537,632.00	\$83,632.29		\$1,394.63		\$85,026.92	16%	\$89,605.33	17%	
Medical Nutrition Therapy (MNT)	\$254,896.00	\$20,698.04	\$7,296.00			\$27,994.04	11%	\$42,482.67	17%	Recipient staff will continue to actively monitor spending.
Medical Case Management (MCM)	\$3,885,043.00	\$294,874.20	\$90,432.39	\$30,481.53	\$18,672.43	\$434,460.55	11%	\$647,507.17	17%	Staff vacancies. Recipient staff will continue to actively monitor spending.
Substance Abuse Services - Outpatient (SASO)	\$313,668.00	\$59,228.31		\$1,181.40		\$60,409.71	19%	\$52,278.00	17%	
Non-Medical Case Management Services (NMCM)	\$2,931,716.00	\$282,921.13	\$65,129.87	\$17,490.28		\$365,541.28	12%	\$488,619.33	17%	
Emergency Financial Assistance (EFA)	\$2,542,761.00	\$464,810.46			\$39,337.70	\$504,148.16	20%	\$423,793.50	17%	
Food Bank/Home Delivered Meals	\$1,766,660.00	\$307,972.42				\$307,972.42	17%	\$294,443.33	17%	
Other Professional Services (OPS)	\$150,000.00	\$39,789.80				\$39,789.80	27%	\$25,000.00	17%	Recipient staff will continue to actively monitor over spending.
Medical Transportation (MT)	\$281,100.00	\$18,184.73	\$11,516.84	\$1,025.16	\$7,200.00	\$37,926.73	13%	\$46,850.00	17%	
Housing Services (HS)	\$760,000.00	\$7,898.40				\$7,898.40	1%	\$126,666.67	17%	Service category is underawarded. Grant start date 4/1/24. Recipient staff will continue to monitor. Expenditures are expected to increase during Q2.
Outreach Services (OS)	\$276,586.00	\$17,039.92	\$21,671.95		\$1,273.38	\$39,985.25	14%	\$46,097.67	17%	
Psychosocial Support Services (PSS)	\$1,807,262.00	\$174,090.16	\$13,118.92	\$33,248.64		\$220,457.72	12%	\$301,210.33	17%	
TOTAL	\$25,264,692.00	\$2,570,099.73	\$357,084.35	\$233,204.24	\$71,802.64	\$3,232,190.96	13%	\$4,210,782.00	17%	

Underspent over 30%

Overspent over 30%

Washington, DC EMA Ryan White PART A/MAI Grant Year 34 Report through March 2024
PART A MAI

SERVICE CATEGORY	CURRENT AWARDS	EXPENDITURES TO DATE							COMMENTS
		DC	MD	VA	Total	Reported %	Expected \$	Expected %	
Outpatient/Ambulatory Health Services (OAHS)	\$552,887.00	\$69,248.52	\$3,206.28	\$4,350.36	\$76,805.16	14%	\$92,147.83	17%	
Early Intervention Services (EIS)	\$430,938.00	\$34,279.47	\$9,849.33	\$4,705.81	\$48,834.61	11%	\$71,823.00	17%	Low service utilization. Recipient staff will continue to actively monitor spending.
Mental Health Services (MHS)	\$287,982.00	\$32,946.52	\$2,500.47		\$35,446.99	12%	\$47,997.00	17%	
Medical Case Management (MCM)	\$338,710.00	\$33,766.80	\$8,767.25	\$1,826.17	\$44,360.22	13%	\$56,451.67	17%	
Medical Transportation (MT)	\$10,000.00				\$0.00	0%	\$1,666.67	17%	New optional service category under MAI. Recipient staff will continue to actively monitor spending. Expenditures are expected to increase during Q2.
Non-Medical Case Management (NMCM)	\$170,000.00	\$13,742.73			\$13,742.73	8%	\$28,333.33	17%	New optional service category under MAI. Recipient staff will continue to actively monitor spending. Expenditures are expected to increase during Q2.
Substance Abuse Services - Outpatient (SASO)	\$66,899.00	\$13,949.81	\$648.21		\$14,598.02	22%	\$11,149.83	17%	
Psychosocial Support Services (PSS)	\$317,154.00	\$22,155.65	\$2,952.55	\$6,998.96	\$32,107.16	10%	\$52,859.00	17%	Low service utilization. Recipient staff will continue to actively monitor spending.
TOTAL	\$2,174,570.00	\$220,089.50	\$27,924.09	\$17,881.30	\$265,894.89	12%	\$362,428.33	17%	

Underspent over 30%

Overspent over 30%