

PLANNING COMMISSION (COHAH) GENERAL BODY MEETING MINUTES

THURSDAY, APRIL 29, 2021 - 6:00PM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	COMMISSIONERS	PRESENT	ABSENT
Adkins, Sarcia (Comm. Co-Chair)	X		Keita, Ramatoulaye		x
Blocker, Lakisa		X	Massie, Jenné	X	
Brown, Charles	X		McBride, Dennis		ML
Bryant, Larry		X	McClain, Lenora	X	
Camara, Farima	X		Mekonnen, Betelhem (Comm. Vice-Chair)	X	
Carney, Misty	X		Murdaugh, Henry	X	
Cauthen, Melvin	X		Palmer, Kentrell	X	
Coker, Sharon	X		Padmore, Gerald	X	
Copley, Mackenzie	X		Pettigrew, Kenneth (Gov't Co-Chair)	X	
Corbett, Wallace		X	Rakhmanina, Natella	X	
Cox, Derrick		X	Rhodes, Stefanie		X
Dean, Traci		X	Sain, Philip	X	
DeMartino, Peter	X		Shaw-Richardson, Re'ginald	X	
Fogal, Doug	X		Shazor, Charles		X
Ford, Jasmine		X	Torre, Andrew	X	
Forman, Lynn	X		Uyouko, Haris		X
Gomez, Ana		X	Wallis, Jane		X
Gutierrez, Anthony	X		Washington, Antonio	X	
Hickson, DeMarc		X	Yocum, Ashley	X	
Hutton, Kenya	X				
RECIPIENT STAFF	PRESENT	ABSENT		PRESENT	ABSENT
Barnes, Clover	X				
			Varga, Leah	X	
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION STAFF	PRESENT	ABSENT
Johnson, Alan	X		Bailey, Patrice	x	
Jefferson, Regina	X		Clark, Lamont	X	

HIGHLIGHTS

This is a draft version of the April 29, 2021 COHAH General Body Meeting Minutes which is subject to change. The final version will be approved on May 27, 2021.

AGENDA

Item	Discussion
Call to Order	The meeting was called to order by Sarcia A. at 6:08 pm, followed by a moment of silence.
Welcome and Introductions/Roll Call	Attendance of Commissioners was taken by Roll Call. With 23 commissioners present for roll call, quorum was established. Clover B. announced that Michael Kharfen was no longer with HAHSTA. She stated that Dr. Anjali Talwalkar is the Interim Senior Deputy Director and she will introduce herself to COHAH at the next month's meeting.
Review and Adoption of the Agenda	Voting was conducted via zoom polling. The agenda was adopted unanimously.
Review and Approval of the Minutes	Voting was conducted via zoom polling. The minutes were approved unanimously.
HIV/AIDS Data Privacy Protection Amendment Act of 2021 Update	<p>Brittani C. provided a presentation and update of HIV Surveillance Data Protection (slides available upon request). Of note:</p> <ul style="list-style-type: none"> - HIPAA Privacy Act allows sharing disease-specific data with the health department mandating this for public health purposes. - DC Code 7-1065. Confidentiality of medical records and information. <p>She noted that there is a bit of ambiguity when it comes to surveillance records. DC DOH decided that there should be additional protection for the data it collects.</p> <ul style="list-style-type: none"> - DC DOH collects HIV genotype sequences ordered in routine clinical practice to detect drug resistance mutations. - DC DOH is in the process of developing its response plan, by seeking input from internal and external stakeholders. - HIV/AIDS Data Privacy Protection Amendment Act of 2021 - Provides additional language protecting data that is "produced" by the DC DOH. - Includes molecular network information generated by DC DOH. - Limit who may authorize the release of information obtained, collected, or produced by the Department of Health during routine public health surveillance.

	<ul style="list-style-type: none"> - Prevent such identifying information from being obtained through discovery, or admitted as evidence, in a criminal or civil case in the District of Columbia courts. - Address community concerns by updating the law to protect this sensitive health information and reinforce that the DC DOH HIV surveillance activities are focused on improving health. <p>A member asked if the protection was for people who lived in or received care in DC? Naomi S. stated that the protection would be for any data held by DC DOH.</p>
<p>Ryan white HIV/AIDS Program (RWHAP) Recipient Report/Updates</p>	<p>Clover Barnes reported for the Recipient.</p> <p><u>FISCAL STATUS</u> For Part A and Part A MAI in February 2021, (32) of (41) invoices have been received. A supplemental invoice is allowed in the month of March to round out the grant year. Everything must be submitted to HRSA by the end of May.</p> <p><u>PART A FISCAL SUMMARY</u> Part A expenditures are at 72% and should be at 100%.</p> <p>Service areas affected by unprocessed invoices are Regional Early Intervention Services (REIS), Early Intervention Services, Home & Community Based Care, Medical Case Management, Emergency Financial Assistance, Medical Nutrition Therapy, and Linguistic Services. These services have consistently performed below expected because the services are generally rendered in person, states have offered effective programs during the pandemic, and the moratoriums have lasted longer than expected.</p> <p><u>PART A MAI FISCAL SUMMARY</u> Part A MAI expenditures are at 80% and should be at 100%.</p> <p>Service areas affected by unprocessed invoices are Ambulatory Outpatient Medical Care, Early Intervention Services, Mental Health Services, Medical Case Management, and Psychosocial Support Services.</p> <p><u>UBC FISCAL SUMMARY</u> UBC expenditures are at 79% and should be at 100%.</p> <p>There are no service areas affected by unprocessed invoices.</p> <p><u>RECIPIENT REPORT</u> According to the government accounting system, there is currently about 5% unspent from the grant. HRSA anticipates significant underspending from Ryan White grants due to the COVID-19 pandemic and have waived the underspending penalties for Parts A and B for FY 20 and FY 21. Our</p>

	<p>5% is where we need to be to avoid a penalty anyway. Carryover will be requested.</p> <p><u>Ryan White (RW) Model Redesign.</u> Currently, Fee for Service (FFS) and Unit Base Cost (UBC) are the Ryan White grant models. The RFA for those models expire at the end of this grant year. The Recipient's team conducted an evaluation of those models and are working toward a new model for service delivery within the Ryan White and Prevention networks. There are provider meetings occurring to discuss specifics for each service category affected that will inform the model. Once the model is complete, a presentation will be made to COHAH, prior to the release of the RFA this year. The RFA will fund RW Part A, RW DC Part B and DC prevention programming through a status neutral approach.</p> <p><u>GY 31 Award.</u> The full award for Grant Year 31 (which began March 1, 2021) has been received. The new award is \$31,479,527, which includes \$18,589,259 in Formula funds, \$10,053,491 in Supplemental funds, and \$2,836,777 in MAI funds. This award is \$762,589 less than the award from the previous year.</p>
<p>Standing Committee Updates</p>	<p><u>Community Education and Engagement Committee (CEEC) reported by Jenne M.</u> CEEC complete their Community Listening Session. They had about 10 people (not affiliated with COHAH) that joined. She noted that it was tougher organizing a broad 'open' session than partnering with a CBO that has a pre-existing group. The discussion was good and they hope to build on this session by taking lessons learned for their next session.</p> <p><u>Research and Evaluation Committee (REC) reported by Lenora M.</u> The REC met in April and continue their discussion around obtaining information for the Needs Assessment from the DC Cohort. They have not received any updates on the concept sheet which was submitted to the Cohort. They have been looking at other Needs Assessments across the country. Greg D. of George Washington U. has crossed walked several Needs Assessment tools from various sources including LinkU, Maryland State, San Francisco, and Virginia.</p> <p><u>Comprehensive Planning Committee (CPC) reported by Gerald P.</u> The CPC report mirrored the Recipient's report. They are working on the Data Request and hope to submit it shortly. There was a motion put forth by the Recipient:</p> <p>Clover indicated that she received a call from a Virginia provider regarding a client that is uninsured and undocumented who needs inpatient substance abuse treatment. They were unsuccessful in finding other resources (i.e.,</p>

	<p>SAMSHA, DBH). The client is Spanish speaking, transgendered and Ryan White eligible. The Recipient is requesting that \$20,000 be moved from substance abuse outpatient into substance abuse inpatient to cover the cost of the residential facility, physician, medications, and translation services for 30 days.</p> <p><u>Motion.</u> Gerald motioned to allocate \$20,000 to the Inpatient Substance Abuse Treatment category from the Outpatient Substance Abuse Treatment category. Henry M. seconded the motion. The motioned was approved unanimously.</p> <p><u>Integrated Strategies Committee (ISC) reported by Melvin C.</u> They have finalized the Immigration Paper. They have also discussed future position papers, one possible topic being Health Equity. The committee also reviewed Food Bank Home Delivered Meals, Medical Case Management, and Medical Nutrition Therapy. They will have more standards to review next month.</p>
Positive Links Focus Group	<p>Amanda Castel, MD, MPH, from the Milken Institute (George Washington University), and colleagues conducted a focus group with COHAH members and guests. The discussion was based around an app developed by the University of Virginia called Positive Links and it is a joint effort between UVA and GWU. The app aims to improve retention and care, and viral suppression among people living with HIV. It has been adopted by the Virginia Department of Health and DC Cohort is also testing it. They are at the beginning stages of the study and soliciting feedback. The participants were broken into two breakout rooms.</p>
Commission Administrative Business – Things to Do	N/A
Old Business	N/A
New Business	N/A
ANNOUNCEMENTS/OTHER DISCUSSION	
<p>Lamont encouraged people to invite anyone who may be interested in joining COHAH to reach out to Lamont and Patrice.</p> <p>Lynn F. noted that Family Medical Counseling Services is providing COVID vaccines for anyone at their DC and Maryland.</p> <p>Kimberly S. noted that Jasmine F. has accepted a position as Clinical Coordinator with VDH (Ryan White Part B).</p> <p>Jenné stated she still needs four more participants for her study.</p> <p>Ken noted that next month the COHAH meetings will take place on WebEx and in June we will try Teams.</p>	
HANDOUTS	
<ul style="list-style-type: none"> Planning Commission (COHAH) Meeting Agenda, April 29, 2021 	

- Planning Commission (COHAH) Meeting Minutes, March 25, 2021
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 29 – Reporting Period: February 2021

MEETING ADJOURNED	8:08 PM	NEXT MEETING	THURSDAY, MAY 27, 2021 6:00pm to 8:00pm ZOOM CONFERENCE AND VIDEO CALL
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