

## **COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING AGENDA**

**WEDNESDAY NOVEMBER 18, 2020 – 11:00PM TO 1:00PM**

**ELECTRONIC MEETING VIA ZOOM VIDEO CONFERENCING**

*ELECTRONIC – ONLINE MEETING*

**Note: all times are approximate**

11:05 pm	<ol style="list-style-type: none"> <li>1. Call to Order and Moment of Silence</li> <li>2. Welcome and Introductions</li> <li>3. Adopt Agenda for November 18, 2020</li> <li>4. Approve Minutes for October 28, 2020</li> </ol>
11:15 pm	<ol style="list-style-type: none"> <li>5. Ryan White HIV/AIDS Program (RWHAP) – Reports &amp; Financial Oversight</li> <li>6. PSRA Status</li> </ol>
11:45 pm	<ol style="list-style-type: none"> <li>7. Other Business</li> </ol>
12:15 pm	<ol style="list-style-type: none"> <li>8. Announcements and Adjournment</li> </ol>
<p><b><u>NEXT COMPREHENSIVE PLANNING            COMMITTEE (CPC) MEETING:</u></b></p>	<p><b>WEDNESDAY DECEMBER 16, 2020            11PM TO 1PM            ELECTRONIC MEETING VIA ZOOM VIDEO            CONFERENCING (ONLINE)</b></p>

# COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

**WEDNESDAY, NOVEMBER 18, 2020 – 11:00AM**

**ZOOM CONFERENCE AND VIDEO CALL**

**ELECTRONIC – ONLINE MEETING**

<b>ATTENDEES/ROLL CALL</b>					
<b>COMMISSIONERS</b>	<b>PRESENT</b>	<b>ABSENT</b>	<b>COMMITTEE MEMBERS</b>	<b>PRESENT</b>	<b>ABSENT</b>
Copley, Mackenzie ( <i>Vice Chair</i> )	X				
DeMartino, Peter	X				
Padmore, Gerald ( <i>Chair</i> )	X				
Shaw-Richardson, Re'ginald	X		<b>COMMUNITY PARTNERS/GUESTS</b>	<b>PRESENT</b>	<b>ABSENT</b>
Zoerkler, Jennifer	X				
<b>RYAN WHITE RECIPIENT STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>			
Barnes, Clover		X			
Edmonds, Jason	X		<b>CONSULTANTS</b>	<b>PRESENT</b>	<b>ABSENT</b>
Fortune, Ebony	X				
<b>HAHSTA STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>	<b>COMMISSION SUPPORT STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>
Pettigrew, Kenneth	X		Bailey, Patrice	X	
			Clark, Lamont	X	

## **HIGHLIGHTS**

*NOTE: This is a draft version of the November 18, 2020 Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the December 16, 2020 meeting and made available thereafter.*

## **AGENDA**

<b>ITEM</b>	<b>DISCUSSION</b>
<b>Call to Order</b>	Gerald P. called the meeting to order at 11:08 am, followed by a moment of silence and introductions.
<b>Review and Adoption of the Agenda</b>	Peter D. motioned to adopt the Comprehensive Planning Committee Agenda for November 18, 2020. Mackenzie C. seconded. The agenda was adopted unanimously.
<b>Review and Approval of the Minutes</b>	MacKenzie motioned to approve the Comprehensive Planning Committee Minutes from October 28, 2020. Jennifer Z. seconded. The minutes are approved unanimously.

<p><b>Ryan White</b>          HIV/AIDS Program          (RWHAP) Reports &amp;          Financial Oversight</p>	<p><b>Jason Edmonds reported for the Recipient</b></p> <ul style="list-style-type: none"> <li>• This monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 30 is for reporting period: September 1 – 30, 2020.</li> <li>• The Part A GY'29 carryover request for \$938,440 was received on September 16, 2020 and has been added to the total award for GY'30. The GY'30 award has been received in the amount \$32,242,116.</li> <li>• The fiscal spreadsheets list the service categories by Part and jurisdiction and identifies 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.</li> </ul> <p><b><u>FISCAL STATUS</u></b></p> <ul style="list-style-type: none"> <li>• For Part A and Part A MAI in September 2020, (41) of (41) invoices have been received.</li> </ul> <p><b><u>SERVICE DELIVERY CHALLENGES</u></b></p> <p>There are no service delivery challenges for DC, Maryland, or Virginia</p> <p><b><u>PART A FISCAL SUMMARY</u></b></p> <ul style="list-style-type: none"> <li>• Part A expenditures are at 44% and should be at 58%</li> <li>• There are no service areas affected by unprocessed invoices</li> <li>• Services spending 30% below expected are Early Intervention Services (EIS), Medical Case Management, Linguistic Services (LS), and Outreach Services (OS)</li> <li>• There are no services spending 30% above expected</li> </ul> <p><b><u>PART A MAI FISCAL SUMMARY</u></b></p> <ul style="list-style-type: none"> <li>• Part A MAI expenditures are at 41% and should be at 58%</li> <li>• There are no service areas affected by unprocessed invoices</li> <li>• The service spending 30% below expected is Outpatient/Ambulatory Health Services</li> <li>• There is no service area spending 30% above expected</li> </ul>
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	<p><b><u>UBC FISCAL SUMMARY</u></b></p> <ul style="list-style-type: none"> <li>• UBC expenditures are at 49% and should be at 58%.</li> <li>• There are no service areas affected by unprocessed invoices</li> <li>• Services spending 30% below expected are          Outpatient/Ambulatory Health Services, Oral Health Care, Substance Abuse Services – Outpatient, and Housing Case Management and Referral</li> <li>• The service spending 30% above expected is Non-Medical Case Management Services</li> </ul> <p><b><u>RECIPIENT REPORT</u></b></p> <p>There have been delays in the reconciliation of the government fiscal Year End Close Out, therefore recommendations for use of carryover funding has been delayed. The Recipient will update CPC at its December meeting</p> <p><b><u>REPROGRAMMING</u></b></p> <p>MacKenzie indicated that Non-Medical Case Management (NMCM) is overspending and there are other service categories that are underspent. MacKenzie calculated the estimated cost of NMCM, based on the monthly spending of \$280,000. He concluded that \$1.4 million would be needed over the next 4-5 months. Of which \$460,000 is already available leaving \$940,000 needed to allow for the current spending rate. Peter motioned to move a million dollars; 50% (\$500,000) from Housing Case Management, 40% (\$400,000) from Oral Health and 10% (\$100,000) from Outpatient Ambulatory Service to put into Non-Medical Case Management Services. Reginald S. seconded. The motion was carried unanimously.</p>
<p><b>PSRA Status</b></p>	<p>Gerald indicated that the PSRA Jurisdictional Meetings have been scheduled for:</p> <p>January 11, 2021    Virginia    10:00am – 1:00pm          January 11, 2021    Maryland    2:00pm – 5:00pm          January 12, 2021    DC    2:00pm – 5:00pm</p> <p>The Recipient notified the jurisdictions of the meeting dates via email. Lamont C. will follow up on the jurisdictions’ responses and confirmation of the dates will be announced at tomorrow’s General Body meeting.</p>

<b>Follow-up Items</b>	None

**ANNOUNCEMENTS/OTHER DISCUSSION**

Gerald will send out information on events for World AIDS Day Activities on December 1<sup>st</sup>. The Alexandria Commission on Health and HIV is partnering with Delta Sigma Pheta Sorority for an event in Virginia.

**HANDOUTS**

- November 18, 2020 Comprehensive Planning Committee (CPC) Meeting Agenda
- October 28, 2020 Comprehensive Planning Committee (CPC) Meeting Minutes
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 29 – Reporting Period: September 2020
- Fiscal Roll-up Report – September 2020

<b>MEETING ADJOURNED</b>	<b>11:47 AM</b>	<b>NEXT MEETING</b>	<b>WEDNESDAY, DECEMBER 16, 2020 11:00am to 1:00pm ZOOM CONFERENCE AND VIDEO CALL</b>
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**Date: November 18, 2020**

**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 30 - Reporting Period: September 1 – 30, 2020**

**Part A and Part A MAI.** The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 30 includes two components: Part A and Part A Minority AIDS Initiative (MAI). These reports are designed to report distinctly on the associated program activities. 1. The Part A GY 29 carryover request for \$938,440 was received on September 16, 2020 and has been added to the total award for GY30. **The GY 30 award has been received in the amount \$32,242,116.**

**Notes on Overview.** The fiscal spreadsheets list the service categories by Part and jurisdiction and identifies 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 in September 2020, (41) of (41) invoices have been received.

### **SERVICE DELIVERY CHALLENGES**

**DC:** No challenges.

**MD:** No challenges.

**VA:** No challenges.

### **PART A FISCAL SUMMARY**

**Part A expenditures are 44% and should be 58%.** (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 Case Management
Linguistic Services (LS)
Outreach Services (OS)

**Services 30% above expected:**

N/A
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**PART A MAI FISCAL SUMMARY**

**Part A MAI expenditures are 41% and should be 58%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

N/A
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**Services 30% below expected:**

Outpatient/Ambulatory Health Services
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**Services 30% above expected:**

N/A
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**UBC FISCAL SUMMARY**

**UBC expenditures are 49% and should be 58%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

N/A
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**Services 30% below expected:**

Outpatient/Ambulatory Health Services
Oral Health Care
Substance Abuse Services - Outpatient
Housing Case Management and Referral

**Services 30% above expected:**

Non-Medical Case Management Services
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## **RECIPIENT REPORT**

1. There have been delays in the reconciliation of the government fiscal year end close out, therefore recommendations for use of carryover funding has been delayed. The Recipient will update CPC at its December meeting.

Report through September 2020

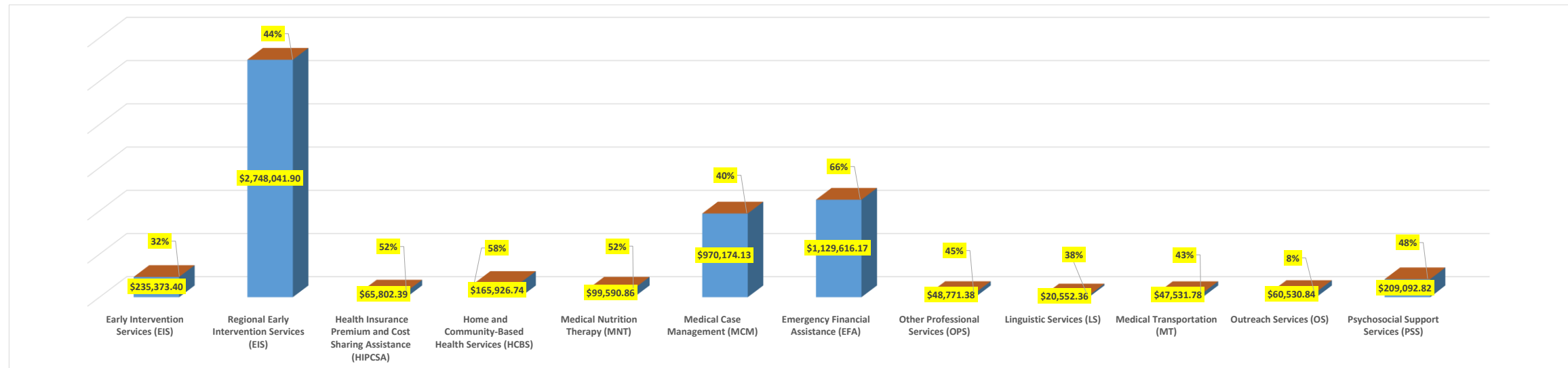
Jurisdiction	Current Award - Finalized	Expenditures	Remaining Balance	Percent Spent	Comments
District of Columbia - Part A	8,868,451	4,289,988	4,578,463	48.4%	
District of Columbia - MAI	1,523,046	707,708	815,338	46.5%	
District of Columbia - UBC	10,587,617	5,224,734	5,362,883	49.3%	
<b>District of Columbia Subtotal</b>	<b>20,979,114</b>	<b>10,222,429</b>	<b>10,756,685</b>	<b>48.7%</b>	
Northern Virginia -- MAI	362,605	162,521	200,084	45%	
<b>Northern Virginia Subtotal</b>	<b>1,411,168</b>	<b>546,201</b>	<b>864,967</b>	<b>39%</b>	
Suburban Maryland - Part A	2,844,566	918,029	1,926,537	32.3%	
Suburban Maryland -- MAI	952,077	284,634	667,443	29.9%	
<b>Suburban Maryland Subtotal</b>	<b>3,796,643</b>	<b>1,202,663</b>	<b>2,593,980</b>	<b>31.7%</b>	
West Virginia - Part A	421,200	209,307	211,893	49.7%	
<b>West Virginia Subtotal</b>	<b>421,200</b>	<b>209,307</b>	<b>211,893</b>	<b>49.7%</b>	
<b>TOTAL -- Part A</b>	<b>13,182,780</b>	<b>5,801,005</b>	<b>7,381,775</b>	<b>44.0%</b>	
<b>TOTAL -- MAI</b>	<b>2,837,728</b>	<b>1,154,862</b>	<b>1,682,866</b>	<b>40.7%</b>	
<b>TOTAL -- UBC</b>	<b>10,587,617</b>	<b>5,224,734</b>	<b>5,362,883</b>	<b>49.3%</b>	
<b>TOTAL Subtotal</b>	<b>26,608,125</b>	<b>12,180,601</b>	<b>14,427,524</b>	<b>45.8%</b>	

PART A

Report through September 2020

SERVICE CATEGORY	AWARDS	EXPENDITURES TO DATE								Comments
		Reported \$					Reported %	Expected \$	Expected %	
Current AWARDS	DC	MD	VA	WVA	Total					
Early Intervention Services (EIS)	\$737,663.00	\$165,923.19	\$69,450.21			\$235,373.40	32%	\$430,303.42	58%	reduced in-person service delivery due to COVID19
Regional Early Intervention Services (EIS)	\$6,216,801.00	\$2,056,203.83	\$308,157.62	\$383,680.45		\$2,748,041.90	44%	\$3,626,467.25	58%	
Health Insurance Premium and Cost Sharing Assistance (HIPCSEA)	\$126,854.00	\$9,108.30	\$26,122.35		\$30,571.74	\$65,802.39	52%	\$73,998.17	58%	
Home and Community-Based Health Services (HCBS)	\$285,103.00	\$165,926.74				\$165,926.74	58%	\$166,310.08	58%	
Medical Nutrition Therapy (MNT)	\$192,367.00	\$76,971.67	\$20,025.19		\$2,594.00	\$99,590.86	52%	\$112,214.08	58%	
Medical Case Management (MCM)	\$2,406,958.00	\$609,929.80	\$304,433.89		\$55,810.44	\$970,174.13	40%	\$1,404,058.83	58%	reduced in-person service delivery due to COVID19
Emergency Financial Assistance (EFA)	\$1,720,771.00	\$1,034,932.17			\$94,684.00	\$1,129,616.17	66%	\$1,003,783.08	58%	
Other Professional Services (OPS)	\$109,368.00	\$48,771.38				\$48,771.38	45%	\$63,798.00	58%	
Linguistic Services (LS)	\$54,229.00	\$20,552.36				\$20,552.36	38%	\$31,633.58	58%	reduced in-person service delivery due to COVID19
Medical Transportation (MT)	\$109,763.00	\$9,240.39	\$16,691.39		\$21,600.00	\$47,531.78	43%	\$64,028.42	58%	
Outreach Services (OS)	\$787,697.00	\$5,663.07	\$50,820.78		\$4,046.99	\$60,530.84	8%	\$459,489.92	58%	reduced in-person service delivery due to COVID19
Psychosocial Support Services (PSS)	\$435,206.00	\$86,764.93	\$122,327.89			\$209,092.82	48%	\$253,870.17	58%	
<b>TOTAL</b>	<b>\$ 13,182,780.00</b>	<b>\$4,289,987.83</b>	<b>\$918,029.32</b>	<b>\$383,680.45</b>	<b>\$209,307.17</b>	<b>\$ 5,801,004.77</b>	<b>44%</b>	<b>\$7,689,955.00</b>	<b>58%</b>	

Underspent over 30%  
Overspent over 30%

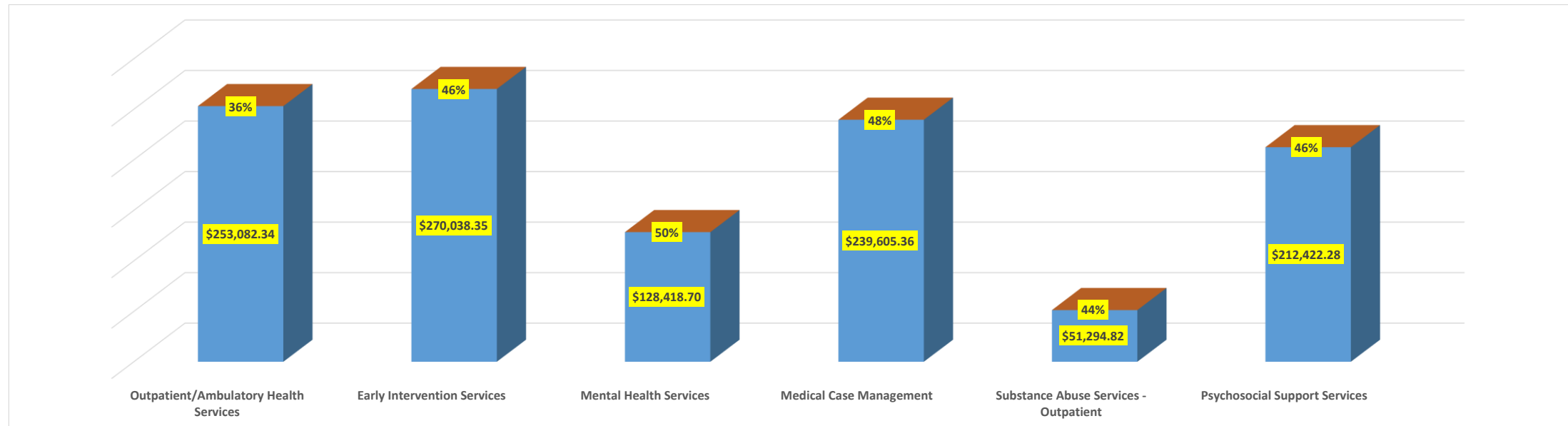


MAI

Report through September 2020

SERVICE CATEGORY	AWARDS Current Budget	EXPENDITURES TO DATE						Comments	
		Reported \$				Reported %	Expected \$		Expected %
		DC	MD	VA	Total				
Outpatient/Ambulatory Health Services	\$701,903.00	\$135,447.87	\$57,893.53	\$59,740.94	\$253,082.34	36%	\$409,443.42	58%	reduced in-person service delivery due to COVID19
Early Intervention Services	\$587,086.00	\$160,462.27	\$62,505.67	\$47,070.41	\$270,038.35	46%	\$342,466.83	58%	
Mental Health Services	\$254,653.00	\$62,193.49	\$64,406.92	\$1,818.29	\$128,418.70	50%	\$148,547.58	58%	
Medical Case Management	\$494,198.00	\$176,560.26	\$57,446.61	\$5,598.49	\$239,605.36	48%	\$288,282.17	58%	
Substance Abuse Services - Outpatient	\$116,161.00	\$51,294.82			\$51,294.82	44%	\$67,760.58	58%	
Psychosocial Support Services	\$459,902.00	\$121,748.97	\$42,380.82	\$48,292.49	\$212,422.28	46%	\$268,276.17	58%	
<b>TOTAL</b>	<b>\$2,837,728.00</b>	<b>\$707,707.68</b>	<b>\$284,633.55</b>	<b>\$162,520.62</b>	<b>\$1,154,861.85</b>	<b>41%</b>	<b>\$1,655,341.33</b>	<b>58%</b>	

Underspent over 30%   
 Overspent over 30%



UBC

Report through September 2020

SERVICE CATEGORY	AWARDS		EXPENDITURES TO DATE				Comments
	Adjustments	Current	Reported \$	Reported %	Expected \$	Expected %	
Outpatient/Ambulatory Health Services	\$ 935,000.00	\$ 2,382,360.00	\$ 860,399.57	36%	\$1,389,710.00	58%	reduced in-person service delivery due to COVID19
Oral Health Care	\$ 124,000.00	\$ 1,088,907.00	\$ 66,077.41	6%	\$635,195.75	58%	reduced in-person service delivery due to COVID19
Mental Health Services	\$ (265,000.00)	\$ 217,453.00	\$ 113,350.00	52%	\$126,847.58	58%	
Substance Abuse Services - Outpatient	\$ (154,225.00)	\$ 87,002.00	\$ 18,423.00	21%	\$50,751.17	58%	reduced in-person service delivery due to COVID19
Non-Medical Case Management Services		\$ 2,412,267.00	\$ 1,954,994.00	81%	\$1,407,155.75	58%	overspending is due to customer's increased need to access services and ease of accessibility with use of telehealth services
Food Bank/Home Delivered Meals	\$ 540,000.00	\$ 3,193,494.00	\$ 2,179,090.00	68%	\$1,862,871.50	58%	
Housing Case Management and Referral		\$ 1,206,134.00	\$ 32,400.00	3%	\$703,578.17	58%	reduced in-person service delivery due to COVID19
<b>TOTAL</b>	<b>\$ 1,179,775.00</b>	<b>\$ 10,587,617.00</b>	<b>\$ 5,224,733.98</b>	<b>49%</b>	<b>\$6,176,109.92</b>	<b>58%</b>	

Underspent over 30%   
 Overspent over 30%

