

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING AGENDA

WEDNESDAY NOVEMBER 17, 2021 – 11:00PM 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 3. Adopt Agenda for November 17, 2021 4. Approve Minutes for September 29, 2021 5. Approve Minutes for October 27, 2021
11:15 am	6. Ryan White HIV/AIDS Program (RWHAP) – Reports & Financial Oversight
11:30 am	7. Other Business
12:15 pm	8. Announcements and Adjournment
<u>NEXT COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING:</u>	WEDNESDAY DECEMBER 15, 2021 11PM TO 1PM ELECTRONIC MEETING VIA ZOOM VIDEO CONFERENCING (ONLINE)

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, OCTOBER 27 2021 – 11:00AM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	COMMITTEE MEMBERS	PRESENT	ABSENT
Carney, Misty	X		Ramos, Claudia	X	
Copley, Mackenzie (<i>Vice Chair</i>)		X			
DeMartino, Peter		X			
Padmore, Gerald (<i>Chair</i>)	X				
Palmer, Kentrell (Kenny)		X			
Shaw-Richardson, Re'ginald		X	COMMUNITY PARTNERS/GUESTS	PRESENT	ABSENT
RYAN WHITE RECIPIENT STAFF	PRESENT	ABSENT			
Ally, Shabeen	X				
Barnes, Clover		X	CONSULTANTS	PRESENT	ABSENT
Fortune, Ebony	X				
VISITING COMMISSIONERS	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT
			Bailey, Patrice	X	
			Clark, Lamont	X	

HIGHLIGHTS

NOTE: This is a draft version of the October 27, 2021, Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the November 17, 2021, meeting and made available thereafter.

AGENDA

ITEM	DISCUSSION
Call to Order	Gerald P. called the meeting to order at 11:08 am, followed by a moment of silence and introductions.
Review and Adoption of the Agenda	Quorum was not established to adopt the agenda for the October 27, 2021 meeting.
Review and Approval of the Minutes	Quorum was not established to approve the minutes for the September 29, 2021 meeting.



<p>Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight</p>	<p>Ebony Fortune reported for the Recipient. The Part A and Part A MAI Funding Monthly Fiscal and Recipient report is for August 1-31, 2021.</p> <p><u>FISCAL STATUS</u> For Part A and Part A MAI in August (36) of (39) invoices have been received.</p> <p>There were no service delivery challenges for DC, Maryland or Virginia.</p> <p><u>PART A FISCAL SUMMARY</u> Part A expenditures are at 31% and should be at 50%.</p> <p>Service areas affected by unprocessed invoices are Early Intervention Services (EIS), Regional Early Intervention Services (EIS), and Psychosocial Support Services (PSS).</p> <p>Services spending 30% below expected are Early Intervention Services (EIS), Regional Early Intervention Services (EIS), Home and Community-Based Health Services (HCBS), Medical Nutrition Therapy (MNT), Medical Transportation (MT), Outreach Services (OS), Linguistic Services (LS), and Psychosocial Support Services (PSS). The attached spreadsheet has notes that explain why the spending is below the 30%.</p> <p><u>PART A MAI FISCAL SUMMARY</u> Part A MAI expenditures are at 38% and should be at 50%.</p> <p>Service areas affected by unprocessed invoices are Outpatient/Ambulatory Health Services (OAHS), Mental Health Services (MH), and Substance Abuse Services –Outpatient (SASO).</p> <p>Services spending 30% below expected are Early Intervention Services (EIS) and Substance Abuse Services – Outpatient (SASO).</p> <p><u>FISCAL SUMMARY UBC</u> UBC expenditures are at 39% and should be at 50%.</p> <p>There were no service areas affected by unprocessed invoices.</p> <p>Services spending 30% below expected are Outpatient/Ambulatory Health Services (OAHS), Oral Health Care (OH), and Substance Abuse Services – Outpatient (SASO).</p> <p>The services spending 30% above expected is Mental Health Services (MH).</p> <p><u>RECIPIENT REPORT</u> The Recipient and her team are still going through grant year 30 close out. Reports have not been approved yet. HRSA anticipates significant underspending from Ryan White grants and has waived the underspending penalties for Parts A and B for FY 20 and FY 21. Carryover was requested and received in the amount of \$1.7 million on September 27, 2021 which may</p>
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	<p>be allocated to Rapid ART under outpatient ambulatory. Ebony will check with Clover for confirmation.</p> <p>The Recipient and her team submitted the application package for the GY32 Non-Competing Continuation Application for RW Part A Services.</p> <p>The RW Part A RFA was released on October 1, 2021. Applications are due November 12, 2021. The separate RFA for DC RW Part B funds will be released November 19, 2021 with a due date of January 7, 2022.</p>
Other Business	<p>Moving forward with the PSRA process for next year and potentially getting some prevention opportunities.</p>

ANNOUNCEMENTS/OTHER DISCUSSION

HANDOUTS

- October 27 , 2021, Comprehensive Planning Committee (CPC) Meeting Agenda
- September 29, 2021, Comprehensive Planning Committee (CPC) Meeting Minutes
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 31 – Reporting Period: August 2021

MEETING ADJOURNED	11:24 AM	NEXT MEETING	WEDNESDAY, NOVEMBER 17, 2021 11:00am to 1:00pm ZOOM CONFERENCE AND VIDEO CALL
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COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, SEPTEMBER 29, 2021 – 11:00AM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	COMMITTEE MEMBERS	PRESENT	ABSENT
Carney, Misty	X		Ramos, Claudia	X	
Copley, Mackenzie (<i>Vice Chair</i>)	X				
DeMartino, Peter		X			
Padmore, Gerald (<i>Chair</i>)	X				
Palmer, Kentrell (Kenny)	X				
Shaw-Richardson, Re'ginald	X		COMMUNITY PARTNERS/GUESTS	PRESENT	ABSENT
RYAN WHITE RECIPIENT STAFF	PRESENT	ABSENT			
Ally, Shabeen	X				
Barnes, Clover	X		CONSULTANTS	PRESENT	ABSENT
Edmonds, Jason	X				
VISITING COMMISSIONERS	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT
Wallis, Jane	X		Bailey, Patrice	X	
			Clark, Lamont	X	

HIGHLIGHTS

NOTE: This is a draft version of the September 29, 2021, Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the October 28, 2021, meeting and made available thereafter.

AGENDA

ITEM	DISCUSSION
Call to Order	Gerald P. called the meeting to order at 11:08 am, followed by a moment of silence and introductions.
Review and Adoption of the Agenda	Mackenzie C. motioned to adopt the Comprehensive Planning Committee Agenda for September 29, 2021. Misty C. seconded. The agenda was adopted unanimously.
Review and Approval of the Minutes	Mackenzie motioned to approve the Comprehensive Planning Committee Minutes from August 25, 2021. Misty C. seconded. The minutes were approved unanimously.



<p>Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight</p>	<p>Clover Barnes reported for the Recipient. The Part A and Part A MAI Funding Monthly Fiscal and Recipient report is for July 1 – 30, 2021.</p> <p><u>FISCAL STATUS</u> For Part A and Part A MAI in July 2021, (30) of (41) invoices have been received. Providers seem to be having a hard time with the invoices. We are investigating why.</p> <p><u>PART A FISCAL SUMMARY</u> Part A expenditures are at 26% and should be at 42%.</p> <p>Service areas affected by unprocessed invoices are Early Intervention Services (EIS), Regional Early Intervention Services (EIS), Health Insurance Premium and Cost-Sharing Assistance (HIPCSA), Linguistic Services (LS), Medical Transportation (MT), Medical Case Management (MCM), Outreach Services (OS), and Psychosocial Support Services (PSS).</p> <p><u>PART A MAI FISCAL SUMMARY</u> Part A MAI expenditures are at 33% and should be at 42%.</p> <p>The service area affected by an unprocessed invoice is Medical Case Management (MCM).</p> <p>Services spending at 30% below expected are Early Intervention Services (EIS), Substance Abuse Services – Outpatient (SASO), and Psychosocial Support Services (PSS) because they are services that traditionally require in-person contact.</p> <p><u>FISCAL SUMMARY UBC</u> UBC expenditures are at 34% and should be at 42%.</p> <p>There are no service areas affected by unprocessed invoices.</p> <p>Services spending 30% below expected are Outpatient/Ambulatory Health Services (OAHS), Oral Health Care (OH), and Substance Abuse Services – Outpatient (SASO).</p> <p>The service spending 30% above expected is Mental Health Services (MH).</p> <p><u>RECIPIENT REPORT</u></p> <p>GY 30 Closeout. Closeout was approved on Monday. HRSA changed the process this year. Typically spreadsheets or pdfs would be uploaded into a system called the Electronic Handbook. This year the information was entered into the Payment Management System which is the system the funds are drawdown from. The reconciliation process was precise. It took a lot of back and forth to reconcile every penny. The final report will be given to CPC at the November meeting.</p>
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	<p>GY32 Application. The Recipient and her team are creating the application package for the GY32 Non-Competing Continuation Application for RW Part A Services. The application is due 10/6/21. The RW Part A RFA will be released on October 1, 2021. There will be a separate RFA for DC RW Part B funds, which will have a status neutral approach</p>
<p>Other Business</p>	<p>Gerald asked what everyone thought this year's PSRA process. Mackenzie indicated that it went smoothly, however, the questions are the same every year and become the cause of a lack of focus in the meetings. He indicated that some questions should be changed and ask more about what has been the change. Ask more open ended questions. Clover indicated that not a lot changes from year to year with the people who use the services regularly. Maybe more pointed questions should be focused on new infections; who are the new infections, where are they coming from, and what are the risk indicators. Things that would help make an impact sooner in the cascade rather than later. They are only going to report what you ask. Be sure of what it is you want to know.</p>

ANNOUNCEMENTS/OTHER DISCUSSION

Clover introduced Dr. Shabeen Ally as the new Integrated Services Manager. She will probably attend the ISC meetings. She is managing the programs that cross prevention and care (i.e. high risk negatives and new positives types of activities). Shabeen comes to us from the CDC. She is an Epidemiologist by trade but Programmer for us.

Gerald announced the Walk to End HIV on October 23, 2021.

Gerald also announced that there have been AIDS Watch activities in the last couple of days.

Mackenzie asked when in person meetings will resume. Lamont indicated that it would not be any time soon. If everything goes well, it might happen in March of 2022.

Mackenzie asked what steps have been taken to fill the Government Co-Chair position. Lamont will keep the committee informed of the job posting. The people still in place and taking up the slack until then are Sarcia Adkins, Community Co-Chair, Betelhem Mekonnen, Community Vice Chair, and Lamont C. the COHAH Coordinator.

HANDOUTS

- September 29, 2021, Comprehensive Planning Committee (CPC) Meeting Agenda
- August 25, 2021, Comprehensive Planning Committee (CPC) Meeting Minutes
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 31 – Reporting Period: July 2021

<p>MEETING ADJOURNED</p>	<p>11:40AM</p>	<p>NEXT MEETING</p>	<p>WEDNESDAY, OCTOBER 27, 2021 11:00am to 1:00pm ZOOM CONFERENCE AND VIDEO CALL</p>
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Date: November 17, 2021

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 31 - Reporting Period: September 1 – 30, 2021**

Part A and Part A MAI. The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 31 includes two components: Part A and Part A Minority AIDS Initiative (MAI). These reports are designed to report distinctly on the associated program activities. **The GY 31 award has been received in the amount \$31,479,527.**

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 2021, (36) of (39) invoices have been received.

SERVICE DELIVERY CHALLENGES

DC: N/A

MD: N/A

VA: N/A

PART A FISCAL SUMMARY

Part A expenditures are 39% and should be 58%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

Early Intervention Services (EIS)

Services 30% below expected:

Early Intervention Services (EIS)
Regional Early Intervention Services (EIS)
Home and Community-Based Health Services (HCBS)
Medical Nutrition Therapy (MNT)
Medical Transportation (MT)

Services 30% above expected:

N/A

PART A MAI FISCAL SUMMARY

Part A MAI expenditures are 40% and should be 58%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

Outpatient/Ambulatory Health Services (OAHS)
Mental Health Services (MH)
Substance Abuse Services –Outpatient (SASO)

Services 30% below expected:

Early Intervention Services (EIS)
Substance Abuse Services – Outpatient (SASO)

Services 30% above expected:

N/A

UBC FISCAL SUMMARY

UBC expenditures are 56% 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:

Oral Health Care (OH)

Substance Abuse Services –Outpatient (SASO)

Services 30% above expected:

Outpatient/Ambulatory Health Services (OAHS)

RECIPIENT REPORT

1. **GY 30 Closeout.** The closeout expenditures for GY 30 are included in this month's reports.
2. **Request for Applications (RFA).** The Ryan White Part A RFA closed on November 12, 2021 and the submitted applications are now under review. The separate RFA for DC RW Part B funds, will be released November 19, 2021.

GY30 Ryan White PART A (HAER) Closeout Report								
Service Category	Part A				PART A MAI			
	Allocated	Awarded	Expended	Unspent	Allocated	Awarded	Expended	Unspent
Early Intervention Services	\$7,974,464	\$6,954,464	\$5,700,040	\$1,254,424		\$587,086	\$566,591	\$20,495
Health Insurance Premium & Cost Sharing Assistance	\$166,854	\$126,854	\$114,118	\$12,736				
Home and Community-Based Health Services	\$246,603	\$285,103	\$317,261	-\$32,158				
Medical Case Management	\$2,321,958	\$2,406,958	\$2,023,525	\$383,433		\$435,648	\$494,037	-\$58,389
Medical Nutrition Therapy	\$275,367	\$192,367	\$161,688	\$30,679				
Mental Health Services	\$482,453	\$217,453	\$218,620	-\$1,167		\$284,653	\$256,957	\$27,696
Oral Health Services	\$964,907	\$688,907	\$156,835	\$532,072				
Outpatient/Ambulatory Health Services	\$1,447,360	\$2,282,360	\$2,228,409	\$53,951		\$665,903	\$602,374	\$63,529
Substance Abuse Outpatient Care	\$241,227	\$87,002	\$252,713	-\$165,711		\$140,436	\$124,954	\$15,482
Emergency Financial Assistance	\$920,321	\$2,189,991	\$1,990,971	\$199,020				
Food Bank/Home Delivered Meals	\$2,653,494	\$3,662,714	\$3,756,762	-\$94,048				
Housing	\$1,206,134	\$706,134	\$57,804	\$648,330				
Linguistics Services	\$639,229	\$54,229	\$45,627	\$8,602				
Medical Transportation	\$284,763	\$109,763	\$91,732	\$18,031				
Non-Medical Case Management Services	\$2,412,267	\$3,412,267	\$3,703,253	-\$290,986				
Other Professional Services	\$659,368	\$109,368	\$102,522	\$6,846				
Outreach Services	\$732,697	\$787,697	\$1,118,789	-\$331,092				
Psychosocial Support Services	\$493,206	\$435,206	\$384,321	\$50,885		\$534,902	\$450,425	\$84,477
TOTAL	\$24,122,672	\$24,708,837	\$22,424,990	\$2,283,847	\$2,830,179	\$2,648,628	\$2,495,338	\$153,290

Report through September 2021

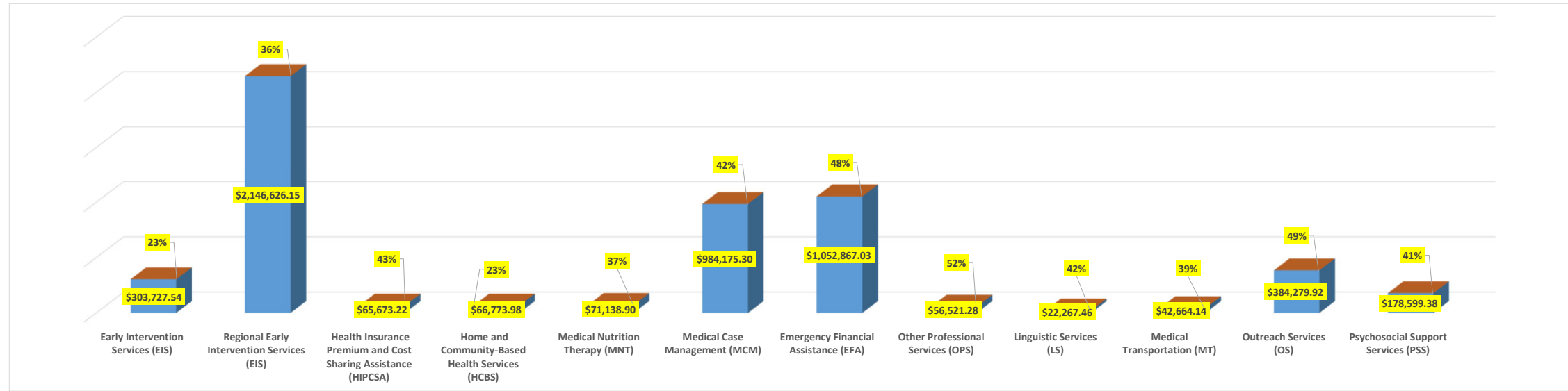
Jurisdiction	Current Award - Finalized	Expenditures	Remaining Balance	Percent Spent	Comments
District of Columbia - Part A	9,699,222	4,023,704	5,675,518	41.5%	
District of Columbia - MAI	1,380,000	588,249	791,751	42.6%	
District of Columbia - UBC	10,212,671	5,758,860	4,453,811	56.4%	
District of Columbia Subtotal	21,291,893	10,370,813	10,921,080	48.7%	
Northern Virginia -- Part A	1,249,364	356,568	892,796	29%	
Northern Virginia -- MAI	402,895	149,927	252,968	37%	
Northern Virginia Subtotal	1,652,259	506,496	1,145,763	31%	
Suburban Maryland - Part A	2,508,092	749,377	1,758,715	29.9%	
Suburban Maryland -- MAI	822,287	305,953	516,334	37.2%	
Suburban Maryland Subtotal	3,330,379	1,055,330	2,275,049	31.7%	
West Virginia - Part A	483,067	245,665	237,402	50.9%	
West Virginia Subtotal	483,067	245,665	237,402	50.9%	
TOTAL -- Part A	13,939,745	5,375,314	8,564,431	38.6%	
TOTAL -- MAI	2,605,182	1,044,129	1,561,053	40.1%	
TOTAL -- UBC	10,212,671	5,758,860	4,453,811	56.4%	
TOTAL Subtotal	26,757,598	12,178,304	14,579,294	45.5%	

PART A

Report through September 2021

SERVICE CATEGORY	ALLOCATED	EXPENDITURES TO DATE								Comments
		Reported \$					Reported %	Expected \$	Expected %	
Current AWARDS	DC	MD	VA	WVA	Total					
Early Intervention Services (EIS)	\$1,308,863.00	\$255,612.88	\$48,114.66			\$303,727.54	23%	\$763,503.42	58%	Decreased service utilization due to COVID-19
Regional Early Intervention Services (EIS)	\$6,003,586.00	\$1,573,577.85	\$216,480.05	\$356,568.25		\$2,146,626.15	36%	\$3,502,091.83	58%	Decreased service utilization due to COVID-19
Health Insurance Premium and Cost Sharing Assistance (HIPCSA)	\$153,021.00	\$0.00	\$20,901.58		\$44,771.64	\$65,673.22	43%	\$89,262.25	58%	
Home and Community-Based Health Services (HCBS)	\$285,000.00	\$66,773.98				\$66,773.98	23%	\$166,250.00	58%	Staff Vacancies
Medical Nutrition Therapy (MNT)	\$193,504.00	\$52,167.83	\$17,039.43		\$1,931.64	\$71,138.90	37%	\$112,877.33	58%	Decreased service utilization due to COVID-19
Medical Case Management (MCM)	\$2,321,445.00	\$652,968.40	\$266,062.24		\$65,144.66	\$984,175.30	42%	\$1,354,176.25	58%	
Emergency Financial Assistance (EFA)	\$2,179,400.00	\$939,857.50	\$6,000.00		\$107,009.53	\$1,052,867.03	48%	\$1,271,316.67	58%	
Other Professional Services (OPS)	\$109,368.00	\$56,521.28				\$56,521.28	52%	\$63,798.00	58%	
Linguistic Services (LS)	\$53,177.00	\$22,267.46				\$22,267.46	42%	\$31,019.92	58%	
Medical Transportation (MT)	\$108,500.00	\$10,037.05	\$11,027.09		\$21,600.00	\$42,664.14	39%	\$63,291.67	58%	Cyclical service utilization
Outreach Services (OS)	\$788,881.00	\$315,789.07	\$63,282.88		\$5,207.97	\$384,279.92	49%	\$460,180.58	58%	
Psychosocial Support Services (PSS)	\$435,000.00	\$78,130.40	\$100,468.98			\$178,599.38	41%	\$253,750.00	58%	
TOTAL	\$13,939,745.00	\$4,023,703.70	\$749,376.91	\$356,568.25	\$245,665.44	\$ 5,375,314.30	39%	\$8,131,517.92	58%	

Underspent over 30%
Overspent over 30%

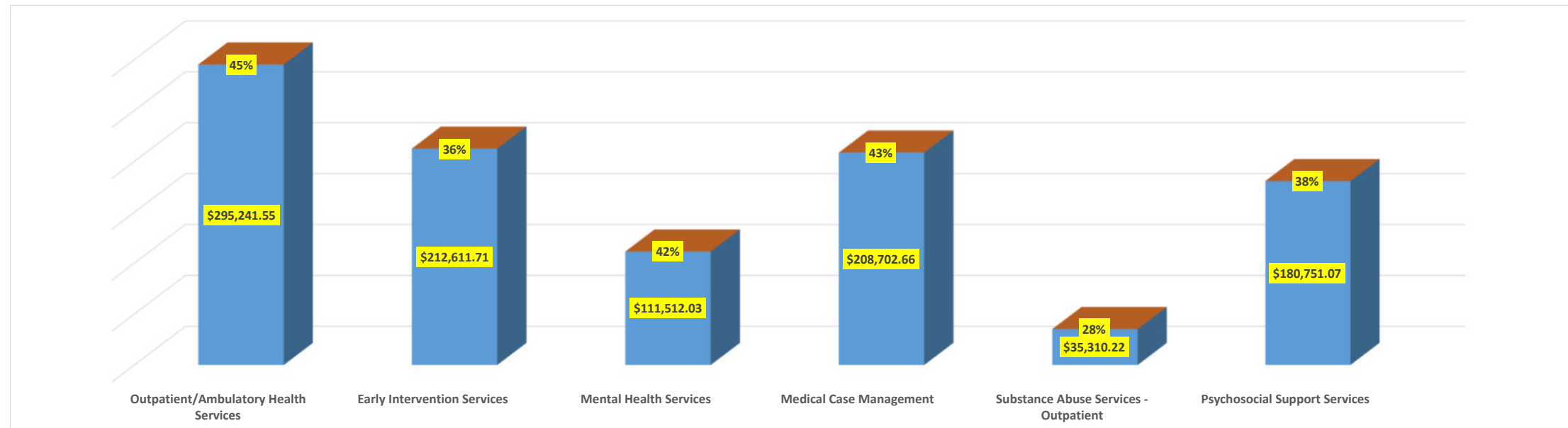


MAI

Report through September 2021

SERVICE CATEGORY	AWARDS Current Budget	EXPENDITURES TO DATE							Comments
		Reported \$				Reported %	Expected \$	Expected %	
	DC	MD	VA	Total					
Outpatient/Ambulatory Health Services	\$655,786.99	\$182,387.23	\$68,195.85	\$44,658.47	\$295,241.55	45%	\$382,542.41	58%	
Early Intervention Services	\$591,189.00	\$122,876.88	\$46,803.91	\$42,930.92	\$212,611.71	36%	\$344,860.25	58%	Decreased service utilization due to COVID-19
Mental Health Services	\$265,131.00	\$42,900.43	\$66,968.85	\$1,642.75	\$111,512.03	42%	\$154,659.75	58%	
Medical Case Management	\$488,029.00	\$117,463.87	\$85,240.83	\$5,997.96	\$208,702.66	43%	\$284,683.58	58%	
Substance Abuse Services - Outpatient	\$124,228.00	\$35,310.22			\$35,310.22	28%	\$72,466.33	58%	Decreased service utilization due to COVID-19
Psychosocial Support Services	\$480,818.00	\$87,310.60	\$38,743.20	\$54,697.27	\$180,751.07	38%	\$280,477.17	58%	
TOTAL	\$2,605,181.99	\$588,249.23	\$305,952.64	\$149,927.37	\$1,044,129.24	40%	\$1,519,689.49	58%	

Underspent over 30%
Overspent over 30%



UBC

Report through September 2021

SERVICE CATEGORY	ALLOCATED		EXPENDITURES TO DATE			Comments
	Current	Reported \$	Reported %	Expected \$	Expected %	
Outpatient/Ambulatory Health Services	\$ 2,020,857.00	\$ 1,583,491.22	78%	\$1,178,833.25	58%	
Oral Health Care	\$ 870,000.00	\$ 255,773.04	29%	\$507,500.00	58%	Modified service delivery due to COVID-19
Mental Health Services	\$ 178,029.00	\$ 127,675.00	72%	\$103,850.25	58%	
Substance Abuse Services - Outpatient	\$ 87,686.00	\$ 6,225.00	7%	\$51,150.17	58%	Decreased service utilization due to COVID-19
Non-Medical Case Management Services	\$ 3,733,813.00	\$ 2,049,420.00	55%	\$2,178,057.58	58%	
Food Bank/Home Delivered Meals	\$ 3,262,286.00	\$ 1,708,046.00	52%	\$1,903,000.17	58%	
Housing Case Management and Referral	\$ 60,000.00	\$ 28,230.00	47%	\$35,000.00	58%	
TOTAL	\$ 10,212,671.00	\$ 5,758,860.26	56%	\$5,957,391.42	58%	

Underspent over 30%

Overspent over 30%

