

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING AGENDA

WEDNESDAY SEPTEMBER 23, 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"> 1. Call to Order and Moment of Silence 2. Welcome and Introductions 3. Adopt Agenda for September 23, 2020 4. Approve Minutes for August 26, 2020
11:15 pm	<ol style="list-style-type: none"> 5. Ryan White HIV/AIDS Program (RWHAP) – Reports & Financial Oversight 6. PSRA Meeting
11:45 pm	<ol style="list-style-type: none"> 7. Other Business
12:15 pm	<ol style="list-style-type: none"> 8. Announcements and Adjournment
<p><u>NEXT RESEARCH & EVALUATION COMMITTEE (REC) MEETING:</u></p>	<p>WEDNESDAY OCTOBER 28, 2020 11PM TO 1PM ELECTRONIC MEETING VIA ZOOM VIDEO CONFERENCING (ONLINE)</p>

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, SEPTEMBER 23, 2020 – 11:00AM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

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

HIGHLIGHTS	
<i>NOTE: This is a draft version of the September 23, 2020 Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the October 28, 2020 meeting and made available thereafter.</i>	
AGENDA	
ITEM	DISCUSSION
Call to Order	Gerald P. called the meeting to order at 11:12 am, followed by a moment of silence and introductions.
Review and Adoption of the Agenda	Jennifer Z. motioned to adopt the Comprehensive Planning Committee Agenda for September 23, 2020. Mackenzie C. seconded. The agenda was adopted unanimously.



<p>Review and Approval of the Minutes</p>	<p>Jennifer motioned to approve the Comprehensive Planning Committee Minutes from, August 26, 2020. Mackenzie seconded. The minutes were approved unanimously.</p>
<p>Ryan White HIV/AIDS Program (RWHAP) Reports & Financial Oversight</p>	<p>Clover Barnes reported for the Recipient</p> <ul style="list-style-type: none"> • The GY'30 award has been received in the amount \$31,303,676. <p><u>FISCAL STATUS</u></p> <ul style="list-style-type: none"> • For Part A and Part A MAI in July 2020, (39) of (41) invoices have been received. <p><u>SERVICE DELIVERY CHALLENGES</u></p> <ul style="list-style-type: none"> • There were no service delivery challenges in DC, Maryland, or Virginia. <p><u>PART A FISCAL SUMMARY</u></p> <ul style="list-style-type: none"> • Part A expenditures are at 30% and should be at 42%. • Service areas affected by unprocessed invoices are Medical Case Management, Early Intervention Services, Regional Early Intervention Services, and Home and Community Based Care • Services spending 30% below expected are Early Intervention Services (EIS), Medical Case Management, Other Professional Services (OPS), Linguistic Services (LS), Medical Transportation (MT), and Outreach Services (OS) which is expected because those services are typically rendered in person • There were no services spending 30% above expected <p><u>PART A MAI FISCAL SUMMARY</u></p> <ul style="list-style-type: none"> • Part A MAI expenditures are at 29% and should be at 42%. • There were no service areas affected by unprocessed invoices • Services spending 30% below expected are Outpatient/Ambulatory Health Services, Medical Case Management, and Substance Abuse Services – Outpatient • There were no services spending 30% above expected <p><u>UBC FISCAL SUMMARY</u></p> <ul style="list-style-type: none"> • UBC expenditures are at 35% and should be at 42% • There were no service areas affected by unprocessed invoices • Services spending 30% below expected are Outpatient/Ambulatory Health Services, Oral Health Care, Substance Abuse Services – Outpatient, and Housing Case Management and Referral • There were no services spending 30% above expected <p>RECIPIENT REPORT</p> <ul style="list-style-type: none"> • Narcan. Please contact Shea Davis to receive the Narcan kits at (shea.davis@dc.gov). As a reminder, providers/staff must attend and show proof of Narcan training (at DC Health or in the community) to



	<p>receive the kits. A list of free scheduled trainings provided by DC Health can be found at https://dchealth.dc.gov/page/cme-ceu-webinars-andtrainings. The training is available as a webinar. Narcan supply will be depleted after October.</p> <ul style="list-style-type: none"> • GY'29 Carryover. The Recipient submitted a Carryover Request prior to the HRSA deadline of August 30, 2020. The Part A GY'29 Carryover Request for \$938,440 was approved on September 16, 2020. The Part A program award is now \$32,242,116. The Recipient will submit a motion next month for use of these funds. The funds will not be available until October because the DC City Council is on recess. • GY'31 Part A Application. The Recipient is working diligently on the application for GY'31 which is due October 7, 2020. The Recipient does not anticipate any issues or delays in this submission. The maximum funding allowable for the DC EMA in GY'31 is \$32,866,792. Starting next year (with GY'32), the Part A application will move to a 3-year application cycle where a full application will be submitted every 3 years and in the non-application years, a non-competing continuation application will be submitted. • Close-out Report. Every year a Close-out Report is sent to HRSA which contains final expenditures broken down by service categories and percentages. There is \$1,165, 845.74 leftover as an unobligated balance which is about 3%; of that amount, some of the money was carryover. Any supplemental or carryover funds cannot be requested for carry over the next year. 												
<p>PSRA Meeting</p>	<p>Gerald led the discussion about the plan for PSRA. The dates were established in the approved motion to modify the PRSA process as follows:</p> <table border="0"> <tr> <td style="padding-right: 20px;">8/27/20</td> <td>Submit Modified GY'30/FY'20 PSRA Decisions for Part A and MAI to Recipient for GY 31/FY'21 Part A Application (HRSA 210055) including any reprogramming</td> </tr> <tr> <td>9/24/20</td> <td>EMA-wide Data Presentation</td> </tr> <tr> <td>10/29/20</td> <td>PSRA Overview presentation for COHAH</td> </tr> <tr> <td>11/19/20</td> <td>CARES Act/COVID-19 Impact on Part A Data Presentation</td> </tr> <tr> <td>12/20-01/21</td> <td>Maryland, Virginia, and DC PSRA Meetings and COHAH Review of PSRA decision for Part A and MAI</td> </tr> <tr> <td>1/21</td> <td>Submit revised PSRA decision if any</td> </tr> </table> <p>Hodan Eyow will make the EMA-wide data presentation at tomorrow's COHAH meeting. Jenevieve Opoku from EPI will also be there. Hodan E. will make the CARES Act presentation in November as well.</p>	8/27/20	Submit Modified GY'30/FY'20 PSRA Decisions for Part A and MAI to Recipient for GY 31/FY'21 Part A Application (HRSA 210055) including any reprogramming	9/24/20	EMA-wide Data Presentation	10/29/20	PSRA Overview presentation for COHAH	11/19/20	CARES Act/COVID-19 Impact on Part A Data Presentation	12/20-01/21	Maryland, Virginia, and DC PSRA Meetings and COHAH Review of PSRA decision for Part A and MAI	1/21	Submit revised PSRA decision if any
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1/21	Submit revised PSRA decision if any												

<p>Submit Modified GY' 30/FY 20 PSRA Decision for Part A and MAI to Recipient for GY' 312</p>	<p>Kaleef M. indicated that Hodan sent the Quarter One Grant Year Analysis comparison from GY'30 to 29'. There is a shift in utilization in terms of clients and units in multiple service categories. There was a huge increase in EIS the first quarter due to the startup and ambiguity on how to separate the existing EIS from the new EIS and new providers who didn't start providing any services right away because they were on Track 2. There was an increase in the Medical Case Management. Transportation and Psychosocial Support have gone down. Outreach is none due to the COVID pandemic.</p> <p>Highlights for the Human CARE agreements are Telehealth and an increase in Medical Case Management and EIS. Nutrition therapy is zero. There was a decrease in Outreach, Transportation, Oral Health and Housing Services. There was a significant increase in Food Bank and Home Delivered Meals.</p> <p>Virginia had a drop in Oral Health.</p> <p>Maryland decreased in Oral Health, Outreach and Transportation. There was an Increase in Medical Case Management and EIS due to a couple of Maryland providers who were coming off Track 2 status. Nutrition therapy is zero.</p> <p>West Virginia had a slight decrease in EFA, Transportation and MAI.</p>
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Follow-up Items	None
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ANNOUNCEMENTS/OTHER DISCUSSION

Today is Kaleef Morse's last CPC Meeting as Government Chair of the COHAH.

HANDOUTS

- September 23, 2020 Comprehensive Planning Committee (CPC) Meeting Agenda
- August 26, 2020 Comprehensive Planning Committee (CPC) Meeting Minutes
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 29 – Reporting Period: July 2020
- Fiscal Roll-up Report – July 2020

MEETING ADJOURNED	12:05 AM	NEXT MEETING	WEDNESDAY, OCTOBER 28, 2020 11:00am to 1:00pm ZOOM CONFERENCE AND VIDEO CALL
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<p>I, as Planning Commission Government Co-Chair, hereby certify the accuracy of the above minutes:</p>		<p>Signature of: _____ Date: _____</p>
<p>Date the Minutes were approved by the Comprehensive Planning Committee (CPC):</p>		<p>Ka'leef Stanton Morse, MHS, MBA Government Co-Chair</p>