



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.

EXECUTIVE OPERATIONS COMMITTEE (EOC) MEETING AGENDA

THURSDAY, October 26, 2023 – 5:00PM

**ELECTRONIC MEETING VIA ZOOM
ELECTRONIC – ONLINE MEETING**

Note: all times are approximate

5:00 pm	<ol style="list-style-type: none"> 1. Call To Order and Moment of Silence 2. Welcome and Introductions/Roll Call
5:10 pm	<ol style="list-style-type: none"> 3. Review and Adoption of the Meeting Agenda for October 26, 2023 4. Review and Approval of the Meeting Minutes from September 28, 2023
5:15 pm	<ol style="list-style-type: none"> 5. Ryan White HIV/AIDS Program (RWHAP) Recipient - Updates/Concerns - Carryover Motion
5:20 pm	<ol style="list-style-type: none"> 6. Commission Administrative Business <ul style="list-style-type: none"> • Review and adoption of COHAH Agenda for October 26, 2023
5:25 pm	<ol style="list-style-type: none"> 7. Standing Committee Updates <ul style="list-style-type: none"> • Research & Evaluation Committee (REC) {Next mtg.: Tue. Nov 14th @ 3pm} • Community Engagement & Education Committee (CEEC) {Next mtg.: Thur. Nov 9th @ 5pm} • Comprehensive Planning Committee (CPC) {Next mtg.: Wed. Nov 15th @ 11am} • Integrated Strategies Committee (ISC) {Next mtg.: Wed. Nov 15th @ 1pm}
5:30 pm	<ol style="list-style-type: none"> 8. Old Business 9. New Business
5:35 pm	<ol style="list-style-type: none"> 10. Announcements and Adjournment
<u>NEXT EXECUTIVE OPERATIONS COMMITTEE (EOC) MEETING:</u>	THURSDAY NOVEMBER 16, 2023 5PM-6PM VIRTUAL MEETING

This meeting is governed by the Open Meetings Act. Please address any questions or complaints arising under this meeting to the Office of Open Government

at opengovoffice@dc.gov.

EXECUTIVE OPERATIONS COMMITTEE (EOC) MEETING MINUTES

THURSDAY, SEPTEMBER 28, 2023, @ 5:00PM

ZOOM CONFERENCE AND VIDEO CALL

ELECTRONIC – ONLINE MEETING

ATTENDEES/ROLL CALL

COMMISSIONERS	PRESENT	ABSENT			
Cauthen, Melvin	X				
Clark, Lamont (<i>Gov. Co-Chair</i>)	X				
Copley, Mackenzie	X				
Hutton, Kenya		X			
Massie, Jenné		X			
Mekonnen, Betelhem	X				
Wallis, Jane		X			
RYAN WHITE RECIPIENT STAFF	PRESENT	ABSENT			
Smith, Avemaria (<i>Recipient</i>)	X				
HAHSTA STAFF	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT
			Bailey, Patrice	X	
			Johnson, Alan	X	

HIGHLIGHTS

NOTE: This is a draft version of the September 28, 2023, Executive Operations Committee (EOC) Meeting Minutes which is subject to change. The final version will be approved on October 26, 2023.

AGENDA

ITEM	DISCUSSION
Call to Order Welcome and Introductions Roll/Call	Lamont C. called the meeting to order at 5:05 pm, followed by a moment of silence and introductions.
Review and Adoption of the Agenda	Lamont assumed the motion to adopt the September 28, 2023, Meeting Agenda as presented.
Review and Approval of the Meeting Minutes	Lamont assumed the motion to approve the EOC July 27, 2023, Meeting Minutes as presented.
Ryan White HIV/AIDS Program (RWHAP) Recipient Updates/Concerns	<u>Avemaria S. reported on the Recipient Report</u> Avemaria gave an update on the status of District operations in the event of a government shutdown. It was reported that the District will remain operational due to the mid-year Notice of Awards.



<p>Commission Administrative Business</p>	<p>Review and adoption of the COHAH Agenda for September 28, 2023. Mackenzie C. noted a necessary correction for the time of the next COHAH meeting and Patrice B. noted that the review of additional meeting minutes needed to be included. Lamont adopted the COHAH General Body Meeting Agenda for September 28, 2023, with the necessary changes.</p>
<p>Standing Committee Updates/Concerns</p>	<p><u>Research and Evaluation Committee (REC) reported by Lamont C.</u> REC met very briefly and discussed a few items regarding the Needs Assessment.</p> <p><u>Community Education and Engagement Committee (CEEC) reported by Lamont C.</u> The Chair and Co-Chair of CEEC had emergency situations and were not able to attend.</p> <p>Alan J. provided updates from the Youth Services working group within HAHSTA and the Youth Services Coalition regarding the preparation of events to take place in February.</p> <p>Lamont indicated that HAHSTA’s Senior Deputy Director Clover Barnes has asked CEEC to assist with a Client Services Event. Malachi Stewart and the Community Engagement Group (CEG), internal to HAHSTA, has been assembled to lead the charge. There were additional questions and discussion about the funding for the event.</p> <p><u>Comprehensive Planning Committee (CPC) reported by Mackenzie C.</u> The Recipient presented the fiscal report. Mackenzie noted that the spending appeared to be on track. Any discrepancies were minimal.</p> <p>Mackenzie is interested in receiving an overview of the prevention funding in the DC EMA. Lamont indicated that the Prevention Deputy Chief will give a general overview of the services funded by prevention at the General Body next month as per Avenmaria’s request. Lamont will solicit the participation of Peter DeMartino, Maryland Department of Health, and Ashley Yocum, Virginia Department of Health to also give an overview of their allocations, requirements, and spending in their jurisdictions.</p> <p><u>Integrated Strategies Committee (ISC) reported by Melvin C.</u> The ISC discussed futures projects. A few suggestions were: a project that focused on the needs of the aging populations, evaluating gaps during COVID and the consequences that resulted from those gaps, examining how status neutral is being incorporated, and how to keep the Health Equity Paper alive and active.</p> <p>Also, the ISC anticipates EHE updates next month.</p>

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.

Old Business	Lamont reported that MOTA will swear in 3 of the 4 new candidates for COHAH membership along with those whose membership expired June 1 st during the October 26 th General Body meeting.
New Business	Mackenzie suggested having in-person General Body Meetings quarterly beginning January 2024. Lamont indicated that hybrid meetings will begin next month for the committees. However, finding space for the General Body meeting is more challenging. The space must have a 70-person capacity, parking availability and be metro accessible. Health HIV, Grassroots, and the ANC in Ward 5 have offered their spaces. We will begin to conduct site visits to identify the space most conducive to facilitating the COHAH General Body meeting.
Announcements	None noted.
HANDOUTS	
<ul style="list-style-type: none"> • September 28, 2023, Executive Operations Committee Agenda • July 27, 2023, Executive Operations Committee Meeting Minutes • September 28, 2023, Planning Commission (COHAH) General Body Meeting Agenda • July Recipient Report 	

MEETING ADJOURNED	5:40 PM	NEXT MEETING	THURSDAY, OCTOBER 26, 2023 5:00pm to 6:00pm ZOOM CONFERENCE AND VIDEO CALL
------------------------------	----------------	-------------------------	-------------------------------------------------------------------------------------------

Date: October 25, 2023

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 33 - Reporting Period: August 1 – 31, 2023**

Part A and Part A MAI. The Ryan White HIV/AIDS Program (RWHAP) Part A Grant Year 32 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 33 the recipient received the full award in the amount \$32,652,189.00.**

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 August 2023, of the twenty-six **(26)** providers, twenty-four **(24)** submitted payment requests that were processed, and two **(2)** providers have not yet submitted August 2023 invoices.

SERVICE DELIVERY CHALLENGES

DC: No challenges.

MD: No challenges.

VA: No challenges.

PART A FISCAL SUMMARY

Part A expenditures are 43% and should be 50%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

Early Intervention Services (EIS)

Oral Health Care (OH)

Substance Abuse Services – Outpatient (SASO)
Medical Case Management (MCM)
Non-Medical Case Management (NMCM)
Medical Nutrition Therapy (MNT)
Medical Transportation Services (MT)
Outreach Services (OS)
Psychosocial Support Services (PSS)

Services 30% below expected:

Health Insurance Premium and Cost Sharing Assistance (HIPCSA)
Housing Services (HS)
Psychosocial Support Services (PSS)

Services 30% above expected:

N/A

PART A MAI FISCAL SUMMARY

Part A MAI expenditures are 34% and should be 50%. (Overall Expenditure rates by funding source for the reporting period)

Service areas affected by unprocessed invoices:

Early Intervention Services (EIS)
Mental Health Services (MHS)
Medical Case Management (MCM)
Substance Abuse Services - Outpatient (SASO)
Psychosocial Support Services (PSS)

Services 30% below expected:

Early Intervention Services (EIS)
Medical Case Management (MCM)
Psychosocial Support Services (PSS)
Substance Abuse Services – Outpatient (SASO)

Services 30% above expected:

N/A

RECIPIENT REPORT

- 1. FY22 Final Carryover Request:** HRSA approved the Recipient's FY22 final carryover request. The Recipient received the updated Notice of Award in September.
- 2. Reprogramming Request:** The Recipient submitted a motion for the planned use of FY22 carryover funds to the CPC in October.
- 3. Ryan White Jurisdictional Meeting:** Regional Health Department Collaboration. The Health Departments for Maryland, Virginia, and Washington, DC met in Richmond, VA on October 12th. The Ryan White Program representatives from the regional collaboration will meet in November to discuss streamlining the administrative process for site visits and funding levels for shared providers.
- 4. Part A RFA Re-Release:** Recipient staff are preparing to re-release the Part A RFA to expand the Ryan White Provider Network by creating new and/or expanded access points for Ryan White eligible customers seeking core medical and supportive services within the Washington, DC EMA.



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.

PLANNING COMMISSION (COHAH) GENERAL BODY MEETING AGENDA

THURSDAY, OCTOBER 26, 2023 – 6:00PM TO 8:00PM

ZOOM CONFERENCE AND VIDEO CALL

Note: all times are approximate

6:05 pm	1. Call To Order and Moment of Silence
6:10 pm	2. Swearing In and Reappointments - MOTA
6:20 pm	3. Review and Adoption of the Meeting Agenda for October 26, 2023 4. Review and Approval of the Meeting Report for September 28, 2023
6:25 pm	5. Ryan White HIV/AIDS Program (RWHAP) Recipient Report/ Updates
6:35 pm	6. Fair Housing – Ronald Clarkson, Director of Communications and Outreach, Housing Counseling Services, Inc
6:55 pm	7. Consumer Needs Assessment Report – Julie Orban, HIV Services Planner, DC Health, Greg Dwyer, Senior Research Scientist, GWU School of Public Health
7:15 pm	8. Prevention Services Funding Overview
7:35 pm	9. Standing Committee Updates <ul style="list-style-type: none"> • <i>Research & Evaluation Committee (REC)</i> {Next mtg.: Tue. Oct 17th @ 3pm} • <i>Community Engagement & Education Committee (CEEC)</i> {Next mtg.: Thur. Oct 19th @ 5pm} • <i>Comprehensive Planning Committee (CPC)</i> {Next mtg.: Wed. Oct 25th @ 11am} • <i>Integrated Strategies Committee (ISC)</i> {Next mtg.: Wed. Oct 25th @ 1pm}
7:50 pm	10. Other Business <ul style="list-style-type: none"> • <i>DC Updates</i> • <i>Virginia Updates</i> • <i>Maryland Updates</i>
8:00 pm	11. Announcements/Adjournment

NEXT PLANNING COMMISSION (COHAH) MEETING: PRIORITY SETTING & RESOURCE ALLOCATIONS

**THURSDAY NOVEMBER 17, 2023
6 PM – 8 PM
ZOOM**

This meeting is governed by the Open Meetings Act. Please address any questions or complaints arising under this meeting to the Office of Open Government

at opengovoffice@dc.gov.

MOTION FORM

Instructions: The Committee Chair or another Commissioner making a motion for consideration by the Planning Commission shall complete this form and submit it to Planning Commission staff.

Standing Committee of Origin:	Comprehensive Planning Committee	Date Moved:	
Motion Made By:			
Subject:	<i>Use of Carryover Funds in GY33</i>		

MOTION STATUS			AYES	NAYES	ABST.	DATE OF VOTE:	CHAIR SIGNATURE:
Committee:	<input type="checkbox"/> Passed	<input type="checkbox"/> Failed					
EOC Action:	<input type="checkbox"/> Passed	<input type="checkbox"/> Failed					
COHAH Action:	<input type="checkbox"/> Passed	<input type="checkbox"/> Failed					
Documents Attached:							

- Text of the motion:
The recipient was approved to carryover \$852,666 of the GY32 unobligated balance for use in GY33. This funding will support new and expanded HIV care access points for persons with HIV. We plan to allocate \$271,351 to Outpatient Ambulatory Health Services, \$316,576 to Medical Case Management, \$248,739 to Non-Medical Case Management and \$16,000 to Early Intervention Services. The service category amounts are within COHAH's approved allocations for GY33.
- Purpose of the motion / Need for the action
The purpose of this motion is to provide a rationale on the planned use of carryover funds for GY33.
- Research completed prior to formulating recommended action
A review of the GY 33 continuation awards, Part A sub-recipient provider network, surveillance data, and RW program data supports the recommended use of funds.
- Alternative strategies explored and reasons why the recommended action is preferable.
There are no alternative solutions. The recommended action will increase access to RW services in the WDC EMA.

**Greater Washington Eligible Metropolitan Area
Jurisdiction: District of Columbia Services Report-DC**

Period Covered: Mar 01, 2023 - February 29,2024

HRSA Service Areas for Grant Year 33	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Core Medical Services										
Early Intervention Services	1,520	5,700	1,475	4,825					2,995	10,525
Oral Health Services	134	229	139	241					273	470
Outpatient/Ambulatory Health Services	672	2,698	625	2,529					1,297	5,227
Medical Nutrition Therapy (including supplements)	176	482	141	622					317	1,104
Mental Health Service	162	1,297	122	743					284	2,040
Substance Abuse Outpatient Care	79	158	188	465					267	623
Medical Case Management (including Treatment Adherence)	476	4,370	508	4,134					984	8,504
	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Emergency Financial Assistance	612	1,344	633	1,381					1,245	2,725
Non-Medical Case Management	592	3,935	656	4,551					1,248	8,486
Food Bank/Home Delivered Meals	409	67,108	415	70,113					824	137,221
Medical Transportation	326	1,402	267	964					593	2,366
Linguistics	0	0	0	0					0	0
Psychosocial Support Services	258	1,200	222	1,209					480	2,409
Home & Community-based Health Services	5	6	0	0					5	6
Outreach Services	17	17	0	0					17	17
Other Professional Services	1	0	5	5					6	5

Notes:

Date of Report: 10/4/2023

Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

This report represents all services data entered into CARWARE up to the date of extraction

**Greater Washington Eligible Metropolitan Area
Jurisdiction: Northern Virginia Services Report-VA**

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Core Medical Services										
Outpatient Ambulatory Health Services	59	370	62	643					121	1,013
Early Intervention Services	315	1,403	316	1,223					631	2,626
Medical Case Management	98	385	84	460					182	845
Substance Abuse Outpatient Care	3	7	4	25					7	32
Oral Health Care	71	171	54	153					125	324
Mental Health Services	4	27	11	73					15	100
	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Psychosocial Support Services	78	448	66	431					144	879
Non-Medical Case Management	54	116	44	137					98	253
Medical Transportation	58	321	25	137					83	458

Notes:

Date of Report: 10/4/2023

Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

This report represents all services data entered into CARWARE up to the date of extraction

**Greater Washington Eligible Metropolitan Area
Jurisdiction: Suburban Maryland Services Report-MD**

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33

	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
Core Medical Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Oral Health Services	132	296	116	223					248	519
Outpatient Ambulatory Health Services	111	451	88	343					199	794
Medical Case Management (including Treatment Adherence)	150	1,089	184	1,346					334	2,435
Medical Nutrition Therapy (including supplements)	-	-	34	46					34	46
Mental Health Services	0	0	-	-					-	-
Substance Abuse Outpatient Care	0	0	-	-					-	-
Home and Community-based Health Services	0	0	-	-					-	-
Health Insurance Premium	20	24	17	20					37	44
Early Intervention Services	6	8	7	9					13	17

	Quarter 1		Quarter 2		Quarter3		Quarter 4		Cumulative Total	
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Psychosocial Support Services	14	39	13	31					27	70
Medical Transportation	34	201	64	309					98	510
Non-Medical Case Management	113	539	175	801					288	1,340
Outreach Services	2	2	36	73					38	75

Notes:

Date of Report: 10/4/2023

Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

This report represents all services data entered into CARWARE up to the date of extraction

**Greater Washington Eligible Metropolitan Area
Jurisdiction: West Virginia Services Report-WVA**

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33

	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Core Medical Services										
Medical Nutrition Therapy (including supplements)	5	7	9	19					14	26
Health Insurance Premium	-	-	13	50					13	50
Medical Case Management (including Treatment Adherence)	133	289	119	248					252	537

	Quarter 1		Quarter 2		Quarter 3		Quarter4		Cumulative Total	
	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Support Services										
Emergency Financial Assistance	20	32	10	11					30	43
Medical Transportation	-	-	13	64					13	64
Outreach Services	14	17	5	6					19	23

Notes:

Date of Report: 10/4/2023

Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

This report represents all services data entered into CARWARE up to the date of extraction

**Greater Washington Eligible Metropolitan Area
Jurisdiction: WDC EMA-MAI**

Period Covered: Mar 01, 2023 - February 29, 2024

HRSA Service Areas for GY 33

	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Core Services										
Outpatient Ambulatory Health Services	62	450	51	540					113	990
Mental Health	65	317	57	223					122	540
Medical Case Management (including Treatment Adherence)	79	456	54	508					133	964
Substance Abuse Services Outpatient	16	43	19	46					35	89
Early Intervention Services	389	1,191	304	873					693	2,064
	Quarter 1		Quarter 2		Quarter 3		Quarter 4		Cumulative Total	
Support Services	Clients	Units	Clients	Units	Clients	Units	Clients	Units	Clients	Units
Psychosocial Support Services	42	121	30	94					72	215

Notes:

Date of Report: 10/4/2023

Prepared by: T. Holmes

Report submitted to: Comprehensive Planning Committee (CPC)

Source of Report: CAREWARE/P.O. Dashboard

Comments:

This report represents all services data entered into CARWARE up to the date of extraction