

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

**WEDNESDAY JUNE 23, 2021 – 11:00PM TO 1:00PM**

**ELECTRONIC MEETING VIA MICROSOFT TEAMS CONFERENCING**

*ELECTRONIC – ONLINE MEETING*

**Note: all times are approximate**

11:05 am	<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 June 23, 2021</li> <li>4. Approve Minutes for May 26, 2021</li> </ol>
11:15am	5. Ryan White HIV/AIDS Program (RWHAP) – Reports & Financial Oversight
11:30 am	<ol style="list-style-type: none"> <li>6. Data Request Update</li> <li>7. PSRA Dates</li> </ol>
11:45 am	8. Other Business
12:15 am	9. Announcements and Adjournment
<b><u>NEXT COMPREHENSIVE PLANNING            COMMITTEE (CPC) MEETING:</u></b>	<b>WEDNESDAY JULY 28, 2021            11PM TO 1PM            ELECTRONIC MEETING (ONLINE)</b>

# COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

**WEDNESDAY, MAY 26, 2021 – 11:00AM**

**WEBEX 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>
Carney, Misty	X		Ramos, Claudia	X	
Copley, Mackenzie ( <i>Vice Chair</i> )	X				
DeMartino, Peter	X				
Padmore, Gerald ( <i>Chair</i> )	X				
Pettigrew, Ken ( <i>Gov. Co-Chair</i> )	X		<b>COMMUNITY PARTNERS/GUESTS</b>	<b>PRESENT</b>	<b>ABSENT</b>
Shaw-Richardson, Re'ginald		X	Mena-Carrasco, Fernando		X
<b>RYAN WHITE RECIPIENT STAFF</b>	<b>PRESENT</b>	<b>ABSENT</b>	Ollinger, Joshua	X	
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>
			Bailey, Patrice	X	
			Clark, Lamont	X	

## HIGHLIGHTS

*NOTE: This is a draft version of the May 26, 2021, Comprehensive Planning Committee (CPC) Meeting Minutes. The final version will be approved at the June 23, 2021, 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>	Mackenzie C. motioned to adopt the Comprehensive Planning Committee Agenda for May 26, 2021. Claudia R. seconded. The agenda was adopted unanimously.



<p><b>Review and Approval of the Minutes</b></p>	<p>Mackenzie motioned to approve the Comprehensive Planning Committee Minutes from April 28, 2021. Misty C. seconded. The minutes are approved unanimously.</p>
<p><b>Ryan White        HIV/AIDS Program        (RWHAP) Reports &amp;        Financial Oversight</b></p>	<p><b>Clover Barnes reported for the Recipient.</b></p> <p>The report is for the period of March 1-13, 2021, which is the first report of the new grant year. GY 30 ended on February 28<sup>th</sup>. The new grant started March 1<sup>st</sup>. The GY 31 award has been received in the amount \$31,479,527.</p> <p><u>FISCAL STATUS</u></p> <p>For Part A and Part A MAI in March 2021, (25) of (41) invoices have been received and processed.</p> <p>There were no service delivery challenges in DC, Maryland, or Virginia.</p> <p><u>PART A FISCAL SUMMARY</u></p> <p>Part A expenditures are at 5% and should be at 8%.</p> <p>Service areas affected by unprocessed invoices are Regional Early Intervention Services (REIS), Early Intervention Services (EIS), Home &amp; Community Based Care (HCBC), Medical Case Management (MCM) Emergency Financial Assistance (EFA), Medical Nutrition Therapy (MNT), and Psychosocial Support Services (PS).</p> <p>Services spending 30% below expected are Early Intervention Services (EIS), Regional Early Intervention Services (EIS), Health Insurance Premium and Cost Sharing Assistance, (HIPCSA), Home and Community-Based Health Services (HCBS), Medical Nutrition Therapy (MNT), Other Professional Services (OPS), Linguistic Services (LS), Medical Transportation (MT), Outreach Services (OS), and Psychosocial Support Services (PSS).</p> <p>The service spending at 30% above expected is Emergency Financial Assistance (EFA).</p> <p><u>PART A MAI FISCAL SUMMARY</u></p> <p>Part A MAI expenditures are at 8% and should be at 8%.</p> <p>Service areas affected by unprocessed invoices are Ambulatory Outpatient Medical Care (OAHS), Early Intervention Services (EIS), Mental Health Services (MH), Medical Case Management (MCM), Psychosocial Support Services (PS), and Substance Abuse Services (SAS).</p> <p>The service spending at 30% below expected is Outpatient/Ambulatory Health Services (OAHS).</p> <p>The service spending at 30% above expected is Medical Case Management (MCM).</p>



	<p><u>UBC FISCAL SUMMARY</u>          UBC expenditures are at 8% and should be at 8%.</p> <p>There are no service areas affected by unprocessed invoices.</p> <p>Services spending at 30% below expected are Housing Case Management and Referral, Oral Health Care, Substance Abuse Services – Outpatient, and Housing Case Management and Referral.</p> <p>The service spending at 30% above expected is Non-Medical Case Management Services (NMCM).</p> <p><u>RECIPIENT REPORT</u></p> <p><u>GY 30 Closeout.</u> The Recipient and her team are working diligently to ensure funds are spent down as much as possible. Once the final expenditures are done through the Office of the Chief Financial Officer the Recipient will bring the report back to the CPC that shows the balance of what happened throughout the grant year and request to carryover the unspent funds. The COHAH must determine what the carryover will be used for. That is usually a conversation the Recipient has with the co-chairs. Then the carryover request is submitted to HRSA.</p> <p><u>Substance Abuse Services – Residential.</u> The reprogramming that was completed last meeting will not be needed., therefore the funds will be put back to where they came from. A letter was sent from the service provider detailing the customer’s current situation and treatment plan. The Recipient and her team are prepared to support the customer should her needs change.</p> <p>Clover went over the spreadsheet and explained the new column for current awards and allocations. She indicated that a reprogramming must be done to even it out the numbers.</p>
<p><b>Data Request</b></p>	<p>Mackenzie indicated that the PSRA data request draft has been completed and sent to several members of the Executive Operations Committee (EOC) and Lamont. Mackenzie responded to a few questions that were sent hoping to clarify some information. Lamont suggested that the process not be delayed because of one person. Invite that person to the meeting or have separate sessions with him/her if they are unclear, but do not hold up the process. Ken agrees that the process should not be held up and he will bring it up again at the debriefing after tomorrow’s meeting.</p> <p>Lamont asked Clover if she had any indication when the application will come out this year so the COHAH can schedule their PSRA accordingly, in order to</p>

	get the information for the application in a timely manner. Clover indicated that she does not know, but she is guessing that it will come out around September.
<b>Other Business</b>	<p>Lamont indicated that HAHSTA is testing out new platforms for effectiveness and efficiency in conducting meetings. The committees can look for some form of questionnaire or survey probably by Friday. In June we will use Teams, then we will be able to do a comparison between the three (3) platforms (Zoom, WebEx, Teams) to get opinions and input as to which platform is the most convenient and best to use.</p> <p>DCHealth will be migrating back into the office over the next couple of months. We will send another query out about your capabilities, thoughts, and feelings about in person meetings versus online meetings.</p>

## **ANNOUNCEMENTS/OTHER DISCUSSION**

### **HANDOUTS**

- May 26, 2021, Comprehensive Planning Committee (CPC) Meeting Agenda
- April 28, 2021, Comprehensive Planning Committee (CPC) Meeting Minutes
- Monthly Fiscal and Recipient Report (Part A and Part A MAI Funding) Year 29 – Reporting Period: March 2021
- Fiscal Roll-up Report – March 2021

<b>MEETING ADJOURNED</b>	<b>11: 46AM</b>	<b>NEXT MEETING</b>	<b>WEDNESDAY, JUNE 23, 2021 11:00am to 1:00pm ZOOM CONFERENCE AND VIDEO CALL</b>
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**Date: June 23, 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 30 - Reporting Period: April 1 – 30, 2021**

**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. **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 April 2021, the Recipient fiscal staff is unable to access the systems used to report Ryan White expenditure data. We are in the process of resolving this issue. Until the system is restored, we can only provide fiscal data for unit based costs.

### **SERVICE DELIVERY CHALLENGES**

**DC:** There are no service delivery challenges.

**MD:** There are no service delivery challenges.

**VA:** There are no service delivery challenges.

### **PART A FISCAL SUMMARY**

**Part A expenditures are unavailable.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

N/A

Not applicable the recipient fiscal staff could not provide information on the number of invoices processed.

**Services 30% below expected:**

N/A

**Services 30% above expected:**

N/A

**PART A MAI FISCAL SUMMARY**

**Part A MAI expenditures are unavailable.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

N/A

Not applicable the recipient fiscal staff could not provide information on the number of invoices processed.

**Services 30% below expected:**

N/A

**Services 30% above expected:**

N/A

**UBC FISCAL SUMMARY**

**UBC expenditures are 15% and should be 17%.** (Overall Expenditure rates by funding source for the reporting period)

**Service areas affected by unprocessed invoices:**

N/A

**Services 30% below expected:**

Outpatient/Ambulatory Health Services

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

**Services 30% above expected:**

Non-Medical Case Management Services (NMCM)
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**RECIPIENT REPORT**

- 1. GY 30 Closeout.** The Recipient and her team are working diligently to ensure funds are spent down as much as possible. HRSA anticipates significant underspending from Ryan White grants due to the COVID-19 pandemic. We do not anticipate having an unobligated balance large enough to cause the EMA to receive a penalty. HRSA has waived the underspending penalties for Parts A and B for FY 20 and FY 21. Carryover will be requested.
- 2. Reprogramming Motion.** The Recipient and her team request a reprogramming to balance awards and allocations for GY 31. The current funding mechanism was competed 4 years ago and as needs have changed and organizational capacities have varied greatly, there are a few areas that need to be reprogrammed.



Service Category	Part A			Part A MAI		
	COHAH - Allocated	Reprogramming	A - Awarded	Allocated	Reprogramming	MAI - Awarded
OAHS	\$1,460,780	\$560,077	\$2,020,857	\$461,867	\$193,919	\$655,786
OHC	\$973,854	\$103,854	\$870,000			
MCM	\$2,345,721	\$24,276	\$2,321,446	\$488,028		\$488,028
MHS	\$486,927	\$308,898	\$178,029	\$265,130		\$265,130
SAO	\$243,463	\$155,777	\$87,686	\$124,228		\$124,228
MNT	\$278,875	\$85,371	\$193,504			
REIS	\$7,303,901	\$1,300,315	\$6,003,586			
EIS	\$745,680	\$563,183	\$1,308,863	\$591,188		\$591,188
HCBC	\$248,308	\$36,692	\$285,000			
HIPCSA	\$167,929	\$14,908	\$153,021			
EFA	\$928,326	\$1,251,075	\$2,179,401			
MT	\$286,800	\$178,300	\$108,500			
FB/HDM	\$2,678,097	\$584,189	\$3,262,286			
NMCM	\$2,434,634	\$1,359,179	\$3,793,813			
Housing	\$1,217,317	\$1,217,317				
Outreach	\$739,642	\$49,239	\$788,881			
Ling	\$298,121	\$244,944	\$53,177			
Psycho	\$845,305	\$410,305	\$435,000	\$480,817		\$480,817
Other Prof	\$662,659	\$553,291	\$109,368			
<b>Total Service Dollars</b>	<b>\$24,346,337</b>		<b>\$24,152,418</b>	<b>\$2,411,260</b>		<b>\$2,605,179</b>
Legend:						
Increase						
Decrease						

## 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.

<b>Standing Committee of Origin:</b>	Comprehensive Planning Committee	<b>Date Moved:</b>	6/23/21
<b>Motion Made By:</b>	Clover Barnes		
<b>Subject:</b>	<b>Grant Year 31 Allocations</b>		

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

**1. Text of the motion:**

THE RECIPIENT HAS REVIEWED THE FUNDS AWARDED FOR GRANT YEAR 31 AND IS REQUESTING THE REPROGRAMMING OF \$5,197,555 IN SERVICE DOLLARS FROM THE FOLLOWING 12 SERVICE CATEGORIES: ORAL HEALTH, MEDICAL CASE MANAGEMENT, MENTAL HEALTH, SUBSTANCE ABUSE, MEDICAL NUTRITION THERAPY, REGIONAL EIS, HEALTH INSURANCE PREMIUM COST SHARING, MEDICAL TRANSPORTATION, HOUSING, LINGUISTICS, PSYCHOSOCIAL AND OTHER PROFESSIONAL SERVICES INTO THE FOLLOWING 7 SERVICE CATEGORIES: OUTPATIENT AMBULATORY HEALTH, HOME AND COMMUNITY BASED, EARLY INTERVENTION SERVICE, EMERGENCY FINANCIAL ASSISTANCE, FOODBANK/HOME DELIVERED MEALS, NON-MEDICAL CASE MANAGEMENT AND OUTREACH SERVICES.

**2. Purpose of the motion / Need for the action**

The purpose of this reprogramming is to ensure that there are funds allocated in the service categories noted above to cover the funds awarded to sub-recipients in the aforementioned service categories.

**3. Research completed prior to formulating recommended action**

A review of the GY 31 continuation funds awarded to sub-recipients within the EMA has determined that this reprogramming is needed to facilitate the provision of services in the seven service categories listed above.

**4. Alternative strategies explored and reasons why the recommended action is preferable.**

Alternatives would be to release a new RFA to fund services in alignment with the current funding allocations. The current grant procurement structure utilized by the recipient is not conducive to meeting that alternative. Therefore, the optimal solution is to allocate funds that are in alignment with the year 3 continuation awards for GY 31.