

Cuyahoga Regional HIV Prevention and Care Planning Council

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina

Clinton Droster, Julie Patterson – Co-Chairs

Strategy and Finance Committee Minutes

Wednesday, November 1, 2023

1: 00 pm to 2:30 pm



Start: 1:08 pm

End: 2:30 pm

Facilitator: C. Droster

Moment of Silence

Welcome and Introductions

Please note: PC members who have a conflict of interest must inform the committee at the beginning of each meeting. A Conflict of Interest, as it pertains to the Ryan White Planning Council Bylaws, is defined as "an interest (actual or perceived) by a Planning Council member in an action that may result in personal, organizational, or professional gain for the member or his/her spouse, domestic partner, parent, child, or sibling."-

Approval of Agenda: November 1, 2023

Addendum:

Motion: F. Ross

Seconded: J. McMinn

Vote: In Favor: All Opposed: 0 Abstained: 0

Approval of the Minutes: October 4, 2023

Addendum:

Motion: F. Ross

Seconded: J. Patterson

Vote: In Favor: 9 Opposed: 0 Abstained: 2- M. Deighan, N. O'Neal

Recipient Report – November 2023

Fiscal Report Review – Z. Levar

This report is at the point where we shift to best utilize and get things on target. For the first six or seven months, which serves as our midpoint in the year, we have received invoices. We are now doing reallocations in real time, based on these invoices. At the November PC meeting, we want to be at 64% for grant spending. As we are currently at 54%, in this next activity (Reallocation) we can look at where numbers can be shifted to make up the difference. The strategy is to see where money is going, if money should go to another category, and/or if we are over-spending, all to make sure we fulfill requests or needs in the best way. Additionally, we have served roughly 2,800 clients, as we usually get up to 3,200, and for expenditures, we are close to 79% for core services.

New/Old Business

Reallocation & Carryover Process Training – L.J. Sylvia

This presentation is to provide a brief overview of the Strategy & Finance Committee Reallocation & Carryover process, traditionally done in November.

Reallocation Definition -The process of moving program funds across service categories after the initial allocations are made. The Planning Council **must** approve such allocations.

Reallocation Process – Reallocation occurs after funds have been awarded. Under the 2009 Ryan White legislation, the EMA/TGA will lose future funding if it does not spend at least 95% of its formula grant. The Recipient/Grantee must carefully monitor provider expenditures, and if it becomes clear that one provider cannot

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spend all the funds, the Recipient has the authority to reallocate funds within the service category. However, if more funds are needed in a different service category, the Recipient must come back to the PC and get its approval.

Rapid Reallocation Process - To ensure that all funds are spent, PC's need a rapid reallocation process for the last several months of the program year to help the Recipient ensure funds are fully spent. Most PC's have a policy that allows the Recipient to reallocate up to a specified percentage of total service dollars (e.g., 3% or 5%) without its prior approval during the last 3-4 months of the program year. Article XII – Maximizing Part A Funds of the Cleveland TGA Bylaws, grants authority to the Part A Recipient to reallocate Part A funds during the months of December, January and February, as needed and without prior approval by the PC. When such action is necessary the Recipient shall report the reallocation(s) to the PC no later than the month immediately following the action.

Carryover - The estimated amount of the Unobligated RW Part A formula grant funds remaining at the end of the grant budget year. Recipients are required to submit an Estimated Carryover Request together with the estimated Unobligated Balances (UOB) 60-days before the end of the grant year or by December 31st of each year. There are statutory penalties specific to UOB if recipients exceed 5% of the formula award.

RW legislation requires a waiver to request carryover of unobligated formula funds before the end of each fiscal year as necessary regardless of the amount of remaining funds. The request must contain the following information: 1. Estimated unobligated balance at the end of the grant year. 2. Estimated amount of funds projected to be available for carryover & the methodology used for estimating the carryover amount. 3. Source of the unexpended carry over funds (administrative, direct service, program support, and certain provider categories. 4. Proposed use. 5. Justification for use of funds. 6. Time period proposed for use of funds and ability to use. 7. Capability of the grantee/recipient to make funds availability for use and of the entities to utilize such funds in the designated time period.

Carryover Summary - If a Recipient does not request a waiver, and later identifies and reports unobligated Part A formula funds in the Final Federal Financial Report (FFR), the Recipient will not be able to carryover any part of its UOB. A carryover waiver request, submitted and approved by HRSA, allows the Recipient to expend the UOB in accordance with the purpose stated in the application. If approved funds are not expended in the carryover year, the funds will be cancelled and cannot be used in subsequent years. (If you don't use them, you lose them).

Reallocation and Carryover Discussion- Z. Levar

NOVEMBER REALLOCATIONS 2023

SERVICE	Core/Support	Initial Request	Mid-Year Requests	Current Award	October Reallocation	Recommended	Carryover	Final Recommended w/Carryover
PROVIDER TOTAL BUDGET	TOTAL BUDGET	\$ 5,658,412.85	\$ 4,615,047.79	\$ 4,248,648.00	\$ 2.00	\$ 4,248,650.00	\$ 145,087.00	\$ 4,393,737.00
OUTPATIENT/AMBULATORY HEALTH SERVICES	CORE	\$ 1,411,142.56	\$ 1,278,785.83	\$ 1,129,291.00	\$ 130,306.00	\$ 1,259,597.00		\$ 1,259,597.00
MEDICAL CASE MANAGEMENT	CORE	\$ 1,426,059.88	\$ 1,221,582.64	\$ 1,105,500.00		\$ 1,105,500.00	\$ 116,413.00	\$ 1,221,913.00
ORAL HEALTH CARE	CORE	\$ 365,744.81	\$ 453,021.16	\$ 235,375.00	\$ 67,877.00	\$ 303,252.00		\$ 303,252.00
MENTAL HEALTH SERVICES	CORE	\$ 309,370.88	\$ 279,928.87	\$ 402,347.00	\$ (122,347.00)	\$ 280,000.00		\$ 280,000.00
MEDICAL NUTRITION THERAPY	CORE	\$ 79,281.29	\$ 81,093.00	\$ 67,553.00	\$ 12,440.00	\$ 79,993.00		\$ 79,993.00
EARLY INTERVENTION SERVICES	CORE	\$ 372,787.10	\$ 334,308.63	\$ 427,414.00	\$ (93,104.00)	\$ 334,310.00		\$ 334,310.00
HOME HEALTH CARE SERVICES	CORE	\$ 11,807.00	\$ 11,896.00	\$ 11,896.00		\$ 11,896.00		\$ 11,896.00
HOME/COMMUNITY BASED HEALTH CARE	CORE	\$ 43,855.00	\$ 65,186.00	\$ 44,186.00	\$ 10,000.00	\$ 54,186.00		\$ 54,186.00
MEDICAL TRANSPORTATION	SUPPORT	\$ 113,825.89	\$ 117,847.00	\$ 86,672.00	\$ 23,998.00	\$ 110,670.00		\$ 110,670.00
EMERGENCY FINANCIAL ASSISTANCE	SUPPORT	\$ 20,093.00	\$ 13,517.00	\$ 22,517.00	\$ (17,317.00)	\$ 5,200.00		\$ 5,200.00

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NON-MEDICAL CASE MANAGEMENT SERVICES	SUPPORT	\$ 598,259.28	\$ 345,395.00	\$ 377,280.00	\$ (31,660.00)	\$ 345,620.00		\$ 345,620.00
PSYCHOSOCIAL SUPPORT	SUPPORT	\$ 114,668.16	\$ 54,063.66	\$ 57,357.00	\$ (3,357.00)	\$ 54,000.00		\$ 54,000.00
FOOD BANK/HOME DELIVERED MEALS	SUPPORT	\$ 162,912.00	\$ 97,298.00	\$ 83,698.00	\$ 4,402.00	\$ 88,100.00		\$ 88,100.00
OTHER PROFESSIONAL SERVICES	SUPPORT	\$ 314,303.00	\$ 261,125.00	\$ 197,562.00	\$ 18,764.00	\$ 216,326.00	\$ 28,674.00	\$ 245,000.00

We do reallocation every year because although we divvy money to providers, it doesn't mean we'll know how it will be spent over the 12-month cycle. There are a wide variety of things that could affect spending, such as: staff vacancies that could result in lower than anticipated spending. Mid-year we look at spending on anything that needs adjustments and then try to spend those dollars. If we show that we are continuously spending, it looks better to our funders. This meeting is Strategy & Finance's, first recommendation of the reallocating and carryover fund changes, before going for final approval and vote for what will be spent in the remaining months. About 5.6 million is what our providers request for funding. They then submit proposals on what they plan to spend and we then work to provide those funds, based on what we get. The mid-year request is where we reach out to sub-recipients asking them to scrutinize costs to see what adjustments are needed. Last, the October Reallocation process is us, the Part A office, taking money we have on hand and shuffling it around. There's no difference in the total money, just where the money goes in categories.

***Question: J. Patterson** – Can you explain the 2.00 amount, top of the October Reallocation column?

***Response: Z. Levar** – The October Recommended Column is where we would be for our new scenario figures. The other thing we lump into reallocation is carryover funds. Every year we're allowed to bring forward five percent, which is typically around \$145,000, for PC to decide categories they may want those funds to go towards, based on prior discussions and needs. We want to be at 80.9% for core services, as we always do a double check to be on target before going forth with recommendations.

***Question: C. Droster** - Can we explain reallocation and carryover?

***Response: L.J. Sylvia** – Reallocation is the process of moving program funds across service categories after the initial allocations are made. With carryover, if funds are unspent at end of grant budget year the recipient can request funds to be carried over into the next year. However, penalties can be involved if funds exceed the 5% limit, so we must be careful. Also, if we find money left over and there is no waiver request, those funds will be lost and cannot be used.

***Comment: C. Droster** – In summary, we always try to spend 100%, we must spend at least 95%, and if we go over, we could lose funding. Carryover is money from last year which we must spend right away.

***Question: X. Merced** – Is it correct that carryover funds are from the previous grant year, but must be spent in this grant year?

***Response: C. Droster** – Yes.

***Question: X. Merced** - Once carryover dollars are determined does that change if they can't be spent?

***Response: C. Droster** - Normally it goes into oral health care, but this year it changed to legal services.

***Comment: Z. Levar** - We have ability to adjust this. It came up for the first time last year, but it's not the end all on where we can spend money.

Reallocation/Carryover Suggestions – C. Droster

C. Droster - We will go over categories to add then to take from under the October Reallocation column.

Z. Levar – We must then make suggestions on where to earmark funds for next year, as this is needed before December 31st.

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J. Patterson – We took our best guess a year ago, and looks like we did well in the sense to meet mid-year requests. Medical Case Management (MCM) didn't need any more than that, and when we added from carryover, it balanced out. If we would take the ones that got the most, maybe consider Oral Health Services (OHS) and Med Case Management after that.

***Question: X. Merced** - Last year, with Oral Health, are dental exception in the carryover equation?

***Response: C. Droster** – We are working with Jason on this, as we did a deep dive in oral exemptions.

***Comment: Z. Levar** - We must take in consideration what providers are asking. Maybe we can find different ways to pay for things that other resources can provide. Oral health is usually lower on the totem pole because there are other ways to do this. Dental exceptions are rolled in here, based on spending and then prioritized that way.

J. Patterson - Recommendation for Outpatient Ambulatory Health Services (OAHS) and Medical Case Management (MCM), being the two highest in allocations added. **Also Oral Health Services (OHS) had mid- year requests we were unable to meet**, possibly due to issues with exceptions.

C. Droster – Recommendation for Outpatient Ambulatory Health Services (OAHS) Medical Case Management (MCM), Oral Health Services (OHS), and Other Professional Services.

***Comment- Z. Levar** – Perhaps consider something not FTE-based (full-time employ), like oral health.

***Comment -J. McMinn** – It would be good if things could move further along with dental providers, perhaps if carryover funding could be approved for exceptions that are already approved, though this couldn't be done before the grant year is up.

***Response: Z. Levar** - What we pay for regular services versus exceptions was the reason we wanted exceptions. However, it's now just been a balancing act.

***Comment – N. O'Neal** - Agree in thinking of ways to change how oral health exceptions are done.

***Comment: Z. Levar** – The other thing is \$145,000 is not a lot, so if it's spread out even more, it may not go where it's needed most.

J. Patterson – Final Recommendation for 2024 Reallocation and Carryover is for Oral Health Services and Other Professional Services categories.

Motion: To Recommend 2024 Reallocation and Carryover funds be designated to Oral Health Services (OHS) and Other Professional Services categories.

Motion: J. Patterson Seconded: F. Ross

Vote: In Favor: 8 Opposed: 0 Abstained: 3

Motion carried.

Review, Discuss, and Vote on the Reallocation Proposal

Motion: To Recommend the 2024 Reallocations, as presented to Full Planning Council.

Motion: F. Ross Seconded: K. Dennis

Vote: In Favor: 8 Opposed: 0 Abstained: 3

Motion carried.

Discuss and Vote on the FY2023 Carryover Request

Motion: To Recommend the 2024 Carryovers to Full Planning Council.

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Motion: J. Patterson

Seconded: K. Dennis

Vote: In Favor: 8 Opposed: 0 Abstained: 3

Motion carried.

Standing Business

Training Opportunities for S&F Committee Members - None

Parking Lot - None

Announcements - None

Adjournment: Motion: J. Patterson Seconded: F. Ross

Attendance

		Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
	S & F Members										
1	Clinton Droster, Co-chair	0	20	20	20	20	20	20	20	20	20
2	Julie Patterson, Co-chair	20	20	20	20	20	20	20	20	20	20
3	Michael Deighan	20	0	0	20	0	0	20	20	0	20
4	Jeannie Citerman-Kraeger	0	0	10	10	20	20	20	20	0	0
5	Biffy Aguiriano							20	20	20	0
6	Anthony Thomas							0	20	20	20
7	Naimah O'Neal	10	10	10	10	10	10	10	0	0	10
8	Jason McMinn	10	10	10	10	10	10	10	10	10	10
9	Faith Ross	10	10	10	10	10	10	10	0	10	10
10	Anthony Forbes						10	0	0	0	0
	Total in Attendance	5	5	6	7	6	7	8	7	6	7

PC Members: K. Dennis, B. Gayheart, L. Lovett, K. Ruiz

Attendees: X. Merced

Staff: A. Idov, Z. Levar, L.J. Sylvia, T. Mallory