

# **Cuyahoga Regional HIV Prevention and Care Planning Council**

*Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina Counties*

**Kimberlin Dennis, Brian Kimball, Christy Nicholls, Co-Chairs**



## **Full Planning Council Minutes**

**Wednesday, January 17, 2024**

**5:30 pm to 7:00 pm**

**Start:** 5:33 pm

**End:** 7:04 pm

**Facilitating Chairperson:** B. Kimball

### **Moment of Reflection**

### **Welcome and Introductions**

### **Approval of Agenda: January 17, 2024**

#### **Addendum:**

Motion: F. Ross      Seconded: J. Stevenson

In Favor: All      Opposed: 0      Abstained: 0

### **Approval of the Minutes: November 15, 2023**

#### **Addendum:**

Motion: F. Ross      Seconded: C. Nicholls

In Favor: 16      Opposed: 0      Abstained: 5 – J. Citerman-Kraeger, A. Forbes, B. Jones, J. Stevenson, S. Washington

### **PUBLIC HEALTH UPDATE**

#### **Brian Kimball**, Assistant Director, City of Cleveland Department of Public Health

There is no current data as of today, however, everyone is encouraged to please remember to get updated vaccinations.

#### **Dr. Barbara Gripshover, M.D.**, Immunology Medical Director, University Hospitals

Getting vaccines help overall and prevent severe illness, as there are still many diseases out there.

### **RECIPIENT REPORT – January 2024 - M. Baker**

**Administrative Updates:** Provider updates, HRSA reporting, Full/Partial Awards, RSR, etc.

- Preparing sub-recipients for submitting their services data in the HRSA database (Ryan White Services Report (RSR))

- Submitted the FY 24 Estimated Carryover Request to HRSA (5%=\$147,818)

- Welcomed new Grant Coordinator, Brittanie Evans to the Ryan White team

**Planning Updates:** HRSA updates, State Integrated Plan, RFPs, Monitoring, Needs Assessments, etc.

- HRSA is in the process of preparing their FY24 Notice of Award. As with previous years, the initial allocation will be a partial award (likely 45% of the total)

**Medical Case Manager Network Updates:** Topics discussed, MCM related initiatives, etc.

- MCM meeting held on 1/16/24-discussed Medicaid unwinding, EHE updates, Emergency Financial Assistance, and Basics of HIV and AIDS

**Training Updates:** Trainings held/attended, upcoming provider trainings, upcoming PC trainings, etc.

- Recipient office is preparing an EDI training schedule for Sub-recipients for FY24

- Recipient office will be hosting an on-site visit from CAREWare consultant to provide mandatory data entry training for all sub-recipients 1/22-1/25

**Clinical Quality Management Updates:** QI projects, QI meetings, CQM Plan updates, etc.

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- Full CQMC meeting took place in November 2023
- QI Project Management Workgroup met 1/10/24
- 2024 project goal is to improve viral suppression rate by 10% in 3 service categories

**Collaborative Updates/Info Share:** EHE, Prevention, newsletters, etc.

- EHE CAG meetings for 2024 will begin in March

New Prevention PC member on the horizon

**FY2023 Part A Funding Update:** Current Expenditure split, total expenses, etc.

- Core: 63.54 %, Support: 75.14%, Expenses: 65.78% for 9 months, Target: 75%

- Full Award provided \$4,917,218, **\$145,087 carryover added \$5,062,305 new total**

### **PART A EXPENDITURE REPORT – M. Baker**

This is the Ryan White Part A Expenditure Report through November 23, 2023. The goal is to reach the targeted expectation of 75% in spending by November and we are currently at 63%, close to that mark.

#### **RYAN WHITE PART A PROGRAM - CLEVELAND TGA YTD EXPENSES BY SERVICE CATEGORY - FY2023 - 1/3/2024**

Priority Ranking	Category	Total Awarded	YTD Spending %	YTD Spending Total	Unduplicated
	<b>Core Services Total</b>	<b>\$3 ,545,147.00</b>	<b>60.65%</b>	<b>\$ 2 ,150,282.25</b>	
5	Outpatient/Ambulatory Health Services	\$1,259,597.00	61.75%	\$777,803.82	2137
6	Medical Case Management	\$1,221,913.00	60.81%	\$743,059.26	869
1	Oral Health Care	\$303,252.00	56.74%	\$172,067.66	258
11	Mental Health Services	\$280,000.00	65.71%	\$183,999.52	674
14	Medical Nutrition Therapy	\$79,993.00	56.84%	\$45,469.82	151
8	Early Intervention Services	\$3 34,310.00	49.25%	\$164,646.57	335
12	Home Health Care Services	\$11,896.00	89.19%	\$10,609.70	22
13	Home/Community Based Health Care	\$54,186.00	97.12%	\$ 52,625.90	22
	<b>Support Services Total</b>	<b>\$848,090.00</b>	<b>73.40%</b>	<b>\$622,460.47</b>	
3	Medical Transportation	\$110,170.00	63.19%	\$69,615.13	1114
15	Emergency Financial Assistance	\$5,200.00	29.07%	\$1,511.76	2
7	Non-Medical Case Management Services	\$345,620.00	72.15%	\$249,354.85	1090
9	Psychosocial Support	\$54,000.00	77.66%	\$41,934.03	85
16	Food Bank/Home Delivered Meals	\$88,100.00	76.86%	\$67,716.49	381
4	Other Professional Services	\$245,000.00	78.50%	\$192,328.21	125
	<b>All Totals</b>	<b>\$4 ,393,237.00</b>	<b>63.11%</b>	<b>2 ,772,742.72</b>	<b>2890</b>

**OVERUTILIZED ON TARGET UNDERUTILIZED**

### **Medicaid Update – A. Thomas**

First, renewals went out for 2023 at an 86% completion rate. We are still trying to complete renewals which are steadily coming in, as well as work through marketplace applications. Second, please continue to send in Medicaid renewals. The more verifications info sent with renewals, the better. That makes for a smoother, true one-touch process, so people can stay covered with little or no interruption in service.

**Question: B. Jones** – Not having received a Medicaid card recently, do they still send them out?

**Response: A. Thomas** – For info/updates on Medicaid cards, contact state at:

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### **Ryan White Part B Update – K. Ruiz**

First, we are currently in the process of an EHE (Ending the HIV Epidemic) informal site visit. This is more of a discussion in which the HHS (Health and Human Services) EHE Coordinator has been going throughout the state meeting with people who receive EHE dollars. Second, while PrEP is very helpful, and we are excited for people to have access, we remind all to continue using protection, as other STI's and infections still continue to rise, particularly for people living with HIV.

**\*Comment: B. Jones** – There may be confusion on how these medications should be used, or some may not make the distinction between meds for HIV versus PrEP meds.

**\*Comment: J. Patterson** – The idea of people not having to worry about anything or being as careful, may be due to the messaging getting lost over time.

### **HOPWA (Housing Opportunities for People Living with HIV/AIDS) Update – T. Greene**

At CDPH, we are midway through year one of the current HOPWA funding cycle. Funding services are moving along, with the majority of our expenditures happening in our temporary rental assistance and community-based housing. We are also preparing an application for the recent HUD/HOPWA NOFO (Notice of Funding Opportunity) grant, which would allow us to provide more innovative practices in HOPWA services for three years, up to 2.5 mil per year, and separate from our current HOPWA funding. We will know if we are awarded and provide updates by spring. Last, we will be looking to hire a new HIV grant administrator sometime within the next few weeks.

### **Planning Council Business**

#### **Approval and Vote of the 2023 PC Renewal Candidates**

**Motion: To approve the eight (8) Membership, Retention & Marketing (MRM) Committee's 2023 Planning Council Renewal Candidates, as a slate vote.**

**Motion** J. Stevenson                      Seconded: L. Yarbrough-Franklin

In Favor: All      Opposed: 0      Abstained:

*Motion carries.*

### **PSRA (Priority Setting Resource Allocation) Timeline – L.J. Sylvia, J. Patterson**

The purpose of the presentation is to make sure everyone (especially new folks) understands what goes into PSRA, and are able to see when things happen so we can have the most participation possible.

The Planning Council's Strategy & Finance (S&F) Committee, is responsible for monitoring Part A expenditures and service utilization of service categories. However, the main focus of the S&F committee is the PSRA (Priority Setting & Resources Allocation) process, as it is also a major responsibility for the entire Planning Council, and one of the most important things we do each year. Taking a cue from the Ohio State Buckeye cheer, "O-H-I-O", the term PSRA is broken down into two separate parts, "PS" (Priority Setting) and "RA" (Resources Allocations) to better describe their processes. PS, or Priority Setting, is usually done in the S&F committees where they determine which service categories are priority in ranking. RA, or Resources Allocation happens separately, first in S&F, where the committee provides recommendations on where resources should be allocated, then at PSRA for Full Planning Council's discussion/review of S&F's recommendations before final vote and approval of the allocations to be designated for each service category. As a note, PSRA is usually conducted on the third Wednesday in June, but will be the fourth Wednesday this year, as the third week is the Juneteenth holiday.

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### **PSRA – Priority Setting & Resources Allocation**

#### **Priority Setting**

- All service categories must be ranked.
- The Strategy & Finance Committee leads this process **during** their committee meetings in **April and May**.
- The final ranking is voted on by the Full Planning Council in June.

#### **Resources Allocation**

- This is the process of determining what percentage of funds will go to each service category.
- This happens during a special meeting of the Full Planning Council in June.
- **Mark Your Calendars! – Wednesday, June 26<sup>th</sup>**
- The Resources Allocation work group will recommend several service categories for deeper discussion.

#### **PSRA Process**

- Data Presentations: HOPWA, AIDS Funding Collaborative, EPI Data, Client Utilization of Part A & B, and Community Needs Assessment
- Priority Ranking – Each service category is assigned a rank. The S&F committee leads this process during their committee meeting in April & May.
- Directives – Directives are recommended by the Quality Improvement Committee. Any committee can suggest a directive. Simply contact the QI Chair, Jason McMinn.
- Resources Allocation – The Full Planning Council determines what percentage of funds will be given to each category. A working group recommends categories for discussion and the final decision is made at the June PSRA meeting.

#### **PSRA SCHEDULE**

<b>Task/Process</b>	<b>Committee</b>	<b>Date</b>
HOPWA Presentation	Strategy & Finance	February 7
AIDS Funding Collaborative Presentation	Strategy & Finance	February 7
Client Utilization Presentation	Strategy & Finance	March 6
Community Needs Presentation	Full Planning Council	March 20
EPI Data Presentation	Full Planning Council	March 20
Rank Service Categories	Strategy & Finance	April 3 and May 1
Recommend Directives	Strategy & Finance	May 1
Determine Funding Allocations and Finalize all PSRA Decisions	<b>PSRA</b> Full Planning Council	June 26

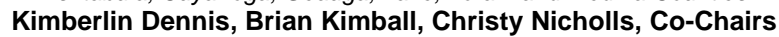
#### **Consumer Survey**

**L. J. Sylvia** - This CLC consumer survey is for PLWH, especially those receiving Ryan White services in our TGA, and we ask everyone to please share this with others. We can also make this available in hard copy, through link, or however needed.

**F. Ross** – We ask everyone to set a goal to give at least five people the survey, as that data is the basis of everything we do. Consumer Survey: All voices are important, and the more surveys we get, the more we can build better relationships and have better success at what we're doing,

<https://www.surveymonkey.com/r/Y7Y587H>

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22	James Stevenson	20									
23	Anthony Thomas	20									
24	Joye Toombs	0									
25	Stephanice Washington	20									
26	Rhonda Watkins	0									
27	Leshia Yarbrough-Franklin	20									
	<b>Total in Attendance</b>	<b>21</b>									

PC Attendees: V. Gibson, A. Rollins, T. Mahdi, L. Cantania, C. Krueger, T. Marbury, B. Willis, K. Rodas

Staff: M. Baker, L.J. Sylvia, T. Mallory

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