

# **Cuyahoga Regional HIV Health Services Planning Council**

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

**Michael Foreman, Darryl Fore Co-Chairs**



## **Strategy and Finance Committee**

**Wednesday, October 14, 2015**

**1: 00 pm to 2:30 pm**

St. Augustine Health/Ursuline Piazza Campus  
7801 Detroit Avenue ♦ Cleveland, OH 44102

**Start:** 1:22 **End:** 2:45 **Chair:** Michael Foreman

### **Moment of Silence**

### **Welcome and Introductions**

### **Approval of Agenda, October 14, 2015**

Motion: Clinton Droster    Seconded: Desi Johnson    In Favor: All    Oppose: 0

### **Approval of the Minutes, September 9, 2015**

Motion: Kimberlin Dennis    Seconded: Desi Johnson    In Favor: All    Oppose: 0

### **Grantee Report**

#### **a. FY2015 Utilization Update**

- 1. Grantee Report** - Melissa Rodrigo reviews the Utilization handout. The Expenditure Report – the year-to-date percentage split is 74.90% Core & 25.10% Support. As of August, should be at 50% utilization, currently at 43.40% of overall year-to-date expenditures, last year at this same time, we were at 36%.

Please note the Award split is 76.07% Core and 23.93% Support, overall spending cannot exceed 25% for support at the end of the year. Potential for adjustments, to increase Core: MCM, Oral health, Mental Health, EIS, Home Health, and Home / Community Based HS. Support – Substance Abuse Residential. \*\*\*\*split is difficult, need to reduce some support categories down in order to acquire funding for Substance Abuse. Potential for adjustments down LPAP, Substance Abuse Outpatient and HIPSCA.

Recommendations in November for reallocation – Grantee has conducted all but one budget meeting with providers. Providers are reviewing their anticipated expenditures for the grant year based on costs incurring, staffing levels, services performed, expenditure trends etc.

#### **2. Administrative Report**

- Working on grant application due on November 2nd
- Site Visit Corrective Action Plan (CAP) response to HRSA has been submitted

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- Carryover in the amount of \$141,840 has been received and PC already allocated to Oral Health no action needed. When added to current allocation, will increase Oral Health to a little over \$500,000.
- Subgrantee Monitoring has started and will last through the grant year
- No outstanding data requests
- Standards of Care meetings were conducted October 6<sup>th</sup> for MCM and EIS
- Lake County General Health District update – continue to work with two potential providers that can meet the requirement for providing services in Ashtabula and Lake county. The providers have offices in both locations. Will use existing Lake County funds
- Needs Assessment recommendation is included in the core waiver presentation
- Core Waiver presentation by (M Kirsch RW Program Manager)
- Next month November items that need votes –
  - o Reallocation of current year funds (*cannot go over 25% in support spending*), possible service categories for reallocation: MCM, Oral Health, Mental Health, Early Intervention and Substance Abuse, residential.
  - o Request for Carryover of FY15 funds into FY16

### **b. Core Waiver Update Presentation & Next Steps**

1. Molly Kirsch made presentation and provided handouts of Jurisdictions with approved waiver requests. Critical requirements for the waiver are, 1). demonstrate that core services will be available for clients within 30 day; 2). Cannot be a waiting list for ADAP and Medicaid; 3). Must have letters of support from Part B & Medicaid and possibly provide providers. Submitting an application for a waiver is possible in 2016 – need to keep an eye on Medicaid. Molly Kirsch recommends the S&F committee start working on the waiver process now and they are not required to use it if they get it approved.

A question was asked, does waiver effect the core/support, Molly Kirsch states yes, can change the support percentage.

2. Question was raised regarding transportation; Darryl Fore asked how Lake is providing transportation, Melissa Rodrigo states gas cards or an agency that provides transportation. Grantee allows providers to customize for their transportation needs. (Same discussion took place in CLC). Grantee will do what they are directed to do by PC, however Members don't want to chase any providers away by being too rigid.

### **New/Old Business**

#### **a. Discuss S&F responsibilities for HRSA Corrective Action Plan**

- i. Establish core components to Reorganize PSRA - Per Sharron Harris this committee needs to make a plan – look at how many service categories are funded, possibly make request to grantee for more data, what does epidemic look like, Sharron Harris has a formula for figuring out priority ranking. No more pulling categories out of the air without data to support it.



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Staff: Sharron Harris, Pam Ditlevson, Claire Boettler, Melissa Rodrigo, Molly Kirsch  
Guest: None

**Next Meeting:** November 4, 2015 – 1:00-2:30pm, St. Augustine/Ursuline Piazza Campus  
Visit the Ryan White HIV/AIDS Homepage at: [www.ccbh.net/ryan-white](http://www.ccbh.net/ryan-white)