

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

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

**Clinton Droster, Clifford Barnett - Co-Chairs**



## **Strategy and Finance Committee Minutes**

**Wednesday, May 5, 2021**

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

**Start:** 1:08 pm      **End:** 2:34 pm      **Co-chair: C. Barnett**

### **Moment of Silence**

### **Welcome and Introductions**

### **Approval of Agenda: May 5, 2021**

#### **Addendum:**

Motion: C. Droster      Seconded: K. Dennis  
Vote: In Favor: All      Opposed: 0      Abstained: 0

### **Approval of the Minutes: April 7, 2021**

#### **Addendum:**

Motion: C. Droster      Seconded: K. Dennis  
Vote: In Favor: All      Opposed: 0      Abstained: 0

### **Grantee Report - May 2021 – Planning Council**

1. Grantee Report
  - a. ODH State Integrated Plan – HRSA announced guidance for 2022-2027 Integrated Plan in June 2021, due December 2021; ODH holding initial planning meeting July 8<sup>th</sup>
  - b. Clinical Quality Management committee continues to meet with the efforts focusing on disparities in viral suppression. – developed projects in January 2021, held Quarter 1 follow up meetings in April, steady progress in all projects
  - c. Grantee team is continuing to work on the 2020 closeout.
  - d. Due to delayed hiring due to COVID life-saving and response throughout the TGA when vacancies occurred, funding remained at the end of the grant year.
  - e. ODH sponsored needs assessment update. ODH will be presenting at May Quality Committee to gather feedback on project
  - f. Grantee completed version six of the newsletter and it was sent out on December 1<sup>st</sup>. Feedback welcome. Next version June 2021.
  - g. The AETC presented at Planning Council in October. This met the PC directive of the grantee. Gilead presented February 23<sup>rd</sup> HIV 101 and a PrEP 101, Mental Health within COVID times was March 2<sup>nd</sup> and Oral Health training was completed on April 27<sup>th</sup>.
  - h. Part A Medical Case Manager kick off meeting occurred April 27<sup>th</sup>, will look to meet quarterly with MCMs to provide case management specific trainings and discuss current barriers their clients may be dealing with
  - i. Data to Care – ODH is reviewing its D2C process. CCBH will need to update our protocol in regard to potential changes. This project is a funded Ending the HIV Epidemic initiative. This project is getting additional TA from a HRSA sponsored agency for best practices pertaining to RX to Care project expansion.
  - j. CCBH continues to work with sub-recipients in regards to data completeness and productivity. CY2020 RSR submission is complete.
  - k. Ryan White Part A received COVID-19 funding. CCBH and CDPH conducted joint listening sessions with providers. CCBH completed a large order of masks for clients as well as distributed funding to all providers based on Part A eligible clients served. A no cost extension was granted through May to spend small amount of funds that agencies left unspent.

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- I. The full Ending the Epidemic award was received. The following projects are expected to continue: social media campaigns for U=U/stigma reduction for HIV positive clients. Community Health Worker Certification program in coordination with Cleveland State University, Data 2 Care program support, Intensive MCM program support, Medical Transportation program support and Rapid Art program support.
- m. Prevention Committee – The Prevention Committee has become integrated into PC having met twice already, with the next meeting occurring June 2<sup>nd</sup>
- n. **Full Part A award received 4/5/2021** – all provider allocations complete, contracts sent out, and some submitted for internal approval in the coming month
- o. Ending the Epidemic Plan update:  
Community Solutions completed the plan and it was submitted by ODH to the CDC for review. Thank you for participating in the plan development.

FY2020 Part A Grant:

Allocations split - 79.67% Core - 20.33% Support

Expenses are at 91.73% for 12 months (Underutilized)

Target for 12 months should be 100%, all invoices for FY2020 have been received and reported.

### **Administrative Update**

HRSA's 2021-22 annual plan will start in July. Hopefully, we will have more movement than in years past. Clinical Quality Management had a quarter follow up appointment and all are making steady progress. Michele Krelko will present on the ODH needs assessment at the May Quality Improvement meeting. The April 27<sup>th</sup> Oral Health training for medical case managers was very successful. We also had our first Part A medical case manager network meeting and hope to continue these quarterly.

### **Fiscal Report Review**

The full Part A award was received and all sub recipients have received contracts.

There was a 91.73% direct pay out and for 2020, we were well within the 75/25 split.

For 2021, we are just under \$4 million allocated to service categories with an 80% split between core and support.

We will provide further updates after invoices come start to in. We also added a blue bar to the report which shows where we are by month, at a glance.

*\*Question:* J. Patterson – Have we heard anything about the Prevention funding?

*\*Response:* Z. Levar - have not but anticipating, good bet that it's coming.

### **New/Old Business**

#### **PSRA Prioritizing Part A Funded Services – Cont'd**

##### **Remaining Funded Services**

###### **Non-Medical Case Management**

Payer of Last Resort - 5

Access/Maintenance in Care - 8

Specific Gaps/Emerging Needs - 8

Consumer Priority - 5

**Total: 6.8**

###### **Psychosocial Support (Support Groups)**

Payer of Last Resort - 5

Access/Maintenance in Care - 8

Specific Gaps/Emerging Needs - 8

Consumer Priority - 5

**Total: 6.8**

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### **Food Bank/Home Delivered Meals**

Payer of Last Resort - 5

Access/Maintenance in Care - 8

Specific Gaps/Emerging Needs - 5

Consumer Priority - 5

**Total: 6.05**

### **Other Professional Services (Legal)**

Payer of Last Resort - 8

Access/Maintenance in Care - 5

Specific Gaps/Emerging Needs - 5

Consumer Priority - 8

**Total: 6.95**

### **Remaining Non-Funded Services**

#### **ADAP (AIDS Drug Assistance Program)**

Payer of Last Resort - 8

Access/Maintenance in Care - 8

Specific Gaps/Emerging Needs - 8

Consumer Priority - 8

**Total: 8**

#### **Health Insurance Premium Cost Sharing Assistance (HIPSCA)**

Payer of Last Resort - 8

Access/Maintenance in Care - 8

Specific Gaps/Emerging Needs - 8

Consumer Priority - 8

**Total: 8**

#### **Local AIDS Pharmaceutical Assistance Program (LPAP)**

Payer of Last Resort - 8

Access/Maintenance in Care - 8

Specific Gaps/Emerging Needs - 8

Consumer Priority - 8

**Total: 8**

### **Hospice Services**

Payer of Last Resort - 5

Access/Maintenance in Care - 5

Specific Gaps/Emerging Needs -5

Consumer Priority -5

**Total: 5**

### **Substance Abuse Treatment Outpatient Services**

Payer of Last Resort - 5

Access/Maintenance in Care - 5

Specific Gaps/Emerging Needs - 5

Consumer Priority -5

**Total: 5**

### **Recommended Potential Directives**

Dr. B. Gripshover, M.D. recommended to the Quality Committee, and it was adopted:

1. Annual Cultural Competency Training for Dental Providers

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2. Invite the Office of Homeless Services to PC to present on services offered.

N. O'Neal – We will look at ways we can leverage with others and see how they can assist with the housing initiative.

### **Motion: To accept the 2021 Potential Directives as written.**

Motion: C. Barnett

Seconded: N. O'Neal

Vote: In Favor: All

Opposed: 0

Abstained: 0

*Motion passes.*

Discuss & Determine Out of Care Estimates (EIIHA/ Return to Care Estimates) - Tabled

Review/Update PSRA Evaluation/Feedback Survey - Tabled

Review 2022-2023 PSRA Work Plan & Remaining PSRA Activity - We will wrap up the committee's work plan for Priority Setting at the June 2<sup>nd</sup> meeting with discussions that address the following PSRA activities:

1. Review data if available & come up with a "Return to Care Estimate." If no data is available, we will establish the estimate based on prior year utilization & new PLWH epidemiology in the TGA.
2. We will review and revise (*if needed*) the S&F PSRA Evaluation/feedback form.
3. Review allocation scenarios to help make more efficient allocation decisions on June 16<sup>th</sup>.
4. Wednesday, June 16, 2021, will be the resource allocation final decision, concluding our PSRA process for the upcoming grant year (*Mar. 2022 – Feb. 2023*).

### **Standing Business**

S&F Committee Training Opportunities - Tabled

**Parking Lot** - None

### **Announcements**

C. Droster, C. Barnett - Thanks to everyone for getting through another year of Priority Setting. Good job!

### **Adjournment**

Motion: K. Dennis

Seconded: C. Droster

		Jan	Feb	Mar	Apr	May	June PSRA	Aug	Sep	Oct	Nov
1	<b>Clinton Droster, Co-chair</b>	20	20	20	20	20					
2	<b>Clifford Barnett, Co-chair</b>	20	20	20	20	20					
3	Michael Deighan	20	20	20	20	20					
4	Naimah O'Neal	10	10	10	10	10					
5	Julie Patterson	20	20	20	20	20					
6	Jeff Mazo	0	20	20	0	0					
	<b>Total in Attendance</b>	5	6	6	5	5					

**PC Members:** K. Dennis, J. Citerman-Kraeger, B. Gayheart, Dr. B. Gripshover, M.D., L. Lovett, J.

**McMinn, F. Ross, R. Watkins**

**Attendees:** none

**Staff:** M. Halko, Z. Levar, S. Harris, T. Mallory