

Cuyahoga Regional HIV Prevention and Care Planning Council

Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina

Clinton Droster, Julie Patterson – Co-Chairs



STRATEGY & FINANCE COMMITTEE (S&F) COMMITTEE

Virtual “Teams” Meeting Minutes

Wednesday, February 5, 2025 – 2-3:30 pm

S&F Planning Council Members			Planning Council Members	Planning Council Attendees	Presenter(s)
1. Clinton Droster, Co-Chair		P	Billy Gayheart	Rickey Lewis	Jeff Spiegel
2. Julie Patterson, Co-Chair		P	Naimah O’Neal	Antonio (guest)	
3. Kimberlin Dennis		A	Biffy Aguiriano		Recipient Office
4. Tiffany Greene		P	Jeannie Citerman-Kraeger		Monica Baker
5. Xiomara Merced		P	LeAnder Lovett		Zach Levar
6. Anthony Thomas		P	Karla Ruiz		Anastassia Idov
7. Leshia Yarbrough-Franklin		A			Lisa-Jean Sylvia
8. Talib Mahdi		P			Toni Mallory
Total of 20 in attendance		P = Present EX = Excused Absence A = Absent O (Other) = Virtual, Phone			
Call to Order		Co-chair, Julie Patterson, called the meeting to order at 2:05 pm.			
Moment of Silence		In remembering all those past, present, and future in the fight against HIV/AIDS.			
Quorum Determination		Six (6) of eight S&F committee members present - quorum of (5) needed.			
Welcome, Introductions & Conflicts of Interest		All members, attendees, and guests welcomed and asked to state names, affiliations, and conflicts of interest in the chat.			
Approval of Agenda		S&F Committee reviewed and approved the agenda for February 5, 2025. Motion made by Xiomara Merced, seconded by Naimah O’Neal. All in favor, Opposed: 0, Abstained: 0			
Approval of Minutes		S&F Committee reviewed and approved the minutes from January 8, 2025. Motion made by Talib Mahdi, seconded by Billy Gayheart. In Favor: 11, Opposed: 0; Abstained: 1- A. Thomas			
Recipient Report Fiscal Report Review		Recipient Report – M. Baker Monica – We are looking at expenditures through year to date for invoices we received for RW program. The target amount of expenditures for Mar-Dec. is 83.33%. Overall utilization is at 81.43%, which is slightly under the usual, based on fewer invoices due in December coming through during the slower season. We have also expended 71% of the total budget, and are currently on target with Medical Case Management, Oral Health, and Non-Medical Case Management. Last, we are over-utilized in Medical Nutrition, Home Community-Based Health Care, Psychosocial Support and Other Professional Services, as this report should change and be updated by Full PC meeting. *Question: X. Merced - For over/under utilized services, how do these percentages come about?			

***Response: M. Baker** - It's based on the target for this year, as we are expected to maintain a split between core services, or those more closely related to medical care, and support, or services that lend help with promoting overall health and well-being.

***Question: X. Merced** - Is there concern on meeting goals, based on the current federal messaging?

***Response: M. Baker** - Based on the memo we received from our board leadership on current directives, the expectation is that we have the opportunity to service invoices submitted up to January 20, 2025. However, any invoices received after that time are at risk for sub-recipients to resolve until or unless we receive other information. To add, more updates will be provided next week, as info has also been sent to our providers on how we will proceed with agreements already in place.

***Question: J. Patterson** - Is the CCBH board meeting open to public?

***Response: M. Baker** - Not certain of what, or if, meetings are open to discuss current affairs.

Priority Ranking	Category	Total Awarded	YTD Spending %	YTD Spending Total	Unduplicated
	Core Services Total	\$3,394,812.00		\$2,741,077.12	1/31/2025
5	Outpatient/Ambulatory Health Services	1,181,029.00	77.19%	911,597.51	2330
6	Medical Case Management	1,215,684.00	85.67%	1,041,504.52	960
1	Oral Health Care	231,311.00	83.69%	193,582.24	306
11	Mental Health Services	297,324.00	73.99%	219,982.46	545
14	Medical Nutrition Therapy	63,317.00	91.01%	57,627.25	136
8	Early Intervention Services	340,676.00	75.24%	256,320.28	390
12	Home Health Care Services	14,766.00	67.35%	9,944.45	25
13	Home/Community Based Health Care	50,705.00	99.63%	50,518.41	24
	Support Services Total	\$827,185.00		\$697,233.85	
3	Medical Transportation	94,971.00	80.59%	76,534.74	1244
15	Emergency Financial Assistance	10,687.00	8.45%	902.61	4
7	Non-Medical Case Management Services	367,341.00	82.40%	302,692.60	1340
9	Psychosocial Support	61,774.00	89.55%	55,315.85	89
16	Food Bank/Home Delivered Meals	95,987.00	80.10%	76,889.44	409
4	Other Professional Services	196,425.00	94.13%	184,898.61	170
	All Totals	\$4,221,997.00	81.44%	\$3,438,310.97	3244

OVERUTILIZED ON TARGET UNDERUTILIZED

New/Old Business HOPWA Presentation

HOPWA (Housing Opportunities for Persons Living with HIV/AIDS) – Tiffany Greene, City of Cleveland Department of Public Health

WHAT IS HOPWA? – Housing Opportunities for Persons living with HIV/AIDS.

The goal of the HOPWA program is to ensure that clients are living in stable housing, improve access to health care and related supportive services, and reduce the risk of homelessness.

- The only federal program dedicated to the housing needs of people living with HIV/AIDS
- Managed by HUD's (Housing and Urban Development) Office of HIV/AIDS
- HUD makes grants to local communities, states, and non-profit organizations for projects that benefit low-income persons living with HIV/AIDS and their families.

HOPWA ELIGIBILITY

- Low-income persons (at or below 80% of the area median income)
 - Medically diagnosed with HIV/AIDS – Families eligible for HOPWA-funded assistance.
 - Within the Cleveland Metropolitan Statistical Area (MSA): Cuyahoga, Geauga, Lake, Lorain, Medina
- People living with HIV/AIDS (PLWHA) can go to a community partner to sign up for HOPWA housing subsidy assistance.

HOPWA PARTNER AGENCIES

AIDS Taskforce of Greater Cleveland (ATGC), Emerald Development & Economic Network, Inc. (EDEN), Joseph's Home (Joe HM), Northeast Ohio Coalition for the Homeless (NEOCH), and Nueva Lux Urban Resource Center (NLURC).

	<p>HOPWA SERVICES Tenant based Rental Assistance – TBRA Short-Term Rental, Mortgage, Utility Assistance – STRMU Short-Term Supported Housing – STSH (hotel, Airbnb, etc.) Permanent Housing - PHP</p> <p>Q&A's *Question: X. Merced - Are you seeing issues with the current rent calculations for vouchers as the cost of rent continues to rise? *Response: T. Greene - We are seeing rises but are continuing to follow HOPWA rules. *Question: J. Patterson - What about Joseph's Home? *Response: T. Greene - They are doing great. *Question: Antonio (guest) - Is HPWA directing from fed orders? *Response: T. Greene - We are operating as normal until hearing otherwise. *Comment: L.J. Sylvia – As a note, HOPWA in Ryan White is a non-funded service that does not service our Ashtabula County. Also, it covers rental housing help but not for those facing foreclosure. *Response: T. Greene - That is correct, although folks have used rental assistance to pay mortgages. *Comment: Z. Levar – The Youngstown area does have HOPWA services and they represent for Ashtabula, and Ryan White Non-Medical Case Management services is used to offset some HOPWA programming, in which they can use that money to help with rent. Also, Nueva Luz has a variety of housing case managers to provide those services.</p>																														
<p>Ranking of Non-Funded Service Categories</p>	<p>Ranking of Non-Funded Service Categories – L.J. Sylvia The PSRA (Priority Setting & Resources Allocation) process is done in two parts each year. This first part is the “PS” or priority ranking of Ryan White services. The Strategy & Finance (S&F) committee leads the ranking process in their meetings starting in February, and afterwards, the final ranking is then voted on and approved by Full Planning Council at the June PSRA meeting, based on the following criteria used for ranking. 1. <i>Payer of Last Resort</i>; 2. <i>Access/Maintenance in Care</i>; 3. <i>Specific Gaps/Emerging Needs</i>, and 4. <i>Consumer Priority</i></p> <p>Z. Levar – To add, if services are not ranked at that time, they cannot be pulled in later for funding. J. Patterson – The goal is to keep them eligible in case they are needed, as we put more energy into those services that are funded.</p> <p>Part A Non-Funded Category Rankings (15) – February 5, 2025</p> <table border="1"> <tr><td>Housing Services</td><td>15</td></tr> <tr><td>AIDS Drug Assistance Program (ADAP)</td><td>16</td></tr> <tr><td>Health Insurance Premium Cost Sharing (HIPCSA)</td><td>17</td></tr> <tr><td>Referral for Health Care/Supportive Services</td><td>18</td></tr> <tr><td>Rehabilitation Services</td><td>19</td></tr> <tr><td>Respite Care Services</td><td>20</td></tr> <tr><td>Local AIDS Pharmaceutical Assistance</td><td>21</td></tr> <tr><td>Treatment Adherence Counseling</td><td>22</td></tr> <tr><td>Hospice Services</td><td>23</td></tr> <tr><td>Substance Abuse Treatment (Outpatient Services)</td><td>24</td></tr> <tr><td>Substance Abuse Treatment (Residential Services)</td><td>25</td></tr> <tr><td>Health Education/Risk Reduction</td><td>26</td></tr> <tr><td>Outreach Services</td><td>27</td></tr> <tr><td>Child Care Services</td><td>28</td></tr> <tr><td>Linguistics Services</td><td>29</td></tr> </table>	Housing Services	15	AIDS Drug Assistance Program (ADAP)	16	Health Insurance Premium Cost Sharing (HIPCSA)	17	Referral for Health Care/Supportive Services	18	Rehabilitation Services	19	Respite Care Services	20	Local AIDS Pharmaceutical Assistance	21	Treatment Adherence Counseling	22	Hospice Services	23	Substance Abuse Treatment (Outpatient Services)	24	Substance Abuse Treatment (Residential Services)	25	Health Education/Risk Reduction	26	Outreach Services	27	Child Care Services	28	Linguistics Services	29
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	<p>Motion: To approve the priority ranking of non-funded service categories as shown. Motion made by Talib Mahdi, seconded by Billy Gayheart.</p> <p>Motion Amended: To approve the priority ranking of non-funded service categories for FY 2026-27 as shown on screen. Motion: Talib Mahdi Seconded: Billy Gayheart Vote: In Favor: All; Opposed: 0; Abstained: 0 <i>Motion passes.</i></p> <p>L.J. Sylvia - Next month we will look at ranking of funded services which will include data.</p>
Parking Lot	None
Announcements	<p>N. O’Neal – There are two upcoming events. One is for this Friday, in recognizing HIV Awareness Day, regarding a virtual discussion between heterosexual men and women on navigating relationships for people living with HIV. Also, on February 28th, from 1-3 pm, there will be an event around “HIV is Not a Crime”, held at the Centers Uptown location. There will be food, educations, a Jeopardy game, limited transportation assistance, and gift cards for winners in the of game groups. Last, we have an English and Spanish version of new CLC survey, and are asking all to help get the word out to those in our TGA who use RW services, as this helps our data on how we access services. The deadline for the survey is the 21st of this month and our hope is to exceed last year’s goal.</p> <p>J. Patterson – The LGBT Center is hosting an event, tables are free, and all are welcome to come and participate.</p> <p>K. Ruiz - The following link is data on new HIV diagnoses and other reporting info: https://odh.ohio.gov/know-our-programs/hiv-aids-surveillance-program/data-and-statistics.</p>
Adjournment	<p>Meeting adjourned at 3:23 pm. Motion made by Naimah O’Neal, seconded by Talib Mahdi.</p>