MEETING AGENDA

VIRTUAL:

Thursday, September 14th, 2023 2:00 p.m. – 4:30 p.m.

- ♦ Call to Order
- ♦ Welcome/Introductions
- ♦ Approval of Agenda
- ♦ Approval of Minutes (June 8th, 2023)
- ♦ Report of Co-Chairs
- ♦ Report of Staff
- ♦ Discussion Item
 - Monitoring the Administrative Mechanism Review
 - Year-End Support Budget
- ♦ Action Item
 - Co-chair Nominations
- ♦ Committee Reports:
 - Executive Committee
 - Finance Committee Alan Edelstein & Adam Williams
 - Nominations Committee Michael Cappuccilli & Juan Baez
 - Positive Committee Keith Carter
 - Comprehensive Planning Committee Gus Grannan & Debra Dalessandro
 - Prevention Committee Desiree Surplus & Clint Steib
- ♦ Other Business
- ♦ Announcements
- ♦ Adjournment

Office of HIV Planning, 340 N. 12TH Street, Suite 320, Philadelphia, PA 19107 (215) 574-6760 • FAX (215) 574-6761 • www.hivphilly.org
The next HIV Integrated Planning Council meeting is

VIRTUAL: October 12th, 2023 from 2:00 p.m. to 4:30 p.m.

Please contact the office at least 5 days in advance if you require special assistance.

Staff Directory

Mari Ross-Russell - Director, Finance Committee Email: mari@hivphilly.org

Tiffany Dominique — Prevention Committee Email - tiffany@hivphilly.org

Debbie Law — Nominations Committee Email - debbie@hivphilly.org

Sofia Moletteri— Comprehensive Planning Committee, Poz Committee, Website Email: sofia@hivphilly.org

Kevin Trinh — Minutes & Attendance Email: kevin@hivphilly.org

Beth Celeste — Reception Email: beth@hivphilly.org Philadelphia: HIV Integrated Planning Council Meeting Minutes of Thursday, August 10th, 2023 2:00 p.m. – 4:30 p.m.

Office of HIV Planning, 340 N. 12th St., Suite 320, Philadelphia PA 19107

Present: Adam Williams, AJ Scruggs, Alan Edelstein, Clint Steib, Debra D'Alessandro, Desiree Surplus, DJ Jack, Erica Rand, Evan Thornburg (Co-chair), Gerry Keys, Gus Grannan, Jose DeMarco, Juan Baez, Keith Carter, Lorett Matus, Lupe Diaz (Co-chair), Pamela Gorman, Shane Nieves, Sharee Heaven (Co-chair)

Guests: Ameenah McCann-Woods (DHH), Maddison Toney, Ashini Patel, Maggie Luo, Mike Valentino, Nicole Savidge, Ronak Ahir

Excused: Michael Cappuccilli, Jeffrey Haskins

Staff: Beth Celeste, Tiffany Dominique, Debbie Law, Sofia Moletteri, Mari Ross-Russell, Kevin Trinh

Call to Order: L. Diaz called the meeting to order at 2:05 p.m.

Introductions: L. Diaz asked everyone to introduce themselves.

Approval of Agenda: L. Diaz referred to the August 2023 HIV Integrated Planning Council agenda and asked for a motion to approve. C. Steib made a correction to the agenda where D. Surplus was not listed as a co-chair of the Prevention Committee. He thanked L. Matus, who was a previous co-chair for the Prevention Committee, for her years of service. He encouraged everyone to run for his seat on the Prevention Committee because his term was ending. **Motion:** K. Carter motioned; L. Matus seconded to approve the amended August 2023 HIV Integrated Planning Council agenda via a Zoom poll. **Motion passed:** 14 in favor, 4 abstained. The amended August 2023 HIV Integrated Planning Council agenda was approved.

Approval of Minutes (*June 10th, 2023*): L. Diaz referred to the June 2023 HIV Integrated Planning Council agenda and asked for a motion to approve. Motion: K. Carter motioned; A. Edelstein seconded to approve the amended June 2023 HIV Integrated Planning Council minutes via a Zoom poll. Motion passed: 12 in favor, 5 abstained. The June 2023 HIV Integrated Planning Council minutes were approved.

Report of Co-Chairs:

L. Diaz attended the state HIV Planning Group meeting (HPG). She reported that the HPG was shifting its focus toward people with HIV who were long-term survivors, as well as anyone with HIV over the age of 50.

- L. Diaz asked C. Steib to give his report since he was a part of the Evaluation Subcommittee. C. Steib reported that at the last meeting, there was a presentation on statistics and what the state was doing to help recruit for the HIV Integrated Planning Council. He mentioned another presentation about at-home HIV test kits being distributed. He also noted that there were some issues with the language used in the test kits, and the state was planning to correct the language going forward with updated HIV language.
- K. Carter inquired about how "long-term survivor" was defined. L. Diaz explained that the state HPG did not officially define long-term survivor because they did not want to stratify the population based on the duration of HIV infection, such as distinguishing between those who had HIV for 20 years versus 15 years. L. Diaz mentioned that the consensus seemed to be that 20-30 years with HIV was considered a long-term survivor, but the state HPG did not want to officially define it. C. Steib added that they had also discussed co-morbidities in the context of long-term survivors since people tend to develop more comorbidities as they age.
- L. Diaz asked if E. Thornburg and S. Heaven had a report. They said they did not have a report.

Report of Staff:

- M. Ross-Russell had two items to report. She reported that they added the Consumer 2022 Survey to the HIVPhilly.org website. The second item was the addition of a staff directory to the meeting packet. M. Ross-Russell said after discussions with the Nominations Committee and the HIV Integrated Planning Council, they had decided to place the contact information for the staff in the meeting packet so that the staff would be more readily accessible to the members for any questions.
- S. Moletteri announced that HIPC was accepting nominations since member terms were concluding soon. She said that if a member's term was ending, they should have been contacted by D. Law. S. Moletteri assured members that D. Law would answer any questions related to membership. She sent the HIPC members a link to the application. M. Ross-Russell said that if the HIPC members knew anyone who would be a fit for the HIPC, they should encourage them to apply for membership.
- M. Ross-Russell then spoke about the tax clearance requirement that was a part of the application process. She said people who did not own their home, rented their home or were not living in Philadelphia may find obtaining the tax clearance for membership difficult. She said they would assist any HIPC member or potential candidate if they contact the HIPC staff and work with the city government to resolve the issue. C. Steib said he had been trying to obtain the tax clearance on two separate days but was unable to. M. Ross-Russell asked C. Steib to forward his information so she could contact Dr. Brady and resolve the issues with the city.
- D. D'Alessandro asked when they would transition to hybrid meetings. M. Ross-Russell said they were going to transition to hybrid meetings once they had solved some issues that came with moving meetings that were entirely online to allow people to meet in person again. One of the issues was finding a way to position the camera so that people who did not want to be recorded would not be seen. She said the Office of HIV Planning had also some issues with stable internet access. M. Ross-Russell said they had obtained a new router from Comcast to

settle the problem and they determined the router was not the cause. D. D'Alessandro recommended the Meeting Owl camera. She said the camera was currently being used by her organization. E. Thornburg said it had cost \$1100 and had the ability to respond to voice. She said the camera had a range and if they moved the people who did not want to be recorded out of the camera's range, they would not risk being recorded. M. Ross-Russell said they had considered the Meeting Owl camera and were concerned that the camera moved based on activity. She said they would need to divide the room so they knew the people who did not want to be recorded were out of range.

Action Item

-Decisions and Directives Vote-

A. Edelstein introduced himself as the co-chair for the Finance Committee. He explained that the action item pertained to the allocation plans created during the three regional allocation meetings. He clarified that the directives referred to the instructions given to the recipients. He mentioned that they had already completed the three regional meetings for the Philadelphia counties, the four southern New Jersey counties, and the four suburban Pennsylvania counties. A. Edelstein proceeded to review the decisions made during these allocation meetings, which had been reviewed by the Finance Committee the previous week. The Finance Committee was now recommending these plans for approval by HIPC.

HIPC would evaluate the funding decisions for each region and then vote on them as a whole. Afterward, they would vote on the directives. S. Moletteri reminded A. Edelstein that they would also review the budget plans for the systemwide and Minority AIDS Initiative budgets (MAI).

The first budget to be reviewed was for the New Jersey counties. During the New Jersey allocation meetings, members voted on three plans. The first plan involved maintaining level funding for all service categories in New Jersey counties, as currently allocated in FY2023. The second plan, the 5% increase plan, added \$117,800 to Transportation Services while keeping all other funded categories at level funding. The third plan, the 5% decrease plan, proportionally reduced all funded categories by \$117,801, with the exception of Transportation Services. A. Edelstein inquired about the discrepancy between the 5% increase and 5% decrease budgets. M. Ross-Russell explained that the difference was due to rounding.

A. Edelstein then proceeded to review the budget plan for the Pennsylvania counties. The level funding plan aimed to fund all service categories at their current levels, except for Emergency Financial Services, which would be reduced by \$80,000. The allocated funds would be transferred to Transportation Services. The 5% increase budget plan involved distributing \$179,156 proportionally among all funded service categories. The 5% decrease plan entailed reducing funding proportionally across all service categories by \$179,156 from the original level funding budget.

Next, HIPC reviewed the budget plan for Philadelphia County. The level funding plan maintained that all funded service categories should remain at their current levels, as allocated in FY2023. The 5% decrease plan reduced funding for all service categories proportionally by \$600,822. Conversely, the 5% increase plan increased funding for all service categories proportionally by \$600,822.

Motion: A. Edelstein motioned for the HIV Integrated Planning Council to vote on the three regional budget plans.

A. Williams: In Favor J. Baez: In Favor K. Carter: In Favor A. Edelstein: Abstained L. Diaz: Abstained D.Jack: In Favor L. Matus: In Favor S. Nieves: In Favor E. Rand: In Favor D. Surplus: In Favor S. Heaven: Abstained J. DeMarco: In Favor E. Thornburg: Abstained G. Keys: In Favor D. D'Alessandro: In Favor G. Grannan: In Favor A. Scruggs: In Favor

Motion: 15 in favor, 4 abstaining. The motion to approve the three regional budgets was passed.

A. Edelstein read the directives for each region. The first directive to be reviewed was the New Jersey County Directives. The New Jersey directives were:

C. Steib: In Favor P. Gorman: In Favor

- Encourage outreach to aging populations to ensure they are informed about funded services.
- Increase access to and awareness of telehealth options to medical and social service care; request more information on telehealth services provided and the circumstance of its use.
- Ensure subrecipients are disseminating information on the availability and coverage of EFA funding so clients can access this service.
- DHH is to report back to the Comprehensive Planning Committee with progress and updates on the currently implemented EFA-Housing Model.
- In accordance with federal treatment guidelines, increase access to immediate ART initiation (within 96 hours) from diagnosis unless otherwise clinically indicated and recorded.
- Expand operating hours to include evening and weekend appointments for HIV medical care in community and hospital-based HIV treatment sites.

A. Edelstein then read the directives for the Pennsylvania counties:

- Increase access to and awareness of telehealth options to medical and social service care; request more information on telehealth services provided and the circumstance of its use.
- Encourage outreach to aging populations to ensure they are informed about funded services.
- Ascertain the need for increased mental health services in the PA counties, including surveying existing mental health providers and their accessibility.

A. Edelstein then read the directives for the Philadelphia counties:

- Review which services are most utilized and needed by People Living With HIV 50+ years old; encourage outreach to said population to ensure they are informed about funded services.
- Increase access to and awareness to Food Bank services, especially those that are culturally relevant; request more information on Food Bank services provided and their utilization to determine improved health outcomes.
- Ensure subrecipients are disseminating information on the availability and coverage of EFA funding so clients can access this service.

Motion: A. Edelstein motioned for the HIV Integrated Planning Council to vote on the three regions' directives.

A. Williams: In Favor
J. Baez: In Favor
K. Carter: In Favor
A. Edelstein: Abstained
L. Diaz: Abstained
D. Jack: In Favor
L. Matus: In Favor
S. Nieves: In Favor
E. Rand: In Favor
S. Heaven: Abstained
D. Surplus: In Favor
J. DeMarco: In Favor
E. Thornburg: Abstained

D. D'Alessandro: in Favor G. Grannan: In Favor C. Steib: In Favor P. Gorman: In Favor

G. Keys: In Favor

Motion: 14 in favor, 4 abstained. The motion to approve the three regional directives was passed.

A. Edelstein moved to review the Minority AIDS Initiative (MAI) budget plan. He said this was funding set aside by the Congressional Black Caucus to address the epidemic in areas of high

minority concentration. He said these funds were part of Ryan White Part A funding. Two services were funded by MAI: Ambulatory Care and Case Management. The level funding budget allocated \$349,763 to Ambulatory Care and \$1,326,356 to Case Management Services. The 5% increase plan would increase Ambulatory Care services to \$367,251 and Case Management funding would be increased to \$1,392,675. The 5% decrease budget plan would decrease funding for Ambulatory Care to \$332,275 and Case Management Services to \$1,260,039.

Motion: A. Edelstein motioned for the HIV Integrated Planning Council to vote on the Minority AIDS Initiative.

A. Williams: In Favor J. Baez: In Favor K. Carter: In Favor A. Edelstein: Abstained L. Diaz: Abstained D.Jack: In Favor L. Matus: In Favor S. Nieves: In Favor E. Rand: In Favor S. Heaven: Abstained D. Surplus: In Favor J. DeMarco: In Favor E. Thornburg: Abstained G. Keys: In Favor D. D'Alessandro: Abstained G. Grannan: In Favor

Motion: 13 in favor, 5 abstained. The motion to approve the Minority AIDS Initiative budget was passed.

C. Steib: In Favor P. Gorman: In Favor

A. Edelstein explained that systemwide expenditure had affected the whole Eligible Metropolitan Area. He said the level planning budget was to keep all funded services at level funding. The 5% increase budget would proportionately increase all service categories. The 5% decrease budget would decrease all service category budgets proportionately.

K. Carter asked what the categories had meant for them. M. Ross-Russell explained that QM activities could not exceed 5% of the total grant award. She said Information and Referral had counted as a service and were part of the budget. She said the Department of HIV Health (DHH) managed Systemwide Coordination and Capacity Building. Planning Council Support referred to activities conducted by the Office of HIV Planning. DHH had also managed the Grantee Administration. The services that DHH oversaw could not exceed 10% of the total award. M. Ross-Russell said the number FY 2024-2025 described the budget under the level funding budget. The column next to that had numbers in blue. M. Ross-Russell said these numbers were

the budget under the 5% increase budget. The column next to that was the 5% decrease budget and it was written in orange. The MAI budget was written in the same way with the 5% increase budget in blue and 5% decrease budget in orange. M. Ross-Russell moved to the section of the chart where the service dollars were broken down regionally. She noted that the services had agreed with the service dollars lines that were in the Systemwide chart.

M. Ross-Russell asked if there were any additional questions. D. D'Alessandro said they had difficulty reading the chart because they did not have their glasses and had difficulty reading orange and green. M. Ross-Russell said she can accommodate persons with this disability by italicizing words to differentiate between core and support services.

A. Williams: In Favor K. Carter: In Favor A. Edelstein: Abstained L. Diaz: Abstained L. Matus: In Favor S. Nieves: Abstained E. Rand: In Favor S. Heaven: Abstained D. Surplus: In Favor J. DeMarco: In Favor E. Thornburg: Abstained G. Keys: In Favor D. D'Alessandro: Abstained G. Grannan: In Favor A. Scruggs: Abstained C. Steib: In Favor P. Gorman: In Favor

Motion: 12 in favor, 6 abstained. The motion to approve the Systemwide budget was passed.

J. Baez: In Favor

A. Edelstein said their business was concluded. He thanked the staff for gathering the material and facilitating the meetings as well as being responsive to all questions. He thanked A. McCann-Woods for providing information regarding trends in service delivery.

Committee Reports:

-Executive Committee-None.

-Finance Committee-None.

-Nominations Committee-

J. Baez reported that the Nominations Committee discussed HIPC attendance and the fall application process. He said they had 38 members in total with 13 member's terms up for renewal. He said they were asking members whose terms were ending to contact staff. He also encouraged all members to reach out to people who may be interested in joining HIPC so they could maintain membership numbers that complied with the Bylaws. S. Moletteri sent a link to the Survey Monkey application to HIPC members

-Positive Committee-

K. Carter said they would be meeting on the second Monday of every month and the next meeting would be held on August 14th and they would be discussing the allocations process. He said they would be answering questions and conducting new business.

-Comprehensive Planning Committee-

G. Grannan said he would be meeting with D. D'Alessandro and S. Moletteri so she could be oriented as a co-chair.

-Prevention Committee-

C. Steib reported the Prevention Committee did not meet last month and they would not meet in August either due to conflicts with vacation timings. They would resume their meetings in September.

Other Business:

None.

Announcements:

- L. Diaz announced that the Department of Health was hosting an HIV conference that would be taking place in Gettysburg on September 13 to 14th. There was space for 120 people. D. D'Alessandro asked if the event was hybrid. L. Diaz said the event was in-person only.
- D. D'Alessandro announced that there was a Health Federation event on curing Hepatitis C for clinicians. She said it was a two day event in a virtual setting in mid-September and December.
- S. Moletteri said the state of Pennsylvania was hosting a virtual town hall regarding their 10-year plan for LGBTQI+ older adults with HIV. K. Carter believed that it was on August 16th.
- D. D'Alessandro said Prevention Point was recruiting nurse practitioners and physicians. She said they had a Ryan White clinic and medications for opioid use disorder.

Adjournment:

L. Diaz called for a motion to adjourn. <u>Motion: C. Steib motioned, and D. D'Alessandro seconded to adjourn the June 2023 HIV Integrated Planning Council meeting. Motion passed: All in favor.</u> The meeting adjourned at 3:35 pm.

Respectfully submitted,

Kevin Trinh, staff

- Handouts distributed at the meeting:
 August 2023 Agenda (PDF)
 June 2023 Meeting Minutes (PDF)
 Decisions and Directives FY2024 (PDF)

Annual Checklist for Assessment of the Efficiency of The Administrative Mechanism (AEAM) Completed by Finance Committee

General Instructions:

The following document is to be completed at the end of each fiscal planning cycle. Generally, February 28th marks the fiscal year end for the Ryan White Part A Formula, Supplemental and Minority AIDS Initiative funds. For the purpose of this document, consideration of the Recipient's final spending report will be included (Note: From year to year, the date that the final spending report becomes available may vary).

Throughout the course of the fiscal year the five sections (Procurement Process, Contracting, Reimbursement of Subrecipients, Use of Funds and Engagement with Planning Council/Planning Body in the planning process) will be completed at a minimum on a quarterly basis, in conjunction with the Finance Committee's review of quarterly spending reports as presented by the Recipient in the committee's meetings. Notes related to each item may be included as deemed appropriate by the members of the Finance Committee.

The Finance Committee will report its findings concerning the review of Annual Checklist items in its reports to members at the HIPC's monthly meetings. At the end of the fiscal planning cycle, the Finance Committee will present the findings documented on the Annual Checklist to the HIPC for review, comment, and approval. The checklist will serve as a report of the findings, conclusions, and recommendations and will be submitted to the recipient. The HIPC will request a written response from the recipient to be submitted within 45 days of receipt of the HIPC report.

Should issues and/or concerns related to the materials reported/provided to the Finance Committee by the Recipient occur during the course of this assessment process, the Executive Committee will be notified by the Finance Committee immediately (within 24 hours). A meeting of the Executive Committee will be scheduled in advance of the next HIPC meeting to discuss concerns and address next steps before a presentation to the full HIPC.

Annual Checklist for Assessment of the Efficiency of The Administrative Mechanism (AEAM) Completed by Finance Committee

From the RWHAP Part A Manual: The purpose of Monitoring the Administrative Mechanism "is to assure that funds are being contracted for quickly and through an open process, and that providers are being paid in a timely manner" (p 101).

Directions: Please complete the following form by highlighting yes, no, or N/A and offering the group responsible and any notes. "Group responsible" represents who (Council or specific subcommittee) was responsible for monitoring each item. The "Notes" section captures comments/concerns and allows the group responsible to expand upon the item listed.

The Procurement Process:

In the case of an RFP, HIPC received a presentation from and had a discussion with the recipient (DHH) around the RFP. The Recipient will present information regarding all proposed RFPs to the HIPC. HIPC meeting notes with a copy of the presentation will be reviewed as part of the monitoring process. **NOTE: HIPC is only to assess the process; the Council must not be involved in any way that might influence which agencies the recipient selects for funding. The HIPC should not be given information related to the RFP that could give provider members an unfair advantage.		
□Yes	□No	⊠N/A
Time Frame for report to Finance/HIPC: Six months prior to the RW service RFP distribution.		
Group Responsible: Finance Committee		
Notes: Not applicable. The recipient did not conduct a Ryan White Part A RFP during the fiscal year ending February 28, 2023.		

The recipient's (DHH's) contract procurement process was efficient, effective, fair and inclusive. The RFP distribution process was wide-spread and included all areas of the EMA. The Recipient will provide a report to the HIPC including the full RFP, the list of recipients that the RFP was distributed to, agency or agencies chosen, and a timeline for the contract process. NOTE: HIPC is only to assess the process; the Council must not be involved in any way that might influence which agencies the recipient selects for funding.		
□Yes	□No	⊠N/A
Time Frame for report to Finar	nce/HIPC: Thirty to sixty days aft	er the RFP distribution process
to accommodate the Finance a	nd HIPC meeting schedule.	
Group Responsible: Finance Co	ommittee	
Notes: Not applicable. The reci	pient did not conduct a Ryan Wh	nite Part A RFP during the
fiscal year ending February 28,	-	
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The HIPC will be provided with an overview of the results of the RFP process from the recipient (DHH). This overview should include the number of responses to the RFP, the number of providers awarded and geographic location of the awards. NOTE: HIPC is only to assess the process; the Council must not be involved in any way that might influence which agencies the recipient selects for funding.		
might injudence	which agencies the recipient sets	ects for funding.
□Yes	□No	⊠N/A
Time Frame for report to Finance/HIPC: Thirty to sixty days after the RFP review and award		
process is completed to accommodate the Finance and HIPC meeting schedule.		
Group Responsible: Finance Committee		
Notes: Not applicable. The recipient did not conduct a Ryan White Part A RFP during the		
fiscal year ending February 28, 2023.		

Contracting:

HIPC received information from the Recipient (DHH) about the percent of contracts fully executed within 90 days after Notice of Grant Award. The Recipient will provide a report to the HIPC regarding the number of notices of intent to contract distributed and the percent executed within 90 days after the Notice of Grant Award.		
□Yes	⊠No	□N/A
	nce/HIPC: One hundred twenty on odate the Finance and HIPC me	-
Group Responsible: Finance Co		eting scriedule.
Notes: Not all of the contracts were confirmed within 90 days of receipt of the final NOA from HRSA. This is due primarily to large sub-recipients and the city's legal departments not conforming the contracts within the specified time period.		
Reimbursement of Subrecip	oients:	
HIPC was informed of any obstacles to timely reimbursement. If there were obstacles, HIPC was informed of any adverse impact on clients or providers. The Recipient will provide a summary on obstacles to reimbursement to the Finance Committee on a quarterly basis. The measure will be determined by review of the Finance Committee notes on an annual basis.		
⊠Yes	□No	□N/A
Time Frame for report to Finance/HIPC: Quarterly, as part of the over/underspending reports.		
Group Responsible: Recipient staff and Finance Committee		
Notes: There is record of the quarterly spending reports being provided.		

HIPC was notified of late invoicing. The Recipient will provide a late invoicing summary to the Finance Committee on a quarterly basis. The measure will be determined by review of the Finance Committee notes on an annual basis.		
⊠Yes	□No	□n/A
Time Frame for report to Finance/HIPC: Quarterly, as part of the over/underspending reports.		
Group Responsible: Recipient	staff and Finance Committee	
Notes: As part of the spending reports and reallocation requests information related to late invoicing is provided to the finance committee by recipient staff.		
Use of Funds:		
The recipient (DHH) notified HIPC of a partial award/continuing resolution so HIPC could approve a budget scenario to ensure the rapid distribution of funds. The date that the HIPC emailed the Notice of Grant Award to the HIPC staff will be used to determine whether this indicator is met.		
⊠Yes	□No	□N/A
Time Frame for report to Finance/HIPC: One week after Notice of Grant Award or of partial award.		
Group Responsible: Recipient		
Notes: Upon receipt of a notice of award, either partial of full, by the recipient, the OHP staff and the finance committee were notified. At this point, the appropriate budget plan is crafted based on the approved HIPC decisions.		

The recipient (DHH) distributed funding in accordance to the approved allocation decisions made by HIPC. The Recipient will provide a copy of the allocations report submitted to HRSA to the HIPC after this report has been submitted to HRSA. Updates will be provided by the Recipient to the HIPC on a quarterly basis.		
⊠Yes	□No	□n/a
Time Frame for report to Finance/HIPC: Quarterly, as part of the over/underspending reports.		
Group Responsible: Recipient staff and Finance Committee		
Notes: This information has been provided in the past as part of the quarterly spending reports and reallocation requests.		
HIPC received regular reports on service utilization and expenditures by service category. The Recipient will provide quarterly reports on service utilization and expenditures by service category to the HIPC quarterly. Meeting minutes will be used to monitor this indicator on an annual basis.		
⊠Yes	□No	□n/A
Time Frame for report to Finance/HIPC: Quarterly, as part of the over/underspending reports.		
Group Responsible: Recipient staff		
Notes: Service utilization information is provided to the HIPC annually as part of the materials leading up to the allocation process. This generally happens in May or June.		

The recipient (DHH) requested of HIPC any reallocations above the 10% threshold so HIPC could make and approve adjustments during the year. These requests were accompanied with a detailed explanation for the needed shift in funding. The Recipient submits these requests as needed. Meeting minutes and submitted materials from the Recipient will be used to monitor this indicator on an annual basis.		
⊠Yes	□No	□N/A
Time Frame for report to Finance/HIPC: As needed based on the Finance and HIPC meeting schedule.		
Group Responsible: Recipient staff		
Notes: Reallocation requests that occur throughout the fiscal year are presented to the finance committee for review and evaluation prior to going to the full HIPC. Finance committee decisions may be sent to the full planning body with: 1) recommendation to approve, 2) recommendation to disapprove, or 3) no recommendation. Final decisions related to reallocation requests fall under the purview of the HIPC. Engagement with Planning Council/Planning Body in the planning process:		
The recipient (DHH) had a staff member at each committee meeting except when asked not to attend. Meeting minutes will be used to monitor this indicator on an annual basis.		
⊠Yes	□No	□N/A
Time Frame for report to Finance/HIPC: Recipient staff shall attend regularly scheduled Finance and HIPC as well as annual allocation meetings. The number of meetings attended by recipient staff will be identified at the end of the fiscal cycle.		
Group Responsible: Recipient staff		
Notes: Recipient staff participated in all 9 Finance committee meetings during fiscal year end 2023: 11 HIPC meetings and each of the allocation meeting held.		

The recipient (DHH) implemented directives from HIPC and reported back on progress. The Recipient will report back on the directives at a regularly scheduled HIPC meeting. Meeting minutes will be used to monitor this indicator on an annual basis.		
□Yes	⊠No	□n/A
Time Frame for report to Finance/HIPC: Six months following the start of the fiscal year.		
Group Responsible: Recipient staff		
 Notes: All were reported on but two directives the last two Philly directives which are as follows: Review which services are most utilized and needed by PLWH who are 50+ years old. Increase access to and awareness to Food Bank services, especially those that are culturally relevant; request more information on Food Bank services provided and their utilization to determine improved health outcomes. 		

Year End Ryan White Formula and Supplemental Planning Council Support Budget Review

The responsibility of reviewing the support budget on a quarterly basis was given to the Finance Committee by the Executive Committee and agreed upon by the HIPC.

PHMC acts as the fiscal agent for the Office of HIV Planning who are support staff to the HIPC. Fiscal segregation of responsibility is ensured through the following steps: the office manager processes the payment authorization, the director reviews and signs the payment authorizations and the checks are processed and currently distributed through the accounting department at PHMC and signed by their CEO, Richard Cohen. Monthly invoices are then submitted by PHMC to the recipient for payment and OHP as support documentation. (Any reimbursement for expenditures by the OHP Director related to the office are reviewed and authorized by the recipient. This type of expenditure cannot be authorized by the OHP Director. Copies of payment authorizations must be maintained for a period of no less than seven years.)

Expenditures through February 28, 2023 amount to \$445,292. The projected total expense is \$537,106, which is based on the overall formula and supplemental budget. There is approximately \$91,814 of underspending. It is anticipated that this will be utilized because the office is currently fully staffed, which was not the case for the majority of 2022. The lease for the space increased effective 1/1/2022 to \$18 per square foot from \$16, but it is still below the current rate for the area which is between \$22 to \$24 per square foot. Additionally, there are common area maintenance charged which are levied by the building management based on square footage.

The breakdown/explanation of expenditures is as follows:

Personnel was impacted by a Health Planner and the Community Planning Support Coordinator position vacancies. These positions were filled in December 2022.

Operating costs were affected by the office closure and staggered work schedules as a result of the pandemic and switch to a virtual meeting versus in-person structure.

- **Utilities:** The office did not require the usual heating and cooling or electrical output for computers and printers/copiers.
- **Communications:** The phones and internet were fully operational therefore the costs did not change significantly.
- Postage is preloaded and has not required additional payment. This will change with the PLWH survey. The costs for postage paid mailers and return envelopes is expected to amount to approximately \$7,000 based on historic expenditures. The survey tool is 10 pages and it is expected that approximately 2,500 survey packets will be created for a 20% sample of the epidemic.
- **Courier Service:** This was partially utilized as part of the community survey process with the delivery of the surveys to various providers throughout the EMA.

- Office and meeting supplies: The costs incurred are mostly related to PPE (personal protective equipment) supplies. Again, the virtual meeting structure has decreased the need for basic supplies.
- Leased equipment: Copier and Pitney Bowes postage machine.
- **Printing:** There is very little printing in a virtual meeting environment.
- **Equipment**: This is mostly software license/subscription costs which are paid on an annual basis. SPSS (statistical package for social sciences) is expensive (\$5,600) and ESRI which is the GIS (geographic information system) program (\$1,400), Survey Monkey (\$1,500), monthly network backup, etc. Replacement of office laptops because of the remote work requirement still in place.
- Travel (staff and member), journal subscriptions, advertising and staff development were not really expended during this period. Staff development was charged for PHMC university as an affiliate organization.
- Other: This includes the security system, exterminator and office cleaning/maintenance. Only the costs for the security system were incurred.