



Friday, August 12, 2022, from 9:31 AM to 11:38 AM
 Videoconference via Zoom: <https://zoom.us/j/83743175727>
 Teleconference: (929) 205-6099 / Meeting ID: 837 4317 5727

Present	Excused Absences	Unexcused Absences
1. Joann McEniry (Chair) 2. Janice Adams-Jarrells 3. Allison Delcalzo-Berens 4. Sharon Postel (Non-Voting) 5. Al-Bayyinah Sloane 6. Calvin Toler 7. Claudia Ortiz 8. Denise Brown 9. Aliya Roman (Non-Voting)		10. Debbie Morgan 11. Ricardo Salcido 12. Ketlen Alsbrook (Non-Voting) 13. Delia King 14. Vieshia Morales

Guests: Michelle Thompson and Stephanie Antoine
Support Staff: Carla-Ann Alexander

1. **Welcome and Moment of Silence**
 McEniry called the meeting to order at 9:31AM and welcomed all in attendance. A moment of silence was observed for all those living with, those who have passed, and those affected by HIV/AIDS.
2. **Roll Call**
 Support Team conducted the roll call. Quorum was established later in the meeting.
3. **Public Testimony**
 There were no public testimonies.
4. **Approval of the Meeting Summary from July 8, 2022.**
 The Meeting Summary from July 8th was sent out electronically and was motioned to be approved.
5. **Standing Committee Updates—**
 - **Continuum of Care Committee (COC)** –Alexander provided the July 14th and August 11th COC report:
 - The committee is still working on the Section 5 Situational Analysis.
 - At the July 14th meeting, members updated the following service standards:
 - Medical Transportation
 - Emergency Financial Assistance
 - Mental Health Service
 - Non-Medical Case Management
 - The standards were emailed to the Planning Council for a 30-day review period.

- At the August 11th meeting, members drafted ideas for the Situational Analysis on the priority population of African Americans. Members discussed strengths, challenges, and identified needs for Diagnosis (Testing, Linkage), strengths, and Prevent (PrEP, Pep)
- The next COC meeting will be held on Thursday September 8th, at 10AM via Zoom.
- **Research and Evaluation Committee (REC)** – Alexander provided the July 18th REC report:
 - Members reviewed the 2022 Assessment of Ryan White Part-A Administrative Mechanism in the Newark EMA Recipient Survey. The survey was supposed to close Friday July 15th, but an extension was given until the 18th. A draft summary of the survey is going to be created.
 - Dr. Bagchi is working with the state on an initiative to increase HIV testing amongst primary care providers. She will give an update once received.
 - The final 2022 Epidemiologic Profile Report request was sent out and an update will be given when received.
 - The next REC meeting will be held on Monday, August 15, 2022, at 10AM via Zoom.
- **Community Involvement Activities Committee (CIA)** – Alexander provided the July 27th CIA report:
 - Members discussed nominations for Co-Chair and Secretary. Two people were nominated but Poole withheld official nominations until September.
 - A discussion took place regarding recruitment and engagement.
 - Poole did a vote of whether people wanted to meet in person, online, or in a hybrid format for future planning.
 - Sharon Postel did an Epidemiological Profile Overview.
 - The next meeting will be held August 24, 2022.

6. Recipient Report—Aliya Roman

- There are no updates on execution of contracts.
- The full award contract documents that were due July 11th are being processed. The full budget documents that are approved are reflected in CHAMP and the remaining documents will go through a review-approval-upload process until the end of August. By this time, 100% of the contracts will be reflected into CHAMP before the partial award is exhausted.
- The Program Terms Report, which is a HRSA deliverable, was submitted to HRSA on August 4th.
- Site visits has begun and will be virtual this year. There will be a program and fiscal monitor in each meeting. These meetings will start in September and conclude in February.

7. New Jersey HIV Planning Group (NJHPG) Report

No report.

8. Old Business

- **PRESENTATION:** Ryan White Service utilization, spending data, update on Minority AIDS Initiative (MAI) eligibility and services, and Ryan White Part A FY 2022 Allocations by Aliya Roman. Support staff will be emailing this presentation to members when available.

Brief overview:

- Services are provided by thirty-four service providers. There are twenty-three in Essex County, seven in Union County, and four in the Tri-County region of Morris, Sussex, and Warren. The Sub-recipients of the EMA provide eight Core Medical services with OAHs as the main and central focus of care and treatment. The remaining eight services support linkage and retention in health care.
- Services providers are monitored and measured by the Recipient's Office in-house Quality Management Specialist and Clinical Quality Management (CQM) team. The CQM team works directly with service providers to improve on measures that do not meet the EMA's performance goals. Programs that are not reaching the EMA's goals will be worked within FY22 this year with the CQM team.
- Roman shared and reviewed the FY21 Priority Setting Results.
 - Core services that were under the PSRA goal included Health Insurance Premium and Early Intervention services. Adams-Jarrells asked Roman if there is a reason why this goal was under met. Roman responded stating that when sub-recipients make a request for Health Insurance Premium and Cost Sharing, funds were allocated, especially, if the sub-recipient demonstrated the ability to exhaust the awards as it related to the previous fiscal year services. With that being said, the Recipient's Office found that sub-recipients are not spending on Health Insurance Premium and Cost Sharing. Roman explained that it is not clear if the change in spending is due to the decrease in need for this service or if clients are not being able to submit the appropriate documents, or what the gap is in general. In terms of Early Intervention services, programs are found based on the sub-recipient's ability to provide this service and bring new clients into care. There is a report used in CHAMP that identifies costs of services, which is the number demonstrated in final spending. Although, NEMA's goal is to connect clients to care within thirty days. Because of this, a lot of funds are not being spent in Early Intervention Services along with a lot of our Outpatient Inventory Healthcare and Medical Case Management providers have these services on site.
 - Support services that were under the PSRA goal included Emergency Financial Assistance, Residential Substance Abuse, and Transportation. Food Bank and Home Delivered Meals were over the PSRA goal.
- NEMA's FY21 Core Service Expenditures was \$7,805,872 and \$2,621,645 for Support Service Expenditures.
- For FY22, the only service category that did not meet the PSRA goal was Residential Substance Abuse.

9. New Business

- Discuss and finalize percentages for NEMA-wide Service Categories for FY'2022.
 - It was recommended to remove the "Region Chart" off page nine in the FY23 PSRA Report.
 - Residential Substance Abuse became Medicaid funded and the award for this service category was rescinded.

- It was recommended to keep this service category at zero funding, monitor/evaluate the category for a few years, then make the decision if the service category should be removed. If the service category is removed immediately and there is a need for the service in the future, funds would not be able to be allocated. Roman mentioned that in this instance, when the next RFP is released in two years, it would be noted if there are any programs applying to provide services in this category. This will give a better opportunity to know if this service category is a need or not.
- The FY23 Part A and MAI Ranking's recommended percent chart on the FY23 PSRA Report was updated:
 - Emergency Financial Assistance decreased from 2.80% to 2.70%.
 - Substance Abuse Services (Residential) decreased from 1.65% to 0.05%.
 - Outpatient Ambulatory Health Services increased from 12.75% to 13.00%.
 - Housing Services increased from 8.50% to 9.00%.
 - Non-Medical Case Management services increased from 8.00% to 8.50%.
 - Other Professional Services increased from 3.00% to 3.10%.
 - Oral Health Care Services increased from 7.10% to 7.15%.
 - Psychosocial Support Services increased from 0.30% to 0.40%.
 - Food Bank/Home-Delivered Meals Services increased from 1.40% to 1.50%.
 - Medical Case Management including Treatment Adherence increased from 35.15% to 35.25%.
- The updated FY23 PSRA Report was motioned to be sent to the Planning Council for thirty-day review.
- The Newark EMA Epidemiological Profile presentation will be emailed to the committee.

10. Announcements

- Janice Adams-Jarrells is receiving the Consumer Advocacy Award from Hyacinth

11. Next Meeting

The next CPC meeting will be held on Friday, September 9, 2022, at 9:30 AM via Zoom.

12. Adjournment

The meeting ended by McEniry's decree at 11:38 a.m.