



Meeting of the
PRIORITY SETTING & RESOURCE ALLOCATION COMMITTEE

Monday, June 29, 2020
By Zoom Videoconference
3:00 – 4:15

MINUTES

Members Present: Jeff Natt (Co-chair), Dorella Walters (Co-chair), Paul Carr, Broni Cockrell, Graham Harriman, David Klotz, Matthew Lesieur, John Schoepp, Claire Simon, Terry Troia, Rob Walker

Members Absent: Randall Bruce, Joan Edwards, Steve Hemraj, Oscar Lopez, Jesus Maldonado, Carmelo Cruz Reyes, Michael Rifkin, Leo Ruiz, Barry Zingman, MD

Staff Present: Clare Biging, Roland Torres, Giovanna Novoa, Melanie Lawrence, José Colón-Berdeca, Kimbirly Mack, Eleanora Jimenez-Levi, Jacinthe Thomas, M. Bari Khan, Karen Miller, May Wong (*NYC DOHMH*); Bettina Carroll, Gucci Kaloo (*Public Health Solutions*)

Agenda Item #1: Welcome/Introductions/Minutes

Mr. Natt and *Ms. Walters* opened the meeting, followed by a roll call and a moment of silence. The minutes of the June 8, 2020 meeting were approved with no changes.

Agenda Item #2: Tri-County FY 2021 Application Spending Plan

Mr. Klotz presented the Tri-County Steering Committee's FY 2021 application spending request. The TC portfolio was re-bid last year and programs are in their startup year, and there is no data to make adjustments based on client levels and spending trends. Thus, the TCSC is asking for the maximum increase allowed by HRSA (5% over the FY 2020 award, or \$233,630) spread out across the entire portfolio, weighted based on ranking scores (higher ranked categories are increased at a proportionally higher rate). The increase is based on 5% over the FY 2020 plan without the one-time COVID-19 enhancements to Housing and Emergency Financial Assistance (EFA). PSRA will be asked next month to consider another one-time enhancement to EFA in FY 2021 of \$423K, which would be taken from the new NYC program of Psychosocial Support for TIGNBNC clients (pending PSRA approval). Since PSS TIGNBNC will be funded for the first time in 2021 and won't start until mid-year, we can use half the allocation to continue funding EFA at close to the 2020 enhanced amount.

There was some discussion clarifying that the EFA funds are for one year (March 1, 2021-Feb. 28, 2022) and that the PSS category will be restored to its annualized amount (\$487,000). While the funds for PSS originally came from the ADAP allocation, this will allow the ADAP allocation to maintain enough funding to cover a reduction in the award and new funding for a new Oral Health category. *Mr. Harriman* explained that the RFP is delayed because of limited staff capacity due to so many Care & Treatment staff being activated for the COVID-19 response. Also, the Grantee will have to assess how small, TIGNBNC organizations are coping during the crisis.

A motion was made, seconded and approved 9Y-0N to accept the Tri-County FY 2021 application spending plan as presented.

Agenda Item #3: Housing Services (HOU) Fact Sheet

Mr. Torres, Ms. Navoa and Ms. Biging presented the Housing Services category Fact Sheet. HOU's primary goal is to provide housing services directly necessitated by an individual's HIV status in order to engage and retain PHA in treatment and care, thereby serving to enhance immunological status, improve health outcomes, and reduce disease transmission. Programs provide Housing Services for PWH who are chronically homeless, homeless, or unstably housed. The goals of these programs are to: 1) Reduce the risk of HIV transmission associated with homelessness and unstable housing by helping homeless and unstably housed PHW to obtain/maintain stable housing; 2) Increase the number of PWH who enter and stay in comprehensive HIV care by providing HIV infected homeless or unstably housed persons with stable housing; and 3) Decrease homelessness and unstable housing among homeless PHW.

HOU enrollees' eligibility requirements were described. In addition to the general RWPA eligibility criteria, priority is given to persons who are homeless or unstably housed; and/or in danger of becoming homeless. For Short-Term Rental Assistance (REN), clients cannot be eligible for financial assistance from the HIV/AIDS Services Administration (HASA). There is only one REN contract funded by RWPA that serves approximately 250 PWH and their family members in NYC. This program works with community-based organizations to recruit eligible clients who have been able to successfully secure an apartment in the private market.

RWPA funds must be used as the funds of last resort and are expected to be utilized for allowable purposes only when other funding sources are not available. The use of Ryan White funds is restricted to PWH who have no other means of payment. Housing programs are expected pursue enrollment into other services for which they are eligible (e.g., HASA, Public Assistance, SSI/SSD and other forms of income (i.e., wages, pension). Housing programs must ensure that housing is limited to short-term or emergency housing assistance with a recommended duration limit of up to 24 months. Housing programs must ensure access to care, including all medical and support services.

Details were provided about the three specific models funded under this category: Short-term Rental Assistance (REN), Short-term Housing Services (STH), and Housing Placement Assistance (HPA).

Highlights of the Fact Sheet's data include: client demographics (by borough, age, risk factor, gender, race/ethnicity) that show an majority of clients are from Bronx or Brooklyn, 95% are Black or Hispanic, and almost half are between ages 30-49. Priority populations heavily served include Black/Latino MSM and Older PWH.

Four years of service unit data shows that the service type of Client Advocacy and Health Education/Life Skills (which are not de-duplicated and can be provided more than once to the same client). Service Plan Development and Rental Assistance Payments are also highly utilized service types. The unduplicated total client count has increased slowly but steadily from 2016-19 from 1101 to 1172. All three service types spent their complete its original allocations. In 2019, the PC reallocated funds from Transitional Care Coordination to HOU, increasing the capacity of REN and STH programs.

A summary of the discussion follows:

- HPA is the only one of the three programs that has performance-based reimbursement, and due to the tight rental market in NYC, has challenges spending its full amount.

- The baseline of what is deemed “affordable” is based on federal “fair market rent”. DOHMH has tried advocating that the amount be adjusted to reflect NYC’s expensive real estate market.
- REN requires proof of some kind of tenancy agreement, usually a lease. Very few individuals in the program rent rooms, but for those kind of arrangements, proof of ownership is required.
- The additional CARES funds for REN is all going to address the loss of income due to COVID-19 that is requiring the programs to pay the entire rent, including the 30% that the client would normally contribute. Thus, there is no room for enrolling additional clients.
- HPA pays for credit checks, application fees and other expenses. STH depends on the program.

Mr. Klotz explained that there are two more PSRA meetings (June 13 and 20) where the Committee will have to: 1) make a decision on the allocation for Non-Medical Case Management, 2) decide on an allocation for Oral Health, and 3) approve Base and MAI spending requests for the FY 2021 grant application. These will be presented to the Executive Committee and full Council at the end of July for inclusion in the application, which is due in early October. It was noted that the application spending plans are requests, that the Council traditionally asks for the maximum allowed (5% over the current year’s Base award), and that the PSRA uses the application plan as a basis for scenario planning in the fall for a possible (and likely) reduction in the award.

There being no further business, the meeting was adjourned.