

# Greater Baltimore HIV Health Services Planning Council

## Minutes of the Meeting of March 21, 2006

Vol. III, No. 1

Final • March 21, 2006

### Meeting Attendance

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<b>Present<sup>1</sup></b>	L. Green D. Brewer K. Allston S. Ashley P. Henry (proxy for D. Baker) H. Carter M. Cole L. Creditt N. Drew B. Flint A. Foyles B. Grant T. Gray	N. Guest R. Haden B. Fitzsimmons (proxy for P. Hall) I. Eaton (proxy for R. Hamlett) D. Henson B. Cheek-Jones G. Manigo K. Taylor (proxy for R. Matens) W. Merrick M. Reese W. Samuel R. Shattuck L. Chapman
<b>Absent</b>	W. Belle M. Graves L. House R. Johnson S. Jones J. Keller	C. Massey D. McKelvin M. Obiefune J. Rice A. Santiago B. Tucker
<b>ABC</b>	B. McKeithen G. Williams-Glasser	C. Edmonds
<b>BCHD</b>	R. Brisueno	J. Ungard
<b>Visitors</b>	J. Gresham P. Church D. Cooper V. Bell	S. Kopins M. Mazzuca K. Matthews
<b>Staff</b>	E. Bradley K. Hale D. Gorham	M. Jahromi S. Stokes

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<sup>1</sup> Attendance is based on sign-in sheet

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**Handouts**    March Packet  
                  Agency Reports  
                  AA and Grantee Assessment Tools  
                  Sun article about named-based reporting  
                  Biographical Information on Prospective PC members  
                  Summary of Medicare Part D Carryover Project Conclusions

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## Introductions

L. Green called the meeting to order at 6:30 p.m. with roll call and introductions.

## Review of Minutes

The council reviewed the minutes from February's meeting. There were no edits.

<b>Motion</b>	To accept the February meeting minutes.
<b>Proposed by</b>	H. Carter
<b>Seconded by</b>	A. Foyles
<b>Action</b>	Motion passed with no objections or abstentions.

## Chair's Report

L. Green reported:

- The Baltimore EMA received its award. BCHD will provide more information.
- We will continue to work on streamlining and delivering services for those most in need.
- I met with the Baltimore Health Commissioner and Assistant Health Commissioner about potential partnerships. We are making progress in the planning process, quality insurance, and collecting data and information to make decisions with facts. As a planning body, we need to be able to assess the outcomes of our plans.
- I also met with community leaders on the local and state levels to gather information and keep informed on upcoming challenges.
- I ask the planning council to review the definition of an emergency that allows the Executive Committee to make decisions for the planning council. An emergency by definition is an unexpected and sudden event that must be dealt with immediately or a sudden crisis requiring action. To have a special reprogramming, the grantee and/or AA need to: 1) provide information in advance of a special meeting that

shows that clients will not be served unless there is additional funding, 2) explain why the provider could not anticipate being short of money at the established reprogramming periods, and 3) provide information that shows the need in the category requesting funding, and that funds will meet the need of clients.

<b>Motion</b>	To accept this definition of “emergency.”
<b>Proposed by</b>	H. Carter
<b>Seconded by</b>	T. Gray
<b>Action</b>	Motion passed with no objections and 3 abstentions.

- Name-based reporting is an important issue in Maryland right now. Maryland has historically used name-based reporting for people with AIDS, but not those with HIV. The state stands to lose significant funding if it does not switch to the name-based reporting system for all HIV and AIDS cases. The media are covering the discussion, but omitting the important details regarding confidentiality: there is a very small number of people dealing with this confidential information; there are only two sites to keep this information; the names would remain in secure computers in secure areas.

The Executive Committee asks the planning council for approval to take a written position that the confidentiality is addressed in discussions of the name-based reporting.

<b>Motion</b>	To develop a position statement that addresses the essential need to discuss and explain how individual confidentiality is protected for every person with HIV or AIDS.
<b>Proposed by</b>	D. Henson
<b>Seconded by</b>	H. Carter
<b>Action</b>	Motion passed with no objections and 3 abstentions.

<b>Motion</b>	To approve the Executive Committee to act in the council’s stead to develop, approve, and distribute the position statement as soon as possible.
<b>Proposed by</b>	R. Haden
<b>Seconded by</b>	H. Carter
<b>Action</b>	Motion passes with 2 objections and 3 abstentions.

### Administrative Agency Report

- Service category meetings were implemented last fiscal year as opportunities for clarification and exchange on critical issues affecting a specific service category. Our next service category meeting will focus on primary medical care. The date will be

set for late April. Prior to the meeting, critical issues will be sent out for comment and review to funded providers.

- The AA staff attended all planning council meetings.
- In March, Ms. Cleo Edmonds joined the Ryan White staff as a program officer.
- The Baltimore City Health Department received notice of the FY 2006 grant award for Ryan White Title I. BCHD received \$20,628,895, an increase of 7.55%. This increase was solely due to the supplemental award which is competitive and we received a 28.32% increase. The proposal ranked 2nd in the country.
- The AA has completed the FY 2006 award process. Under the competitive portion, there were 134 applications, requesting \$8,846,098 dollars for \$4,822,871 in available funding. There are three new providers. The continuation application process resulted in the review of 130 budgets. As a result of this process, we have 204 contracts and 53 providers. The AA is preparing a summary report of the FY 2006 awards process and general comments concerning each service category for recommendations and comments to BCHD and the Planning Council.
- The AA commented and made recommendations on the Emergency Financial Assistance Standards of Care and comments on the Transportation Standards of Care.
- On Friday March 10, 2006, the first provider's meeting for FY 2006 was conducted. At this meeting, providers were given budget/program revision packets for their FY 2006 awards. Each packet contained program/fiscal comments, hard copy of appropriate Form 8, decision rules for each service category, copy of the Standards of Care, schedule of meetings and due dates and hard copies of all reporting forms. Revised budgets are due to Associated Black Charities by March 31, 2006.
- PMOST (Performance Measure Online Submission Tool) is in full swing. Web-based training for providers is scheduled and providers have signed up for these sessions. Additional in person training sessions have been scheduled for providers on site at ABC to discuss the new Form 8 measures.

### **BCHD Report**

- Mr. Brisueno announced the award and thanked all people at the Baltimore City Health Department, Associated Black Charities, InterGroup Services, and volunteers for the hard work in this great achievement. The Baltimore EMA got a 99% score on the request, and the increase was the third-highest nationally.

- The Baltimore EMA received \$20,628,895 in Title I funding which reflects an overall increase of 7.55%, or \$1,570,992 over 2005 funding levels. The Minority AIDS Initiative portion of the award was \$1,652,985, which is a \$382,287 or 18.78% decrease over the FY 2005 award. In compliance with the planning council's approved priority-setting guidance, the grantee authorized the distribution of 2006 funds based on the "Increased Matrix" option for Title I, and the "Decreased Matrix" for MAI. Although the EMA received an increase, not all categories were increased over 2005 funding levels.
- The reauthorization of the CARE Act continues to work its way through passage this year, and the grantee strongly encourages council members to get involved with that process.
- Richard Matens is currently on an extended leave of absence until June 2006. In the interim, Ralph Brisueno will assume the responsibilities of the director.
- As a component of the Inter-Governmental Agreement with Baltimore County, BCHD will be awarding them \$20,000 for the conduct of a needs assessment specific to that county's clients and service network.
- QIP: The service category and individual vendor reports are being developed. Distribution of all reports is expected on or about Just 1st.
- Capacity Building/Technical Assistance Initiative: The grantee continues to provide technical assistance to the administrative agent in relation to administrative functions and deliverables due to the planning council and HRSA. They will be receiving onsite TA in the area of fiscal management in March and April.
- The grantee is providing technical assistance to The Gay Family Foundation. They are the agency awarded both capacity building and community education awards.

## **Title II Report**

The independent review panels were held during February in response to the Title II Request for Proposals for State Fiscal Year 2007 for the following service categories: Ambulatory/Outpatient--Suburban, Minority AIDS Initiative, and Transitional Case Management. Funding decisions were made and all applicants are being notified in writing.

## **Title IV Report**

- The Title IV and the Title IV Youth Initiative non-competitive grant guidances were received. Both grant applications are in process. The Title IV Youth Initiative

application is due March 23rd and the Title IV application is due April 5th. HRSA advises Title IV and Title IV Youth Initiative to expect level funding or less.

- The Title IV meeting will be held on March 17th from 12 p.m. to 2 p.m. at the AIDS Administration. Anyone may attend.
- The AIDS Administration is in the process of analyzing a rapid HIV testing survey of labor and delivery departments in delivery hospitals in Maryland. The survey was designed to assess perinatal HIV screening policies, practices and perinatal prevention needs of Maryland hospitals. The information gathered will be used by the AIDS Administration to design an appropriate and targeted intervention to increase the availability and use of rapid HIV tests in Maryland, and ultimately eliminate mother-to-child transmission of HIV.

### **Title III**

L. Green commented that he and B. Cheek-Jones are looking forward to setting up a reporting process with Title III. Title III has a direct relationship with HRSA, and therefore should be formally collaborating with the Planning Council.

### **Committee Reports**

#### ***Comprehensive Planning Committee***

R. Haden reported that the Committee did not meet in February.

#### ***Evaluation Committee***

H. Carter reported that the Committee did not meet in February.

<b>Motion</b>	To approve the FY 2005 Assessment Tool for BCHD.
<b>Proposed by</b>	H. Carter
<b>Seconded by</b>	G. Manigo
<b>Action</b>	Motion passes with 4 abstentions and no objections.

<b>Motion</b>	To approve the FY 2005 Assessment Tool for ABC.
<b>Proposed by</b>	H. Carter
<b>Seconded by</b>	M. Reese
<b>Action</b>	Motion passes with 4 abstentions and no objections.

#### ***Health Services Committee***

M. Cole reported that the committee met on March 1, 2006.

- The committee completed its review of the home health standard and approved all changes to the standard. The committee approved the home health standard to be forwarded to IGS for editing. Once editing is complete, the standard will be forwarded to the council for approval.
- The committee will begin reviewing hospice standards in April.
- The committee has begun reviewing health-related service categories with respect to performance and will continue to do so in the coming months.

### *Needs Assessment Committee*

W. Samuel reported that the committee met on February 23.

- They approved the work plan as a working document.
- At the meeting, the committee and its guests heard a presentation by Sutton Stokes from IGS on the predicted impacts of Medicare Part D on PLWH/As in the Baltimore EMA.

S. Stokes then gave a brief summary of his recent work on Medicare Part D. The Planning Council wanted an estimate of the impact of the changes to Medicare Part D. The report finds that at least 913 people in this EMA are dually eligible for Medicaid and Medicare. This figure could be an undercount.

R. Haden asked what the planning council could do to help PLWH/As who are placed into the wrong plan? R. Brisueno suggested that PC members encourage people to apply for Medicare Part D, because the May 15 deadline is approaching. G. Williams-Glasser added that HRSA has a website for questions about choosing the right plan, and said that the AA is able to help. S. Stokes said that PLWH/As could also contact MADAP for advice.

H. Carter pointed out that forty different options make this process very confusing. B. Flint said that the CMS website can help with choosing a plan. B. Fitzsimmons replied that BCHD tried the CMS website in January and it was not helpful

N. Drew reiterated that the best option is to call MADAP, because they have a team of people to help people to choose the right coverage plan.

K. Taylor recommends that PLWH/As speak with a person, and not rely on a computer for information about choosing a Medicare Part D plan. One major reason for this is that the providers have much flexibility in their medication options, and

can rapidly make changes in drugs that they offer. PLWHAs need to stay informed about their needs, and communicate them to the providers.

- W. Samuel resumed reporting. The committee began working on 2006 activities.

#### ***PLWH/A Committee***

- The committee met on February 22.
- Members of the PLWH/A committee and community volunteers went to Annapolis, Maryland on Wednesday, February 22, to participate in a special hearing conducted by the Health and Human Resources Subcommittee of the Maryland House Appropriations Committee. The hearing was assembled to discuss the proposed budget changes to the Maryland AIDS Administration MADAP program. The proposed change cut thirty-three contractual positions from the Maryland AIDS Administration budget. The participants that attended were given an opportunity to testify before the committee on the impact that this proposed change would have on the lives of those with HIV/AIDS.
- The committee, along with the LifeLinc Taskgroup and invited planning council guests, has begun the next phase of developing actions regarding Ryan White reauthorization.
- The committee continued its discussion on the transition of Project LEAP to a new provider. In its discussion, the committee came up with questions that were forwarded to the grantee. The grantee has acknowledged receipt of the questions and will respond.

#### ***Services to Surrounding Counties***

M. Reese reported the following:

- The committee met on Tuesday, March 7.
- The committee identified two new trends: 1) the growing number of syphilis cases among the population of men having sex with men, and 2) a lack of protocols for people who believe themselves to have been exposed to AIDS. The committee noted that many instances of non-occupational exposure to HIV have come to providers' attention, and asks that the council send a letter to the EMA health officers asking them to consider crafting a consistent protocol for post-exposure treatment and follow-up. The CDC has a protocol, and the STSC committee wants to ensure that it is widely known and followed.

- The committee identified gaps in SSI outreach services, where some providers are only giving services to their existing clients. We drafted the following directive: If any provider is funded for SSI Outreach, they must make services available to all people in the EMA.

<b>Motion</b>	To remove \$8,402 from the Outreach service category.
<b>Proposed by</b>	M. Reese
<b>Seconded by</b>	H. Carter
<b>Action</b>	Motion passes with 3 abstentions and no objections.

<b>Motion</b>	To reallocate \$8,402 to Mental Health service category.
<b>Proposed by</b>	M. Reese
<b>Seconded by</b>	H. Carter
<b>Action</b>	Motion passes with 3 abstentions and no objections.

<b>Motion</b>	To send a letter to the EMA health officers for consideration of crafting a protocol for post-exposure treatment.
<b>Proposed by</b>	M. Reese
<b>Seconded by</b>	T. Gray
<b>Action</b>	Motion passes with no abstentions and no objections.

L. Green pointed out that as a planning body, the planning council cannot require protocols or provide resources, but we can suggest it.

***Support Services Committee***

- S. Kopins reported that the committee met on March 14, 2006.
- As a correction to the action items in the planning council packet, the committee completed review of the EFA standards with one exception. The question: if a needs assessment has been performed for a client, then the client is referred to another agency, is a second needs assessment required? Support staff was requested to draft language to address this issue. The committee will be polled to accept the final wording.
- Review of the transportation standards begins next month.

***Nominating Committee***

- R. Shattuck said that the committee met on Monday, March 13.

- The committee has received numerous membership applications through its recruitment campaign. They continue to interview candidates. The committee would like to recommend three people for the pool list.

<b>Motion</b>	To place D. Cooper on the pool list.
<b>Proposed by</b>	R. Shattuck
<b>Seconded by</b>	T. Gray
<b>Action</b>	Motion passes with no abstentions and no objections.

<b>Motion</b>	To place D. Payton on the pool list.
<b>Proposed by</b>	R. Shattuck
<b>Seconded by</b>	M. Reese
<b>Action</b>	Motion passes with no abstentions and no objections.

<b>Motion</b>	To place R. Gore-Simmons on the pool list.
<b>Proposed by</b>	R. Shattuck
<b>Seconded by</b>	T. Gray
<b>Action</b>	Motion passes with no abstentions and no objections.

- The committee received a resignation letter from a planning council member. A replacement has been found.

<b>Motion</b>	To forward K. Taylor to the mayor's office for planning council appointment.
<b>Proposed by</b>	R. Shattuck
<b>Seconded by</b>	H. Carter
<b>Action</b>	Motion passes with no abstentions and no objections.

- The committee will forward J. Keruly and S. Woods to the mayor's office for planning council appointment.
- The committee has been in the process of reviewing and editing the planning council membership application for the purpose of making it more user-friendly for the applicant, and more effective for planning council recruitment. At this time, the committee is presenting the revised application along with a memo explaining the recommended edits.

<b>Motion</b>	To approve the revised application .
<b>Proposed by</b>	R. Shattuck
<b>Seconded by</b>	H. Carter
<b>Action</b>	Motion passes with no abstentions and no objections.

The planning council went into executive session.

**The meeting ended at 8:09 p.m.**

I certify these minutes to be accurate and inclusive record of the planning council meeting as amended and approved by the Greater Baltimore HIV Health Services Planning Council.

*Lennwood Green*

Lennwood Green

*April 19, 2006*

April 19, 2006