

Greater Baltimore HIV Health Services Planning Council

Minutes of the Meeting of February 17, 2009

Vol. V, No. 11

Draft • March 2, 2009

Meeting Attendance

Present¹	M. Becketts R. Bradley K. Bellesky G. Clark A. Foyles R. Gore-Simmons M. Graves R. Haden C. Harvey Ra. Johnson Re. Johnson D. Kelson	J. Keruly C. Massey R. Matens A. Middleton W. Miller G. Nelson M. Reese N. Robinson W. Samuel D. Shamer L. Smith J. Winslow
Absent	C. Brown V. Burrell-Gibson V. Clark M. Cole C. Edmonds C. Gibson R. Green P. Hall	D. Henson D. Hunter W. Jones J. Keller A. Leverette G. Manigo B. Thomas-El
Proxies	G. Daniels (for C. Edmonds) R. Rubino (for R. Green)	B. Fitzsimmons (for P. Hall)
BCHD	R. Brisueno A. Ferrari S. Kazi K. Matthews	B. Ntiri C. Skipper J. Ungard
Visitors	S. Alston S. Cherry T. Davis R. Disharoon E. Green N. Guest D. Hickman R. Parrish	W. Russell L. Servance R. Shattuck H. Smith K. Staver P. Timmons D. Worley

¹ Attendance is based on sign-in sheet.

* Present but did not sign-in.

Staff	C. Lacanienta C. Lee D. Munro	E. Saber N. Slaughter S. Stewart
Handouts	Planning council packet (February 2009). Final action items and updates (February 17, 2008). Provider questionnaire #1. Bio Sketch (L. Servance). FY 2009 Minority AIDS Initiative (MAI) Priority Setting and Resource Allocation (PSRA) (binder). ² FY 2009 MAI PSRA grantee recommendations. FY 2009 MAI PSRA category trends (worksheet). Planning council change of location announcement (flier). Coppin State University's World AIDS Day announcement (flier).	

Executive Summary

The meeting convened with quorum at 6:30 p.m.³

The planning council chair called the meeting to order and announced that an emergency priority setting and resource allocation for the FY 2009 Minority AIDS Initiative needed to be conducted during the meeting due to the MAI application deadline of March 6, 2009.

Colin Flynn, Part B grantee representative from the Maryland AIDS Administration, made a presentation regarding the client level data system.

The planning council approved the first provider questionnaire to be released on March 13, 2009. The purpose of this questionnaire is to help the planning council assess the efficiency of the administrative mechanism (the grantee or its administrative agent) in rapidly allocating funds to the areas of greatest need within the eligible area as required by the Ryan White HIV/AIDS Treatment Modernization Act of 2006.

The planning council voted Lewis Servance to the pool list.

The planning council held its FY 09 MAI PSRA and began making funding allocations. The planning council announced that an additional meeting during the week of February 23 would be necessary to complete the FY 09 MAI PSRA.

The meeting adjourned at 9:30 p.m.

² Minority AIDS Initiative (MAI): A funding stream authorized under the Ryan White HIV/AIDS Treatment Modernization Act of 2006 to provide additional funding, beyond Part A, to minority areas affected by HIV/AIDS.

³ Quorum is defined as attendance of at least 51 percent of membership.

Proceedings

Introductions/Review of Minutes

The chair convened the meeting at 6:30 p.m. with roll call, introductions and approval of minutes from the November meeting.

Motion	To accept the November 18, 2008 minutes as written.
Proposed by	A. Foyles
Seconded by	D. Kelson
Action	Passed, 0 abstention, 0 objections

Motion	To accept the December 16, 2008 minutes as written.
Proposed by	A. Foyles
Seconded by	D. Kelson
Action	Passed, 0 abstention, 0 objections

Chair’s Report

The chair announced that the planning council will be holding the FY 2009 MAI PSRA at the planning council meeting and will be foregoing all updates and other business until the March planning council meeting. This priority setting and resource allocation became urgent when the Health Services and Resources Administration (HRSA) announced the March 6, 2009 application deadline for MAI funding.⁴ The planning council’s overall part A allocations for FY09, including MAI, must comply with federal legislation that requires every eligible metropolitan area to allocate at least 75 percent of its total Ryan White funding towards core medical services.

Committee Reports

Evaluation Committee:

The committee co-chair reported the following:

- The committee completed the first provider questionnaire. The first provider questionnaire will be released to all Ryan White Part A providers on March 13, 2009 as the first part of two provider questionnaires. The purpose of this questionnaire is to help the planning council assess the efficiency of the administrative mechanism (the grantee or its administrative agent) in rapidly allocating funds to the areas of greatest need within the eligible area as required by the Ryan White HIV/AIDS Treatment Modernization Act of 2006.

Motion	To approve the first provider questionnaire for distribution on March 13, 2009.
Proposed by	K. Bellesky
Seconded by	D. Kelson
Action	Passed, 0 abstention, 0 objections

⁴ Health Resources and Services Administration (HRSA) is an agency of the U.S. Department of Health and Human Services that works to improve access to health care services for people who are uninsured, isolated or medically vulnerable.

Nominating Committee:

The committee co-chair reported the following:

- The committee reviewed one application and recommended L. Servance to be added to the pool list.

Motion	To move Lewis Servance to the pool list.
Proposed by	A. Middleton
Seconded by	D. Kelson
Action	Passed, 0 abstention, 0 objections

Fiscal Year 2009 Minority AIDS Initiative Priority Setting and Resource Allocation

The PSRA was led by a facilitator, Douglas Munro. The facilitator discussed federal legislation that requires that a minimum of 75 percent of funds be allocated to core medical services. In May 2008, HRSA provided guidance to the planning council on services under the EIS service category because many activities under EIS have been redefined as support services. The Baltimore EMA received a waiver for these activities for the remainder of FY 2008 but must shift funding to be in compliance with the 75 percent rule for all Ryan White funding (part A and MAI) in fiscal year 2009. In August 2008, the planning council shifted part A funding to comply with the 75 percent rule.

The planning council discussed the 75 percent rule and agreed to fix the MAI award to funding at least 75 percent of funds to the core medical service categories. Fixing the MAI core medical allocation at 75 percent would solve any future problems related to the 75 percent rule.

Motion	To approve a fixed minimum core medical allocation level of 75 percent for current and future MAI awards.
Proposed by	C. Massey
Seconded by	K. Bellesky
# Abstent	3
# Opposed	0
Action	Passed.

Prior to the resource allocation exercise, all planning council members were required to complete an online or hand written survey to rank the most important services for people living with HIV/AIDS. Service categories were discussed in the order in which they were ranked.

All funding decisions were made based on an epidemiological update from Colin Flynn, Chief of Surveillance and Epidemiology, Maryland AIDS Administration, most current needs assessment, category performance as presented by the Baltimore City Health Department and analyzed in the scorecards, additional funding streams, and the need to adhere to legislative funding requirements.

This priority setting and resource allocation is divided into two rounds in which funds may be discussed and allocated.

Medical Case Management.

This category is currently unfunded. The planning council voted to increase funding to this category to comply with the 75 percent rule. The planning council discussed the need to fund this category due to the recommendation to zero-fund the Case Management, Non-medical service category.

The category will be bid during the upcoming request for proposal (RFP) process.

Motion	To set funding to the Medical Case Management service category at \$340,000 relative to the total MAI award for FY09.
Proposed by	D. Kelson
Seconded by	R. Rubino
# Abstent	4
# Opposed	2
Action	Passed.

Early Intervention Services.

This category is currently unfunded.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Early Intervention Services service category at \$0.
Proposed by	K. Bellesky
Seconded by	J. Winslow
# Abstent	5
# Opposed	0
Action	Passed.

Mental Health.

This category is currently unfunded. The planning council voted to increase funding to this category due to the grantee report that service providers had requested additional funds and are able to absorb more clients.

The category will be bid during the next RFP process. Services under this category will be provided under a fee-for-service model.

Motion	To set funding to the Mental Health service category at \$161,000 relative to the total MAI award for FY09.
Proposed by	D. Kelson
Seconded by	J. Winslow
# Abstent	4
# Opposed	1
Action	Passed.

Outpatient Ambulatory Health Services (OAHS) – Primary medical care, Emergency medical assistance, Viral Load Testing and Specialty Laboratory Services.

This category is currently unfunded.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the OAHS sub-categories of Primary Medical Care (i.e. emergency medical assistance, viral load testing, specialty laboratory services) at \$0.
Proposed by	K. Bellesky
Seconded by	D. Kelson
# Abstent	3
# Opposed	
Action	Passed.

OAHS – Primary Medical Care Co-morbidity.

The planning council voted to level-fund this service category. Providers under this category have been utilizing funds and serving clients at a consistent rate.

Motion	To set funding to the Primary Medical Care Co-morbidity service category at \$449,752 relative to the total MAI award for FY09.
Proposed by	J. Winslow
Seconded by	W. Miller
# Abstent	2
# Opposed	
Action	Passed.

Substance Abuse-Outpatient.

This category is currently unfunded.

The council voted to increase funding to the Substance Abuse-Outpatient service category by \$300,000.

The grantee recommended funding due to requests from providers who would be able to use this money to provide services. This increase would serve approximately 300 new clients.

Motion	To set funding to the Substance Abuse-Outpatient service category at \$300,000 relative to the total MAI award for FY09.
Proposed by	W. Samuel
Seconded by	J. Winslow
# Abstent	3
# Opposed	1
Action	Passed.

AIDS Drug Assistance Program, Oral Health and Health Insurance Premiums.

These categories are currently unfunded. For time purposes, the facilitator proposed voting on these categories simultaneously as well as zero-funding in accordance with existing funding recommendations. This vote was taken by a consensus voice vote.

The council voted to maintain the categories at zero-funding level.

Motion	To vote on the AIDS drug assistance program, oral health, and health insurance premiums service categories simultaneously and set funding at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	1
# Opposed	0
Action	Passed.

Medical Nutritional Therapy.

This category currently receives \$39,477.

The planning council voted to increase funding by \$38,173 to fund a partial full-time equivalent (FTE) (part-time staff/employee).

Motion	To set funding to the Medical Nutritional Therapy service category at \$77,650 relative to the total MAI award for FY09.
Proposed by	W. Miller
Seconded by	D. Kelson
# Abstent	2
# Opposed	5
Action	Passed.

AIDS Pharmaceutical Assistance, Home and Community-Based Services, Hospice Care.

These categories are currently unfunded and received no funding recommendation. For time purposes, the facilitator proposed voting on these categories simultaneously as well as zero-funding in accordance with existing funding recommendations. This vote was taken by a consensus voice vote.

The council voted to maintain the categories at zero-funding level.

Motion	To vote on the AIDS pharmaceutical assistance, home and community-based services, hospice service categories simultaneously and set funding at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	0
# Opposed	0
Action	Passed.

Counties core medical services.

The grantee commented that many services are provided by Ryan White Part A and MAI funding in the EMA already. EMA-wide funding can be used for counties residents. The planning council voted to level-fund the counties award for core medical services.

Motion	To set funding to the Counties core medical service category at \$143,362 relative to the total MAI award for FY09.
Proposed by	K. Bellesky
Seconded by	J. Winslow
# Abstent	5
# Opposed	3
Action	Passed.

Motion	To extend the meeting to 9 pm.
Proposed by	M. Reese
Seconded by	W. Samuel
# Abstent	
# Opposed	
Action	Passed.

Counties Support Services.

The grantee recommended a decrease of 120,770 to this category and noted that the vast majority of services have been ineffective.

The planning council expressed concern that the counties have not had the option of reviewing current allocations.

The grantee noted that all providers ending MAI counties contracts are allowed and encouraged to apply for EMA-wide funding.

The planning council entertained a motion to reduce this category by \$60,770.

Motion	To set funding to the Counties support services category at \$152,716 relative to the total MAI award for FY09.
Proposed by	W. Samuel
Seconded by	N. Robinson
# Abstent	4
# Opposed	15
Action	Failed.

The planning council agreed to fund this service category at \$31,946.

Motion	To set funding to the Counties support services service category at \$31,946 relative to the total MAI award for FY09.
Proposed by	K. Bellesky
Seconded by	D. Kelson
# Abstent	4
# Opposed	9
Action	Passed.

The planning council voted to extend the meeting to 9:30 p.m.

Motion	To extend the PSRA meeting until 9:30 pm.
Proposed by	D. Kelson
Seconded by	M. Reese
# Abstent	0
# Opposed	0
Action	Passed.

Case Management, Non-medical.

The planning council has allocated money to the Medical Case Management service category and voted to terminate funding to this category.

Motion	To set funding to the Case Management, Non-medical service category at \$0.
Proposed by	J. Winslow
Seconded by	K. Bellesky
# Abstent	4
# Opposed	0
Action	Passed.

Medical Transportation.

The planning council voted to decrease this category by \$30,346.

The grantee noted that there is already sufficient funding for medical transportation.

Motion	To set funding to the Medical Transportation service category at \$55,375 relative to the total MAI award for FY09.
Proposed by	K. Bellesky
Seconded by	J. Winslow
# Abstent	5
# Opposed	3
Action	Passed.

Housing Services.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Housing Services service category at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	0
# Opposed	0
Action	Passed.

Outreach Services.

The planning council voted to decrease funding to this category by \$105,931. This will restrict remaining funding to only those providers who have shown proven outcomes of success in recent years.

Motion	To set funding to the Outreach Services service category at \$209,973 relative to the total MAI award for FY09.
Proposed by	K. Bellesky
Seconded by	J. Winslow
# Abstent	6
# Opposed	8
Action	Passed.

Treatment Adherence Services, Health Education and Risk Referral, Substance Abuse–Residential.

These categories are currently unfunded and received no funding recommendation. For time purposes, the facilitator proposed voting on these categories simultaneously as well as zero-funding in accordance with existing funding recommendations. This vote was taken by a consensus voice vote.

The council voted to maintain the category at zero-funding level.

Motion	To vote on the Treatment Adherence Services, Health Education and Risk Referral, and Substance Abuse – Residential service categories simultaneously and set funding at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	0
# Opposed	1
Action	Failed.

Treatment Adherence, Non-medical.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Treatment Adherence, Non-medical service category at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	0
# Opposed	2
Action	Passed.

Health Education and Risk Referral.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Health Education and Risk Referral service category at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	0
# Opposed	2
Action	Passed.

Substance Abuse-Residential.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Substance Abuse-Residential service category at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	
# Opposed	6
Action	Passed.

Psychosocial Services.

The planning council set allocations for this service category at \$132,141. This is a decrease of \$57,813 from its current funding level.

Motion	To set funding to the Psychosocial Services service category at \$132,141 relative to the total MAI award for FY09.
Proposed by	D. Kelson
Seconded by	C. Harvey, Sr
# Abstent	5
# Opposed	3
Action	Passed.

Food Bank/Home Delivered Meals.

The grantee recommended zero-funding this category.

The planning council agreed that services were still necessary and voted to only reduce funding by \$100,000.

Motion	To set funding to the Food Bank/Home Delivered Meals service category at \$95,505 relative to the total MAI award for FY09.
Proposed by	C. Massey
Seconded by	D. Kelson
# Abstent	2
# Opposed	9
Action	Passed.

Food Bank Emergency Financial Assistance, Legal Services, Referral Services, Rehabilitation Services, Respite Care.

These categories are currently unfunded and received no funding recommendation. For time purposes, the facilitator proposed voting on these categories simultaneously as well as zero-funding in accordance with existing funding recommendations. This vote was taken by a consensus voice vote.

Motion	To vote on the Food Bank, Legal Services, Referral Services, Rehabilitation Services and Respite Care service categories simultaneously and set funding at \$0.
Proposed by	Facilitator
Seconded by	
# Abstent	
# Opposed	1
Action	Failed.

Food bank – Emergency Financial Assistance.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Food Bank service category at \$0.
Proposed by	K. Bellesky
Seconded by	C. Harvey, Sr.
# Abstent	0
# Opposed	0
Action	Passed.

Legal Services.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Legal Services service category at \$0.
Proposed by	D. Kelson
Seconded by	C. Harvey, Sr.
# Abstent	0
# Opposed	0
Action	Passed.

Referral Services.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Referral Services service category at \$0.
Proposed by	K. Bellesky
Seconded by	R. Haden
# Abstent	0
# Opposed	0
Action	Passed.

Rehabilitation Services.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Rehabilitation Services service category at \$0.
Proposed by	D. Kelson
Seconded by	C. Harvey, Sr.
# Abstent	0
# Opposed	0
Action	Passed.

Respite Care.

This category is currently unfunded and received no funding recommendation.

The council voted to maintain the category at zero-funding level.

Motion	To set funding to the Respite Care service category at \$0.
Proposed by	K. Bellesky
Seconded by	D. Kelson
# Abstent	0
# Opposed	0
Action	Passed.

Child Care.

The planning council discussed the need for child care.

The grantee recommended zero-funding the category to become in compliance with the 75 percent rule and explained that part A programs are now using a fee-for-service model and can serve more clients at a more efficient cost.

The planning council adjourned and agreed to re-convene during the week of February 23.

Motion	To re-convene during the week of February 23, 2009.
Proposed by	C. Massey
Seconded by	R. Matens
# Abstent	1
# Opposed	
Action	Passed.

New Business

No new business.

The meeting adjourned at 9:30 p.m.

Motion	To adjourn.
Proposed by	C. Massey
Seconded by	R. Matens
Action	Passed, 0 abstention, 0 objections