

Planning Council

Minutes of the Meeting of June 20, 2006

Vol. III, No. 4

Final • August 15, 2006

Meeting Attendance

Present¹	L. Green	D. Brewer
	K. Allston	S. Ashley
	D. Baker	H. Carter
	L. Creditt	I. Davis
	N. Drew	B. Flint
	A. Foyles	T. Gray
	N. Guest	R. Haden
	P. Hall	R. Hamlett
	R. Johnson	B. C. Jones
	J. Keller	G. Manigo
	C. Massey	W. Merrick
	W. Miller	M. Reese
	W. Samuel	R. Shattuck
	K. J. Taylor	B. Tucker
S. Woods		
Absent	W. Belle	M. Cole
	L. Chapman	B. Grant
	D. Henson	S. Jones
	J. Keruly	D. McKelvin
	M. Obiefune	A. Santiago
Proxy	S. Smith	D. Devonish
	M. Becketts	
ABC	B. McKeithen	G. Williams-Glasser
BCHD	R. Matens	D. Ganachari
	L. Koontz	A. Ferrari
	J. Johnson	R. Brisueno
Visitors	B. Warren	V. Febres
	N. Goldberger	C. Culmer
	D. Pollard	S. Kopins
	J. Winslow	H. Roberts, Jr.
	K. Matthews	J. Gresham
	L. Beaver	M. Patterson
	R. Green	L. Carter
	L. Bann	

¹ Attendance is based on sign-in sheet

Staff	K. Hale N. Curtis S. Stokes	C. Lacanienta R. Abernathy
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Handouts	June PC packet Agency Reports Committee Reports Addendum to Chair's Report Nominating Committee Documents Support Services Committee Minutes Potential Directives for FY 2007 Tentative Listing of Service Categories FY 2007 Appendix 3: Glossary of HIV-Related Service Categories Ryan White Title I Circular 2006: Medications & Medication Co-pays Parkwest Medical Center Flyer: Living Positively Well Gay Family Foundation presentation packet
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Introductions

L. Green convened the meeting with introductions at 6:20 p.m.

Needs Assessment Consumer Survey Summation Presentation

S. Stokes presented a summary of the planning council's 2004-2006 needs-assessment projects. This information will be in section 7 of the FY 2007 Priority Setting Binder.

Review of Minutes

The council reviewed their May minutes and there was one correction. On page 9, W. Samuel was not counted as being opposed to the first motion that speaks to reviewing the pool list twice a year. There were no other corrections. A motion was put forward:

Motion	To accept the May minutes with one edit.
Proposed by	H. Carter
Seconded by	R. Shattuck
Action	Motion passed with no abstentions or objections.

Chair's Report

L. Green reported:

- I have been working with the PC support office in laying out priority setting and outlining the changes to the planning process that the PC will need to consider.
- As of today, the reauthorization of the Ryan White CARE Act has not been ratified. The United States Senate's Health, Education, Labor and Pensions Committee and

the House of Representatives' Energy and Commerce Committee have drafted versions of the bill and circulated it.

- Planning council leadership, support staff and planning council committee members have met and spoken with staffers who are key to the development of this legislation. Based on information gathered and what the new legislation is stating, several things are actually going to impact our service system in 2007.
- HIV reporting by name is going to be required in order for HIV case numbers to count for funding awards. There will be a legislatively defined list of core-medical services and seventy-five percent of the funds will be required to be allocated to the core medical services. There will be other changes in the legislation to include: 10 percent of the funds for administration including planning council support activities, there will be three tiers that EMAs across the country would be categorized into for funding purposes. Baltimore is a tier-one EMA which is considered high in ranking and makes planning councils mandatory.
- FY 2007 should be used as a transition year during which the restructuring of the service continuum will move forward toward full implementation of the new legislation. The partner organizations have been meeting to review the entire service continuum as it now stands. Using the proposed new service categories as defined in the circulated legislation, there will be a regrouping of many existing support services into core medical services. The planning council is proposing changes to our processes that position the council and our care system in the best place to preserve quality services, retain expertise in delivering HIV services and get the most return for each of our limited dollars.
- The planning council holds two actual priority-setting conferences: EMA conferences on July 28 and July 31 and two conferences in the surrounding counties on August 7 and August 8. Two independent facilitators were identified and booked to oversee the EMA and surrounding counties' priority settings. The facilitators are Dr. Scout and Dr. Wheeler who have immense experience in the field of HIV/AIDS. Dr. Scout will facilitate only the first day of the EMA priority setting session and Dr. Wheeler will facilitate the second day of the EMA priority setting session and both days of the counties' priority settings. The morning of the first day remarks are given by invited guests and an overview of the entire conference is also given along with the setting of ground rules and any other business.
- This year the planning council is asked to approve the processes that will be used at both conferences at this June meeting so that both days of priority setting can be used for the actual contingency planning.
- The following is the order of how this discussion will flow; I will raise the issues or processes and lead discussion. Following the discussion I will have the vice-chair entertain the procedural motions on each of the issues. Since we have so many procedural issues to cover as well as service categories and our regular business, I am asking planning council members who agree with remarks made by a previous

speaker to use the ditto process. I am also asking planning council members to be brief in stating their questions and when making any comments.

Priority Setting Process Discussion

L. Greenwood presented the procedural measures that the PC must consider enacting before the FY07 priority-setting meeting.

Defer Planning Related to the Absence of a Proxy HIV Count

The first matter speaks to the proxy that the state needs to secure. Maryland is one of a few states that have not applied for a proxy. I have met with the representatives from the Governor's office and the Department of Health and Mental Hygiene. Based on that meeting, I am confident that the state is taking the necessary steps to request a proxy from CDC. The deadline to submit a request for the proxy is October 1, 2006.

The proxy is for those states that presently do not have an HIV names reporting system in place, which is now required by the new CARE Act. The proxy would allow Maryland to count all of its living AIDS cases that add up to the ninety percent of the AIDS case number to serve as a proxy for the HIV cases. Currently, the planning council does not know whether Maryland will or will not be granted a proxy. Until more information is given, it is not possible to plan around the proxy issue. If a proxy is not granted, the planning council will have to convene another priority setting event to address the impact of the severe reduction in funds.

The first motion that speaks to this issue is:

Motion	Defer any planning using the absence of a proxy until after September when there might be definitive information
Proposed by	D. Brewer
Seconded by	R. Shattuck
Action	Motion passed with no abstentions or objections.

New Voting Cards and Process

Under the current legislation, the planning council is required to rank all the possible service categories that it wants to consider funding. Under the new legislation, the planning council is instructed to apply seventy-five percent of funding to core medical services. To accomplish this process and to help the council get familiar with this new process, at priority setting, the council will be provided with new tools including color-coded voting cards that identify the core medical services separate from the support services categories. To initiate this process for priority setting, the council is asked to approve the new voting cards and to modify the voting process.

The second motion speaks to this issue:

Motion	Approve the voting cards printed in different colors each representing: core medical services, support services and MAI funding.
Proposed by	D. Brewer
Seconded by	L. Creditt
Action	Motion passed with one abstention two objections.

In the past, voting members received ten cards to vote for any of the twenty-six categories. Since seventy-five percent of the funds must be spent on core medical services, it is necessary to rank these services first before ranking the support service categories. The planning council will be given five color-coded cards for medical services and five color-coded cards to support services and four cards for MAI.

Motion	Approve the voting process using five cards for core medical services and five cards for support services and four cards for MAI funding.
Proposed by	D. Brewer
Seconded by	H. Carter
Action	Motion passed with three abstentions and no objections.

Increase Planning Council Support

Under the proposed legislation, in order for the planning council to continue being maintained in our EMA, the council has to ensure that sufficient funding is set aside for its support system. According to the proposed legislation, the planning council was added to the administrative portion of the grant. The total portion was increased to 10 percent. The understanding is that the planning council support can receive up to five percent of the funds. Historically, the planning council has never approved more than four percent for its support system.

The fourth motion speaks to this issue:

Motion	To approve 4% for PC support and to apply that figure to the total grant award just as the grantee administration and QIP are applied.
Proposed by	D. Brewer
Seconded by	M. Reese
Action	Motion passed with no abstentions and two objections.

Motion	To apply the process described in the first motion to any and all contingencies. The grantee, QIP and PC will receive the percentage reduction or percentage increase under each of the planned contingency.
Proposed by	D. Brewer
Seconded by	H. Carter
Action	Motion passed with one abstention and two objections.

Four Contingencies

This year the planning council needs to plan to do four contingency funding levels at priority setting. Based on the new legislation, there is a possibility for a waiver for the seventy-five percent requirement in the proposed legislation. The four contingencies consist of a decrease without a waiver, decrease with waiver, increase with waiver and increase without a waiver.

The waiver would give this EMA more flexibility in how we allocate our funds between core medical services and support services. The waiver, once applied for, is awarded by the Secretary of Health and Human Services.

The fifth motion speaks to this issue:

Motion	To approve four planning contingencies during priority setting.
Proposed by	D. Brewer
Seconded by	T. Gray
Action	Motion passed with no abstentions and two objections.

Baltimore City Health Department QIP Report

Representatives of the Quality Improvement Program of the Baltimore City Health Department presented its case findings on service categories: primary medical care (adult and pediatric), case management and food bank/nutritional counseling. These case findings will be presented again at priority setting and hard copies will also be available.

Administrative Agency Report

G. Williams-Glasser reported:

- Service category meetings were implemented last fiscal year as opportunities for clarification and exchange on critical issues affecting specific service category. Our next service category meeting will focus on primary medical care and is scheduled for June 2006.
- The AA staff attended all planning council meetings.

- The AA and Grantee conducted an orientation meeting for providers participating in the MAI Outreach Pilot. The meeting was held on June 1, 2006. Outcome measures were modified and revised to fit the intent of the project and also be measurable.
- The Office of Performance Review conducted its review for the Baltimore EMA May 22, 23 and 24. One of the outcomes of this self-evaluating process was identification by the OPR team to recommend assistance with data collection and analysis. The reviewers proposed a “Data Summit” meeting, which would generate recommendations for “smart” thinking about data management and collection of needs of the EMA.
- The AA submitted all conditions of award due to BCHD on May 22 including FY 2005 close out, FY 2006 Table 10, FY 2005 MAI Annual Report and FY 2006 MAI Annual Plan.
- The AA submitted contractual requirements on May 31, including FY 2006 narrative on directives and comprehensive plan reports, report on FY 2005 contract monitoring and outreach outcome data submission.
- We are wrapping up the contract process with a few remaining contracts that require special attention.
- Both Title I and II are collaborating on assessing the impact of the new insurance program entitled Primary Adult Care (PAC) due to start on July 1, 2006.
- The AA is working with Mary Williams to gather information needed for the administrative assessment.
- The next provider meeting is scheduled for June 16, 2006.

Baltimore City Health Department Report

Concerning Title I Administration, R. Brisueno reported:

- No update has been received on the finalization of the CARE Act reauthorization. The Grantee continues to strongly encourage council members and providers to get involved through local legislative representatives.
- The Office of Performance Review conducted its site review in May. The Title I Office is currently awaiting the final report from HRSA.
- BCHD submitted all 7 Conditions of Award to HRSA ahead of schedule.
- All administrative contracts (Administrative Agent, PC Support, and Program Support) are fully executed.

Concerning QIP, R. Brisueno reported:

- Kelley Stewart, BCHD Community Liaison for many years, resigned May 19th to assume a position at University of Maryland, Institute for Human Virology. We extend our sincere appreciation for her exemplary service in the QIP Office and wish her well in this new endeavor.
- The service category reports for primary care, case management, and food/nutrition are on target for distribution on or about July 1st.

Concerning the Division of Health Promotion and Disease Prevention, R. Brisueno reported:

- Baltimore City Health Department is participating in a strategic partnership with several HRSA funded organizations to address selected population measures that impact health disparities in West Baltimore.

Concerning the Capacity Building and/or Technical Assistance Initiative, R. Brisueno reported:

- A meeting was held on June 1st with MAI Outreach programs to develop action items for the delivery of capacity-building initiatives.

State AIDS Administration Report

Concerning Title II, N. Drew reported:

- The Central Region Consortium Meeting, which focused on “Special Populations,” was held on June 15, 2006 at the Life Resources Center of Harbor Hospital from 11:30 a.m.-2:00 p.m.
- The AIDS Administration along with the Gay Family Foundation is sponsoring a training entitled “Chronic Disease Management of HIV/AIDS: An Examination of Health Disparities and Co-Morbidities and their Impact on Communities of Color” on Friday, June 23rd from 8:00 a.m. to 2:00 p.m. at Sheppard Pratt.
- As part of a Maryland Ryan White Cross-Title HRSA Technical Assistance Project, CAREWARE trainings were held statewide.

Concerning Title IV, N. Drew reported:

- The quarterly Title IV Network and Youth Initiative meetings were held on Friday, June 16, 2006 at the AIDS Administration.
- Ann Price and Bryna Grant attended the AIDS Alliance VOICES conference, which was May 20-22 in Arlington, Virginia. Several youth consumers also attended.
- HRSA has informed the AIDS Administration that Title IV and Title IV Youth Initiative awards will be made on or about August 1, 2006. Each grantee will receive a 1 percent decrease in their award.

Committee Reports

Comprehensive Planning Committee

J. Keller reported:

- The committee met on Monday, May 22, 2006.
- The committee reviewed potential directives for FY 2007. Enclosed in your June packet are the directives the committee will be submitting to the council next month.

- The committee developed carryover project recommendations and will forward them to the carryover task group for consideration. There are no action items.

Evaluation Committee

H. Carter reported:

- The committee did not meet on June 22, 2006. The committee is scheduled to meet July 10, 2006 at 5:30 p.m. at IGS offices. The committee will review the final FY 2005 fiscal closeout reports and begin its assessment activities.

Health Services Committee

K.J. Taylor reported:

- The committee met on June 7, 2006.
- The committee heard an update from our two representatives who attended the Joint Common Language Task Group meeting. The meeting was successful in that the standard template was completed after three intense hours of discussion. The draft standard was forwarded to IGS for editing. (As an update, the editing of the standard is now complete and will be put into the June PC packet for the council to review.)
- The committee's Home Health and Hospice Standards are still in the editing process and will not be complete until September 2006. Once the final draft is ready, the committee will forward both standards to the council for full approval.
- The committee received a copy of the first Table 10 for FY 2006. The committee was asked to begin reviewing the Table 10 for future discussions.
- Representatives from the Gay Family Foundation gave a brief presentation to the committee on its upcoming events. Melanie Reese and Naomi Goldberger were the representatives.
- The committee heard a presentation on the new legislation for the Ryan White CARE Act. The committee was given a break down on the new language of the CARE Act and how it would impact the health services categories. The committee reviewed a list of tentative service categories for FY 2007 that showed the core medical services being considered. It was explained that 75% of the funding would go to core medical services once the new language goes into effect. There are no action items.

Needs Assessment Committee

W. Samuel reported:

- The committee reviewed the Priority Setting FY 2007 topics for data presentations and made recommendations for additional topics to be added. The additional topics the committee came up are:
 - Presentation on food/nutrition specifically focusing on waiting lists and timeframe of people sitting on these lists (including data on the effect of gas price increases on transportation/delivery).

- Presentation on food / nutrition under the topic medical trends and challenges, relating to medication (including data on the effect of gas price increases on transportation/delivery).
- Presentation on MAI and its present outcomes within the service categories.
- Presentation on TDAP and Entitlements.
- Presentation on the progress on the Comprehensive Plan.
- Presentation on special populations: newly released and children aging out of the system.
- Presentation on MHIP and a presentation on ongoing co-pays. The presentation on ongoing co-pays would focus on the request to create a health insurance service category.

Motion	To accept the enclosed list of data presentation topics and data reports for the 2007 Priority Setting with the additions of the topics enclosed.
Proposed by	W. Samuel
Seconded by	H. Carter
Action	Motion passed with no abstentions or objections.

- The committee in its discussion of carryover projects made a recommendation to be forwarded to the carryover task group. The following is the recommendation:

“To propose a carryover project employing a researcher or other appropriate staff to identify relevant data and resources related to (1) reducing the time between diagnosis of HIV-positive status and entry into care and (2) contacting PLWH/As who are not in care, by: assessing and reporting on current literature related to this topic; identifying, contacting and reporting on ongoing research and other projects in the vicinity of the Baltimore and Washington, D.C. EMA related to this topic; identifying and reporting on resources known to speed entry into care for or improve contact with PLWH/As who are not in care, in the vicinity of the Baltimore and Washington, D.C. EMA; and identifying and/or contacting and reporting on any other sources of relevant information (e.g., interviews with experts on the topic of speeding entry into care by PLWH/As or contacting PLWH/As who are not in care).”

Nominating Committee

R. Shattuck reported:

- The committee met on Monday, June 12, 2006.
- The committee has several items to bring forward for the council to approve. The first being reappointments, then replacements for August vacancies, pool list removals and the approval for the council/committee attendance percentage process.

- The committee is bringing forward eight names to be approved for reappointments to the council. The committee would like to make a motion that would incorporate all eight names instead of making eight individual motions.

Motion	The committee would like to recommend the following names: Jeanne Keruly, Gregory Manigo, Walter Samuel, Bryna Grant, Carolyn Massey, Jean Keller, Reginald Haden and Melanie Reese be forwarded to the mayor's office for reappointment to the planning council.
Proposed by	R. Shattuck
Seconded by	K. Allston
Action	Motion passed with no abstentions or objections.

- In August 2006 four council members will be transitioning off the council. This transition leaves four vacancies to be filled. The committee reviewed its current pool list and newly screened applications. Based on discussion the committee is forwarding four names to the mayor's office for PC appointment: three names are from the pool list and the fourth name is a new applicant.

Motion	To forward Hilton Roberts, Jr. to the mayor's office for PC appointment.
Proposed by	R. Shattuck
Seconded by	T. Gray
Action	Motion passed with no abstentions or objections.

- The committee would like to recommend the removal of those persons who have been on the pool list for sometime and have been contacted numerous times with no response. The committee at this time has four pool-list names to bring forward for removal from the pool list. The committee will be using a code identifier for confidentiality purposes.

Motion	The committee would like to recommend that the names coded A, B, C and D be removed from the pool list.
Proposed by	R. Shattuck
Seconded by	H. Carter
Action	Motion passed with no abstentions or objections.

- The committee discussed the concerns surrounding the percentage that was chosen for measuring the allowable amount of missed meetings for a council and committee member. The percentage chosen was fifty-one percent. The committee has come up with a new recommendation for a percentage and that is sixty-six percent of missed meetings. The committee would like to make a motion at this time.

Motion	The committee recommends to the planning council to change the By-Laws to state that planning council and committee members must attend sixty-six percent of each year's meetings.
Proposed by	R. Shattuck
Seconded by	H. Carter
Action	Motion passed with no abstentions or objections.

PLWHA Committee

A. Foyles reported:

- The committee met on May 17, 2006.
- The committee heard a presentation from Colin Flynn of State AIDS Administration, on the current names based reporting and surveillance system in this EMA. The committee had a question and answer session with Mr. Flynn and many of the committee's concerns were addressed. Mr. Flynn was thanked for speaking to the committee.
- The committee continued its work on its confidentiality/names based reporting position paper and came up with more barriers, issues/concerns and solutions. The committee will finalize its discussion on this paper at its June meeting.

Services to Surrounding Counties Committee

M. Reese reported:

- The committee is not scheduled to meet this month. The committee will meet on Tuesday, July 11, 2006 and have its priority setting training at the same time.

Support Services Committee

M. Reese reported:

- The committee met on Tuesday, June 13, 2006.
- The committee discussed issues surrounding attendance and meeting time. After some discussion on this issue, the committee agreed to move their meeting time from 2 p.m. to 4 p.m. back to 3 p.m. to 5 p.m. The day of the meeting and the location did not change.
- The committee was also given an update on the Joint Common Language Task Group meeting from our representatives who attended. Anne Burke, Ann Price, Albert Foyles and Melanie Reese were our representatives. The final draft of the standard template is complete and is in your June Packet.
 - The committee heard a presentation on the new legislation on the CARE Act and how it impacts the medical and supportive services. The committee was given a copy of the tentative listings of service categories for FY 2007. It was announced that 75% of the funding would go to core medical services. Support services that are funded will

have to demonstrate that they are essential to the improvement of the client's health status.

- The committee had an in-depth discussion on this presentation and will continue its discussion at its next scheduled meeting. There are no action items.

IGS Report

K. Hale reported:

- IGS official report is in your packet.
- I would like to inform the council that from month-to-month the PC support office has approximately 110 client (PC) encounters in which projects are discussed and completed, preparation for committees, conference calls are done etc.
- R. Abernathy is leaving IGS. She will be missed.

New Business

- B. Warren of Gay Family Foundation introduced his staff to the council. Staff members announced upcoming events and invited the council to attend specifically the June 28th LEAP kickoff/Recruitment Drive. Also the Positive Self-Management Training will convene this month and have trainings across the state.
- The council was asked to contribute money to the sunshine fund.

Meeting adjourned at 8:33 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

August 16, 2006

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