

**GREATER HAMPTON ROADS HIV HEALTH SERVICES  
PLANNING COUNCIL  
Priorities, Allocations & Policies Committee Minutes  
Norfolk Department of Human Services  
Thursday, January 25, 2018 – 3:00 p.m.**

**Call to Order:** The meeting was called to order at 3:06 p.m.

**Roll Call:**

The roll was called, and the following members were in attendance:

Gwendolyn Ellis-Wilson  
Rachael Artise

Lisa P. Laurier  
Ashley Veal

**Staff in attendance:**

Marsha Butler-Grantee Staff  
Thomas C.M. Schucker-PC Support  
Teresa-PC Support Staff

Jacquelyne Wiggins-Grantee Staff  
Michael Koran-PC Support

**Absent Members:**

Jerome Cuffee  
Kanedra Nwajei  
Deryk Jackson

**Visitors:**

Davon White-A Hope4Tomorrow

**Moment of Silent Reflection:**

A moment of silence was observed for people who are infected and affected by HIV and AIDS.

**Review of Minutes:**

The committee reviewed minutes from the last meeting. *It was noted that Todd, who attended the committee meeting, is not a member on this committee.* After review, a motion was moved by Lisa and properly seconded by Gwendolyn to approve the minutes as written. The motion passed.

**Review the P-CAT:**

The committee reviewed the P-CAT. The following items were on the agenda for the committee's discussion:

- Review Expenditures by Service Category
- Review Reallocation Requests from Grantee
- Review framework for PSRA (including Directives)
- Bylaw and MOU review and update
- Compile Unresolved Issues in Parking Lot.
- Review scope of work for next year (P-CAT).

**Grantee's Reports:**

*Review Expenditures by Service Category:* The committee reviewed the Expenditure Summary Report for the period ending November 30, 2017 dated January 5, 2018. The target was at 75% for all categories. However, overall, the TGA was at 63% of funds expended as of November 2017. There are a few categories that are over-expended, such as Drug Reimbursement at 77%, Mental Health at 79% and EIS at 70%. With regard to EFA (Utilities and Housing), the cap has been lifted. Elevated expenditures in this category will be noted at the next meeting.

The committee reviewed some categories that are under-expending, such as Medication Co-Pays at 32%. EFA-Utilities and Housing, it was noted that caps have been lifted. As a result, the TGA will see some elevation in expenditures.

With regard to the under-expending categories, the committee was of the view that this could be because of some insured clients who have reached their out-of-pocket; under HIPCSA. Therefore, at what point should the TGA begin to plan and/or make adjustments for such a situation. In this regard, the committee will ask the Fiscal Officer, in the Grantee's Office, to give the committee A breakdown, by month, of the expenditure rate for that category.

Going forward, the committee will ask the Recipient to track ACA enrollments for the Norfolk TGA Part A clients. Data requests from the Priorities, Allocations and Policies Committee will be as follows:

- To the Recipient: Health Insurance Premium and Cost Sharing by month. This should be in time for the upcoming Priority Setting and Resource Allocations Session as a data set. And two years of historical data since the inception of the program.
- To VDH: Request for historical data on the Affordable Care Act enrollments.

The committee also discussed the misconception that providers have of denying requests for co-pay assistance to HIV/AIDS clients with an insurance plan who go to private health providers. In this regard, the committee agreed to initiate a Directive to the Recipient to ask sub-recipients to reach out to private providers to inform them that their clients' co-pays can be paid for.

### **Old Business:**

Review Reallocation Requests from Grantee: There were no reallocation requests from the Grantee.

Review framework for PSRA (including Directives): The committee reviewed Directives to the Grantee from the previous year. Support Staff gave a PowerPoint presentation of the Directives. Support Staff noted, in a nutshell, the definition of Directives as follows:

- The Planning Council has the right to provide Directives to the Grantee and help the Council to meet the service priorities adequately. It may direct the Grantee to fund services in particular parts of the EMA or TGA, such as outlying counties or to use specific service models. The Council may tell the Grantee to take specific steps to increase access to care. It may also require that services be appropriate for particular populations; for example, it may specify funding for primary care services to target gay men of color. However, the Planning Council cannot pick specific agencies to fund or make its Directives so narrow that only one agency will qualify. The Planning Council cannot be involved in any aspect or contract of selection of procurement or in managing or monitoring Part A contracts.

Copies of the current Directives were distributed to committee members for review. During review, the committee wanted to know if, in the interim, an RFP can be put out, again, if there was no initial response. Thomas will discuss with the Program's Manager how such a procurement can be handled. The committee also wondered if this can be handled as a Directive.

In view of the overwhelming process of applying to provide Ryan White services, the Committee agreed to add a Directive for the Recipient to hold a yearly informational workshop to potential providers on how to apply for Ryan White services.

There was extensive discussion during review of the current Directives. Throughout the year, the committee discussed the following:

- November: Release the Grantee's 10% cap
- The recommendation from the Membership and Nominations Committee, to include a flyer (designed by the Committee) into the Ryan White eligibility and reassessment packets as a form of recruitment for Planning Council.

After discussion, the committee agreed that this should go out as a request from the committee to the Recipient because it would be difficult to enforce. The recommendation for a Directive will be taken back to the Membership and Nominations Committee for further discussion.

- Sub-Recipients to promote HIPCSA to private physicians or asking the Recipient to give training to sub-recipients on private physicians HIPCSA coverage
- Prospective Sub-Recipient informational workshop

Support Staff were requested to make the recommended amendments to the Directives. The committee will finalize the Directives to the Grantee at the February 22<sup>nd</sup> meeting.

Review Scope of Work for next year (P-CAT): Copies of the old P-CAT were distributed to committee members for review. In order to be more transparent about the PSRA Process and in order not to lose track in planning for the Process, Support Staff recommended changes to some of the committee's P-CAT items during a PowerPoint presentation.

During presentation, the HRSA-HAB funding memo was reviewed. The memo was addressed to all the 52 Part A jurisdictions for the partial award based on the FY 2017 Part A Formula and MAI award level. It was noted that the partial award will be made on February 1 for the new budget period to start March 1. The partial formula award will be 31.5% of the FY 2015 formula in MAI award and 20.6% of the MAI Initiative award. In this regard, the Division of Metropolitan HIV/AIDS Programs and HIV/AIDS Bureau has determined a timeline for the FY 2019 Notice of Funding Opportunities. A plan has been developed to provide 90-day application period. For Ryan White Part A Program key dates for 2019 Notice of Funding Opportunities include June 2018, they will announce the funding opportunity with a submission date of September 2018 as due date. That's up three months. In this regard, the PSRA Session should take place in June this year. After discussion, the committee agreed to schedule the PSRA Training and PSRA Session for Thursday, June 28.

In this regard, the committee will, in the coming months focus on the following:

- March/April 2018: Review framework for PSRA and, start identifying data sets that the committee would like to utilize.
- April/May 2018: Review data books.
- June: PSRA Session
- July/August: Review the results of the PSRA Process and the feedback
- Nov./Jan./Feb.: Review Directives to the Recipient

Gwendolyn stated that she has been constantly in contact with the Veteran Affairs to get some numbers of individuals that are served. Some veterans are using Ryan White for dental services because the VA does not cover that service.

There was a recommendation to accept the revised Committee P-CAT. A motion was moved by Lisa and properly seconded by Gwendolyn to accept the revised P-CAT as presented. The motion passed. Copies of the committee's P-CAT will be sent to committee members for additional input and recommendations which will be discussed at the February meeting.

Bylaw and MOU Review and Update: There was no recommended reviews to the Bylaws or the MOU.

Unresolved Issues in Parking Lot: The committee did not have unresolved issues in the parking lot.

**New Business:**

Committee Budget Requests for 2018: Committees will be requested to submit their budget requests for 2018. The Committee Budget Requests should be submitted to the Grantee's Office by February 23, 2018. The Priorities, Allocations and Policies Committee was advised to ask the Grantee if there were funds for the committee to conduct a special study. Committee members with ideas to include on the budget request should send an email to committee Co-Chairs or the Support Office for dissemination to committee members.

**Other Business/Announcements:** There was no other business or announcements.

**Adjournment/Next Meeting:** With no further business to discuss, a motion was moved by Gwendolyn and was properly seconded by Lisa to adjourn the meeting. The Motion passed. The next meeting will be on February 22<sup>nd</sup> at 3:00 p.m.

Respectfully submitted,

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Rachael Artise –Committee Co-Chair