



Meeting of the
EXECUTIVE COMMITTEE
Thursday, February 16, 2012, 3:00-5:00pm
DOHMH, 2 Gotham Center, 42-09 28th Street, Conference Room 8-25
Long Island City, NY

MINUTES

Members Present: Jan Carl Park (Governmental Co-Chair), Dorella Walters (Community Co-Chair), Victor Alvarez, Victor Benadava, Felicia Carroll (Consumer-At-Large), Nancy Cataldi, Robert Cordero (Finance Chair), Gregory Cruz, Sharen Duke, John Anthony Eddie, Graham Harriman, Lee Hildebrand, Tom Petro, Debbie Quinones (for J. Edwards), Allan Vergara

Members Not Present: Robert Cordero (Finance Chair), Gregory Cruz, Gerald DeYounge, Marya Gilborn, Charles Shorter

Staff Present: JoAnn Hilger, David Klotz, Rafael Molina, Nina Rothschild, DrPH

Public Health Solutions: Bettina Carroll, Gucci Kaloo

Parliamentarian: Joan Corbisiero, PRP

Agenda Item #1: Welcome & Introductions

Dorella Walters, Community Co-Chair, opened the meeting and Jan Park, Governmental Co-Chair, reviewed the meeting agenda and materials, noting that future agendas may include a "New Items".

Victor Benedava led the Committee in a moment of silence.

Agenda Item #2 : Review of 1/19/12 Minutes

The minutes were distributed to members electronically for review and comments.

ACTION: *The motion was made and was passed to approve the minutes, without changes.*

Agenda Item #3: Code of Conduct

It was noted that certain members' behaviors have proven challenging to the meeting processes of the Planning Council. Lacking a formal process for removal, sanctions and appeals of such individuals, the Rules & Membership Committee developed a code of conduct, based on Washington, D.C.'s Planning Council, which articulates the professional and respectful behavior

expected at Planning Council and Committee meetings. Ms. Walters reviewed the approved language, which includes a moratorium of attendance at meetings for six (6) months.

ACTION: A motion was made to approve the code of conduct as presented. A friendly amendment was made recommending that language be added that includes formal, written documentation and notification of suspension under Article IV, Section (3), Sanctions. The motion passed.

The Code of Conduct will be presented at the March 22, 2012 Planning Council for review.

Agenda Item #4: FY12 Scenario Plan

Allan Vergara, Co-Chair of the Priority Setting and Resource Allocation Committee reported that the Committee completed its scenario planning process in preparation for developing a final spending plan once the FY 2012 grant award is announced.

The Committee agreed on a methodology for applying possible cuts if there is a reduction of the award up to 5%. This includes the following principles: 1) combining the Base and MAI awards into a unified spending plan if the awards are increased or decreased in tandem; 2) using the FY 2011 carrying costs as the starting point for an allocation amount; 3) fully funding ADAP at its FY 2011 carrying cost; 4) taking the first \$3M reduction in base funding from ADAP with the agreement to use the first \$2M in reprogramming dollars to restore it; and 5) applying proportionate cuts to the remaining categories (holding ADAP harmless from additional proportionate cuts). In addition, the Tri-County percentage of the award is held at its current level (4.71%) for the purposes of scenario planning; this issue will be revisited when the final award is known.

Mr. Vergara reported that there was also extensive discussion regarding all aspects of funding distribution, external to the scenario planning process, including Quality Management and allocations, as well as various NYCDOHMH training initiatives and related funding amounts. It was agreed that all service categories would be examined moving forward, regardless of past funding allocations.

The combined (MAI & Base) spending plans with a 5% cut scenario were presented for review. Joann Hilger inquired as to whether changes in Tri-County programming would be available by March 1 (the anticipated date of award) in order to have an indication of the overall NY EMA Core/Non-Core split.

ACTION: A motion was made and passed to accept the methodology as presented.

Agenda Item #5: Core/Non-Core Waiver Work Group

Mr. Park reported that the Core/Non-Core Workgroup met on February 8 (minutes are included in the meeting packet) and acknowledged the efforts of CTH staff in compiling a listing of external factors related to the implementation of the Affordable Care Act, including health insurance exchanges, State Medicaid changes, Health Homes and HRSA Monitoring Standards and their projected impact on Part A services in NY. Individual service categories and potential changes were reviewed as follows:

ADAP: No additional Part A funding needed through 2013; estimates of ADAP enrollees affected by expanded Medicaid eligibility will be needed for future planning; future ADAP services will be impacted.

Outpatient Medical Care/ADAP+: No additional Part A funding needed for ADAP+ through 2013; ADAP+ will not be impacted by mandatory managed care enrollment; ADAP+ will not be impacted by Medicaid Health Homes; ADAP+ will be impacted by Health Insurance Exchanges

OMC/Bridge Care: Not likely to be reimbursed, will probably not be impacted by Medicaid changes.

Medical Case Management: Will be impacted by enrollment in Medicaid Health Homes; identify Ryan White (RW) Care Coordination programs, monitor impact; when full implementation is underway, evaluate RW MCM service needs; Riker's Island Transitional Project will not be impacted; Transitional Care Coordination Program participants will be impacted as they are moved into Medicaid Health Homes

Mental Health: Will be impacted by HRSA Mandated Medicaid Certification Requirement in 2013; will be impacted by implementation of Behavioral Health Homes in 2014; will be impacted by expansion of Medicaid eligibility in 2014; will be impacted by Health Insurance Exchanges in 2014

Harm Reduction: If approved, Medicaid Certification will become necessary, programs will be impacted; Timeline for approval and implementation is unknown

Early Intervention/HIV Testing: NYS/NYC requesting HRSA exemption of Medicaid certification programs (will not be impacted); programs that are certified to bill Medicaid will be impacted

Oral Health (Tri-County): Expanded Medicaid eligibility will impact Tri-County program participants; 17 Part F programs continue to serve the NY EMA; Essential Health Benefits Package may impact RW program participants; inclusion of oral health services is yet to be determined

Home Care: Health Homes may have an impact on RW program participants; LTMC Plans may have an impact on RW program participants; individuals mandated to move into managed care plans will have to accept home health care approved by the plan

Food and Nutrition: May impact RW program participants -- proposed 2012 Budget would expand Medicaid coverage to allow a small percentage of PLWHA to receive enteral formula; although Medicaid does not cover medical nutrition therapy as a stand-alone service, visits can be billed as evaluation and management visits and could impact RW program participants

Housing: A formula change could result in substantial funding losses for NYC – losses in the HOPWA program could place pressure on RW housing allocations

Legal: Not reimbursable, will not be impacted by Medicaid changes

Medical Transportation (Tri-County): Expanded Medicaid eligibility will increase PLWHA access to this service

Supportive Counseling: Ryan White programs may be impacted as some services may be billable to Medicaid through mental health, outpatient substance abuse or health homes; Ryan White programs are primarily intended to provide services that are not Medicaid reimbursable

Tom Petro commented that these projected changes will not affect the 2013 continuum of services, but rather 2014 and beyond. Sharen Duke noted that Health Homes and Treatment Adherence models will have to be looked at closely as we move forward and reminded the Committee that there has been no reply to the Planning Council's letter to the HRSA Administrator, Mary Wakefield, regarding HRSA's Monitoring Standards and Medicaid certification. She suggested that follow up communication be initiated. Graham Harriman invited the Executive Committee to review the next draft of the Medicaid consultant's report and reported that the NYCDOHMH is developing a letter, in concert with NYSDOH, regarding Early Intervention services and the need for an exemption of Medicaid certification for agencies where HIV testing is performed.

Agenda Item #6: Planning Council Committee Updates

Victor Benedava reported on behalf of the *Consumers Committee*, at which Angela Aidala, Ph.D. delivered a CHAIN presentation on Food & Nutrition Service Needs of PLWHA in NYC.

Nina Rothschild reported on behalf of the *Integration of Care Committee*, during which a discussion regarding the decision to not re-issue the HRR RFP took place. There was also a presentation of housing services in Staten Island offered by Project Hospitality.

Ms. Duke, Chair of the *Policy Committee*, reported that the Committee participated in a conference call with the CAEAR Coalition, discussed the impact of HASA policies (brokers' fees, substance use screening), received an update of NYS budget and discussed the implementation of Health Homes and new opportunities for advocacy. She also inquired as to the status of the Comp Plan Objective #5 addressing the formation of an interagency task force across funding streams. Mr. Park responded that and that this will be discussed at the next Needs Assessment Committee meeting, where the comprehensive plan will be further discussed and also noted that NYCDOHMH has been holding intra-agency meetings with both the prevention and care units of the Bureau of HIV. Ms. Duke re-iterated that it is important that both providers and government agency representatives be included as stakeholders in these inter-agency meetings.

Dr. Lee Hildebrand noted that the *Needs Assessment Committee* will be meeting on February 29.

Agenda Item #7: Grantee Report

Ms. Hilger of NYCDOHMH reported that the Medicaid consultants' report (1st draft) was well-received; the next draft is expected at the end of February. With respect to the Planning Council request for an exemption from HRSA Monitoring Standards which require that programs' rent and utility expenses be considered as administrative costs as opposed to program costs, it was reported that communication from HRSA indicated that there is no flexibility regarding this requirement.

Mr. Petro of the WCDOH reported that the Tri-County Steering Committee voted to de-fund the EIS/Social Networking programs, thereby releasing \$400,000 to be re-allocated. The committee will be meeting on March 14 to decide where those funds should be used. Housing and Food & Nutrition Services programs are likely to be targeted for increases, given the need for such services in the Tri-County region.

Agenda Item #8: Public Comment

There was no public comment. However, several Planning Council members reported excessive wait times at the 2 Gotham Security desk before gaining access to the elevators.

There being no further business, the meeting was adjourned at 5:00pm.