



Meeting of the
EXECUTIVE COMMITTEE
Thursday, April 21, 2016, 4:00 – 5:00PM
Conference Call Information: 1-866-213-1863, Passcode 3587454#

MINUTES

Members Participating: Jan Carl Park (Governmental Co-Chair), Matthew Lesieur (Community Co-Chair), Katrina Balovlenkov, Randall Bruce (Consumer-at-Large), Carrie Davis, Sharen Duke, Billy Fields, Graham Harriman, H. Daniel Castellanos, DrPH, Daphne Hazel, Julie Lehane, Andrea Straus

Members Not Participating: Matthew Baney, Joan Edwards, Christopher Joseph, Dan Pichinson, Derrick Weekes, Lisa Zullig

DOHMH Staff Present: David Klotz, Nina Rothschild, DrPH, Darryl Wong

PHS Staff Present: Bettina Carroll, Christine Nollen

Others: Joan Corbisiero (Parliamentarian)

Agenda Item #1: Welcome/Introductions/Moment of Silence/Approval of Minutes

Matthew Lesieur, Community Co-Chair and Jan Park, Governmental Co-Chair, convened the conference call, followed by member introductions and a moment of silence. The minutes of the March 24, 2016 meeting were accepted as presented.

Agenda Item #2: Public Comment

There was no public comment.

Agenda Item #3: Grantee Report

Graham Harriman, NYCDOHMH reported that while the NY EMA has received approximately 80% of the FY16 award, we continue to wait for the full notice of award. We have been informed that the funds have been transferred from the Federal Department of Health & Human Services (DHHS) to HRSA and that we should expect our full notice of award in mid-May. It is anticipated that we will be either flat-funded or receive a small increase in our award. Our FY17 grant application will be due to HRSA in mid-October.

Abstracts to the Ryan White Conference are due on April 29, 2016. Any abstracts being submitted which use Part A data must be approved by DOHMH prior to submission. The grantee will be submitting abstracts on the ongoing City/State collaboration, Tobacco use/Smoking Cessation, Quality Management, Long term Survivors, Peer Training and Emergency Preparedness.

Agenda Item #4: Planning Council Updates

Planning Council Chairs Report

Jan Park announced that Dr. Demetre Daskalakis, Assistant Commissioner, Bureau of HIV/AIDS Prevention & Control will be presenting on the Zika virus at the full Planning Council meeting on April 28. It was reported that there has been a large increase in opioid overdoses and deaths, as well as an increased presence of fentanyl, a synthetic opioid analgesic with potency 100 times that of morphine.

Integration of Care:

Co-Chairs *Christopher Joseph and Lisa Zullig* presented the Master Service Directive, which was approved by the IOC Committee on April 20. Katrina Balovlenkov made a motion to add “linkages” to the last sentence of the 1st paragraph appearing in Column 3, page 3.

ACTION: **A motion was made to amend the FY 2016 Draft Reprogramming Plan with the addition of “linkages” as described above. The motion was approved unanimously.**

ACTION: **A motion was made to approve the Master Service directive, as amended. The motion was approved unanimously.**

Priority Setting/Resource Allocation

Sharen Duke, Co-Chair, reported that PSRA approved a revised FY 2016 reprogramming plan with a 20% cap on enhancements. All other aspects of the plan remain the same as previous years. The grantee would have the latitude to shift funds between service categories in order to enhance contracts that are performing above or show potential to perform above their maximum reimbursable amount. No service category will be enhanced by more than 20% of its original allocation in the spending plan, unless the Council approves an increase above 20%. ADAP will be included as a category for enhancement after all other service categories have been considered for enhancement. ADAP will not be subject to the 20% cap on enhancements. The Finance Committee had asked PSRA to revisit the former 15% cap on enhancements. These enhancements are one-time within the fiscal year and do not change the allocations in the spending plan. PSRA agreed that a 20% cap would still maintain the Council’s checks and balances on the service category amounts but give the grantee additional flexibility to maximize spending. PSRA continued its review of all service categories with an in depth look at Medical Case Management. DOHMH will be providing an update on MCM outcomes at the next meeting. Next month, PSRA will have a presentation from ADAP director *Christine Rivera*. PSRA discussed additional data that we would like to know about the program. Ms. Duke announced that AIDS Service Center will be hosting a poetry reading on April 21. Ms. Duke made the motion for the Executive Committee to approve the reprogramming plan as presented.

ACTION: **A motion was made to approve the FY 2016 Draft Reprogramming Plan as presented. The motion was approved unanimously.**

Needs Assessment

Co-Chairs *Carrie Davis & Daniel Castellanos* reported that at the last meeting, the Committee examined the transcripts from the Needs Assessment Community Briefing regarding Hep C co-infection, housing and socio-economic vulnerability. At the May meeting, the recommendations will be prioritized for implementation.

Consumers Committee

Co-Chair *Katrina Balovlenkov* reported that the Consumers Committee met at the headquarters of Bridging Access to Care in Brooklyn and completed the NYS HIV Planning Bodies Workgroup Integrated Care & Prevention Local Data and Priorities Worksheet, which will be submitted to the consultant, *Sandra Houston*, on April 22.

Tri County Steering Committee

As in previous years, the Steering Committee approved allocating any increase in the FY 2016 grant award to three service categories that pay for vouchers: Housing, Food (for food vouchers or pantry bags), and Medical Transportation. Housing programs can use and increase to pay for utilities, including back arrears, which helps keep people in their homes. Housing programs can also use funds for motel vouchers for short-term emergency situations, particularly in Rockland and Putnam Counties, where there is no shelter system. As TC contracts are cost-based until they are rebid for FY 2018, it is difficult for most providers to spend a small increase, so doing a proportionate increase across all service categories is not feasible. After contracts are re-bid and change to performance-based, we will be able to spread small increases across all categories based on rank scores. The grantee can do an analysis of the amounts each of the three categories can take, based on performance and waiting list data. A final spending plan will be presented to the EC after the notice of grant award is received.

Agenda Item #5 Public Comment/Adjournment

There being no public comment or further business, the meeting was adjourned at 5:00PM.