



EXECUTIVE COMMITTEE

Thursday, May 18, 2017, 4PM – 5PM

By Conference Call 1-866-213-1863, Access Code 3587454

MINUTES

Members Participating: Jan Carl Park (Governmental Co-Chair), Matthew Lesieur (Community Co-Chair), Katrina Balovlenkov, Matt Baney, Randall Bruce (Consumer At Large), H. Daniel Castellanos, DrPH, Carrie Davis, Maria Diaz, Sharen Duke, Billy Fields, Graham Harriman, Christopher Joseph, Andrea Straus

Members Not Participating: Joan Edwards, Steve Hemraj (Finance Officer), Lisa Zullig

DOHMH Staff Present: Ashey Azor, David Klotz, Melanie Lawrence, Darryl Wong

PHS Staff Present: Bettina Carroll

Others: Sera Morgan, HRSA Project Officer

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

Jan Park, Governmental Co-Chair and *Matthew Lesieur*, Community Co-Chair, opened the meeting, followed by member introductions and a moment of silence in memory of Daphne Hazel, who passed away on May 1, 2017. The minutes from April 20, 2017 were approved as presented.

There was no public comment.

Agenda Item #2: Priority Setting/Resource Allocation/ FY 2017 Reprogramming Plan

Matt Baney and *Sharen Duke*, Co-Chairs of PSRA, presented the FY 2017 reprogramming plan for the NYC portion of the EMA, which was approved by the PSRA. Reprogramming allows the EMA to maximize its spending within the fiscal year. The plan first restores the upfront cut to ADAP made in the spending scenario approved by the Council last month (up to \$756,445, depending on the final grant award, after use of FY 2016 carry-over), followed by giving the Grantee and Master Contractor the flexibility to enhance over-performing contracts and move funds between service categories up to 20% of the service category allocation in the final spending plan. Tri-County underspending will be kept for carry-over in the TC region.

ACTION: A motion was made, seconded and approved unanimously by a roll call vote of those participating in the conference call to accept the FY 2017 reprogramming plan as presented.

Agenda Item #3: Planning Council Committee Updates

PLANNING COUNCIL CHAIRS REPORT

Jan Park reported that given the Council's commitment to harm reduction approaches to substance use and the recent epidemic of opioid-related overdoses and deaths, a presentation and panel discussion on safe consumption sites (SCS), also known as safe injection sites is being planned for the full Planning Council meeting on May 25.

CONSUMERS COMMITTEE

The Consumer Committee met on Tuesday, May 16, where a moment of silence and celebration of life/transition was held in honor of Daphne Hazel, who passed on May 1. Claudia Calhoun, Director of Health Advocacy at the NY Immigration Coalition presented on immigrants' rights and health care access

as well as the Community Toolkits, in English and Spanish and a guide to health care options for immigrant New Yorkers, which generated much interest and many questions. The Committee reviewed the final version of the Consumer Committee's newly re-designed outreach brochure. There was consensus that the ADA symbol should be included in the brochure. Jose Colon-Berdecia, the Planning Council Community Outreach Coordinator reported on April 2017 activities and outcomes, with a focus on recruiting consumers to the Planning Council for the 2017/18 planning cycle.

INTEGRATION OF CARE (IOC) COMMITTEE

Christopher Joseph, Co-Chair reported that IOC continues to work on developing a new Care Coordination service directive. The committee is looking forward to seeing their recommendations incorporated into a new draft of the service directive and completing line by line editing to ensure that it is in line with the National HIV/AIDS Strategy and the NYS Integrated HIV Prevention and Care Plan.

TRI-COUNTY STEERING COMMITTEE

Maria Diaz, Co-Chair reported that TCSC continues the process of developing a revised set of ranked service priorities and allocations for the TC portfolio. Having reviewed fact sheets for every service category in the TC portfolio, the Council's Conflicts of Interest Guidelines and the Priority Ranking Tool were reviewed. A side-by-side table showing allocation amounts, number of active clients and cost per client for all services was presented. The Committee will vote on the rankings for each category and criteria at the next two meetings and may decide to reallocate funds to areas of greater need. Ranked priorities and allocations for the FY 2018 grant application will be presented to the July Executive Committee and full Planning Council meetings.

NEEDS ASSESSMENT (NA) COMMITTEE

Feedback from the Community Briefing indicated that there was great value in the content and utility of the various sessions, with recommendations to improve the next event, including better structure, tighter focus and more lead time for speakers to better respond to specific questions. The transcript and analysis of the briefing will be used to delineate concrete actions steps to address the issues identified at the briefing.

The committee discussed how best to fulfill its mission and purpose, including making a stronger contribution and strengthening its role in ensuring that critical services and needs are not impacted, given the uncertainty of funding scenarios. The Committee has identified three inter-connected tasks that will serve as a guide for the next six months 1) addressing the action steps from the briefing, reviewing the Housing, Transitional Care Coordination and Health Education service categories and reviewing the Integrated Care and Treatment Plan.

PRIORITY SETTING/RESOURCE ALLOCATION

In addition to approving the FY 2017 Reprogramming Plan, the Committee also engaged in a discussion of long term scenario planning in anticipation of a large cut in the FY2018 award. The discussion of the possibility of elimination of service categories where there is documented duplication of services in the Part A portfolio. The Transitional Care Coordination (TCC) service category was further examined, using a side by side comparison of other Case Management models (MCM/Care Coordination, Non-Medical Case Management/general population, nMCM at Rikers and Medicaid Health Homes.

RULES & MEMBERSHIP COMMITTEE

The committee is conducting its annual recruitment of new members with a focus on non-aligned consumers and people of color. Applications are due on June 16 and will be reviewed on June 27, with interviews to be scheduled at a subsequent date.

FINANCE

The Finance Committee will review the FY2016 close-out reports and the annual assessment of the administrative mechanism. A report will be presented at the July 2017 full Planning Council meeting.

Agenda Item #4: Grantee Report

Graham Harriman presented an update on Grantee activities, noting that:

- The FY2017 Omnibus Appropriations Bill has been passed, allowing for level funding for HIV/AIDS programs, leaving the Ryan White program largely intact. Funding for the Minority AIDS Initiative is also being sustained.
- The Notice of Award (NOA) for FY17 is still pending. The NY EMA expects to receive its NOA in late June/early July.
- Despite not having notice of the full award, contract renewals are proceeding, thereby allowing reimbursements from March to July 2017 (5 months).
- The FY 16 Part A Annual Progress Report, FY17 Program Terms and FY16 Federal Financial Report (FFR) will be submitted to HRSA in the next few months.
- THE DOHMH Quality Management and Technical Assistance staff are conducting FY17 provider meetings for Care Coordination, Food & Nutrition services, Transitional Care Coordination, General Non-Medical Case Management, Harm Reduction, Mental Health and Supportive Counseling.
- The Research & Evaluation Unit of the Care and Treatment Program has been engaged in an analysis of mortality among HIV-positive New York Part A clients.
- Care and treatment priorities for 2017 were presented at TA provider meetings, including the Part A funding landscape, Consumer Engagement, National CLAS standards, HIV Status Neutral Prevention and Treatment Cycle, reductions & measures, HIV/HCV co-infection and HIV-related mortality.

There was no public comment. The meeting was adjourned at 5PM.