



Meeting of the

## **FINANCE COMMITTEE**

Friday, March 11, 2011, 3:30-5:30PM  
40 Worth Street, room 1502B

### **MINUTES**

**Members Present:** Steve Hemraj (Chair), Kim Atkins, Marya Gilborn, Matthew Lesieur, Jan Carl Park  
**Staff Present:** *NYCDOHMH:* JoAnn Hilger, David Klotz, Mary Irvine, Rosanna Volpe; *Public Health Solutions/HIVCS:* Gucci Kaloo, Peter Chea

---

#### **I. Welcome/Introductions**

Mr. Hemraj opened the meeting, followed by introductions. The minutes of the January 19, 2011 meeting were approved with no changes.

#### **II. FY 2010 Third Quarter Report**

Mr. Chea presented the FY 2010 third quarter MAI and base reports. 100% of both grants were committed. In MAI, \$511,596 in ADAP was reported as unspent, but was spent in December and the category will be reported as 100% in the close-out report. In FY 2011, ADAP will only be fully funded through the base grant. While MAI Medical Case Management (MCM) programs are spending at a lower rate than the other programs, the spending rate of the overall MAI grant is on target.

In the base portfolio, Mr. Chea reviewed the reductions in categories, mostly from one-time take-downs, as well as some contract terminations (in MCM, Mental Health, and Outpatient Medical Care). The committee discussed challenges in client enrolment for the MCM programs, resulting in the fairly significant under-spending, most of which has been re-allocated as per the Council's reprogramming plan. MCM contracts have been adjusted for FY 2011 (a process that usually happens after three years, rather than one). Unlike other performance-based categories, MCM has a more complex fee structure combining fee-for-service and milestone-base reimbursement for this year, with some deliverables structured so that programs can cover costs.

The report showed significant under-spending in the Quality Management program, but the State typically spends this down in the final quarter and all of the allocation is expected to be spent. Overall, at 30% under-spending as of November 30, 2010, the base portfolio is close to expected targets.

#### **III. Ryan White Part A-Supported Research & Evaluation Activities**

Dr. Irvine gave an overview of research and evaluation activities funding out of the 10% administration portion of the Part A grant. This does not include the many activities that Public Health Solutions engages in:

- Annual Comprehensive Strategic Plan Analyses - DOHMH compares Ryan White client data with other data sources, to assess how clients enrolled in Ryan White services compare to other samples of individuals living with HIV in NYC.
- Needs Assessment for the EMA – a collaboration with the needs assessment committee to fulfill the HRSA requirement that EMAs conduct a comprehensive needs assessment.
- CHAIN Study – the long-running longitudinal cohort study addressing the needs, service utilization patterns and health outcomes of PLWHAs in New York City and Tri-County.
- Return to Care Survey – a survey to capture service priorities and details about the health and medical needs of recently out-of-care PLWHAs.
- Care Coordination Process Evaluation – focus groups, chart reviews, and staff surveys to assess the challenges and strategies for implementation of the Care Coordination protocol.
- Economic Evaluation of Ryan White Services – a consultant to advise on the implementation of the economic evaluation (i.e., cost-effectiveness of services).
- Community Advisory Board Survey – a survey of CAB functioning and best practices, as requested by the Consumer Committee.
- eSHARE (Electronic System for HIV/AIDS Reporting & Evaluation) - a new, web-based system for reporting data on HIV clients and services, and for NYC Ryan White and HIV Prevention contracts.
- Data Collection Forms Development – forms created for use by funded Care Coordination programs to collect client data and to facilitate data entry into eSHARE.
- Data Security – security protocols were developed and refined for data transfers to and from DOHMH-funded HIV service providers.
- AIDS Institute Reporting System (AIRS) Ongoing Maintenance and Support
- NYCCIF Development and Implementation – a PHS (Data Link) application designed to extract client identifier and demographic information from AIRS.
- N2H (New to HARS) Collaborative CTHP-Prevention Project – designed to measure and reduce duplication in HIV testing.
- Other HIV Surveillance-Related, Outcomes or Evaluation Data Projects

#### **IV. Assessment of the Administrative Mechanism**

The Committee reviewed a draft checklist, modeled after one from the Houston EMA, summarizing the activities undertaken to assess the efficiency of the administrative mechanism. The Committee provided feedback, consolidating questions related to commitment and expenditure of funds. Questions included how to assess whether an RFP's scope of services reflects the Council's guidance before its release without giving an unfair advantage to some potential proposers. The Committee recommended obtaining guidance from HRSA on this issue.

#### **IV. Other Business**

The next meeting, including the FY 2010 close-out report, will be held in late June.

There being no further business, the meeting was adjourned.