



Draft Meeting Minutes
Needs Assessment Committee

May 6, 2005
9:30 AM–11:30 PM
APICHA (150 Lafayette Street, 6th Floor)

Meeting Attendees: Eli Camhi LMSW (Co-Chair), Angela Aidala Ph.D, Alison Chi (alt. for Peter Jensen), Mary Ann Chiasson DrPH, Susan Forlenza MD MPH, Christine Campbell, Myron Gold, JoAnn Hilger, Howard B. Marcus PhD, Melissa Shurkin, Gregg Weinberg, Mindy Nass (alt. For Rob Gass)

Members Not Present: Susan Abramowitz PhD, Ryan Chavez, Ken Butler, Janet Goldberg, Joel Hernandez, Ruth Finkelstein ScD, Ann-Gel Palermo, Eric Altman, Julie Lehane

DOHMH/MHRA Staff: Grace Moon; Robert Shiau; Pedro Marti

I. Welcome/Introductions/Review of Minutes

Eli Camhi opened the meeting and introductions were made. Robert Shiau reviewed the contents of the meeting packet.

Meeting minutes were reviewed and approved.

II. Summary of ADAP Presentation

Rob Shiau summarized the ADAP presentation. Christine Rivera, Deputy Program Director, HIV Uninsured Program, was invited back to present on 1) NYC- and Tri-County-specific program enrollment and utilization data; 2) Trends in OI Medications for people using combination antiretroviral therapy and those who are not; and 3) An analysis of HIV/AIDS case reporting and new program enrollments.

Rob Shiau stated that Ms. Rivera found that there were small differences in trends of enrollment and the utilization between NYC and NYS data and the on the comparison of Medicaid and ADAP enrollment by NYC neighborhoods was presented.

Myron Gold stated that he is concerned about the impact to ADAP of the new prescription coverage under Medicare Part D, particularly for Medicaid/Medicare dual-eligible clients.

Eli Camhi suggested that we ask Ms. Rivera for any data on service needs and gaps for the ADAP program. For example, what proportion of ADAP users are marginally eligible for Medicaid and what proportion are never eligible for Medicaid. He suggested that we should look for evidence of increased utilization of ADAP. JoAnn Hilger stated that the program is a very expensive program covering expensive drugs and recommended that in addition to looking at the utilization data, program expenditure might also be examined.

III. Reprogramming

The committee reviewed the proposed FY 05 reprogramming initiatives developed by the IOC, ATC, MIC and the Consumer Committee. The following initiative and revision were proposed by the NAC:

One-time initiatives

- Enhancements to provide additional Rapid Testing or Start Rapid Testing Services.
 - The committee recommended that the description of the initiative be expanded to include pre- and post-counseling.

Ongoing initiatives

- CHAIN (\$25,000)
 - Mary Ann Chaisson stated that in FY 04, CHAIN received \$25,000 for its field work to . She stated that the funding was to be an ongoing support. CHAIN will submit a written justification for the request to the PS&RA committee.

The Needs Assessment Committee had an extensive discussion about proposing a new ongoing reprogramming initiative to enhance existing programs to provide patient navigation services to assist newly diagnosed individuals get into care. Gregg Weinberg suggested that perhaps this should be a newly required service element of all Title I-funded programs and should be incorporated starting in Year 2006.

JoAnn Hilger clarified to the committee that the Primary Care Status Measures Reporting project will be implemented throughout the Title I portfolio over the next two years. Depending on the provider, data required to collect will differ (ex: Legal service providers will be required to ask whether their clients had a primary care visit within the last 6 months, while Treatment Adherence providers will be asked whether clients had a primary care visit within the last 6 months, whether their clients receive ARV therapy and the date and results of their clients recent VL and CD4 tests). Gregg Weinberg stated that the purpose of the project is to ensure that Title I-funded providers are collecting information necessary to assess whether clients are in care and stay in care (receiving CD4 counts, VL and whether or not client is receiving ARV therapy), not to assess the effectiveness of the services in improving health outcomes.

IV. Data Day 2: Determining Service Needs

The committee reviewed a draft of Susan Forlenza's presentation on unmet need and provided input. Ms. Forlenza will make the changes suggested by the committee.

Angela Aidala from CHAIN explained that she will provide supplementary information on those who delay entry to care.

Gregg Weinberg from MHRA stated that, with other competing time-sensitive projects, he is not sure whether he can present at Data Day but will try to present on the Mapping Collaborative Project.

Eli Camhi explained to the committee that Ira Feldman from NYSDOH is scheduled to present on the unmet need population using the Medicaid database system and to present on services covered by Medicaid.

V. Announcements

Grace Moon announced that the 2005–2008 Comprehensive Strategic Plan will be available for review in mid-May and asked the committee to review and provide their input.

The meeting was adjourned.