



Committee Meeting Agenda: Part A Executive Committee

Date/Time: THURSDAY, July 18, 2013, 12:30 P.M. **Location:** BRHPC

Chair: KURYLA, S. **Vice-Chair:** GAMMELL, B.

1. **CALL TO ORDER:** Welcome, Review meeting ground rules, Statement of Sunshine, Introductions, Moment of Silence, Public Comment
2. **APPROVALS:** 7-18-13 Executive Committee Agenda and 6-18-13 Meeting Minutes.
3. **STANDARD COMMITTEE ITEMS**
 - a) Approve 7-25-13 HIVPC Agenda
4. **UNFINISHED BUSINESS**
5. **MEETING ACTIVITIES / NEW BUSINESS**
6. **GRANTEE REPORTS**
7. **PUBLIC COMMENT**
8. **AGENDA ITEMS / TASKS FOR NEXT MEETING, 12:30 p.m. August 15, 2013**

<i>Agenda Items / Tasks for next Meeting (Work Plan Item #)</i>	<i>Party to Complete Task</i>	<i>Information requested (i.e. data, research, etc.)action to be taken, presentation, discussion, brainstorm etc.</i>
Nominating Committee (WP Item 2.4)	Exec	Appoint the Nominating Committee Chair to prepare for upcoming elections
EIIHA Strategy (WP Item 3.5)	Exec, Staff	Review and revise the Early Identification of Individuals with HIV/AIDS (EIIHA) Strategy in relation to HIV Planning Council activities
Mentoring Plan	MCDC	Review the Mentoring Plan proposed by Membership/Council Development Committee
Reallocations (WP Item 5.8)	PSRA, Exec	Review FY13/14 recommended reallocations

9. **ANNOUNCEMENTS**
10. **ADJOURNMENT**

VISION: To ensure the delivery of high quality comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care

MISSION: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care
Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments
Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



MEETING MINUTES

COMMITTEE: Part A Executive Committee

Date/Time: Tuesday, June 18, 2013, 9:30 a.m.

Location: BRHPC

KURYLA, S. **Part A Chair**

GAMMELL, B. **Part A Vice Chair**

Attendance					
#	Members	Present	Absent	Guests	
1	Kuryla, S. Chair	X		Awada, M.	Downie, G.
2	Gammell, B. Vice Chair	X		Sabatino, D.	Hodge, F.
3	Taylor-Bennett, C.	X		Wynn, J.	McCarthy, J.
4	Creary, K.	X		Farrow, J.	
5	Roberson, C.		E	Grantee Staff	
6	Katz, H. B.	X		Copa, R.	Jones, L.
7	Grant, C.	X		DeGraffenreidt, S.	
Quorum = 5		6		HIVPC Support Staff	
<i>Spencer, W. (ex officio)*</i>		X		Crawford, T.	Eshel, A.
				Rosiere, M.	Solomon, R.
				LaMendola, B. (*Phone)	

1. CALL TO ORDER:

The Chair called the meeting to order at 9:40 a.m.

The Chair welcomed all present. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed.

Chairs, committee members, guests, grantee staff and support staff self-introductions were made. A moment of silence was observed.

2. APPROVALS:

Motion #1	To approve today's meeting agenda
Proposed by:	Katz, H.B.
Seconded by:	Grant, C.
Action:	Passed Unanimously

Motion #2	To approve meeting minutes of 5/16/13
Proposed by:	Katz, H.B.
Seconded by:	Grant, C.
Action:	Passed Unanimously

3. STANDARD COMMITTEE ITEMS

a. Committee Chair Reports – Activities and Progress on Work Plans

The Chairs reported on their work plan progress as shown in their meeting summary report on the HIV Health Services Planning Council (HIVPC) Agenda; all summaries stand as written. It was noted that Vice Chair Brad Gammell joined Quality Management Committee (QMC). The Vice Chair discussed Committee work plans and upcoming activities for the Priority Setting and Resource Allocation (PSRA) Committee. It was suggested to have the Chair of PSRA review the

Part A Executive– Minutes – 6/18/13

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scorecards with HIVPC members before the Council approves service category rankings and revised Language on How Best to Meet the Need. Members were informed that the scorecards are different this year as they include information on the Affordable Care Act (ACA) and its potential impact on Ryan White Services.

Joint Planning Committee will be discussing next year's Needs Assessment and client survey, and collaborating with Prevention, Part B and the state.

b. Approve 6-27-13 HIVPC Agenda

Motion #3	To approve 6/27/13 HIVPC agenda
Proposed by:	Creary, K.
Seconded by:	Taylor-Bennett, C.
Amendment	To add scorecard training by PSRA Chair before discussion items, and to move Language on How Best to Meet the Need from a consent item to discussion item #2
Action:	Passed Unanimously

c. Review July 2013 HIVPC Calendar

The Committee reviewed the July 2013 HIVPC Calendar. Members were notified that South Florida AIDS Network (SFAN) has been moved a week later to July 12, 2013. The Membership/Council Development Committee (MCDC) Chair wants to reschedule the next meeting to July 11, 2013 at 9 a.m. The ad-Hoc By-Laws Chair requested to schedule the next meeting for July 18, 2013 at 11 a.m. Staff will revise the calendar.

4. UNFINISHED BUSINESS

None.

5. MEETING ACTIVITIES / NEW BUSINESS

<i>Goal/Work Plan Objective #:</i>	<i>Accomplishments</i>
Comprehensive Plan (WP Item 1.1)	Members discussed the Planning Council's progress toward accomplishing the goals of the Comprehensive Plan and the National HIV/AIDS Strategy through the use of Committee work plans. The Committee reviewed a handout showing Viral Load Stratification covering Part A clients in FY 2012-13. The Vice Chair noted we achieved the benchmark of attaining viral loads for approximately 80% of Part A clients. Members were reminded that the data is only the first step toward establishing a community viral load, with the goal of getting more HIV clients to be undetectable as a way to reduce the number of new infections. There was discussion on the potential challenges of determining the percentage of clients receiving medical care without documented viral loads and identifying private providers to compare data using a match with AIDS Drug Assistance Program (ADAP) to determine viral load. The Grantee reported working on an agreement with ADAP to share information from the state Enhanced HIV/AIDS Reporting System (eHARS) to assist the state in developing a community viral load. It was noted that client information in eHARS does not include information on all HIV-positive individuals despite the fact that providers are required to report to eHARS; some physicians do not report to that system. The Broward Health Department has been doing outreach to private physicians to explain the intent of the law and the potential benefits of having the data – in hope of encouraging increased viral load

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	reporting. In response to a member's concern about the high number of African American women ages 40-49 testing positive, staff explained that the FY 12/13 scorecards will include viral load information by demographic groups so viral load can be considered during the PSRA Process. Members asked Staff to research a breakdown by race of Non-Hispanic males in the Viral Load Stratification and include the data in the respective racial category.
Affordable Care Act	The Committee discussed the impact of Affordable Care Act (ACA) on the Ryan White program and HIV clients, and the ad Hoc Committee formerly known as Pre-Existing Condition Insurance Plan (PCIP) Subcommittee. Members were informed that the Joint Executive Committee plans to collaborate with Part B/SFAN to pick up the unfinished business from PCIP. Members identified items for the Joint Executive agenda: 1) Develop a timeline for implementation including the process and a completion date; 2) Overview of what has been done (e.g. federal census data for those with incomes at 100%-400% of the federal poverty level; the consortia pursuing federal navigator grants to educate the public on ACA health insurance; contact information for desirable providers, and navigator plans in Florida); 3) Costs and covered services of existing HIV specialty health plans in order to determine gaps that Ryan White could cover with wrap around services; 4) AIDS Insurance Continuation Program (AICP) data to determine wrap around services, and 5) Developing an educational/training session for clients. Staff was asked to add to scorecards the data on clients at 100-400% of poverty level. The SFAN Chair noted that SFAN has begun doing research on ACA impacts. The ACA-navigator grants are expected to be announced about August 15, 2013. Health plans offering coverage through insurance exchanges will release plan details in September. Enrollment in ACA plans starts October 1, 2013. Things will happen fast and Broward needs to be ready. SFAN is having a public forum on July 18, 2013 at a Holy Cross Hospital facility, featuring the state director of ADAP to explain the program's plans for the future. SFAN is creating flyers and concept documents to help clients navigate ADAP. The forum is open to the community. Staff will send the information electronically. Part B is working on transportation to and from the forum. Members suggested educating Medicaid clients to enroll in HIV-specific health plans that cater to their needs. There was discussion on how to educate clients transitioning between Part A and Medicaid. Part A Grantees are discussing the need to gather plan comparison information to help clients. The SFAN Chair noted that Florida CHAIN and other advocates are devising recommendations for best HIV plans. Joint Client/Community Relations (JCCR) Committee will be asked to join the next Executive Committee to give consumer input on how to spread the word. The JCCR Chair suggested ACA could be covered during JCCR community outreach meetings later in the year. The Grantee noted that as part of service category allocations, Priorities will have to consider how the ACA will scatter clients to more coverage alternatives.

6. GRANTEE REPORTS

a) Part A

Grantee staff presented the Broward "Crosswalk" plan at the Urban Coalition for HIV/AIDS Prevention Services, where it was praised as a best practice.

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A grant award for FY13-14 is expected by the end of the month.

A forum for consumers is planned for 9 a.m. to 11 a.m. at the Grantee office in the Broward County Annex building, room A-337 on June 20, 2013. There is enough room for approximately 40 people. Broward County's Health Resources and Services Administration (HRSA) Project Officer will be present to listen to consumers' thoughts. Consumers were encouraged to attend.

The HRSA Project Officer, Frances Hodge, also introduced herself and two other individuals: Jim McCarthy (Administrative Consultant), and Juanita Farrow (Fiscal Consultant). The Project Officer is currently responsible for the following areas: Broward, Palm Beach County, Miami-Dade County, the Orlando, and Norfolk, Virginia. She noted that her obligation is to interpret legislation and work closely with the grantee; they communicate regularly and have established a good rapport. However, she also ensures that the Planning Council runs smoothly.

Members asked the Project Officer questions relating to the Affordable Care Act. It was noted by a member that the ACA is a huge change and we need to be sensitive to the fact that all eligible clients will try and transition. It was mentioned that the EMA should continue to be vigilant to educate clients and continue planning for ACA unknowns such as how many Ryan White clients may shift to private plans in the ACA insurance exchanges. There was some clarification on the role of ACA peer navigators. The Project Officer negated the notion that peer navigators were able to help clients choose specific insurance plans; rather, navigators are to assist clients with literacy levels and understanding plans. The SFAN Chair mentioned that the Florida HIV/AIDS Advocacy Network will be disseminating information regarding ACA.

Members noted that there are certain barriers for clients such as renewing eligibility every six months for various Ryan White Parts. It was questioned whether there is a way for Parts to further coordinate. The Project Officer stated that HRSA is collaborating better with other parts. There was discussion on the Planning Council's inability to sometime receive clear direction to issues they would like to address. Members were reminded that it is important that the Council, the Grantee, and the Project Officer continue to work aligned. The By-Laws Chair mentioned the importance of working together, but reminded the Council that it makes its decisions within the guidelines of By-Laws and the Administrative Code.

Following the discussion, the HIVPC Chair praised the Project Officer for attending and putting forth the effort to meet with the Members.

b) PUBLIC COMMENT

None

c) AGENDA ITEMS / TASKS FOR NEXT MEETING: Date: July 18, 2013 Venue: BRHPC

<i>Agenda Items / Tasks for next Meeting (Work Plan Item #)</i>	<i>Party to Complete Task</i>	<i>Information requested (i.e. data, research, etc.)action to be taken, presentation, discussion, brainstorm etc.</i>
FY 14/15 Allocations	Exec, PSRA	Recommend funding allocations for FY14/15 Part A and MAI by service category
FY13/14 Client Survey (WP Item 5.4)	Exec, JPC, Staff	Review plans for the FY13/14 Client Survey to prepare for next year's Priority Setting and Resource Allocation process

Part A Executive– Minutes – 6/18/13

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Members noted that the July meeting of Joint Executive Committee will be busy, and discussed reducing the workload at the Part A Executive Committee. Some items such as the HIVPC Agenda and the August calendar should be addressed initially. If there are any changes to the agenda, the work plan will be revised accordingly.

d) ANNOUNCEMENTS

The HRSA Project Officer asked members to share with consumers that the scheduled consumer forum is for consumers only. The Grantee will not participate in the forum unless invited; forum designed to give consumers a chance to talk with the Project Officer privately if desired.

e) ADJOURNMENT

Without objection the meeting was adjourned at 11:26 a.m.

Part A Executive Attendance CY: 2013

Member	1/10/13	2/21/13	3/21/13	4/18/13	5/16/13	6/18/13
Kuryla, S., (Chair)	1	1	1	1	A	1
Gammell, B, (V. Chair)	1	1	1	1	1	1
Creary, K.	E	1	1	E	A	1
Taylor-Bennett, C.	1	1	1	1	1	1
Grant, C.	1	A	1	1	1	1
Roberson, C.	1	A	E	1	1	E
Katz, H. Bradley	1	1	1	1	1	1
Will Spencer (<i>ex officio</i>)	A	1	1	1	1	1
Quorum =5	Yes	Yes	Yes	Yes	Yes	Yes

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For Informational Purposes Only
(Will be Sent to HIVPC at the August Meeting)

MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE

Draft Mentoring Program

In order to increase new members' knowledge of the HIV Planning Council and retain attendance and membership - participation in Council meetings, ~~this the MCDC~~ Committee will institute ~~orientation mandatory orientation~~ - and training ~~and mentoring programs programs~~ - for new and incumbent members.

An important segment of this training ~~is will be designated as~~ the Mentoring Program, which will be offered to all new Council members and alternates. Mentoring helps new members feel welcome, learn individual member perspectives, and become comfortable with planning council processes and interaction. Mentoring also ensures that the new member understands the background and context of discussions and actions, and gets an explanation of the many acronyms used in meetings. The mentoring of a new member is expected to last between three to six months.

A letter introducing the Mentoring Program will be sent to new council members. ~~A welcome letter will be sent to the above new members and alternates with an attachment requesting the new members and alternates them to choose a committee they have an interest in attending. In addition, at the post-appointment orientation meeting~~ Council members who have volunteered their time to ~~this be Mentors program~~ will be assigned by the Chair of the Membership/Council Development Committee.

The new member and alternate should, when possible, sit near his/her Mentor during all meetings. (Non-voting alternates are reminded they may sit near their mentor, but not at the table.) This will allow the Mentor to easily answer any questions the new member might have.

Volunteer Mentors will receive training ~~annually~~ according to the schedule set forth in the Committee Work Plan. ~~The~~ Mentors s should strive to educate ~~the~~ new members s on the following points:

1. Review of Orientation Manual
2. Reminders of Meetings
3. Availability of Transportation
4. Day care reimbursement benefit
5. Reimbursement of lost wages
6. Explanation of complex language
7. Empowerment and respect for individual opinions and ideas.
8. A summary of Robert's Rules of Order

If needed and requested by the new member/alternate, the Mentor may also remind the new member of upcoming meetings which might be of interest to that person.

Note on the Florida Sunshine Law: Members and Mentors should be careful to follow the Sunshine Law, which forbids Members from discussing Council or Committee business outside of official meetings. The County definition is as follows:

"Except at a public meeting, there shall be no communication between any two members of the same collegial body on any matter which they may foreseeably be required to address jointly in an advisory or decision-making capacity."

Below are example situations prohibited by law for Members:

1. Discussing Council or Committee business on the phone;
2. Discussing Council or Committee business at a gathering that is not an official meeting;

3. Discussing Council or Committee business indirectly, such as by passing information through an intermediary;
4. Meeting at a restaurant or someone's home to discuss Council or committee business;