



Committee Meeting Agenda: Part A Executive Committee

Date/Time: THURSDAY, September 19, 2013, 12:30 P.M. **Location:** BRHPC

Chair: KURLA, 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:** 9-19-13 Executive Committee Agenda and 8-15-13 Meeting Minutes.
3. **STANDARD COMMITTEE ITEMS**
 - a) Committee Chair Reports – Activities and Progress on Work Plans
 - b) Discuss Healthcare Reform Update on HIVPC Agenda
 - c) Approve 9-26-13 HIVPC Agenda
 - d) Review October 2013 HIVPC Calendar
4. **UNFINISHED BUSINESS**
5. **MEETING ACTIVITIES / NEW BUSINESS**

Goal / Work Plan Objective #:	Accomplishments
Reallocations (WP Item 5.8)	Review FY13/14 recommended reallocations

6. **GRANTEE REPORTS**
7. **PUBLIC COMMENT**
8. **AGENDA ITEMS / TASKS FOR NEXT MEETING, 2:00 p.m. October 17, 2013**

Agenda Items / Tasks for next Meeting (Work Plan Item #)	Party to Complete Task	Information requested (i.e. data, research, etc.)action to be taken, presentation, discussion, brainstorm etc.
Educational Sessions (WP Item 3.5)	JCCR	Assess JCCR community educational sessions

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: Thursday, August 15, 2013, 12:30 p.m. **Location:** BRHPC
KURYLA, S. Part A Chair GAMMELL, B. Part A Vice Chair

Attendance					
#	Members	Present	Absent	Guests	
1	Kuryla, S. Chair (Part A Chair)	X			
2	Gammell, B. Vice Chair (Part A Vice Chair)	X			
3	Taylor-Bennett, C.	X		Part A Grantee	
4	Creary, K.	X		Degraffenreidt, S.	
5	Katz, H. B.	X		Jones, L.	
6	Grant, C.	X			
Quorum = 4		6	0	HIVPC Support Staff	
<i>Spencer, W. (ex officio)</i>		X		Crawford, T.	Eshel, A.
				McEachrane, T.	

1. CALL TO ORDER:

The Chair called the meeting to order at 12:42 p.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:	Spencer, W.	Seconded by:	Taylor-Bennett, C.
Action:	Passed Unanimously		
Motion #2	To approve meeting minutes of 7/18/13		
Proposed by:	Katz, H.B.	Seconded by:	Creary, K.
Action:	Passed Unanimously		

3. STANDARD COMMITTEE ITEMS

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

The JCCR Part A Co-Chair confirmed the African American Library as the chosen location for the Resource Fair on September 24th from 5-8 pm. The presentation topic at the Fair will pertain to the implementation of the Affordable Care Act (ACA). The Grantee stated that it is a provider fair with the ACA presentation as a component; the presenter has not yet been identified. Grantee stated that the recipients for the Navigator grant were announced. The navigators will address public concerns regarding the ACA, Marketplace insurance plans and other logistics. Florida has not expanded Medicaid, but the Marketplace will provide an opportunity for many to purchase private insurance and possibly receive government subsidies if they are between 100-400% FPL. Marketplace insurance plans will begin enrollment on October 1st. The Health Resources and Services Administration (HRSA) is asking Ryan White (RW) grantees to educate clients and perform cost-benefit analysis to determine if a client should enroll in the Exchange. The Grantee reminded members that government subsidies may not cover 100% of out-of-pocket costs for private insurance. In the last month of FY 14-15, the Council voted to allocate



funds to cover health insurance premiums and deductibles. ADAP will continue providing coverage dependent on eligibility.

Members discussed Council commitment to community education. One member expressed concern about clients losing insurance benefits and a lack of community education on the ACA changes. Other members were concerned about Council members providing the public accurate information in lieu of the impending ACA roll-out. Conducting a seminar may not reach enough people. Council members hope that more information about the ACA changes will be provided by the government in November. SFAN will be hosting a discussion on the ACA in November to provide the public with definitive information. Members expressed that it is important that PLWHA are informed about the insurance plans they should enroll in to fit their individual needs. One member reiterated the importance of reaching out to clients who qualify for Marketplace plans and whose income is between 100%-400%FPL.

Members held a discussion about how the Council is marketing for the Resource Fair. The Grantee reminded members that the Fair is targeted for PLWHA. Navigator programs in each state will provide education to the greater public. Information given by Navigators will be general, not specific to PLWHA. There was a discussion about ways to educate the community about ACA information specific to PLWHA. The Part A Chair suggested that support staff develop informational items pertaining to the ACA as handouts for the Fair. Logistics pertaining to members working the Fair were discussed.

The By-Laws Chair announced that committee may schedule 2-3 meetings to discuss violations and revisions of the new work plan item concerning Grievance Policy and Procedures.

The MCDC Chair stated that the work plan should be decided by the committee members. There was concern about the approval procedures regarding work plan items. Members were reminded there is a 6 month process that involves Executive, Grantee, and committee approval. All work plans were previously reviewed and approved by the Chairs of their respective committee. There was a discussion concerning committee reports to Planning Council and the ability of committee chairs requesting items to be moved forward or pushed back on committee work plans. The Part A Vice Chair recommended that chairs look over work plans and recommend changes to Executive accordingly.

It was noted that certain committees could not provide updates to Executive for August because their meetings did not yet occur.

b) Approve 8-22-13 HIVPC Agenda

Members discussed the necessity of a healthcare reform update to the Planning Council each month. The Chair suggested that ACA information should be inserted into Planning Council minutes as opposed to creating a Special Report. One member recommended that Executive include a short update each month. The Grantee stated that report should discuss any recent changes or roll-outs over the month. Committee members were encouraged to be knowledgeable about ACA and RW clients. The Part A Chair recommended that the update include a document with resource links for HIVPC members.

Members further discussed seeking someone knowledgeable about the community to discuss ACA changes. Grantee reminded members that HRSA is also unclear about the ACA roll-out and specific elements.

Members decided that the Healthcare Reform update will be a standing item on the Executive agenda; the Executive Committee will then decide whether it should appear on the HIVPC agenda for the current month.

Grantee staff stated that an ACA informational article will be part of the next newsletter as an additional action to inform the community.



c) Review September 2013 HIVPC Calendar

Motion #3	To approve the 8/22/13 HIVPC agenda		
Proposed by:	Gammel, B.	Seconded by:	Katz, H.B.
Amendment	To include an additional item addressing updates on the Health Reform as determined by the Executive Committee		
Action:	Passed Unanimously		

Motion #4	To approve September 2013 HIVPC Calendar		
Proposed by:	Gammel, B.	Seconded by:	Taylor-Bennet, C.
Action:	Passed Unanimously		

The Committee approved the following cancellations by consensus: Priority Setting and Resource Allocation Committee (PSRA) on 8/21/13; HIV Planning Council (HIVPC) on 8/22/13; Membership/Council Development Committee (MCDC) on 9/12/13; and Joint Planning on 9/9/13.

The PSRA and HIVPC meetings were cancelled in August because there were not many items that needed to be accomplished. The Joint Planning and MCDC Committee meetings were cancelled in September to allow for more time to focus on preparing the FY 2014 Part A Grant Application.

A By-Laws Committee meeting will be held on September 19th at 11:00 AM prior to the Part A Executive Committee meeting.

4. UNFINISHED BUSINESS: None

5. MEETING ACTIVITIES / NEW BUSINESS

<i>Goal / Work Plan Objective #:</i>	<i>Accomplishments</i>
Nominating Committee (WP Item 2.4)	In order to prepare for upcoming elections, the Chair announced the appointment of Will Spencer as the Nominating Committee Chair. It was noted that the Nominating Committee should consist of at least 5 members and be reflective of the epidemic in Broward County. An email will be sent to members requesting their participation on the Committee.
EIIHA Strategy (WP Item 5.5)	Members were informed that the grant was released on August 12 th and due on October 9 th . The EIIHA section is still worth the same amount as last year (33 points) and the Committee will receive an update on the differences in that section at a later date.
Mentoring Plan (WP Item 2.1)	Members reviewed and discussed the draft mentoring plan completed by MCDC. The time frame for the program (3-6 months) was mentioned and the MCDC chair stated that MCDC is still actively recruiting mentors. One member suggested standardizing the criteria for mentors. The MCDC Chair stated that there is an annual training for mentors to ensure everyone is on the same page. MCDC agreed upon providing the mentors with discretion on whether their mentee needs to complete the full program. Members noted the importance of mentors remaining objective in their evaluation of mentees to ensure that they receive the appropriate amount of training necessary to function successfully as a Planning Council member. Members discussed the issue of making the program mandatory due to the inability to establish the following: 1) specified criteria/qualification for mentors (e.g. educational level of the HIVPC process) 2) standardized



	training for mentors 3) core competencies of the mentoring program (e.g. topics the mentoring program will cover) 4) mentor job description. Members also questioned how the program would be fair in cases where some mentors are forcing individuals to complete the program for the maximum amount of time when it is not necessary. The Grantee recommended creating a job description for mentors. Core competencies would be met by each mentor. One member recommended that the immediate past Council chair facilitate the Mentoring Program. Members also raised the question of whether mentoring only applied to HIVPC members, excluding committee members. The Chair stated that it is the responsibility of committee chairs to educate their members. It was also suggested that mentors be educated regarding the Sunshine Law to prevent violation. Following the discussion, the MCDC chair pulled the mentoring plan from the HIVPC agenda in order to send it back to the committee for revision. <table><tr><td>Motion #5</td><td colspan="3">To approve the Mentoring Plan Draft</td></tr><tr><td>Proposed by:</td><td>Creary, K.</td><td>Seconded by:</td><td>Katz, H.B.</td></tr><tr><td>Action:</td><td colspan="3">Withdrawn</td></tr></table> <table><tr><td>Motion #6</td><td colspan="3">To rescind the Mentoring Plan Draft from HIVPC agenda</td></tr><tr><td>Proposed by:</td><td>Creary, K.</td><td>Seconded by:</td><td>Grant, C.</td></tr><tr><td>Action:</td><td colspan="3">Passed Unanimously</td></tr></table>	Motion #5	To approve the Mentoring Plan Draft			Proposed by:	Creary, K.	Seconded by:	Katz, H.B.	Action:	Withdrawn			Motion #6	To rescind the Mentoring Plan Draft from HIVPC agenda			Proposed by:	Creary, K.	Seconded by:	Grant, C.	Action:	Passed Unanimously		
Motion #5	To approve the Mentoring Plan Draft																								
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Motion #6	To rescind the Mentoring Plan Draft from HIVPC agenda																								
Proposed by:	Creary, K.	Seconded by:	Grant, C.																						
Action:	Passed Unanimously																								

6. GRANTEE REPORTS:

Part A

The Part A Grant application was released this week. 2014 RFPs are expected to be released at the end of September or early November. ACA provider education will take place at a mandatory case management training that will include Prevention employees, HOPWA case managers and Part C employees on August 20th and 29th at Plantation Heritage Park. The training includes a panel of grantees from all Ryan White Parts, including HOPWA. Interested persons should RSVP with Staff before attending.

7. PUBLIC COMMENT: None

8. AGENDA ITEMS / TASKS FOR NEXT MEETING: **Date:** September 19, 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>
Reallocations (WP Item 5.8)	PSRA	Review FY13/14 recommended reallocations

9. ANNOUNCEMENTS:

There was a moment of silence for the Carl Roberson who passed away earlier in the week. One member made a personal statement about Carl Roberson. Information regarding funeral arrangements were announced. Members were encouraged to share their sentiments with the Roberson family.



10. ADJOURNMENT

Without objection the meeting was adjourned at 2:11 p.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	7/18/13	8/15/13
Kuryla, S., (<i>Chair</i>)	1	1	1	1	A	1	1	1
Gammell, B, (<i>V. Chair</i>)	1	1	1	1	1	1	1	1
Creary, K.	E	1	1	E	A	1	E	1
Taylor-Bennett, C.	1	1	1	1	1	1	1	1
Grant, C.	1	A	1	1	1	1	1	1
Katz, H. Bradley	1	1	1	1	1	1	1	1
Will Spencer (<i>ex officio</i>)	A	1	1	1	1	1	A	1
Quorum =4	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

**Ft. Lauderdale/Broward EMA
Ryan White Part A and MAI
FY 13-14 1st Reallocation**

Service Category	Contracted or Allotted Amount	Expended Amount	Average Monthly Expenditures	FY 13-14 Projected Expenditures	Potential Reallocation Dollars	Providers' Request	Providers' Return	Grantee Recommended Sweep Amount	Recommended Sweep	
									To	From
Ambulatory (5)	\$5,706,496	\$2,798,738	\$485,255	\$5,823,058	(\$116,562)	\$998,500	\$0	\$304,603	\$304,603	\$0
MAI Ambulatory (1)	\$100,000	\$99,942	\$24,985	\$99,942	\$58	\$0	\$0	\$80,000	\$80,000	\$0
Pharmaceuticals (3)	\$509,576	\$323,097	\$55,835	\$670,018	(\$160,442)	\$150,000	(\$59,000)	\$91,000	\$150,000	(\$59,000)
Dental (2)	\$2,623,653	\$1,020,978	\$170,163	\$2,041,956	\$581,697	\$0	(\$200,000)	(\$200,000)	\$0	(\$200,000)
Case Management (7)	\$1,147,448	\$547,602	\$91,795	\$1,101,539	\$45,909	\$24,595	\$0	\$9,595	\$24,595	(\$15,000)
MAI Case Management (2)	\$176,644	\$25,474	\$25,235	\$176,883	(\$239)	\$0	\$0	(\$45,000)	\$0	(\$45,000)
Mental Health (3)	\$336,987	\$195,352	\$32,559	\$390,704	(\$53,717)	\$18,100	\$0	\$18,100	\$18,100	\$0
MAI Mental Health (2)	\$128,418	\$39,032	\$6,505	\$78,064	\$50,354	\$0	\$0	(\$35,000)	\$0	(\$35,000)
Substance Abuse (2)	\$342,889	\$131,957	\$21,993	\$263,914	\$78,975	\$0	(\$8,947)	(\$8,947)	\$0	(\$8,947)
MAI Substance Abuse (1)	\$400,000	\$182,866	\$30,478	\$365,732	\$34,268	\$0	\$0	\$0	\$0	\$0
Food Bank (1)	\$265,454	\$33,278	\$5,546	\$66,556	\$198,898	\$0	\$0	(\$164,351)	\$0	(\$164,351)
Food Voucher (1)	\$87,787	\$10,199	\$1,700	\$20,399	\$67,388	\$0	\$0	(\$30,000)	\$0	(\$30,000)
Centralized Intake and Referral (1)	\$467,513	\$198,699	\$33,116	\$397,397	\$70,116	\$0	\$0	\$0	\$0	\$0
MAI Centralized Intake and Referral (1)	\$290,957	\$288,795	\$48,132	\$577,590	(\$286,633)	\$0	\$0	\$0	\$0	\$0
Outreach (1)	\$58,768	\$8,680	\$1,736	\$20,833	\$37,935	\$0	(\$20,000)	(\$20,000)	\$0	(\$20,000)
Legal Assistance (1)	\$131,426	\$61,108	\$10,185	\$122,216	\$9,211	\$0	\$0	\$0	\$0	\$0
Total Part A Funds	\$11,677,997	\$5,329,689	\$909,883	\$10,918,590	\$759,407	\$1,191,195	(\$287,947)	\$0	\$497,298	(\$497,298)
Total MAI Funds	\$1,096,019	\$636,108	\$135,336	\$1,298,211	(\$202,192)	\$0	\$0	\$0	\$80,000	(\$80,000)
Total Funds	\$12,774,016	\$5,965,797	\$1,045,218	\$12,216,801	\$557,215	\$1,191,195	(\$287,947)	\$0	\$577,298	(\$577,298)
APA Bulk Purchase	\$56,090	\$24,992	\$4,998	\$56,090						
Food Bank & Voucher Bulk Purchase	\$1,247,726	384,350	\$64,058	\$768,700						

Projections are based on reimbursement requests submitted by service providers for the months of March through August. These figures represent expenditures or reimbursements for services funded in FY 13-14.