

**Austin Area Comprehensive HIV Planning Council
Business Committee Meeting Minutes
December 15, 2015**

Charge: Ensures the orderly and integrated and progression of work of the committees of the Ryan White Planning Council. Plans future activities.

MEMBERS PRESENT

Chair, Dr. Victor Martinez	AACHPC Chair, Allocations Committee Chair
Justin Smith	AACHPC Vice-Chair, Needs Assessment Committee Chair
Justin Irving	AACHPC, Comprehensive Plan Committee Chair
Mark Erwin	AACHPC, Comprehensive Plan Committee
Aubrey Staples	AACHPC, Comprehensive Plan Committee
Leah P. Graham	AACHPC, Comprehensive Plan Committee
Jessica Pierce	AACHPC, Allocations Committee
Charlotte Simms	AACHPC, Allocations Committee
Glenn Crawford	AACHPC, Needs Assessment Committee

MEMBERS ABSENT

Debra Washington	AACHPC, Needs Assessment Committee
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AACHPC STAFF PRESENT

Crystal Flores, Program Manager
John Waller, Planner
Dwight Scales, Admin

ADMINISTRATIVE AGENT STAFF PRESENT

Brenda Mendiola	Quality Management Coordinator HIV Resources Administration Unit
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OTHERS PRESENT

- I. **Call to Order:** AACHPC Chair, Dr. Victor Martinez at 6:10 pm
- II. **Certification of Quorum:** Quorum was established and certified by Chair, Dr. Victor Martinez
- III. **Introductions/Announcements:** None
- IV. **Approval of August 25, 2015 Minutes:** The minutes were reviewed and approved as amended with edits.
- V. **Review of the Administrative Agent Report**
 - Part A:** Brenda Mendiola discussed the Planning Council ACA Directive Implementation Update:
 - HIA provider not able to implement until March 1, 2016. Eligible clients who have enrolled in Marketplace Insurance during the current open enrollment period can access HIA at that time, as well as clients who enrolled previously or who are eligible to enroll during the year due to a qualifying life event.
 - Capacity issues at HIA provider including a key staff vacancy in the current HIA program.
 - Texas DSHS didn't release their finalized Health Insurance Assistance (HIA) Policy until first week of November.

- HRAU wrote a draft HIA Policy that incorporates the DSHS HIA Policy, complies with the PC Directive, and specifies additions, exceptions and clarifications to the DSHS Policy. Policy sent to provider for feedback.
- Important to align with the DSHS Policy as much as possible because Part A HIA provider also has HIA funding from RW Part B and the HIV State Services grant.
- HRSA requires assessment to confirm that paying out-of-pocket insurance costs is more cost effective than paying directly for medical care.
The DSHS benchmark table, which is to be widely distributed and is an attachment to the HRAU HIA Policy, does not show benchmark for 250% of FPL. Yesterday we received confirmation from DSHS that paying out-of-pocket costs at 250% level would be cost effective.
- Need to be able to determine whether a medical out-of-pocket cost is actually HIV-related. Have to establish and document linkage to HIV care and health outcomes in order for grant funds to be used. This can be documented by healthcare professionals at the outpatient clinic; however, clerical or administrative HIA staff won't be qualified to decide when it's a "gray area". DSHS suggested using a waiver signed by the client's HIV primary care physician that would qualify a medical cost as HIV-related. This and other options to address a key issue require further exploration.

CATEGORY	Budgeted Amount	Expended Amount	Percent Expended
DIRECT SERVICES	\$3,816,291	\$2,426,404	64%
ADMINISTRATION (Including Planning Council Support)	\$448,975	\$ 253,971	57%
Quality Management	\$224,487	\$ 108,770	48%
TOTAL	\$4,489,753	\$2,789,145	62%

II. CLINICAL QUALITY MANAGEMENT ACTIVITIES

- Revised Standards of Care (SOC) scheduled for release prior to the start of Part A FY 2016, pending Planning Council's completion of the approval process for all funded service categories.
- TGA-wide Client Satisfaction Survey collection continues. Survey data will be entered into a database for analysis and production of data reports for use by the AA, Planning Council, and provider agencies.
- All-day Case Management training for all TGA medical and non-medical case managers, with emphasis on improving care plans, was delivered on December 4th and 9th. Other topics included preparing for client meetings, setting boundaries, and using acuity to manage caseloads.
- CQI Committee Meeting was held on December 10th. Topics included: service provider CQI updates, release of information process within David Powell Clinic, Client Satisfaction Surveys, Client Grievance reporting, RSRs and other data quality issues, revised Policy

Clarification Notice, Mental Health and Case Management trainings, data quality including RSRs, and training/technical assistance needs for 2016.

- Revising Client Eligibility Verification Policy Clarification Notice (PCN) and related forms in order to follow DSHS’s MAGI methods for determining household income
- Development of new Health Insurance Assistance Policy in response to Planning Council Guidance

VI. : Review of the Administrative Agent Report

Part B

Jessica Pierce discussed both expenditure reports for

November

I. Part B Grants Administration/Management Update

- Part A/B Collaboration

II. Part B Expenditure Summary Update

A. FY15 Part B Expenditure Summary

The FY15 Part B expenditure summary is shown in Table 1 below. Twenty-eight percent (28%) of the year has expired; however, fifteen (15%) of funds have been through October 2015.

**Table 1: Ryan White FY 15 Part B Billing Summary
October 2015**

CATEGORY	Budgeted Amount	Expended Amount	Percent Expended
Service Delivery	\$1,669,494.00	\$ 257,137.99	15.40%

III. Ryan White Part B Expenditure Summary Update (Austin Agencies Only)

Service Category	Allocation	Expended	UDC	UOS
Health Insurance	\$49,571	\$ 4,283.86 (9%)	7	9
Oral Health	\$69,303	\$13,927.95 (20%)	22	32
OAMC	\$435,765	\$98,952.61 (23%)	65	152
APA	\$67,624	\$13,837.10 (20%)	68	145

EFA	\$580	\$241.35 (42%)		
Transportation	\$3,200	\$0 (0%)	12	27
Mental Health	\$41,221	\$11,846.87 (29%)	2	6

IV. Client Complaints

- No complaints have been received.

Justification:

- Due to RW contracts being executed late, this report reflects the first two months of this contract year.
- This is our 7-month RW contract beginning September 1 through March 31. This is why our contractual target is higher than it normally is around this time of year.
- No funds were spent in Transportation under Part B contract.
- Health Insurance is below target due to agency spending other RW dollars
- EFA is above target due to doctor putting client on needed medications since returning to care, and ADAP is pending.
- The UDC and UOS for EFA had not been entered by agency when BVCOG Data Manager ran report.

December

I. Part B Grants Administration/Management Update

- Part A/B Collaboration
- FY17 RW Renewal

II. Austin HSDA FY17 RW Allocation

- \$1,126,837*
- \$91,166**

IV. Client Complaints

- No complaints have been received.

**Allocations have been sent to agencies per service category. Waiting to hear back for any changes by Wednesday, December 16. The service categories' allocations will be provided on the January report.*

***Health Insurance supplemental funds to be used from April 1, 2016 to September 29, 2016.*

VII.

➤ **Executive Committee:**

Vice-Chair, reminded Council of the need to be actively networking, recruiting and referring possible new members.

- New Committee assignments
- Comprehensive Plan Timeline.
- Possibly joining two committees together.

➤ **Comprehensive Planning Committee:**

The Committee Chair Justin Irving discussed the committee's approval of and recommended passage of:

- Substance Abuse Residential standards of care with edits: **4 to 0 Motion Carried**
- Outpatient/ Ambulatory Medical care standards of care with edits **4 to 0 motion Carried**

➤ **Needs Assessment Committee:** The Needs Assessment Chair Justin Smith discussed:

- Future roles and responsibilities of the committee in regards to working with Part B to collaborate
- Discussed plans for Comprehensive Needs Assessment.

➤ **Allocations Committee:**

Allocations Committee did not meet

VIII. **Letter Support of PREP**

Mark Erwin requested a letter from the Planning Council stating their support for PREP. AACHPC Chair, Victor Martinez, asked to draft five more letters to be drafted to County Judges. Justin Irving, AACHPC, Comprehensive Plan Committee Chair made a motion to empower the Chair to draft a letter to anyone appropriate to receive this letter, with any changes made to the content that reflect the change to the person that it is addressed. *Committee member, Glenn Crawford Seconded*

- **Planning Council voted 8 to 0 Motion Carried**

IX. Meeting Adjourned at 6:50pm

