	rea Comprehensive HIV Planning Council	
Bu	isiness Committee Meeting Minutes	
	October 25, 2016	
rge: Ensures the orderly and integra ming Council. Plans future activities	ted and progression of work of the committees of the Ryan Whit s.	
	MEMBERS PRESENT	
Dr. Victor Martinez		
Justin Smith		
Jessica Pierce		
Glenn Crawford		
Mark Erwin		
Aubrey Bragila		
Jason Freshly		
Nicole Evans		
	MEMBERS ABSENT	
Charlotte Simms		
L.J. Smith		
Jason Freshly		
	AACHPC STAFF PRESENT	
Crystal Flores, Program Manager	Laura Still, Planner Dwight Scales, Program Coordinator	
ADMIN	ISTRATIVE AGENT STAFF PRESENT	
Gregg Bolds	Manager HIV Resources Administration Unit	
Brenda Mendiola	Quality Management HIV Resources Administration Un	
	OTHERS PRESENT	
Azusena Arroyo		
Emma Sinnott		
Leah Graham		

I. <u>Call to Order:</u> AACHPC Vice-Chair, Justin Smith called the meeting to order at 6:10pm.

#### II. <u>Certification of Quorum</u>:

Quorum was established and certified by AACHPC Chair Dr. Victor Martinez.

- III. Introductions/Announcements: None at this time
- IV. Approval of October 25, 2016 Minutes: AACHPC Chair Dr. Victor Martinez motioned the minutes to be approved as submitted with edits.

#### V. Review of the Administrative Agent Report

Part A: Gregg Bolds, Administrative Agent Manager, informed the committee about the latest correspondence received from HRSA.

#### A. <u>Ryan White FY17 Part A Grant Application Status</u>

The Ryan White Part A Grant Application was completed and submitted to HRSA on October 17, 2016.

#### B. Integrated HIV Prevention and Care Plan Submission Next Steps

As a next step, CDC and HRSA will conduct a joint review of submitted Integrated HIV Prevention and Care Plans and will provide joint feedback to each jurisdiction, as appropriate to the type of plan submitted. Recipients can expect to receive feedback by <u>Spring 2017</u>. In the interim, please continue to work directly with your CDC and HRSA project officers should you have any questions and/or technical assistance needs pertaining to your submitted plan. As a reminder, updates to the Integrated HIV Prevention and Care Plan may be submitted on an annual basis through the progress report, if applicable.

## C. <u>Ryan White FY16 Part A Overall Expenditure Summary (March 2016 to February 2017)</u>

The FY16 Part A overall expenditure estimates are shown below. Fifty eight percent (58%) of the year has expired and approximately forty nine percent (<u>49%</u>) of funds have been billed through <u>September of 2016</u>. Table 1 below shows the overall expenditure summary. **Monthly <u>service category</u> expenditures are provided to the Allocation Committee.** 

#### **II: Clinical Quality Management Activities:**

Brenda Mendiola, Quality Management Coordinator, reviewed and discussed with the committee:

- CQI Performance Outcomes Review Subcommittee will hold its first meeting on November 10 to review outcome measures for each funded service category, and make recommendations that will align local outcome measures with current HRSA HIV/AIDS Bureau (HAB) performance measures.
- Mid-year outcome measures reports for each service category have been submitted by agencies.
- Standards of Care for Local Pharmacy Assistance Program (LPAP) and Emergency Financial Assistance (EFA) have not been finalized by DSHS.
- 2015-16 Client Satisfaction Survey data entry will be completed and reports prepared by the Department's HIV/STD epidemiology specialist.
- CQI Committee meeting was held October 13. Topics included: service provider QI Plan updates, report on Ryan White Parts A and B semi-annual meeting, next Client Satisfaction Survey in spring 2017, ACA Policy, and Health Insurance Assistance Policy implementation.
- Intermediate-Advanced training on case management service plan development, including psychosocial assessment and motivational interviewing techniques, planned with instructor provided by UT School of Social Work Office of Professional Development
- Conference call on October 24th with National Quality Center coach assigned to Texas.

#### See Attachment 1

#### I. Part B Grants Administration/Management Update

- > Waiting on RWB Supplemental contracts to be executed.
- ▶ Working on our HOPWA application to DSHS for the 17-18 HOPWA year

#### **II. Part B Expenditure Summary Update**

The FY16 Part B expenditure summary is shown in Table 1 below. Fifty (50%) percent of the year has expired; however, forty- six (46%) percent of funds have been through September 2016. For supplemental funding, one – hundred (100%) percent of the year has expired; however, eighty-two (82%) percent of funds have been expended through September 2016.

- Health Insurance: Utilizing supplemental funds/other funding source
- Oral Health: Utilizing supplemental funds
- OMAC: Does not include laboratory and vaccination costs. These charges will be included in September billing.
- EFA: Utilizing other funding source
- APA: Costs are over expended because disproportionate amount of medication costs hit RWB due to new restrictions on other funds that restrict the use of funding to purchase medications for patients waiting for approval of ADAP. The disproportionate charge of APA costs to RWB will be reflected in subsequent billings; however will even out over the grant year. Once new state LPAP guidance is received this spending will reduce.
- Transportation: Invoices are received late on quarterly basis. Working with Social Work team to identify reasons for being low as well as methods to address utilization
- Food Bank: Utilizing other funding source
  - No complaints have been received.

See Attachment: 2

#### VI. Officer Nomination Vote:

The council voted for the AACHPC 2016- 2018 Officer Nominations via ballot. Program manager, Crystal Flores presented the council with the tallied results: Chair: Justin Smith Vice-Chair: L.J. Smith Secretary: Glenn Crawford These officers will serve a 2 year term from October 25, 2016 to October 23, 2018

#### VII. <u>Committee Reports:</u>

#### Executive Committee:

The Executive committee reviewed and discussed:

• Community Star Awards

#### • Membership Recommendation

The Council voted to add new member Dale Thele to the Austin Area Comprehensive HIV Planning Council.
Voted: 6 to 0 Motion Carried

#### **<u>Comprehensive Planning Committee:</u>**

The Committee Chair, Justin Smith discussed the continuing process on the Comprehensive Plan of eliminating duplication, and trying to make it clear why and how we are making one action meet multiple measures. Insuring the format and language is both attainable and ambiguous. This is a five year plan that sets forth the Austin TGA's commitment to collaboration, efficiency, and innovation to achieve a more coordinated response to addressing HIV. The Integrated HIV Prevention and Care Plan was created to establish the blueprint for achieving HIV prevention, care and treatment goals. Crystal Flores, Program Manager provided and updated version of the Integrated HIV Comprehensive Plan. The Comprehensive plan has been consolidated and made coherent and is ready for submission to HRSA. Justin reminded the council it is a living document and the Comprehensive Planning committee will continue to make updates toward the process of making it more remotely operationalized.

Allocations Committee: The Allocation committee did not meet

VIII. <u>HIV Planning Council Staff Report :</u> Program Manager, Crystal Flores Reviewed, discussed and provided updates on:

- 2016 AIDS Walk Austin Information and participation
- Austin HIV Planning Council Community Star Awards update.
- Texas DSHS HIV/STD Conference

IX. Meeting Adjourned at 7:28pm

<u>NEXT SCHEDULED MEETING</u> City Hall 301 W 2nd St, Austin, TX 78701 Room 2003 Tuesday, November 22nd, 2016 6:00 P.M. Attachment 1

#### Administrative Agency Report Submitted to the Austin Area Comprehensive HIV Planning Council OCTOBER 25, 2016

#### I. PART A & MAI GRANTS ADMINISTRATION/ MANAGEMENT UPDATE

#### D. Ryan White FY17 Part A Grant Application Status

The Ryan White Part A Grant Application was completed and submitted to HRSA on October 17, 2016.

#### E. Integrated HIV Prevention and Care Plan Submission Next Steps

As a next step, CDC and HRSA will conduct a joint review of submitted Integrated HIV Prevention and Care Plans and will provide joint feedback to each jurisdiction, as appropriate to the type of plan submitted. Recipients can expect to receive feedback by **Spring 2017**. In the interim, please continue to work directly with your CDC and HRSA project officers should you have any questions and/or technical assistance needs pertaining to your submitted plan. As a reminder, updates to the Integrated HIV Prevention and Care Plan may be submitted on an annual basis through the progress report, if applicable.

# F. <u>Ryan White FY16 Part A Overall Expenditure Summary (March 2016 to February 2017)</u> The FY16 Part A overall expenditure estimates are shown below. Fifty eight percent (58%) of the year has expired and approximately forty nine percent (<u>49%</u>) of funds have been billed through <u>September of 2016.</u> Table 1 below shows the overall expenditure summary. Monthly <u>service category</u> expenditures are provided to the Allocation Committee.

CATEGORY	Budgeted	Expended	Percent
	Amount	Amount	Expended

DIRECT SERVICES	\$3,952,737	\$1,943,336	49%
ADMINISTRATION	\$465,028	\$238,247	51%
(Including Planning Council Support)			
Quality Management	\$232,514	\$82,022	35%
TOTAL	\$4,650,279	\$ 2,263,605	49%

#### II. CLINICAL QUALITY MANAGEMENT ACTIVITIES

- CQI Performance Outcomes Review Subcommittee will hold its first meeting on November 10 to review outcome measures for each funded service category, and make recommendations that will align local outcome measures with current HRSA HIV/AIDS Bureau (HAB) performance measures.
- Mid-year outcome measures reports for each service category have been submitted by agencies.
- Standards of Care for Local Pharmacy Assistance Program (LPAP) and Emergency Financial Assistance (EFA) have not been finalized by DSHS.
- 2015-16 Client Satisfaction Survey data entry will be completed and reports prepared by the Department's HIV/STD epidemiology specialist.
- CQI Committee meeting was held October 13. Topics included: service provider QI Plan updates, report on Ryan White Parts A and B semi-annual meeting, next Client Satisfaction Survey in spring 2017, ACA Policy, and Health Insurance Assistance Policy implementation.
- Intermediate-Advanced training on case management service plan development, including psychosocial assessment and motivational interviewing techniques, planned with instructor provided by UT School of Social Work Office of Professional Development
- Conference call on October 24th with National Quality Center coach assigned to Texas.

#### **III. CLIENT COMPLAINTS**

None

#### IV. HRSA/HAB/DSHS NEWS AND EVENTS

#### Webinar on Coordinated Health/Housing Services for PLWH: October 25

This webinar, October 25, 2:00 – 3:00 pm ET, will spotlight successful interventions for providing services to people living with HIV (PLWH) experiencing homelessness and co-diagnosed with mental illness or substance use disorders. It will feature lessons learned from the HRSA/HAB-supported SPNS Innovative Strategies for Coordinating Health and Housing Care Services.

#### New RSR Web System Enhancements: Webinar October 26 (Technical Assistance)

This webinar, October 26, 2:00 – 3:00 pm ET, will present new RSR web system enhancements for 2016 and provide an overview of PCN 16-02 changes which change how you report services in the RSR.

Start now to prepare for your 2016 RSR submission! The 2016 RSR submission timeline identifies key dates.

Attachment2

Austin Area Comprehensive Planning Council **Ryan White Part B Administrative Agency Report** Submitted by Jessica Pierce October 25, 2016

#### I. Part B Grants Administration/Management Update

- > Waiting on RWB Supplemental and State Services contracts to be executed.
- ➤ Working on our HOPWA application to DSHS for the 17-18 HOPWA year

#### **II. Part B Expenditure Summary Update**

The FY16 Part B expenditure summary is shown in Table 1 below. Fifty (50%) percent of the year has expired; however, forty-six (46%) percent of funds have been through September 2016. For supplemental funding, one hundred (100%) percent of the year has expired; however, eighty-two (82%) percent of funds have been expended through September 2016.

## Table 1: Ryan White FY 16 Part B Billing SummarySeptember 2016

CATEGORY	Budgeted Amount	Expended Amount	Percent Expended
Service Delivery	\$3,558,939	\$1,628,935	45.77%

#### **Excluding Supplemental:**

CATEGORY	Budgeted Amount	Expended Amount	Percent Expended
Service Delivery	\$3,177,881	\$1,176,733	37.03%

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

Allocation	Expended	
\$66,271 (5%)	\$339.58	
\$71,166 (91%)	\$65,143.82	
\$106,625 (23%)	\$24,446.43 \$46,946	
\$46,946 (100%)		
\$737,228 (40%)	\$295,925.06	
\$2400 (28%)	\$662.33	
\$99,313 (93%)	\$92,082.25	
\$6600 (5%)	\$303.92 \$35,569.71	
\$70,000 (51%)		
\$10,000 (100%)	\$10,000	
\$35,000 (32%)	\$11,031.48	
\$3400 (0%)	\$0	
	\$66,271 (5%) \$71,166 (91%) \$106,625 (23%) \$46,946 (100%) \$737,228 (40%) \$737,228 (40%) \$2400 (28%) \$99,313 (93%) \$6600 (5%) \$6600 (5%) \$70,000 (51%) \$10,000 (100%) \$35,000 (32%)	

Health Insurance: Utilizing supplemental funds/other funding source

**Oral Health**: Utilizing supplemental funds

**OAMC**: Does not include laboratory and vaccination costs. These charges will be included in September billing.

**EFA**: Utilizing other funding source

**APA**: Costs are over expended because disproportionate amount of medication costs hit RWB due to new restrictions on other funds that restrict the use of funding to purchase medications for patients waiting for approval of ADAP. The disproportionate charge of APA costs to RWB will be reflected in subsequent billings; however will even out over the grant year. Once new state LPAP guidance is received this spending will reduce.

**Transportation**: Invoices are received late on quarterly basis. Working with Social Work team to identify reasons for being low as well as methods to address utilization.

Food Bank: Utilizing other funding source

#### **IV. Client Complaints**

• No complaints have been received.

### Attachment 1

### 2016 Ryan White HIV/AIDS Program Services Report Submission Timeline