

**Minnesota Council for HIV/AIDS Care and Prevention  
Disparities Elimination Committee  
Thursday, April 21, 2022  
9:30 – 11:00 a.m.  
Microsoft Teams Meeting  
Meeting Minutes**

<b>Committee Members Present:</b>	
Charlotte Detournay	Rev. Jim Mitulski
Cree Gordon	Jay Orne (co-chair)
Megan Higdon	Sarah Schiele (co-chair)
<b>Committee Members Absent:</b>	
Megan Mueller	
<b>Guests:</b>	
Hank Jensen, Program HH Customer Care Specialist	Asneth Omare, HIV Benefits and Eligibility Supervisor
<b>Hennepin County (Part A) Representative:</b>	
Thuan Tran	<b>DHS (Part B) Representative:</b>
	None
<b>MDH (Prevention) Representative:</b>	
McKinzie Woelfel	<b>MDH (Surveillance) Representative:</b>
	Hannah Kass-Aten
<b>MCHACP Staff:</b>	
Carissa Weisdorf, Coordinator	Bryan Bick, Administrative Specialist (minutes)

Quorum Present? **Yes**

**I. Welcome and introductions**

- Cree Gordon called the meeting to order at 9:35 a.m. Cree explained that they were asked by the co-chairs to facilitate the meeting until the co-chairs can join.
- Introductions were made.

**II. Review and approval of past meeting minutes and proposed agenda**

- The minutes from the March 17, 2022 meeting were reviewed and approved as printed.
- McKinzie Woelfel asked that the agenda be modified to include an update from her and Hannah Kass-Aten on the Minnesota Department of Health’s request for proposal (RFP) process. Cree Gordon said this could be included in New Business.
- The agenda for the meeting was approved as modified.

**III. Review of Ryan White service areas: oral health care**

- Hank Jensen, Program HH Customer Care Specialist, presented the ***Program HH Dental Services Overview***.
- Asneth Omare from Minnesota Department of Human Services (DHS) reviewed plans to improve Program HH’s dental services.
  - Asneth announced that DHS is working on updates to the Minnesota Health Care Programs Provider Manual. These updates will better describe which procedures are covered by Program HH under prior authorization and how to resolve problems with accessing services. These updates should be finalized in the next few weeks.

- Asneth Omare stated that Program HH is working closely with Minnesota Health Care Programs (MHCP) to make sure Program HH can cover more services, and to make the prior authorization process more flexible. Program HH is looking for ways to be more proactive about finding claims or prior authorizations that are stuck in the system.
- Asneth added that she hopes the increase in dental reimbursement rates under MHCP will lead to more dental providers participating. She explained that the rate is currently only about 20 cents on the dollar and will nearly double.
- Jay Orne stated that the Disparities Elimination Committee should be looking at how different populations might run into unique issues with fully accessing dental benefits. They pointed out that the oral health care system seems complex and asked who is available to help people navigate it.
  - Asneth replied that Hank Jensen is the main contact for Program HH consumers who need help navigating the system.
  - Asneth explained that the prior authorization process is determined by state legislation, and it occurs between Minnesota Health Care Programs and the provider. Providers and clients both have a path to appeal when a prior authorization request is denied.
  - Asneth added that case managers, benefits counselors and social workers in the Ryan White system should be able to help advocate for clients.
  - Hank added that the University of Minnesota's School of Dentistry has been a reliable provider for Program HH consumers, but it can be hard to get an appointment as a new patient. He said there is a waiting list, but people often get appointments sooner than the estimate they are given.
- Jay asked for input from anyone in today's meeting about how familiar they feel with the dental benefit system.
  - Asneth said that an example of how complex the Ryan White system can be is that Part B funds dental services at the Minnesota Department of Human Services (DHS), while Part F funds are awarded to Hennepin Healthcare.
  - Asneth added that DHS maintains a listserv for updates on Program HH. She invited the committee's members to let her or Hank know if they want to be added, and then they will receive updates such as a notification when the MHCP Provider Manual updates are finished.
  - Asneth and Hank provided contact information for further questions or requests to be added to the listserv:
    - [Asneth.N.Omare@state.mn.us](mailto:Asneth.N.Omare@state.mn.us)
    - [Hank.Jensen@state.mn.us](mailto:Hank.Jensen@state.mn.us)
    - Program HH Customer Care: 651-431-2398
- Jay mentioned that the Minnesota Ryan White data dashboard used by the council shows much less utilization for oral health care services among Black/African American individuals.
  - Cree Gordon said this might illustrate a need to make some of Program HH's services easier to navigate so that people experience less system fatigue.

- Hank Jensen stated that Program HH dental is one of the smaller Minnesota Health Care Programs, and providers may not be aware that it covers more wraparound benefits than Medical Assistance. Providers may incorrectly tell clients that something isn't covered.
- Asneth Omare shared that there are some dental providers who routinely work with the HIV community. She said she and Hank will be providing more education to providers and consumer groups. She emphasized that making sure your provider is in-network is critical to the process.

#### **IV. New business / unfinished business**

- As an item of new business, McKinzie Woelfel and Hannah Kass-Aten provided an update on the Minnesota Department of Health's (MDH) request for proposal (RFP) process.
  - McKinzie explained that MDH's RFP for prevention programs will be released in mid-July. It will cover five years from 2023-2028. The amount is estimated to be \$3,272,000. The RFP will cover MDH's HIV testing program, pre-exposure prophylaxis (PrEP) programs, and Syringe Service programs.
  - McKinzie illustrated how MDH is working to incorporate feedback from grantees into this RFP.
    - Providers reported that testing was oversaturated within certain populations. McKinzie explained that MDH's HIV prevention RFP came out first, and then MDH received more funding from the Minnesota Department of Human Services for early intervention services (EIS). This year EIS, Centers for Disease Control and Prevention (CDC), and state funding are all coming at the same time.
    - McKinzie stated that grantees experienced frustration with MDH's 75% testing requirement in priority populations. That was difficult to achieve, especially for agencies that conducted large outreach events. McKinzie announced the requirement will be changed to 55%. Had to be more flexible within current RFP due to the HIV outbreaks that are happening.
    - McKinzie mentioned that MDH got feedback from smaller agencies that they did not want to apply if they would have to compete with larger organizations. With this RFP, MDH is committed to having a capacity-building track. MDH is working with its community health equity group to get ideas.
  - Jay asked what trends are being seen and how priority populations will be chosen for the next RFP. McKinzie answered that once MDH determines the priority populations, MDH presents the information to the Disparities Elimination Committee and to the council before the RFP is published.
  - Hannah Kass-Aten added MDH is looking at a variety of measurements to determine its priority populations.
    - These measurements include HIV incidence over the last five years in different populations, both as a proportion and as a rate. HIV prevalence will also be looked at as a proportion and as a rate.
    - Hannah said that MDH will also study data on HIV testing and where they found success in the last five-year round of funding.

- Hannah stated that qualitative data is important too, such as hearing that certain populations are being oversaturated with testing.
- Cree Gordon added they are glad the Minnesota Department of Health (MDH) is looking more at qualitative data. They mentioned a recent increase in new HIV cases among young Black men who have sex with men. Cree feels that community has a lot of places to get tested, but there should be more focus on creating support and opportunities for engagement so that public health interventions can be more effective.
- McKinzie clarified that testing numbers are always going to be a focus for MDH because those data are reported to the Centers for Disease Control and Prevention (CDC). She agreed that once the programmatic activity content for the request for proposal (RFP) are written, it can be brought back to the Disparities Elimination Committee for suggestions. This could assist programs in their efforts to include better community engagement into their prevention efforts. McKinzie said MDH may be able to share a draft of the activities portion of the RFP with the Disparities Elimination Committee.
- No unfinished business was discussed.

**V. Set agenda for next meeting**

- Bryan Bick displayed the ***Fiscal Year 2022 DEC workplan***.
- The committee agreed that the scheduled items for May will be on the May agenda. McKinzie Woelfel confirmed that the MDH will be ready to present on priority populations for HIV prevention in the May meeting.

**VI. Announcements:** No announcements.

**VII. Adjourn:** Cree Gordon adjourned the meeting at 10:42am.

**Meeting Summary:**

- Staff from Minnesota Department of Human Services (DHS) gave a presentation on the oral health care service area.
- Staff from the Minnesota Department of Health (MDH) provided an update on the upcoming HIV prevention request for proposal (RFP).

**Documents distributed before the meeting:**

- Proposed agenda for April 21, 2022 meeting
- March 17, 2022 DEC minutes
- Fiscal Year 2022 DEC workplan

**Documents displayed during the meeting:**

- Program HH Dental Services Overview

**BB/cw**