

**Minnesota HIV Services Planning Council Meeting**  
**November 12, 2014**  
**9:00 am – 12:00 pm**  
**Health Services Building, Room 110**  
**525 Portland Ave S, Minneapolis**  
**Minutes**

<b>Council Members Present:</b> Andy Ansell Michael Behl (phone) Scott Bilodeau Sokun Bobson Michele Boyer Loyal Brooks Winston Cavert, M.D. Jared Erdmann Al Fredrickson	Debbie Gazett (Council Co-Chair) (phone) Michael Graham Jonatan Gudiño Hank Jensen (Council Co-Chair) Joe Larson Valentine Momo Lesa Nelson (phone) Asneth Omare Craig Schmidt Monica Yugu
<b>Council Members Absent:</b> Bielca Guevara Michael Hargrave Keith Henry, M.D.	Krissie Guerard Mary Gulley Lucie Makena
<b>Community Members/Guests/Consultants:</b> David Finwall Karin Sabey	David Tomlinson
<b>Part A Representatives:</b> Jonathan Hanft, Hennepin County Thuan Tran, Hennepin County	<b>Part B Representatives:</b> Nick Metcalf, DHS Dave Rompa, DHS
<b>Planning Council Staff:</b> Sirry Alang, Coordinator	Carissa Weisdorf (minutes)
Quorum Present? <b>Yes</b>	

- I. Call to Order**  
 Hank called the meeting to order at 9:07 am.
- II. Welcome and Introductions**  
 Introductions were made.
- III. Consideration and Approval of Proposed Agenda**  
 Jonathan added the reallocation proposal to the agenda to be discussed after the expenditure report; it was decided that this agenda item will be switched with the outcomes report agenda item. Loyal motioned to approve the agenda with the addition and Joe seconded; the agenda was approved by unanimous consent.
- IV. Review and Approval of October 14, 2014 Minutes**  
 The minutes were approved by unanimous consent.
- V. Co-Chair Update**
  - Hank refreshed the council on the conflict of interest (COI) policy and said as co-chairs Debbie and Hank don't know everyone's conflict of interest so it cannot be solely their responsibility for calling out COI. He asked that everyone participate; planning council staff is the only one who has all of the COI information. If there are any questions about COI please check in with staff, the Operations committee or the council co-chairs. The COI document emailed was not included as a handout today because we are checking with the legal department about how to use it. Hank asked that the council please let staff know if their COI changes.
    - Jonathan said we are contacting a county attorney about how best to manage COI and also wants to talk to our project officer about it. He said we request that she join a future meeting if the council would like.

- Joe asked about signing the COI and what the timeline is. We update them once per year. Hank said anyone can state a new COI at any time.

## VI. Part A Report

*Jonathan Hanft, Hennepin County*

- Jonathan provided the council with a written update.
- We are estimating the unallocated balances and will discuss an estimated carryover plan at December's meeting; this is required if we are going to request a carryover for next year. Jonathan explained that this is based on the Ryan White Act; there is an opportunity to request carryover funding based on the formula portion of the grant (# of people living with HIV, etc.). If we believe a portion is not going to be spent we can request to carryover the formula portion of our funds to the next year; must submit the estimate to HRSA. \$500,000 in federal funds, need to have single audit on the program, will get us through 2016.
- Dr. Matt Golden's presentation next Monday is about linkage to care. It will be about Seattle's current program, what their Public Health Department is doing, a cost effective analysis and how they use surveillance data.
- We are reposting the quality management coordinator position. We will share the posting with the council and ask that it is shared with your networks. Loyal and Craig asked about why the first round of candidates did not work; Jonathan indicated salary and job market.
- Integrated Planning update: there is a lot of interest at a federal level to integrate HIV care and prevention planning.
  - The timeline has been posted on the council website.
  - The next comprehensive plan will need to be a joint HIV care and prevention plan and is due in 2016. Input from both bodies has begun. The co-chairs suggested a joint discussion to gather ideas. The planning council and CCCHAP will be surveyed and co-chairs from each committee attended the other committee to get a better understanding of what each does.
  - The decision to merge into one statewide HIV care and prevention planning body occurred in April, 2014.
  - Jonathan shared the projected timeline. The planning council will need to sign off on the plan in the future. The implementation plan for the new body will occur in 2015 and the plan is to have members in place and the first meeting in January, 2016.
  - Craig asked if the planning council will end; Jonathan said we don't know what membership will look like yet, next year we will decide and the planning council will vote on it. Joe asked how many members are on CCCHAP; Andy replied about 18 members.

## VII. Part B Report

*Dave Rompa, DHS*

- Nick is working on the final round of application, which is due just before Thanksgiving.
- SCSN/Rebate Planning Meeting. There has been a change to the November 20 meeting: will have proposal of how much money needs to be saved for a "rainy day" reduction in funding. Looking at what other states are doing for formulas. The balance will be considered what is left and the unmet needs categories will help decide how the balance is used.
  - Hank asked about the short turnaround and if individuals are unable to attend can one give input later. Dave will ask the consultants about this.
  - Karin said the plan is not needed by December 15, just an update to legislation. Once the recommendation is in place they will have to do additional research, i.e. HRSA guidelines. Andy said they are looking at current recommendations and are working on interpreting some of the broader suggestions, i.e. additional money for chemical dependency.
- The training coordinator position has 15 very good candidates but only 4 of the 9 final candidates responded to a request for a written interview. DHS is hoping to move forward with the interviews.
- Soft forecast on spending is complete but Dave was unable to provide a handout for today's meeting. He will provide it to the council prior to the December meeting; a hard forecast will be complete in March.
- 4 RFPs are coming out: chemical health training, needs assessment for American Indians, community health services and an agency to handle gas and hotel arrangements for consumers interacting with HH.
- Empowering Heroes planning is underway and RFPs for hotels and venues are being submitted. The dates are mid-April and early May and will attract about 500 people with a dual track conference for professionals and consumers. Will reconvene advisory committee following these meetings and will give presentations.

## VIII. Prevention Update

No update

## IX. Staff Update

- The next New Member Orientation is December 5 from 8:30 am- 2 pm in HSB.313.
- Sirry asked for 24 hour notice to staff if someone plans to call-in for a meeting.
- Hank said the Operations committee is looking into better conference call equipment.

## X. Expenditure Report & Reallocation Proposal

- Jonathan referred to the document *Part A and B combined spending report*. If the grantee redistributes funds by service then no planning council input is required. To redistribute funds to another service area we need planning council input. Jonathan then referred to *FY2014 mid-year expenditure report* and went through the key to the document. He suggested funds that are not being spent will need to be reallocated.
  - Jonatan asked about ADAP money and said Jonathan said planning council doesn't have input; Dave said getting the billing information in real time is not possible because there are many funding sources for this money, so they need to look at where the money is coming from. Andy said there is no question that ADAP money will be spent; accounting pulls money from different sources throughout the year and it will be spent by end of year.
  - Overspending is occurring in culturally appropriate services, like services targeting Latinos; we are using MAI funds for Latinos and African Americans. Andy said increased spending may have impact due to ACA, open enrollment affects getting people insurance so more people will need to utilize these funds.
  - Loyal asked about discrepancies between the report and excel sheet; Jonathan said these are errors but the expenditure report has the correct numbers.
  - Requirements for mental health changed, must be provided by mental health clinician, therefore, spending is down. Med nutritional therapy was increased but utilization has decreased. Karin said as a provider, the demand has not decreased but there is a high fail rate. If client doesn't show up then the provider doesn't bill for it. She feels like the service is threatened because it is not financially viable. Jonathan said we need to work with providers on their no-show rate.
  - Hank asked if a service area can't be overspent, how linguistics is overspent. Jonathan said the invoices go through a county system and if funds aren't reallocated then county funds are used; we could also use admin funds to cover this.
  - EIS: when does grantee or planning council get involved to say no more money can be spent? Grantee will make proposal and planning council will vote on it.
  - Asneth asked about MAI funding, Jonathan said 5% of total funds need to be spent on this and the allocation plan takes this into consideration.
  - Hank said the greater MN set aside is 16% spent and asked for clarification. Jonathan said MCM is expected to be spent but dependent on the funding source. Dave said part B is constantly repointing funds/replacing money to rebate.
- Reallocation Proposal. Only Part A funds are provided in this document and we anticipate Part B will be spent. Jonathan said it matches up with FY14 mid-year expenditure report. There are severe penalties if funding is underspent by over 5% and we have 3 months left in the fiscal year.
  - Asneth asked about health education and risk reduction; Jonathan said it was an accidental omission and there was staff turnover so that resulted in reduced spending.
  - Jonathan went over the proposal with the council. There is a 90% linkage for individuals who receive EIS. Underspending in certain service areas.
  - Craig asked about linguistics and Jonathan thinks we will be able to find funding for this.
  - Loyal asked for clarification about medical nutritional therapy and Thuan explained the utilization rate and said it is lower than expected.
  - Jonatan asked about the CM3 service area and Jonathan said this is based on what providers think their spending amount will be.
  - Hank asked about the impact on consumers when a service area is cut and if consumers will still be able to access the service. Jonathan said yes because it is based on current spending. Hank asked that the planning council get this information as a handout.

- Joe said the medical nutritional therapy money has been used but there was no previous increase in funding. He thinks the model of billing by hours does not work well and wants more of a salary as the agency carries the expense of unbillable expenses. MA reimburses better than Ryan White.
  - Dave asked if we are looking at cutting these services and Jonathan said we are looking at reallocating because it is underutilized and these issues should be discussed with the contract manager.
  - Karin said HCMC spends about \$60,000 more per year because of unbillable services resulting from no shows.
    - Joe said Aliveness has this same issue, where the program costs provide more than they are reimbursed for.
    - Jonatan said community health workers can get reimbursed for minority populations by billing through MAI and suggested Joe look into this option.
  - Thuan said Part B utilization is high and said the new proposal matches last year's utilization more closely.
  - Dr. Cavert suggested looking at last year's utilization to find a more cost effective way to manage funds; the process could be revised.
    - Dave said we may have an RFP to look at the service area. This failed in the past because physicians were signing off on any and all requests from patients.
    - Andy expanded on the history; there was high utilization for nutritional supplements. The purpose was to provide supplements for patients experiencing weight loss due to HIV. It was not being utilized properly and implemented a prior authorization process, not everyone needed these supplements. There were other services that could be utilized for nutrition.
    - Karin concurred and said less that ½ of her clients qualify for a PA, not getting the supplements like they used to; there is more criteria to meet the current qualifications.
  - Jonathan said it is a HRSA requirement that a patient must go through a licensed dietician.
    - Craig said if this position was salaried then it would be covered and asked if this is the answer. Jonathan said it is insurance coverable service but not reimbursed if a client misses an appointment. He questioned if it is Ryan White's responsibility to "correct the medical system?" We are investigating this.
  - Jonatan asked how it works with other providers. Karin said HIV is not a disease state that CMS will reimburse for. Jonathan asked if a dietician can work with MCM to follow up with clients, this would be billable. Wants to talk about strategies.
  - David Tomlinson said he works in the community and hasn't heard of clients utilizing dietician services. He thinks communities of color aren't aware of these services and said we need to make sure people are aware of the services that are available. He has worked in the community since 1999 and is also a patient at HCMC.
- Craig motioned to accept the proposal as it stands and Michele seconded. No further discussion. The council voted **15-1**, one abstain. Motion passes.

## **BREAK**

### **XI. Committee Reports**

#### Community Voice Committee

- Sirry announced the next meeting is November 18; please RSVP with Carissa. Standards of care development and needs assessment of the community will be discussed.
- Hank said it is an open meeting but aimed at consumers only. Part A and B representatives are usually the only non-HIV positive people in the room.

#### Needs Assessment & Evaluation

- The 2015 needs assessment survey was finalized.
- A youth HIV Cascade was shared by Jonatan and the NA&E committee thought it was well done and could be modified a little.
- The Planning Council retreat evaluations were discussed. Some of the main themes are members want more flexibility in the prioritization process/ less rubber stamping. A few proposals: look at rebate funding; attend Nov

20 meeting and give recommendations for use of money; flex funding, geared toward innovative strategies; council could apply for waiver of 75/25 split so there is more flexibility within Ryan White funding to be moved around. Some issues: not increasing money, just redistributing current funds. Committee will continue discussion and may bring an action item to the council.

#### Operations

- **Action item:** Membership Recommendation. The Operations Committee recommends David Finwall, Marvin Innes and Aaron Wittnebel for planning council membership. DISCUSSION: David Finwall was previously part of the planning council in Virginia and is familiar with the work of the council. Jared read his statement. Jonatan asked David which community he identifies with and David replied the HIV+/PLWA community and gay man living with AIDS over 50. Thuan read the statement provided by Marvin Innes and Hank read the statement provided by Aaron Wittnebel. All three applicants are unaligned consumers; we need to have 10 unaligned consumers on the council and we currently have 6; this is the biggest priority for membership. Aaron is a member of a federally recognized tribe. The council voted by ballot and members of the Operations Committee tallied the ballots. David Finwall, Marvin Innes and Aaron Wittnebel were elected for membership.
- **Action Item:** New Planning Council Guiding Principles. Scott reviewed the new guiding principles and said we want to change it because the current version is too text heavy and overwhelming. These new guiding principles are more digestible and people may pay more attention to them. No discussion; 17-0, motion passes.

#### Planning & Priorities

- **Action Item:** Directive for Housing Services. The committee has met with housing experts, polled the community about housing needs and decided on the recommendation presented today. DISCUSSION:
  - Craig proposed the \$100,000 be used to fund a position for a housing benefits counselor to assist people in accessing housing; he feels like the money will be used for less people with the current recommendation from Planning & Priorities.
  - Michele identified her COI and thanked Planning & Priorities for their research; she said there are not enough units to put people in and this will create about 15 units. She said a voucher for rent is very flexible and won't place people in specific units.
  - Andy said the HIV Housing Coalition said this is the best utilization of the money; they recommended rental assistance.
  - Asneth spoke to MCMs and consumers and this option received the largest percentage of the votes.
  - Loyal said there is a two year maximum for the housing stipend. Planning & Priorities received a lot of input from a variety of people and he feels this is the best way to go.
  - Monica asked about the projection of the amount of people this money will serve and how long the money will last. Loyal answered about 15 people for 2 years.
    - Hank said he attended the meetings and it was said they could be resourceful and stretch the money by providing rental vouchers; it is hard to put a firm number on the actual number but most likely 10-15 people. He said although 10 people may not seem like a lot of people, the housing coalition said this is huge and "moves the needle substantially".
    - Michele said subtracting 10 people from a 200 person wait list is significant; the average rental subsidy at Clare Housing is \$5800 per person per year and Ryan White eligibility requirements would apply. This money would cover the additional amount above 30% of income.
    - Loyal asked what happens on the 3<sup>rd</sup> year; Michele said she hopes this service area continues to receive funding.
  - David Tomlinson asked who gets the money, current organizations or new organizations to bring in new HIV+ clients. He said people have a hard time getting into these programs and asked about the future of the funding, will more money be allocated in the future and will there be an increase? Loyal said this will be considered in the next allocation process; the planning council will look at current needs in 2016.
  - David asked which communities will be prioritized; communities of color can be left out or there are barriers. Andy replied that youth homelessness rates are very high. Hank said today we are approving the allocation directive and the specifics will be discussed later. The grantees will narrow the scope and the focus now is to approve or not approve the committee's recommendation. He said the committee did a lot of homework.
  - Jonathan confirmed it is HRSA's policy that rental assistance cannot be provided for more than 24 months. Karin asked is this a lifetime cumulative time and Jonathan said we need to clarify that but the policy states a maximum of 24 months.

- Asneth defined homelessness as living in a shelter and said we would look at people at risk for homelessness.
- Andy said there are additional details the grantee would need to work out. Andy is concerned about offering housing and then taking it away; in the past this made him weary of funding housing. Grantees will need to look closely at RFPs.
  - Craig said funding a housing specialist could help this problem.
  - Michele said there is no housing out there to fund and she shares Andy's concern. There was a recent proposal passed to increase the number of units for affordable housing. This gives people time to prevent homelessness. She said it is not really long term; it is a 2 year max.
  - Craig asked who will help this person after 2 years to find housing. Andy said grantees will need to structure contracts so housing is provided along with some other help for placement. He said P&P came up with plan to spend the money and it is up to the grantee to work out the details.
  - Jonatan said PHP does this and there is a person who can help someone get connected to housing.
- Andy said we could add "with focus on moving people to permanent housing" to this directive. Craig asked if we put this in would the grantees need to meet this expectation.
- Asneth motioned to approve the directive with the addition of "with geographic parity and with the intention of finding permanent housing" and Loyal seconded. No further discussion.
- **MOTION: 17-0; MOTION as amended: 16-1.** Recommendation, as amended, passes.

## **XII. Outcomes Report**

Due to time constraints, this item is moved to the December meeting.

## **XIII. Open Forum**

- Hank announced to the council that today's discussion and vote on the expenditure report fulfilled part of the Part A administrative assessment.
- Jonatan said there is a flyer for a Latino support group held at YAP. November 15 is the first meeting and it is a support group for Latinos who are gay, bi or trans and HIV+. He will email the flyer to Carissa for distribution to the planning council. He said it will be in "Spanglish" and is not just for youth.

## **XIV. Announcements**

- HCMC has a World AIDS Day event on December 1. There will be provider participation and they are seeking further organization/provider involvement. It will be in the HCMC skyways.
- David Tomlinson identified himself as Midnight and said there is an event for World AIDS Day on December 14 at the Gay 90s. It is held in conjunction with MAP and increases involvement in HIV/STDs and safe sex awareness.
- Hank said we should feel good about allocating funding to housing.

## **XV. Adjourn**

All moved to adjourn and Craig seconded. The meeting was adjourned at 12:03 pm.

## **Meeting Summary**

- The council approved the Reallocation Proposal.
- The council approved the Operations Action Item for new membership.
- The council approved the Operations Action Item for new guidelines
- The council approved the amended Planning & Priorities Action Item for housing directives

## **Documents Distributed before the Meeting**

- Planning Council meeting agenda
- Minutes from October 14 meeting
- Planning Council Conflict of Interest policy
- **Action Item:** Membership Recommendations
- **Action Item:** New Guidelines
- **Action Item:** Housing Directive for 2015/16 Allocations
- Ryan White Part A & B Combined Spending report
- Reallocation Proposal 2014

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[www.mnhivplanningcouncil.org](http://www.mnhivplanningcouncil.org)

**Documents Distributed/Available at the Meeting**

- Part A update
- FY2014 Mid-year Expenditure Report
- Grupo de Latinos flyer

**cw/sa**