



Meeting of the
PRIORITY SETTING AND RESOURCE ALLOCATION COMMITTEE
Marya Gilborn and Charles Shorter, Co-Chairs

July 16, 2009
Ryan Chelsea Clinton
9:00 am - 12:30 pm

Members Present: Sean Cahill, PhD, Felicia Carroll (alt. for Antionettea Etienne), Eunice Casey (alt. for Terry Hamilton), Sharen Duke, Joan Edwards, Soraya Elcock, Terri Faulkner, Marya Gilborn, Steve Hemraj, Jennifer Irwin, Fabienne Laraque, MD, MPH, Matthew Lesieur, Sharon Mannheimer, MD, Hilda Mateo, Reynolds Mulero, Jan Carl Park, Dena Rakower, Charles Shorter

Members Absent: Linda Fraser, Peter Laqueur, Tom Petro

NYC DOHMH Staff Present: JoAnn Hilger, Dave Magno, John Rojas, Nina Rothschild, DrPH, Monica Sweeney, MD, MPH, Jessica Wahlstrom, Darryl Wong

Public Health Solutions Staff Present: Bettina Carroll, Gucci Kaloo

Others Present: Victor Benadava, Mallory Marcus, Jack Ryan, Jim Shields, Dorella Walters, Jamie Graham Waters

Materials Distributed:

- Agenda
- Minutes from the July 7th Meeting
- Article IX – Conflicts of Interest – from Planning Council Bylaws
- NYC Ryan White Part A Base and MAI Reprogramming Overview
- FY 2009 Preliminary Reprogramming Plan
- Selection of RW Part A Service Categories 2006-2008 (pink and blue document)
- Year 18 – Fourth Quarter Closeout Financial Statement
- Comparison of Year 18 and Year 17 Spending Plan Modification
- Year 18 Third Quarter MAI Commitments and Expenditures Report
- Payer of Last Resort Tool

- FY 2009 Priority Setting Tool
- NYC Ryan White Part A and MAI Service Category Descriptions: 2010-11
- RW Part A Service Category Scorecards 2006-2008
- Executive Summary of 2009 Consumer Focus Groups
- HIV-Positive Voices in America
- HIV Epi and Field Services Semiannual Report from April 2009-07-20
Review of Medical Case Management Model Development

Welcome/Introductions/Moment of Silence/Review of the Meeting

Packet: Marya Gilborn welcomed Committee members. Participants introduced themselves and observed a moment of silence. Nina Rothschild reviewed the contents of the meeting packet.

Review of the Minutes: The minutes from the July 7th meeting were accepted by all present with four abstentions and no votes in opposition.

Public Comment: No members of the public commented.

Conflict of Interest: Governmental Co-Chair Jan Carl Park reviewed the statement on conflicts of interest from the Planning Council bylaws (Article IX). Sean Cahill asked whether Committee members from organizations with contracts for Ryan White services from NYC DOHMH could vote on the ranking of service categories. Dr. Fabienne Laraque stated that DOHMH's legal counsel said that Committee members who have a conflict cannot vote on the ranking. Reading from the Council's bylaws, Matt Lesieur disagreed noting that Committee members can vote on ranking service priorities but must abstain from voting on the allocation of funds if they have a conflict of interest. Jennifer Irwin commented that regardless of a conflict of interest all Committee members were entitled to speak and to discuss a service category. Dena Rakower stated that virtually all members of the Committee receive revenue from ADAP and commented that if she can only participate in a discussion about ranking but cannot actually vote, then she does not know why she is present.

Committee members were asked by Jan Park to announce their organizational affiliations, noting if their organization had applied for Ryan White funding, or if their organization had any Ryan White contracts of which they were aware. Reynolds Mulero expressed dissatisfaction with the discussion, stating that compared to government representatives at the table, who are presumably free of conflict of interests, community members of the Committee were being treated like second class citizens, noting that conflicting interests would cancel each other out in a "Vulcan multiple-mind meld" when group voting occurred. Jan Park reminded participants that everyone is present in the room in the interest of the PLWHAs. Marya Gilborn suggested taking the

issue of conflicts of interest back to the Rules and Membership Committee and obtaining clearer language in the bylaws. She also noted that if the Committee takes a very conservative approach regarding who can and cannot vote on priority setting, very few or no people in the room may be able to vote. Sharen Duke stated that all of the providers in the room wear agency hats but also try to create an integrated health care system for PLWHAs. Members should take their agency and individual hats off and put on their community planner hats.

JoAnn Hilger reminded Committee members that they no longer vote on the ranking of service categories but are, rather, determining scores for various criteria. Mr. Park noted the need to clear the air on this issue and also to come to an agreement. Soraya Elcock noted that Committee members have data to try to make the process as objective as possible and, in fact, did this work last year with a redesigned priority setting tool and developed a workable document. Members agreed to move the conflict of interest discussion back to the Rules and Membership Committee for greater clarification and to move forward using the same process as last year.

FY 2009 Preliminary Reprogramming Plan: JoAnn Hilger reviewed the reprogramming options, noting that she had erred in previously stating that the cap on the amount of money that could be moved between categories is 20%; in fact, the cap is 15%. Reprogramming money is one-time, not ongoing. Dr. Cahill motioned to accept the reprogramming plan with the cap of 15%. All members voted in favor of the plan with no abstentions.

Priority Setting: Members noted that four service categories were already affirmed at the meeting in July 7th: ADAP/ADAP+, mental health services, supportive counseling and family stabilization services, and home care. The minutes from the July 7th meeting will be amended to state that the home care category was affirmed. Members discussed the remaining service categories.

Outpatient Medical Care: For this service category, members are voting on the remaining 20% of the money. Outpatient bridge medical care will begin in December. Steve Hemraj noted that this may be a very important service for a small group of people who are not in any other services. Members discussed whether medical care provided in SROs is billable to Medicaid but did not come to a conclusion. Committee members voted and assigned the following scores:

Payer of Last Resort: 5
Access to Care/Maintenance in Care: 5
Consumer Priority: 3
Specific Gaps/Emerging Needs: 3
Core Service: 8

Only the score on the payer of last resort criteria factor changed, going from a 3 in 2008 to a 5 in 2009.

Medical Case Management: Dr. Laraque noted that although other payers exist for this service category, very few payers cover everything included within DOHMH's newly reconfigured medical case management services. Sharen Duke noted that Medicaid does not pay for treatment adherence support. Members discussed whether or not an agency that does not have a COBRA program would provide these services for a COBRA-eligible client, or whether the client would be sent to another agency with a COBRA program but didn't reach a conclusion. Soraya Elcock advocated against pulling the different components of the category apart and discussing whether alternative payers exist for each of those components. Committee members voted and assigned the following scores:

Payer of Last Resort: 5
Access to Care/Maintenance in Care: 8
Consumer Priority: 8
Specific Gaps/Emerging Needs: 5
Core Services: 8

None of the scores assigned to the criteria factors changed from 2008 to 2009.

Harm Reduction, Recovery Readiness, Relapse Prevention: Committee members agreed that they had no new data to indicate that anything regarding this service category had changed. Fourteen members voted to keep the scores the same as in 2008, 3 members abstained from voting, and no members voted in opposition.

Housing Services: John Rojas, Director of Housing within the Care, Treatment, and Housing Program, noted that DOHMH received a \$4.2 million reduction in its HOPWA grant in 2009. As a result, contracts are being reduced. DOHMH is reducing the per bed rate, not the number of beds. He noted the ongoing trends in housing instability: SRO census, DHS shelter census, although several thousand units of supportive housing are in development through NY/NYIII. Members agreed on the need to lift the 24-month cumulative lifetime cap on receipt of HRSA-funded housing services. Ms. Rakower noted that the Payer of Last Resort score will change because available options have shrunk. Mr. Park stated that according to the NAPWA survey included in the meeting packet, housing is very important to PLWHAs. Committee members voted, assigned a score of 5 to the payer of last resort criteria factor, and voted to affirm the other scores for this service category. The only change from 2008 was the jump from a 3 to a 5 for PLR.

Early Intervention Services: 13 Committee members voted to reaffirm the scores from 2008 for this service category.

Food and Nutrition: Ms. Rakower noted that with the reduction in OMC funding, nutrition services funding will be reduced overall. A Committee member stated that last year, food costs increased by 9%. Ms. Mateo agreed that the need for food has increased; noted that the process of checking whether an individual qualifies for benefits such as food stamps has become more rigorous; and noted that her organization sees more people coming from other states into New York communities. Mr. Mulero noted that more people were being released from jail (thanks to the change in the Rockefeller drug laws) with absolutely no resources and no way to obtain food. Mr. Lesieur noted a 21% increase in the number of Momentum's clients. Committee members voted and assigned the following scores:

Payer of Last Resort: 5
Access to Care/Maintenance in Care: 5
Consumer Priority: 8
Specific Gaps/Emerging Needs: 8
Core Service: 0

The scores on two criteria factors changed from 2008: consumer priority went from a 5 to an 8, and Specific Gaps/Emerging Needs went from a 5 to an 8.

Legal Services: Dr. Cahill remarked on the increasing number of people needing legal services for housing and immigration. The government is estimating that if the HIV travel ban is repealed, an additional 4,000 HIV-infected individuals would enter the US, and some of those individuals would presumably go to New York and request assistance with immigration. He also noted that although GMHC has had to lay off lawyers, the demand for legal services has increased. Mr. Rojas, however, reminded Committee members that Ryan White can only pay for legal issues related to HIV (e.g., discrimination, preparation of Power of Attorney, wills and trusts). Fourteen members of the Committee voted to reaffirm the scores on the criteria factors from 2008, 1 member was opposed, and 2 abstained.

Outreach Services: The Planning Council's Integration of Care Committee has created a new guidance for outreach services to youth. Steve Hemraj noted that he sees more young people with AIDS diagnoses who are co-infected with herpes, syphilis, and gonorrhea. Eleven Committee members voted to affirm the scores for outreach services from 2008, and 6 members voted in opposition.

Committee members voted to remove from the priority setting tool the note stating that no more than five 8's should be given in each column.

Next Meeting: Committee members agreed to meet again on July 21st at 2:00 at Cicutelli, where they will review the FY 2010 preliminary spending plan developed by Gucci Kaloo of Public Health Solutions. DOHMH staff will distribute the spreadsheet in advance.

Public Comment: Victor Benadava thanked Committee members for their hard work on behalf of PLWHAs.