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County Executive

Department of Health

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Commissioner

**TRI-COUNTY RYAN WHITE  
“PART A” STEERING COMMITTEE MEETING**

Wednesday, October 10, 2007  
Planned Parenthood – White Plains Center

**APPROVED MINUTES**

- Members Present:** V. Alvarez, D. Anderson (for K. Scott), S. Brandon, C. Carroll, M. Donoghue, K. Henry, B. Ilardi, V. Jones (for R. Schiffrin), R. Maher, J. Park, M. Piazza, D. Scholar, H. Sherwin, A. Shurin, P. Taddeo (for S. Levine MD), and G. Yarn
- Members Absent:** T. Aliotta (formerly Saari), C. Archbald MD, M. Bannister, L. Beal, B. Bento-Fleming, C. Brazil, C. Burwell, D. Capasso, Y. Christofilis, H. Fitzgerald, D. Kittell, R. Leandre, M. Littles, J. McGovern, R. Nathan, A. Paige-Bowman, S. Pemberton, K. Slade, L. Tackley, M. Velazquez, and S. Wayne
- Guests Present:** M. Fede (Nyack Hospital), D. Garcia (ODFMC), R. Pagan (SC), J. Pearson (VOA), P. Messeri (CHAIN), and S. Sullam (RCDOH)
- Staff Present:** J. Lehane, T. Petro, and B. Reyes
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**I. Approval of September 12, 2007 Steering Committee Minutes**

A motion (D. Anderson, A. Shurin) to approve the minutes passed with two corrections: On page two, a presentation on the importance of good nutrition was made by Kilwana Jordan at the Living Together meeting on *September 27<sup>th</sup>*, not October 27. On page three, the correct address for the New York HIV Planning Council website is: [www.nyhiv.org](http://www.nyhiv.org).

**II. Announcements**

- A retirement party for Harriet Blecher, Director of Social Work at the Rockland County Department of Health, will be held on Thursday, October 25<sup>th</sup> at the Patriot Hills Golf Club in Stony Point, NY. Contact Karen Schragenheim at 845-364-2625 or Maura Donoghue at 845-364-2658 for more information.

### III. Update Reports

#### Living Together (V. Alvarez/G. Yarn)

- At the September 27 LT meeting, Mary Mahoney, staff attorney from Legal Services of the Hudson Valley, made a presentation on credit and debt management. Kilwanna Jordan, nutrition coordinator at ARCS, also made a presentation on the importance of maintaining good nutrition followed by a nutritional training.
- On September 28<sup>th</sup> the AIDS Institute – in accordance with an executive order by the President – held a meeting to discuss electronic access to medical records. The new initiative would make individual medical records available across medical providers electronically, like the Veterans Administration does across the agency. Patients would have access via a password and would not have to repeat information to each provider, but security and confidentiality are concerns. A pilot program will begin at several medical providers in the Bronx. B. Ilardi confirmed that electronic health records are the wave of the future and that new provider relationships are being forged in Putnam County to facilitate the transfer of such information.
- Clinical trials have been expanded, however many consumers are not taking advantage of these opportunities. One of the issues is the fear of being treated like “guinea pigs.” Clinical trials offer opportunities for consumers to discover new treatments if they have failed other medications. The VA is working hard to educate consumers about the benefits of participating in clinical trials. A clinical trials training is being planned.
- Maraviroc is the first in a new class of anti-HIV drugs know as CCR5 antagonists. It is approved for use in combination with other antiretroviral drugs for the treatment of adults with CCR5-tropic HIV-1 who have elevated HIV viral load. This drug and others in this class may offer an alternative treatment for those who may have developed resistance to current medications.
- PLWHA need to be aware that good nutrition is important both in avoiding problems with obesity and HIV-related fat retention and loss issues. Lipodystrophy has been an issue with PLWHA due in part to side effects from certain medications. Now there are improved cosmetic treatments to address fat deposit issues. These treatments may be more than simply cosmetic because lipodystrophy can have effects on the nervous system as fat deposits press upon nerves. Obesity is becoming a challenge for PLWHA as they live longer. There is the “fantasy” that if one looks fatter, they are healthier which might be contributing to increased obesity in PLWHA. Consumers need to be conscious of good nutrition and exercise to live healthier lives.

#### Part B (formerly Title II) (S. Brandon)

- On September 26<sup>th</sup>, over 40 people participated in the Mental Health/Substance Use Committee forum titled “Treatment Adherence – Priorities & Perspectives.” There was a lively discussion about how both consumers and providers perceive and prioritize health and treatment.
- On September 18<sup>th</sup>, there was a joint meeting of the Housing and Case Management Committees at which Mary Mahoney from Legal Services of the Hudson Valley presented ways to deal with debt and creditors.
- On October 9<sup>th</sup>, a delegation of consumers and HIV/AIDS advocates met with NY State Senator Andrea Stewart-Cousins, advising her about the need for more education and increased public awareness about HIV/AIDS and the need to take an HIV test.

- The Network's annual legislative breakfast will be held on November 1<sup>st</sup> at the Doral Arrowwood in Rye Brook. Members are invited to meet local officials and advocate for funding for continued and increased HIV/AIDS and to advise them about the impact of Ryan White reauthorization.
- Articles and announcements to be printed in the Network's monthly newsletter were requested.

#### **IV. Revised Tri-County CHAIN Study Model (P. Messeri, PhD)**

Changes in the HATMA (HIV/AIDS Treatment Modernization Act) legislation restricted funds that could be used to support the CHAIN study in the Tri-County region (TCR). Projects such as the CHAIN study which do not provide direct services to clients now fall within the administrative support line of the budget. In the TCR the administrative line is relatively small and covers only the salaries of the WCDH Ryan White staff leaving little funds to support a project such as CHAIN. At the urging of a number of people, including Jan Park and Joann Hilger, the New York City Department of Health & Mental Health (NYCDOHMH) decided to support the entire CHAIN study which covers both the five boroughs of NYC and the three counties in the TCR. The newly combined CHAIN model would have a single budget to cover both regions. The portion of the budget that supports the TCR is \$170,000 including \$28,000 of TCR funding this year which was allocated for a possible CHAIN close-out. With the readjustment of the budget a new plan for how to more efficiently and effectively collect and analyze data in the TCR has been developed.

One of the first tasks in the new CHAIN model is to hire a new Field Director. Barbara Bennet moved on to a new position at the end of July and a search is on for a replacement. Fortunately, several of the seasoned interviewers will be retained to resume data gathering once the new Field Director is hired. The interview protocol that they will use will be very similar to interviews that CHAIN has used in the past. The biggest change in the study is in the model design.

The original research design for CHAIN was a longitudinal study in which participants were recruited at the beginning of the study and then followed and re-interviewed each year for as long as the study was funded. In NYC the longitudinal study has been ongoing for 13 years. The participant group (cohort) was refreshed and a new cohort recruited a couple of years ago. In the TCR data has been collected in a longitudinal study for four years. This design has required enormous time and effort which dictates a relatively large budget. In the new CHAIN model a change to the design is being proposed without losing both the power and integrity of the data. In the new design data collection will be spread out over a two-year period and a new cohort of participants will be recruited at each new 24-month wave. The study design will be sequential with a new cohort each time, however, given the smaller recruitment pool in the TCR, it is anticipated that a core of participants will be re-interviewed thus providing a way to look at continuity over a number of years.

In the new design the CHAIN staff will recruit individuals from providers in the area. Each participant will be interviewed once every 24 months. Each year CHAIN will attempt to recruit between 10-20 individuals from about 12 agencies with the hope of recruiting up to 180 participants each year and a possible total of 360 every two years. Agencies will be asked to contact their eligible clients and provide an introduction to the CHAIN study. The CHAIN staff will follow up with letters and phone calls to all of those clients who have agreed to be contacted. At the smaller sites in the TCR recruitment will be conducted only once every two years. When CHAIN staff meet with agency staff, they will also provide them with information about how recruitment among their clients had progressed in the past. Honorarium will continued to be offered to agencies/staff that agree to work with CHAIN. Each agency is eligible for up to \$1,000 to be used to support staff time and effort in the recruitment process which should start as soon as January 2008.

## **Part A (formerly Title I) Steering Committee Meeting**

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In addition to the initiation of the new CHAIN model, there were a few tasks left over from last year that are now being completed. Three reports based on WAVE 4 data are being finalized and presentations are scheduled for the Steering Committee and other working groups.

- On October 9<sup>th</sup>, Dr. Angela Aidala presented findings on the effects of unstable housing on people living with HIV/AIDS in the TCR. Included in her report were the combined effects of poor housing and transportation needs unique to people living in the less urbanized areas of TCR. Basil Reyes reported that there was a significant relationship between unstable housing, lack of transportation and the ability of people to obtain good and consistent medical care. Lack of stable housing was closely linked to poor medical outcomes.
- At the next Steering Committee meeting on November 14<sup>th</sup> Dr. Peter Messeri will present the most recent findings on the needs and gaps in services in the TCR. These data are helpful in the planning for new services in the TCR. The data also might be helpful at an agency level as a support for quality management projects.
- Dr. Messeri will also update the Health Committee on the findings from the Medical Components Survey at the November 28<sup>th</sup> meeting.

In the future all of the reports commissioned by the Planning Council in NYC will include TCR data as a way to compare and contrast the utilization of services in urban settings and suburban and rural areas. The TCR will also have the CHAIN data available for quick analyses and memos that will answer specific questions on an as-needed basis.

### **V. Part A Updates/Issues (T. Petro)**

#### Year 17 (3/1/07 – 2/28/08) Base Enhancements

An updated enhancement spreadsheet was distributed indicating amounts agreed to date by the Steering Committee to be allocated to several categories. Westchester County Department of Health (WCDH) is in negotiations with food, legal, mental health and transportation services providers in order to finalize budget modifications to amend contracts with enhanced funding. (The housing providers declined enhancements this year.) Also, the total amount of funding available for all the enhancements is still not determined, as the first year's round of budget modifications have been received, but not all have been approved. Several providers are proposing that budgets be taken down. WCDH was given the flexibility by the Committee to increase the food enhancement category with newly identified dollars, with funding unable to be reallocated for enhancements to be allocated to ADAP. Once finalized, WCDH staff will report back to the Steering Committee regarding the enhancement amounts added to each category and any unencumbered funds left over for a possible ADAP allocation.

#### Year 18 (3/1/08 – 2/28/09) Base Application

The guidance for the Year 18 Part A application has been received by NYCDOHMH. Again, Mike Isbell has been retained by the City to write the application. The collection of information and data is underway. The application is due November 5, 2007 with awards likely to be made on or about March 1, 2008.

#### Medical Case Management (including Treatment Adherence) Request for Proposals

The RFP was released on September 19 with proposals due October 31. Several recipients have submitted questions about the RFP which are due on October 17. An RFP "supplement" will be issued shortly thereafter to all RFP recipients on record so that all questions and answers are equally shared.

### HATMA Underspending Penalties

A copy of the Health Resources & Services Administration (HRSA) Law & Policy Notice 07-09 “The Unobligated Balances Provision” was distributed for discussion. The notice summarizes penalty language included in the newly reauthorized Ryan White legislation and advises how HRSA intends to implement the new policy. In brief, underspending in excess of 2% of the formula award will result in a corresponding reduction in the Year 19 (3/1/09 – 2/28/10) grant award and the EMA will be disqualified from receiving Year 19 supplemental funding. (The supplemental award accounted for 25% of the current-year award.) Underspending of 2% or less of formula funding may be requested for carryover, but any supplemental underspending will be taken back by HRSA for national redistribution. Thus, it was noted how important it is this year to get the best control of spending ever; NYCDOHMH and WCDH are discussing new options to minimize underspending. (The new policy is not applicable to Minority AIDS Initiative funding which is allocated in a different fiscal year.)

### Year 16 (3/1/06 – 2/28/07) ADAP Allocation

A correction was made regarding the amount of Year 16 funding allocated to ADAP that was discussed at the last meeting. In addition to the \$147,104 in carryover, the Steering Committee also committed \$66,000 in unencumbered Year 16 award funds to ADAP for a total allocation of \$213,204.

## **VI. New Business**

### Ryan White Appropriations (J. Park)

The Congressional mark-up of Year 18 Ryan White appropriations has been completed with more funding being appropriated next year by the House than the Senate. No conference committee has yet convened to reconcile the differences and the President is threatening to veto legislation which increases funding beyond the White House request.

### Stop AIDS in Prison

The community is being urged to advocate for the passage of H.R.1943: Stop AIDS in Prison Act of 2007 which would provide for routine non-mandatory (opt out) HIV counseling and testing at entry and at release from federal prisons. The bill passed the House and goes on to the Senate for a vote later this month.

**The Next Steering Committee Meeting scheduled for Wednesday, November 14, 2007, 10:00 AM – 12:00 PM at the Westchester County of Community Mental Health, 112 East Post Road, Room 217, White Plains.**