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County Executive

Department of Health

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Commissioner

**TRI-COUNTY RYAN WHITE HATMA
PART A STEERING COMMITTEE MEETING
Wednesday, January 9, 2008
Planned Parenthood – White Plains Center**

APPROVED MINUTES

Members Present: T. Aliotta, V. Alvarez, D. Anderson (for K. Scott), J.M. Angelo, C. Archbald MD, B. Bento-Fleming, S. Brandon, C. Brazil, D. Capasso, C. Carroll, M. Donoghue MD, A. Hardman (for C. Burwell), K. Henry, B. Ilardi, R. Maher, J. Park, M. Piazza, R. Schiffrin, D. Scholar, H. Sherwin, A. Shurin, S. Wayne, and G. Yarn

Members Absent: M. Bannister, L. Beal, H. Fitzgerald, D. Kittell, R. Leandre, S. Levine MD, M. Littles, J. McGovern, R. Nathan, A. Paige-Bowman, T. Payne, S. Pemberton, K. Slade, L. Tackley, and M. Velazquez

Guests Present: D. Booker (Sharing Community), K. Bryant (WCDH), E. Caprari (WCDH), A. Friedman (NYSDOH), E. Nemes (WCDH), S. Sullam (RCDOH), T. Otisi (VOA), and C. Serunkuuma (RCDOH)

Staff Present: J. Lehane and T. Petro

I. Approval of November 14, 2007 Steering Committee Minutes

A motion (R. Maher, D. Capasso) to approve the minutes with corrections (page 5, MCM review panel will convene in early *December 2007*) passed with two abstentions.

II. Announcements

- World AIDS Day (WAD) was on Saturday, December 1, 2007. Rockland County HIV/AIDS Consortium, noting that the traditional memorial service on WAD had been poorly attended in past years, decided instead to reach out to youth by doing HIV testing and counseling at Rockland Community College. The event was a great success and the Consortium has been invited back to do HIV education, testing and counseling at the college on a monthly basis.

- On December 13th the Westchester AIDS Council and the Westchester County Department of Health (WCDH) sponsored a WAD symposium on leadership in the community and HIV prevention. The event was well attended with over 125 participants. Pernessa Seele, founder of Balm and Gilead, was the keynote speaker. Other facilitators held breakout sessions and presented on leadership and connecting with several special populations. They inspired everyone to take action and pointed out that leadership should begin from within the community, in places such as churches, schools, and housing organizations. The NAACP reported on the conference in its newsletter, noting that it was nice to see a community approach to HIV/AIDS education.
- The City of Mount Vernon hosted its annual WAD commemorative city hall ceremony. More than 200 people also attended a luncheon at Grace Baptist Church where Shirley Daniels from Harlem was the keynote speaker. This was the first Mount Vernon WAD event which included pictures and names of those who have been infected. This was a significant change from past years when people with HIV/AIDS were largely anonymous, sending a powerful message against stigma in the community. BET filmed the events.
- This year for WAD Hudson River HealthCare had a group of adolescents from its HIV program plan and implement their own event on November 28th. The group conducted fund-raising and held a BBQ which provided a venue for HIV education among the teens and families that participated. Jeanette Philips spoke at the event.
- Among the many WAD events in New York City, Mayor Bloomberg hosted an event which honored the fashion designer Kenneth Cole for his efforts to raise HIV/AIDS awareness. Harlem United Hospital also honored those involved in HIV research and the United Nations hosted an AIDS film festival at New York University.
- Planned Parenthood has a new mobile van that will be providing free HIV counseling and testing in the Tri-County region. The positions of HIV Educator and HIV/AIDS Coordinator are vacant. For more information contact Reina Schiffrin at reina.schiffrin@pphp.org or 914-467-7300.
- A flyer was distributed announcing a discussion on January 23 at Pace Law School in White Plains about the 25th anniversary of Roe vs. Wade with author and activist Dr. Ken Edelin who was indicted for manslaughter in 1974 for performing a legal abortion.

III. Update Reports

Living Together (V. Alvarez/G. Yarn)

- There was no December LT meeting. The next meeting will be on January 24, 2008 with a presentation on the lifecycle of HIV.
- A new women's support group facilitated by Elizabeth Outes of the mental health program at Family Services of Westchester (FSW) is expanding and V. Alvarez and G. Yarn will also facilitate a new men's group beginning this month. Anyone interested should contact Elizabeth at 914-964-6767.
- LT is no longer publishing its newsletter, however HIV disease and treatment information is passed along at monthly LT meetings. An effort will be made here forward to include the meeting topic in the monthly calendar of HIV/AIDS-related meetings distributed by WCDH.

- The PWA Leadership Training Institute (LTI) will be conducting a three-day training from January 30 to February 1, 2008 (ARCS is the tentative location) on “Becoming Your Own Health Care Advocate.” Hotel accommodations will not be available, so participants must commute to the training each day. To date only three people have signed up for the training which is recommended for everyone, especially those who have been newly diagnosed.

Part B (S. Brandon)

- The December Case Management Supervisors training was well attended with more than 30 local case managers and supervisors participating.
- On January 23rd the Mental Health and Substance Use (MHSU) committee will sponsor a forum on creating and maintaining healthy relationships. Victor Alvarez and Julie Lehane will present. For more information contact Sarah Porter at 914-428-6300 ext. 233 or lhrcarenetwork@gmail.com.
- The MHSU committee members are also planning to host another forum in March on complementary treatments.

IV. Presentation: Tri-County Partner Notification Assistance Programs (E. Caprari)

In June 2000, physicians and laboratories were required to report to the State Health Department all cases of HIV infections and HIV-related illnesses in New York State (NYS). Since 1983, physicians and laboratories had been required to report AIDS cases. With the advent of improved HIV medical treatment people have been living for many years with HIV infection before they develop AIDS. Therefore changing the reporting process to include all cases of HIV infection and HIV illness became a better measure of the size and makeup of the HIV epidemic in NYS. With the reporting (by name) of each HIV case, physicians and laboratories had to enhance their efforts at partner/spousal notification. The new reporting program requires providers to:

- Report to the Health Department the names of all known sexual and needle-sharing partners, including spouses, as well as the names of any partners the patient wishes to have notified.
- Report information about partner notification plans and the results of screening for domestic violence for each reported partner on the “Medical Provider HIV/AIDS and Partner/Contact Form.”

The law states that there is no penalty if the patient chooses not to name partners or engage in partner notification assistance activities. Upon initial diagnosis of HIV infection, providers must discuss in post-test counseling the importance of partner/spousal notification and work with the patient to develop a plan for notifying exposed partners. Providers should explain the three options for partner notification: 1) notification of the partner by the NYSDOH PartNer Assistance Program (PNAP) or, in NYC, the Contact Notification Assistance Program (CNAP); 2) assisted notification of the partner in which the patient notifies the partner with the assistance of a willing provider or a public health counselor of PNAP; and 3) self-notification in which the patient notifies the partner him/herself. PNAP counselors never reveal the name or any information about the HIV positive patient (index case) to the partner(s) during partner notification. Since HIV infection is life-long, providers routinely discuss with patients the importance of partner notification. These discussions often focus on the importance of avoiding transmission to new partners and may include referring the patient for primary and secondary prevention services at a community-based organization that provides such services.

The Westchester and Rockland Departments of Health have PNAP programs providing services to people who have been newly diagnosed with HIV. Putnam County, due to the small number of new HIV cases per year, uses the services of NYSDOH to support partner notification for their county residents.

When a patient is concerned about possible domestic violence the PNAP counselor will contact the provider and patient to plan for a safe way to notify the partner. One option is for the PNAP counselor to be present when the patient discloses the HIV status to the partner. Another option is for the physician/provider or the PNAP counselor to tell the partner without the patient present and not reveal any names. Finally, notification of the partner can be put off until the patient feels that it is safe to disclose. These and other options are discussed with the patient before any action is taken. For more information contact NYSDOH PNAP at 800-541-2437 or go to the state website at www.health.state.ny.us. In Westchester County contact PNAP supervisors Evonne Nemes (914-813-5220) or Marylee Matturro (914-813-5216); in Rockland County contact Charles Serunkuuma (845-364-2992) and for Putnam County contact Anne Friedman at NYSDOH (914-654-7158).

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

Medical Case Management (MCM) Awards

The review panel met and recommended that awards be made to 13 agencies that submitted proposals for Medical Case Management Services (including Treatment Adherence) programs. If the Tri-County Part A award optimistically is at least level-funded next year there would be approximately \$2 million in funds to award to the programs. Once all the contracts have been executed all of the MCM providers will be brought together to discuss the implementation of the new MCM model and to facilitate cooperation and coordination across agencies and minimize duplication of services for clients.

Medical Case Management Intake/Assessment Instruments

The Case Management, Mental Health and Substance Use, Housing, and Health committees are all working on the development of standard intake, general assessment, and treatment adherence assessment instruments. The final draft of each of the assessment instruments should be available by March 2008.

Universal Referral/Linkage Agreement

An ad hoc committee will meet later this month to draft a single universal Tri-County referral and linkage agreement which may replace the multiple agreements that agencies currently issue and renew. The challenge is to develop a document as well as a process that will honor the confidentiality of the client whereby client information can be shared across agencies and among staff within agencies and at the same time make medical and social services information available to case managers. It is anticipated that there will be numerous procedural and legal issues that will have to be addressed.

Year 18 Appropriations

A final 2008 federal appropriations spreadsheet from NASTAD (National Alliance of State & Territorial AIDS Directors), which included funding for HIV, hepatitis and STD programs, was distributed. Jan Park reported that an omnibus (multi-federal-agency) bill which included the Department of Health and Human Services/HRSA, passed and was signed by the President. A modest increase of \$29 million for Ryan White Part A – well below the community request of \$681.6 million – was realized due largely to the efforts of House Speaker Nancy Pelosi (D-CA). The additional funds are earmarked for EMAs like San Francisco that took substantial cuts in Year 17. New York is not likely to see an increase in its Part A award in Year 18. Part B (state) funding was reduced by \$19.2 million nationally while ADAP saw an increase of \$18.95 million.

Year 17 (3/1/07 – 2/29/08 Carryover Waiver)

The new Ryan White HATMA legislation requires that each EMA submit an estimated carryover waiver amount to HRSA two months in advance of the close of the fiscal year. NYCDOHMH submitted a Year 17 amount of \$1,497,334, i.e., the 2% maximum of the formula award which without penalty may be remitted for spending in the EMA in Year 18. (An amount over 2% may disqualify an EMA for applying for supplemental funding in a future year.) The funding was earmarked in the waiver submission for ADAP and includes the Tri-County carryover estimate of \$75,000 (2 % of the region's formula grant). If, upon Year 17 closeout, there is additional underspending, it will be reported as "supplemental" award funds which will not be remitted to the EMA for spending, but will be reallocated instead nationally by HRSA. WCDH staff are working closely with Tri-County providers to maximize Year 17 spending. The final closeout will not take place until May.

Core/Non-Core Waiver

A copy of a draft policy published in November in the federal register was distributed. It included protocol and procedures for submitting a core/non-core waiver, i.e., an application to spend less than 75% of funding on core medical care and, consequently, more than 25% of non-core supportive services. Though the NY EMA does not intend to apply for a waiver, the community co-chair of the HIV Planning Council, on behalf of the Council, nonetheless submitted a letter to HRSA (also distributed) during the 30-day comment period protesting the policy, especially the onerous requirement that an EMA must document that core services are "being utilized." The HATMA legislation only states that an EMA must demonstrate that core services "are available."

SONI (Severity of Needs Index)

HRSA held its initial conference call with EMAs about its plan, which is mandated under the new legislation, to develop a SONI in the next year --- an objective measure of how seriously an EMA needs supplemental funding. Such a case has been made each year in the narrative portion of the annual Part A application for funding and New York has done exceptionally well. At this time it does not appear that the SONI will be finalized in time to affect Year 19 (3/1/09 – 2/28/10), the last year of the HATMA legislation, though it may be incorporated into a reauthorized Ryan White law beginning 3/1/10.

Priority Setting & Resource Allocation Committee

This NYC-based committee, which makes funding recommendations to the NY HIV Planning Council, will be reviewing its "ranking" tool developed several years ago which was used to score services. New criteria for scoring are likely to be established and all service priorities are due to be re-ranked for Year 19. The Tri-County region again may piggy-back and use the new NYC tool to score its regional service priorities.

The Next Steering Committee Meeting is scheduled for Wednesday, March 12, 2008, 10:00 AM – 12:00 PM at Planned Parenthood – White Plains Center.