



# Ryan White Planning Council

New Haven & Fairfield Counties

Leif Mitchell & Roberta Stewart, Co-Chairs

## Strategic Planning & Assessment Committee Meeting Summary - FINAL FAST FACT PAGE

**Meeting Date:** Thursday, August 7, 2008 scheduled from 2:00 to 4:00 pm  
**Start Time:** 3:00 pm  
**End Time:** 4:20 pm  
**Location:** Hill Health Center, New Haven  
**Presiding Chair:** Roberta Stewart  
**Recorder:** Sara Nichols, Planning Council Staff

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### Summary of Committee Business Votes

- Minutes Approved: 7/3/08
- Motion to present updated service definitions to the 8/15/08 Planning Council meeting for a vote.
- Motion to extend the meeting

### Council Member Assignments

- Review 2008 Directives and past meeting minutes for consideration of the development for 2009 Directives.

### Staff Assignments

- Post approved agenda and meeting minutes for 7/3/08 on website ([www.ryanwhitecare.org](http://www.ryanwhitecare.org))
- Prepare meeting minutes for 8/7/08.
- Prepare Feedback Summary from Planning Council Meeting on August 15, 2008

### Attendance Record - 2008

	SPA Committee Members	1/15	2/19	3/26	4/15	4/24	5/1	5/15*	6/5	7/3	8/7	9/4	10/2	11/6	12/4
1.	Jerod Geter	•			•	•	•		•		•				
2.	Jerome Harris									•					
3.	Jennifer Loschiavo								•	•	•				
4.	Leif Mitchell	•	•	•	•	•	•	•		•	•				
5.	Roberta Stewart	•	•	•	•	•	•	•	•	•	•				
6.	Dennis Torres				•	•	•	•	•	•	•				
7.	Javier Velez	•	•	•	•		•	•	•	•					
8.	Thomas Kidder	•		•	•	•	•	•	•	•	•				
9.	Robert Sideleau	•	•	•	•	•	•	•	•	•	•				
	Ryan White Office	•	•	•	•	•		•	•		•				
	Planning Council Staff	•	•	•	•	•		•	•	•	•				
	PC Members & Public Participants	8/7/08 –Ric Browne, Charlotte Burch, Rev. Alex Garbera, Christopher Cole, Brian Datcher, Gail Glenn													

\* Meeting attendance policy does not apply for special meetings per By-Laws.



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### **(1.0) Welcome, Moment of Silence, and Introductions**

Roberta Stewart, Co-Chair of the Committee, called the meeting to order at 3:00 p.m. and welcomed members of the committee and the public. She asked that the participants silence their cell phones for the duration of the meeting and led the group in a moment of silence to remember and respect all individuals whose lives have been touched by HIV/AIDS. She reminded the attending members that all meetings are open to the public and advised that care should be used when sharing any personal or private information.

### **(2.0) Co-Chair Announcements**

Roberta Stewart announced that the goal of this meeting was to (1) Review PC Feedback from the 7/11<sup>th</sup> meeting; (2) To determine service definitions for Health Insurance Assistance and Medication Assistance (local HIV meds), and (3) to complete the list of Directives for the Ryan White Office.

### **(3.0) Approval of Meeting Summary**

(3.1) The Committee reviewed minutes from the July 3<sup>rd</sup> meeting. A motion was made by Dennis Torres to approve the meeting minutes. The motion was seconded by Ric Browne.

(3.2) Discussion followed. Leif Mitchell stated that there is a discrepancy with the order of the discussion as indicated in the minutes. Committee members stated their perception of what they thought was the order and outcome of the July 3<sup>rd</sup> discussion. Minute changes were noted on pages 3, 4, and 5. Roberta Stewart called the motion to a vote. Minutes were approved with the noted revision: 5 approved; 2 opposed; 1 abstained (see voting record).

(3.3) Dennis Torres asked if the case of the number of service categories was closed. Robert Sideleau responded that the minutes, as corrected and approved, reflect the recollection of the committee and now we move on. Jeff Daniel stated that as a point of information, the list of service categories has been voted and approved at the Planning Council meeting on July 11<sup>th</sup>.

### **(4.0) Old / New Business**

(4.1) Feedback Summary: Roberta Stewart referred to handout of the feedback summary from July 11<sup>th</sup> Planning Council meeting. She stated that there was only a 67% response rate and asked for the Planning Council co-chairs to make a reminder announcement at the next meeting for people to complete this form. Ms. Stewart recommended for committee to review the summary form and comment on any themes that stand out.

(4.1a) Brian Datcher stated that the comments seem to indicate that there is a lot of tension within the council. Jerod Geter stated that he felt the co-chairs did a good job to clear the air of tension.

(4.1c) Roberta Stewart stated that she was not sure how to address the tension issue. She suggested we could all communicate more openly, to allow participants to feel heard. She stated we are all here for the right reasons and to be supportive, not derail. Further, she state that the council business should be more transparent.

(4.1d) Dennis Torres recommended that the executive committee look at the theme of unrest and may consider a team building exercise.

(4.1f) Jeff Daniel stated that committee needs to get out of the way to give people the benefit of the doubt. Everyone is so passionate about the work and everyone is trying to do the best they can. Does this make the priority focus of the council's work? He stated the council is responsible for setting service priorities, resource allocation, and keeping people living.

(4.1g) Roberta Stewart made the recommendation that the Executive committee to work on rebuilding confidence in the team and the system.

(4.1h) Tom Butcher noted the time and the items on the agenda that still need to be accomplished.



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(4.2) Service Definitions: Roberta Stewart referred to the handout regarding the service definitions for the AIDS PHARMACEUTICAL ASSISTANCE (LOCAL) and HELATH INSURANCE PREMIUM & COST SHARING ASSISTANCE. She instructed the committee to review the handout and noted that all service definitions come from HRSA and that the Planning Council has the option to use the exact language from HRSA or make the definition tighter (more restrictive). However, the council cannot make a definition broader.

(4.3) Definition: AIDS Pharmaceutical Assistance (local).

(4.3a) Roberta Stewart stated the intention of this service is that the assistance was not to pay for medications for ongoing period of time. This is to assist a person who has a gap of medical coverage and still needs to get their medications.

(4.3b) Leif Mitchell stated that this service definition was brought up because on the needs assessment there was an identified gap for non-HIV medications and the committee wanted to see if that could be covered in some way.

(4.3c) Nick Boshnack stated that the HRSA definition states only HIV/AIDS medications are covered, whereas the current Planning Council definition states HIV/AIDS 'related' medications are allowable.

(4.3d) Tom Butcher responded that the council is not able to have a broader definition than HRSA, thus the council would need to remove the 'related' medications from the definition.

(4.3e) Dennis Torres stated that there may have been a lag time from when the new modernization act was passed to when the definitions were developed.

(4.3f) Roberta Stewart stated CADAP does include HIV/AIDS related medications on the formulary, however HRSA looks to have made the definition stricter.

(4.3g) Brian Datcher asked what would be the trigger to need to access these funds. Nick Boshnack responded that although CADAP is a good program and inclusive, there are emergencies when a gap in coverage occurs.

(4.3h) Alex Garbera suggested a council member make the motion to use the HRSA definition.

(4.3i) Leif Mitchell stated the reason for looking at this definition was to cover non-HIV medications and asked if there was another service category or other resources that could cover this?

(4.3j) Dennis Torres asked what the definition of HIV/AIDS medications is? Robert Sideleau stated he would ask the HRSA project officer to clarify.

(4.3k) Leif Mitchell made the motion to use the following definition, Robert Sideleau seconded the motion. Motion passed, 7 yes, 0 no, 1 abstention – see vote record.

***AIDS Pharmaceutical Assistance (local)*** includes local pharmacy assistance programs implemented by Part A or Part B Grantees to provide HIV/AIDS medications to clients. This assistance can be funded with Part A grant funds and/or Part B base award funds. Local pharmacy assistance programs are not funded with ADAP earmark funding. The lowest reimbursement rate available must be applied to the purchase of any medications with Part A funds (e.g. Medicaid, Federal 340b Program, or similar program). Short-term medication payments must be carefully monitored to assure limited amounts, limited use, and for limited periods of time.

*Changes: (1) deleted HIV/AIDS "related" medications to match HRSA's definition. Although CADAP includes HIV/AIDS related medications on its formulary, the Planning Council must use HRSA's definition as a base guideline (e.g. the TGA definition cannot be more flexible than HRSA's definition). (2) Deleted text from previous Planning Council definition - "This assistance provides short-term payments to purchase FDA approved HIV/AIDS drugs." This is assumed now. (3) Added "the lowest reimbursement rate available". This used to only indicate Medicaid rate.*



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(4.4) Roberta Stewart noted the time and asked for a motion to adjourn or extend the meeting. Leif Mitchell motioned to extend the meeting 15 minutes, Tom Kidder seconded the motion. Motion passed: 6 yes, 1 no, 1 abstention – see vote record.

(4.3) Definition: Health Insurance Premium & Cost Sharing Assistance.

(4.3a) Leif Mitchell made a motion to use the HRSA definition, Robert Sideleau seconded the motion. Discussion followed.

(4.3b) Tom Butcher expressed concern about who this service would serve, what the financial eligibility is, and what level of service would be provided.

(4.3c) Roberta Stewart suggested to make this definition tighter to include only co-pays because this could extend the available funds farther. In addition, there are resources available for cobra under CADAP (Connecticut AIDS Drug Assistance Program).

(4.3d) Nick Boshnack suggested using the same eligibility criteria for CADAP.

(4.3e) Roberta Stewart restated the motion that was on the table with the option to include just co-pays.

(4.3f) Dennis Torres stated that this item came up on the needs assessment unrequested, so there is a need for co-payment assistance. He stated that he had brought this issue up for years.

(4.3g) Robert Sideleau stated that federal dollars cannot be used to assist those in spend down program. CONNPACE yes, CADAP no. He stated that he would ask Afrika to clarify the spend down and federal assistance.

(4.3h) Leif Mitchell withdrew the motion, Robert Sideleau second the withdrawal.

(4.3i) Tom Butcher stated that eligible needs to be defined. Dennis Torres suggested using the same eligibility criteria as emergency financial assistance. Nick Boshnack stated that providers currently make the determinations on who qualifies based on the client situation.

(4.3k) Tom Butcher asked if there should be a service cap, for example of \$500. Dennis Torres suggested allowing the local areas determine the caps based on their actual award.

(4.3l) Roberta Stewart asked the committee if there is agreement of using the eligibility forms as currently used for EFA and allow the local areas determine caps. Tom Butcher suggested there should be a uniform cap limit and further guidance is needed on this issue.

(4.3m) Roberta Stewart called for a motion. Robert Sideleau made the motion to use the following definition, Leif Mitchell seconded the motion. Motion passed, 6 yes, 1 no, 1 abstention – see vote record.

**Health Insurance Premium & Cost Sharing Assistance** is the provision of financial assistance for eligible individuals (defined as Ryan White financial eligibility of 300% of Federal Poverty Level) living with HIV to maintain a continuity of health insurance or to receive medical benefits under a health insurance program. These funds are allowable for co-payments only. Short-term payments must be carefully monitored to assure limited amounts, limited use, and for limited periods of time.

*Note: This is a new service category prioritized for the New Haven Fairfield County TGA for fiscal year 2009. This item was a demonstrated need of consumer respondents in both the In-Care needs assessment (2008) and the Out of Care needs assessment (2007), however with considerations for maximizing resources for consumers, the proposed definition is more rigorous than HRSA's definition, which includes premium payments, risk pools, and deductibles.*



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### (5.0) Announcements

**Next Meetings:** Thursday, September 4, 2-4pm in Bridgeport at Optimus Health Care

### (6.0) Adjournment

Roberta Stewart stated that the Directives task was not completed at this meeting. Roberta Stewart thanked committee members for their work and adjourned the meeting at 4:20 pm.

### Voting Record

	PC Committee Members	7/3/08 Meeting Minutes	Motion for Service Def. #1	Motion to extend the meeting 15 minutes	Motion for Service Def. #2
1.	Jerod Geter	Y	Y	Y	Y
2.	Jerome Harris	NP	NP	NP	NP
3.	Jennifer Loschiavo	Y	Y	Y	Y
4.	Leif Mitchell	Y	Y	Y	Y
5.	Roberta Stewart	AB	AB	AB	AB
6.	Dennis Torres	Y	Y	Y	Y
7.	Javier Velez	NP	NP	NP	NP
8.	Thomas Kidder	Y	Y	Y	Y
9.	Robert Sideleau	O	Y	Y	Y
10.	Ric Browne	NP	NP	NP	O
11.	Charlotte Burch	O	Y	O	NP

Y = yes; O = opposed; AB = abstention; NP = not present at time of vote; NV = no vote