



JOINT PRIORITIES COMMITTEE
Meeting Agenda
Wednesday, January 16, 2013 at 12:30 p.m.

Carla Taylor-Bennett, Part A Co-Chair

Lisa Agate, Part B Co-Chair

- 1. CALL TO ORDER**
- 2. WELCOME AND INTRODUCTIONS**
 - a. Review Meeting Ground Rules, Sunshine and Public Comment Requirements
 - b. Committee Member and Guest Introductions
 - c. Moment of Silence
- 3. APPROVALS**
 - a. Meeting Agenda 1/16/13
 - b. Meeting Minutes 12/19/12
- 4. UNFINISHED BUSINESS**
 - a) Update on ad Hoc PCIP Subcommittee
INFORMATION ITEM: Subcommittee chair will give an update on information covered during the group's second meeting, and a look forward at upcoming steps.
- 5. NEW BUSINESS**
 - a) FY 2012 Allocation Sweeps (HANDOUT A)
ACTION ITEM: The Grantee will supply a list of revised allocations among the service categories, to be made for FY 2012. The grantee may also have an update on whether there will be a carryover.
- 6. GRANTEE REPORTS**
 - a. Part A
 - b. Part B and ADAP (HANDOUT B)
- 7. PUBLIC COMMENT**
- 8. AGENDA ITEMS FOR NEXT MEETING:** February 20, 2013 at 12:30 p.m. **VENUE:** BRHPC
- 9. ADJOURNMENT**



JOINT PRIORITIES COMMITTEE
 December 19, 2012 at 12:30 p.m.
 200 Oakwood Lane, Suite 100, Hollywood, FL, 33020
MEETING MINUTES

ATTENDANCE					
#	Members		Present	Absent	Guests
1	Taylor-Bennett, C.	Part A Co-Chair	X		Dyer, L.
2	Agate, L.	Part B Co-Chair	X		
3	Ferrer, M.			E	
4	Gammell, B.		X		
5	Grant, C.		X		
6	Hayes, M.			X	Grantee Staff
7	Jackson, R.			X	Jones, L. (Part A)
8	Katz, H. B.		X		Mercer, A. (Part B)
9	Reed, Y.		X		
10	Schickowski, K.		X		HIVPC Support Staff
11	Siclari, R.		X		Rosiere, M.
12	Wynn, J.		X		Eshel, A.
13	Green, D.		X		Crawford, T.
	Quorum = 8		10	3	LaMendola, B

1. CALL TO ORDER (*Please sign-in*)

The Part B Co-Chair called the meeting to order at 12:48 p.m.

2. WELCOME, INTRODUCTIONS & MOMENT OF SILENCE

The Part B Co-Chair welcomed everyone. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. Member, staff and guest introductions were made. A moment of silence was observed.

3. APPROVALS

a. Approval of Today's Agenda

Motion #1:	To Approve the 12/19/12 Meeting Agenda
Proposed by:	Brad Gammell
Seconded by:	Joey Wynn
<i>Amendment</i>	Add Carryover report under new business
Action:	Passed Unanimously

b. Approval of 11/19/12 Meeting Minutes

Motion #2:	To Approve the 11/19/12 Meeting Minutes
Proposed by:	Brad Gammell
Seconded by:	H. Bradley Katz
Action:	Passed Unanimously

Joint Priorities Meeting Minutes 12/19/12

VISION: To ensure the delivery of high quality comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care

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4. UNFINISHED BUSINESS

a. **Update on ad Hoc Pre-Existing Condition Insurance Plan Subcommittee**

The PCIP Chair reported that the ad-Hoc PCIP Subcommittee has an issue with establishing quorum in order to hold a meeting. The PCIP chair has asked By-Laws to consider loosening attendance rules for subcommittees. The PCIP subcommittee will continue meeting with or without quorum until By-Laws makes a decision.

5. NEW BUSINESS

a. **Carryover**

Part A Grantee reported he estimates there may be a carryover amount at the end of the fiscal year. He requested approval from Joint Priorities as to where the money would be allocated. He anticipates a potential carryover of \$505,900 for Part A-funded services and \$150,000 for MAI (Minority AIDS Initiative) services. For Part A services, the Grantee is seeking for carryover dollars to go into outpatient medical services instead of dental, where it went in the past, because there will be more of a need there. For MAI, the Grantee recommended putting carryover dollars into the MAI medical case management service category.

Motion #3:	To allocate Part A carryover to outpatient medical services
Proposed by:	Rick Siclari
Seconded by:	Doretta Green
Action:	Passed

Motion #4:	To allocate MAI carryover to MAI medical case management
Proposed by:	Claudette Grant
Seconded by:	Doretta Green
Action:	Passed (3 abstentions)

b. **Assessment of the Administrative Mechanism**

The Part A Grantee presented a report for the assessment of administrative mechanism, which is a grant requirement and the Planning Council’s way of evaluating the Grantee. The report covers two required evaluations of the process, covering how quickly the Grantee pays providers and issues service contracts. In January, a survey will be sent out to the Planning Council in order to assess staff support and the grantee. The Grantee presented information for the first three quarters of this fiscal year, with the third quarter being partially completed since November’s invoice is excluded. March 2012-May 2012, June 2012-August 2012, and September 2012 and October 2012 were reviewed. All service categories were shown, with data illustrating the amount of time it takes the grantee’s office to approve, the time frame for accounting to pay, and the total time period. The Grantee noted that payments were slower in the first quarter, but improved after that. Committee members recommended that Broward County investigate making electronic payment transfers versus cutting checks to providers. Committee members agreed that the report showed improvement as the year progressed. Therefore, the members offered no corrective actions for the grantee.

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c. Nominate Dionne Proulx to be a member of Joint Priorities

Motion #5:	To recommend Dionne Proulx to be a Part A member of the Joint Priorities Committee
Proposed by:	Joey Wynn
Seconded by:	Rick Siclari
Action:	Passed

d. Presentation on the Affordable Care Act and Ryan White (HANDOUT A)

Committee member Joey Wynn gave an in-depth presentation on the Affordable Care Act and its effect on the Ryan White program. A video was shown that provided an overview of healthcare reform. The video is located at: <http://link.brightcove.com/services/player/bcpid1875349721?bctid=608833805001>. He led the Committee through a PowerPoint presentation that reviewed information such as: budgeting decisions that affect HIV/AIDS programs, estimated impact on those who will be insured due to the ACA, Medicaid expansion and health benefits, including drug coverage and new preventive services.

e. Viral Load Report as Eligibility Requirement

The Joint Priorities Committee members discussed a recommendation from Joint Planning that all newly diagnosed clients/new clients to Part A services must bring in viral load and T-cell reports within 6 months of intake to be eligible for services. The goal is to gather data to establish a community viral load. The members discussed the possible ramifications of approving this recommendation such as clients being burdened with the responsibility of submitting their own labs, making the eligibility process more strenuous. Also, members were told Joint Planning will hear a presentation in January from the Health Department on where and how to collect viral load data. The committee decided not to move forward with this recommendation.

6. GRANTEE REPORTS

a. Part A

Part A Grantee relayed information from the “All Titles” Conference regarding the Affordable Care Act and obtaining a partial award, which is 50% of the formula and 50% of MAI, amounting to 36% of the grant award. The grant should be awarded by March 1, 2013.

b. Part B

The written Part B Grantee report was provided detailing expenditures up to October 31, 2012. Non-Medical Case Management conducted 868 eligibility interviews in October. Medication co-payment served 212 clients of which 9 were new to the program. There were 205 clients served in October for Medication Co-Payment and 7 clients served for Mail Orders. Cost avoidance for Medication Co-Payment program for October is \$32,940.31. Total cost savings April – October 2012 is approximately \$129,565. Home Delivered Meals served zero (0) clients. Medical Transportation for October 2012:

Part B Bus Passes: There were 228 (31 day) and 94 (10 ride) distributed in October.

Part A Bus Passes: There were 0 (31 day) and 148 (10 ride) distributed in October.

The bus passes distributed represent a partial number as not every agency picks up bus passes each month.

Joint Priorities Meeting Minutes 12/19/12

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The Part B Grantee reported that a recommendation was made and approved at the HIV Health Services Planning Council meeting to sweep approximately \$69,000 from the Medication Co-Pay program to fund insurance premiums under AICP for clients who have premiums over \$750 in order to assist in an unmet need.

c. **ADAP Update**

The ADAP report through November 26, 2012 was provided: The total ADAP “open” enrollment was 2,885 with 1,858 total ADAP clients being served in the last 30 days. The ADAP Waitlist enrolled 39 clients and the total ADAP/Medicare Part D Enrollment was 176. There were 761 appointments of which 272 (36%) were missed. *Clients Served* is defined as having at least one “pickup” in the period. The category definitions are as follows:

Category A Clients Served = 4 (CD4 < 200 cells/mm³ and/or CD4% < 14%: A diagnosis of AIDS and/or diagnosis of active opportunistic infection and/or diagnosis of HIV-associated nephropathy.)

Category B Clients Served = 10 (CD4 cell count between 201-350 cells/mm³: Persons currently on ARV therapy, persons previously on ARV therapy but therapy was interrupted and treatment naïve clients)

Category C Clients Served = 25 (Treatment naïve clients with CD4 cell count > 350 cells/mm³)

Category D Clients Served = 0 (Unknown/Other)

Clients are removed from the Wait List by medical category in the order of earliest enrollment. This serves as a reminder that clients **MUST** recertify every 6 months or they will lose their position on the Wait List.

7. PUBLIC COMMENT

There was no public comment.

8. AGENDA ITEMS FOR NEXT MEETING: January 14, 2013 at 12:30 p.m. /Venue: BRHPC

- Presentation on Healthcare Reform
- Standing Agenda Items

9. ADJOURNMENT

Without objection, the meeting was adjourned at 3:23 p.m.

Joint Priorities Meeting Minutes 12/19/12

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JOINT PRIORITIES COMMITTEE - ATTENDANCE CY 2012

#	Members	Jan	Feb	Mar	Apr	May	Jun 13	Jun 20	Jul	Aug	Sep	Oct	Nov	Dec	
1	Taylor-Bennett, C	P	P	P	P	P	P	P	P	P		P	P	P	
2	Agate, L.	<i>Interim Chair as of 6/21</i>					P	P	P	A		P	P	P	
3	Ferrer, M.	P	P	P	P	P	P	P	P	P		P	P	E	
4	Gammell, B.	P	P	P	P	P	P	P	P	P		P	P	P	
5	Grant, C.	P	P	P	P	P	P	P	P	P		P	P	P	
6	Hayes, M.	P	P	P	P	P	A	P	P	P		P	P	E	A
7	Katz, H. B.	P	E	P	P	P	P	E	E	P		P	P	P	P
8	Jackson, Rev. R.	<i>Appointed 6/20</i>							A	P		A	A	A	
9	Reed, Y.	P	P	P	P	P	P	P	P	P		P	P	A	P
10	Schickowski, K.	<i>Appointed at August meeting</i>										P	P	P	
11	Siclari, R.	P	P	P	P	E	P	P	P	A		P	P	P	P
12	Green, D.	<i>Appointed 12/13/12</i>												P	
13	Wynn, J	P	A	E	A	P	P	P	P	P		P	P	P	P
Quorum = 8		15	11	13	13	12	11	10	10	10		11	9	10	

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Second Reallocation of FY 2012-13 -- Joint Priorities 1-16-13

Service Category/ # of Providers	Contracted or Allotted \$	Expended Amount	Average Monthly Expenditures	FY 12-13 Projected Expenditures	Potential Reallocation Dollars	Providers' Request	Providers' Return	Grantee Recommended Sweep	Recomm'd Sweep TO	Recomm'd Sweep FROM
Ambulatory (5)	\$6,348,597	\$4,631,449	\$463,145	\$5,557,739	\$790,858	\$253,431	(\$895,532)	(\$642,101)	\$253,431	(\$895,532)
MAI Ambulatory (1)	\$100,000	\$49,981	\$24,991	\$249,907	(\$149,907)	\$0	\$0	\$0	\$0	\$0
Pharmaceuticals (3)	\$453,141	\$373,217	\$37,322	\$447,861	\$5,280	\$56,435	\$0	\$547,995	\$547,995	\$0
Dental (2)	\$2,623,653	\$1,439,079	\$209,543	\$2,514,516	\$109,137	\$0	\$0	\$0	\$0	\$0
Case Management (7)	\$1,145,110	\$892,092	\$89,209	\$1,070,510	\$74,600	\$45,000	(\$42,916)	\$2,338	\$45,000	(\$42,662)
MAI Case Mgt(2)	\$176,644	\$12,162	\$25,235	\$188,806	(\$12,162)	\$0	(\$110,516)	\$0	\$0	\$0
Mental Health (3)	\$336,987	\$275,891	\$30,575	\$366,900	(\$29,913)	\$0	\$0	\$0	\$0	\$0
MAI Mental Health (2)	\$128,418	\$62,213	\$4,615	\$71,443	\$56,975	\$24,212	\$0	\$0	\$0	\$0
Substance Abuse (2)	\$357,889	\$301,962	\$30,196	\$362,354	(\$4,465)	\$0	(\$15,000)	(\$15,000)	\$0	(\$15,000)
MAI Substance Abuse (1)	\$513,581	\$287,611	\$35,951	\$395,465	\$4,535	\$0	\$0	\$0	\$0	\$0
Food Bank (1)	\$68,103	\$41,080	\$41,080	\$41,080	\$27,024	\$0	\$0	\$153,000	\$153,000	\$0
Food Voucher (1)	\$87,787	\$0	\$0	\$0	\$87,787	\$0	\$0	(\$37,000)	\$0	(\$37,000)
CIED (1)	\$475,513	\$311,821	\$31,182	\$374,186	\$101,327	\$0	(\$8,000)	(\$8,000)	\$0	(\$8,000)
MAI CIED (1)	\$290,957	\$290,957	\$29,096	\$349,148	(\$58,191)	\$0	\$0	\$0	\$0	\$0
Outreach (1)	\$67,000	\$44,833	\$4,981	\$54,796	\$12,204	\$0	\$0	(\$8,232)	\$0	(\$8,232)
Legal Assistance (1)	\$124,426	\$113,330	\$11,333	\$135,996	(\$11,570)	\$7,000	\$0	\$7,000	\$7,000	\$0
Total Part A Funds	\$12,088,206	\$8,424,754	\$948,566	\$10,925,938	\$1,162,268	\$361,866	(\$961,448)	\$0	\$1,006,426	(\$1,006,426)
Total MAI Funds	\$1,209,600	\$702,924	\$119,888	\$1,254,769	(\$158,750)	\$24,212	(\$110,516)	\$0	\$0	\$0
Total Funds	\$13,297,806	\$9,127,678	\$1,068,454	\$12,180,707	\$1,003,518	\$386,078	(\$1,071,964)	\$0	\$1,006,426	(\$1,006,426)
Food Bank Bulk Purchase	\$1,136,271	419,991	\$46,666	\$513,322	\$524,842					
Food Voucher Bulk Purchase	\$98,107	21,183	\$2,118	\$21,183	\$76,925					
Recommended Revised Food Allocation		Projected FY13-14		\$715,282	\$190,440					

Projections based on reimbursement requests submitted by providers for the months of March-December. Figures represent expenditures or reimbursements for services funded in FY 12-13.

**Ryan White Part B
Expenditure Report**

Service Category	Part B 2012-2013 Allocated	Part B 2012-2013 November / Encumbered	Part B 2012-2013 Monthly Average Left August	Part B 2012-2013 YTD Spent/ Encumbered	Part B 2012-2013 % Encumbered	Part B 2012-2013 (% Left)	Part B 2012-2013 (Balance)
Home Delivered Meals	\$2,479	\$0	\$489	\$525	21.2%	78.8%	\$ 1,954
Medication Co-Pay	\$610,000	\$14,261	\$105,018	\$189,930	31.1%	68.9%	\$ 420,070
Case Management (non-medical)	\$228,287	\$16,796	\$24,896	\$128,704	56.4%	43.6%	\$ 99,583
Medical Transportation	\$150,971	\$49,909	\$12,788	\$49,909	33.1%	66.9%	\$ 51,153
Administration	\$110,192	\$7,091	\$12,788	\$70,612	64.1%	35.9%	\$ 39,580
TOTALS	\$1,101,929	\$88,057	\$153,085	\$439,680	39.9%	60.1%	\$ 612,340

60.1%

Home Delivered Meals Served 0 client

Medication Co Payment served 247 clients in which 9 were new to the program.

235 Clients served in November Medication Co Payment.

12 Clients served in November Mail Order

Cost Avoidance for Medication Co-Payment Program for November is \$25,290

Savings as a result of using co-pay cards April- November is approximately \$ 154,855

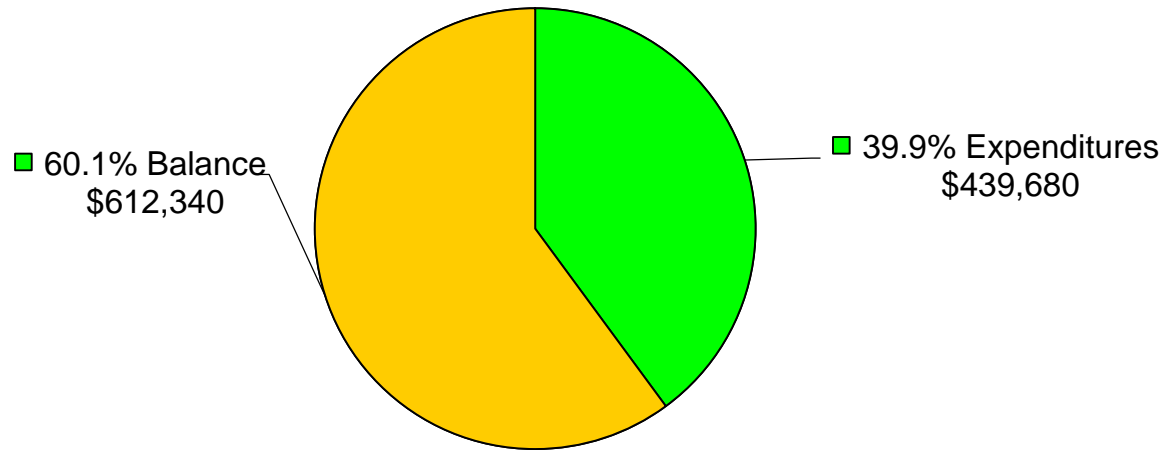
Non-Medical Case Management conducted 791 eligibility interviews in November.

Medical Transportation a total of 371 clients received passes and 479 passes were distributed

This report reflects all invoices received and paid as of 11/30/12

**Ryan White Part B
Expenditure Report**

**Ryan White Part B Expenditures
April-November 2012**



Report for Fiscal Year April 2012 thru March 2013

Broward County Health Department ADAP Report as of 12/31/2012

Total ADAP "Open" Enrollment	2,957
Total ADAP Clients Served in Last 30 Days*	2,157
Total ADAP Waitlist Enrollment**	15
Category A	0
Category B	1
Category C	14
Total ADAP/Medicare Part D Enrollment	176
Number of Appointments in Dec	1,011
Number of Missed Appointment in Dec	416
Percentage of Dec Appointments Missed	41%

*"Clients Served" defined as having at least one "pickup" in the period.

** Category Definitions:

CATEGORY A

Diagnosis of AIDS and/or CD4 < 200 cells/mm³ and/or CD4% < 14%

Diagnosis of active opportunistic infection

Diagnosis of HIV-associated nephropathy (HIVAN)

CATEGORY B

Persons who are currently on ARV therapy

Persons who were previously on ARV therapy but therapy was interrupted

Treatment naïve clients with CD4 cell count between 201-350 cells/ mm³

CATEGORY C

Treatment naïve clients with CD4 cell count > 350 cells/mm³

CATEGORY D

Unknown/Other

Clients are removed from the Wait List **by medical category** in the order they were placed on it.

This serves as a reminder to people that if they are on the wait list they **MUST** recertify at 6 months or they will lose their position on the Wait List.