

PLANNING AND PRIORITIES (P&P) COMMITTEE

June 20, 2018

Minutes

Charge: To oversee development and implementation of a process to identify needs and barriers, keep the assessment of needs current, and develop a comprehensive plan to implement the priority goals of the Planning Council.

COUNCIL MEMBERS PRESENT

Stacie McNulty, Chair	John Dornheim, Vice Chair	Robert Lynn
Woldu Ameneshoa	Christopher Webb	

COUNCIL MEMBERS ABSENT

Evany Turk	Robert L. McGee II	Donna Wilson
Lori Davidson		

RWPC STAFF PRESENT

Annie Sawyer-Williams, RWPC Coordinator	Justin M. Henry, RWPC Health Planner
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GRANTS MANAGEMENT STAFF PRESENT

Kima S.E. Letcher, Program Manager	Sonia Contreras, Health Advisor
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OTHERS PRESENT

Skylar Lange, AIN	Grace Balaoni, EIC	Jennifer Kendrick, PHHS
Linda Norman, EIC/STD		

- I. **Call to Order:** Stacie McNulty, Planning & Priorities Committee Chair, called the meeting to order at 9:18 AM with no quorum established.
- II. **Certification of Quorum:** Quorum was established at 9:50 AM by Annie Sawyer-Williams, RWPC Coordinator, and certified by Stacie McNulty.
- III. **Introductions/Announcements:**
 - a. Stacie McNulty announced registration is open for the Men's Strength Conference. The conference is from November 1-4, 2019.
 - b. Donna Wilson announced the Afiya Center will host the *Get Tested and Grab a Bite* event in recognition of National HIV Testing Day on June 27th from 11:00AM-4:00PM at the David's Chapel Missionary Baptist Church.
- IV. **Approval of the May 24, 2018 Minutes:**
John Dornheim motioned to approve the P&P Committee minutes with changes. Robert Lynn seconded the motion. The motion passed unanimously.
- V. **Office of Support Report:** Mr. Henry announced that currently a representative from the Department of State Hospital Service (DSHS) is in the process of organization a task force of interested parties in the Dallas area. They would like to implement help to drive the strategies that have been developed for HIV in the state of Texas. They are in the process of determining the direction they are going and the beginning stages. Mr. Henry stated currently there is no framework; therefore he suggested using the Integrated Prevention & Care Plan, because it parallels with the state's plan for ending the epidemic. Those interested in getting involved, please contact Mr. Henry.
- VI. **FY 2019 Priority Setting Rankings Vote:** Annie Sawyer-Williams gave the final rankings for the Consumer Council Committee (CCC), the Needs, Use, and Accessibility Table, and the P & P Committee's FY 2019 priority setting rankings.

Planning and Priorities Committee Meeting

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<i>Core Medical Services: Parts A, B, State Services</i>	FY2019 Rankings
Ambulatory/Outpatient Medical Care	1
Oral Health Care	2
Mental Health	3
Medical Case Management	4
AIDS Pharmaceutical Assistance	5
Health Insurance and Cost Sharing Assistance	6(t)
Substance Abuse	6(t)
Early Intervention Services	8
Home Community Based Health Care	9
Home Health Care	10
Medical Nutrition Therapy	11
Hospice	12

<i>Support Services: Parts A, B, State Services</i>	FY2019 Rankings
Food Bank	1
Case Management (Non-medical)	2
Medical Transportation	3
Housing-Based Case Management	4
Emergency Financial Assistance	5
Outreach-Lost to Care	6
Congregate Housing	7
Legal Services	8
Home Delivered Meals Health	9
Education/Risk Reduction	10
Respite Care for Adults	11
Day Respite Care for Children/Youths/Adolescents	12
Child Care-Services	13
Linguistic Services	14

<i>Core Medical Services: Minority AIDS Initiative (MAI)</i>	FY2019 Rankings
Ambulatory/Outpatient Medical Care	1
Oral Health Care	2
AIDS Pharmaceutical Assistance	3
Medical Case Management	4
Substance Abuse	5

<i>Support Services: Minority AIDS Initiative (MAI)</i>	FY2019 Rankings
Food Bank	1
Non-Medical Case Management	2
Medical Transportation	3

Quorum was established at 9:50 AM.

Motion: *John Dornheim motioned to accept the FY 2019 Priority Rankings. Robert Lynn seconded the motion. The motion passed unanimously.*

- VII. Referral for Health Care and Support Service Category:** Mrs. McNulty announced the Referral for Health Care and Support service category was brought up for discussion and the P&P committee was asked to review the service category and determine if there is a need.

Definition: Referral for Health Care and Support

Direct a client to a service in person or through telephone, written, or other types of communication, including management of such services where they are not provided as part of Ambulatory Outpatient Medical Care or Case Management Services.

Mrs. McNulty gave an overview of the service category and how it fits in the system of care. The Referral for Health Care and Support service category is a sub-category under Ambulatory Outpatient Medical Care, Medical Case Management, and non-Medical Case Management and the way the definition is written, it is expected to be provided under the three service categories. Sub-recipients would only be eligible for funding if they are not providing one of those three services categories. The priority ranking process has been completed for FY 2019 and the service category was not included in those rankings. Currently there is no way to track the service category via the AIDS Regional Information Evaluation System (ARIES) and as a result, there is no utilization data collected for this service category. There was an inquiry to see if ARIES would need to have a way to track usage in order to consider prioritizing the category. Also, the Needs Assessment Committee could begin collecting data on the need of the service category.

Mr. Lange stated the Referral for Health Care and Support service category was discussed at a HIV case manager training by the Department of State Hospital System (DSHS) in Austin. He gave the committee an overview of the conversation from the case managers training. Mr. Lange stated in the training they were told, *“For Case Management, Non-Medical, and Medical Case Management DSHS, wants the case managers to bill referrals under Referral for Health Care and Support service category”*, they were also told, *“since the Referral for Health Care and Support service category is not in the Dallas EMA the state are seeing what looks to be duplication services.”* He gave the committee an example of what billing to the service category looks like in the ARIES system and how it appears to be duplication. *“When an agency bills for a referral, there is nowhere to bill it except for under medical or non-medical case management. But when it is done in ARIES, it appears that the client at that agency is a medical or non-medical client and that may or may not be the case. This causes in ARIES to appear that the client has multiple case managers. Ms. Letcher stated she spoke with the care consultant with DSHS and the Administrative Agency (AA) has not received any official notification for the Dallas EMA to implement the Referral for Health Care and Support service category from DSHS, because currently the referral system bills under case management. She noted that if the RWPC decides to fund the service category, it is a fundable service category. However, keep in mind that the funding would have to come from other service categories. If the AA were to implement the service category, it would have to go through a proposal process and a study would need to see how it works for the Dallas EMA.*

- VIII. New Business:** Mrs. Sawyer-Williams explained the “parking lot” which is applicable to the

RWPC. The Care Coordination Ad hoc Committee created a standard consent form. The form provides details indicating that the focus group(s) discussions would be recorded and that 90 days after the final report is issued, the recording would be destroyed. The RWPC bylaws verbiage regarding the special committees will be added at a later date. She announced that the Early Intervention Clinic (EIC) at Dallas County will no longer be funded through Ryan White funds under the Early Intervention Services service category. The program allocations, when units are delivered, and when clients are served is data received from the ARIES system and can be reported, but if the funds are no longer utilized through the EIC, then the data may not be available. For the program year 2018-2019, the Substance Abuse and Mental Health Services Administration (SAMHSA) funding will be discontinued. There needs to be more discussion regarding the Integrated Prevention and Care Plan and the Early Identification of Individuals with HIV/AIDS (EIIHA) strategy. Mr. Lange asked a question for clarification “*is there substance abuse funding for RW other than for Part C*”? Ms. Letcher stated more information is needed regarding that question.

IX. Adjournment: Robert Lynn motioned to adjourn. John Dornheim seconded the motion. The motion passed unanimously.

The meeting was adjourned at 9:52 PM.

Submitted by:

Annie Sawyer-Williams, Coordinator

Date

Draft Certified by:

Justin M. Henry, RWPC Health Planner

Date

Final Approval by:

Stacie McNulty, Chair
John Dornheim, Vice Chair

Date

NEXT SCHEDULED MEETING
Wednesday, July 18, 2018 9:00 AM
Hickman Conference Room, 2nd floor
Dallas County Health and Human Services Building
2377 N. Stemmons Freeway, Dallas, TX