

Delaware HIV/AIDS Planning Council (HPC) Meeting

Minutes

July 23, 2015

Attendees: Sheree Anderson, Pat Ayers, Marc Belote, Nina Bennett, Tyler Berl, Arlene Bincsik, Brian Bourque, Michelle Broadway, Rose Camps, Dianne Casey, Nawaynna Clark, Hector Colon, Linda Conners, Rita Devlin-Salvo, James Dowling, Susan Ellis, Adriana Flores, Janice Heinssen, Steven Hill, Peter Houle, Theo Hudson, Patricia Lincoln, Fred MacCormack, Scott MacKenzie, Collin Maier, Olga Matia, Mary McNeill, Joni Miller, John Minneci, Herman Ortez, Kelly Passley, Glen Pruitt, Buddy Roberts, Maria Saenz-Weiss, Salvatore Seeley, Camille Simpson, Chris Skivers, Karen Swanson, Suzanne Tait, Chuck Tarver, Dana Thompson, Elizabeth Thornton, Bob Vella, Stanley Waite, Ed Weightman, and Susan Wilson.

Call to Order:

The meeting was called to order at 12:05 by Tyler Berl, HIV Community Planning manager at the Delaware HIV Consortium. Tyler welcomed everyone and asked those attending to work their way around the room introducing themselves, naming their agency and when they first became involved with HIV/AIDS.

Minutes:

The draft minutes to the last HPC meeting on June 2, 2015 were distributed to attendees and Tyler called for a motion. Dianne Casey made a motion to dispense with the reading and to approve of the minutes as distributed, seconded by Chris Skivers, and the motion passed by majority consent.

Committee Reports:

Membership & Community Engagement (MCE) - Chris Skivers reported on the activities and achievements of the Membership and Community Engagement working group, which met on July 13, 2015. Chris presented the draft HPC Membership Application and a few revisions were made with consensus approval. Janice Heinssen asked about the Council's mentoring program that had been in place previously. Following a brief discussion general agreement was reached regarding the program's potential and the MCE committee was asked to evaluate that process and make recommendation to the body. Nina Bennett made a motion to approve the Membership Application with the revision of replacing "Date of Birth" with "age," so as to protect individuals from identity theft. The motion was seconded by Chris Skivers, and approved with majority consent.

Special Committee on Party Roles & Responsibilities (SPCRR) – Tyler reported on the work, findings, and recommendations put forward by the SPCRR. The SPCRR was formed and staffed during the June 2, 2015 HPC meeting and were tasked with three primary duties:

1. Develop a set of roles and responsibilities to guide HPC, and HPC subcommittee work;
2. Develop annual work plan and timeline to guide HPC; and,
3. Develop Memorandum of Understanding between HPC, DPH, and DHC.

Tyler reported that through its' two meetings the SPCRR made the following recommendations:

1. The HPC should accept the findings from the Special Committee on Roles and Responsibilities regarding the roles and responsibilities of the HPC, HPC working groups, the DPH, and the DHC (see SPCRR supporting documents for committee findings); and,
2. The HPC should use findings language to develop the HPC Work Plan and timeline, and in the Memorandum of Understanding between HPC leadership, DPH leadership, and DHC leadership.

After a brief discussion, Arlene Bincsik made a motion to accept the findings and to proceed with the completion of the tasks identified, seconded by Peter Houle, and passed with majority consent.

Unfinished Business and General Orders:

Special Committee on Bylaw Amendments (SCBA) – Tyler stated that one of the action items from the last meeting was the formation of a Special Committee to make recommendation for changes to the Bylaws that were adopted, and he asked for volunteers. Volunteers included Chris Skivers, Janice Heinszen, and Pat Ayers.

Epidemiology Annual Report – Jim Dowling, Health Program Coordinator from the DPH Office of Surveillance, presented the Epi report for 2014 (attached), which for the first time also includes a draft report of Delaware's HIV Treatment Cascade.

Highlights include that over 50% of all HIV/AIDS cases are in the city of Wilmington, 64% of all cases are in New Castle County, with 16% in Kent, and 20% in Sussex County. As for racial composition, 59% of all cases in Delaware are among AAs, 32% among whites, 7% among Hispanics, and 2% other. These numbers are in line with national figures except that African Americans in Delaware are 15 points above the national ratio and Hispanics/Latinos are 12 points lower.

In reporting Delaware's care cascade, 100% are living with HIV/AIDS, 81% are engaged in care/treatment, 79% are receiving ART, and viral suppression is at 34%. Arlene Bincsik questioned the accuracy of those numbers when Christiana Care provides care to the majority of cases and statewide and their statistics indicate 81% viral suppression. Jim said they were working to resolve the disparity in numbers and would re-evaluate the continuum once disparities were corrected.

The following questions were discussed following Mr. Dowling's report:

Janice Heinszen asked for clarification regarding the age-group reporting standards of HRSA and the CDC. She noted that DPH follows the CDCs guidelines for defining adolescents as ages 13-19, yet if the CDC followed HRSA's age standards of adolescents as those aged 13-24 than HIV infections in Delaware's youth population could show as an emerging trend – as is noted in national literature. Jim noted the potential for this to occur and said that the CDC and HRSA, and therefore the Division of Public Health, were working to resolve the disagreement.

Colin Maier asked if there could be any cross tabulation done with the epidemiological data to show how many of our clients need/use mental health services, using data from Careware. Jim agreed that this could happen and stated that he would look into it.

Pat Lincoln addressed an issue that was raised regarding the estimation of the number of HIV tests being performed in the Primary Health Care setting as compared to testing in hospitals, or in a clinical setting. She noted that it would be difficult to collect this data from primary care physicians, but such a report would be useful in targeting prevention efforts, linking persons with HIV to care, and understanding the effectiveness of Opt-Out testing services.

Scott MacKenzie raised a question regarding the difference in the numbers of Latinos diagnosed in Delaware vs. the United States. He wanted to know if Delaware's lower Latino HIV incidence rate was due to successful prevention efforts being directed at the Latino population, or alternatively, if the state is not providing enough prevention services for that community and therefore isn't finding all of the HIV positives Latino population. Upon an in-depth discussion it was decided that this was significant enough to have the Systems of Care Working Group look into for greater analysis. Additionally, it was decided, by unanimous consent, to have the Membership and Community Engagement Working Group reach out to CBOs serving the Latino Community to join the HPC.

HIV Prevention in Delaware – Bob Vella, DE DPH HIV Prevention administrator, presented the Jurisdictional HIV Prevention Plan for 2016 (attached). Bob said that one highlight is that earlier in the year DPH was anticipating a decrease in funding of around 5%, and that recently they had heard from CDC saying that level funding would be offered – good news.

Among the highlights are that the number of Delawareans who are positive and don't know it is estimated to have dropped to almost 1 in 10. Bob presented on all proposed activities and asked for the HPC to approve the plan. Tyler explained that the group could take one of three options in regard to the Jurisdictional plan: Vote of Concurrence, Concurrence with reservations, or Non-concurrence.

Colin Maier made a motion to approve a letter of Concurrence with the Jurisdictional Plan as presented, seconded by Nina Bennett. A point of order motion was made by Steven Hill who wanted to vote to approve the plan first, and then vote to write a letter of concurrence in support of the plan. Because the original motion was brought to the floor and seconded, Tyler found that the motion on the floor needed to be voted on first, and that if the vote failed, Steven could bring his motion to the floor. The motion to approve with Concurrence was approved by majority consent, with one vote against, and the motion carried. Tyler said he would prepare the letter of Concurrence for DPH.

Emerging Trends/Announcements:

- Problems with missed scheduling and appointments with Logisticare were reported by a number of members. Pamela Justice provided a direct phone

number for a Logisticare representative who is tasked with answering all transportation problems around this issue; Sharmeeeka Thompson, (302) 255-9328.

- Many billing problems were encountered this past month during a file transfer from Medicaid to MCOs and many clients were required to re-authorize things that had historically been previously authorized. Christiana Care uniformly reported many problems with both Highmark MCO and United HC clients. A suggestion was made to attempt to bring the MCOs and/or Medicaid to the table to join the HPC, and to present on this issue to the full HPC. It was felt that these two resolutions could resolve these problems which present a barrier to care for our clients.
- Tyler reported that he would be making many revisions to the DHC website over the coming month to reflect CPG activities and to make it more of a resource for members.
- Next CPG meeting, 9/1/15.

Adjournment: Steven Hill called for the meeting to be adjourned, without objection and the meeting adjourned at 3:05 pm.

Unfinished Business:

SCPRR task completion
HIV incidence in Delaware's Latino Community

Letter of Concurrence to DPH
Invite Medicaid and MCOs to attend HPC

DHC-HPC Webpages

Assigned to:

Executive Committee
SoC Working Group; MCE
Working Group

Tyler Berl
Tyler Berl; MCE Working
Group

Tyler Berl