



LOS ANGELES COUNTY
COMMISSION ON HIV



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**PUBLIC POLICY COMMITTEE
MEETING MINUTES**

February 3, 2020



The Public Policy Committee acts in accordance with the role of the Commission on HIV, as dictated by Los Angeles County Code 3.29.090. Consistent with Commission Bylaws Article VI, Section 2, no Ryan White resources are used to support Public Policy Committee activities.

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	COMM STAFF/ CONSULTANTS
Lee Kochems, MA, <i>Co-Chair</i>	Aaron Fox, MPM	Robert Gamboa	Cheryl Barrit, MPIA
Katja Nelson, MPP, <i>Co-Chair</i>	Pamela Coffey (<i>Full to Burton</i>)		Jane Nachazel
Alasdair Burton (<i>Alt. to Coffey</i>)	Eduardo Martinez (<i>Alt.</i>)	DPH/DHSP STAFF	Julie Tolentino, MPH
Jerry D. Gates, PhD	Craig Scott	None	
Nestor Rogel (<i>Alt.</i>)			
Ricky Rosales			
Martin Sattah, MD			

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Public Policy Committee Agenda, 2/3/2020
- 2) **Minutes:** Public Policy Committee Meeting Minutes, 1/13/2020
- 3) **Table:** 2020 Work Plan - Public Policy, *Draft 2/3/2020*
- 4) **Memorandum:** Development of County Advocacy Positions on Legislation and Budget Items of Interest to the County in Sacramento and Washington, DC, 1/15/2020
- 5) **Priorities:** 2020 Policy Priorities, 2/3/2020
- 6) **Board Motion:** St. Vincent Medical Center Closure and Possible Repurposing, 1/21/2020
- 7) **Memorandum:** State Budget - Analysis of the Governor's FY 2020-21 Proposed Budget, 1/21/2020
- 8) **Table:** 2020-2021 Legislative Docket, *Draft 2/3/2020*
- 9) **Fact Sheet:** AB 683 (Carrillo) - Fact Sheet, Medi-Cal Assets Test, Enable Self-Sufficiency for Seniors on Medi-Cal
- 10) **Summary:** AB 732 (Bonta) - Reproductive Dignity for Incarcerated People Act, *As amended January 2020*
- 11) **Summary:** SB 859 (Wiener) - Senator Wiener introduces Legislation to Establish a Master Plan to End the Epidemics of HIV, Hepatitis C, and Other STDs, 1/16/2020

CALL TO ORDER-INTRODUCTIONS-CONFLICT OF INTEREST STATEMENTS: Ms. Nelson called the meeting to order at 1:11 pm.

I. ADMINISTRATIVE MATTERS

1. APPROVAL OF AGENDA

MOTION #1: Approve the Agenda Order with addition of 8.b. STD Services (***Passed by Consensus***).

2. APPROVAL OF MEETING MINUTES

MOTION #2: Approve the 1/13/2019 Public Policy Committee Meeting Minutes, as presented (***Passed by Consensus***).

II. PUBLIC COMMENT

3. **OPPORTUNITY FOR PUBLIC TO ADDRESS COMMISSION ON ITEMS OF INTEREST WITHIN COMMISSION JURISDICTION:** There were no comments.

III. COMMITTEE NEW BUSINESS ITEMS

4. **OPPORTUNITY FOR COMMISSIONERS TO RECOMMEND ITEMS FOR FUTURE AGENDAS, OR ITEMS REQUIRING IMMEDIATE ACTION DUE TO AN EMERGENCY, OR IF NEED FOR ACTION AROSE AFTER POSTING AGENDA:** There were no items.

IV. REPORTS

5. EXECUTIVE DIRECTOR/STAFF REPORT

a. Ending the HIV Epidemic (EtHE) Updates:

- Ms. Barrit reported the Centers for Disease Control and Prevention (CDC) released its Notice Of Funding Opportunity (NOFO) to health departments on 1/30/2020. The application due date of 3/25/2020 is again a short turnaround.
- Component A, the largest portion of the award, is based on a formula using population and HIV data. It will fund strategies, programs, and many of DHSP's community contracts. A minimum 25% of funds must support work by community members and Community Based Organizations (CBOs).
- Component B funds surveillance activities around HIV and strengthening molecular surveillance systems.
- Component C funds increased STD testing in specialty clinics and better integration of HIV and STD work.
- Staff would attend webinars that week to learn more about requirements which do include community engagement.
- In separate funding, the Bureau of Primary Health Care has also identified 12-14 Federally Qualified Health Centers (FQHCs) in Los Angeles County (LAC) that qualified for \$250,000 per year for five years to scale up HIV testing, Linkage to Care, and PrEP. FQHCs will be integrated in Phase 2, but the Bureau wanted to start with high morbidity areas.
- DHSP has not yet heard about its application for the separate EtHE funding from the Health Resources and Services Administration (HRSA). DHSP requested an additional \$9 million per year for the next five years.
- Regarding the Ryan White Program (RWP), HRSA has informed all grantees they will now receive 30% of allocations due to lack of a federal Budget. The government is functioning under a short-term Continuing Resolution (CR).
- ➡ Staff will develop a reference table of the various grants using publicly available information.

b. County Policy on Advocacy Procedures:

- Ms. Barrit noted the LAC policy in the packet on development of advocacy positions on legislation and budget to help inform the 2020 Legislative Docket. All Docket positions are recommendations to the Board of Supervisors (Board).
- If LAC has taken a position on a bill, that will be noted on the Docket. Alignment with LAC positions will be sought when possible. The Commission will also, as pertinent, bring legislative issues to the Board of which it may not be aware.

6. CO-CHAIR REPORT

- Mr. Kochem thanked the body for electing him and Ms. Nelson by consensus. A major reason for his willingness to run again was to try and address Consumer Caucus concerns, and to support empowering and engaging Unaffiliated Consumers (UCs) at all levels of the Commission and throughout the HIV Continuum of Care.
- The Public Policy Committee addresses broad perspective issues that may not fall under other Committee roles. For that reason, the Co-Chairs recommended adding a standing agenda item for Consumer Empowerment and Engagement to offer a space for those conversations and to engage in public policy issues. They will invite attendance at Commission meetings and hoped, as with Black/African American Community (BAAC) Task Force recommendations, it will become a model for all.
- ➡ Agreed to add standing Public Policy Committee agenda item for Consumer Empowerment and Engagement.
- ➡ Ask Consumer Caucus what issues they would like Public Policy to address under the new item.
- ➡ Revise Work Plan title from "Draft" to "Updated" followed by the date.

V. DISCUSSION ITEMS

7. REVIEW 2020 POLICY PRIORITIES

- The document with revisions from last month's meeting was in the packet for review and any further revisions.
- Mr. Kochems sought to add an item consistent with the new agenda item for Consumer Empowerment and Engagement, as noted: Advocate for and encourage the empowerment and engagement of consumer People Living With HIV/AIDS (PLWHA)

on all levels of policy creation, legislation, regulation, and service provision related to HIV Disease treatment and prevention until the epidemic has ended (transmission stopped) and all PLWHA are cured (free of HIV infection).

- He sought to broaden perspectives past individual service categories or individual UC levels of health. It could open the conversation in multiple ways, e.g.: the role of consumers in agencies, including potential promotion; whether Consumer Advisory Boards (CABs) are effective or just meet contract requirements; or under-addressed topics like aging PLWHA.
- Dr. Gates expressed concerns that the statement lacks consistency of voices, e.g., providers and public officials also offer specialized knowledge, and he found statements about ending the epidemic and a cure too broad. Mr. Kochems, however, said all populations serve PLWHA so it is appropriate to elevate them and to use the traditional broad Priorities approach.
- Mr. Buton felt this was more a mission statement, to lead the document, rather than simply another of the Policy Priorities. He also suggested changing the final "HIV infection" to "HIV Disease" as infection may be persistent as with chicken pox.
- Ms. Nelson suggested language with a more active voice while Mr. Rogel sought an emphasis on meaningful involvement.
- Mr. Rosales found the HIV- consumer missing though the Commission now plans for all. He asked about integrating the HIV-consumer into this or as a parallel statement. On its own, he saw it as a Policy Priority in the context of Reauthorization.
- Mr. Kochems acknowledged the Consumer Caucus continues to struggle with that issue. Even so, he believes the PLWHA voice is central as it carries the strongest warning, e.g., it can warn about the consequences of taking a pill for 20 years.
- Dr. Sattah asked if one-third of Committee quorum must be UCs. Ms. Barrit replied it does not. HRSA does require one-third of the RWP Planning Council to be composed of consumers receiving at least one Part A service. Commission Co-Chairs and staff do try to mirror the epidemic in Committee assignments. Quorum for LAC bodies is defined as 50% plus one.
- Mr. Burton felt it would be logistically challenging and Mr. Rosales added people's availability could make that even harder.
- ➡ Mr. Kochems will take the suggestion for one-third of Committee quorum to be PLWHA to the Consumer Caucus for review. An option is to adapt the Denver Principle requiring at least one PLWHA in the room to requiring one PLWHA for quorum.
- ➡ Staff will send out Mr. Kochems proposed language for comments/questions. Feedback should be returned by 2/14/2020.
- ➡ Review of revised 2020 Policy Priorities document from last meeting resulted in additional revisions, as follows:
 - ↳ 1. Revise "PLWHA" to "people living with HIV/AIDS (PLWHA)."
 - ↳ 2. Revise sentence to: "Protect and expand *service access and availability for the syndemic of HIV, STDs, and Viral Hepatitis* in California's annual budgeting process." (Hepatitis reference delineated based on infectiousness.)
 - ↳ 7. Add: "...research, *harm reduction services including syringe exchange*, and social..."
 - ↳ 8. Revise "people living with HIV/AIDS" to "PLWHA."
 - ↳ 11. Retain coma between "risk of" and "HIV/AIDS."
- ➡ Staff will revise and return for review at March meeting including review of feedback on Mr. Kochems' proposed addition.

MOTION #3: Approve the 2020 Policy Priorities to send to Executive Committee, as presented or revised (**Postponed**).

8. COUNTY POLICY UPDATE

a. Housing:

- Ms. Nelson noted the Los Angeles Homeless Services Authority (LAHSA) annual homeless count was held this January. Results are usually released in March, but were released last year in May. Further action is pending data release.
- Finalization of Measure H funding recommendations appears to be on hold pending release of Governor Gavin Newsom's proposed budget. Coordination of the two funding streams would serve to maximize LAC funding.
- The Chief Executive Office (CEO) analysis of the Governor's proposed budget was in the packet. Past housing, it addresses several pertinent items such as Medi-Cal expansion for those 65 or older and immigration services.
- The small group meeting with LAHSA on HIV and housing met the prior week. The focus was data and data sharing.
- The Board is holding closed door meetings regarding its motion to purchase the now closed St. Vincent Medical Center (SVMC) to convert it for housing and homeless services. The City of Los Angeles is coordinating with the Board.
- SVMC was closed and over 1,000 people were left unemployed within weeks of court approval. Physicians with offices in the Professional Office Building asked until 6/30/2020 to find new offices, but the court just allowed to 4/30/2020. Medical offices must meet added requirements, e.g., hall width, making it harder to find convenient space for patients.
- A hedge fund purchased SVMC, St. Francis Medical Center, and two hospitals outside LAC in 2015 to create a network called Verity Health. It was not profitable and eventually entered bankruptcy court. An attempt was made to sell Verity Health to a real estate company. When that fell through, bankruptcy court approval was requested to close the 156-year-old SVMC, the least profitable of the four. Verity Health is "seeking other options" for its remaining hospitals.

b. STD Services:

- Ms. Barrit said starting on 1/23/2020 there has been a groundswell of media coverage in response to a letter received by the LGBT Center that the Department of Public Health (DPH) will no longer assume the cost for STD laboratory work.
- Mario Pérez, MPH, Director, DHSP, previously provided the Commission with updates on the release of the Request For Proposals (RFP) around STD response and beginning of negotiations with successful applicants. The RFP noted a longstanding commitment to HIV/STD testing contractors with DPH that the DPH laboratory would assume test costs. Obviously, if those costs are no longer covered, providers will have to significantly reduce testing to cover them.
- The Commission Co-Chairs charged Ms. Barrit to schedule an appointment to meet with Barbara Ferrer, PhD, MPH, MEd, Director, DPH, to discuss what happened and what can be done in the long term to avert this problem.
- The Public Policy Committee developed the original Letter to the Board calling for a \$30 million STD response. Just \$5 million was received, but the 11/20/2018 motion allocating it identified it as seed money while DPH finds other resources. The Public Policy Work Plan, Item 5, STD Motion Follow Up, provides context for monitoring this situation.
- Ms. Barrit met with two Health Deputies that morning and they continued to receive calls. Due to advocacy, DPH has identified funding for STD testing through the end of March. A sustainable plan has not been identified.
- Mr. Gamboa, LGBT Center, reported the Center had to cease all LAC-funded STI testing within one day of receiving the letter. The Center had been in discussions regarding this topic with DPH for some time without result. The respite is helpful, but is not a long term solution. They hope to work with as many organizations as possible to reach a solution.
- Ms. Nelson added APLA Health posted a public letter on their website on 1/31/2020. It asks Dr. Ferrer to use this as an opportunity to bring community providers to the table to discuss the full system, improvements needed, resources needed, and how to find a path forward to address the STD crisis to meet the Board's commitment.
- She has heard considerable community frustration with DPH's lack of information and transparency about this decision. There is discussion about getting the community together to go to the Board and ensure their commitment.
- Ms. Barrit said one response aspect is the meeting that the Executive Committee would like to have with Dr. Ferrer.
- We all also report to the Board so a strong letter would be another option, perhaps with specific recommendations.
- Mr. Rosales has also been attempting to facilitate a letter from the City of Los Angeles Council but, despite numerous calls, he has been unable to find out any information about how the decision was made to present to the Council.
- Ms. Nelson suggested potential points for a letter: addressing STDs is one of Dr. Ferrer's Center for Health Equity five pillars; reasons for this decision, especially with historic underfunding including a major cut in the early 2000s; reiterate the call for the original \$30 million; reiterate a call for community action; and state the need for a sustainable response.
- Dr. Gates advised not asking DPH to justify its decision. Just say STDs are underfunded and funds should be restored.
- Meanwhile, Ms. Nelson suggested spreading the word in the community to foster advocacy.
- ➡ Ms. Barrit will draft letter and discuss it with the Commission Co-Chairs.
- ➡ Mr. Gamboa volunteered to help with any activities.

9. STATE LEGISLATION AND BUDGET UPDATE

- Ms. Nelson referred back to the CEO budget analysis for updates. The ETE budget proposal is similar to last year's.
- Governor Newsom's Master Plan for Aging Stakeholder Advisory Committee was ramping up meetings with a Research Subcommittee, Long-Term Services and Supports Subcommittee, and other working groups. It was in the process of creating a document to be released for comment, but feedback is being accepted now on the website. APLA Health has submitted a preliminary letter with some 15 recommendations on HIV and aging.
- Governor Newsom has also launched committees on: CalAIM, for reform of the Medi-Cal system; behavioral health task force, on mental health and substance disorder needs; and Healthy California For All Commission, universal healthcare.
- Marisa Ramos, PhD, was appointed Division Chief, Office of AIDS, on 1/31/2020. She previously was Interim Chief.
- ➡ Ms. Nelson will provide a breakdown of the ETE ask at the March meeting.

a. Legislative Docket

- Ms. Nelson noted four bills are two-year bills with prior positions. There are three new bills to date. Ordinarily the Docket is completed for submission to the Board by the April meeting.
- She also called attention to the fact sheet on SB 859. APLA Health was co-sponsoring the bill with Representative Scott Wiener. Last year, there was a \$2 million budget ask to develop an ETE master plan. The bill creates the plan itself.
- ➡ Recommendations for legislation to add to the Docket should be submitted to Ms. Tolentino.
- ➡ Agendize discussion of Docket for March meeting.

10. FEDERAL POLICY UPDATE

- President Donald Trump was expected to at least mention HIV/AIDS in his State of the Union address on 2/4/2020.
- The nationwide injunction against implementation of revised Public Charge regulations was lifted. There was no firm implementation date, but 2/24/2020 has been mentioned. Advocates are working to get information out to agencies.
- ➡ Ms. Nelson will provide an update on Public Charge at the March meeting.
- a. **Health Center Program Funding, Further Consolidated Appropriations Act 2020:** Release of President Trump's budget is expected 2/10/2020. A CR is in effect until 5/22/2020. It includes \$2.6 billion of the expected \$4 billion for Health Centers.

VI. NEXT STEPS

- 11. TASK/ASSIGNMENTS RECAP:** There was no additional discussion.
- 12. AGENDA DEVELOPMENT FOR NEXT MEETING:** There was no additional discussion.

VII. ANNOUNCEMENTS

- 13. OPPORTUNITY FOR PUBLIC AND COMMITTEE TO MAKE ANNOUNCEMENTS:** Mr. Rogel announced AltaMed was hosting an LGBTQ market on 3/14/2020, 3:00 to 6:00 pm, 512 S. Indiana Street, in the Boyle Heights area.

VIII. ADJOURNMENT

- 14. ADJOURNMENT:** The meeting adjourned at 2:49 pm.