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HIVCOMM@LACHIV.ORG • <http://hiv.lacounty.gov> ORG • VIRTUAL WEBEX MEETING

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PLANNING, PRIORITIES AND ALLOCATIONS (PP&A) COMMITTEE MEETING MINUTES

July 20, 2021

COMMITTEE MEMBERS			
P = Present A = Absent EA = Excused Absence			
Frankie Darling Palacios, Co-Chair	P	Karl T. Halfman, MS	P
Everardo Alvizo, LCSW	P	William King, MD, JD (Leave of Absence)	P
Al Ballesteros, MBA	P	David Lee	P
Kevin Donnelly	P	Miguel Martinez, MPH, MSW	P
Alexander Luckie Fuller	A	Anthony M. Mills, MD	P
Felipe Gonzalez	P	Derek Murray	P
Bridget Gordon	P	LaShonda Spencer, MD	P
Joseph Green	P	Maribel Ulloa	P
Michael Green, PhD, MHSA	P	Damone Thomas	P
Damontae Hack, Alternate	A	Guadalupe Velasquez	A
COMMISSION STAFF AND CONSULTANTS			
Cheryl Barrit, Carolyn Echols-Watson, Catherine LaPointe, Jose Rangel-Garibay, Sonja Wright			
DHSP STAFF			
Jane Bowers, Wendy Garland, Pamela Ogata			

- * Some participants may not have been captured electronically. Attendance can be corrected by emailing the Commission.
- * Members of the public may confirm their attendance by contacting Commission staff at hivcomm@lachiv.org.
- * Meeting minutes may be corrected up to one year from the date of approval.

Meeting agenda and materials can be found on the Commission's website at
<http://hiv.lacounty.gov/LinkClick.aspx?fileticket=hHdP9s8AOx8%3d&portalid=22>

CALL TO ORDER-INTRODUCTIONS-CONFLICTS OF INTEREST

Frankie Darling-Palacios, Committee Co-Chair, called the meeting to order and members introduced themselves and stated their conflicts of interest.

I. ADMINISTRATIVE MATTERS

1. APPROVAL OF AGENDA

MOTION #1: Approve the Agenda Order, as presented (*Passed by Consensus*).

2. APPROVAL OF MEETING MINUTES

MOTION #2: Approved the June 15, 2021 Planning, Priorities and Allocations Committee Meeting Minutes, as presented (*Passed by Consensus*). It was noted members have up to one year to make corrections to the minutes.

II. PUBLIC COMMENT

3. Opportunity for members of the public to address the Committee on items of interest that is within the Jurisdiction of the Committee.

There were no public comments.

II. COMMITTEE NEW BUSINESS ITEMS

4. Opportunity for Committee members to recommend new business items for the full body or a committee level discussion on non-agendized matters not posted on the agenda, to be discussed and (if requested) placed on the agenda for action at a future meeting, or matters requiring immediate action because of an emergency situation, or where the need to take action arose subsequent to the posting of the agenda.

There were no new business items identified.

III. REPORTS

5. EXECUTIVE DIRECTOR/STAFF REPORT

a. Operational Updates

C. Barrit reminded the Committee that the staff are in the midst of moving to new offices effective August 6. The new office spaces will be much smaller with 4 workstations shared amongst staff (which is maximize by using a hybrid telework schedule). The new office will be located at 510 S. Vermont Ave, 14th Floor. The Commission meetings, once they resume in person, will be held at the same location in the Terrace Level. The Terrace Level is the only space accessible to the public and offer ample space for gathering with free parking available to Commissioners and members of the public. The building is within walking distance from the Red Line's Wilshire/Vermont station.

b. Data Summit and Priority Setting and Resource Allocation (PSRA) Process Brief Overview

C. Barrit set the stage for the meeting (Data Summit) and provided a brief overview of the priority setting and resource allocation process. Today's meeting serves as the Data Summit where the Committee will hear service utilization, surveillance and other programmatic data to help inform the Committee's ranking of Ryan White services and allocation of funds to those services. The Data Summit promotes a data-driven decision-making process. At the August meeting, PP&A members will hear the fiscal report for Ryan White Program Year 30 (March 1, 2020 to February 28, 2021) and then rank the service categories based on consumer needs. Funding allocations will then follow. The Committee will rank services and allocate funding for Ryan White Program Year 32 (March 1, 2022 – February 28, 2023) and submit the recommendations to the full body in September. The approved allocations will be integrated in the DHSP Part A application which is due in October.

She encouraged members to ask questions and seek clarification on the information presented to the group. She requested that the Committee book another meeting date in August (in addition to the August 17 meeting) to ensure that the PSRA process is completed.

6. CO-CHAIR REPORT

b. Committee Co-Chair Nominations/Elections (Need 2nd Co-Chair)

Bridget Gordon nominated Kevin Donnelly for Co-Chair and there were no other individuals nominated. Kevin Donnelly was elected as Committee Co-Chair by the group by consensus.

7. DIVISION OF HIV AND STD PROGRAMS (DHSP)

P. Ogata noted that the PY 30 fiscal report will be provided at the August meeting. Wendy Garland, DHSP staff, presented data on the following:

- a. Utilization by Service Category among Ryan White Priority Populations PY 30
- b. Overlap across Ryan White Priority Populations & Estimated HIV Care Continuum
- c. Outcomes across Priority Populations PY 30
- d. Ryan White PY 30 Utilization Report Summary

Key takeaways from the data include the following:

Characteristics of Ryan White Program (RWP) Clients:

- In Ryan White Year 30 (March 1, 2020 - February 28, 2021) 21,703 clients received at least one RWP core or support RWP services.
- Approximately 2 out of every 5 people living with diagnosed HIV (PLWDH) in Los Angeles County (LAC) in 2020 received at least one RWP HIV service.
- The majority of RWP clients were Latinx with little change over time.
- Majority of RWP clients were cisgender male with little change over time.
- From Year 26 to Year 30 the proportion of RWP clients aged 40-49 decreased while those 60 years and older increased
- From Year 26 to Year 30, there was an increase in RWP clients experiencing homelessness (7% in Year 26 to 10% in Year 30)
- From Year 26 to Year 30, there was a growing percentage of RWP clients reside in the top 3 health districts
- (Hollywood-Wilshire, Central and Southwest)
- From Year 26 to Year 30, was an increase in number MCC clients (23% in Year 26 to 39% in Year 30)

W. Garland noted that COVID-19 impacted the utilization of RW services. **The following are key takeaways on how COVID-19 impacted service usage in LAC:**

- Fewer RWP clients accessed services in April and May of Year 30 compared to Year 29 as a result of COVID-19
- The highest variation in monthly utilization trends in Year 30 was observed among Latinx clients
- Utilization patterns were mainly stable by gender identity
- Fluctuation in use among cisgender males likely because they are the largest population
- Similar patterns of RWP use by age group in Year 30 with fluctuations most visible among largest populations-those groups 30 and older
- Similar patterns of RWP use by housing status in Year 30 with fluctuations most visible among housed clients (the largest population)
- Approximately 1 out of 2 (56%) of RW clients received a RWP service via in Year 30.
- The percentage of RWP clients getting service by telehealth increased from 11% in March to 40% in May
- Largest percentage of clients receiving at least one telehealth service were Latinx (61%), followed by Blacks (55%), the lowest was among Whites (45%)

- While high across all gender categories, a slightly higher percentage of cisgender females compared to cisgender males and transgender clients used services through telehealth
- Highest telehealth use was among clients aged 40-59 (57%) and 60 (55%)
- Lowest telehealth use was among clients 24 years old and younger (52%)
- Approximately 1 in 2 ambulatory/outpatient medical (AOM) clients used on AOM service via telehealth (56%) in Year 30
- Telehealth was a critical strategy to promote continuity of medical care for RWP clients during COVID-19
- Approximately 1 in 2 Medical Care Coordination (MCC) clients accessed at least one service via telehealth (51%)
- While number of MCC clients was lower in March 2020 compared to 2019 due to COVID-19, the number of clients using MCC services exceed the Year 29 all other months
- High percentages of clients using telehealth services have steady since May 2020

The following are key takeaways from the HIV Care Continuum data:

- Engagement, retention in care and viral suppression was higher among RWP clients compared to all PLWH in LAC.
- HIV laboratory tests, like viral load, are used to estimate HIV continuum outcomes. There was a decrease in all HIV continuum outcomes in Year 30 likely due impact of COVID-19 on access to care.
- Viral suppression (VS) was highest among older clients and lowest among those experiencing homelessness or recently incarcerated.
- Retention in Care (RiC) and VS fall short targets across all priority populations and in the RWP.

The following are key takeaways from the Overview of RW Year 30 Utilization Data by Service Category presentation:

- Growing number of clients aged 60 and older, experiencing homelessness and residing in Hollywood-Wilshire, Central and Southwest Health Districts
- More clients were served in Year 30 compared to Year 29, despite COVID, underscoring the importance of expanded modalities to access services
 - Additionally service units per client in Year 30 was the same or higher than in Year 29 for nearly all services
 - While further exploration is needed, preliminary results did not identify disparities by demographic characteristics in service access during COVID pandemic
 - The highest percentage of service units provided via telehealth were for MCC and Mental Health Services
 - Retention in care and viral suppression decreased in Year 30 compared to Year 29 and improvements is needed to meet local and national targets
- e. Prevention and HIV/Surveillance Materials Review—the materials were presented at the Prevention Planning Workgroup and the Committee was reminded to review the data in the packet.

8. DISCUSSION: REACTIONS AND QUESTIONS ABOUT THE DATA PRESENTATION

Committee members and meeting participants noted the following comments and questions:

- Clarify in future presentations where Long Beach is on the ranking of Health Districts impacted by HIV.

- The availability of intermediate and longer-term outcomes would be helpful in understanding the effectiveness of Ryan White (RW) services.
- While the data show that COVID-19 affected service utilization, telehealth should be continued as a service delivery modality because it helps keep PLWH in care.
- The greatest variation in RW service utilization was among Latinx clients.
- What will be the overall policy when providers are no longer able to bill for telephone visits under Medi-Cal?
- Income level is not currently collected for HIV continuum data. However, DHSP is looking at using census tracts to estimate income levels.
- W. Garland asked Committee members to review the supplemental data tables that she provided for details on the PY 30 RW service utilization. She indicated that mental health is an underutilized service and it has been a challenge to get clients to seek mental health services. It is unclear how telehealth has impacted mental health services.
- Linkage and Retention Program (LRP) data are derived only from those cases reported in CaseWatch, hence, the number of individuals who used LRP may be higher.
- Foodbank and Nutrition services saw an increase in clients served, units of meals and bags of groceries provided.
- Looking at the HIV continuum data, most RW services did not meet national targets of 90% in retention in care and viral suppression.
- Medical Care Coordination (MCC) showed a 57% retention in care and 73% viral suppression rates in PY 30 despite the fact the MCC clients are typically patients with high acuity levels. It was clarified that one year of data for MCC clients does not adequately capture the health outcomes of patients enrolled in the MCC program. Twenty-four months of client level data is needed to capture their HIV health outcomes more accurately. W. Garland noted that DHSP is still working on MCC program evaluation data.
- A member of the public inquired about Part D data. Some Committee members and DHSP/COH staff clarified that DHSP oversees only RW Part A data and organizations that receive Part D dollars report their data directly to the Health Resources Services Administration (HRSA). The 2020 Part D grantees in Los Angeles County are AltaMed, UCLA, and USC. Part C and D grantees also report their data to HRSA directly.
- Staff will contact Part D agencies to present their data to PP&A.
- A consumer Committee member indicated that the data presentations need to focus more on basic information so that the community can understand what is being presented. The preparation packet was too long and took too much time and to read. Additionally, it would be useful to see across all service categories what percentage of clients are people of color. A request was made to simplify the information and the materials for consumers to understand.
- Clarify how HRSA reports back data on all Ryan White Program “parts” (i.e., A, B, C, D, and F).
- Provide client demographic data for each RW service category.
- Youth Transitional Case Management (YTCM) contracts ended pre-COVID, which would explain the low number of clients served described in the data presentation.
- PP&A Committee Co-Chair, K. Donnelly, recommended that the Consumer Caucus discuss, in broad strokes, what services and support they need to stay healthy; what is working well with the services they are receiving; and what challenges they face in accessing/using services.

VI. NEXT STEPS

9a. Determine if additional meeting in August is needed

The Committee agreed to confirm August 24 from 1 pm to 5pm as an additional meeting if more time is needed by the group to complete its PY 32 funding allocations recommendations. The recommendations must be on the August 26 Executive Committee and September 9 full Commission meeting agendas to meet grant proposal deadlines.

9b. Task/Assignments Recap

- Staff will follow-up with Part D agencies to present their data to PP&A at a future date.
- Continue the priority setting and resource allocation exercise at the August 17 meeting, beginning with a report from DHSP on Ryan White PY 30 Fiscal Report. The Committee will also discuss service category rankings and funding allocations for PY 32.
- Staff will work with the Consumer Caucus Co-Chairs to seek input on RW services from consumers at their August 12 meeting.

a. Agenda Development for the Next Meeting

This item was covered under 9b.

VII. ANNOUNCEMENTS

a. Opportunity for Members of the Public and the Committee to Make Announcements

There were no announcements.

VIII. ADJOURNMENT

a. Adjournment:

The meeting ended at approximately 4:48 PM