



LOS ANGELES COUNTY
COMMISSION ON HIV



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**PLANNING, PRIORITIES AND ALLOCATIONS (PP&A) COMMITTEE
SPECIAL ALL-DAY MEETING MINUTES**

July 23, 2019

PP&A MEMBERS PRESENT	PP&A MEMBERS PRESENT <i>(cont.)</i>	PP&A MEMBERS ABSENT	COMM STAFF/CONSULTANTS
Jason Brown, <i>Co-Chair</i>	Karl Halfman, MS	Frankie Darling Palacios <i>(Lv.)</i>	Cheryl Barrit, MPIA
Miguel Martinez, MPH, MSW <i>Co-Chair</i>	Diamante Johnson <i>(F. to Walker-Heltzel)</i>	Anthony Mills, MD	Carolyn Echols-Watson, MPA
		Raphael Peña <i>(F. to T. Green)</i>	Dina Jauregui
Susan Alvarado	William King, MD, JD	Maribel Ulloa	Jane Nachazel
Raquel Cataldo	Abad Lopez	Kayla Walker-Heltzel	Julie Tolentino, MPH
Susan Forrest	Derek Murray	<i>(Alt to Johnson)</i>	
Michael Green, PhD, MHSA	LaShonda Spencer, MD		DHSP/DPH STAFF
Thomas Green <i>(Alt to Peña)</i>	Russell Ybarra		Anait Absenyan
			Jane Bowers
PUBLIC			Angela Castillo, MA
James Abrayn	Joaquin Gutierrez	Tony Moreno	Janet Cuanas, MPP
Jayshawnda Arrington	Shellye Jones	Katja Nelson, MPP	Wendy Garland, MPH
Pamela Bright	Bradley Land	Maritza Ramirez	Pamela Ogata, MPH
Robert Bucayu	John Madrigal	Joshua Ray, RN	
Alasdair Burton	Mariela Magaña	Craig Scott, MA	
Alejandro Chavez	Michelle McKinney	Brandon Simpson	
Anissa Davis	Andre Molette	Terry Smith, MPA	
Jesus Duran			

CONTENTS OF COMMITTEE PACKET

- Agenda:** Planning, Priorities and Allocations Committee Special All-Day Meeting Agenda, 7/23/2019
- Minutes:** Planning, Priorities & Allocations (PP&A) Committee Meeting Minutes, 6/18/2019
- Table:** Commission Member "Conflicts-of-Interest," Updated 7/9/2019
- PowerPoint:** Planning, Priorities and Allocations Committee Special Meeting, Executive Director's/Staff Report, 7/23/2019
- Summary:** Assessing Needs: Quick Definitions and Descriptions for Data-Related Terms and Concepts Used by Ryan White HIV/AIDS Program (RWHAP) Planning Bodies, 2018
- Training Guide:** RWHAP Part A PC/PB Training Guide - Module 10: Data-based Decision Making - Quick Reference Handout 10.1: PC/PB Guide to Data Types and Sources

Planning, Priorities and Allocations (PP&A) Committee Meeting Minutes

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- 7) **PowerPoint:** 2019 HIV Data Summit, 7/23/2019
 - 8) **PowerPoint:** Using Data for Decision-Making, 7/23/2019
 - 9) **PowerPoint:** Overview of HIV Data Sources, 7/23/2019
 - 10) **PowerPoint:** Epidemiology of HIV in Los Angeles County, 7/23/2019
 - 11) **PowerPoint:** Highlights from the Medical Monitoring Project (MMP) Los Angeles (2015-2017), 7/23/2019
 - 12) **Fact Sheet:** Persons Living with HIV in Los Angeles County, Medical Monitoring Project, 2015-2017, 2019
 - 13) **PowerPoint:** Los Angeles County National HIV Behavioral Surveillance Summary, 7/22/2019
 - 14) **Fact Sheet:** National HIV Behavioral Surveillance among Men Who Have Sex with Men (MSM), NHBS-MSMS, 2017, June 2018
 - 15) **Fact Sheet:** National HIV Behavioral Surveillance among Heterosexuals at Increased Risk for HIV, NHBS-HET4, 2016, June 2018
 - 16) **Fact Sheet:** National HIV Behavioral Surveillance among People Who Inject Drugs, NHBS-IDUS, 2018, June 2018
 - 17) **Graphic:** HRSA's Ryan White HIV/AIDS Program by the Numbers: 2017
 - 18) **Table:** Sociodemographic and Clinical Characteristics of HIV-Positive (Unduplicated) Clients Age 50 and Above in Ryan White Year 28, Los Angeles, California
 - 19) **Table:** Demographics (Race, Gender, Mode of Transmission, Income Level, Health Districts, SPA) by HIV Care Continuum for Clients Age 50 and Above, Ryan White Year 28
 - 20) **Graphic:** FY 2019-20 P-and-A Framework and Process, June
 - 21) **Table:** Planning, Priorities and Allocations Committee, Service Category Rankings for PY 29 (FY 2019-20), *Approved 4/11/2019*
 - 22) **Spreadsheet:** FY 2019 Revised RWP Allocations, 3/25/2019
 - 23) **Spreadsheet:** (YR 28 estimated expenditures and YR 29 approved allocations with service category comments, 7/23/2019
 - 24) **PowerPoint:** Ryan White Program YR 28 Care Utilization Data Summary, 7/23/2019
 - 25) **Summary:** Ryan White Services (Year 28) (utilization), 7/23/2019
 - 26) **Spreadsheet:** Table 3: Number of Clients Served and Service Utilization by Service Category Among HIV Positive Ryan White Program Clients in Ryan White Years 26-28 (3/1/2016 - 2/28/2019), Los Angeles, CA
 - 27) **Table:** Table 1: Sociodemographic and Clinical Characteristics of HIV-Positive (Unduplicated) Clients Receiving Ryan White Services in Ryan White Years 26-28 (3/1/2016 - 2/28/2019), Los Angeles, California
 - 28) **Summary:** Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds, 10/22/2018
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REGISTRATION

CALL TO ORDER - INTRODUCTIONS - CONFLICT OF INTEREST: Mr. Brown called the meeting to order at 9:00 am.

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: Approve the 6/18/2019 Planning, Priorities and Allocations (PP&A) 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:

- Ms. Jones said the Consumer Caucus asked participants to ask two questions of at least three consumers. The first was, "What do you need to stay healthy and virally suppressed?" A summary of responses from 11 women included:
 - ☞ take medications
 - ☞ access to physical therapy
 - ☞ do what my doctor tells me to do
 - ☞ good relationship with pharmacy
 - ☞ help with depression and anxiety
 - ☞ access to services in Pomona, including services other than those directly for HIV
 - ☞ healthy, safe living environment for me and my children
 - ☞ support group
 - ☞ exercise
 - ☞ need to understand laboratory results and progression from diagnosis to present
 - ☞ public education on HIV to increase acceptance and reduce stigma against women with HIV

- The second questions was, "What services do you need , but are unable to get?" A summary of responses includes:
 - ↳ water aerobics: requested by physical therapist, but cannot get to site
 - ↳ support for brand name eye drops
 - ↳ someone to talk to, waiting since April to talk to therapist
 - ↳ help finding housing: voucher has expired
 - ↳ fruits and vegetables
 - ↳ everything, because nothing is in Pomona
 - ↳ have transverse myelitis and need assistance to stand, walk, move
 - ↳ legal assistance for housing to get manager to take care of bed bugs
 - ↳ more resources for mothers and children
 - ↳ good mental health specialist who stays for more than a year
 - ↳ education on HIV and cancer (not just breast cancer), and education on HIV and aging (long-term survivors)
 - ↳ support access to programs that understand trauma for adopted children
 - ↳ all children with HIV should have access to Ryan White

III. COMMITTEE NEW BUSINESS

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:** Ms. Barrit provided a PowerPoint overview of the day's planning work in a collaborative partnership between the Commission (Ryan White "Planning Council" or "PC") and DHSP (Ryan White "recipient"). Core themes of the Planning, Priorities and Allocations Committee Special Meeting, Executive Director's/Staff Report PowerPoint are noted below with review of packet materials by Ms. Echols-Watson.

- A. **Priority Setting and Resource Allocation (PSRA) Process Refresher**
- B. **Guidelines for Discussion and Committee Voting Procedures**
- C. **Review Meeting Materials**

6. **CO-CHAIR REPORT**

- A. **Review Meeting Objectives:** Mr. Martinez noted this year the goal was to review data together, determine priorities, and make allocations in one day. While ambitious, this allows everyone to hear the same data to inform decisions. In order to complete the application, PSRA needs to be completed today for at least Program Year (PY) 30. Overall, PP&A is seeking to complete PSRA for three years and may do all three depending on time for the work as summarized below.
 - 1. **Establish common knowledge and understanding of selected data and terminology to help inform the Committee's PSRA deliberations.**
 - 2. **Review and discuss most recent available data on local HIV surveillance epidemiologic information, service utilization, and needs data.**
 - 3. **Develop service category priorities for the Ryan White Program (multi-year).**
 - 4. **Develop resource allocation percentages for the Ryan White Program (multi-year).**

V. PRESENTATION

7. **DIVISION OF HIV AND STD PROGRAMS (DHSP)**

- A. **ABCs of Epidemiology** (Meeting Objective #1): Dr. Green, Chief, Planning, Development and Research, DHSP, opened the work of the day with the 2019 HIV Data Summit PowerPoint in the packet. The presentation reviewed definitions of various epidemiologic terms and how they are used.
- B. **Using Data for Decision Making** (Meeting Objective #1): Dr. Green continued with review of the Using Data for Decision Making PowerPoint in the packet which discussed how to increase effective use of data. Challenges were also addressed such as the inability of DHSP to obtain data from some desirable sources such as Southern California Medi-Cal and Kaiser Permanente data despite the fact that such data is available in Northern California. Data sets normatively indicate limitations such as missing data to inform use, especially when estimates are utilized.

BREAK (10:40 - 10:55 am)

8. **DIVISION OF HIV AND STD PROGRAMS (DHSP) - CONTINUED**

C. Overview DHSP Data Sources (Meeting Objective #1):

- Ms. Garland, Chief Epidemiologist, continued the day's review with presentation of an Overview of HIV Data Sources PowerPoint in the packet. It highlights, in particular, major sources such as the National HIV Behavioral Surveillance (NHBS), the Medical Monitoring Project (MMP), HIV Case Surveillance, and HIV Casewatch.
- Annual data collection for NHBS is June-December. Focus groups, rotated annually, are Men who have Sex with Men (MSM), Injection Drug Users (IDU), and heterosexuals at increased risk. A pilot has begun for transgender individuals. Some jurisdictions are funded for youth. The Center for Disease Control and Prevention (CDC) selects populations.

D. HIV Surveillance and Epidemiologic Data (Meeting Objective #2):

- Ms. Garland continued with presentation of the Epidemiology of HIV in Los Angeles County PowerPoint in the packet, starting with history from first surveillance of Stage 3 HIV Disease (AIDS) cases in 1982. It is notable that only Florida, Georgia, New York, Texas, and California itself report more newly diagnosed HIV cases than Los Angeles County (LAC) which has 5% of all US and 37% of all California cases diagnosed in 2016. It takes about 18 months to prepare data.
- Transmission risk categories are often not completed on case reports. The provider may not collect it or patients, especially females, may not know. That is an issue across jurisdictions so the CDC developed a methodology to impute estimated risk categories based on historical data. Approximately 30%-40% of cases reflect an imputed risk category.
- ➡ Ms. Garland will follow-up on the one-year significant drop in new HIV diagnoses in 2013 (Slide 5) and report back.
- ➡ Ms. Garland will develop a slide with ten years of imputed risk data to help identify changes.
- ➡ Ms. Garland will add denominator for race/ethnicity (Slide 28).

LUNCH (12:15 - 12:40 pm)

9. DIVISION OF HIV AND STD PROGRAMS (DHSP) - CONTINUED

E. Medical Monitoring Project (MMP) (Meeting Objective #2):

- Ms. Garland continued with the Highlights from the Medical Monitoring Project (MMP) Los Angeles (2015-2017) PowerPoint and related fact sheet in the packet. Additional fact sheets are available on the DHSP and CDC websites.
- Regarding disparities, the LAC sample is too small to be viable. DHSP has tried to interest the CDC in increasing sample size but, while that increases jurisdiction-specific information, the CDC is satisfied with drawing from its multiple sites.
- Regarding service barriers, Ms. Garland said the most commonly cited is lack of knowledge of how to obtain services.

F. National HIV Behavioral Surveillance Data (NHBS) (Meeting Objective #2):

- Ms. Garland presented on the Los Angeles County National HIV Behavioral Surveillance Summary PowerPoint and related fact sheets in the packet.
- ➡ Ms. Garland reported DHSP was seeking more data on PrEP usage, including consistency, especially in younger populations, and will provide, as it is available.
- ➡ Of the 1 in 4 who overdosed in the past 12 months, Ms. Garland will report back percentages of meth versus opioids.

BREAK (1:56 - 2:10 pm)

VI. DISCUSSION (Meeting Objectives #3 and #4)

10. DISCUSSION (Meeting Objectives #3 and #4)

- A. Review Paradigms and Operating Values:** Mr. Martinez reviewed the approved Paradigms of Compassion and Equity; and the Operating Values of Efficiency, Quality, Advocacy, and Representation.
- B. Ryan White Service Utilization Report** (Meeting Objective #2):
- Ms. Garland completed her presentations with the Ryan White Program YR 28 Care Utilization Data Summary PowerPoint in the packet. The Ryan White eligibility threshold is 500% of the (Federal Poverty Level (FPL). Patients who have medical insurance may still access Ryan White for services not covered under their primary insurance.
 - Medical Case Management (Medical Care Coordination, MCC) outcome data does not reflect achievement of the viral suppression target. Ms. Garland felt that was largely due to MCC's more complicated patients, e.g., out of care, not virally suppressed, with co-morbidities, homeless. A snapshot in time, patients may also be new to the service. Likewise, Outreach supports the Linkage and Re-engagement Program (LRP) which addresses the same population.
 - ➡ Context, Slide 38: Those receiving actual linkage were closer to 50 while work for others was, e.g., to identify if in care.
- C. 2018 Program Year (PY) 28 Fiscal Report:**
- Dr. Green reviewed the expenditures report. For PY 28, all Part A and B resources will be expended. All PY 27 Minority AIDS Initiative (MAI) carryover into PY 28 will be expended, but some PY 28 MAI funds will carry over into PY 29.

- DHSP provided proposed Part A allocations that take into account, e.g., that four new Outpatient/Ambulatory Health Services providers can absorb a higher allocation. They also take into account best use of Part B, MAI, Net County Cost (NCC), and Substance Abuse Prevention Control (SAPC) funds.

D. Review PY 29 Approved Service Category Prioritization and Allocation Percentages:

- Mr. Martinez noted the Commission's Code of Conduct, displayed in the room. PP&A Members stated conflicts.
- The most recent PY 29 priorities and allocations were provided in the packet as a deliberations starting point.

E. PY 30 Service Category Prioritization:

- Mr. Martinez reminded the body that service categories are defined by Ryan White. A listing in the packet reflects the most recent change to priorities made at the March 2019 meeting to elevate Health Education/Risk Reduction (HE/RR).
- Priorities reflect what services the PC believes will have the greatest system impact based on data. Priorities will not necessarily be reflected in Ryan White allocations because a service may be funded through another source. In order to expend any allocations, a prioritized service must be contracted. Some 18 months is required to initiate a new contract.
- Ms Barrit noted last year PP&A sent a memorandum to DHSP and the Standards and Best Practices (SBP) Committee to develop a combination of Psychosocial Services Support and Child Care that addresses women's needs. SBP was exploring those service category Standards of Care (SOC) in light of the recommendations as part of its Work Plan.
- Another recommendation from the memorandum was to develop a brochure complementary to HIV Connect to promote Ryan White services to both providers and consumers. HIV Connect is funded by NCC.
- ➡ Move Child Care Services up to priority 14, with all other service categories moved down.
- ➡ Preliminary directive to explore targeted HE/RR, Psychosocial Support Services, Housing, and Mental Health Services for women. Dr. Green will provide a report on Women's, Infant, Children, and Youth (WICY) data to inform the above.
- ➡ Preliminary directive to gather information with view towards possible advocacy regarding coverage of the share of cost for children living with HIV receiving insurance through the Children's Health Insurance Program (CHIP).

MOTION 3: Approve PY 30 Service Category Prioritization, as determined (**Passed by Consensus**).

F. PY 30 Allocations Percentages:

- Dr. Green noted that these allocations will be submitted with the Ryan White application in September. They are the initial allocations and will be adjusted, as needed, once the Notice of Award is received.
- Mr. Martinez again reviewed the proposal submitted by DHSP in the packet.

MOTION 4: Approve PY 30 Allocation Percentages per submitted proposal, as determined (**Passed by Consensus**).

G. Multi-Year Service Category Prioritization: Agreed to postponed discussion to next meeting.

MOTION 5: Approve Multi-Year Service Category Prioritization, as determined (**Postponed**).

H. Multi-Year Allocations Percentages: Agreed to postponed discussion to next meeting.

MOTION 6: Approve Multi-Year Allocation Percentages, as determined (**Postponed**).

VII. WRAP UP

11. WRAP UP: The next PP&A meeting will be 8/20/2019, 1:00 to 3:00 pm, at the Commission offices.

A. Review Meeting Activities and Accomplishments: Mr. Martinez thanked everyone for their work.

VIII. ADJOURNMENT

12. ADJOURNMENT: The meeting adjourned at 4:05 pm.