

Ryan
White

Metropolitan Jacksonville Area HIV Health Services PLANNING COUNCIL

Ryan White Part A and B Programs
1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207

Thursday, August 23, 2018

3:00 p.m.

A G E N D A

CALL TO ORDER Beth Parker
Moment of Silence

NHAS GOALS Member
The Mission of the Planning Council is to provide a means for planning and implementing a coordinated response to the needs of people living with and affected by HIV. The goals of the National HIV/AIDS Strategy are:

- To reduce new HIV infections
- To increase access to care and improve health outcomes for people living with HIV
- To reduce HIV-related disparities and health inequities
- To achieve a more coordinated national response to the HIV epidemic

PUBLIC COMMENTS Guests/Members of the Public
• *Please disclose if you have a conflict of interest*

ROLL CALL Ne'Tosha Dopson

APPROVAL OF JULY 26, 2018 MINUTES Beth Parker

LEAD AGENCY – PART B REPORT Sandra Ellis

ADMINISTRATIVE AGENCY – PART A REPORT Sandy Arts

PLANNING COUNCIL CHAIR - REPORT Beth Parker

REPORTS FROM Wade Davis, Elinor Holmes,
CONSUMER ADVISORY BOARDS & Jisell Sobalvarro

COMMITTEE REPORTS

Executive Beth Parker
• Committee recommendation to approve revisions to Policy and Procedures 2002-01 through 2018-01

Membership Steven Greene

Eligibility Ad-Hoc Beth Parker

- Recommendation that the Planning Council approve the Mental Health Co-Payment Policy, the co-payment voucher, and the provider letter

Priority & Allocations Mike Bennett

- Recommendation that the Planning Council approve carry-over funds

UNFINISHED BUSINESS Beth Parker

- Youth Block Party recap (Katrina Odell)

NEW BUSINESS Beth Parker

ANNOUNCEMENTS All

ADJOURNMENT Beth Parker

MEET and GREET Guests and Members

Service Category Quiz

Which category is Transitional Housing under?

- a) Core services
- b) Support services

In the Jacksonville TGA, Peer Navigators are most often funded under what category?

- a) medical case management
- b) non-medical case management
- c) health education/risk reduction
- d) outreach services

Metropolitan Jacksonville Area HIV Health Services
PLANNING COUNCIL

M I N U T E S

Ryan White Part A and B Programs
1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207

Thursday, August 23, 2018

Council Members Present: Beth Parker (*Chair*), Ne'Tosha Dopson (*Vice-Chair*), Steven Greene (*PLWHA Rep*), Michael Bennett, Veronica Hicks, Elinor Holmes, Jacqueline Johnson, Irfan Kakezai, Christie Mathews, Dan Merkan, DeWeece Ogden, Zane Urbanski, and Linda Williams

Council Members Absent: Debbi Carter

Associate Member Present: Katrina Odell, Barrett Tyson, Heather Kilpatrick, Herb Smith
Absent: Wade Davis

Support Staff Present: Sandy Arts, Megan Graham, Brian Hopkins, Lourdes Diaz, and Mary Martinez

Guests: Jose Camino, Gloria Coon, Dawna Cornelissen, Denise Daniels, Bonita Drayton, Chrissy Edmonds, Glen Edwards, Sandra Ellis, Justin Gordon, Lois Hay, Vincent McDaniel, Joe Mims, Johnnetta Moore, Tonetta Neal, John P. (LSS), Claudia Pidgeon, Mobeen Rathore, Esmin Shakespeare, Jisell Sobalvarro, Matt Tochlenhagen, Heather Vaughan, and Charles Wilkerson

Call to Order

The Jacksonville Planning Council was called to order at 3:00 p.m. by Chair Beth Parker. Following a moment of silence, Linda Williams read the NHAS Goals.

Public Comments

There were no public comments.

Roll Call

Ne'Tosha Dopson took the roll and a quorum was declared.

Approval of Minutes

Motion was made and seconded to accept the July 26, 2018 Minutes as presented. Dan Merkan abstained as he was absent from last meeting.

Part B Lead Agency Report (Sandra Ellis)

- Prevention services RFA has been advertised, the deadline to receive applications is September 4th. All current prevention contracts expire December 31, 2018.
- Some of the APO staff will be attending USCA in September.
- Dr. Allison Lloyd is the DOH-Duval Pharmacy Director.
- The July ADAP pick-up rate is 88.21% our goal is 85%.
- Central office in Tallahassee is working on the Area 4 slide sets and we should have them for distribution soon.
- HIV/AIDS Section in Tallahassee is requesting letters of support from Part A grantees towards their application on ADAP Emergency Relief Funds. Requested funds to assist with transitioning clients to insurance and to cover the increasing costs of health insurance premiums, copays and deductibles in the coming year. The proposed plan includes the transfer of 5,800 clients.

Administrative Agency Report (Sandy Arts)

- Grant is due on September 21st.
- Brian upgraded CAREWARE.
- Reiterate that outer door that leads to outside hallway will be closed once meeting starts and anyone coming in late will need to see security guard.

Planning Council Chair Report (Beth Parker)

- Reminder on importance of reading all emails sent by administrative staff. Emails contain information that is not only pertinent to meetings, but to the program.
- AIDS Walk is November 3; we need Planning Council members to volunteer to man the planning council table that morning.
- Congratulated CAN on the ribbon cutting and grand opening of their Philips Highway office.
- Minutes of previous meeting should be reviewed prior to the next meeting.

Consumer Advisory Board Reports

DOH – Duval (Elinor Holmes):

- Meet 3rd Thursday of month.
- No-show for appointments was 29%; pick up rates 88%.
- Promoting to educate/provide clients to be involved in their healthcare and communication with their doctors.

UF CARES C.A.B (Jisell Sobalvarro):

- Jisell stated in her report that at their meeting of August 21st there were 12 members in attendance.
- International Maternal, Pediatric, Adolescent AIDS Clinical Trials (IMPAACT) Leadership Groups and Scientific Committee members will be creating informational reports to distribute.
- Pediatric HIV/AIDS Cohort Study (PHACS) provided members with copies of PHACS CAB semi-annual newsletter that was released.
- Glen Edwards wants patients to stay up-to-date on their RW eligibility through CAN.

- Clinical Effectiveness Group (CEG) is looking for at least one CAB member to become a committee member.
- A psychiatrist has been hired to be at the clinic each Tuesday starting on August 28th.
- A new OBGYN will be starting on October 4th, and will be on-site every Thursday.
- A new peer navigator was recently hired.

Committee Reports

Executive

Beth Parker

- Meeting scheduled for August 7th was cancelled. Next meeting is September 11 at 9 a.m.
- Committee recommended revisions to Policy and Procedures 2002-01 through 2018-01.
- Policy 2014-02 and Policy 2018-01 pertaining to taxi service requests were pulled and tabled for further review. The rest of the policies and procedures were voted on and approved.

Membership

Steven Greene

- Met August 1st; there being no quorum, the meeting was adjourned with no business discussed or action taken.

Eligibility Ad-Hoc

Beth Parker

- The Mental Health Co-Payment Policy was approved with one abstention during the meeting of August 10th.
- The committee reviewed proposed increase in the dental cap. Committee will review the dental cap again in six months, allowing a chance for DOH dental provider to submit a utilization report on spending. The email from Cecilia Gibson (Duval Health Department) was read to the Council stating that she felt the committee's decision was a fair and honest assessment.
- Contract Manager shared a list of labs received from AETC and it will be sent out to an outside source for review and advisement on whether or not these labs are routine for HIV treatment and would fall under OAMC guidelines. Tabled until next meeting.
- Committee continues to discuss a pilot program that will provide for monthly bus passes. Revision of the transportation policy to cover gas cards and bus passes are being worked on. Contract Manager will also develop the forms to be used.
- Committee recommended approval of the Mental Health Co-Payment Policy, co-payment voucher, and provider letter. Although this was a committee recommendation, the Planning

Council still entertained a motion from the floor to approve the policy and forms. A vote was taken and the motion passed.

- Next meeting will be September 10 @ 11 a.m.

Priority and Allocations

Mike Bennett

- Committee met on August 9th. Since that meeting, it was learned that only formulary funds can be carried over for FY 2018. Committee recommended the following allocation for carry-over funds:

Outreach	\$ 2,000
Legal Services	\$ 65,000
Ins. Premium Assistance	\$ 40,000
Transitional Housing	\$ 15,000
SA - Residential	\$ 38,360
Total	\$145,360

There were no further discussions; a roll call vote was taken and the motion passed.

M. Bennett	Yes	J. Johnson	yes
N. Dopson	Yes	I. Kakezai	yes
S. Greene	Yes	D. Ogden	yes
V. Hicks	Yes	B. Parker	yes
E. Holmes	Yes	L. Williams	yes

Next Priority and Allocations meeting will be October 11th.

Unfinished Business

Youth Block Party Recap:

- Katrina showed a video of the event
- There were test performed: 82 non-reactive, 30 waiting for AHF #
- There were 59 volunteers and 36 vendors that participated rather than 48
- Backpacks remaining: 167 were given away and 333 remaining
- Incentives: for games and first 100 tested
 - Gave out 97 gift cards
 - Carryover: 143 gift cards
- Funds
 - Carryover (2017): \$5,045.76
 - Donations: \$15,004.05 total: \$20,049.81
 - Expenses: \$10,201.99
- Storage cost: \$815.83 for a year yielding to \$1590.00 and savings of \$775

- 51 passports submitted
- 47 surveys brought back

New Business

- No new business.

Announcements

- Bonita introduced UF CARE's new peer navigator, Justin Gordon.
- Healing Women & Men Support Group meets on first Thursday of each month @ NFAN, 12:30-1:30 p.m. This is a confidential support group but open to anyone interested in seeking support.
- The next meeting of the Community Connections will be September 13th.
- Next meeting of FCCAP will be September 4th at 2 p.m., Wells Fargo Building.
- Jail Link meeting on September 24th at 2 p.m.

Adjournment

The meeting was adjourned at approximately 4:15 p.m.

Approved by:



Beth Parker, Planning Council Chair



(date)

Metropolitan Jacksonville Area HIV Health Services Planning Council's
MEMBERSHIP COMMITTEE

Ryan White Part A Office ♦ 1809 Art Museum Drive, Suite 100 ♦ Jacksonville, FL 32207

Wednesday, August 1, 2018 Minutes of the Meeting

Attending: Steven Greene (*Chair*)
Ne'Tosha Dopson

Megan Graham, staff

Absent: Debbi Carter
Veronica Hicks
Linda Williams

Call to Order: The meeting was called to order at 10:15 a.m. by Steven Greene.

Adjournment: There being no quorum, the meeting was adjourned at 10:16 a.m., with no business discussed or action taken.

ELIGIBILITY AD-HOC COMMITTEE

Ryan White Part A Office • 1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207

Friday, August 10, 2018 Minutes of the Meeting

Call to Order: Planning Council Chair Beth Parker called the meeting to order at 9:20 a.m. and led the group in a moment of silence.

Attendees:	Sandy Arts	Beth Parker
	Justin Bell	Sandra Sikes
	Chrissy Edmonds	Heather Vaughan
	Megan Graham	

Topic # 1 Heather Vaughan presented a draft on the Mental Health Co-Payments policy. Committee reviewed the draft policy and made two changes to item 7. Question answered on item 2.B regarding the ISP; it would be completed by the mental health MCM.

Motion made by Justin Bell, seconded by Chrissy Edmonds to approve the Mental Health Co-Payment Policy, the co-payment voucher, and the provider letter. There was no further discussion; motion was approved with one abstention (Vaughan) and all others voting in favor.

Topic #2 Committee reviewed information from Cecilia Gibson proposing an increase in the dental cap to \$3,500. Almost all exceptions have been approved, so raising the cap would not impact a patient either way. Keeping the dental cap at \$2,400 would impact the provider who would have to continue submitting the extra paperwork seeking an exception. Committee would like to see some type of utilization report from RW dental providers at least annually to get a clear idea of how many clients are treated via exceptions to the \$2,400 cap? The committee would ask the DOH dental provider to come back in six months for the committee to review the cap again, after they've had a chance to see how the spending is going.

Topic #3

Megan shared a list of labs she recently received from AETC. Heather suggested that we send the list to an outside source for them to review and advise if these labs are routine for HIV treatment and would fall under OAMC guidelines for HIV treatment and care. Heather will forward the list to Dr. Bob Catalla, who is a former provider in the Jacksonville TGA. This topic will be tabled until the next meeting.

Topic #4

Transportation. Committee needs to draft a new policy for monthly bus passes. Megan is already working on revising the transportation policy which covers gas cards and daily bus passes; she can include monthly passes as well. If monthly bus passes can be procured for a pilot program (through 2/28/19), then some of the qualifiers would be:

- Client should have at least four appointments within a 30-day period. Appointments could be medical, dental, mental health, counseling, or case management; or attend a meeting for support group, consumer advisory board, Community Connections, or Planning Council.
- Client would pick up their monthly bus pass at the agency who case manages them.

Megan will also develop the forms to use with this.

Public Comments

Please disclose if you have a conflict of interest.

None

Announcements

The next Eligibility Ad-Hoc meeting will be Monday, September 10 at 11:00 a.m. to discuss lab reports, transportation, and telemedicine.

CAN Community Health's grand opening will be August 23.

Adjournment

11:15 a.m.

Recommendation to the
Planning Council

That the Planning Council approves the Mental Health Co-Payment Policy, co-payment voucher, and the provider letter.

Meeting Minutes distributed via email on 08/14/18.

Minutes reviewed by 
Beth Parker, Planning Council Chair

Meeting Minutes will be approved by the Planning Council on 08/23/18.

To: AD-HOC Planning Council
From: West Jacksonville Dental Center
Re: Dental Cap

Dear Madame President and gracious members of The Planning Council,

Thank you for the opportunity to present this information. The forward thinking of this council to implement positive change is appreciated, and your willingness to see them through respected.

As previously identified, West Jacksonville dental patients frequently come to us with a history of minimal to no access to dental treatment. As a result, they often have numerous and complex dental needs, are in pain and/or lack confidence the “system” will work for them. Many are anxious and fearful of dental treatment and uncertain of the benefits to their overall health achieved by receiving treatment. Delaying treatment can impact not only oral function, but social interactions. Often our patients express embarrassment and explain they limit interaction with others, and may avoid seeking employment or enrolling in educational pursuits until they can “smile again.”

Please review the attached spreadsheet that reflects current submissions with proposed treatment cost. In reviewing the attached report and comparing our current cap of \$2400 versus the average patient needs, the clinic can only move forward without pre-approval on three additional patients. *View the report horizontally listed under Total Submission.* This analysis reveals minimal intended positive impact on our patient population’s needs.

After evaluating the data, we are suggesting a dental cap of **\$3500**. The result of an increase would allow 15 additional patients to immediately begin treatment without the delays incurred for prior approval.

An approval only allows us to initiate treatment, several months are usually required to make substantial progress. Delays reinforce beliefs that “no one cares,” with outcomes of frustration, giving up on services or even hostility to processes and staff.



Parks, Recreation and Community Services
Social Services Division
Ryan White Part A Grant Program

Policy No.
Review Responsibility:
Approval Date:
Approved By:
Revised Date:

TITLE: MENTAL HEALTH CO-PAY ASSISTANCE PROGRAM

POLICY STATEMENT:

Mental Health co-pay assistance is the provision of financial assistance paid on the behalf of eligible individuals living with HIV to maintain mental health treatment at approved providers. This assistance is aimed to decrease or remove the financial barriers of mental health co-pays.

References: HRSA/HAB and other federal policies governing mental health are found in HAB Policy Clarification Notice 16-02.

PROCEDURES:

1. Eligibility Requirements: The following are eligibility requirements for all individuals seeking Ryan White (RW) Part A funded serves in the Jacksonville Transitional Grant Area (TGA).

A: Notice of Ryan White Eligibility

B: Active private health insurance coverage with benefits that provide adequate treatment for HIV and AIDS.

C: Adherence with at least one HIV primary medical service in the past six months.

2. Collection of Documentation: Enrollment into the mental health co-pay assistance program requires the following documentation to be completed before co-pays are paid.

A: Completed enrollment packet and all required HIPAA release forms.

B: Completed Individual Service Plan

C: Copy of the front and back of the individual's Insurance Card.

D: Provider election and participation form

3. Forms: The following forms must be completed and placed in the client file:

A: MH Co-pay enrollment packet

B: MH/SA screening

C: Individual Service Plan (ISP)

D: No Show Policy Statement

E: Client Consent to Fax Confidential Information

F: Authorization to Share Information

- G: Authorization to Release information
- H: Notice of Eligibility (must be updated every six months)
- I: Clients Rights, Responsibilities, and Grievance Procedure

4. Notice of Ineligibility or disenrollment: Any enrollee determined to ineligible for continued services will be notified in writing within 7-10 business days. Any enrollee determined to be deemed non-compliant with service requirements will be provided with a suspension letter sent in writing and will have 30 days to complete compliancy. If enrollee does not respond, then co-pay assistance will be suspended and a disenrollment letter will mailed.

5. Provider Selection: As the number of mental health professionals in the Jacksonville TGA which includes Baker, Clay, Duval, Nassau and St. Johns counties are vast, the subgrantee will endeavor to provide co-pays with as many providers are possible. An approved provider list will be established and if an enrollee chooses to see a provider outside of this list and co-pays are not approved before services are rendered, the enrollee will be responsible for the charges.

6. Payment of Co-Payments: Subgrantee shall pay enrollee's mental health co-pays for the mental health services to include individual counseling and psychiatric services. The subgrantee will verify the required payment with the provider and ensure funds for payment of co-pays not to exceed \$65.00 per office visit. The Subgrantee will authorize no more than two (2) co-payments per month.

7. Unusual Incident Report: Subgrantee will notify RW Part A Program Manager within five (5) calendar days of the subgrantee's initial discovery of an incident, as defined to include the following:

- A: Threatening behavior by an enrollee to agency personnel
- B: Breach of confidentiality
- C: Filed letter of complaint or grievance

8. Grievance Procedure: If an applicant or enrollee believes he or she has been incorrectly denied enrollment into the mental health co-pay assistance program by the subgrantee, the applicant may initiate the subgrantee's grievance policy. If at the conclusion of the subgrantee's process, the applicant is again denied enrollment and/or feels he or she qualifies for enrollment, the applicant may then be referred to the RW Part A Program Manager for review of enrollment denial.

Mental Health Office Visit Co-Payment Voucher

The holder of this voucher, _____, with the date of birth ____/____/____, and RW number _____ is an active Ryan White client entitled to receive health care benefits for health insurance co-payments paid on his/her behalf. The client's eligibility dates are _____ to _____. The LSS mental health staff agrees to submit the completed voucher to the provider of record at least 48 hours before the scheduled appointment. The service provider agrees to complete and fax or mail back the voucher and account summary detail within 48 hours of providing the service to ensure prompt payment of services.

Mail to: Lutheran Social Services
Attn: Heather Vaughan
4615 Philips Highway
Jacksonville, FL 32207

Or Fax to: (904) 730-8265
Attn: Heather Vaughan

CLINIC/GROUP NAME	PROVIDER NAME	DATE OF SERVICE	CO-PAYMENT AMOUNT
If the services were not provided, please enter "VOID" in the space above and return form to LSS.		TOTAL	

LSS Mental Health Staff Signature

Date

Service Provider Signature

Date

Greetings Provider,

Lutheran Social Services of NE Florida (LSS), will be providing mental health co-payments for individuals enrolled in the Ryan White Program. These co-payments will be made for eligible individuals who attend your practice. If your group would like to participate in this program, please read the information below and sign the agreement that is attached.

The Ryan White Mental Health Co-Payment programs aims to decrease the financial burden for individuals living with HIV that have Medicaid, Medicare or private insurance to access mental health services. Providers will be paid up to \$65.00 depending on the insurance co-payment for the individual. Vouchers will be sent to your billing clerk at least 48 hours of the amount confirming the co-pay amount. Payments for these vouchers will be forwarded to your office within 15 days of service. As a provider your responsibility would be to accept the voucher and return it within 48 hours of the completed service with an attached account summary for the individual. Once the voucher is completed and returned to LSS, payment will be rendered for the copayment within 15 days. Payment cannot be rendered unless the voucher is complete and the service is rendered. LSS does not pay for late cancellations or no show appointments. Vouchers must be sent to the provider for copayment before services are rendered.

Our agency would like the opportunity to work with your practice in assisting individuals living with HIV to receive quality, coordinated mental health care. If your practice would like to be a participating provider and receive co-payment assistance please complete the attached forms and return them to our office.

We appreciate the excellence in service your practice as provided to those living with HIV and look forward to working with you. If you have any questions please contact Heather Vaughan at 904-739-7016.

Thank You,

Heather Vaughan MS, CRC
Director of Human Services
Lutheran Social Services of NE FL

Metropolitan Jacksonville Area HIV Health Services Planning Council's
PRIORITY and ALLOCATIONS COMMITTEE

Ryan White Part A Office • 1809 Art Museum Drive, Suite 100 • Jacksonville, FL 32207

Thursday, August 9, 2018 Minutes of the Meeting

CALL TO ORDER

2:00 p.m. by Michael Bennett, Chair.

Moment of Silence, followed by self-introductions.

ATTENDEES

Charlene Arnold

Dana Barnes

Justin Bell *(NV)*

Michael Bennett *(Chair)*

Chrissy Edmonds

Glen Edwards *(NV)*

Steven Greene

Johnathan Harris

Heather Kilpatrick

Brandon Montanez

Wendy Moses

Katrina Odell

Beth Parker

Laurie Turner

Heather Vaughan

Linda Williams

Guests

Robin Abbott

Staff

Sandy Arts

Megan Graham

Sandra Sikes

MEMBERS ABSENT

Debbi Carter

Sandra Ellis

Mary Glenn

Nathaniel Hendley

Elinor Holmes *(NV)*

Kristin Maranville

Zane Urbanski *(Co-Chair)*

**FUNDING ALLOCATIONS
OF THE CARRY-OVER
FOR FY2018**

The TGA will have \$356,606 in carry-over funding that can be used for special projects, staffing needs, services, etc. Members were given the opportunity to speak about projects their agencies could embark on, or on whether certain service categories would need additional funds between now and the end of the grant year. A general outline of the specific projects is attached.

After discussion, the committee moved that the carry-over funding be allocated to the following categories:

Outreach	\$ 42,000
Legal Services	\$ 65,000
OAMC	\$ 13,000
Ins. Premium Assistance	\$ 70,000
Medical Nutrition Therapy	\$ 18,000

Food Bank	\$ 23,000
Medical Transportation	\$ 15,606
Transitional Housing	\$ 15,000
SA – Residential	<u>\$ 95,000</u>
Total:	\$356,606

A roll call vote was taken and all members voted in favor of the allocations. Those voting were:

C. Arnold	J. Harris	L. Turner
M. Bennett	M. Hobbs	L. Williams
C. Edmonds	H. Kilpatrick	
S. Greene	K. Odell	

Sandy Arts stated the next steps were to submit the carry-over report to HRSA for their approval, which could take a few weeks. After HRSA approval, then revised contracts will be routed to the appropriate city departments before being sent to the agencies for their signatures. This money must be spent by 2/28/19.

Chief Johnnetta Moore stated that final reallocations should be approved by the Planning Council no later than December, in order to give the city time to process new contracts, and get the new contracts to the agencies so they can spend down reallocated monies during the last one to two months of the grant year.

PUBLIC COMMENTS

None

ANNOUNCEMENTS

Next Priority and Allocations meeting will be Thursday, October 11 at 1:45 p.m.

Youth Block Party is August 18; volunteers still needed.

ADJOURNED

At 3:45 p.m.

PRIORITY and ALLOCATIONS COMMITTEE

Thursday, August 9, 2018 Minutes of the Meeting

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**RECOMMENDATION TO
THE PLANNING COUNCIL:**

To approve the allocation of carry-over funding as outlined above.

Meeting Minutes distributed via email on 08/14/18.

Minutes reviewed by


Michael Bennett, Priority & Allocations Committee Chair

Meeting Minutes will be approved by the Planning Council on 08/23/18.

\$356,606 was not spent last year (3/1/17 through 2/28/18).

Are there special projects or staff needs that you have in mind that you'd like to use this money for? Remember, whatever staffing or projects you plan to implement, the money for this must be used by 2/28/19. For the carry-over, we do not have to comply with the 75/25% ratio where 75% must be targeted for core medical services. Sandy Arts read a list of projects she's collected from several agencies.

Temporary housing (<i>transitional housing</i>)	Assessments and psych evaluations
Personal hygiene and cleaning supplies	Peer navigators
Food pantry	Health insurance
Mental health services	Positive nutrition
Legal services	A hepatitis project
Legal care coordination	transportation

Linda Williams – we need outreach for our senior community. Need a full-time person in position of peer navigator or similar position that would concentrate on seniors. This person would coordinate a team of volunteers who would take on the task of networking with local independent living communities, to provide regular and consistent workshops to fortify a healthy and thriving older generation. Incorporate other areas of wellness besides HIV prevention and testing treatment, such as emotional, spiritual, relational, and financial health through networking with our local community resources.

To be included in
the \$40,000
Outreach/Peer
Navigator
in next section.

Steven Greene – people who no longer have Medicaid pac waiver are struggling. All of our former Pac Waiver clients are asking for help. Even when they call their providers, they feel like they're hitting a brick wall in terms of actually getting anything done. Maybe if we had a team of peer navigators who knew the Medicaid system and would field these questions, we might ease their burden a little.

Beth answer that this has been brought up, and one of the things discussed was that peer navigators could assist with that. Beth feels like we do need additional funding for outreach and to hire more peer navigators.

Outreach/
Peer
40,000

Katrina Odell talked about Youth Block Party – could use funding. Outreach
2,000

Heather Kilpatrick talked about the need for a case manager or a peer navigator for legal services. As it stands now, the legal staff are the ones transporting the clients to appointments, to the Social Security office or DMV, or assist in getting food. Their time would be better spent handling legal issues, if there was a peer or case manager who could do these other services. Legal Svs
65,000

Needs more funding before end of grant year for legal services.

Chrissy Edmonds discussed a possible Hepatitis-C program to collaborate with other agencies and identify, screen, and treat Hepatitis-C in co-infected HIV patients. Funding would cover approximately ten (10) patients per month. They would be partnering with Gateway, LSS, and the Jail Link program for this collaboration. The funding would cover the initial medical appointment of the client. That cost is generally \$193.43 per patient plus another 10% to cover overhead. After the initial appointment, the client would be enrolled in the program, and the cost of the Hep-C medication would be paid by another source, Health Fund Solutions. Anticipated cost for a six-month period would be around \$13,000. OAMC
13,000

Beth Parker talked about the health insurance premium assistance program. As it stands now, they will probably be about \$70,000 short of what they need between now and the end of the grant year (2/28/19). There is information coming down from HRSA that may also allow the TGA flexibility to pay for Medicare premiums. Health insurance premium assistance does cover co-pays for infectious disease office visits. Ins.
Premium
Asst.
70,000

A question was brought up about co-payments for medications. This is already covered; a client's medical case manager would set this up. Also brought up was an observation that with several changes that have come about recently, medical case managers sometimes need to meet with their clients more than one time a month; can this be accommodated? The answer was that the case manager can see the client numerous times throughout the month, however they can only bill one time.

An agency would like to start a new program on Positive Nutrition. Donna Fuchs from NFAN has been working with Dr. Lauri Wright of UNF on a program where UNF would host a nutrition course consisting of four classes, one class per week. Week 1's curriculum would be *'Eating for Health'*; Week 2 would be *'Eating on a Budget'*; Week 3 would be *'Managing Health Issues with Diet'*; and Week 4 would be *'Putting Nutrition into Action'*. UNF would take charge of running this program, providing a classroom and instructor who is a registered dietitian. There would be positive re-enforcements/gift cards (promotional items) for students who complete the course and transportation would be provided to participants. Total cost of the program is expected to be approximately \$17,000. Question was asked about which category this would come under, and the general consensus was either Medical Nutritional Therapy or Food Bank.

Medical
Nutrition
Therapy

18,000

Funds are needed for Food Bank. LSS food bank is stocked with canned and packaged food; NFAN uses Save-A-Lot gift cards.

Food Bank

20,000

Heather Vaughan talked about a program LSS has where a client who comes in for the food bank can also request personal hygiene items they need. LSS is serving about 50 to 60 clients per month. To continue funding this program until the end of the grant year, they would need an additional \$3,000.

Food Bank

3,000

Transportation: is it possible to purchase a monthly bus pass for a client, rather than giving them a one-day bus pass several times through the month? The cost of a 30-day Star Card from JTA is \$50.00. This could be a pilot program to see how effective it is and how well it can be monitored. However, a monthly bus pass goes against the TGA's transportation policy because the policy requires that Ryan White clients receiving a bus pass or gas card only use that pass or that card to access medical visits (i.e. doctor or dental appointments, counseling, or case management). There was a brief discussion and this topic will also be brought up at the Eligibility Ad-Hoc meeting scheduled for August 10.

Medical
Transp.

15,606

Regarding transitional housing, the TGA could reinstate a program where funds were used for a one-time emergency assistance or for first month's rent.

Trans.
Housing
15,000

The Substance Abuse Residential Treatment will be running out of money soon. One provider will need around \$50,000 to \$75,000; another provider will also need more funding.

SA –
Residential
95,000

Another need mentioned was assistance for psychiatric evaluations. Provider has been fielding requests from other agencies that are sending clients to that provider wanting free assessments.

Glen Edwards talked about Telemedicine. This may be funded under OAMC. Sandy Arts replied that UF CARES is currently funded for OAMC; we would have to balance what UF CARES currently has for OAMC and then what would be the cost of a visit and would they need additional funding to spend out what they currently have or would they need more funding? Beth asked if the provider had a ballpark figure on the amount they are looking for between now and the end of February. Glen said they have not calculated the numbers yet, but will soon. It would not be an actual cost. As everyone is aware, right now the majority of their clients are covered under Medicaid, Medicare, or private insurance. UF is experiencing the problem of generating enough units to pull down from the current outpatient medical funding because more and more people who we provide services are already insured. So it's becoming more troublesome for us to try to put down what we have, but we can right now, Telemedicine is a comfort for us to be able to get [inaudible]. Beth commented that it sounds more like a shipped in language than dollars. Sandy Arts clarified with Glen and he agreed that the question on Telemedicine is not that the provider is asking for additional dollars, they are just asking if OAMC dollars can be used for Telemedicine. Sandy said that the question on Telemedicine falling under OAMC would be determined by the Eligibility Ad-Hoc committee and it will be added to their future agenda to discuss.

No \$\$\$
Referred to
Eligibility Ad-
Hoc
committee

Metropolitan Jacksonville Area HIV Health Services Planning Council

September 2018

Mon	Tue	Wed	Thu	Fri
3 <i>Labor Day</i>	4	5 10:00 Membership	6 U.S. Conf. on AIDS 9/6—9/9	7
10 11:00 Eligibility Ad-Hoc	11 9:00 Executive	12 2:00 ICPC	13 12:00 Community Connections	14 Positive Living Conf. Ft. Walton Beach 9/14-16
17	18 <i>Nat'l HIV/AIDS & Aging Awareness Day</i>	19	20 9:00 MCM	21 9:00 Providers <i>Part A Grant Application Due</i>
24 2:00 Jail Link	25	26	27 3:00 Planning Council <i>Nat'l Gay Men's HIV/AIDS</i>	28

Metropolitan Jacksonville Area HIV Health Services Planning Council

October 2018

Mon	Tue	Wed	Thu	Fri
1	2	3 10:00 Membership	4 9:00 W.A.C.	5
8	9 9:00 Executive	10 10:30-noon CQI meeting	11 12:00 Community Connections 1:45 Priority & Alloc.	12
15 	16	17	18 9:00 MCM	19 9:00 Providers
22	23	24	25 3:00 Planning Council	26
29	30	31		