

Minutes # Monday, January 11th, 2021 4pm-6:30pm

Virtually through Zoom

Council Members Present: Katie Hara (Madison Clinic), Michael Louder, German Galindo, Susan Buskin (Dept. of Public Health-Seattle & King County), Lydia Guy-Ortiz (Washington State Dept. of Health), Ron Padgett, Hector Urrunaga-Diaz (Bailey-Boushay House), Alora Gale, Richard Prasad (Country Doctor), John Rodriguez, Eve Lake (Madison Clinic), Genie Sheth (City of Seattle-Human Services Dept.), Teresia Otieno (Center for Multicultural Health), Jonas Nicotra, Tony Radovich

Council Members Absent: Gladys Wiessner

Planning Council Staff Present: Karen Chung, Wilson Pipkin (minutes)

Recipient Staff Present: Linda Coomas (Recipient), Shila Wu, Mark Baker (clinical quality management)

Visitors Present: Michel Dill (Spanish/English Interpretation), Dennis Torres (Gilead Sciences), Wanda Vazquez (Janssen Biotech), Leanne Neumann (Janssen Biotech), Victor Ramirez (Mountains West AIDS Education and Training Centers), Tara Roufi (Janssen Biotech), Andrew Ashiofu (prospective Councilmember), Kevin Hockley (Optum HIV Specialty Pharmacy)

Italics denote Planning Council Membership.

I. Welcome, Introductions and Announcements

Michael apologized for misstating that he was the only American born African American Councilmember, as he is the only American born African American consumer and there is another American born African American on the Council.

Susan announced that the annual epidemiology report has been published and can be received in an electronic or physical copy. <u>Tennishia.williams@kingcounty.gov</u> is the contact information for a physical copy.

Susan announced that there is a webinar 8am Tuesday Jan 26th where Lara Strick will be discussing HIV in incarcerated populations through the AIDS Clinical Conference (ACC). To join the ACC mailing list contact Amber Tejada (206) 744-5564.

Tony announced that there needs to be a change in the System of Care Committee report to include parking vouchers, and that this must be brought up by a Councilmember

Lydia announced that there is at the state level a COVID-19 collaborative being created, and the information was emailed to all Councilmembers. If you are interested respond by Jan 20th at the following link:

https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.doh.wa.gov%

2FEmergencies%2FCOVID19%2FVaccineInformation%2FEngagement%2FCollaborative &data=04%7C01%7Ckchung%40kingcounty.gov%7Ca6e8d1a956e64b1719f408d8b2698 b76%7Cbae5059a76f049d7999672dfe95d69c7%7C0%7C0%7C637455513693821204% 7CUnknown%7CTWFpbGZsb3d8eyJWljoiMC4wLjAwMDAiLCJQljoiV2luMzliLCJBTil6lk1 haWwiLCJXVCI6Mn0%3D%7C1000&sdata=38PGyFbCPubirJostRcgbs47TquVprPa8hG DdFziEdl%3D&reserved=0

II. Meeting Agenda

There was an action added under System of Care Committee "Medical Transportation service units-parking vouchers."

III. Meeting Minutes

- - In favor 11 Michael, German, Susan, Katie, Lydia, Richard, Genie, Teresia, John, Richard, Alora
 - Opposed -0-
 - Abstaining -2- Eve, Hector

IV. Public Comment

None

V. Recipient Report (Linda)

In compliance with King County procurement requirements, tomorrow at 1pm the request for applications (RFA) for dental providers will be released. This will be sent out to currently funded providers, possible new providers, and will be posted to the County website. Recipient staff is working on the large HIV care services RFA which will be released by the end of January. Recipient staff is working on the 4-month contracts for service gap prevention, which are being created due to the delay of the prioritization and allocation process. Award letters went out today. Mark has been working to get everyone up and running on the new client level data system called Provide. There will be an implementation learning curve, but it should streamline the process once everyone is used to it. In response to a question it was stated that information will be migrated from the old system CareWare to the new Provide system. There have been a few minor issues, but it has gone better than expected for a migration of this magnitude.

VI. Executive Committee Report (Michael & Katie)

The committee report backs were pretty brief. There was discussion of troubles that people are finding in accessing care during COVID due to telehealth and not being able access services in person. Some consumers have been adversely impacted by this. There was discussion about the rollout of the vaccine, and if it would be possible to invite a subject matter expert to the Council to discuss that further.

<JONAS NICOTRA JOINED THE MEETING AT 4:33>

Jonas stated there might be issues accessing the COVID vaccine and test for those who do not have insurance. It was stated people living with HIV (PLWH) have to have insurance to access care and treatment. It was stated that Public Health jurisdictions provide COVID testing free of charge at certain locations. Some agencies may charge for the test, and there were some around the holidays charging hundreds for the COVID test. If a subject matter expert is brought to speak at the Council, this would be a great topic for them to address. A Councilmember offered to personally walk *Jonas* through where to get free COVID tests in Snohomish County.

VII. Needs Assessment, Priority Setting & Resource Allocation Committee Report (Richard & Ron)

This committee did not meet in December and will be meeting Thursday, January 28th @ 4:30pm. The main work item will be needs assessment. There was a request to capacity build around telehealth, and how that can be supported at agencies.

VIII. Membership/Operations Committee Report (Eve)

The focus of this committee has been on interviews and scheduling interviews. There was an interview at the last meeting, and 2 coming up. There are gaps in the position of mental health provider and someone who represents incarcerated PLWH. It was stated that Lina was approved by the Executive's Office but has not been present due to family issues. In response to a question, it was stated that there has been no contact made to the +Caucus email printed on the +Caucus brochures and business cards yet.

IX. +Caucus Report

The discussion about keeping the +Caucus a safe space was brought up, but the discussion was tabled until *Teresia* could be present. As more movement is made toward recruitment and public facing work, there are fears about public disclosure of HIV status. There was discussion around outreach in Snohomish County. There was discussion about the rotating co-chair and whether or not this is allowable by the bylaws. There was discussion on the consumer handbook. There was information on a national webinar on telehealth sent out.

X. System of Care Committee Report

Tony thanked his colleagues for the work that they accomplish together. There are 3 service standard updates that need to be approved including Non-Medical Case Management, Oral Health, and Outpatient Ambulatory Health Services-Treatment Adherence. In response to a question, it was stated that some of the dates are the days that the review of the document began, and some are the dates that review ended. If and when these standards are approved, the dates will be revised to today's date.

<RON PADGETT LEFT THE MEETING>

Non-Medical Case Management Service Standards were reviewed. The only changes were to make the care plan a mutually agreed upon plan, and that the service needs to be provided in the language in which the client needs to receive service. Initial assessment should be completed within 30 days, and that this should lead to a mutually agreed upon care plan that includes next steps. To comply with state level shifts, the language was updated from Chemical Dependency Certification to Substance Use Disorder Professional Certification. In response to a question it was stated that the ensuring of a mutually agreed upon plan would be a part of the data gathered in the note taking process through an attestation of the case manager. The discussion around the timeline of the plan should also be reflected in the service plan. The measure of these standards is to check the documentation in the client record. It was highlighted that in the housing plan standard that the housing plan is reviewed and updated every 6 months and a copy is offered to the client. It was stated that this language about review and copy given should be used across the standards for this service category. In response to a question it was stated that these changes can be incorporated and approved in this meeting. It was decided to approve all three service standards review simultaneously.

<ALORA GALE LEFT THE MEETING>

Outpatient Ambulatory Health Services – Treatment Adherence was reviewed next. The only change made was to 3.3 to change "Skill building" to "Skills building."

Oral Health was reviewed next. The point of this service category is to recruit and procure dentists for PLWH. There were no changes to this service standard.

There was a conversation around providing parking vouchers in NAPSRA, which could be used much like bus passes to ensure that people maintain contact with their health providers. This

could be nested as a service unit under Medical Transportation and could allow clients living out of their cars to more easily attend appointments. The previous barrier to this was that Ryan White Part A (RWPA) funds cannot be paid directly to clients and the service would need to be in the form of a voucher. Harborview does have prepaid vouchers that subrecipient agencies could purchase and provide to clients. Currently the service category only covers one-way transportation, and a service unit would need to be added to allow for parking vouchers. It was clarified that an agency would have to apply to the RFA to provide these parking vouchers. It was stated that there is no guarantee that an agency will apply to provide this service unit in a way that does not hand clients cash. It was clarified that parking vouchers would not be a sub-priority. There is \$70,000 allocated to Medical Transportation, and an agency could apply for one of the service units (1-way transportation or parking vouchers) or both. It was noted this being a first, it is not possible to see if this would be a service provided throughout the TGA or whether an agency would apply to provide vouchers specifically to remove barriers to consumers seeking services at their agency.

It was noted that 3 things up for approval are service standards and measures, and the other is a service unit.

MOTION: Richard moved to proposed that the 3 standards of care be accepted with the amended changes. Lydia seconded.

Discussion: It was noted that there are those present who have conflicts in some of these service categories, and that approval should happen separately to reflect this.

MOTION RETRACTED

MOTION: Richard moved to accept Non-Medical Case Management to reflect the changes. Lydia seconded.

Discussion: None

☑ The motion passed with the following vote:

- In favor 11 Michael, German, Susan, Katie, Lydia, Richard, Hector, Eve, Genie, Jonas, John
- Opposed -0-
- Abstaining -1- Teresia (conflict)

MOTION: Lydia moved to accept the Outpatient Ambulatory Services with the proposed change. Richard seconded.

Discussion: None

☑ The motion passed with the following vote:

- In favor 12 Michael, German, Susan, Katie, Lydia, Richard, Hector, Eve, Genie, Jonas, Teresia, John
- Opposed -0-
- Abstaining -0-

MOTION: Michael moved to approve Oral Health with the revisions. Lydia Seconds.

Discussion: None

☑ The motion passed with the following vote:

- In favor 11 Michael, Susan, Katie, Lydia, Hector, Eve, Genie, Jonas, Teresia, John, German
- Opposed --
- Abstaining 1– Richard (conflict)

Council staff offered the following starting point for the language around the parking voucher service unit, "One unit = one voucher for parking to access medical and support services." Linda requested that language be added to highlight the Health Resources and Services Administration (HRSA) rule barring cash payments directly to consumers. The sentence was added, "Direct cash payments to clients or cash reimbursements are not permitted."

MOTION: Richard moved to accept the new service unit definition for parking vouchers, "One unit = one voucher for parking to access medical and support services. Direct cash payments or cash reimbursements to clients are not allowed." Jonas seconded.

Discussion: Susan asked if a maximum time limit was necessary, and it was stated that this would be a part of program design.

☑ The motion passed with the following vote:

- In favor 10 Michael, German, Susan, Katie, Lydia, Richard, Eve, Jonas, Teresia, John,
- Opposed --
- Abstaining 2– Hector (conflicted), Genie

Tony noted that there is a System of Care Committee meeting on the 25th of Jan at 9:30am. They will be reviewing the Psychosocial Support and Medical Transportation standards of care.

XI. Adjourn @ 6:18pm

NEXT MEETING: 4pm, Monday, February 8th virtually through Zoom.