

# **Greater Hampton Roads HIV Health Services Planning Council**

## **Quality Improvement & Strategic Planning Committee Meeting**

Norfolk Department of Human Services, 741 Monticello Avenue

**Thursday, February 15, 2018: 4:00 p.m.**

**Call to Order:** The meeting was called to order at 4:11 p.m.

**Moment of Silent Reflection:** The committee observed a moment of silence and reflection.

**Welcome/Introductions/Roll Call:** Attendance was called as follows:

**Present:**

Gwendolyn Ellis-Wilson  
Rachael Artise  
Ashley Brown  
Michael Singleton

Doris McNeill  
Todd England  
Tanya Kearney  
Tony Boston

**Members Absent:**

Catherine Derber  
Jerome Cuffee

**Staff:**

Thomas Schucker-P.C. Support  
Marsha Butler  
Teresa – PC Support Staff

Michael Koran-P.C. Support  
Jacquelyne Wiggins-Grantee Staff

**Review of Minutes:**

The committee reviewed the minutes prior to the meeting. On page 4 of the minutes, under ***Any Other Business***, line number 2, the following correction was made:

- The committee will reconvene on *Thursday, January 18<sup>th</sup>, 2018* instead of, January 15<sup>th</sup>.

A motion was accepted to approve the minutes as presented.

**Old Business:**

- *Review of the Planning Council Activity Timeline (P-CAT)*: The committee reviewed the 2017 and 2018 committee P-CAT. The committee discussed the recommended changes that were made in order to reduce redundancies of repeating the same items from month to month. With the recommended P-CAT, the committee will focus on different items for each month. The committee was advised that the dates on the P-CAT can be changed as required. In this regard, the committee accepted the recommendation to include the month of April for the review of the “*CQM – Review/Provide Input for the Recipients Quality Improvement Plan.*”

At the October 2017 meeting, the committee agreed to review the Norfolk TGA Part A Formulary, the ADAP Formulary and the Part B Formulary early in 2018. However, it was noted that there was no recommendation from the Recipient’s Office for the committee to review the Formulary. In this regard, there was a recommendation for the committee to review some of the Non-ADAP medications. The committee discussed the different formularies in the area. In

order to have a constructive discussion, the committee agreed to have copies of all the formularies at the March meeting. The Grantee Staff will invite the Pharmacist at The Hague Pharmacy, including Dr. Derber, to attend the committee meeting in March in order to participate in the discussion. Therefore, "Review and update Service Standards and TGA Medication Formularies will be added to the March agenda.

After extensive discussion, a motion was moved by Mr. Boston and properly seconded by Gwendolyn to accept the recommended revisions to the committee's Planning Council Activity Timeline. The motion passed. In this regard, a *Review/Update of the TGA Medication Formulary* will be removed from the months of October, and November, but will be revisited in January, February, and March.

*Define Needs Assessment:* It is the Quality Improvement & Strategic Planning Committee's purview to define the Needs Assessment. The agenda item was included from the old P-CAT and affords an opportunity to discuss special studies the committee would like to conduct or any data points the committee would like to query, or get additional information about. One such recommendation was for the committee to conduct a Consumer Satisfaction Survey. Going forward, the committee will, from September, October, November, January, February, and March, start *Defining Needs Assessment* in order to get the necessary data for the Priority Setting and Resource Allocations Process.

In response to a question regarding the enrollment in the Affordable Care Act in this region, Support Staff discussed the following data request which was submitted to the Recipient last year:

Of the Outpatient/Ambulatory Health Services demographics for 2016, the following was the insurance status of the 677 clients that were served?

- 45: Clients had Medicaid
- 35: Clients had Medicare
- 408: Clients had no insurance
- 10: Clients had Other
- 20: Clients had private insurance
- 158: Clients had the Affordable Care Act Individual Plans
- 1: Client had Tricare

Of these,

- 455 were below 99% Federal Poverty Level or below
- 156 clients were between 100 and 199% Federal Poverty Level
- 49 clients were between 200 and 299% Federal Poverty Level
- 17 clients were between 300 and 399% Federal Poverty Level
- 0 clients between 400%+

In defining the Needs Assessment, the committee should, basically, ask for barriers and gaps in care where the ACA may fall short and Ryan White is not picking it up. Grantee Staff and the Quality Improvement & Strategic Planning Committee will discuss and plan to conduct a Consumer Survey which will also include gaps and barriers to care.

In April/May Grantee Staff will discuss the Quality Improvement Plan. Ms. Susan Thorner, from Training Resources Network, Inc., will attend the March 15<sup>th</sup> committee meeting to talk about Quality Management for this year.

*Refine Standards of Care:* An issue came up which required the committee to review the Health Insurance Premium and Cost Sharing Assistance (HIPCSA) Service Standard. The issue of concern is the Definition as it relates to the Service Category. A person with insurance and deemed to be Ryan White eligible through paperwork was denied co-payments by two agencies who claimed that he was not in their system. It was on the understanding that they could only be charged HIPCSA money for individuals who were in their system. It was deemed that there was a loophole that was found in the Definition. The Affordable Care Act changed the landscape of what services look like which the committee has not addressed yet. Entities, including providers, are doing the same things without thinking about what impact the Affordable Care Act had on services and this is making it difficult for bills to be paid and clients seen.

Because the Grantee is aware of the issue, Grantee Staff on the Committee will take it back and work with the Program Manager for a solution to the issue, and will include training for HIPCSA Providers. The Service Standard cannot be changed, as a result, without a review first. Support Staff noted that the Planning Council purview is the Client Grievance Process which is included at the end of every Service Standard, and has been specified to all Ryan White Providers to have a Client Grievance Procedure in place.

*Non-Medical Case Management Service Standard:* The committee discussed the Non-Medical Case Management Service Standard which was adopted mainly for enrollment of clients into the Affordable Care Act. The committee discussed, at length, barriers to the enrollment and some of the reasons individuals do not want to enroll into the ACA. Of the Outpatient Ambulatory Health Services demographics, the committee was advised to look at the 2016 enrollments and the 2017 enrollments; and also look at the demographic makeup of the 408 clients who did not enroll into the Affordable Care Act.

*Federal Poverty Level Review:* The committee discussed the Federal Poverty Level, currently at 400% for the Norfolk Part A. The Virginia Department of Health moved to 500% FPL. The data was presented to the Planning Council who felt that there was not enough data to support changing the FPL for the Norfolk TGA Part A and agreed to stick with the current eligibility policy of 400%. There was a recommendation to hold on to the 400% FPL until there is a Planning Council discussion, in case it changes on the Standard. After discussion, it was agreed that the chair will make a determination whether or not to present the issue, again, to the Planning Council, for discussion.

**New Business:**

There was no new business to discuss.

**Any Other Business:**

There was no other business to discuss.

**Date of Next Meeting/Adjournment:** With no further business to discuss, a motion was moved by Gwendolyn and properly seconded by Ashley to adjourn the meeting. The motion passed. The next meeting will be on Thursday, March 15<sup>th</sup>, at 4:00 p.m.

Respectfully submitted:

Michael Singleton-Committee Co-Chair

Doris McNeill-Committee Co-Chair