

**NVH Consortium Meeting
January 5, 2017
Summary Minutes**

Wade Menear, Chair, called the meeting to order in the Northern Virginia Regional Commission (NVRC) main conference room.

ANNOUNCEMENTS

Michelle Simmons passed around information on a memorial service for Keith Callahan and reminded the meeting of the opportunity to honor his life and contributions to the Consortium a little later in the meeting.

MINUTES OF DECEMBER 1, 2016

The minutes of December 1, 2016 were approved as submitted.

REMEMBERING KEITH CALLAHAN AND RESOLUTION IN HIS HONOR

Mike Hughes, who co-chaired the PLWH/A Committee with Keith, read this resolution:

Resolution

Whereas Keith Callahan was a member of the Northern Virginia HIV/AIDS Consortium since 2008 and active on its PLWH/A and Case Management and Support Services Committees;

Whereas he was Chair of this Consortium from October 2011 through September 2012;

Whereas he was an active member of the Metropolitan Washington Regional Ryan White Planning Council and former chair of its Consumer Access Committee;

Whereas he was a gentleman and a good friend to many Consortium members;

Be it resolved that the members of this Consortium express their respect, gratitude, and deep condolences to the friends and family of Keith Callahan on the occasion of his death on Tuesday, December 27, 2016.

Wade Menear then passed around sheets for members to note their remembrances or express their loss. He then led the Consortium in a time of silence in Keith's honor.

WASHINGTON METROPOLITAN AREA PLANNING COUNCIL REPORT

Betlehem Mekonnen reported that the Council is closely monitoring Ryan White grant expenditures and receiving training around Fee-For-Service. Council membership has increased and now includes four members from Northern Virginia. A candidate from the Virginia Dept. of

Health has been interviewed for membership. The motion for reprogramming of Northern Virginia's MAI funds was approved at the last meeting.

Tom Decker announced that the Council's a one-day planning retreat on February 24 at Gallaudet.

VIRGINIA DEPARTMENT OF HEALTH UPDATES

Ashley Yocum, HIV Services Coordinator (contract monitor) for Northern Virginia, reported that, as of January 4, 2017, there were 1,783 clients enrolled in Virginia ADAP (AIDS Drug Assistance Program) from the Northern Region:

- 936 in Health Insurance Marketplace Assistance Program (HIMAP);
- 537 in Direct ADAP; and
- 184 in Insurance Continuation Assistance Program (ICAP)
- 126 in Medicare Part D Assistance Program (MPAP);

VDH will continue to enroll clients in ADAP through January 31, but paperwork must be completed by January 15 in order have ADAP ACA insurance coverage on February 1. Starting April 1, 2017, VDH will not serve clients whose eligibility for both ADAP and Part B is not current. Now each invoice for Part B services must include a statement showing, for all clients served that month:

- Their name
- Birthdate
- Date of last eligibility review; and
- Due date for their next Eligibility review.

Clients not enrolled in HIMAP, the Health Insurance Marketplace Assistance Program or ACA, by January 1 will be enrolled in Direct ADAP until HIMAP enrollment is confirmed. There will be no gap in coverage.

FAHASS reported that almost 10% of their clients are reporting problems with enrollment. Several insurance companies seem to be cashing checks before marking the payment in their books. The State Corporation Commission may be asked to look into this practice.

AFFORDABLE CARE ACT (ACA) UPDATES

Jennifer Zoerkler, Executive Director of Virginia Health Options, reported that VHO had enrolled 78 new clients and re-enrolled 364 clients in ACA health insurance. They have conducted a total of 494 interviews and will continue to assist clients through January 31, 2017.

COMMITTEE REPORTS

Suzanne Dorick, Co-Chair of a Regional Prevention Plan ad hoc subcommittee of the Consortium's Education & Prevention Committee, announced that they will meet on January 11 for a presentation on Virginia HIV/AIDS epidemiological data. A speaker from VDH HIV Prevention will share this data. Zay Roberson and Donna Powell are taking leadership of the No. VA Prevention Plan.

Mike Hughes, Co-Chair of the PLWH/A Committee, announced that they will meet on Wednesday, January 18, here at NVRC. The committee will elect a new co-chair.

ADMINISTRATIVE AGENT REPORT

Michelle Simmons reported that 8 of our 10 current vendors submitted applications for 2017-18 funding under NVRC's recent Unified RFA (Request for Applications). The RFA covered RW Part A, B, and MAI services not part of the new fee-for-service delivery model. Reviewers and site visitors are being recruited. The application process includes a short site visit for the first time.

Dental fees are close to approval under DC HAHSTA's new Part A Fee-for-Service (FFS) approach to funding many services. DC HAHSTA will be organizing a meeting with potential vendors soon. In response to a question from Stephen Clark, Ms. Simmons confirmed that no fees under the FFS system have been adopted.

VIRGINIA'S INTEGRATED HIV PREVENTION AND CARE PLAN AND THE STATEWIDE COORDINATED STATEMENT OF NEED 2017-2021

Renate Nnoko, HIV Care Services Planner and Bruce Taylor, Prevention Planner with VDH, presented an overview of the first plan submitted to HRSA for Ryan White Part B funding and to the US Center for Disease Control (CDC) for Prevention funding. This plan seeks to better coordinate prevention activities: finding new positives, early linkage to care, PrEP/nPEP, condom distribution, and behavioral interventions; with care services focused on retention in care and viral load suppression.

The rationale includes:

- Reduce reporting burden and duplicated efforts experienced by grantees.
- Streamline work of health department staff and planning groups.
- Promote coordination and collaboration in the use of data which helps inform HIV prevention and care planning, resource allocation, evaluation and continuous quality improvement efforts to meet HIV prevention and care needs in jurisdictions.

One of the encouraging initiatives undertaken by VDH, the Black Box project, matches HIV+ persons across DC, Virginia, and Maryland to create more complete information and reduce the numbers being counted as "Lost to Care". 82% of persons entered have vital clinical and surveillance data from more than one of those jurisdictions. As procedures are refined, participating states will expand to West Virginia, Tennessee, and North Carolina.

UPCOMING MEETINGS

Consortium February 2, 2017 at NVRC from 10:00 a.m. – 12 noon. Update: The February 2 meeting was cancelled. The Consortium will meet by conference call on Tuesday, February 21, at 1:00 p.m.

Minutes Approved as Written With Corrections Tylee Smith 2/22/17
Tylee Smith Date