HIV Community Planning Council

FULL COUNCIL MEETING

March 25th, 2024 25 Van Ness Ave Room 610 4:00-6:30 pm

HIV Community Planning Council Members Present: Chuck Adams, Bill Blum, Ed Chitty, Zachary Davenport, Pedro Felix, Matt Geltmaker, Reina Hernandez, Ron Hernandez, Lee Jewell, Chris Kent, Thomas Knoble, Nga Le, T.J. Lee-Miyaki, Helen Lin, John Paul Soto, Charles Siron, Richard Sullivan, Laura Thomas

HIV Community Planning Council Members Absent: Cesar Cadabes [A], Elaine Flores [A], Paul Harkin [A], Juba Kalamka [A], Derrick Mapp [E], Irma Parada [LOA], Gwen Smith [LOA], Guilherme Sttellet [E], Manuel Vasquez [A]

Others Present: Robert Arnold, Elyse Griffin, Jesus Guillen, Stephen Spano **DPH Staff Present**: None **Support Staff Present:** David Crown, Mark Molnar, Kira Perez, Kat Taigeer

Minutes

1. Call Meeting to Order and Roll Call. Introduction of Public. Co-Chair Welcome.

The meeting was called to order at 4:10 pm by CM Knoble. Roll Call was called, everyone introduced themselves and quorum was established.

2. Review and Approve March 25th, 2024, DRAFT Agenda – VOTE

The March 25th DRAFT Agenda was reviewed and approved by consensus.

3. Review and Approve February 26th, 2024, DRAFT Minutes – VOTE

The February 26th DRAFT Minutes were reviewed and approved by consensus.

4. Announcements

- None.
- 5. Public Comment
 - None.

6. Staff Announcements

• CS Molnar introduces Kat Tajgeer as the new Program Coordinator.

7. General Updates

- CAEAR Coalition CM Jewell
 - CM Jewell updates the council that on Saturday, March 23rd President Biden signed a \$1.2T
 FY'24 funding package that will fund the government until the end of the fiscal year on Sept.
 30.
 - The spending package by and large extended fiscal year 2023 (FY2023) totals for the remainder of FY2024 as a result of non-defense discretionary budget caps set by the bipartisan debt ceiling compromise of 2023. All programs under the Centers for Disease Control and Prevention (CDC) National Center for HIV, Hepatitis, STIs, and Tuberculosis Prevention (NCHHSTP) and the Ryan White HIV/AIDS Programs were level-funded. Ending the HIV Epidemic Initiative programs were also flat funded, despite the House proposal to eliminate the programs.

- The FY2025 budget called for modest increases to some health programs, but most HIV and hepatitis prevention programming were level-funded as a result of the budgetary caps imposed by the bipartisan debt ceiling compromise of 2023. Notably, the budget again included proposals to launch a national PrEP program and a national hepatitis C virus (HCV) elimination program.
- HHS CM Blum
 - CM Blum updates the council that President Biden signed the federal budget into law on Saturday, March 23rd. HHS has received partial notifications or updates of funding for RWPA, RWPC, and ETE for FY24/25, and hopes to receive full funding notifications in the upcoming month.
 - The annual Ryan White HIV/AIDS Program Services Report (RSR) was submitted on 3/25/24.
 - The report provides data to the federal funder reflecting demographics of those served, as well as quality, type, and quantity of services provided in the 2023 calendar year.
 - HHS plans to go live with ARIES on May 6th and current users will need to be trained in approximately 4 weeks to have access at go live date. CM Blum notes this date seems to be holding.
 - CM Blum provides an update on RWPA carry forward spending on vouchers and notes there is a delay in funding due to budget approval timing. HHS will adjust to fund voucher purchases using SF General Funds for this coming year.
 - DPH is facing a budget reduction and informed section leads that they will need to identify an additional 5% contingency reduction.
 - CM Thomas asks if 5% contingency cuts will affect HIV services and CM Blum notes that he does not know yet but is hopeful it will not.
 - CM Thomas asked if CHEP would be facing any cuts. CM Knoble said they do not know yet, but as soon as they know something, they will let the Council know as well.
 - CM Blum lists the HHS positions that are being filled and in the hiring process.
- CHEP & CPG CM Knoble
 - CM Knoble provides an update that there is a new syphilis rapid test available on the market. They note that a weakness of the test is that it will not detect syphilis in someone who had it previously.
 - SFDPH is seeking proposals from agencies providing care to clients in NTP and MAT programs. Proposals are due by 4/23.
 - CHEP is hosting trainings on HCV linkage and navigation.
 - CM Knoble notes there are a number of open positions within DPH.
- SOA CM Kent
 - CM Kent notes a link in the OA Voice that leads to a workshop regarding blueprint implementation strategic planning. It is scheduled for May 6th.
 - CM Kent provides an update on HIV Care Connect (HCC), the new data system replacing ARIES. He notes the first training opportunities for future users have been rolled out and will be taking place over the next month, ahead of the HCC go live date in May.
- ETE Update CM Sullivan
 - CM Sullivan updates the group that the meeting in March was spent going over the system of care summit, which will take place in the Spring of 2025.
 - They are currently evaluating who should be at the summit and think it should be all-inclusive.

- They are also looking at what long-lasting tools folks can take with them to refer to when needed.
- ADAP Update Nikki Gracey
 - CM Le provides the update on Marin County and notes they now have a full program staff, including bilingual support for case management. They have started mailing out staffing updates to clients.
 - Marin County has submitted an application to become an ADAP enrollment site.
 - The care council is planning a community forum on April 24th from 5-7pm at their office. It will focus on gathering client input to shape Ryan White services moving forward.
 - \circ $\,$ Marin County now has a volunteer-run syringe exchange program.
 - CM Jewell inquires if there have been any interruptions to services provided. CM Le says there have been no interruptions, but they are currently unable to run the food pantry. They are still continuing the food voucher program and referring folks to other food pantries in the county.

8. State Public Policy Update – CM Thomas

- CM Thomas notes that CA legislation sessions come in two-year sessions, and we are at the beginning of the second year. She notes sessions run from January through September and that the budget must be done by the end of June. Currently, CA is in the midst of hearing a lot of bills for the first time and notes it's a busy year for HIV-related bills.
- CM Thomas updates the group on the state budget and notes that Governor Newsom has requested to borrow \$500,000,000 from the ADAP rebate fund. She notes that the money in the rebate fund is a working balance and not a reserve of money. She states that borrowing from the rebate fund may cause delays in being able to purchase medications and may negatively affect other programs. Advocates have pushed back on the request by suggesting borrowing \$250,000,000 and have proposed ideas for how the funds can be used for HIV programs.
 - CM Lin inquires about how much money is in the ADAP rebate fund. CM Thomas cannot confirm exactly how much money is in the account, but says they are doing a good job at collecting rebates and want to make sure the money is being invested in HIV services.
 - \circ CM Lee-Miyaki asks if the fund can be used for anti-depressants on the ADAP formulary. CM Thomas discusses what things are covered under the ADAP formulary.
 - Stephan Spano asks if there have been any efforts from a litigation standpoint to address the Governor's request. CM Thomas said no lawyers are involved yet and they are trying to take an advocacy standpoint first. There are efforts being made to make sure the Governor and legislature understand the potential risks to the program if they move forward with their plan, before involving BRSA.
 - CM Blum asks about their Ryan White Part B funding going back into HIV care services and about Medi-Cal expansion. CM Thomas discusses how the rebate funds are used.
 - CM Mapp asks if, given the emerging TB alert in CA and its comorbidity towards HIV, will TB be an added concern to the coalition or will it be a "wait and see" approach. CM Thomas says the coalition has not been asked explicitly if they will be adding TB, but it will take a coalition process to do that.
 - CM Lee-Miyaki asks about expanding dental funding, both for insurance premiums and services. CM Thomas notes that is a good question and she will take that back to see if they can do this. CM Blum notes that they can possibly shift ADAP budget into different areas.
 - CM Jewell is curious about the budget since it'll look worse next year and about how successful the Governor will be. CM Thomas discusses how rebates work at a national level and discusses concerns that pharmaceutical companies will pull rebates out of CA.

- CM Sullivan asks if harm reduction supplies come from a warehouse and do taxpayers fund that warehouse. CM Thomas discusses the bulk purchasing process set up through NASEN and addresses that some of the general State fund tax dollars are used for this.
- CM Thomas provides updates on bills that are moving through the state legislature.
- CM Thomas provides information about the End The Epidemic (ETE) CA Day of Action on Tuesday, April 23rd. More information can be found at ETECA.org.

9. Needs Assessment & COLA Presentation

• The presentation has been postponed and will be presented at the May Full Council meeting.

10. Break

11. Membership Update – VOTE

- CM Knoble notes that there is a motion on the floor to accept Elyse Griffin's new member application. • The potential new member, Elyse, introduces herself to the group.
 - The group then votes on whether to approve Elyse's application.

Motion was approved through consensus, refer to column (3).

- CM Knoble notes that there is a motion on the floor to accept Jesus Guillen's new member application.
 - \circ The potential new member, Jesus, introduces himself to the group.

 \circ The group then votes on whether to approve Jesus's application.

Motion was approved through consensus, refer to column (4).

12. HIV Consumer Advocacy Project Annual Report

- Stephen Spano shows the Alternative Dispute Resolution (ADR) methods with a graph. The graph depicts a client's timeline; as the timeline continues, control vested in the party decreases and a client's stress level increases.
- Spano notes HCAP exists to provide service to consumers of Ryan White funded programs located in the SF EMA and to service providers funded by SF DPH HIV Health Services.
 - \circ Consumers are connected to advocacy, mediation, grievances, and referrals.
 - Service providers are connected to technical assistance, receiving direct referrals, and general assistance with other issues/barriers affecting the consumer's quality of life.
- HCAP provides support to consumers by identifying if their issues are access, eligibility, or conflict related and then providing support for said issue(s).
 - Spano notes most clients come to HCAP with more than one issue at a time due to the interconnectedness of the system of care.
- Spano reviews the number of clients served in the 2023-2024 contract year, as well as client demographics.
 - \circ The top service categories were related to housing services, primary care, and benefits counseling.
 - \circ The top issues were related to information and referrals, quality of care, and problematic policies or procedures.
- Housing services continue to be at the top of the needs list.
- Many consumers face unique issues related to aging, and their service needs may be dependent on their exact age.
- There was a shift toward using HCAP advocacy to improve Quality of Care.
- Consumers continue to require referrals to services.
- Spano highlights the successes of the program, noting that repeat clients indicates HCAP's ability to support clients on a long-term basis as their circumstances change.
- Coexisting mental health & substance use disorders can create barriers to clients accessing care and services.

- Spano emphasizes that as the population of folks living with HIV/AIDS ages, they are faced with new challenges.
 - On-going struggles with isolation, disconnection from younger community members and service providers, additional health issues either related or unrelated to HIV/AIDS, and mental health services continue to be issues for folks aging with HIV/AIDS.
 - \circ Access to in-home support services is incredibly limited, as there is only one service provider who provides IHSS workers.
- HCAP often works with clients who are experiencing feelings of injustice and may be in a situation where they are experiencing barriers to legal remedy. Challenges with health equity can oftentimes be mirrored or compounded by justice system inequities.
- CM Jewell notes that housing services was listed as a common service category and wants to know if that has shifted from year to year. Spano says there's never been a huge change in the numbers.
- CM Jewell notes that IHSS is a category that is lacking due to only having one service provider and asks if there are any other categories that the council should about when making allocation and prioritization of funds decisions. Spano emphasizes emergency financial assistance, IHSS/intensive case management, and housing subsidies as important categories to consider.
 - He highlights that the HCAP report reflects a small number of emergency financial assistance cases, but that doesn't mean it is not a need.
- CM Guillen inquires about whether (1) HCAP serves POC, (2) if they're able to provide services in other languages and (3) how HCAP deals with client's privacy.
 - (1) Spano notes he cannot give the breakdown of intersectionality as he doesn't have the data. However, anecdotally, he can confirm there are a lot of POC clients who identify as trans/nonbinary.
 - (2) Spano confirms they can serve folks who speak other languages. He often relies on case management for support. They have two social workers who speak Spanish and often at least one law partner who can intakes in Spanish. They also have access to a language line, although that's not an ideal solution.
 - (3) Spano notes he has a couple of tools at his disposal when it comes to privacy and disclosing personal status or information. He notes that being an advocate and disclosing his own personal status can often bridge the communication gap and foster a sense of trust with clients. He emphasizes the importance of having folks with lived experience working in the field.
- CM Sullivan speaks from personal experience and highlights the importance of HCAP's services. He states he has accessed all the services they offer and credits the life he has today as a direct result of receiving these services.
- CM Knoble thanks Spano for his quality of work and for continuously showing up and doing the work.

13. Next Meeting Date & Adjournment

The next meeting is scheduled for Monday, April 22nd, 4:00 – 6:30 pm at 25 Van Ness, 6th floor conference room.

Meeting was Adjourned at 6:26 PM by CM Knoble.

Full Council Meeting

HIV Community Planning Council

Roll Call: **P**=Present; **A**=absent; **E**=Excused; **L**=Leave of Absence Votes: Votes: **Y**=Yes; **N**=No; **B**=Abstain; **R**=Recused (deduct from quorum)

Date: March 25, 2024	[roll]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]	[10]
Chuck Adams	Р	Y	Y	Y	Y						
Bill Blum	Р										
Cesar Cadabes	A	-	-	-	-						
Ed Chitty	Р	Y	Y	Y	Y						
Zachary Davenport	Р	Y	Y	Y	Y						
Pedro Felix	Р	Y	Y	Y	Y						
Elaine Flores	A	-	-	-	-						
Matt Geltmaker	Р	Y	Y	Y	Y						
Thomas Knoble (Co-Chair)	Р	Y	Y	Y	Y						
Paul Harkin	A	-	-	-	-						
Reina Hernandez	Р	Y	Y	Y	Y						
Ron Hernandez	Р	Y	Y	Y	Y						
Lee Jewell	Р	Y	Y	Y	Y						
Juba Kalamka	A	-	-	-	-						
Chris Kent	Р	Y	Y	Y	Y						
Thomas Knoble	Р	Y	Y	Y	Y						
Derrick Mapp	E	-	-	-	-						
Nga Le	Р	Y	Y	Y	Y						
T.J. Lee-Miyaki	Р	Y	Y	Y	Y						
Helen Lin	Р	Y	Y	Y	Y						
Irma Parada	LOA	-	-	-	-						
John Paul Soto	Р	Y	Y	Y	Y						
Charles Siron	Р	Y	Y	Y	Y						
Gwen Smith	LOA	-	-	-	-						
Guilherme Sttellet	E	-	-	-	-						

Richard Sullivan	Р	Y	Y	Y	Y			
Laura Thomas	Р	Y	Y	Y	Y			
Manuel Vasquez	Α	-	-	-	-			
	I							
Ayes		18	18	18	18			
Nayes		0	0	0	0			
Abstain		0	0	0	0			
Recusal		0	0	0	0			
Total		18	18	18	18			