



**Marin HIV/AIDS Care Council Meeting  
MINUTES**

**Wednesday, March 27, 2013**

**4:30p.m. - 6:30p.m.**

**899 Northgate Drive – 4<sup>th</sup> Floor Conference Room**

**San Rafael, CA 94903**

**[ Approved June 12, 2013 ]**

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**Council Members Present:** Roy Bateman, Kevin Cronin, Elaine J. Flores, James Frazier, Walter Kelley, Jennifer Malone, Scott Marcum.

**Council Members Absent:** Trinity Dushon (AE), Deborah Kasel(AE).

**Staff Present:** Chris Santini, Michael Schieble.

**Public:** Sarah Grossi-HHS Health Clinics

**I. Call to Order.**

Co-Chair Cronin called the meeting to order at 4:42p.m.

**II. Roll Call.**

Roll was called at 4:42p.m. Scott Marcum's term was completed on February 10, 2013, so quorum was calculated based on 8 Members.

Quorum was established, with 5 of 8 Members present. CM Kelley arrived after roll was called and increased the meeting attendance to 6 of 8 Members present.

CM Dushon(AE) was absent and excused due to work. CM Kasel(AE) was absent and excused.

The March Council meeting scheduled for March 13, 2013, was cancelled because quorum could not be assembled due to the number of Members who were sick. The meeting was rescheduled for March 27, 2013.

**III. Review and Approval of Agenda - VOTE**

CM Malone motioned to approve the agenda. CM Frazier seconded.

There were no objections. The agenda was approved.

**IV. Review and Approval of February 13, 2013 Minutes – VOTE**

“Edited agenda” and “edited minutes” [Item III. and Item IV.] were changed to read “revised agenda” and “revised minutes”.

CM Frazier made a motion to approve the revised February 13, 2013 minutes. CM E.J. Flores seconded.

A voice **vote** was conducted. No objections were heard.

The revised minutes from the February 13, 2013 Marin Care Council meeting were approved.

**V. Public Comment**

None

**VI. Membership**

**Scott Marcum Subsequent Term Renewal Vote – VOTE**

CM Malone made a motion to approve Scott Marcum for a subsequent term. CM Frazier seconded.

It was noted, that Scott Marcum's prior Membership term was completed on February 10, 2013 and he was not eligible to vote. Scott Marcum's Subsequent Term Application was submitted on February 26, 2013 to Council

Support and copies were reviewed by the Council Members. There was no additional discussion.  
Public Comment: None

A randomized roll call **vote** was conducted.

**AYES:** CM Bateman, CM Cronin, CM E.J. Flores, CM Frazier, CM Malone.

**Noes:** None

**Abstain:** None

**Recuse:** None

**5-0-0-0**

Scott Marcum was unanimously approved for a subsequent term.

*Note: Quorum was recalculated with 6 of 9 Members present.*

#### Saulo Bonagrazia Resignation

Council Support reported that Saulo Bonagrazia resigned from the Care Council on March 20, 2013. The reason stated in the e-mail resignation, was that S. Bonagrazia would no longer be living in Marin County.

Council Support also reported that the exit interview process was not conducted with Maria Reed or Saulo Bonagrazia, since each new Council Member's experience was one meeting.

### **VII. Support Service Discussion**

#### Non-Medical Case Management / Benefits Counseling

Kevin Cronin presented: "Service Category Presentation – Case Management Services (non-medical)" handout. (see *attachment -3-pages*)

*4:56p.m CM Kelley arrives.*

K. Cronin, who is a Benefits Advocate at the Marin AIDS Project / M.A.P. commented that the service is best thought of as "benefits advocacy". An illustration was given of an individual who tests positive at the clinic. An overview of the steps of the benefits counseling process was given. Key concerns are; does the person have access to medical care and does the person have access to medication. Currently, individuals with an income level below \$45,960/year are eligible for care at the Specialty Clinic. Co-pays may apply. MediCal, Path 2 Health, and CMSP eligibility was outlined. As time goes on, there are fewer Social Security disability cases, however Benefits Counseling includes Social Security SSI and SSDI cases. The OA-HIPP health insurance premium payment program, offered through the State Office of AIDS, was described.

The partnership of M.A.P. and the Specialty Clinic, medical case management and non-medical case management, working together to keep people in care was described. People who are physically seriously sick, or with severe mental health issues and/or substance use issues, need both medical and non-medical case management. C. Santini commented that, medical case management currently provided at the Specialty Clinic is funded by Marin County. In the past, the service was funded by Ryan White funds.

CM Frazier voiced his appreciation of the Benefits Counselors and described the importance of an annual benefits review. CM Malone emphasized that benefits counseling requires detailed and specialized knowledge, since the programs are always changing. Also discussed; opportunities for efficiency in benefits counseling, changes related to National Healthcare reform, and the need for Client flexibility and personal advocacy.

Public Comment: Sarah Grossi – HHS Clinic, "I think it's important that the Care Council understand the changes in benefits issues in the last year and things coming up. Benefits is becoming increasingly more complicated focus of everyone's day, particularly Jon and I at the Specialty Clinic and working with Kevin [Cronin]. We triage and do as much as we possibly can ourselves at our clinic, but we do not act as anyone's representative for MediCal, even at the County. We encourage people to apply directly with the County, but if we have a complicated situation, we have Kevin act as their representative. Kevin has been tasked to do that and he spends a lot of time trying to shuffle thing through the system."

"With the changes of the Affordable Care Act, the LIHP program, and the Path 2 Health program, you have a whole new opening up of people who have become eligible for services, who previously were not eligible for services. They are talking about, with MediCal expansion, that there is something like 7,000 new people added

to public insurance in Marin County. We are finding, in terms of trying to deal with the eligibility office, it's gotten incredibly more backed up and more complicated. They are under pressure that has nothing to do with us. We were a tiny little flea, but our flea problem to us is really quite critical. We've tried working with eligibility to a certain extent, but it is challenging because we are not the priority. The priority is the 7,000 people that in the next year they're going to be adding to the rolls."

The other thing that's really changed and has made benefits a priority is ADAP. That used to be a six month and a one year recertification. It is now a six month recertification and HRSA is really sticking to the six month claim. So really within the last two years, we have gone from having to certify people once a year, to if not having to certify people twice a year, to making sure that people self-certify. In the end it falls on us because we are the people if they don't get their medication, we are the people to follow up with it. So, if I've seen a change in case management in the last couple of years in the County, it's that a lot more has gone into benefits, a lot more time and energy into these programs..." "...it has become much more complicated in the last couple of years. My anticipation is that it will become much more complicated once January 1, 2014 and ACA come in."

Examples of complexity were discussed.

## VIII. Core Service Discussion

### Medical Case Management

Jennifer Malone presented: "Service Category Presentation – Medical Case Management" handout (see *attachment -4- pages*)

J. Malone stated, "The main thrust of [Medical] Case Management is getting people into care and keeping them in care. First and foremost, HIV care."

The usage data was discussed. Like non-medical case management, complexity of an individual case, leads to high usage of medical case management services. A Client's housing stability, also impacts a case manager's time demands. There was a lengthy discussion about affordable and appropriate housing, as it relates to an HIV+ Client. CM Kelley described an effort to develop universal care by region and cultivate cross-county services.

Home based care was defined and briefly described during the service category presentation.

Public Comment: None

## IX. General Announcements

CM Kelley recapped the 4<sup>th</sup> Quarter 2012 and 1<sup>st</sup> Quarter 2013 outreach and HIV testing events conducted by Black Brothers Esteem /B.B.E. and reported that B.B.E. is creating a panel for the AIDS Memorial Quilt, titled "Phoenix Rising". Events that feature rapid HIV testing and incentives to increase participation were discussed.

CM Malone announced 1.) July 21, 2013 is the date for AIDS Walk San Francisco. M.A.P. is getting organized. 2.) A new card (flyer) has been developed which lists the multiple locations and times for rapid HIV testing. 3.) The Marin City Health Clinic is going to provide healthcare at Center Point.

S. Grossi reported that the Clinic is working with the CDC recommendation of every adult having a HIV test, at least once in their lifetime.

## X. Co-Chair Report

None

## XI. Community Outreach and Advocacy

M. Schieble reported that in past years, Care Council Members have participated in the AIDS funding lobbying event on Capitol Hill in Washington, D.C. Usually conducted in the summer, the dates are being researched.

Public Comment: None

## XII. Division of Public Health Report

C. Santini reported: 1.) *Handout* “The San Francisco HIV Health Services Planning Council – Eligibility Criteria, Severe Need, and Special Population Definition” was reviewed. The “severe need” definition, income less than 150% of Federal Poverty Level is used for eligibility for the Marin County Food Card program. 2.) *Handout* “HIV/AIDS in Marin County – An Epidemiological Profile” The updated epi-report, with data through December 31, 2012, was distributed. Council Members were requested to review the data in preparation for the 2014-’15 Allocation meeting. 3.) *Handout* “HIV Consumer Advocacy Project” a report and recap of the EMA HCAP services, from March 1, 2011 through February 5, 2012. Brian Brophy, the staff attorney from the HCAP, presented information about HCAP services at the Marin Community Forum. 4.) The Client Satisfaction Survey was mailed out at the beginning of March. 187 surveys were mailed out, 21 were in Spanish. 81 complete surveys have been received to date. The deadline to return the surveys is March 31, 2013. The Food Card incentive will be distributed by the Case Managers. 5.) *Handout* “Ryan White Programs (RWP) Funding to the San Francisco Eligible Metropolitan Area (EMA) March 2013” was reviewed. The current status of the Ryan White Part A award for FY 2013 is, “only a partial award has been given: 50% of RWPA formula and 45% RWPA MAI funds based on flat funding at FY2012 level”. There is no firm date for notification of the total amount or final award for FY2013-’14. An 11.8% reduction compared to the FY2012-’13 is possible. Flat or reduced funding is expected. Past Part A awards were communicated in February 2012 (FY2012-’13) and August 2011 (FY2011-’12). 6.) A State Office of AIDS conference call for Providers is schedule for March 28, 2013. Spending limits on Part B funds may be announced for April, May, and June 2013 [Q IV] related to Federal sequestration cuts.

Public Comment: None

### **XIII. Discussion of Allocation Guiding Principles**

*6:25p.m. Point of Order – meeting time*

*CM Kelley made a motion to extend the meeting time for 10 minutes. CM E.J. Flores seconded. All were in agreement.*

C. Santini introduced the concept of developing the “Prioritization and Allocation Guiding Principles”.

M. Schieble added that the process was designed to develop a “general philosophy of the Council that could be applied when developing the Allocation. CM Bateman stressed the need to discuss each Principle and the “forced choices” given the possibility of budget cuts.

Comprehensiveness There was not a consensus, the group was evenly divided between choice “A” “Ensure that a comprehensive continuum of Core and Support services are funded.” versus choice “B” “Ensure that Core services are funded to the fullest extent possible.”

CM Malone voiced the need for a comprehensive system, giving the example of the need for Benefits Counseling, which is a Support service. Emergency Financial Assistance was given as other Support that is “really important”. Co-Chair Cronin referenced Benefits Counseling, a Support service that results in qualifying individuals for Core services. CM Bateman commented that selected Core, choice “B”, but acknowledged that the continuum was a “blending of Core and Support services”.

Impact There was not a consensus, however more Council Members selected choice “B” “Ensure that severe need clients have first priority for services.” versus choice “A” “Ensure that the largest number of clients are served.”

CM Malone commented that in some categories the current system already prioritizes severe need clients. ADAP re/certification was given as an example, where the largest number of clients needed to be served, so it would be risky or too simplistic to simply say that we prioritize severe need clients. Co-Chair Cronin commented that the Principle could be “argued forever”, but needed to be applied to an actual and specific situation.

There was agreement, that “Impact” was a Guiding Principle that would need to be discussed for each Service Category.

Accountability

*Tabled due to meeting time.*

### **XIV. Next Steps – New Business**

Next Meeting: April 10, 2013 – 899 Northgate 4<sup>th</sup> Floor Conference Room, 4:30p.m. – 6:30p.m.

**Next Step / To Do's**

- Agenda Item (request) – EJV – Recap report from M.A.P. Task Force.  
CM Malone responded that the report was not a Council issue, since it was specific to a Service Provider. Council Support directed EJV to the Co-Chairs, since the Co-Chairs are responsible for the content of the meeting agenda.
- Agenda Item - Develop guiding principles / logic for allocation decisions.
- Agenda Item – Support Services philosophy for all support service categories.
- Agenda Item – Discuss Service Categories per 2013 calendar.
- Agenda Item – Client education on money management.
- CS – Produce business cards WK and JF (qty: 20).
- CS – Produce Certificate of Achievement / completed term. SM [02/11/11 thru 02/10/13] JF [05/09/11 thru 05/08/13]
- MJS – Facilitate JF subsequent term application.
- MJS – Contact SFAF for information on “AIDS Watch” Washington, D.C. / Summer 2013.
- MJS – Restock motions sheet.
- MJS – Update phone list / Member Directory

**XV. Meeting Adjourned at 6:44p.m.**