I. Call to Order.
The meeting was called to Order at 4:47 p.m. by Co-Chair W. Flores.

II. Roll Call.
Roll was called and quorum was established with 8 of 10 Members present.
CM Witt arrived after the roll call increasing the attendance to 9 of 10 Members present.
CM Bateman (AE) was absent and excused due to travel.

III. Review and Approval of Agenda – VOTE
The agenda was reviewed. Co-Chair W. Flores announced that Anne Donnelly would not appear as part of item, “VII. Co-Chair Report”.
CM Frazier motioned to approve the edited agenda. CM Malone seconded.
A voice vote was conducted. All were in Favor. None were Opposed.
The edited agenda was approved unanimously.

IV. Review and Approval of May 12, 2010 Minutes – VOTE
Co-Chair Kelley made motion to approve the May 12, 2010, minutes with one change.
CM Frazier seconded.
Item “II. Roll Call” was changed to read, “CM Marcum (AE) was absent and excused”.
A voice vote was conducted. Ayes were heard. None were Opposed.
The edited minutes from the May 12, 2010 Marin Care Council meeting were approved.

V. General Announcements
CM Malone announced that starting June 22, 2010, the Marin AIDS Project [M.A.P.] will offer HIV testing using the rapid oral test. Rapid testing will be offered on Tuesday at 4:30 p.m.

CM Malone announced that M.A.P. will have an open house on June 22, 2010, from 4:30 p.m. to 7:30 p.m. The community event will feature the work of local artists and include; mural painting, music, and appetizers. CM Malone stated, “…the community event has a focus on something other than HIV/AIDS or health”. The event hopes to draw attendees from the Spanish speaking Community using an English – Spanish flyer.

CM W. Flores announced that Spectrum will present “Gay and Gray” on July 10, 2010. Issues related to the Senior LGBTQ Community will be presented.

CM Malone announced that the San Francisco AIDS walk is July 18, 2010. Participants are encouraged to register at M.A.P. or any other Marin Agency. Money raised by individuals registered with Marin based agencies will “stay in Marin” and provide local funding.
VI.  Public Comment
Public Comment: None

VII.  Co-Chair Report
Co-Chair Kelley circulated information from his trip to Washington, D.C. about the following organizations:
1.) National Association of People with AIDS / NAPWA.  www.napwa.org  
2.) USA Positive Women’s Network.  www.pwn-usa.org  www.womenhiv.org  
3.) AIDS Action HIV - promoting HIV vaccine research.  www.bethegeneration.org

Co-Chair W. Flores: 1.) Distributed copies of the June/July inaugural issue of the “Positive Positional”. The newsletter is distributed in Marin County, Los Angeles, and Minnesota. Submission on medical information, HIV testing, Marin events, and articles of interest were requested. 2.) A Handout was distributed which summarized the proposed MediCal, SSI, CAPI / Cash Assistance Program for Immigrants, CFPA / California Food Assistance Program, IHSS / In Home Support Services, ADAP / AIDS Drugs Assistance Program changes. The changes may result from the Governor’s May Revision Budget. The “May Revise” is an update of the January Budget using revenue data through April 15th. CM Cronin commented that, “…the proposed decrease in SSI will effect the majority of [M.A.P.] Clients. S. Spaeth commented that, “…the proposed budget is only a first volley”. 3.) CM Cronin and CM Witt were thanked for their service on the Marin Care Council and presented with a Certificate of Appreciation for the completion of a two year term.

Public Comment: None

VIII.  Division of Public Health Report
C. Emerson announced: 1.) The planning meeting for the Bi-national Health Week (October 2010) is June 23, 2010, 9:00a.m., 899 Northgate, San Rafael. 2.) Marin County is scheduled to present information on the Marin System of Care to the San Francisco HIV Health Services Planning Council on June 28, 2010.

C. Emerson 1.) Reported at the May 19, 2010, California Council of Local AIDS Directors / CCLAD meeting, Anne Donnelly presented information on health care reform and changes to Ryan White funding. By the year 2014, every American will be required to have health care. The California Major Risk Medical Insurance Program (MRMIP), a high risk insurance pool will be available July 1, 2010. Asset testing will be eliminated to for MediCal clients.  
5:02p.m. Dr. Witt arrives.

C. Emerson also reported: 2.) M.A.P. has submitted a bid for the new Part B – Health Education and Risk Reduction service category. 3.) The Tom Steel Clinic is not accepting new patients based on current funding. 4.) Marin County Community Mental Health Services and Salud Servicios Apoyo Latinos Unidos de Marin will present a program titled, No Soy Loco / I’m Not Crazy on June 24, 2010, at 2:00p.m., Room 109-110 at the Connection Center. The program is offered to Mental Health Providers who work with the Latino Community. 5.) The 2010-'11 fiscal year contracts are in the process of being finalized.

Public Comment: None

IX.  Service Provider Program Overview
Food Voucher Program  C. Santini gave a brief overview of the Food Bank / home-delivered meals Service Category. Food gift cards redeemable at Safeway and Trader Joe's Stores replaced the food bank program. Food cards are distributed monthly to Clients who qualify as "severe need". The income and additional requirements to meet the qualifications of “severe need” were reviewed. The Food Voucher Program in the past fiscal year(s) has been funded by Part A and Part B dollars and when available, unspent funds from service categories have been reallocated. The demand for food cards has increased based on need from 296 monthly to 360 monthly. CM Witt noted that 75% of the food cards are distributed to people with substance abuse addiction or mental health issues. CM Malone commented, “…that it is important to get the word out early if there is not going to be any extra Holiday cards”.

Transportation Leslie Gallen, the Marin AIDS Project Operations Manager was on vacation, so CM Malone gave a brief summary of the transportation voucher program. Transportation vouchers are used for medical related trips. The discussion quickly transitioned into issues that Consumer-Council Members were having with the new card system implemented by Golden Gate Transit. Vouchers are available if a hospital
discharge plan requires taxi transportation. Discharge Planners can get preauthorized for cab fares using a 24/7 supported phone number. Emergency Financial Assistance CM Malone reported. “…that Emergency Financial Assistance gets the most use.” Utilities (PG&E) followed by phone bills are the most common form of assistance. The “two tiered system” is available to severe need Clients. If not covered by the AIDS Pharmaceutical Assistance service category, prescription co-pays, changes mid-month which result in a different prescription or increase in dosage may be covered using Emergency Financial Assistance.

Public Comment: None

X. Review of Conflict of Interest Disclosure
The handout, “Conflict of Interest Review” was distributed for self review. The “Marin HIV/AIDS Care Council Conflict of Interest Disclosure Form” was distributed. Council Members were requested to return the completed forms to Council Support at the end of the meeting. It was noted that “Complementary Therapies” and “Volunteer Services” service categories no longer exist. Council Support will update the form, including references to “Title I”.

Public Comment: None

XI. Review of 2011-’12 Prioritization and Allocation Process
Three handouts, “Marin County HIV/AIDS Care Council Ryan White Program Allocation Process FY 2011-2012”, “Ryan White Program Services Definitions”, and “Fiscal Year Time Line” were distributed for self review. The status of the 2009-’10 Service Category Summary Sheets was discussed. C. Santini will complete the Summary Sheets.

Public Comment: None.

XII. 2011-’12 Service Category Prioritization
Council Members were given a prioritization worksheet and asked to rank the Service Categories. The rankings of the 2008-’09, 2009-’10, and 2010-’11 budget years were listed on the worksheet for reference. Below are the rankings of each Council Member:

<table>
<thead>
<tr>
<th>Service Category</th>
<th>2008-’09 Rank</th>
<th>2009-’10 Rank</th>
<th>2010-’11 Rank</th>
<th>KC</th>
<th>EJF</th>
<th>WF</th>
<th>JF</th>
<th>WK</th>
<th>JM</th>
<th>SM</th>
<th>NS</th>
<th>DW</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Outpatient/Ambulatory health services</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
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<tr>
<td>j. Mental health services</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>n. Medical Case Management (including Treatment Adherence)</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>3</td>
<td>6</td>
<td>3</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>l. Case Management (non-Medical) / aka Benefits Council</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>7</td>
<td>6</td>
<td>6</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>q. Food bank/home-delivered meals</td>
<td>9</td>
<td>9</td>
<td>5</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>7</td>
<td>5</td>
<td>5</td>
<td>5</td>
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<tr>
<td>w. Transportation Medical Services</td>
<td>10</td>
<td>10</td>
<td>6</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>5</td>
<td>5</td>
<td>9</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>q. Emergency financial assistance</td>
<td>8</td>
<td>8</td>
<td>7</td>
<td>7</td>
<td>2</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td>8</td>
<td>7</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>d. Oral health care</td>
<td>7</td>
<td>7</td>
<td>8</td>
<td>8</td>
<td>8</td>
<td>5</td>
<td>9</td>
<td>9</td>
<td>6</td>
<td>8</td>
<td>8</td>
<td>9</td>
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<tr>
<td>c. AIDS Pharmaceutical Assistance (local)</td>
<td>8</td>
<td>8</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>2</td>
<td>8</td>
<td>8</td>
<td>8</td>
<td>9</td>
<td>9</td>
<td>10</td>
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<tr>
<td>g. Home and Community-based Health Services (attendant care)</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>9</td>
<td>10</td>
<td>10</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>11</td>
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<tr>
<td>h. Home health care (nursing)</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>12</td>
<td>10</td>
<td>10</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>m. Substance abuse services–outpatient</td>
<td>6</td>
<td>6</td>
<td>11</td>
<td>11</td>
<td>11</td>
<td>10</td>
<td>11</td>
<td>11</td>
<td>10</td>
<td>11</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>ad. Residential substance abuse treatment</td>
<td>6</td>
<td>6</td>
<td>12</td>
<td>12</td>
<td>12</td>
<td>11</td>
<td>12</td>
<td>12</td>
<td>12</td>
<td>12</td>
<td>12</td>
<td>13</td>
</tr>
<tr>
<td>s. Health education/risk reduction</td>
<td>not funded</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>11</td>
<td>13</td>
<td>13</td>
<td>13</td>
<td>8</td>
</tr>
</tbody>
</table>

The “s” service category “Health Education / Risk Reduction” is a new service category funded by Part B.
Although included on the worksheet, the prioritization was of Part A Service Categories.

Council Members were given the opportunity to explain their ranking and direct questions to other Council Members about their prioritization. During the discussion CM Cronin reiterated that the prioritization was, “…the aggregate of all Client’s needs and not based on an individual [Council Member’s] experience”. CM Witt referred to the Conflict of Interest Review handout and cited, “All Council Members agree to act only on behalf of the broadly affected HIV community in its totality”.

CM Malone commented that, “…the Marin County HIV population is relatively stable and there are no big shifts in priorities”. There was discussion about outpatient and residential substance abuse services. CM Cronin commented that residential substance abuse is usually short term at a detox. While viewed as an essential and important service category, it was noted that other funding sources are available for substance abuse. Concern was voiced that the Governor’s May Revision Budget included proposed cuts to substance abuse funding.

6:30p.m. Point of Order - Meeting overtime. CM Witt made motion to extend the meeting time to 6:45p.m. The motion was approved and the meeting was extended.

Council Members’ rankings were averaged to produce an overall ranking. The resulting ranking was identical to the 2010-’11 Prioritization except that Medical Case Management and Case Management (non-Medical) change positions* from prior years. (*see below)

CM Witt made motion to approve the following ranking as the 2011-’12 Service Category Prioritization. CM Marcum seconded.

<table>
<thead>
<tr>
<th>Service Category</th>
<th>2011-’12 Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Outpatient /Ambulatory health services</td>
<td>1</td>
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<td>w Transportation Medical Services</td>
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</tr>
<tr>
<td>ad. Residential substance abuse treatment</td>
<td>12</td>
</tr>
<tr>
<td>s. Health education/risk reduction</td>
<td>13</td>
</tr>
</tbody>
</table>

Public Comment: None.

A voice vote was conducted.

Vote:
Noes: None
Recuse: CM Cronin, CM Malone.
Abstain: None
The above ranking was approved as the 2011-'12 Service Category Prioritization. 7-0-2-0

XIII. Membership Committee Report
Motion I. Bylaw Change
The Membership Committee made motion to change the Care Council Bylaws. No second required. Membership Committee Co-Chair Marcum read the following:

**Article V. – Meeting Attendance / Termination, Section 1**

“In addition, Care Council Members are expected to attend one San Francisco HIV Health Services Planning Council meeting per term. Attending the Annual Marin County Report (May) meeting and / or the Prioritization and Allocation ‘Summit’ (August) meeting would be beneficial.”

The Bylaws currently read:

“In addition, Council members are expected to attend at least one meeting per term of the HIV Health Services Council for the San Francisco EMA.”

Council Support clarified that a Council Members terms is two years. There was no additional discussion.

Public Comment: None.

A randomized roll call vote was conducted.
**Vote:**
Noes: None
Recuse: None
Abstain: CM Cronin (out of meeting room at the time of the vote.)
The Article V. – Meeting Attendance / Termination, Section 1 Bylaw change was approved. 8-0-0-1

Motion II. Policy Change
The Membership Committee made motion to change the Care Council New Member Orientation Policy. No second required. Membership Committee Co-Chair Marcum read the following:

**Section 8 – Membership. New Member Orientation Policy**

“New Care Council Members are **required** to attend in their first term the San Francisco HIV Health Services Planning Council orientation.”

The Policy currently reads:

“All Members are welcome and encouraged to attend the San Francisco HIV Health Services Planning Council Orientation.”

Co-Chair W. Flores commented that the Membership Committee had met and considered the feedback from the April 14, 2010 when a similar motion had been made and withdrawn. CM Witt voiced concern that the New Member Orientation was a requirement and people might not be able to attend.

Public Comment: C. Emerson spoke against the motion because the San Francisco orientation was a day long commitment and was “aimed at people” new to the San Francisco Council. C. Emerson suggested that Membership work with San Francisco Council Support to develop a multi-county orientation.

A randomized roll call vote was conducted.
**Vote:**
Recuse: None  
Abstain: None  
The Section 8 – Membership. New Member Orientation Policy change was not approved. 4-5-0-0

Following the vote, Membership Co-Chair E.J. Flores encouraged all Marin Care Council Members to attend the San Francisco meeting.

6:45p.m. Point of Order- Meeting overtime. CM Marcum made motion to extend the meeting time to 6:55p.m. The motion was approved and the meeting was extended.

Motion III. Subsequent Term Application

“Those individuals seeking appointment to a subsequent term shall be contacted by the Membership Committee Co-Chairs at least two months prior to the end of their term. This allows time for the Membership Committee to consider their request and forward recommendations to the Care Council at the Council meeting prior to the end of that Member’s term. Members seeking to be appointed to a subsequent term shall submit a completed Subsequent Term Application to the Membership Committee. A timely response will avoid gaps in membership.”

changes underlined

Council Members seeking a subsequent term will update and complete the new Subsequent Term Application, sign, date, and submit the Application to the Membership Committee.

The following renewal questions will be included in the application:
1. What is your primary reason for seeking renewal on the Marin Care Council?
2. Did your service during your term on the Marin Care Council turn out to be what you expected?  
   ☐ Yes  ☐ No  Please explain:
3. What do you think you contributed to the Marin Care Council and Committee / Workgroup?

Public Comment: None.

A voice vote was conducted. All were in Favor. None were Opposed. The Subsequent Term Application and changes to the Handbook were approved. 9-0-0-0

XIV. Community Outreach and Advocacy Committee Report
No Report.
The COAC is scheduled to meet June 9, 2010, immediately following the Care Council meeting.

XV. New Business
Next Meeting: July 14, 2010 - 3:30p.m.-6:30p.m. Note 3:30p.m. start time.
- Agenda Item – 2011-'12 Fiscal Year Allocation be Service Category.
- Agenda Item – CE present “No Soy Loco / I’m Not Crazy” video.
- JS – Update Conflict of Interest Disclosure form.
- CE – Provide Marin County Food Resource Guide.
- MJS – Handbook change / Bylaw Article V. Section 1.
- MJS – Complete Subsequent Term Application.

XVI. Meeting Adjourned at 6:55p.m.