

WEST CENTRAL FLORIDA RYAN WHITE CARE COUNCIL

**PLANNING AND EVALUATION COMMITTEE**

**SUNCOAST HOSPICE, CLEARWATER**

**THURSDAY, FEBRUARY 12, 2015**

**9:30 A.M. - 11:00 A.M.**

 **MINUTES**

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| CALL TO ORDER | The meeting of the Planning and Evaluation Committee was called to order by Jim Roth, Chair at 9:29 a.m.  |
| ATTENDANCE | Members Present: Ginny Boucher, Martin Clemmons, Jr., Kirsty Gutierrez, Vicky Oliver, Joe Parramore, Jim Roth, Kristen WhitesellMembers Absent: Keith Boyd, Marilyn MeridaGuests Present: Ryan Brenn, Sheryl Hoolsema, Elizabeth Rugg, Joy WinheimGrantee Staff Present: Aubrey ArnoldLead Agency Staff Present: Floyd Egner, Demarcus Holden, Shelley Taylor-DonahueHealth Councils Staff Present: Lisa Nugent, Ashley Richards |
| CHANGES TO AGENDA | There were no changes to the agenda at this time.  |
| ADOPTION OF MINUTES | **The minutes for January 8, 2015 were approved (M: Clemmons, S: Oliver).**  |
| CARE COUNCIL REPORT | Joe Parramore gave the Care Council report for the meeting held on Feb 4, 2015 at the Children’s Board of Hillsborough County. Aubrey Arnold reported that we are in the last month of the program year. He recently spoke with our contract manager at HRSA and she said to expect the award later this month. The award may be partial or full, as there have been conflicting reports. Aubrey feels confident that the Ryan White Program is secure and there is level funding.Aubrey discussed an announcement sent on Friday to local Ryan White Part A providers. Providers were notified that the Part A program has been notified by the state of Florida DOH that they will no longer be supported by CAREWare and that they will have to stop using the State’s version by June 30th of this year. The grantee is working on a procurement to find a new data system with HRSA compliant vendor. This change will impact all Part A’s EMA’s in Florida and the grantee’s office has spoken with the other areas about their plans. The goal of the grantee’s office is that the new system will be user-friendly and will be as seamless as possible. Aubrey went through the Grantee’s Response to the Assessment of the Administrative Mechanism (AAM) and addressed all findings from the AAM and their plans to rectify the findings. Aubrey discussing the ADAP transition of clients to the ACA Marketplace. It has been a slow process statewide with a small percentage of clients who turn out to be eligible to transition. Demarcus Holden announced that the recent Part B Request for Applications (RFA) closed and awardees were notified. Part B is currently in the process of negotiating contracts and closing out the current contract year. If providers need assistance with the RSR report, they should contact the data manager. All the Part B contracts are now on the Part B year. Lisa Nugent reminded the Care Council that members who receive mileage reimbursement need to have their mileage in before the end of February because the Part A contract year is closing. Ashley Richards presented a PowerPoint on the Mother to Child Transmission. The next Care Council meeting will be March 4, 2015. |
| **NEEDS ASSESSMENT: SUMMARY OF ACTIVITES REPORT** | The committee reviewed the draft of the 2014-2015 Summary of Activities. This document was previously called the Executive Summary but will now be referred to as the Summary of Activities, as it better reflects the purpose of the document.Several edits were made to the document to make the document more user friendly in both a web format as well as in print format. The committee approved the Needs Assessment: Summary of Activities with the updates that were discussed. **(M: Whitesell S: Gutierrez)** |
| **2015-2016 SERVICE PRIORITIES** | The 2014 Priority ranking list was presented in addition to information from the client survey regarding what services clients ranked most important and what services clients ranked most utilized. These documents were used to aid the process of adjusting the ranking of the 28 service priorities.The committee began a discussing the logic behind the current rankings as well as presenting some justification for moving certain service categories up or down in the priority list. After a lengthy discussion, the final service priority list is as follows.1. Outpatient/Ambulatory Medical Care
2. AIDS Pharmaceutical Assistance (local)
3. Medical Case Management
4. Oral Health Care
5. Health Insurance Premium and Cost Sharing Assistance
6. Mental Health Services
7. Treatment Adherence Counseling
8. Health Education/Risk Reduction
9. Substance Abuse Services - outpatient
10. Early Intervention Services
11. Outreach Services
12. Medical Transportation
13. Child Care Services
14. Food Bank/Home Delivered Meals
15. Medical Nutrition Therapy
16. Psychosocial Support
17. Housing Services
18. Emergency Financial Assistance
19. Substance Abuse Services- residential
20. Home Health Care
21. Home and Community Based Health Services
22. Rehabilitation Services
23. Linguistic Services
24. Hospice Services
25. Respite Care
26. Legal Services
27. Case Management (non-medical)
28. Referral Services

These service priorities were accepted by the committee and will go before Care Council in March for final approval. **(M: Oliver S: Boucher)** |
| **AFFORDABLE CARE ACT UPDATE** | Approximately 80 of the 250 clients on the list to be transferred have been successfully transferred into the marketplace. The overall transition has been smooth. There were no further updates at this time.  |
| COMMUNITY INPUT/ANNOUNCEMENTS | There was no community input at this time.  |
| ADJOURNMENT | There being no further business to come before the Committee, the meeting was adjourned at 10:40 a.m. |