

INDIANA STATE DEPARTMENT OF HEALTH
COMPREHENSIVE HIV SERVICES PLANNING AND ADVISORY COUNCIL
2 North Meridian Street
Indianapolis, IN 46204
Email: bappleget@isdh.IN.gov
Advisory Council Meeting
17 October 2012

ATTENDEES

Jessica Adams	Alex Durall	Frazier Marsh
Gabriel Anderson	Julie Foltz	Lesi Nelson
Malinda Boehler	Phaedra Greer	Jesus Vesga
Jamie Broderick	Karolyn Love	

ABSENTEES

Jose Arguellez	Tabitha Harris	Sara Siefert
Jill Biss	Cindy Lambert	Teena Turner
Jill Carr (Proxy: Jesus Vesga)	Greg Majewski	Melody Waggoner
Chris Ellenberger	Megan Maxwell-Ranjbar	Sylvia Wiley
Eric Farmer (Proxy: Malinda Boehler)	Gene Sibray	

ISDH STAFF

Brandi Appleget	Sara Bradley	Shawn Carney
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The meeting began at 12:40 PM. Meeting was held at the Indiana State Department of Health in Rice Auditorium. Introductions were made, proxies were announced (Malinda Boehler for Eric Farmer and Jesus Vesga for Jill Carr), and the council participated in a team building activity. Quorum was not established.

Minutes

- The council was unable to review the August meeting minutes due to lack of quorum.

Membership Changes

- Brandi announced two resignations from the council – Daniel Dick and Melanie Smith-Sanders recently resigned from the council.
- Brandi introduced three new member to the council:
 - Gabriel Anderson – Affected Communities, IDU
 - Phaedra Greer – Care Coordination Region 1
 - Lesi Nelson – Care Coordination Region 12
- Brandi recounted the council's current vacant seats: Care Coordination Regions 2, 4, 8, and 9; Geographic Area Regions 1 and 6; Affected Communities Non-White; Consumer Representative in all Regions except Regions 2, 7, and 11; Federal Grantees for Part C and two others; Service Provider for Mental Health; and Community Based Organization from outside Indianapolis
- Brandi announced that the council will begin taking nominations for 2013 leadership at the beginning of November. Nominations will be made via email.

Interesting Statistics

- Brandi presented today's interesting statistics:
 - The Continuum of HIV Care in the United States, as published in MMWR and presented at the International AIDS Conference, reveals that of PLWH who are aware of their status, only 51% are retained in care. Of all PLWH, only 28% have a suppressed viral load
 - Using MMP and other surveillance data, a similar continuum of care was developed for Indiana. These data show that of PLWH who are aware of their status, 66% are retained in care. Of all PLWH in Indiana, 41% have a suppressed viral load
 - Overall, the data implies that Indiana is performing better than the United States average in linkage to care, retention in care, and viral load suppression.

ISDH Updates

- Shawn reported that the Part B mid-year progress report is complete.

- The Division received the grant guidance for 2013 and will be working on the grant between now and the end of the year.
- Shawn presented data from the updated unmet need estimate:
 - In 2003, approximately 63% were not in care (4726 of 7495). In 2011, this figure fell to 33% (3282 of 9927). In 2012, the Division documented a slight fall with approximately 32% not in care (3286 of 10,325). These data are on par with MCPHD's figures.
 - The unmet need report also documented community viral load among key categories. In 2011, the community viral load average was 9000. In 2012, community viral load averages ranked as follows:
 - Care Coordination plus Medical Services Program enrollment – 16,817
 - Care Coordination enrollees – 24,933
 - Prevalence population – 44,687
 - Unmet need population – 53,178
 - Medicaid enrollees – 53,419
 - Care Coordination without Medical Services Program enrollment – 63,410
 - Reminders will be sent to Care Coordinators in the coming months regarding focusing efforts on everyone, not just Medical Services Program clients in hopes of combating the high viral loads of Care Coordination clients without such coverage.
 - The report also ranked the best adherence to viral load testing among these categories. Results are as follows:
 - Care Coordination enrollees – 87%
 - Care Coordination without Medical Services Program enrollment – 79%
 - Care Coordination plus Medical Services Program enrollment – 77%
 - Medicaid enrollees – 60%
 - Prevalence population – 41%
 - Unmet need population – 13%
 - The final copy of the unmet need report will be emailed to the council.
- Shawn inquired if members had been experiencing issues with Gilead's patient assistance programs as the Division has received word that some clients have been receiving letters stating that they will only receive medication coverage for three months. Several Care Coordinators reported experiencing this issue. The council discussed the importance of not indicating on the PAP application that the client is awaiting approval for ADAP as this may be the cause of this issue. Malinda offered to include this information in the MATEC newsletter for providers outside of Care Coordination sites that may be completing the PAP applications.

International AIDS Conference Presentation

- Brandi presented resources and findings from the International AIDS Conference. Please see the attached PowerPoint presentation.

Committee Work – Planning Committee

- Brandi provided the committee with the 2013 conference call schedule.
- Brandi presented information regarding the updated Indiana Oral Health Plan. In the past, a statement regarding HIV was included in the plan to highlight the importance of oral health for PLWH. This year's draft does not include such language. The committee agreed to make a recommendation that such language be included in the latest version of the plan. The committee also agreed to recommend to the oral health program that an individual be identified as a technical advisor for the council, that the program work with MATEC to provide bi-annual training to oral health providers regarding HIV, and that the program work with Care Coordinators to provide oral health education. Malinda agreed to draft a letter to the oral health program. Brandi will then disseminate the draft to the committee for feedback before it is sent to the program.
- Malinda presented a draft of the transportation project report as drafted by Malinda and Eric. The report follows a template used for a similar report in Tennessee. The committee discussed the lack of public transportation in rural areas, challenges of private transportation and the inconsistency of its funding from year to year, length of commutes, parking costs, and walking distance as major concerns that should be expanded or clarified in the report. Malinda agreed to make the necessary revisions. Brandi will send the report to the committee for additional feedback. Eric will present the report to the whole council at the December meeting.
- Shawn informed the committee that the Medical Services Program has been out of compliance with HRSA for some time regarding its recertification structure. HRSA is requiring two recertifications per year. The full-year recertification will remain the same with the addition of tax documentation for proof of income. The mid-year recertification will be pre-populated based on the client's most recent information. No documentation will be required unless changes are documented. Mid-year recertifications will be completed between December and May. The announcement period for recertifications will now begin at 60 days

instead of the previous 90 days. The committee discussed possible barriers for clients in light of this new process, especially among "hard to find" clients or maintenance clients who are used to only meeting with their Care Coordinators once per year. The committee also discussed the error of some clients receiving overlapping full- and mid-year recertification reminder letters; this error should not reoccur.

Committee Work – Evaluation Committee

- Shawn presented the updated Clinical Quality Management (CQM) report of the committee. The committee reviewed the data, including that for the new measures for flu and pneumonia vaccinations. The committee agreed that the measure for good-moderate-poor health bands for viral load results be re-run. The committee also agreed not to repeat the flu and pneumonia vaccination measures as the available data is incomplete and therefore did not yield useful results. The committee also discussed the recommendation that clients be asked at intake if they have ever received a pneumonia vaccine.
- Brandi discussed plans for the Statewide Needs Assessment with the committee. The Division will be working with Dr. Carrie Foote with IUPUI Sociology to complete the assessment. The Division will utilize the same tool as the last assessment in 2009 with only minor corrections. The assessment will be mailed to the clients using the mailing lists from the database. Copies will also be available at the Care Coordination sites for clients who do not receive mail. The committee suggested working with program managers to ensure that client addresses are up to date and Care Coordinators are promoting the assessment with their clients.

Committee Updates

- The committee co-chairs provided updates for their respective committees.

Planning Committee – Malinda Boehler (Proxy for Eric Farmer)

- The Planning Committee will be making recommendations to the ISDH oral health program to include a statement regarding HIV in its Indiana Oral Health Plan, as well as other ways to be more involved with training and education regarding HIV and oral health.
- The Planning Committee drafted a transportation report for its committee pick project. Eric will be presenting the report at the December meeting.

Evaluation Committee – Jessica Adams

- The Evaluation Committee discussed the CQM, including possible errors and anything needing removed on next year's report. The new measures for flu and pneumonia vaccines did not yield helpful results as the available date for these measures is incomplete. These measures will not be repeated next year.
- The Evaluation Committee discussed plans for the Statement Needs Assessment.

Public Comments and Announcements

- Malinda inquired about Quality Matters newsletter article ideas. Malinda will work with Shawn to produce future articles.

The meeting was adjourned at 3:48 PM.

Minutes approved 12 December 2012